o one can be unaware of the impending consolidation and reorganisation of pathology services in England as part of the network formation programme, which is going to happen rapidly and soon; complacency or denial are not options. The objective of this massive exercise is cost saving and we all know that the biggest cost burden to the health services is staff costs. With this in mind, it is imperative that managers, and by that I mean those at the sharp end who know the requirements for the provision of a safe service, are able to robustly defend their view on the number and skill mix of staff required to deliver the proposed reconfigured services. To aid them, the Institute is currently developing a workforce planning tool to enable them to provide evidence against a national benchmark.

Before you dismiss this as yet another data collection exercise, I want to make clear that the Institute has no motive other than to provide help to scientists and managers who know what is, and what isn't, an acceptable safe model. We accept that we are not going to spectacularly succeed where others have failed, but we want to be confident that we have established the UK acceptable average range in respect of numbers and skill mix in the broad laboratory categories of blood sciences, infection sciences and cellular sciences - we recognise that one size does not fit all.

A CALL TO ACTION



We are the experts who know what constitutes a safe and acceptable level and mix of staff.

From this, data laboratories will then be able to identify where on an "acceptable average spectrum" their current and future planned service sits, or, more importantly, whether they could constitute an unsafe outlier. The more laboratories that participate in the initial data gathering exercise the more accurate a picture we can achieve and the more reliable the subsequent benchmarking exercise will be for laboratories who wish to use it to assess how their service compares. It is a brave or reckless person who is prepared to ignore professional opinion backed up by hard evidence.

I will send staffing and workload templates to as many laboratories as are willing to participate in order to first establish the UK-wide picture. We

guarantee that all data returned will be anonymised and will not be shared. There is no motive other than the need to establish a broad benchmark. Completion of the initial data gathering is not restricted to members and neither will be the subsequent benchmarking tool. As the professional body for biomedical science, we exist to uphold safe professional standards; not to save money and not to defend indefensibly wasteful services.

If you or your manager would like to be a part of the initial data gathering, please email me at sarahmay@ibms.org

Sarah Mav

Deputy Chief Executive



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