

I have developed a Pavlovian response when I see consultation documents peppered with images of happy smiling employees in lovely healthcare settings; I start to sigh deeply and experience alternating waves of irritation and depression because we have all been here before and nothing you or I say to suggest how we might achieve healthcare nirvana will make any difference.

Public Health England has just closed a 140-page consultation entitled *Facing the Facts, Shaping the Future*. Having the right workforce is key to delivering quality and sustainability and I appreciate that the public sector is in a financial stranglehold because of the economic black hole. What I can't stomach is the inference that with a few bright ideas we will be able to make it right again. We won't; healthcare is an overstretched and under-funded system and something has to change, and here is the point of my issue. I respond far better to honesty than to the sanctimonious phrases of consultation language. Those in charge must accept that healthcare is underfunded but also must hold to account a health department that ignores opportunities to be creative with the resources it has.

To effect change there needs to be a genuine desire to curtail the culture of professional protectionism and exclusivity. Biomedical scientists are the largest professional group in pathology and are now slowly taking on consultant scientist roles. Where this has happened

# CHANGE IS NEEDED



Opportunities to be creative with resources have been ignored for too long

it has been highly successful, however, these initiatives have been piecemeal and have largely depended upon the relationship the IBMS has with the Royal College of Pathologists. A significant opportunity was missed by the Modernising Scientific Careers project, the legacy of which is a system that does not recognise achievement, utilise opportunity, or reward ability. It is a source of frustration that at a time when ideas for utilising talents and skills are being sought the biomedical scientist workforce is prevented from accessing Higher Specialist Scientific Training (HSST), which would open consultant level opportunities across the whole of pathology, not just in discrete areas of histopathology. To add insult to injury,

the consultation concluded by asking how we can ensure that our NHS staff make the greatest possible difference to delivering excellent care for people in England? It has always been our belief that this is exactly what we already do.

I recall the last workforce consultation from eighteen years ago *A Health Service of all the Talents: Developing the NHS Workforce*. I think I am going to offer my services for or drafting the sequel to the latest consultation and call it "Ignoring the Facts, Wasting the Opportunities".

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