

## **IBMS response to “Demonstrating Personal Proficiency in Pathology” a discussion document from The Royal College of Pathologists (RCPATH) and the Association for Clinical Biochemistry and Laboratory Medicine (ACB)**

The Institute welcomes the opportunity to comment on the jointly produced RCPATH/ACB document. The documents represent the first step in taking forward this key agenda and as such are seen by the Institute as constructive whilst recognising further development is required. The developments and the Institute’s linkages to both the NHS England Oversight Group and to RCPATH/ACB are vitally important and the Institute is committed to partnership working in taking this work forward. However, we believe that there are greater benefits to be achieved for patients, staff and indeed pathology as a whole if developing policy documents are co-produced on a tripartite basis with the Institute as an equal partner given the contribution that Institute members will make to the delivery of such schemes.

The Institute’s view is that this is a helpful discussion document and recognises the excellent early work done by RCPATH and ACB in this complex area. Further, the Institute believes that the target audience should be all pathology staff carrying out interpretive work in pathology. The document emphasises many areas that cut across professions including individual appraisal systems. It would reinforce the inclusive and multi-professional approach to EQA to incorporate the biomedical scientist element into the document and the Institute would be willing to do this to ensure the coordinated adoption across all key pathology staff.

### **Governance structure and arrangements**

The Institute acknowledges the need for a lead body and supports the College in fulfilling this role. We feel it would be inappropriate, as proposed in the paper, for the Institute to develop an independent structure to ensure the quality of Institute members who participate in interpretive schemes. This could lead to different standards being applied to pathology professionals participating in similar or identical schemes.

The Quality Assurance Management Group for EQA schemes and Personal Proficiency must be, and be seen to be, independent, a model of good governance and representative of the three professional groups within pathology i.e. not dominated by a single professional body. The committee structure must reflect the respective roles of the professional bodies involved in EQA schemes. The Institute should, therefore, have a seat on the management group.

Inclusion will be key to the programme’s success and this may result in an extended committee membership at the outset. Therefore, consideration should be given to the formation of a steering group drawn from the three main professional bodies to assess and approve the output and recommendations to the oversight group before submission.

The Quality Assurance Management Group should ensure that all of the EQA schemes, private or NHS, comply with the criteria and are approved by UKNEQAS. Laboratories providing NHS services should only take part in schemes which are approved and meet the

published standards i.e. laboratories should not be able to choose a scheme that is perceived to be less exacting or demanding.

A significant number of Institute members participate in interpretive EQA schemes. Personal Proficiency Assessment (PPA) is an issue for members of all three professional bodies (RCPath, ACB and the Institute) and we believe that all three should be represented on the appropriate subcommittees. The final structure must have oversight for all pathology professionals participating in interpretive schemes. The PQAR oversight group statement suggests the formation of a new group hosted by RCPath, but jointly directed with the relevant professional bodies, which must include the IBMS.

Given the importance of ensuring consistency across all laboratories and staff carrying out interpretive EQA we believe that the Personal Proficiency Assessment sub-committee should be a joint group including IBMS representation. In this way cross-pathology assessment can be delivered in a consistent fashion for all pathology staff who require to evidence personal proficiency.

We feel that this discussion document, or its successor, needs to provide clarity on how this structure will ensure that laboratories/individuals that are identified as consistently poor performers will be addressed. This would also define the relationship with the respective discipline specific NQAAPs.

We feel that just as regulation is a UK-wide standard, the greatest benefits will be achieved in respect of quality assurance if the scheme is adopted across all four home nations.

### **Evidencing personal proficiency**

The recognition of the range of roles and responsibilities for clinicians and scientists working in pathology extends to biomedical as well as clinical scientists. The pragmatic approach taken that proposes that evidence of competence should not be totally prescriptive but rather should relate to an individual's role is welcomed. The examples of evidence, which include but are not exclusively interpretation, could apply also to a number of the senior biomedical scientist roles.

Institute members have a wealth of knowledge and experience of all aspects of quality management including training and monitoring scientific services and workforce to meet CPA/UKAS standards. This resource should be recognised and utilised in the development of personal proficiency schemes.

Cytology screeners present a distinct issue as they are not registered with HCPC but do participate in PPA. A Holistic approach to PPA in pathology should include this staff group.

### **Technical EQA**

The Institute has a key role to play in the development of criteria for technical EQA schemes to ensure a consistent and standardised approach to measurement across all schemes. There is currently wide variation between EQA scheme membership and approach

to assessment. Institute members have intimate knowledge of EQA schemes across all laboratory disciplines which would support the delivery of the proposed programme.

It will be necessary for all the professional bodies involved to understand the funding streams supporting the establishment and operation of these key structures and the timescales for delivery. There are significant resource Implications.

We would be happy to discuss any of the proposals contained in this submission prior to the publication of the final document. Please contact the office of the Chief Executive ([jillrodney@ibms.org](mailto:jillrodney@ibms.org)) should you wish to do this.