



The Royal College of Pathologists

Pathology: the science behind the cure

The Royal College of Pathologists' Priorities for Northern Ireland – 2022 elections

March 2022

In May the people of Northern Ireland will elect their representatives to the Northern Ireland Assembly. A new government will take responsibility for a range of devolved areas, including health services.

The Royal College of Pathologists (RCPATH) hosts Regional Councils, comprising specialty members, for the devolved nations. These Regional Councils provide professional leadership in their country and contribute at a national and UK level to the maintenance and development of pathology services and the quality of care that patients receive.

Pathologists are doctors and scientists who are experts in illness and disease. They use their expertise to support every aspect of healthcare from interpreting laboratory results to examining tissue and fluid for making diagnoses, to guiding treatment. They use cutting-edge genetic technologies to treat patients with life-threatening conditions. They play a critical role in education and research and devise new treatments to fight infections and diseases like cancer and diabetes.

Pathologists are essential to diagnosis and treatment to improve patient care. The work of pathologists supports patients throughout their entire life. Without pathologists we cannot understand what is making a patient unwell. In this priorities document we look at the key challenges facing pathologists and call on the new government to address these areas.

Investing in workforce for patients

- We are aware that the Department of Health for Northern Ireland is proceeding with a portfolio of pathology service transformation to ensure that the HSC has the capacity to address the challenges faced and fully embrace future development opportunities to support even better diagnostic outcomes for patients in the years ahead. And that this pathology transformation portfolio is a key part of the agenda to deliver the world class health and social care service aspired to in '[Health and Wellbeing 2026: Delivering Together](#)'. It is evident that there is a vision for the delivery of modern, sustainable, world-class Pathology services and suitable investment in the pathology workforce must be a key objective for this so that significant patient benefits can be achieved.
- The [New Decade, New Approach agreement](#) in 2020 committed a restored Executive to the reconfiguration of hospital provision "to deliver better patient outcomes, more stable services and sustainable staffing". As pathology underpins the vast majority of patient pathways through primary and secondary care, transformation of HSC Pathology services is considered to be a key enabler for the delivery of this commitment.
- The recently published [Elective Care Framework – Restart, Recovery and Redesign](#) sets out the Department's five year plan to reduce the backlog of patients currently waiting for assessment and treatment in the HSC and how the Department proposes to invest and transform services to meet population demands in the future. The Framework includes actions to support the Pathology Network in ensuring that HSC Pathology Services are equipped to support delivery across all relevant programmes, in line with the modernisation and transformation of HSC Pathology Services. This will require significant investment in pathology services.
- Safe and effective high-quality patient care relies on the right number of skilled health staff in the right places. Northern Ireland, along with other the other nations across the UK, has an excellent reputation for producing highly qualified Healthcare Scientist and Medical staff, based in hospital laboratories, who become leaders regionally and nationally in research, service development, clinical liaison, clinical care pathway development and improvement, policy development, quality improvement and patient safety initiatives. Such staff have been heavily involved with the mobility of pandemic response by leading rapid advances in COVID-19 diagnostics and responding to the demand for the increasing importance of pathogen sequencing and virus surveillance.
- Following disruption caused by COVID-19, the College has serious concerns over preparations to deal with the backlog of non-COVID-19-related illness, especially cancer care, and the related surge of demand for pathology services, particularly for cancer diagnosis and treatment. The recently published [NHS Elective Care Recovery Plan](#) (Feb 2022) highlights new service transformations that should be implemented to increase capacity to diagnose disease more efficiently, with faster treatment and improved access for patients. The pathology workforce is a crucial factor in the successful delivery of this plan. It is vital that investment is targeted at pathology services to alleviate workforce pressure and meet increased demand.



- The [RCPATH haematology briefing – Feb 2020](#) found that haematologists are finding it increasingly difficult to undertake vital diagnostic work in the laboratory. Haematologists have a crucial role in diagnosing and caring for patients with conditions and diseases such as leukaemia, and genetic conditions such as sickle cell disease, thalassaemia and haemophilia, straddling the laboratory and the clinic.
- The COVID-19 crisis has highlighted pre-existing problems facing rural areas in Northern Ireland. Our members tell us that this means patients wait longer for a diagnosis in these areas. It can be hard to recruit and retain doctors and nurses who are willing to work in smaller hospitals, which means health boards rely more heavily on agency staff to fill gaps in rotas. This has a knock-on effect on patient care, with patients travelling long distances.

The College's calls for the next government:

- The College calls for increased investment in pathology services, particularly in the recruitment and training of pathologists and scientists. More funded training places are needed to help meet the rising demand for cancer diagnosis, which has been exacerbated by the COVID-19 pandemic. Specialist laboratories in larger centres need further investment in specialist equipment with improved sample transport into these specialist labs.
- HSC pathology services need appropriately trained scientist and medical staff who become pathology leaders and who can provide guidance on how to transform pathology services to improve long-term resilience. Unfortunately, Pathology staffing numbers have not risen in line with demand and some pathology services are unable to recruit to vacant posts. The recruitment, training and retention of such staff must be a priority.
- Parity of pay – in 2018 we launched our [histopathology workforce report](#),¹ calling for a pay premium to be introduced for new histopathology trainees. The premium has been implemented in England. We are calling for the recruitment and retention premium to be extended to specialist histopathology trainees in Northern Ireland.

The pay discrepancy is undermining the retention of key staff, who move to other areas, having gained experience in Northern Ireland. Trainees tend to take up consultant posts in the region in which they train, so this is highly detrimental in the long term as well as the short term. This issue needs to be urgently addressed.

- The roll-out of digital pathology would benefit patients in rural areas in Northern Ireland by enabling the rapid referral of cases between organisations or across pathology networks, enhancing access to expert advice and opinion on diagnoses.

IT and infrastructure for better patient care

- Pathologists need IT for day-to-day work, including modern, functional laboratory information management systems (LIMS), voice-recognition support, electronic patient records and remote-working software for multidisciplinary teams. We applaud the current initiative to replace the ageing Laboratory Information Management System, but the supporting IT hardware in both laboratories and clinical settings remains under-powered and slow.



- The new LIMS project requires a fully integrated pathology OrderComms for primary and secondary care to increase patient safety and to realise the efficiency benefits of both LIMS and the new regional automated laboratory management service contract. Unfortunately, this was not included in the current LIMS scope but instead in the regional Encompass project, where there are current issues with full delivery. It is essential that there is adequate investment in pathology IT to allow successful implementation of this fully integrated service for pathology test requesting.
- Digital pathology – the collection, management, sharing and interpretation of pathology information in a digital environment – will improve patient care and support the pathology workforce by making the diagnosis and monitoring of disease much more efficient. It will bring faster and easier access to expert opinion and advice, with the rapid referral of cases between pathology networks or between organisations.

The College's call for the next government:

- Further capital investment is needed to fully roll out digital pathology so staff can work more efficiently and flexibly. The move to digital pathology needs to be completed and followed through with the right infrastructure. There needs to be a capital investment in improving the IT resource nationally and on individual clinicians' desks.

Staff Wellbeing

- A well workforce working in a caring and supportive environment is a more efficient, cohesive, safer workforce and is better able to serve the needs of patients.
- The impact of the pandemic has been hard on laboratory staff, given the huge effort to deliver rapid implementation of COVID-19 related testing. Many have not taken annual leave; many have been redeployed to frontline care and many others will have also had to deal with family pressures of the pandemic like everyone else.
- Trainees, in particular, have suffered – reduced training opportunities, redeployment and professional exam disruption.

The College's calls for the next government:

- Ensure a maintained focus on the day-to-day and longer-term wellbeing of all staff.
- Commit at every level to building a new culture to help build sustainability and resilience. This will prioritise the physical and psychological safety of staff as core values within the NHS to build loyalty, productivity and retention.
- Provide additional support to trainees to ensure they can re-start their training and provide a much-needed complement to the future consultant workforce.
- Support the older workforce to enable an ongoing contribution to the NHS in the later stages of their career – such individuals will be a vital resource in the coming years.



Learning from the pandemic

- Workforce pressures are being compounded by the pandemic. There have been reductions in patients seeking help for general symptoms, including a huge decline in referrals from primary care and substantial delays in diagnosis due to interruption of some services. A recent UK study predicted that for four common types of cancer (breast, bowel, lung and oesophageal cancers), delays in diagnosis due to the COVID-19 pandemic will result in approximately 3,500 avoidable cancer deaths, equating to 60,000 years of life lost, reflecting the younger age profile of many cancer patients.²
- Many district general hospitals have been unable to fill microbiology posts over recent years, and workforce pressures are keenly felt. This is important as these members work on infection control and diagnostic testing, including for COVID-19. Throughout the COVID-19 pandemic our microbiology, virology and infection control team members have continued to support patients, the public and College members. This will not be the last pandemic – capacity will always be needed for major incidents and disease outbreaks.
- The COVID-19 pandemic has revealed the vital importance of managing infection, which has often been overlooked when compared to cancer and cardiovascular disease. It is also critical to have good stewardship of antibiotics, and clear leadership on vaccination and disease prevention. The College is ideally placed to contribute to this, as shown in the last year.
- Health screening programmes are vital to finding out if people are at higher risk of a health problem, so that early treatment can be offered or information given to help them make informed decisions.

The College's call for the next government:

- The College calls for a minister in Stormont to be given specific responsibility for infection, antimicrobial resistance and stewardship and for prevention of infectious disease.
- Equal access to screening must be prioritised. Our members tell us that there is a need to reduce inequalities, especially in lower socio-economic status groups or high-risk groups, e.g., homeless women. There are transport issues, issues of poverty and larger older populations face particular problems in rural areas. Communication should be in easy-to-understand language with simple explanations of what is involved. This would help demystify the procedures.

References

1. The Royal College of Pathologists. *Meeting pathology demand: Histopathology workforce census*. 2018. Available at: <https://www.rcpath.org/discover-pathology/news/college-report-finds-severe-staff-shortages-across-services-vital-to-cancer-diagnosis.html>
2. Maringe C, Spicer J, Morris M, Purushotham A, Nolte E, Sullivan R *et al*. The impact of the COVID-19 pandemic on cancer deaths due to delays in diagnosis in England, UK: a national, population-based, modelling study. *The Lancet Oncology*. 2020;21(8):1023–1034.



Contact details

This document was authored by Dr Gareth McKeeman, Chair of the Northern Ireland Regional Council and Janine Aldridge, Public Affairs Officer.

E: janine.aldrige@rcpath.org

T: 020 7451 6769

About the Royal College of Pathologists

The Royal College of Pathologists is a professional membership organisation with more than 11,000 fellows, affiliates and trainees. We are committed to setting and maintaining professional standards and promoting excellence in the teaching and practice of pathology for the benefit of patients.

Our members include medically and veterinary qualified pathologists and clinical scientists in 17 different specialties, including cellular pathology, haematology, clinical biochemistry, medical microbiology and veterinary pathology.

The College works with pathologists at every stage of their career. We set curricula, organise training and run exams, publish clinical guidelines and best practice recommendations, and provide continuing professional development. We engage a wide range of stakeholders to improve awareness and understanding of pathology and the vital role it plays in everybody's healthcare. Working with members, we run programmes to inspire the next generation to study science and join the profession.

