Accreditation of clinical pathology laboratories in the United Kingdom: The story so far

In 1988 an ad hoc committee of the Royal College of Pathologists was set up to consider how an accreditation scheme for the assessment of NHS and private laboratories in the United Kingdom might be developed. The impetus for such a scheme was derived from discussions in Winnipeg following a meeting of the International Liaison Committee of Professors and senior pathologists from both the College and the Association of Clinical Pathologists met with their American counterparts.

In 1989 a grant was obtained from the Treasury Management Board with Authority to set up a pilot scheme in South Yorkshire, and Dr John Lileyman was asked by the Committee to establish both the documentation and the methods by which such a pilot scheme could be conducted.

Subsequent developments led to an expansion of the Steering Group to include laboratory and other professionals from the ACP, ACB and IMLS, Independent Health Care Association and NHS management with observers from the Department of Health, Scottish Health Department, the North of Ireland Health and Social Services Department and the Kings Fund. By this time the White Paper on health services had been published, giving an added impetus to the idea of medical audit, with the provision of finance for the development of such schemes.

In 1990 a phase 2 study was conducted in four regions during which more than 50 laboratories were involved. The lessons learned from the two phases has led to a continuing revision of the documentation, together with the compilation of lists of potential assessors, and a detailed itemisation of all clinical pathology laboratories in the United Kingdom. In the near future the prototype inspection for the permanent Accreditation Scheme will take place in Scotland and elsewhere.

It was quite realised that much useful information could be accumulated in the daily laboratory inspection by both a consultant pathologist and a senior medical laboratory scientific officer as a combined inspection team in each speciality, and this will probably become the pattern for the future.

Before the visit a manual, Guidelines for accreditation—what is required to achieve, is sent to the institution to be visited, together with a request to complete an application form giving details of the department. Each inspector has a manual with a checklist for each discipline based on a “tick-box” format, covering all aspects of quality assessment, organisation and administration, personnel, facilities and equipment, policies and procedures and education.

Meetings are held not only with the consultant pathologists but also with members of the junior medical and technical staff, and with the hospital manager, and elected clinical and general practitioner representatives.

The pilot studies so far carried out have shown that 55–65% of laboratories would be accredited; 10% would fail, and the remainder have remedial deficiencies.

Recently a project leader (Mrs C Blair) has been appointed and an office set up in Sheffield while regional coordinators have been appointed to each region to assist the visitation process. In the near future a permanent Independent Accreditation Board will be created with a variable ownership distributed between the Royal College of Pathologists and the Associations of Clinical Pathologists and Clinical Biochemists, the Institute of Medical Laboratory Sciences and NHS management. It is hoped to recruit other “users” to the Board, while “observers” from health departments in England, Wales, Scotland and Northern Ireland are likely to be invited to attend meetings.

An independent chairman with voting rights but unable to participate will be appointed. The Board will be advised with respect to the granting of accreditation or otherwise by advisory panels in each discipline, in which it is hoped the specialist societies and the MEQUAS panels will be well represented.

In the absence of any untoward happenings it is hoped that the scheme will be launched live in late 1991, with visitations being scheduled initially on a three to four year cycle, accreditation being continued in the intervening years by the completion of a questionnaire.

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BOOK REVIEWS

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This 43rd annual volume continues the series which is based on a selection of articles by a group of editors from 850 journals, with an abstract by the author and comments by an editor. This year the dominant theme is the application of new techniques in genetics, particularly the polymerase chain reaction, to general pathology and clinical pathology with its subspecialties. The general pathology papers as a group make fascinating reading and have been written so as to make the subject comprehensible to the non-geneticist. Apart from molecular genetics, there are review articles on the pulmonary-renal syndrome, classification of small cell carcinoma of the lung, and on fine needle aspiration of tumours. The book concludes with a list of selective new reviews, particularly in haematology. While in no way replacing a computed literature search of a specific topic, this year book gives an excellent overall review of pathology as we enter the last decade of the 20th century.

NK SHINTON


This is a simple short book illustrating the spectrum of techniques involved in clinical immunology. There are nine chapters covering antibody and cellular deficiencies, neutrophil function tests and complement measurements, cellular and immunochromatography, investigations in lymphoid malignancy, autoantibodies and allergy. A strength of the book is the inclusion of appendices on how to