

The Future of LGT Pathology Services

Update to Lewisham Healthier Communities Select Committee

8 October 2019

1. Introduction

- (1.1) LGT last briefed the Committee on this issue in October 2018. Since that time, the Trust has been working with Barts Health NHS Trust and Homerton University Hospital NHS Foundation Trust to establish an NHS pathology network in line with the NHS Improvement (NHSI) mandate published in Summer 2017.
- (1.2) The Trust is working towards implementation of the new network during 2020/21. Simultaneously, the reprocurement of Pathology services in South East London (SEL) continues to progress, with contract award anticipated in December 2019.
- (1.3) While we have not yet reached the point of business case approval, good progress is being made. The emphasis over the next couple of months will move increasingly towards strong local partnership working. This will be crucial if the system is to realise the full benefits and opportunities that working in a network will bring. All three Trust Boards will receive the Outline Business Case at their meetings in November.

2. Background and Current Service Provision across SEL

- (2.1) In Summer 2017, following a review of national pathology service provision, NHSI mandated the establishment of 29 pathology networks across England, each to be run as a hub and spoke model. All trusts were advised of the pathology network within which their service was expected to be located, with LGT identified as sitting within the SEL network, along with Guy's and St Thomas' Foundation Trust (GSTT) and Kings College Hospital (KCH) as providers of pathology services.
- (2.2) Within SEL different models currently exist for the provision of pathology services. LGT provides an in-house NHS provided service, including to local primary care (GPs) and to Oxleas Foundation Trust, whilst other providers in the sector (GSTT, KCH and SLAM) all outsource their pathology services to a Joint Venture partnership called Viapath, jointly owned by GSTT and KCH with Serco as a private sector partner. The Viapath contract expires in 2020.

3. SEL Procurement and LGT Position

- (3.1) In July 2018, SEL Trust Boards considered a paper from the SEL Pathology Programme Board, seeking approval to the issue an OJEU notice, which would launch the procurement process jointly across all participating SEL Trusts for the provision of pathology services.
- (3.2) The LGT Board considered its position at its meeting at the end of July, at which time it seemed likely that no NHS based bid would come forward. Based on this, the LGT Board determined that it should not be named specifically in the OJEU notice in order to

enable its executive team to pursue the possibility of developing an NHS network model with an alternative NHS pathology provider.

- (3.3) In September 2018, following exploratory discussions with neighbouring NHS trusts, namely Barts Health NHS Trust and South West London Pathology¹, the Board agreed that LGT should develop an NHS option with a neighbouring NHS provider.
- (3.4) Since that point a major programme of activity has been developed between the three Trusts, focusing on the opportunities flowing from ever more effective utilisation of technology, innovation and the benefits of working at scale.

4. Maintaining Local Clinical Pathways

- (4.1) In taking this decision, the Board recognised the close clinical links between LGT and the other trusts in SEL, especially the role of GSTT and KCH as specialist (“tertiary”) referral centres for patients (particularly when tests for cancer are needed). The Trust has continued to work with STP partners and the SEL Pathology Programme Board to ensure that these clinical links are not negatively affected by joining a pathology network outside SEL. When rapid patient diagnosis of pathology samples is needed (for example, for haemato-oncology), we will continue to refer samples to the local tertiary centre in SEL.
- (4.2) In the same way we are committed to maintaining established clinical pathways between our Trust and SEL tertiary centres, we are also keen to continue providing GPs in Lewisham, Greenwich and Bexley with pathology services as their established local NHS provider. Currently, however, this local GP ‘direct access’ activity is included in the SEL procurement. The STP view is that this contract will be awarded at an SEL-level on behalf of the six SEL CCG’s, which are working towards merging into one CCG by April 2020.
- (4.3) The GP direct access activity represents 49% of the total pathology activity undertaken by LGT and is thus critical to the viability of the Trust’s services. Given the risk that loss of this activity poses to local service provision and pathways, the Trust is understandably keen to retain this activity and is seeking clarity on how the decision will be taken.
- (4.4) In July 2019, LGT was advised that the decision would be based on a ‘best value’ comparison of a standard range of tests to be undertaken around December 2019. LGT has thus been working to ensure it has a price per test for comparison within this timeline.

5. Conclusion

- (5.1) In this context, it is important that all decisions on the future commissioning of local pathology services take consideration of local views, continue to support established local clinical pathways between primary and secondary care, and ensure best value for local people.

¹ South West London Pathology is a partnership formed from the St Georges University Hospitals Foundation Trust, Kingston Hospital Foundation Trust and Croydon Health Services NHS Trust

- (5.2) The local system will continue to work in close partnership to ensure that local people receive a pathology service that is of high quality. A further update can be provided to Committee members following Trust Board discussions during November.

Jim Lusby
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October 2019