



25 July 2016

To: Chief Executive and Chairman, NHS Improvement

Dear Mr Mackey and Mr Smith

2016/17 Financial Position

I am writing to you in my capacity as President of the Institute of Biomedical Science, which is the professional body for biomedical scientists, many of whom work in NHS pathology laboratories, in response to your recent joint letter regarding the 2016/17 Financial Position.

We fully recognise that we are operating in a highly challenging environment in which difficult and often unpalatable decisions have to be made and targets delivered. However, the Institute is very disappointed to read that pathology has been termed a 'back office service', a view that we feel is outdated and does not reflect the key role that pathology has in modern diagnostics, chronic disease management and the underpinning of a seven day health service. Pathology services, and those leading and delivering them, have the potential to positively impact healthcare efficiency and patient care.

Pathology is a clinically integrated, specialist, analytical and diagnostic service that, to quote the Carter Report from 2008) , "..... is a core component in 70 per cent of clinical interventions (diagnosis, choice of treatment, efficacy of treatment); so, in improving service quality, it is important to evaluate the integration of pathology within the overall care pathway". My key message is this: pathology is a poorly understood and often 'invisible' service. It has the potential, if used properly, to deliver real saving and benefits *downstream and it underpins the delivery of the molecular pathology/genomics agenda*. To only identify pathology as a cost centre to be managed in a manner so as to deliver direct cost savings is to take a very short sighted view of the wider picture of efficiency.

Pathology not only supports a range of cancer screening programmes, but also the anticoagulation and thromboprophylaxis services and is crucial for infection control and antibiotic stewardship. By classing pathology in the seemingly dismissive catch-all term of 'back office' is to ignore the crucial role of pathology in healthcare. From here it is easy to extrapolate the argument that pathology services can be rationalised, centralised or down-sized with little negative impact on patient care.

Hospitals and trusts have investigated potential networked services and consolidations and significant savings have already been made through these arrangements. The Institute recognises that consolidation of expertise can bring both financial and diagnostic benefits and that in some areas change has been too slow. However, we would caution against the plan of driving pathology departments to consolidate in the absence of tangible evidence of benefits to patients or cost saving. Current evidence suggests that a number of organisations involved in earlier consolidations

are withdrawing due to large budget deficits and that to pursue the wholesale adoption of this agenda could appear to be reactionary without the evidence base to support it.

The Institute is of the opinion that asking Trusts to consolidate pathology services, irrespective of local arrangements or patient needs, is unlikely to save money and potentially could cost more in the long term. In terms of service continuity, the uncertainty of service provision and location is having a negative impact of staff recruitment and retention that will further challenge the progress towards a 24 hour 7 day a week health service. The four week time scale for the production of outline plans for consolidation is unrealistic and is likely to lead to further unachievable objectives based on oversimplified assessments of pathology services and poorly informed short term decision making as Trusts rush to put these plans into place. A duty of care is a far reaching duty that covers not just our patients, but also the staff and the financial stability of the services provided.

I am asking you to reconsider this approach. The Institute would be happy to work with NHSI to identify those models that are desirable and achievable and to assist in the development of alternative solutions that would achieve the same goals and deliver acceptable outcomes for all parties.

It is my hope that you will recognise the seriousness with which I take this step and consider my offer of a working partnership for the reform of pathology services.

Yours sincerely

A handwritten signature in black ink, consisting of a series of loops and a long horizontal stroke at the end.

Ian Sturdgess
President, Institute of Biomedical Science