

# Terms of Reference for Development of a HSE Strategy for Laboratory Services 2025-2029

Project was:

- Proposed by HSE Clinical Lead for Laboratory Services Reform on November 24 2023.
- Endorsed for submission to the Executive Management by Chief Clinical Officer on 5 December 2023.
- Agreed by HSE Executive Management Team on 12 December 2023.

## Terms of Reference

On behalf of the Chief Clinical Officer the HSE Clinical Lead for Laboratory Services Reform will convene and chair a group to prepare a draft HSE strategy for Laboratory Services 2025-2029 for consideration by the HSE Executive Management Team.

The group will include the following or their nominee, Clinical Lead for Integrated Care, National Leads for Services and Schemes, Access and Integration, People, Finance, Technology and Transformation, Communication and Public Affairs and Major Capital Infrastructure.

The review will take account of the “Review to Inform the Strategic Direction of Laboratory Medicine” and following consultation with relevant internal and external stakeholders will prepare a draft five-year for consideration by EMT. Consultation will include opportunities for written submission and discussion.

The Department of Health is a key partner in developing the strategy

The group will be supported by the Scientific Lead, Programme Manager of the National Clinical Programme for Pathology and the Administrator supporting the HSE Clinical Lead for Laboratory Services Reform.

The strategy should articulate a concise integrated vision for the role of HSE Laboratory Services and HSE funded laboratory services including those based in voluntary hospitals and section 38/39 settings. The goal of the strategy is to support the HSE to meet the needs of laboratory users, patients and the public with respect to quality, equity of access across, timeliness, efficiency and sustainability of laboratory services.

The strategy should be prepared according to the following terms:

- a) The strategy should address all HSE Laboratory Services including Clinical Advisory and Diagnostic Services, Population Screening Services, Public Health Laboratory Services and services that are funded by the HSE through outsourcing/referral of samples
- b) The strategy should reflect relevant Government policies and HSE priorities including Sláintecare, enhanced care in the community, primary care development, the implementation of HSE Regional Health Authorities, pandemic preparedness, the establishment of the National Genetics and Genomic Office, expansion of fertility services and the future relationship with the National Virus Reference Laboratory (UCD)
- c) The strategy should consider if there is redundancy in existing HSE laboratory service provision including consideration of unnecessary or potentially harmful testing and how this can be reduced or eliminated to provide a more sustainable service

- d) The strategy should consider if there are gaps in existing HSE laboratory service provision and the options and relative priority of addressing those gaps
- e) The strategy should address laboratory services are funded and resourced
- f) The strategy should address how HSE laboratory services should be governed, organised and delivered at National and Regional level. It should address the balance between centralised and reference laboratory services (national and regional), integration of services with teams where care is delivered and near patient testing.
- g) The strategy should address the role of outsourcing of laboratory services and the role of managed service contracts.
- h) The strategy should address staff structures and staffing requirement including clerical and administrative, medical, scientific, information technology and other staff
- i) The strategy should address the role of new and emerging technologies including molecular diagnostics, mass spectrometry, automation and Information Services including digitisation of pathology and the role of artificial intelligence
- j) The strategy should address infrastructure requirements (facilities and IT) for laboratory services
- k) In the event that a consensus is not achieved by the group on specific points in the strategy the majority view will be reflected in the draft strategy for consideration by EMT with an accompanying paper identifying the alternative viewpoints and the rationale

A draft report should be provided to the EMT by end of June 2024.

ENDS