

## Far-reaching pathology framework in GIRFT report aims to shape a more effective and efficient service for patients

A far-reaching framework to help shape the future of NHS pathology services is outlined in the Getting It Right First Time (GIRFT) national report for pathology, aiming to ensure the right test is carried out at the right time, with the right answer for each patient.

The GIRFT clinical team developed the overarching framework, called **The Clean Framework**, to support and guide pathology labs across England to improve the patient experience by prioritising quality and value throughout the 'end-to-end' process – from the point at which a clinician considers a test to the patient's understanding of the results.

The report recommends that The Clean Framework is established as the governing ethos for pathology testing – including tests for COVID-19 – and as the basis of pathology accreditation throughout the healthcare system. GIRFT is now working with national bodies to embed the framework across the whole end-to-end pathway, starting with primary care and emergency departments.

Most patient interactions with the NHS involve pathology, which tests cells, tissues, blood, serum and other bodily fluids to investigate, diagnose and monitor disease, and to guide clinicians in their treatment. Pathology labs in England carry out 1.12 billion tests every year – roughly 20 tests per person – representing £2.2 billion of NHS funding.

The GIRFT team looked at data from more than 140 trusts in England offering pathology services to shape the 21 recommendations in the new report, as well as conducting face-to-face and virtual meetings with most, and highlighting areas of good practice. As well as focusing on the patient and prioritising quality throughout the test pathway, the recommendations aim to support best clinical practice, strengthen the value of testing, build an integrated pathology service with mutually supportive teams, and future-proof pathology with strong data and digital foundations.

Key to future improvement is ensuring that pathology networks and labs are helped to widen their focus to include the pre-analytical and post-analytical stages of the diagnostic pathway. **The Clean Framework** describes the elements that need to be in place to deliver the most effective service for the patient, to include:

**Clean in (the pre-analytical stage):** ensuring that tests ordered are appropriate and optimised, that samples are collected, labelled and stabilised correctly, and that they are delivered to the lab on time.

**Clean through (the analytical stage):** ensuring that quality control and quality assurance measures are in place and/or expanded to minimise errors, and that results are processed in a clinically relevant timeframe.

**Clean out (the post-analytical stage):** ensuring that turnaround times reflect the urgency of the test, and that labs are using the same criteria to define 'normal' results to ensure harmonisation of digital reporting and provide clinical interpretation of the results.

The report encourages a view of pathology as an end-to-end service, starting with the first clinical encounter that leads to the right test being requested, and ending with the right results going back to the right patient in a way that they can understand and in the right timeframe.

It recognises that delivering The Clean Framework will require extensive changes to the systems that support labs and enable their work. It therefore makes recommendations for wider, systemic changes which can bring long-term improvement in three core areas:

- **Quality:** For example, the report recommends the introduction of condition-focused Care Sets and diagnostic pathways to help to ensure the most appropriate tests are requested. Improving the quality of the requesting process will reduce the number of unnecessary tests, which is costly as well as confusing for the patient. GIRFT recommends that the quality of the service should be underpinned by a co-produced accreditation service for testing, wherever it is undertaken.
- **Data and digital delivery:** Working towards data interoperability – ensuring there is a common 'language' so that NHS data systems can talk to each other – is the key to future-proofing pathology so that new innovations can succeed. The GIRFT team found wide variation in the way data is recorded, accessed and transferred, leading to difficulties for clinicians and patients. The report recommends that a national roadmap for data interoperability and end-to-end paperless pathology is developed as a matter of urgency, driven by clinicians.
- **Service delivery:** For example, the report recommends a series of actions to ensure processes for the collection, stabilisation, transport and analysis of samples are as efficient as possible, so that patients get a timely and accurate result. The GIRFT team feel it is vital that transport is seen as an integral part of the diagnostic pathway, and any redesign of services should be co-produced with Integrated Care Systems to ensure changes are high quality and support new patient pathways.

## Report recommendations

The report outlines 21 recommendations:

1. Establish the Clean Framework as the governing ethos, overarching quality framework, and basis of pathology accreditation throughout the healthcare system.
2. Establish network-wide standards, and where useful agree at national level.

3. Establish electronic requesting and messaging as standard in all labs and with all requestors.
4. Future-proof pathology by developing a national roadmap for data interoperability and end-to-end paperless pathology.
5. Create flexible pathology networks that reflect local needs, feed into national testing needs, and that are primarily engines of quality.
6. Interrogate all tests to ensure all are:
  - based on a valid clinical question;
  - necessary, appropriate and sufficient to answer that question.
7. Reconfigure transport and sample collection services to ensure that samples reach the lab in the best possible condition.
8. Ensure all requestors are using NHS numbers consistently (apart from known exceptions).
9. Urgently investigate acute kidney injury (AKI) flags to understand variation.
10. Audit and overhaul approach to action limits, including out-of-hours protocols.
11. Ensure appropriate turnaround times, and address identified issues.
12. Develop an integrated venous thromboembolism (VTE) pathway for network use.
13. Make better use of EQA information at national level.
14. Establish a proactive, integrated approach to ensure new technology can be adopted at speed.
15. Improve regulation of in-vitro diagnostic (IVD) devices.
16. Increase diversity of staff involved in the accreditation process.
17. Embrace and support innovation in pathology, including digital pathology and improved decision support.
18. Interrogate usage and wastage data for blood products, and address identified problems.
19. Identify and close workforce gaps at a national level.
20. Review funding models for pathology.
21. Reduce litigation costs by application of the GIRFT programme's five-point plan.