



The Royal College of Pathologists

Pathology: the science behind the cure

## **Investing in Specialised Services**

**The Royal College of Pathologists' written submission**

**27 April 2015**

For more information please contact:  
Rachael Liebmann  
Registrar

The Royal College of Pathologists  
2 Carlton House Terrace  
London SW1Y 5AF

Phone: 020 7451 6700  
Email: [registrar@rcpath.org](mailto:registrar@rcpath.org)  
Website: [www.rcpath.org](http://www.rcpath.org)

## **Summary of The Royal College of Pathologists' written submission**

- The RCPATH welcomes the opportunity to contribute to this topic. Pathology underpins clinical services in all areas of medicine, and those which support rare diseases are no less specialised than the clinical areas they serve. As such the RCPATH looks forward to being able to make a full contribution to the commissioning process in England and shares below some of the learning from these processes in the devolved administrations.

### **1 About The Royal College of Pathologists**

**1.1** The Royal College of Pathologists (RCPATH) is a professional membership organisation with charitable status. It is committed to setting and maintaining professional standards and to promoting excellence in the teaching and practice of pathology. Pathology is the science at the heart of modern medicine and is involved in 70 per cent of all diagnoses made within the National Health Service. The College aims to advance the science and practice of pathology, to provide public education, to promote research in pathology and to disseminate the results. We have over 10,000 members across 19 specialties working in hospital laboratories, universities and industry worldwide to diagnose, treat and prevent illness.

**1.2** The Royal College of Pathologists makes specific comments on the NHS Investing in Specialised Services. These comments were drafted by Dr Lance Sandle, RCPATH Vice-President for Professionalism, Dr Rachael Liebmann, RCPATH Registrar and Dr Bernie Croal, Chair of the Specialty Advisory Committee on Clinical Biochemistry and Scottish Regional Council.

### **2 Feedback on the Specialised Commissioning arrangements in the devolved administrations, particularly Scotland**

**2.1** Fellows of the Royal College of Pathologists have had considerable experience of this type of commissioning in devolved administrations, in particular Scotland, where the NSD (National Services Division) has operated for more than a decade to fund specialist services on a national basis (i.e. top sliced from the 14 Scottish health boards on a population basis) and also fund national clinical networks. The Royal College of Pathologists would make a few comments on the English proposals based on this experience

**2.2** Overall the system works well as it stops duplication in each location. This is relatively straightforward in Scotland due to the funding model. It is not clear how the funding mechanism will work in England.

- 2.3** The system in Scotland is accompanied by a great deal of bureaucracy and the NSD is a large organisation, expensive in itself.
- 2.4** College Fellows have experience of participation on the NSAG (National Services Advisory Group) which gave guidance to NSD on what should and should not be funded. Inevitably there were lots of bids for funding and not enough money. Also, this committee had to decide when to withdraw funding, and wind up services or networks. These decisions became more common as NHS funding became much more scarce 5 years ago.
- 2.5** The professional oversight of the NSAG is important especially when pathology is involved. NSD also had a number of skilled researchers who collated the best practice evidence base, as well as a strong Health services group. The learning from this was that it is important to have a very comprehensive, fair, open and transparent application process that allows competing bids to be assessed on feasibility, value for money and clinical need.
- 2.6** The best example of the Scottish system working in practice is the NSD funding of the Genetics and Molecular Pathology consortium in Scotland. All Genetics and Molecular Pathology was funded by this top slice mechanism which ensured that work was spread around the four main cities/centres and so that duplication of effort in minimised and investment is at an appropriate scale for value for money.

### **3 The requirement for specialist pathology professional input to the investment and commissioning processes for specialised services**

- 3.1** The NHS England consultation mentions service specific clinical reference groups pulling evidence together and then the clinical priorities advisory group helping decide what should be funded (and what should not). Almost all of these special conditions have pathology elements in diagnosis, patient stratification, follow up and assessment of treatment effectiveness and monitoring. Therefore since almost every bid for specialist services usually involves pathology to greater or lesser extent the Royal College of Pathologists would be keen to be involved at every level and to help provide appropriate specialist professional input.

### **4 Research into specialised services and rare conditions**

- 4.1** Patients suffering from rare diseases are further disadvantaged by the lack of evidence base information regarding diagnosis and management of their diseases. It is essential to encourage research in these topics aimed at accelerating new treatments that can be used to stratify patient risk and provide targets for future effective drug therapy that is specific for each disease. This can offer unprecedented scientific opportunities as bottlenecks in the drug development pipeline are identified and overcome. Academic pathology is clearly an important part of research into specialist services.