



# Scottish Pathology Network

## Annual Report 2016-2017

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# Executive Summary

2016-17 provided SPAN with significant opportunity to continue to contribute to modernising and improving Pathology Services for NHS Scotland.

SPAN led the way as the first National Managed Diagnostic Network (NMDN) to be reviewed as part of the National Specialist Services Committee (NSSC) commissioning requirements. This provided SPAN and its stakeholders with the opportunity to develop a 3-5 year strategic work plan to ensure the sustainability of effective NHS Scotland Pathology services.

In May 2016, the Network recruited Mrs Jackie Walker, NHS Greater Glasgow & Clyde, into the position of SPAN Scientific Manager. Mrs Walker has been instrumental in bringing together colleagues and stakeholders to progress the way forward for a national Training School for Biomedical Scientist tissue dissection.

SPAN was dynamic and proactive in responding to the emerging challenge of finding a national solution for the delivery of the PD-L1 companion diagnostic test.

In 2016, the IMS took on the SPAN reporting work supported by Dr Lee Jordan who had previously been responsible for this. All of the data that the Boards provided was analysed and compared against the previous submissions in order to produce this year's dataset. In addition to the presentation that was delivered at the SPAN Quality and Performance Event in September, a report was produced for each Board that showed all of their own data against the national picture. There was the option for the Boards to provide their own feedback to this, which was then embedded in the report. A booklet showing the national picture with the outliers for each of the reported data was also published.

Going forward, the Information Management Service (IMS) aims to build on the work that has been produced over the last number of years with the intention of mapping the data against quality indicators.

The Cervical Cytology activity for 2016-17 has focussed on two areas. Firstly, pushing the full business case for High Risk Human Papillomavirus (hrHPV) primary screening through to a final decision and secondly, supporting the laboratories to maintain the service during transition. Mr Allan Wilson, Network Scientific Manager, has continued to provide an interface between SPAN and the Cervical Cytology consortium, ensuring SPAN has an understanding of the workforce and service implications of these key developments.

A Digital Pathology Pilot was initiated, through funding from NHS Scotland's Shared Services Programme. NHS Greater Glasgow and Clyde and NHS Lothian invited SPAN to work in collaboration with them to ensure that the pilot took into account the needs of all Pathology departments in NHS Scotland.

In June 2016, SPAN (in collaboration with the other NMDNs) launched their Twitter account at the Healthcare Science Event. This has provided the Network with a new and immediate mechanism to engage with the Pathology community. SPAN created its own "hashtag" *#pathologycommunity*, which identified the network on social media. At 31 March 2017 SPAN had over 200 Twitter followers; its tweets were viewed a total of 62,700 times.

SPAN accomplished its programme of work under the guidance of the Lead Clinician Dr Lee Jordan, whose tenure ended in December 2016. Dr Jordan has steered and guided the Network during the changes in the commissioning arrangements of the network and through the SPAN NSSC review. Dr Jordan was pivotal in reviewing and revising the SPAN data set, which will be influential in ensuring continuous quality improvement for laboratory services.

In December 2016, the network welcomed Dr Liz Mallon, Consultant Pathologist, NHS Greater Glasgow & Clyde, as the new Lead Clinician. Dr Mallon will continue to drive and contribute to the modernisation and development of Pathology services.



# THE YEAR IN NUMBERS



12

major meetings



232

Twitter followers

We published

2 strategies

2 newsletters

1 national report

10 Board reports

10

Participating Boards

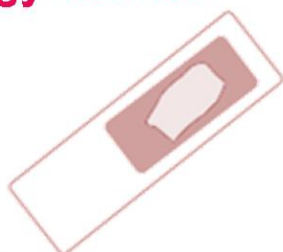


## Snapshot of Scottish Pathology Service



↑ 7.72%

IHC slides



1.47

specimens:requests



↓ 6712

non cervical  
specimens



361,003

Total histopathology  
requests



↑ 1.74%

histopathology  
turnaround times



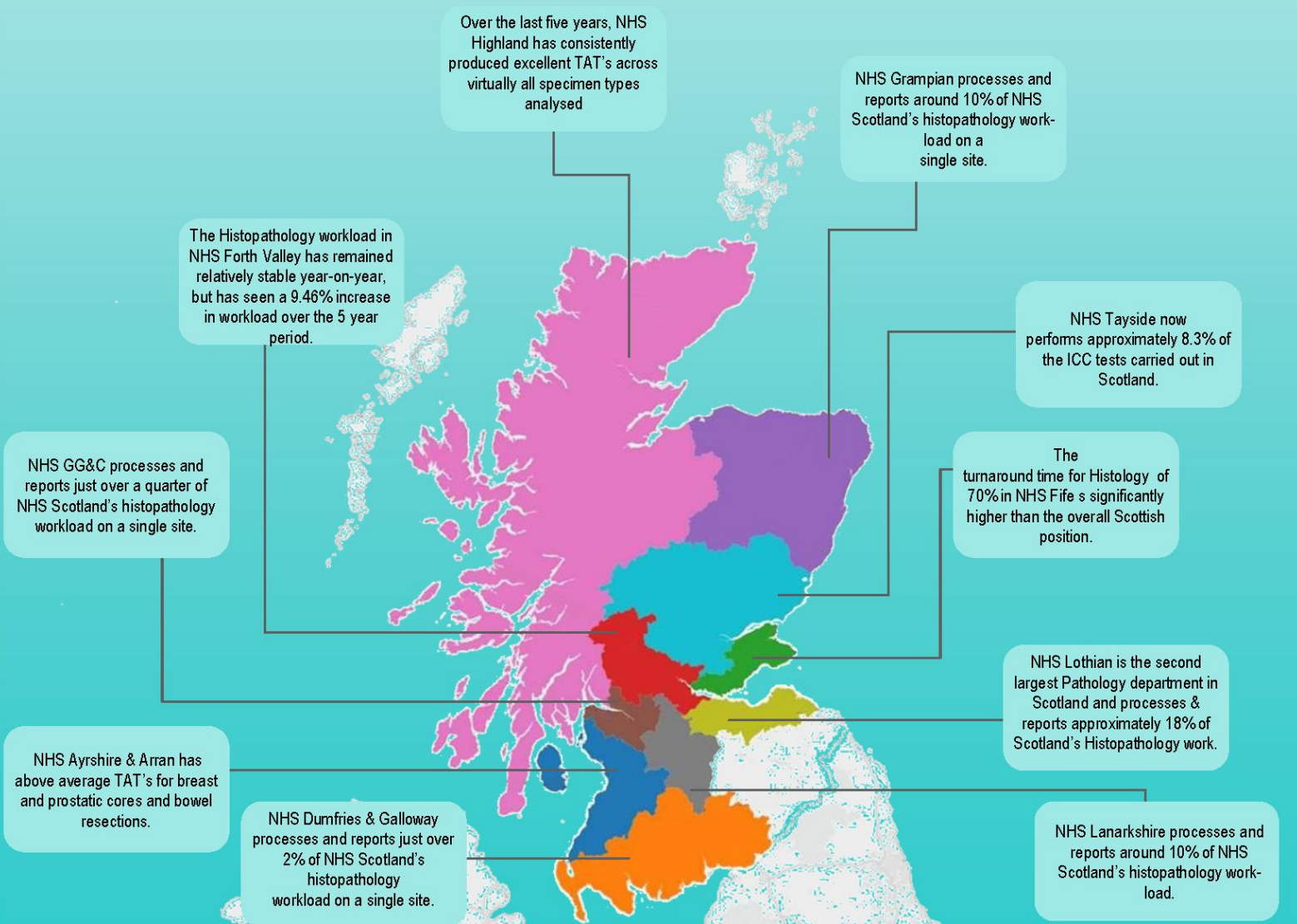
530,895

Total histopathology  
specimens

Notional costs per specimen



Notional costs per request

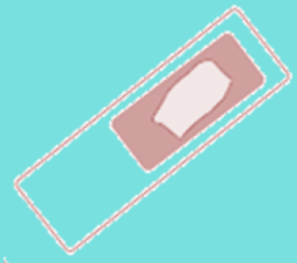




**1,065,716**  
blocks



**4**  
UKAS visits



**1,356,474**  
H&E slides

**4.46%**  
non-medical vacancy  
rate



**907.49**  
notional screening  
specimens per WTE



**628.44**  
notional screening  
requests per WTE



**10.02%**  
medical vacancy rate



**↑9.43%**  
medical



**746.4 WTE**  
Total Scottish staff



**↓3.77%**  
Biomedical Scientists



**↓8.49%**  
admin & clerical



**↑2.67%**  
Healthcare Support  
Workers



**↑30.95%**  
cytoscreeners

# 1. Introduction

Managed Diagnostic Networks are defined as coordinated groups of health professionals that support diagnostic services to continuously improve service delivery, in order to ensure equitable provision of high quality, clinically effective services.

The Scottish Government<sup>1/2</sup> has identified that diagnostics are central to whole systems service redesign of the NHS in Scotland. Diagnostic Networks drive forward a number of key pieces of national strategic work, including:

- Shared Services
- National Delivery Plan for Healthcare Scientists
- National Clinical Strategy

SPAN aims to ensure the provision of an innovative, equitable, patient centred, high quality, and clinically effective Pathology service in Scotland.

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<sup>1</sup> A National Clinical Strategy for Scotland 2016

<sup>2</sup> Realistic Medicine Chief Medical Officer's Annual Report 2014-2015



## 2. SPAN in 2016-2017- Report against Workplan

### 2.1 SPAN National Specialist Services Committee (NSSC) Review

During 2016-17, in line with NHS Scotland's national commissioning policy, SPAN became the first NMDN to undergo an external review. The purpose of this was to inform a decision on continuing central funding; based on the extent to which SPAN was meeting the needs of its stakeholders, including NHS Scotland's vision for diagnostic services.

This provided the Network with the opportunity to refresh and revitalise its workplan.

The review acknowledged that SPAN has added considerable value to services since inception, highlighting the following as successes:

- information sharing between Pathology services
- conduit of essential communications
- contribution to a number of service redesign initiatives
- collection of a sizable data set, providing comparisons on performance and staffing profiles across Scotland and also comparisons with previous years
- tangible engagement and participation from each of the centres, with excellent attendance at meetings and good buy-in throughout.

The review highlighted some areas of concern in the Network's performance, most notably engaging with a range of stakeholders, including at a strategic and operational level, to improve SPAN's ability to effect change. The need for involvement in and ownership of Network activity beyond the core team was also highlighted, with the use of the generic programme management resource and future planning as areas of concern. The full list of recommendations is included in Appendix 4.

The review identified that SPAN should improve its communication and engagement within the Pathology community and with its external stakeholders such as service users. Therefore, in December 2016, SPAN issued its first quarterly newsletter. A communication and engagement strategy was produced, which was endorsed by the SPAN steering group.

SPAN reports against agreed milestones to demonstrate the Network's continued progress (Appendix 5).

### 2.2 Pathology Data

Since its inception, SPAN has collected data regarding annual workload, productivity, staffing and turnaround performance within individual NHS Boards. The comparative data is useful for benchmarking and understanding the Pathology landscape in Scotland. It is used by constituent NHS Boards to inform local business cases and improve services.

The SPAN dataset had been refined by Dr Lee Jordan and the Quality and Performance Short Life Working Group (SLWG). In 2016/17, the IMS took on responsibility for the collation and analysis of SPAN data, thereby improving the support provided to the Network and making more effective use of clinician time within the Network. As a service development the IMS presented data from each NHS Board in an individual performance report that included an overall Scottish comparison.

The Lead Clinician presented the SPAN data to the Network Steering Group and NHS Boards were invited to add their

*I am very impressed with the SPAN Quality and Performance Work Stream booklet.*

*I was able to share the report with my Acute Service Director to share how well the Pathology Laboratory was doing in the current challenging financial climate. The Acute Service Director was really impressed and wanted a copy of report to show the Chief Executive. The booklet has allowed increased flexibility to share information; it is a strong visual representation of a detailed analysis and the booklet format allows senior management to dip in to areas of interest as required.*

NHS Fife

feedback to that provided in the reports by the SPAN Core team. The response has been extremely positive. Going forward, IMS will work collaboratively with SPAN to further refine its approach to data collection and reporting, with a focus on exploring variation and identifying areas for quality improvement work, including mapping data against quality indicators.

## 2.3 NHS Scotland Shared Services Portfolio

SPAN has provided Pathology expertise to the NHS Scotland Shared Services Health Portfolio Board in the three projects the Portfolio Board has been mandated to undertake by NHS Scotland's Board Chief Executives.

### 2.3.1 Data

The focus of this project has been to improve data capture across Scotland's Pathology laboratories, initially by developing a benchmarking questionnaire in collaboration with laboratory disciplines and Keele University. To ensure the integrity of the SPAN data set is maintained while options for improving data capture across all laboratory disciplines are explored within the project, an interim approach has been agreed through which duplication of effort will be avoided.

### 2.3.2 Innovation: Digital Pathology

The Digital Pathology Project between NHS Lothian and NHS Greater Glasgow and Clyde received funding of £300,000 from Scottish Government to progress a six month pilot that is anticipated will demonstrate the benefits of applying Digital Pathology to Pathology Laboratories. SPAN is working with these NHS Boards to ensure a national focus.

### 2.3.3 IT - Standardisation

In 2017-18 SPAN will convene a short life working group to begin the process of agreeing what standard Pathology definitions should be adopted in NHS Scotland.

## 2.4 Healthcare Science National Delivery Plan

### 2.4.1 Biomedical Scientist Tissue Dissection

The National Delivery Plan for Healthcare Science was launched on 11 May 2015. It recognises the importance of the evolving role for Biomedical Scientists, particularly the transfer of tissue dissection activity from medical staff to Biomedical Scientists. This frees up medical time, having a positive impact on delivering sustainable services.

In March 2016, Mr Allan Wilson (SPAN, Scientific Manager) facilitated a meeting to explore how the Biomedical Scientist (BMS) Role in Histopathology Specimen Dissection could be progressed in NHS Scotland. This meeting evolved into a BMS Dissection SLWG being established and chaired by Mrs Jackie Walker (SPAN, Scientific Manager). The SLWG was informed by an audit which enabled information to be collated on the number and types of cases dissected by BMS staff and medical staff, and the associated hours spent by both staff groups undertaking specimen dissection. This enabled a baseline figure of the percentage of dissection hours undertaken by BMS staff to be calculated (figure 1).

Category	% Dissection Hours done by BMS	% Dissection Hours done by Medic
B&C	46%	54%
D&E	6%	94%
Total B-E	22%	78%

Figure 1: Percentage of BMS and Medical Hours used for category B&C/D&E in NHS Scotland Pathology Laboratories.



SPAN will take this evidence and develop a business case for training provision in Scotland.

### **2.4.2 Demand Optimisation**

SPAN has also contributed to Deliverable 3 (Demand Optimisation) in the Healthcare Science National Delivery Plan, to reduce unnecessary testing across primary and secondary care. This will free-up capacity to address rising demand and deliver testing that positively affects the patient pathway, supports primary care preventive measures and reduces hospital referrals and admissions.

Steering group members contributed to a National Demand Optimisation Group. The final report, entitled "*Demand Optimisation in Diagnostics: Best Test, Best Care*", was published in February 2017. In response, work is under way through SPAN to align demand with resources through standardisation of immunocytochemistry (ICC) protocols.

## **2.5 Cervical Cytology**

Mr Allan Wilson has continued to be the interface between SPAN and NHS Scotland Cervical Cytology Programme, ensuring SPAN is involved in changes in staffing and workload capacity as the service moves towards HPV.

The Cervical Cytology activity for 2016-17 has focussed on two areas; firstly, driving the full business case for hrHPV primary screening through to a final decision and secondly, supporting laboratories to maintain the service during the transition to hrHPV primary screening.

The business case has been approved by the NHS Board Chief Executives group and the Scottish Screening Committee (SSC) and is now with the Health Minister. A decision is likely before the end of June. The change to hrHPV primary screening is anticipated to go ahead in late 2019.

The fragility of the current service continues to be an issue. Single handed cytopathologists in two laboratories will retire in 2018 and negotiations are ongoing to sustain the primary screening service in these two laboratories. The SPAN Scientific Manager attended the SSC and presented a paper on resilience of the service. This was well received. The network has worked to sustain services in the interim and continues to explore solutions such as cross-boundary cover and a national system for enhanced hours payment for primary screening to help bridge the forecast capacity shortfall.

The consortia management team will continue to monitor the performance and capacity of the screening laboratories and work to maintain the service during the transition period.

## **2.6 Molecular Pathology**

The SPAN Lead Clinician provides Cellular Pathology input to the Molecular Pathology Consortium steering group, ensuring, through the SPAN steering group, that NHS Boards in Scotland are informed of developments in Molecular Pathology.

In September 2016, it was identified that the PD-L1 immunohistochemistry (IHC) test would not be rolled out through the Molecular Pathology Consortium Service as it was deemed out of scope. This companion diagnostic test is required prior to prescribing Pembrolizumab.

SPAN mobilised the Pathology community to create a PD-L1 Short Life Working Group (SLWG) whose remit was to identify how the test should be delivered in NHS Scotland and the cost for the test. Professor Keith Kerr (NHS Grampian) chaired the group, who identified that the PD-L1 test would be provided from NHS Lothian, NHS Grampian and NHS Glasgow and Clyde. The group determined that the cost of the PD-L1 test for NHS Scotland would be £130 (exclusive of VAT). The group will review this cost in February 2018 to ensure that this is an actual and representative cost for the NHS Boards who are providing this on behalf of NHS Scotland.

SPAN anticipated that it would be unlikely that this would be an isolated request for itself or the other NMDN's. The Network developed an Emerging Challenges Governance Structure and Pathology Framework for Decision Making (Appendix 5) that has been shared with the other NMDN's to prevent duplication of effort and resources should they experience a similar request.

## **2.7 Pathology Liver and Renal Review**

In May 2015, members of the SPAN steering group noted their concerns regarding the potential number of Renal Pathologists retiring within three to five years. Between January and May 2016, SPAN conducted a review of Renal and Liver Pathology Services. The review scope was limited to Medical and Transplant related biopsies only. The review identified that:

The Liver and Renal Review highlighted that:

- All NHS Boards delivering Cellular Pathology services deliver their own medical related activity
- NHS Lothian was the only NHS Board that conducted a formal liver/renal specific on-call service
- NHS Highland have informal cross-cover arrangements, with a single liver Pathologist relying on informal support from NHS Tayside. NHS Highland are the only NHS Board that operated with a single specialist consultant cellular Pathologist.
- NHS Dumfries and Galloway and NHS Ayrshire and Arran were the only NHS Boards to highlight that they would seek a Service Level Agreement (SLA) for future service provision following retirements expected in 2 years.
- NHS Lanarkshire informally refers cases to NHS Lothian and NHS Greater Glasgow and Clyde as and when required.
- NHS Ayrshire and Arran have informal arrangements with NHS Lothian and would like a national solution to their local issues, without entering into a formal agreement.
- NHS Forth Valley services were operating without accreditation but plans to address this were in place.

## **2.8 Laboratory Visits**

As part of an ongoing schedule of site visits the SPAN Core Team visited NHS Dumfries and Galloway and NHS Fife Pathology Laboratories. The purpose of these visits is for local Pathology Laboratories to share good practise with SPAN and inform SPAN of local issues to consider whether there are implications for other Boards or if a national solution is possible. Whilst members felt these visits added value, it has been agreed, going forward, that SPAN meetings are an appropriate, and more cost effective vehicle for these discussions.

## **2.9 ISO 15189 Clinical Pathology Accreditation: Distributed Learning**

SPAN provides a forum through which laboratories across Scotland share learning and experience of assessment and accreditation processes to support colleagues in other NHS Boards. All the Scottish Pathology laboratories that have undergone the UKAS assessment under the new ISO 15189 standards have had the opportunity to share their experiences to assist other laboratories.

## **3. Looking Forward: Plans for the year ahead**

2017-2018 looks to be an exciting year for SPAN.

### **3.1 Communication and Engagement**

#### **3.1.1 SPAN Newsletter**

SPAN will continue to issue quarterly newsletters to ensure that the Pathology community and its stakeholders are kept abreast of the work programme.

#### **3.1.2 SPAN Website**

SPAN will continue to ensure that the website is up to date and relevant to stakeholders needs. A members-only area will be also be created to further involve the Pathology community in ongoing SPAN work. This will include hosting of draft documents.

#### **3.1.3 SPAN and Social Media**

The Network will continue to use social media as an additional “real time” communication channel

#### **3.1.4 Annual Event**

The network will host its first annual event on 3<sup>rd</sup> November, which coincides with National Pathology week. This event will be an excellent opportunity for SPAN to engage with its community at all levels and discuss with them national Pathology drivers, network achievements and future plans.

### **3.2 Digital Pathology**

It is anticipated that the Digital Pathology pilot will be extended for a further 6 months to allow additional scoping and learning.

SPAN has contributed to development of a detailed service specification which provides for the needs of departments, regardless of size.

There is the potential for the Digital Pathology system software/functionality to be expanded to include a reporting tool. This may enable the project to progress in a more agile manner.

Whilst the pilot is between NHS Greater Glasgow and Clyde and NHS Lothian, all NHS boards have been invited to see the pilot and contribute to it through SPAN.

### **3.3 Standardise Data Definitions**

In 2017-18 SPAN will convene a short life working group to begin the process of agreeing what standard definitions should be adopted in NHS Scotland Pathology laboratories.

### **3.4 Biomedical Scientist (BMS) Dissection**

A business case will be submitted to the Scottish Government, which will outline the benefits and costs for implementing a national BMS dissection training school. A BMS dissection implementation group will take forward the recommendations from the BMS dissection SLWG.

### **3.5 BMS Reporting**

SPAN will identify the current number of NHS Scotland BMS staff who are reporting and the specimen category that they are reporting. SPAN will then scope how BMS Reporting might be progressed nationally.

## **3.6 Digital Dictation**

SPAN has undertaken a scoping exercise to identify what voice recognition software is being used in Pathology departments. SPAN will produce a summary paper that identifies the key benefits of the software used and present to the steering group before developing a business case for wider implementation.

## **3.7 Pathology Data**

SPAN, the IMS and NHS Shared Services Portfolio will work in collaboration to revise the SPAN data set to include additional fields that add value. This will be taken forward in the context of other laboratory disciplines as a long term solution for effective benchmarking is explored.

### **3.7.1 Pathology Data: improved patient pathways**

Another recommendation from the NSSC SPAN review was to develop communication with the Regional Cancer Networks (RCN's). The SPAN Lead Clinician has undertaken this on behalf of SPAN and presented to the West of Scotland Regional Cancer Network. Meetings are scheduled with the other RCN's during the next reporting period. It is anticipated that SPAN will work in collaboration with the RCN's and review the SPAN data to identify where there is variation in practice and use this information to improve a Cancer Pathway.

## **3.8 Education and Training**

In February 2017, the SPAN steering group endorsed the SPAN Education Strategy. SPAN will support the development of Renal Pathologist continuing professional development (CPD).

The national BMS dissection training school will develop education and training resources, such as lectures and online training from Consultant Pathologists and BMS, which will provide BMS staff who attend the school with a comprehensive training experience.

## **3.9 National Block and Slide Storage**

SPAN has undertaken a scoping exercise to identify how NHS Boards are currently storing blocks and slides. SPAN will produce a costed summary paper to ascertain if there is merit in progressing a national block and slide storage solution.

## **3.10 Demand Optimisation**

SPAN has undertaken a scoping exercise to identify whether there is variation in immunocytochemistry (ICC) requesting patterns. SPAN will make recommendations on how variations in ICC requesting can be minimised.

## **3.11 Mortuary Services**

SPAN will convene a Mortuary Group to identify the current national provision for hospital Mortuary services and develop a meaningful dataset. The group will then scope national mortuary requirements and identify what training will be required in the future, given an identified shortfall of pathology staff with expertise in this area.



**SPAN Work Plan: 2016/17**

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2014-01	<p><b>CERVICAL CYTOLOGY</b></p> <p>The SPAN Scientific Manager will work collaboratively with colleagues in the Scottish Cervical Cytology Consortium (SCCC) supporting the development and delivery of an agreed work programme in cervical cytology, This will include development of the FBC for HPV primary screening and implementation of the changes required to adopt the new technology. SPAN is responsible for highlighting current pressures.</p>	1:4:5:6	January 2014 –June 2016	Mr Allan Wilson / Dr Tim Palmer	The SPAN Network Scientific Manager has provided clinical expertise to support the delivery and maintenance of Cervical Cytology laboratory services during the consolidation and change in service delivery model because of Change in Age, Range and Frequency (CARAF). Development of the FBC for HPV primary screening has required input into a series of meetings and workshops. The FBC should be signed off in December 2016	<p>CARAF will be implemented by 6/6/16.</p> <p>BC for HPV primary screening will be submitted to the Scottish Screening Committee in September 2016</p>	G

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2014-02	<p><b>MOLECULAR PATHOLOGY</b></p> <p>SPAN will provide cellular pathology input to the Molecular Pathology Consortium steering group.</p>	3:4:5:6	April 2014-Nov 2016	Dr Lee Jordan	The SPAN Lead Clinician ensures that pathology departments across Scotland are engaged with molecular pathology departments in driving up the quality of service provision	SPAN continues to representation on the MPEP and MPCSG. Regular updates provided to SPAN.	<b>B</b>



Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2014-04	<p><b>PATHOLOGY DATA</b></p> <p>SPAN will refine collection and analysis of the Scottish Pathology data to allow notional productivity and financial measures to be applied in a comparative manner (Phase II development). The Lead Clinician will present the findings of the data to the SPAN steering group in October 2015.</p>	2:3:4	May 2014-October 2016	Dr Lee Jordan	SPAN dataset was revised by SLWG and piloted successfully. Revision used for 2014/15 data collection and analysis (undertaken in 2015/16). Phase II deemed successful following October 2015 Quality & Performance Event.	SPAN will ratify the data and pass over the collection and analysis and presentation of the data to the National Network Management Service (NNMS) Information Management Service.	<b>B</b>

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2014-05	<p><b>ISO 15189 ACCREDITATION</b></p> <p>SPAN will support NHS Scotland Pathology laboratories understand the newly launched ISO15189 accreditation standards</p>	2	May 2014-April 2016	Dr Lee Jordan	NHS D&G, NHS GG&C, NHS Grampian, NHS Lothian & NHS Tayside have shared their experience of the ISO 15189 accreditation with the SPAN SG	<p>UKAS representatives will meet with the IBMS once a year.</p> <p>IBMS will produce a UKAS ISO15189 Q&amp;A sheet.</p> <p>SPAN members are engaged with IBMS activity via direct professional links</p>	<b>B</b>

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2015-01	<p><b>NSSC SPAN REVIEW</b></p> <p>National Specialist Services Committee (NSSC) SPAN Review has requested that SPAN be formally reviewed by 2016.</p>	1:2:3:4:5:6	January 2015-September 2016	National Network Management Service (NNMS)	<p>The Scottish Government is committed to reviewing all national managed networks on a three to five year rolling programme to ensure that each network is meeting its original designation objectives, delivering in line with the core principles of networks, enabling clinical effectiveness and delivering value for money.</p>	<p>The SPAN review report will be presented to the NSSC in December 2016.</p>	<b>B</b>

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2015-02	<p><b>LABORATORY VISITS</b></p> <p>SPAN will visit all the 10 delivery NHS Boards at least once in the same three-year cycle as the Lead Clinician.</p>	2:4:5	January 2016-April 2017	SPAN Core Team	<p>SPAN laboratory project plan has been developed which illustrate what laboratories will be visited.</p> <p>The SPAN core team visited NHS Dumfries and Galloway in March 2016.</p> <p>The SPAN core team visited NHS Fife in August 2016.</p>	<p>SPAN will have an understanding of what the local issues faced by pathology services are and if a network, approach can be applied to the issues.</p> <p>Good practise is shared within the network.</p> <p>Direct engagement with frontline staff in their own environment</p>	<b>B</b>

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2015-03	<p><b>HEALTH CARE SCIENCE DELIVERY PLAN</b></p> <p>SPAN will contribute to the Scottish Governments Health Care Science Delivery Plan of developing sustainable services by supporting the development of Biomedical Scientists in histopathology specimen dissection.</p>	3:4:5:6	<p>March 2016</p> <p>April 2016</p>	<p>Mr Allan Wilson /Mrs Jackie Walker &amp; Mrs Alexandra Speirs</p>	<p>The SPAN facilitated a one day stakeholder event in March 2016</p> <p>Mrs Jackie Walker issued a survey to ascertain the number of specimens of each type, were dissected by medics and how many were dissected by BMS staff.</p> <p>Information gathering complete, this will enable SPAN to develop a business case to expand BMS Dissection in Scottish Pathology departments.</p>	<p>A business case will be written that supports the development of delivering a sustainable Pathology service</p>	<p><b>B</b></p>

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2015-04	<p><b>PATHOLOGY RENAL REVIEW</b></p> <p>A review of Renal and Liver Pathology Services which incorporates the respective transplant services was required by June 2016, in response to Steering Group perception of pressures.</p>	4:5:6	October 2015- June 2016	Dr Lee Jordan and Mr Allan Wilson	<p>Dr Jordan presented the data aspect of the Review of Renal and Liver Pathology services to the May2016 steering group. SBARs were generated for each discipline.</p> <p>It was noted that services appear stable and services have sustainable staffing with plans for continuity in place.</p> <p>NHS Ayrshire and Arran had not completed the data collection. Dr Jordan agreed to amend the data set and review the SBAR once NHS Ayrshire and Arran submitted their data.</p> <p>The findings of the liver SBAR will be presented to the Pathology GI group for review by Prof. Frank Carey.</p> <p>Specialist opinion on the Renal SBAR will be sought.</p>	<p>There will be a common understanding of what the workforce issues are in Pathology Renal and Liver Services</p> <p>An understanding of what is required to develop a safe and sustainable renal and liver pathology services across Scotland</p>	<b>B</b>

Objective Number	SMART Objective	Linked Dimensions of Quality	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/05/17	Anticipated Outcome	RAGB status
2015-05	<p><b>NHS SCOTLAND SHARED SERVICES INIATIVE</b></p> <p>SPAN will contribute to the work of NHS Scotland Shared Services Medical Portfolio Board in Laboratories</p>	1:2:3:4:5:6	January 2016-May 2016	Dr Lee Jordan & Mr Allan Wilson	SPAN have contributed to NMDN report on Shared Services that has been presented to the DSG and was also used as pre-reading for the kick off workshop for the labs programme	SPAN will contribute to and implement the outcome of the NHS Scotland Shared Services Portfolio Board.	<b>B</b>

*RAG status key*

RAG status	Description
<b>RED (R)</b>	The network is unlikely to achieve the objective/standard within the agreed timescale
<b>AMBER (A)</b>	There is a risk that the network will not achieve the objective/standard within the agreed timescale, however progress has been made
<b>GREEN (G)</b>	The network is on track to achieve the objective/standard within the agreed timescale
<b>BLUE (B)</b>	The network has been successful in achieving the network objective/standard to plan

The Institute of Medicine's six dimensions of quality are central to NHS Scotland's approach to systems-based healthcare quality improvement; therefore, objectives should be linked to these dimensions:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective:** providing services based on scientific knowledge;
4. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely:** reducing waits and sometimes-harmful delays for both those who receive care and those who give care.



**Scottish Government Policy Aim:** Optimal outcomes for people with rare/complex conditions, through equity of access to the highest quality care.

**Policy framework of core principles and quality dimensions to which national networks must adhere.**

**Core Principles (Ref: CEL 29 (2012))**

**Core Principle 1:**  
Clear management arrangements and leadership of the MDN

**Core Principle 2:**  
A defined MDN structure setting out the points at which the service is to be delivered and the connections between

**Core Principle 3:**  
The use of a MDN annual work plan

**Core Principle 4:**  
The use of a documented evidence base by the MDN

**Core Principle 5:**  
The multi disciplinary and multi professional constitution of the MDN, which includes patients

**Principle 6:**  
A patient-centric approach

**Core Principle 7:**  
Optimising the MDN education and training potential and continuing professional development

**Core Principle 8:**  
Generating better value for money

**Institute of Medicine's 6 Dimensions of Quality (Ref: Healthcare Quality Strategy For NHS Scotland, 2010)**

Person Centred

Safe

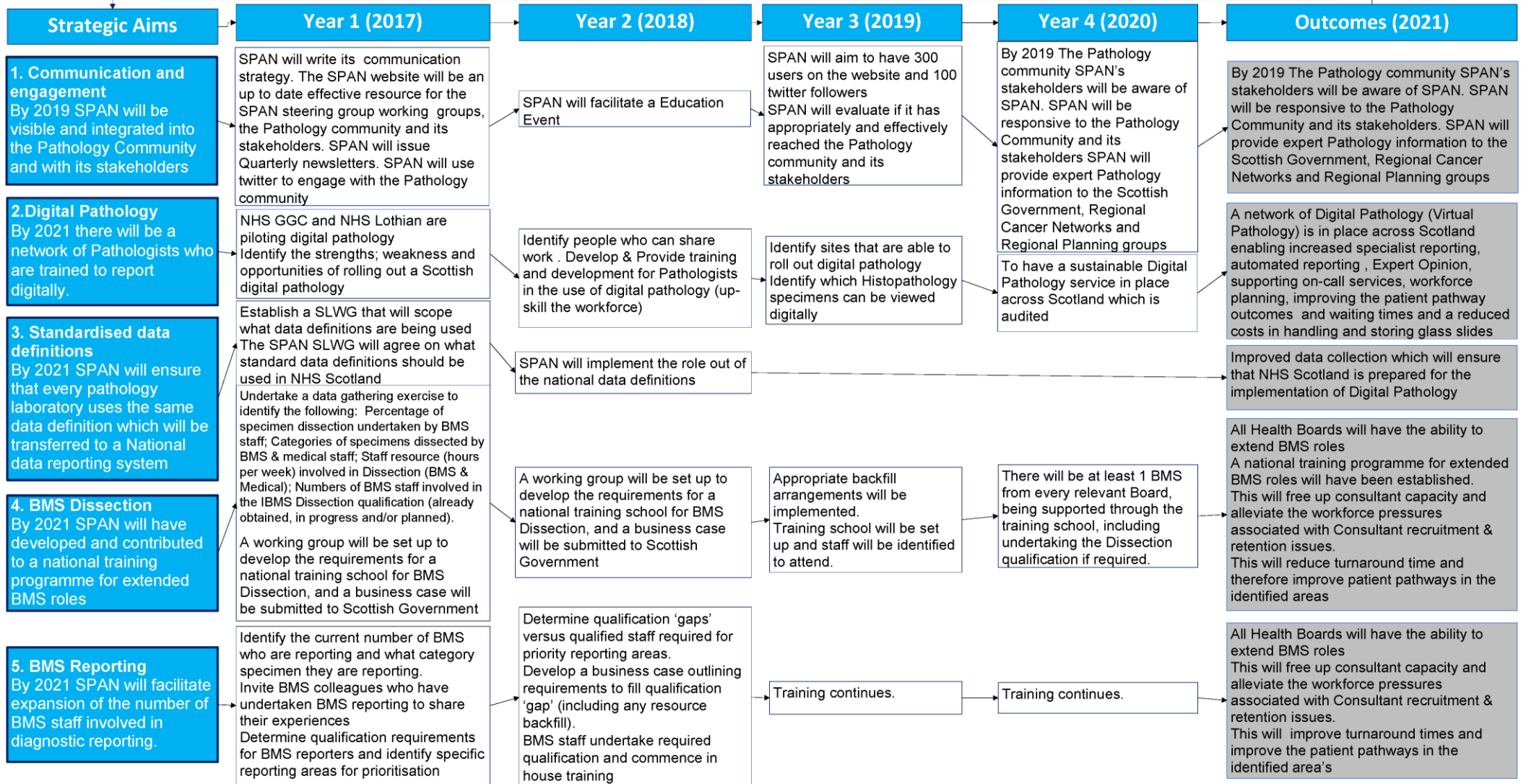
Effective

Efficient

Equitable

Timely

**The role of the Scottish Pathology Network (SPAN) is to improve pathology services by creating and developing a Scotland wide National Managed Diagnostic Network (NMDN) which will steer modernisation, including service change and redesign, improve quality, ensure provision of an effective cellular pathology service which anticipates and responds to user needs, future requirements, national guidelines and meets ISO 15189 Standards'.**



Policy framework of core principles and quality dimensions to which national networks must adhere.

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Optimising the MDN education and training potential and continuing professional development

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Generating better value for money

Institute of Medicine's 6 Dimensions of Quality (Ref: Healthcare Quality Strategy For NHS Scotland, 2010)

Person Centred

Safe

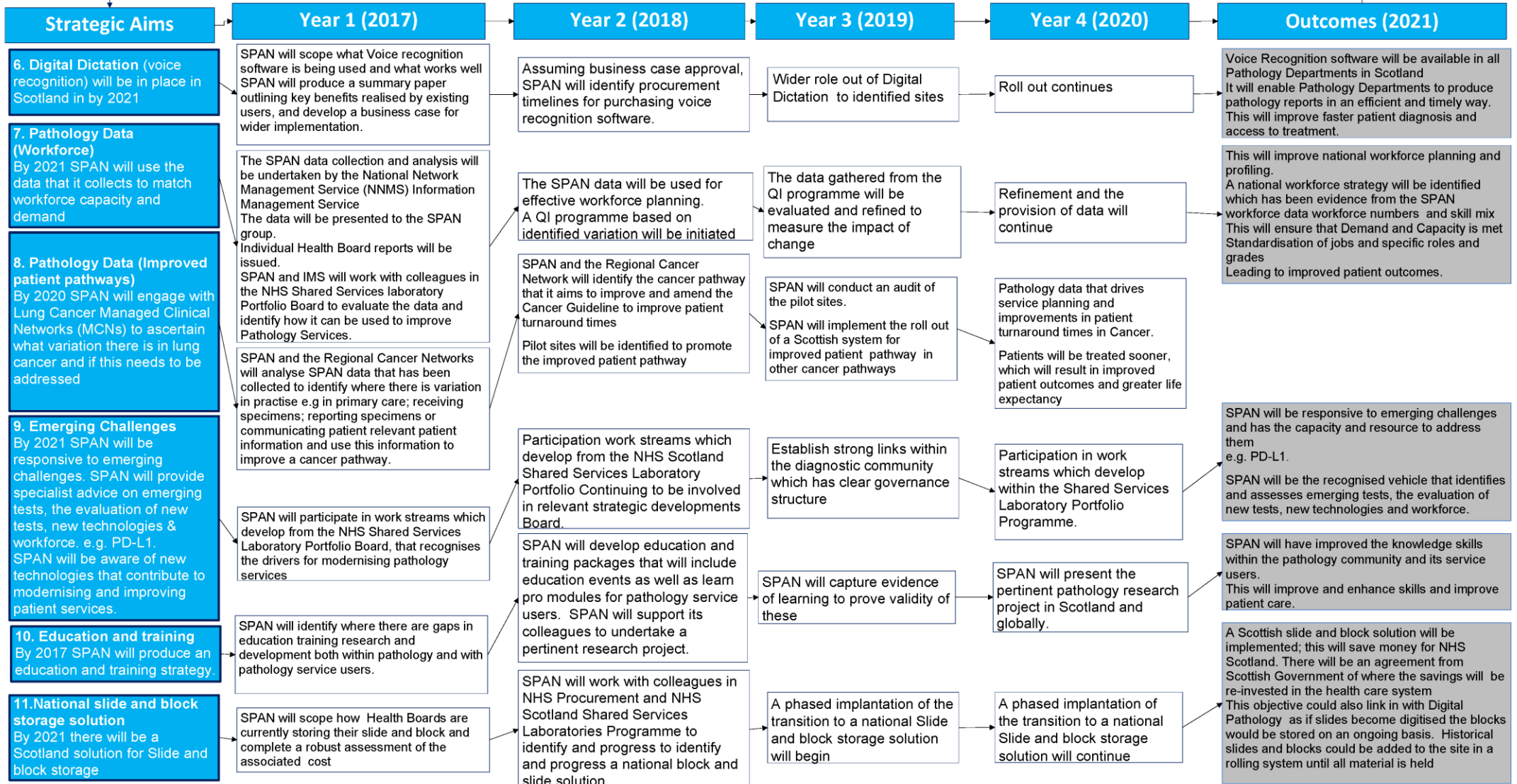
Effective

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## **Appendix 1: Network Governance**

Dr Liz Mallon has been the Lead Clinician since December 2016. Dr Mallon is funded to provide 1PA of activity per week to SPAN.

Mr Allan Wilson was appointed SPAN Network Scientific Manager in July 2014. Mr Wilson is funded to provide 1 session of scientific support per week to SPAN.

Mrs Jackie Walker was appointed SPAN Network Scientific Manager in May 2016. Mrs Walker is funded to provide 1 session of scientific support per week to SPAN.

Mrs Alexandra Speirs is the SPAN Programme Manager.

Miss Emily Ross is the Programme Support Officer for SPAN.

The SPAN Programme Manager is line managed by Mrs Liz Blackman, Senior Programme Manager, NNMS.

The NNMS is managed by Mrs Catriona Johnson, Programme Associate Director, NSD.

The Steering Group is SPAN's Stakeholder Group and consist of all the lead clinicians and lead biomedical scientists of the 10 NHS Boards delivering cellular pathology services for NHS Scotland plus seconded representatives. The Steering Group meets three times per year.

SPAN is accountable to Scottish Government through National Services Division. The Diagnostic Steering Group provides influence and are key stakeholders for SPAN

## Appendix 2: Steering Group Membership

**SPAN Lead Clinician**  
**SPAN Scientific Manager**  
**SPAN Scientific Manager**

Dr Liz Mallon  
Mrs Jackie Walker  
Mr Allan Wilson

**NHS Boards**  
**NHS Ayrshire & Arran**

Dr Joyce Lang  
Mrs Debbi McEwan

**NHS Dumfries & Galloway**

Dr Stanford Mathe  
Mr Michael Burns  
Ms Lianne Duffy  
Ms Adele Foster

**NHS Fife**

Dr Fiona Murdoch  
Mrs Amanda Malham

**NHS Forth Valley**

Dr Mark Brown  
Mr John McEwan

**NHS Grampian**

Dr Fiona Payne  
Mr David Wilson

**NHS Greater Glasgow & Clyde**

Dr Gareth Bryson  
Mrs Jackie Walker

**NHS Highland**

Dr Grant Stenhouse  
Mr Andrew Soden

**NHS Lanarkshire**

Dr Stuart Thomas  
Mr Allan Wilson

**NHS Lothian**

Dr Marie Mathers  
Mr Ian King

**NHS Tayside**

Dr Frank Carey  
Mr Dave Topping

**National Services Division**  
**National Network Management Service**

Mrs Liz Blackman  
Mrs Alexandra Speirs  
Miss Emily Ross

**Information Management Service**

Mrs Claire Lawrie  
Mr Gavin Moir

**Scottish Cervical Cytology Consortia**

Dr Tim Palmer

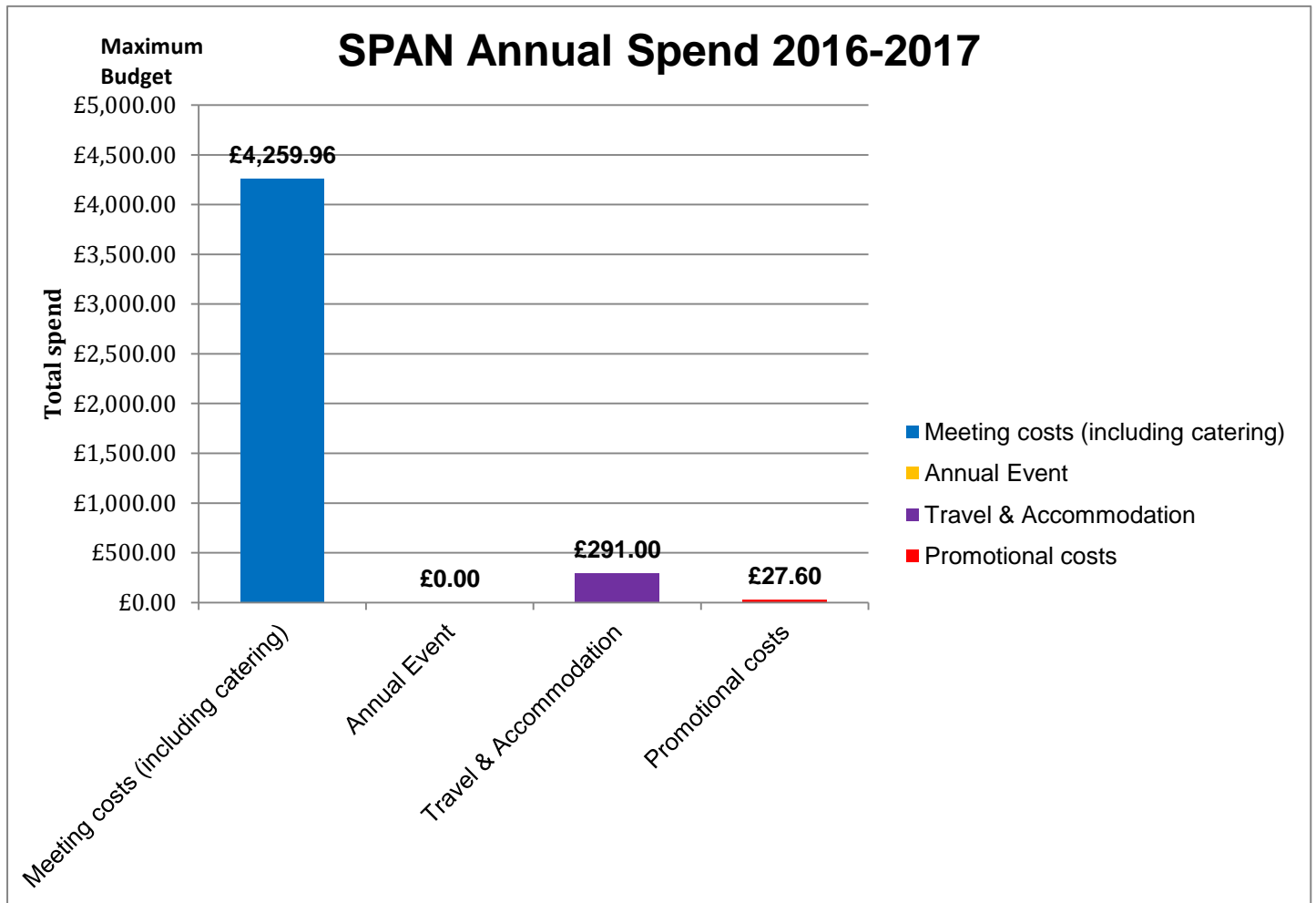
**Diagnostics Specialty Training Board**

Mr Peter Johnston

**Academic Representative**

Mr Graeme Murray

## Appendix 3: Finance



Type of cost	Spend
Meeting costs (including catering)	£4259.96
Annual Event	£0.00
Travel & Accommodation	£291.00
Promotional costs	£27.60
<b>Total</b>	<b>£4578.56</b>

## Appendix 4: NSSC Review Recommendations

### Planning:

1. The SPAN work plan requires further development, to include:
  - a. Workforce planning and sustainable services
    - i. Assessment of, and solutions for, handling workload complexity (e.g. examination of technologies; creation of business cases; creation of training and workforce programmes)
    - ii. Suggestions for best service model (e.g. workforce numbers; skill mix; model of delivery with a focus on number of procedures undertaken or complexity)
    - iii. Evaluation of the work and capacity of Biomedical Scientists, particularly regarding tissue dissection and reporting
  - b. Three year strategy, which will allow more formal horizon planning and will include:
    - i. Strategic planning day for the Steering Group and stakeholders from across NHS Scotland
    - ii. Working with strategic regional planning and cancer networks to take forward as a workplan anything that can be done to streamline and improve workflow
    - iii. Alignment with SG direction, as below
2. SPAN's future aims must be aligned with Scottish Government direction, particularly:
  - a. National Clinical Strategy
  - b. National Cancer Strategy
  - c. Realistic Medicine
  - d. 2020 Vision
  - e. Healthcare Science National Delivery Plan (e.g. developing sustainable teams within histopathology, with a specific focus on developing sustainable teams utilizing the BMS workforce to perform tissue dissection)
  - f. The Shared Services initiative
3. SPAN should develop a future plan for responding to changes, focusing on key objectives, business planning and setting goals and aims, including:
  - a. Identifying and engaging with stakeholders
  - b. Quality metrics
  - c. Identifiable pieces of work that they could be taking forward
  - d. Cross-collaboration with other NMDNs
4. SPAN needs to develop more structured planning tools, including:
  - a. Risk register
  - b. Organisational charts

### Data:

5. SPAN should, in line with wider work under "shared services", benchmark the networked services against UK data, in order to determine whether best value is being achieved (especially with regard to expert opinion cases, immunohistochemistry). SPAN should progress its plans to optimise data collection by developing and evaluating Key Performance Indicators (e.g. turnaround times, efficiencies).

### **Membership / Representation:**

6. SPAN should undertake a review of network and stakeholder membership, in order to ensure that different perspectives in the pathology patient pathway are represented
7. SPAN should increase its involvement / engagement with NHS Board and regional planning, and the regional cancer networks
8. SPAN should develop a communications strategy for engaging with key stakeholders. This will include the sharing of yearly workplans, in order to identify whether there might be any overlapping pieces of work that could be assisted through collaboration. SPAN should also provide clear, concise communications on work they propose to undertake to relevant stakeholder groups, ensuring buy-in at an appropriate level prior to undertaking activity.

### **Education / Training:**

9. SPAN should produce an education strategy, taking account of the role of other bodies such as the Royal College of Pathologists and NHS Education for Scotland, which should encompass all staffing levels, including Biomedical Scientists, Healthcare Scientists, support staff and Histopathologists. SPAN's role would be in addressing specific educational needs outwith the remit of other bodies and as required to modernise the pathology workforce, linked to the workforce planning activity recommended at 1a.
10. SPAN should contribute to developing and strengthening consistent diagnostic pathways across Scotland

### **Network Objectives:**

11. SPAN should undertake a scoping exercise for digital pathology in Scotland; to understand what the operational and strategic drivers for change are, identify barriers to implementation such as the need for a common Laboratory Information System (LIMS), working towards development of an outline business case for digital pathology in Scotland, including support for pilot sites for proof of concept.
12. SPAN should engage with National Procurement to develop a national procurement framework as used in other services for NHS Boards to purchase from and gain best value.
13. SPAN should continue the renal, liver and transplant review, working with NNMS to ensure there is buy-in to the work at a strategic level
14. SPAN should work with Logistics to review slide and block storage across NHS Scotland to explore a once for Scotland solution, potentially extended to transportation of slides.

## **Appendix 5: 6, 12, 24-month timeframe**

### **Within Six Months**

- Implement revised SPAN structure
- Complete BMS dissection business case and submit to Scottish Government to consider a training provision to modernise workforce
- Support implementation of pilot of digital pathology in at least one site
- Produce scoping paper on voice recognition software
- Produce communications strategy

### **Within Twelve Months**

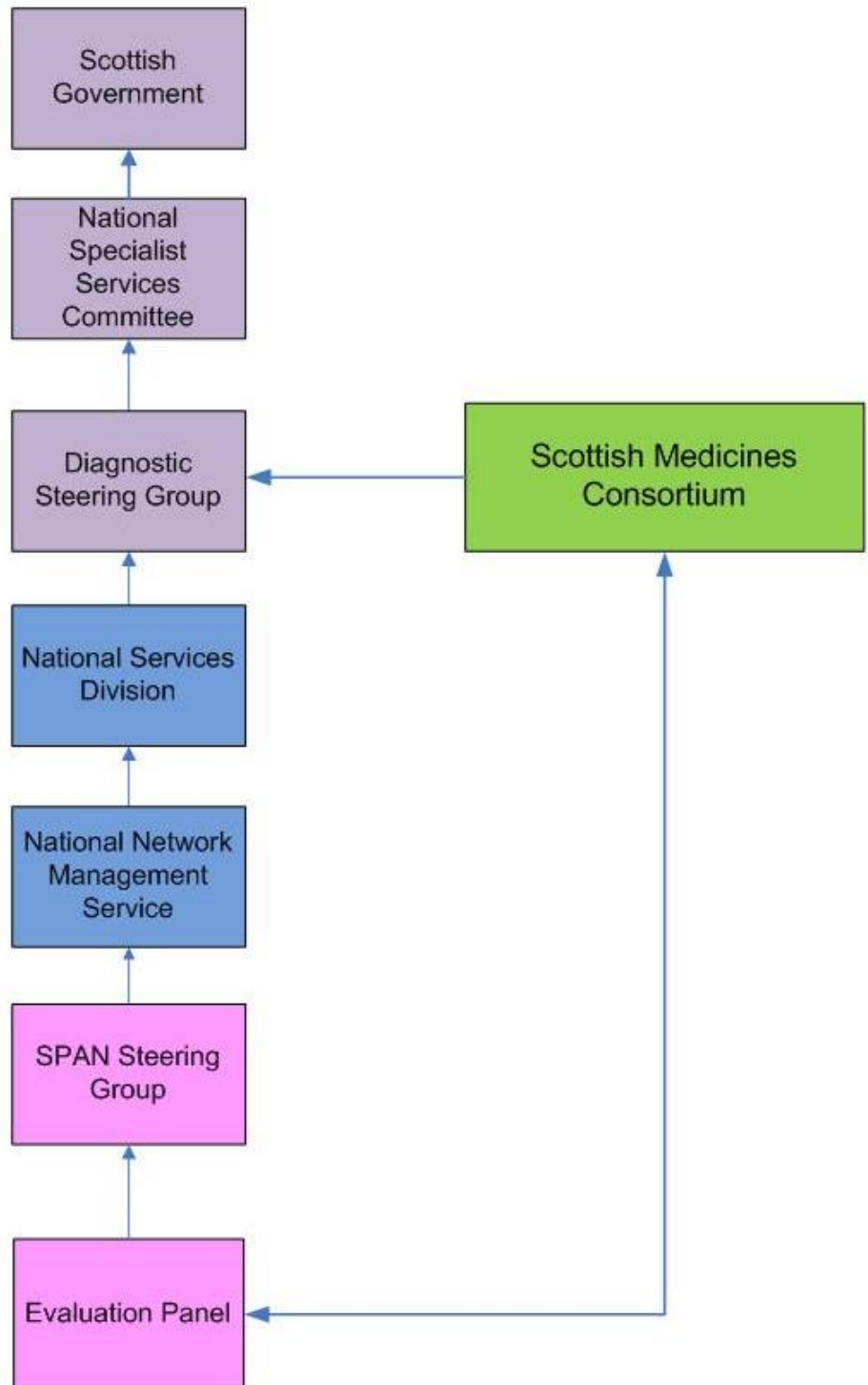
- Produce SWOT analysis of the national implementation of digital pathology
- Complete scoping work on current slide and block storage
- Produce outline business case for BMS reporting
- Evaluate communications and revise strategy accordingly to ensure awareness of SPAN continues to rise
- Produce education and training strategy, in line with service modernisation work undertaken (eg BMS dissection) and linking to development of a national workforce plan

### **Within Twenty Four Months**

- Produce proof of concept for voice recognition software and associated quality assurance checks
- Refine and improve SPAN data collection to enable effective workforce planning.
- Target variation through a quality improvement programme



## Appendix 6: Emerging Challenges governance structure



## Pathology Framework for Decision Making

