

**Note of Meeting of Scottish Pathology Network (SPAN) Steering Group
11th January 2007
Stirling Education and Conference Centre
Stirling Royal Infirmary**

Name	Initial	Title	Representing	Attendance
Frank Carey	FAC	Network Clinical Lead/Clinical Leader	SPAN/ Tayside	Attended
Derek Bishop	DB	Network Manager	SPAN	Attended
Jim Ramsay	JR	Head Biomedical Scientist	Tayside	Attended
Mark Ashton	MA	Clinical Leader/ Consultant Pathologist	Highland	Apologies
Alex Rennison	AR	Head Biomedical Scientist	Highland	Attended
Mary McKean	MMK	Clinical Leader/Consultant Pathologist	Grampian	Attended
Charles Broadfoot	CB	Head Biomedical Scientist	Grampian	Attended
Brian Adamson	BA	Clinical Leader/Consultant Pathologist	Fife	Attended
Norma Dryden	ND	Head Biomedical Scientist	Fife	Attended
Bruce Michie	BM	Clinical Leader/Consultant Pathologist	Forth Valley	Attended
Roy Robertson	RR	Head Biomedical Scientist	Forth Valley	Apologies
Andrew Krajewski	ASK	Clinical Leader/Consultant Pathologist	Lothian	Apologies
David Elliot	DAE	Head Biomedical Scientist	Lothian	Apologies
Jon Coldewey	JC	Clinical Leader (Monklands)/Consultant Pathologist	Lanarkshire	Apologies
Allan Wilson	AW	Head Biomedical Scientist (Monklands)	Lanarkshire	Attended
Margaret Burgoyne	MB	Clinical Leader/Consultant Pathologist	Glasgow	Attended
Tom Downie	TD	Head Biomedical Scientist	Glasgow	Attended
Freda Forbes	FF	Clinical Lead (RAH)/Consultant Pathologist	Clyde	Attended
Ian Sutherland	IS	Head Biomedical Scientist (RAH)	Clyde	Attended
Bob Nairn	RN	Clinical Leader/Consultant Pathologist	Ayrshire & Arran	Attended
Alex Brown	AB	Head Biomedical Scientist	Ayrshire & Arran	Attended
Awnie Lutfy	AL	Clinical Leader/Consultant Pathologist	Dumfries & Galloway	Apologies
Mike Bromley	MB	Head Biomedical Scientist	Dumfries & Galloway	Apologies
Jeremy Thomas	JT	Consultant Pathologist	SMASAC Specialty Advisor	Attended
Barry Gusterson	BG	Professor of Pathology	Academic Representative	Attended
Peter Johnston	PJ	Consultant Pathologist	Post Graduate Representative	Apologies

Note of Meeting

1. Apologies

Peter Johnston, Mark Ashton, Roy Robertson, Jeremy Thomas, Jon Coldewey, Andrew Krajewski, David Elliot, Awni Lutfy, Mike Bromley & Jeremy Thomas

2. Note of Previous Meeting and Matters Arising

Note of Meeting Accepted.

Matters arising.

SCCRS – Contact had been made and subsequently the date of implementation delayed until 01 May 2007. (Subsequently delayed further)

Post Mortem MTO Training – Contact had been made with University of Dundee and details of new course circulated previously to group.

3. Delivering for Health

Diagnostic Advisory Group

A group had been brought together to consider the imaging and laboratory impact of Delivering for Health. SPAN would be represented by FAC and also includes, Alistair Robertson and Graham Beastall. The first meeting had taken place on 28th November 2006

Molecular Pathology

A group was being formed under the auspices of SEHD to consider the review of NON NSD funded national services and the strategic review of molecular pathology as outlined in HDL (2006) 12. FAC would represent SPAN on this group.

4. Cytology

Scottish Cytology Call/Recall System (SCCRS)

Questions had been raised at the last meeting about the design of the system being able incorporate both paperless and paper systems. It was agreed that the system as designed was primarily a paperless system.

A number of outstanding items has been raised with the Project management Group and a decision had been made to delay implementation from 01 Dec 06 to 01 May 07 (Delayed further) to allow the items to be addressed.

Cervical Cytology Review

Discussion centred around the current pressures in cytology and the future impact of technology changes. SEHD had indicated that there would be a review of the laboratory aspect of the screening programme and a meeting had been called at the Executive for 29th January. It was understood that DB would represent SPAN, Jocelyn Imrie was attending in relation to quality assurance and it was expected that Aileen Keel and John Burns would also attend.

DB would feedback to the group any relevant information after the meeting.

DB

5. Human Tissue Bill

Audit figures had been circulated on the Post Mortem activity between Sep and Nov 2006. It was decided that the period of the study was too short and did not give statistically significant figures. The final version will be forwarded to SEHD.

DB

6. Benchmarking

A spreadsheet had been produced covering baseline activity for pathology. There were a number of amendments to this draft form which would be incorporated in the final version. The amended version would be circulated to clinical leads for completion by 28th February 2007. The information produced would be treated as preliminary and draft until discussion at the April Steering Group Meeting.

7. E Health

National Clinical Dataset Development Programme (NCDDP)

Core, Breast and Gynae datasets had been developed and were out to consultation for responses by 19th January 2007. The working group would meet again on the 23rd January to consider responses.

Discussion continued into how the datasets, when completed would be populated with data. It was considered by the group that this needed national direction and emphasized the constraints in mapping directly with the current laboratory systems. This required cohesive working between pathology and national E Health to reduce the potential of duplicate entry and transposition of diagnostic data and its associated risks.

Pathalba

Phase 1 of Pathalba was nearing completion and all of the cameras and software will be installed by Feb 07. Departments accepted the requirements to share images across the pathology community.

Phase 2 is currently delayed awaiting national E Health response.

The next tranche of funding was being pursued and hoped to be in budget by March 2007.

7. Academic Update

BG gave a comprehensive update on the challenges facing academic pathology and is included as appendix 1

BG

8. Postgraduate/Education Update

PJ had sent apologies. This report would be carried forward to the next meeting.

9. AOCB

It was noted that a group within the West of Scotland were arranging to meet to discuss a coordinated approach to issues such as cancer funding. This meeting would take place on 30th January.

RN

It was reported that the Scottish Cellular Pathology management Group would work under the auspices of SPAN

TD

Date and Venue of next meeting (**Note change of venue**)

Thursday 26th April 2007 10.30
Council Chambers
Stirling Municipal Buildings
Corn Exchange Road
Stirling

FK8 2HU

Appendix 1

Appendix to January 11 2007 Scottish Pathology Network Note of Meeting

SPAN Academic Pathology Report:

Professor Gusterson reported that:

1. The MRes Programme in Molecular Pathology was currently going through the Glasgow University postgraduate training committee and once approved would be circulated.

2. A survey had been carried out amongst the medical schools and over the last decade there had been considerable cuts in university post in Pathology. In Aberdeen there is only one post filled, which was the Chair. In Edinburgh there are two Professorial positions and two Senior Lecturers. In Dundee there is one SHEFC funded Professor and one Professor and one Senior Lecturer, jointly funded 50/50 with the NHS. In Glasgow there is a Professor and a Senior Lecturer full time SHEFC funded and three Senior Lecturers funded 60/40 by the University/NHS respectively.

Dundee is the only department with any lecturers (2). With the new MMC programme, however, these NES funded posts will go back into the pot and will have to be bid for.

This clearly demonstrates that whilst the senior academics have decreased there has been no investment by the University or NES in developing future academics. This is a potentially disastrous situation for the future of translational research and teaching in Scotland.

3. There are a number of trainees in Dundee, Edinburgh and Glasgow doing MDs/PhDs, but they will have no posts to move into as clinical academics unless new posts are generated. In the broader context this problem of loss of clinical academics has been identified by the Walport Report and by the implementation of the Scottish Clinical Research Excellence Development Scheme (SCREDS). This scheme if targeted to critical specialities such as pathology will help, but there is concern that the dominant clinical specialities will take the small number of post available. The SCREDS programme links with the Academic FY2 Training Scheme, whereby four month placements will be made in specialist areas, with attachment to the academic departments. The number of these posts will approximate to the number of Lectureships that will be available in the SCREDS training programme. In the SCREDS programme ST1 appointees who succeed in obtaining an academic training programme will be called clinical lecturers and will have 20% of their time for research or teaching. They will probably take one year extra for their training and can step out of programme to do a higher degree. It would be expected that a proportion of these trainees will win competitive Senior Fellowships and Clinician Scientist posts in the future.

4. It is predicted in England that by 2010 that there will be an excess of qualified pathologist for the number of consultants posts available. This has already started a trend in England for trainees to do MDs and PhDs so that they are more competitive. It is important to know the predicted number of consultants vacancies in Scotland and the number of qualified trainees to see whether the same situation will arise. It is the impression that there is a policy not to increase consultant numbers to meet the agreed and predicted increase in work load, but to employ clinical specialists and to train BMS staff to take on more of the work currently done by consultants.

5. It was noted that the Pathological Society meeting at UCL was very poorly attended from Scotland. A survey is to be carried out by the Pathological Society to tabulate the numbers of abstracts submitted by individual departments over the last few years. It is, however, to be predicted that the decline in Scotland is greater than in other major centres in the rest of the UK. A good start to reverse this would be to encourage trainees to join the Pathological Society and to attend the Summer Meeting in Glasgow.