



Pathology Service update Dec 2023

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Pathology Service Update

To help keep colleagues across the service informed about some the latest developments, please find below a small newsletter featuring Colleague Briefings, digital pathology and more.

Clinical Model Workshop

Key Stakeholders will be coming together again on Tuesday 5th December to discuss the next steps of a clinical model towards new pathology infrastructure.

Colleagues should have received invites for this. Please contact <u>NWPathology@changeology.group</u> with any questions or queries you may have.

Microbiology Engagement



Some colleagues will be aware that we have asked Changeology.Group to engage with our Microbiology colleagues across clinical, operational, and technical roles in relation to the ongoing Clinical Model work.

A virtual workshop took place on Thursday 16th November with more work yet to be done.

If you have been approached by Changeology.Group for a 1:1, please do use this opportunity to provide your views. Alternatively, if you are in a position where you cannot engage with the process, please do let them know.

Microbiology colleagues can contact: <u>NWPathology@changeology.group</u> with any questions or queries they may have.

Cause of Death Season 2



As some of you may be aware, Channel 5's Cause of Death season 2 returned to our television screens in November featuring the work of colleagues across Lancashire Teaching Hospitals and East Lancashire Hospitals including those in Pathology Services.

The six-episode series began on Wednesday 8th November and will run until Wednesday 13th December 2023.

The first series, which was long-listed in the National Television Awards for Best Factual, attracted a consolidated average audience of 1.6m per episode and helped to showcase a number of coronial investigations, following NHS colleagues as well as staff at Lancashire Police and the Coroner's Office.

On the back of that success, Channel 5 ordered two more series with the second series consisting of six hour-long episodes and a third series of 10 episodes to air in 2024.

Thanks again to all our colleagues involved in the filming of Cause of Death for their time, understanding and cooperation during the filming process.

While it is a fascinating look behind usually closed doors, we are also aware that some colleagues may find some aspects of the series upsetting. If you are affected by any of the issues raised, please raise this with your line manager and access the appropriate support services available within your Trust.



Lancashire and South Cumbria Pathology Service invests in new Digital Pathology solution



Lancashire and South Cumbria's Pathology Service have benefitted from significant NHSE investment to take forward the service and adopt new technologies.

Each year Pathology laboratories across the country are under increasing pressure to make tissue diagnoses to help support clinicians in managing patient care.

This pressure is largely down to higher incidences of cancer across our communities with the UK ranked 13th globally for the disease with 319.2 people affected per 100,000.

Currently, pathologists diagnose cancer and other diseases by examining glass slides using a microscope. Across Lancashire and South Cumbria, it is predicted that pathologists will examine 242,662 specimens by 2028, using 877,502 glass slides – over a 50% increase since 2019/20.

NHS England's Faster Diagnostic Standards (FDS) mandates that 75% of patients must receive a cancer diagnosis or have cancer ruled out within 28 days of being urgently referred by their GP, being referred because of breast symptoms, or having been picked up through cancer screening.

However, with diagnostic demand increasing against a backdrop of an ageing histopathology workforce, added case complexities and cumbersome workflows, more must be done in this area to ensure this area of pathology keeps up with demand. For example, where consultants require a second opinion, glass slides would need to be transported to alternative laboratories for their counterparts to review the specimen. Not only does this process increase logistics, cost and risk of specimen damage, it ultimately slows down an all-important diagnosis for the patient.

Over the last number of months, the Lancashire and South Cumbria Pathology Service have been working alongside the Lancashire Procurement Cluster to source an innovative digital solution to streamline and futureproof the area's pathology service.

And following a robust procurement exercise the Service is delighted to confirm that Roche Diagnostic's Digital Pathology Service will be rolled out across the system over the next 18 months.

The introduction of a digital solution to this area will not only have significant benefits to the population of Lancashire and South Cumbria but will have huge benefits to the system's wider workforce.

This has been made possible thanks to substantial capital and revenue funding from NHS England and the Lancashire and South Cumbria Integrated Care Board.

Digital images of tissue samples are mounted on glass slides and scanned using ultra high definition and highquality microscopic lenses. These digital images are then stored and can be viewed and annotated by staff on PC display screens.

Image: state state



The digital images are readily available via any networked PC and have the adeptness to share images within a local, regional, national, or international network, to facilitate crucial second/specialist opinion, remote working and out of hours reporting.

There is also scope to create an image bank to develop deep learning and algorithms which will improve and enhance detection rates and times into the future.

In short, the system will improve patient outcomes, improve diagnostic workflow, improve access to and sharing of Histopathologist opinion, improving service quality as well as benefitting workforce and workload improvements.

Meanwhile, for the system, the introduction of digital pathology will also bring financial benefits including reduced reliance on locum pathologists, reduced referral costs to commercial laboratories, transport savings on tissue/slide exchange between sites and a reduction of costs related to the purchase and maintenance of microscopes and camera.

Professor Anthony Rowbottom, Managing Director for Lancashire and South Cumbria Pathology Service, said: "Digital pathology is a step change technology that supports the cancer transformation plans in line with early diagnosis and living with and beyond cancer.

"In an era when Histopathology services are under increasing pressure to produce more work, of greater complexity and quality, in a shorter timeframe, digital pathology systems offer a flexible platform for service improvement and development. "The benefits of digital pathology in improving patient safety, improving workflows, improving workforce factors, and improving service quality can be felt from the patient and pathologist, through to the Trust and wider clinical network in which it operates."

A phased rollout of the system will now be deployed across Blackpool Teaching Hospitals NHS Foundation Trust, East Lancashire Hospitals NHS Trust, Lancashire Teaching Hospitals NHS Foundation Trust and University Hospitals of Morecambe Bay NHS Foundation Trust over a 12 month period.

Talking about their solution, Dr. Ashton Harper, Head of Medical Affairs, Roche Diagnostics UK & Ireland, said: "We are delighted to support the Lancashire and South Cumbria NHS Pathology Service (LSC) in setting up their new digital pathology service across the region. Our digital pathology technologies at LSC include VENTANA DP 200 and VENTANA DP 600 slide scanners, which are being installed at four sites.

"Digital pathology enables the use of advanced artificial intelligence (AI) applications that are helping to achieve improved and personalised care for cancer patients. As well as benefiting patients, innovations in diagnostics, such as digital pathology and AI solutions, will help to reduce workload and release capacity in an already pressured pathology workforce."



Pathology Service Colleague Briefing -August

We are pleased to confirm that the next Pathology Service Colleague Briefing will take place on Friday 2nd February between 1pm – 2pm on Microsoft Teams Live. The session will run in the same format as the previous briefing



which will see updates from the Service's leadership before offering the chance for colleagues to ask questions. You can join the call on the day by scanning the QR Code or clicking <u>here</u>. For those of you unable to attend, the recording will be shared through your Trust's communication channels.



On 22nd September, over 100 pathology colleagues attended the first Pathology Service Colleague Briefing. If you weren't able to join, you can watch this back online <u>here</u>. On the call colleagues were given the opportunity to ask questions and although a number were answered on the call, a transcript is available below including retrospective answers to those not discussed on the call:

Are we expecting to be a mature network by March 2025?

Answered on call (38:02)

How confident are you that this will be successful? Answered on call (39:00)

Hasn't the ICB agreed that the 'central processing facility' will be sited to coincide with the new hospital build for Preston? That was the distinct impression I was given at the Clinical Model meeting a couple of weeks ago.

Answered on call (42:05)

Has a location been agreed for a potential new build facility?

Answered on call (42:05)

How can we build and strengthen our relationships with Universities for innovation and research?

Answered on call (43:03)

A lot of this work is currently on top of our day job! How can we be expected to dedicate enough time to ensuring our business case is robust alongside day-today activity?

Answered on call (46:50)

If the return on investment is 4 to 1, then what are the plans to save £128 million, and over what period? Answered on call (50:10)

Is the award available guaranteed as full amount or may it only be a percentage? Answered on call (51:30)

How is this predicated on LIMS being functional what is the contingency plan if it is not? Answered on call (52:30)

Can we ask how less money than last time can be used for Centralisation? Last time the premises was too small etc and yet we have less. Is a different approach needed?

Answered on call (54:39)

You briefly mentioned that there were some difficulties with the implementation of the new LIMS. This is dramatically understated and most at Blackpool feel that we are in real danger of ending up with a system that is not nearly fit for purpose. Do we actually have a back up plan?

Answered on call (52:30)

Please can we have some investment in additional staff, we are on our knees? The services are run on good will, many staff working extra hours for the love of the job and the workload is only going to increase.

The NHS is under enormous pressure to deliver current services and recover from the impact of the recent COVID-19 pandemic. The hard work and dedication of staff across the network is seen daily, often unrewarded but much appreciate by senior staff and patients. We continue to secure additional funding and seek ways of working smarter especially as we come together as a network.





I have spoken to microbiologists in several networks that have gone through consolidation of services into a hub. They all say that the patients in the non co-located sites are disadvantaged in terms of turnaround times and samples going missing. Are we happy to accept a two-tier service in Lancashire for Preston patients and patients who live elsewhere?

As we develop our services, compliance with national standards and meeting regulatory guidelines will be paramount. Our intention will be to remove variation and provide equity of access for all patients across Lancashire and South Cumbria. The clinical model will be informed by experiences from other networks to help reach our decision and where possible, we will seek experiences from those networks that declared prolonged turnaround times and missing samples. It will be important to understand what mitigations have been put in place to overcome these sources of error.

Will staff be asked to vote on whether we want to continue within this network or would rather be included into a neighbouring network such as Manchester? Is this actually an option for us?

There are no plans or intention for the N3 network, Lancashire, and South Cumbria Pathology Service, to join a neighbouring network. However, it would be good to understand the benefits for those who consider this option should be explored. Please contact the team to discuss.

What are the options for the sites? Will staff be informed of the options and have input?

The site selection will form part of the business case and be based on factors such availability, planning permission and alignment with wider NHSE plans. The outcomes will be shared with staff. One of the 6 points projected as national points for improvement was Estates upgrades, why not do that to the current sites? Why choose to fight for the obviously insufficient amount of money to produce an inadequate building for the lab somewhere else?

Currently, there is no additional funding available for Pathology estate at any of the Trusts. Future bids would have to be considered by Trusts where there will be several competing requests.

Given that most successful moves to an integrated network have dedicated lab/clinical lead in each discipline can we talk about increase over next 5–10 years in technical and clinical leads with FT involvement rather than we try to do this within the general job plan. This will help you with the timeline.

This is an interesting point. We appreciate all the time and commitment colleagues have invested into the multiple projects so far and we know this is additional to your regular activities. There is a workforce strategy survey happening in parallel and this is the perfect place to raise those suggestions. Alternatively, you can contact gill.crankshaw@lthtr.nhs.uk

When will new member of staff be in post 8c?

The role is part of the recruitment process and will be announced as soon as possible.

If you would like to discuss the answers to any of these questions further, please email: <u>NWpathology@changeology.group</u>

