

RCPATH/IBMS Histopathology Reporting Conjoint Board Meeting

A meeting of BMS Conjoint Board Meeting was held on Thursday 31 March 2022 at 10:30 am via Teams.

Confirmed Minutes

Present:	Dr Gerry van Schalkwyk (GvS)	Consultant Histopathologist and Chair
	Ms Sarah May (SM)	Deputy Chief Executive, IBMS
	Dr Bryan Green (BG)	Consultant Histopathologist
	Dr Jo Horne (JH)	Consultant Biomedical Scientist
	Prof Roger Hunt (RH)	Consultant Histopathologist
	Mr Patrick Kumah (PK)	Consultant Biomedical Scientist
	Dr Angus McGregor (McG)	Consultant Histopathologist
	Mr David Muskett (DM)	Biomedical Scientist
	Dr Guy Orchard (GO)	Consultant Biomedical Scientist
	Mr Andrew Usher (AU)	Histopathology Manager and Deputy Chair
	Mr Chris Ward (CW)	Head of Examinations, IBMS
In Attendance	Dr Lisa Ayers (LA)	HSST Training Programme Director
	Dr Meleri Morgan (MM)	Consultant Histopathologist

1. Welcome and Introductions

Dr Gerry van Schalkwyk welcomed everybody to the meeting.

2. Apologies for Absence

There were apologies from Ms Jo Brinklow, Prof Berne Ferry and Dr Akhtar Husain.

3. Unconfirmed Minutes of Meeting Held on Wednesday 24 November 2021

The minutes were accepted as a true record of meeting. Mr Ward confirmed that following the last meeting that he had worked with Ms Brinklow on the publication of appropriately redacted versions of the minutes from the meeting of the last two years of the Board and that these have now been published on the Council area of the IBMS website and the Fellows area of the College website.

4. Unconfirmed Minutes of Histopathology Reporting Dermatopathology Meeting held on Friday 25 February 2022

Draft minutes of the meeting, chaired by Prof Mike Osborn between members of the Conjoint Board and candidates on the dermatopathology pathway and their educational and/or clinical supervisors about Stage D of Histopathology Reporting Training for that pathway had been circulated confidentially to the CJB. Mr Ward stressed the minutes were not for wider circulation as he was waiting comments from Prof Osborn. He

agreed to circulate the updated version of the minutes once those comments had been received. **ACTION: CW**

Dr van Schalkwyk felt that this had been a positive meeting during which it had been stressed to the candidates and their educational and/or clinical supervisors that the curriculum and assessment arrangements for Stages A, B and C were not being altered. Prof Osborn had clearly explained the reasons behind the limited nature of agreed specimens that would be assessed by the Conjoint Board in Stage D along with the fact that locally an employer could decide to assess competence in a wider range of competencies (specimens).

It was agreed that the College and the IBMS would work together to produce a carefully worded messaging about the outcomes of this meeting that made clear that departments can locally decide to assess the competencies of individuals which go beyond the agreed specimen types. **ACTION: CW, SM, GvS**

Board members expressed a desire that in the longer term the dermatopathology pathway was brought into line with the other approved pathways. Dr van Schalkwyk suggested that one way this could be achieved was if more histopathologists joined the specialist interest groups. Mr Ward added those who had attended the meeting in February had been encouraged to apply to join the British Society of Dermatopathology (BSD) and to also inform the Specialty Advisory Committee for Dermatopathology of any issues that they feel there are with the current External Quality Assurance scheme in this area as all EQA schemes are currently being reviewed by the College to ensure that they are fit for purpose.

5. RCPATH response to letter from Dr Chohan on Biomedical Scientist Histopathology Reporting

Mr Ward explained that he had circulated with the papers for the meeting the response that the College had written to Dr Brinder Chohan. Board members queried whether this response had been sent to anyone else other than Dr Chohan if it was going to be published on doctors.net website and/or as an open letter in the College bulletin and the status of the proposed FAQ document and drop-in session which had been discussed at the previous Board meeting.

Post-Meeting Note: Ms Brinklow confirmed to Mr Ward that Dr Chohan had been sent it but had not yet replied to it. She also stated that whilst there were no plans for this to

be published on doctors.net the response did include a request to publish an anonymised copy of both the letter from Dr Chohan and the response from Prof Osborn on the College website and that separately Dr Osborn was writing an article about extended roles for ACP News which incorporates some of the points in the letter.

It is hoped that the publication of this response and this article will deal with the factual inaccuracies, misconceptions and misunderstandings that appear to exist around the reporting qualification and can act as set of a FAQs.

Ms Brinklow also informed Mr Ward that due to some outstanding issues yet to be resolved, the College would wait to organise the proposed half-day drop-in session where questions and queries about the reporting qualification could be answered. Members of the Conjoint Board will be asked to be part of this event along with other key College individuals including Prof Osborn, Dr Bateman and Ms Brinklow.

ACTION: COLLEGE

Board members are reminded that following this session the IBMS, RCPATH and National School of Healthcare Science are planning to work together to produce a joint statement on Reporting Qualifications. This statement will also highlight the role of the National School and the work that is taking place on the Scientist Training Programme (STP) and Higher Specialist Scientific Training (HSST) programme.

ACTION: ALL

6. Current Issues for Reporting Qualification – Proposals for the Development of Limited Scope Options

6.1 Bowel Screening Pathology Specimens

Dr Morgan explained the proposed curriculum for a reporting qualification to support the bowel screening programme that she had developed based on the gastrointestinal polyps curriculum, previously developed by the Board. She explained that once people had passed the assessment that they would be able to independently report the non-advanced polyps.

Board members thanked Dr Morgan for the work that she had done. They made some suggestions as to changes that could be made to improve the deliverability of the proposed qualification such as reducing the number of work-based assessments required, clarifying more precisely what type of specimens that are included within the scope of the qualification and the numbers of cases that should be included in the log. Also to be included was the requirement that those undertaking the qualification

should have a broad understanding of issues around NHS governance and screening. Dr McGregor agreed to the point made by Dr Morgan that in terms of good governance the final exam would be an essential part of the qualification and commented that he would be happy to assist in the organisation of such an examination.

Dr Morgan indicated that the success of the qualification would need to be formally evaluated as the work in Wales was being funded as pilot. Dr McGregor stated that he felt that was likely to be a lot of interest from GI reporters in undertaking this qualification including those who are already on the wider GI curriculum qualification. Board members agreed it could and should be launched as a qualification that would be available to candidates from throughout the UK.

In response to a query raised by Mr Kumah on the level and title of this qualification, it was felt that it constituted a level commensurate with an Advanced Specialist Diploma (ASD), albeit with a more limited scope. A suggested title would be brought to the Board that made clear it was a Reporting qualification that covered a limited scope of practice.

ACTION: SM and CW

Dr van Schalkwyk and Dr McGregor confirmed their understanding of the governance of the Conjoint Board, which meant that as this qualification is part of the existing GI module, the Board is only required to inform the College Cellular Pathology SAC of the project, rather than seek permission for its development. Mr Ward agreed to confirm with Ms Brinklow whether this was the correct approach.

Once confirmation has been received, Ms May agreed to work with Mr Ward on a communication to go to Ms Brinklow and the SAC. The communication would summarise the proposals and include details on how it could act as a staged competence to allow for the independent reporting of a limited range of stage of specimens at an earlier stage, how such a limited scope qualification could feed into the full qualification pathway and explained that this we hope to be able to recruit to this from September 2022.

ACTION: SM and CW

6.2 Gynaecological Specimens (Cervical Biopsies and LLETZ)

Dr van Schalkwyk stated he felt that the Board should seek the input of the British Association of Gynaecological Pathologists (BAGP) on this work and that it also needed to inform the SAC of the development of this limited scope qualification. Dr McGregor agreed that it would be engage with the BAGP but suggested that before this happened that the qualification needed to be reviewed as it had been initially developed some

time ago and was not completely comparable to the proposed limited scope GI qualification. He opined that the Board should aim to get the limited scope GI qualification signed off first and then mirror the limited scope gynaecological qualification on that agreement.

Dr Horne agreed to do some initial work to bring this qualification in line with that being proposed for the gastrointestinal polyps after which Dr McGregor and Dr van Schalkwyk and any other interested member of the Board would have a short meeting to discuss the proposal so that it can be then discussed at the next full Conjoint Board meeting.

ACTION: JH, GvS and McG

6.3 Development of Uropathology and Breast Pathways for Reporting Qualification

Dr van Schalkwyk highlighted the request to the Board from a hospital in Coventry to develop a pathway in urological pathology. After a discussion it was agreed that it would firstly be sensible to test whether there was widespread service need for such a qualification and that this could be done by Mr Ward contacting departments to assess the level of demand. This could then be used as evidence in a proposal that would need to be put forward to the College SAC before work commenced. **ACTION: CW**

Dr McGregor indicated that if the development of such a pathway did proceed, he knew a colleague who would likely be willing to help the development of the curriculum. It was also agreed that any work on the curriculum would also need to involve the British Association of Urological Pathology.

Mr Kumah asked about the potential development of a reporting qualification in breast pathology. It was suggested that there may be more resistance to the development of a qualification in this area and that it would be difficult to develop two qualifications at the same time and that it might be better to concentrate on the development of the urology. Prof Hunt stated that if in the future it was decided that there was sufficient service need to develop a qualification for breast pathology that he would be happy to lead on its development.

7. Current Status of Candidates on Histopathology Reporting Qualification

Mr Ward had circulated a report showing how many candidates were at each stage of the qualification. He offered his thanks to all those involved in the Stage A exam that had taken place in Cheltenham in the previous week.

7.1 Assessment Arrangements for Remainder of 2022

Mr Ward explained that he had received exam queries from registered candidates and therefore wanted to communicate with them shortly the precise dates for the second Stage A exam series and the Stage C exams and their respective application windows. The exams are provisionally scheduled to take place in September and October.

Dr McGregor indicated the likely dates for the exams in 2022 and March 2023 but stressed that these had yet to be confirmed by the College. Mr Ward indicated that he would liaise with Dr McGregor and Ms Brinklow to agree the dates and from that he would work out the deadline of the submission of the portfolios. He would then inform all registered candidates of these arrangements. **ACTION: CW, JB and McG**

7.2 Training for those on Reporting Qualification

Dr Horne indicated that she had been approached by candidates around delivering a training session on the Stage C examination and that after a discussion with Dr McGregor she was planning to develop a session that would act as a toolkit to enable candidates and their supervisors to develop their own mock exam. She agreed to finalise the details of this Teams session and then would liaise with Mr Ward so that the event could be publicised to all those on Stages B and C of any of the pathways of the Reporting qualification. **ACTION: JH and CW**

8. AOB

8.1 Advert for Reporting Qualification

Dr van Schalkwyk asked about recruiting new candidates to the reporting qualification. Mr Ward explained that candidates could now apply to join at any time throughout the year and that the IBMS website had been updated to reflect this fact. The Board was reminded it had been agreed that the IBMS and College would do more to promote the availability of the reporting qualification but that this would not happen until after the drop-in session referred to earlier had taken place.

8.2 Meeting with Candidates and Educational/Clinical Supervisors

Board members agreed to the proposal put forward by Dr van Schalkwyk that meetings should be held with candidates on the gastrointestinal and gynaecological pathology pathways and their educational and/or clinical supervisor where issues pertinent to them could be discussed. It was also agreed that the invitation to these meetings should also be extended to Prof Osborn and Mr Wells. Mr Ward agreed to firstly liaise with Dr

van Schalkwyk on potential dates and agenda for these meetings before the invitation was sent out to others. **ACTION: CW and GvS**

8.3 Conjoint Board Membership and Governance

Dr van Schalkwyk queried whether he was at the end or coming to the end of his term as Chair of the Board and if he was who would assume the role Chair. Other members also queried whether they had completed their terms on the Board. Mr Ward explained that the Terms of Reference indicate that the Chair would alternate between the College and the IBMS with the Deputy Chair assuming the role of Chair once the term of the Chair had been completed. Mr Ward agreed to check how long each member has been on the Board and would bring this information to the next meeting of the Board for a discussion on the future membership of the Board. **ACTION: CW**

8.4 Exam Structure

Dr McGregor suggested, based on his experience in the development of the examinations, that he felt there needs to be a discussion as to whether continuing to replicate the FRCPath arrangements is appropriate for these qualifications or whether these should be adapted so that they better assessed the microscopic interpretive competence of the scientist candidates. He also felt it would be useful to review the Stage A examination, which now has a defined structure but with varying content. This was agreed by the Board, and he agreed to produce a short briefing paper for the next agenda. **ACTION: McG**

8.5 Workforce Planning

Following a discussion, it was agreed to invite Ms Jane Mills, Head of Pathology Transformation for NHS England to a future meeting of the Board so there could be a discussion on how the Reporting qualifications could contribute to workforce planning. **ACTION: SM**

9. Date for Next Meeting

Mr Ward agreed to do a Doodle Poll to set a date for the next meeting of the Conjoint Board which would likely to be in the early summer. **ACTION: CW**

The meeting concluded at 12:00.

Action Log

ACTION	WHO	DATE
Mr Ward to circulate updated minutes of the Skin meeting held in February once comments have been received from Pro Osborn	CW	15/04/2022
Statement on assessment of competence for Stage D of Reporting qualification	SM, CW, GvS	27/05/2022
College to organise and host a drop-in session to address issues around the qualification	College	TBC
Produce joint statement on the direction of the Reporting Qualification	ALL	Summer 2022
Ms May and Mr Ward to propose titles for new ASD in Histopathology Reporting qualifications	SM CW	27/05/2022
Produce document to inform College Specialty Advisory Committee on development of gastrointestinal polyps qualification	SM CW	27/05/2022
Meeting to discuss proposed cervical biopsies and LLETTC curriculum so paper can be brought to next meeting of Board	GvS McG	Ahead of next meeting
Contact histopathology departments to ascertain potential demand for urological reporting qualification	CW	For next Meeting
Mr Ward to inform all registered candidates of the assessment arrangements for the remainder of 2022 once they have been agreed with Ms Brinklow and Dr McGregor	CW JB McG	27/05/2022
Advertise training event for those on Stages B and C of the reporting qualification that will enable them to run a mock exam	CW JH	15/04/2022
Set dates for meetings with members of the Conjoint Board and candidates and their educational/clinical supervisors for candidates on gastrointestinal and gynaecological pathways	CW and GvS	Summer 2022
Prepare paper on Board membership for discussion at the next Board meeting	CW	For next Meeting
Prepare briefing paper to enable discussion on examination arrangements for Reporting qualification	McG	For next Meeting
Invite Ms Jane Mills to future meeting of Conjoint Board	SM	
Date for next Conjoint Board Meeting to be agreed via a Doodle Poll	CW	
On-Going Actions		
Dr van Schalkwyk to highlight key issues from Board meetings to the Cellular Pathology Specialty Advisory Committee (SAC)	GvS	
Board members to inform Mr Ward of training courses/events that would be of benefit to those on Reporting qualification	ALL	
Mr Ward to discuss with Ms May production of regular newsletter for those on Reporting qualification	SM CW	

On-Hold Actions - This action to be picked up if and when it is decided to proceed with the development of the Generic Curriculum		
Dr McGregor to produce paper summarising options for future assessment arrangements for Reporting qualification	McG	