

## Notes from meeting held on 10<sup>th</sup> December 2007

### Riverhouse Hotel, Stirling

Name	Initial	Representing	Attendance
Derek Bishop	DB	SPAN	Attended
Jim Ramsay	JR	Tayside	Attended
David Topping	DT	Tayside	Apologies
Carol Mackenzie	AR	Highland	Attended
Lynne Doverty	CB	Grampian	Attended
Norma Dryden	ND	Fife	Attended
Roy Robertson	RR	Forth Valley	Attended
David Elliot	DE	Lothian	Apologies
Allan Wilson	AW	Lanarkshire (Monklands)	Attended
Tom Downie	TD	North Glasgow	Attended
Ian Sutherland	IS	Clyde (RAH)	Apologies
Alex Brown	AB	Ayrshire & Arran	Attended
David Murray	DM	Lanarkshire (Wishaw)	Apologies
Mike Bromley	MB	Dumfries & Galloway	Apologies
Jackie Anderson	JA	Clyde (Inverclyde)	Attended
David Preston	DP	South Glasgow	Attended
Jim Lynch	GC	South Glasgow	Attended
John McCorriston	JM	North Glasgow	Apologies
Jim Ito	JI	Glasgow, Sick Children's	Apologies
Helen Glass	HG	Glasgow, Sick Children's	Attended

The meeting opened with a presentation by Vantana representatives on the company, the equipment they offer and recent and future developments.

#### 1. Minutes from previous meeting

Approved

#### 2. Matters arising

##### 2.1 Constitution

The draft constitution had previously circulated. The number of members required to be quorate was questioned but eventually set at ten. A typographical error with the numbering on the draft constitution will be corrected before final circulation. The constitution was then accepted and adopted by the group.

The chair of the group is open for nominations in summer 2008 and the secretary in summer 2009. Nominations will be sought for the chair before the June meeting.

**Action: AW**

## **2.2 BMS workload**

There has been one meeting of the sub-group so far. It was agreed to pursue the Welcan system a bit further. DB has contacted the Welsh Office and the Welsh Pathology Modernisation group and may visit Wales to seek further information on the new version of Welcan which is multi-disciplinary. A Scottish pilot of the new system is likely but a joint project with the Welsh Office is another option. AB provided a lot of data to inform the group.

There are no current measurements for BMS workload, any proposals need to be robust and acceptable to the SCPMG. If there has been no response from the Welsh Office, a second meeting of the sub-group will be held in January 2008. The sub-group is keen to pursue the Welcan option and will report back at the next SCPMG meeting.

A new data collection may be required to “fit” into Welcan units.

**Action: DB**

## **2.3 Agenda for Change**

The table of banding results was updated and is attached.

## **3. SPAN update.**

DB gave a short progress report on SPAN issues:

- The SPAN manager post has been made permanent.
- Sessional payment has been agreed for the Clinical lead
- The next SPAN meeting is on 24<sup>th</sup> January in Stirling
- A one day scientific meeting is scheduled for 15<sup>th</sup> May and will include the following:
  - New cancer plan – Liz Porterfield
  - Diagnostics - Colin Lauder
  - Histopathology in Warwickshire – Scott Sanders and Richard Carr
  - Cervical Cytology – Jocelyn Imrie
  - Advanced BMS role in Histopathology – Sarah May
  - Molecular Pathology - Barry Gusterson
  - Future of SPAN – Frank Carey/Derek Bishop
  - CJD - James Ironside
  
- Axsys have been asked to do a scoping exercise to link the Pathology data set and the clinical (patient) data set
- The recently issued Keele benchmarking reports are confusing and there are gaps in the data. There is a meeting in Keele to discuss the reports on 6/02/08. A Scotland –only meeting is being organised, provisionally on 29/2/08.

## **4. Open Discussion**

#### **4.1 Agenda for Change**

There is variation across the country in the banding of Trainee BMS's and BMS1's. This has led in some labs to very little difference in salary between the two groups. There is also variation in the review process adopted within the Health Boards, some Boards have allowed "quick fixes" outside the formal review process and others are sticking to the formal process. Some labs have still not been banded.

The results of the Aberdeen review for the BMS1's who banded as band 5 is due out tomorrow.

Everyone present was asked to give a brief update on the review process in their area if banding results had been received. A summary is as follows:

<b>Area</b>	<b>Approximate number of appeals</b>	<b>Comment</b>
North Glasgow	7	
Ayrshire and Arran	27	Results due late 2008
Grampian	17	
South Glasgow	7	
Lanarkshire	5	
Tayside	5	
Fife	8	Results due December 08
Highlands	27	
Glasgow Sick Children	1	
Forth Valley	1	

#### **4.2 SCCRS**

There are serious problems with generating reports from SCCRS, which will impact, on laboratories CPA status if it is not resolved quickly. Forth Valley will be assessed in April 2008 and the reports must be accessible by this date. This was considered by the group to be a critical issue with only limited time to resolve. It was agreed to escalate this issue to SPAN. DB agreed to contact Jocelyn Imrie to try and resolve the issue.

The imminent imager trial will need robust data, which cannot be produced at the moment.

AB has recently re-submitted an extract of biopsy data to try and plug gaps in biopsy data and smear/biopsy correlation.

Apart from problems with reports, SCCRS appears to be settling down and works well with more than 95% of cases now entered electronically at source.

### **4.3. Keele**

As identified above, there are gaps in the data. The reports are only just out and more work needs to be done to identify the source of the problem.

### **4.4. Integrated degree impact**

Grampian and Highland currently have students from Robert Gordon University in the labs. The general view is that it is more work than anticipated. The role of the external assessor is to verify that the portfolio has been completed and the trainers have assessed competency. A number of elements of the portfolio will have been completed during modules at the University and the mapping process should make it clear where the delivery of the portfolio elements should take place. In Aberdeen the students are placed across two disciplines e.g. cellular pathology and microbiology. In Tayside they are placed in a single discipline.

All staff who have attended the Training for Trainers courses can sign off laboratory aspects of the portfolio. The IBMS currently say that all portfolios must be individually assessed and verified before candidates can become Licentiates and assessors need to be IBMS registered and trained.

Placement officers have been invited to Coldbath Square in December to discuss the process. There are no placement officers in place in Glasgow, Paisley or Tayside yet.

Ayrshire and Arran will have students in January 2008. Lanarkshire will have students in February 2008.

### **4.5 Disposal and storage of tissue blocks and slides**

Slides and blocks must be disposed of as clinical waste following the Royal College Guidelines. The group decided that recycling glass slides was inappropriate.

Several labs have sought quotes from CellNass, a commercial slide and block storage company based in Wales which is seeking CPA approval. In general the quotes were deemed to be expensive and the possibility of an alternative commercial solution based in Scotland was discussed. The current guidelines on storage of slides and blocks were also discussed and a difference in interpretation was apparent. The main difference was how long they should be stored for, some labs interpreted the guidance as 10 years for slides but others maintained they should be kept for 30 years. The college guideline wording confirms for histology 10 years for slides 'longer if practicable' 'It may be appropriate to select slides from smaller biopsies for retention for longer than 10 years.

### **4.6 Welcan development**

Discussed above under BMS workload measurement.

### **4.7 Tissue processing**

North Glasgow has used formalin free processing very successfully. Current technology is xylene and formalin free. It raised the question of whether a central body such as HTA should assess new methods of fixation on a national basis. The Bayer (Siemens) processor offers continuous processing which is xylene free. North Glasgow is also trialing a Surgipath continuous processing system.

The impact on Herceptin and other types of predictive testing was raised and it is unclear if this new type of processing would produce equivalent results to conventional processing. The viability of blocks stored for 30 years is also unclear. There are some limited results from using ICC on tissue processed using this new technology and the results are very promising. The yield of nucleic acid is increased.

## **5. AOCB**

### **5.1 ICC processor installations**

Forth Valley has purchased the Vantana ICC processor.  
Ayrshire and Arran and Tayside are currently out to tender.

### **5.2 Single lab for Glasgow**

The move towards a single Pathology lab for Glasgow and Clyde is now being reconsidered.

### **5.3 Healthcare Scientist Plan**

DB encouraged everyone to read and comment on this important document