Pathology Services – Clinical Service Review

Prof Archie J Malcolm
Sheila Fryer, Business Manager
What we have Done

• Since June last year:
  - Secured Community Pathology workload in SaTH
    • Established joint Pathology Board with CCGs
  - Moved Gynae Cytology to UHNS
  - Moved Non Gynae-Cytology from PRH to RSH
  - Moved Microbiology from PRH to RSH
    • partnership with Blood Bikes
  - Implemented new skill mix in all laboratories
  
• Cost improvement and savings plan
Markers of Quality

• CPA surveillance inspections in:
  - Blood Sciences – November 2013
  - Microbiology - February 2014
  - Cellular Pathology – April 2014

• MHRA (Medicines and Healthcare Regulatory Agency)

• HTA (Human Tissue Authority) – March 2014

• EQA (Internal & External Quality Assurance)
Challenges

- **Microbiology**
  - Lack of automation

- **Cellular Pathology**
  - Loss of technical skills in cytology
  - Building a new team

- **Blood Sciences out of hours cover**
Challenges

• Emerging issues outside of reconfiguration:

  - On site 24/7 Blood Sciences at RSH and PRH

  - Consultation on Trust-wide On-Call policy, immediately following skill mix review.

  - Histopathologist capacity – central role of Cellular Pathology in the cancer pathway
Future for SaTH Pathology

- Maintain High quality, Responsive service
  - Further consolidation - Blood Sciences
  - Automation refresh – £1.2m procurement project
  - Retain provision of Community Pathology
  - Automation in Microbiology
  - Role of Cellular Pathology in improving SaTH performance in cancer standards
Future Fit – Pathology Support

• Single ED with Blood Sciences on site

• Urgent Care Centres:
  - Good non-patient transport to main laboratory
  - Development of POCT strategy:
    - IT links to ensure single patient record

• Centralised Microbiology and Cellular Pathology services, anywhere