Needs Assessment and Review of IMD services in the UK

Professor Anne Green

Lead Scientist www.metbio.net



Acknowledgements

- Jim Bonham , Sheffield
- Mick Henderson, Leeds
- Stakeholder Colleagues

- Mary Dowling Birmingham
- Birmingham Children's Hospital

- Public Health Genetics Unit
 - Hilary Burton
 - Simon Sanderson
- DH Genetics

- ACB Training Committee
- Royal College Pathologists (SAC Clin Biochem)
- British Inherited Metabolic Disorders Group (BIMDG)



- Set Scene/Background
- National Lab Network
- Review of National needs



UK Background – Genetics Agenda

Specialised services definition
 – Includes lab biochemical genetics

Genetics White paper monies 2001
 – huge development monies



UK Background in the Labs

lab services for IMD under pressure

- increasing workload
- demands for new tests, screening developments
- robustness of rare, v rare tests
- no manpower or training plan
- part of general clinical biochemistry (retirements & succession planning, specialisation)

lack or awareness of issues by others/DH



Metabolic Biochemistry Labs in UK





DH Genetics Project

- Form a network of stakeholder laboratories across UK
 - Communication
 - Sharing of information
 - Common practices

• Address key issues

- Manpower plan
- Training strategy
- Testing for rare disorders (service provision)
- Assay directory
- Develop guidelines
- Quality initiatives



Genetics Development Project

• DH project

- Oct 2002 - Oct 2004 (extended to April 2006)

- Hosted Birmingham Children's Hospital
- Lead Scientist
 - 0.4 wte
 - A/C support



Training Strategy

- Paediatric Metabolic Biochemistry
 - recognised sub modality (HPC)
- Lead Trainer (DH funded)
 - Dr Mick Henderson June 2004
- Local Trainers (DH funded)
 - London
 - Sheffield
 - Birmingham

• HSTs

- 8 new posts from DH Genetics
- (3 posts funded WDDs)



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Met	Metabolic Biochemistry Network	<
Bloet	WELCOME TO THE METABOLIC BIOCHEMISTRY NETWORK	
Home Page	The Network is a group of specialist laboratories providing tests for the diagnosis and management of patients with Inherited Metabolic Disorders across the United Kingdom. The group comprises 17 stakeholder laboratories and 5 associate laboratories.	
About Us Stakeholder Details	The Network was formed in October 2002 with funding from the Department of Health and is part of the NHS Genetics Services. These services are commissioned as NHS specialised services (definition set number 20).	
Stakeholder Resources Links Training and Education	Activities of the Network are co-ordinated by a Lead Scientist - Dr. Anne Green at Birmingham Children's Hospital (Metbionet@aol.com) with support from our Administrator Mary Dowling (mary.dowling@bch.nhs.uk), and is hosted by Birmingham Children's Hospital NHS Trust. See 'About us' for more details about the aims, background and current activities .	
Best Practice Guidelines Quality Metabolic Assay Directory	The Network has an assay directory to source laboratory testing services in the UK for specialist metabolites and enzymes for inherited metabolic disorders. There is also an active training and education initiative and best practice guidelines aimed to help local non specialist laboratories and clinical teams.	
NHS Funded Project	Comments/suggestions about the website should be directed to the Lead Scientist (anne.green@bch.nhs.uk) or the Administrator (mary.dowling@bch.nhs.uk)	
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23 February 2006 Associate Laboratories Workshop 22 November 2005 Amino Acid Disorders workshop

News Archive

MetBioNet Home Page

Content Disclaimer Website Management

View Stakeholder Details



Training and Education

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Met	MetBioNet	Training and Educ	ation	^
Bloet	Update on Tra	ining Activities		
1.00	Following the agreeme	nt to fund the trainer and trainee posts for t	ne Metabolic Biochemistry Network following represents the current position.	
Training and Education	Trainers			
MetBioNet Home Page	A lead trainer, Dr. Mick North, Midlands and Sc	Henderson, Leeds was appointed in July buth. These are as follows:-	2004 (0.4 wte). Subsequently further trainers were appointed for the three clusters i.e.	
Educational Resources Meetings	Northern Cluster			
Further Information	Dr. Jim Bonham	(Sheffield Children's Hospital)	shared post	
cuse study template	Professor Rodney Poll	itt	(0.4wte)	
NHS Funded Project				
Copyright © MetBioNet 2004	Southern Cluster			
	Dr. Colin Samuels	(Great Ormond Street Hospital)	(0.4wte)	
	Midlande Clueter			
	Micialius Cluster			
	Dr. R.G.F. Gray	(Birmingham Children's Hospital)	shared post	
	Miss, K. Hall		(0.8wte)	
	The 8 HST posts were	appointed to during the period November	2004 – January 2005	
	in the following centres:	0. 15		
	 Birmingham Child Southmead Hosp Bristol Royal Infiri 	dren's Hospital ital, Bristol marv		*

Training and Education - Documents

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Met Net	Training documents Current trainers and trainees Higher Specialist Trainee Log Book July 2005 Paediatric Metabolic Biochemistry: A sub-modality of Clinical Biochemistry Anne Green November 2003		
Training and Education	RC Path. Recruitment And Training Anne Green January 2003 Recommendations for A grade core training MetBioNet Training Group Spring 2005 Recruitment and Training for Clinical Scientists (Discussion Paper)		
MetBioNet Home Page	Specialist Training For Clinical Scientists Metabolic Biochemistry (Biochemical Genetics) Jim Bonham, Anne Green May 2002		

Training Strategy document Anne Green September 2003

Whilst the metabolic biochemistry network has taken every effort to provide accurate and up to date information for this website the stakeholders accept no liability or reponsibility for the accuracy or completeness of any information on this site.

All items may be subject to change from time to time

Website Management

Training documents

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Training and Education - *Presentations*

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Presentations

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DIO	Amino Acid Pot Pourri Mick Henderson May 2005 Mick.Henderson@leedsth.nhs.uk
Net	Assessing Hyperinsulinism Lesley Tetlow May 2005 lesley.tetlow@CMMC.nhs.uk
	Case Presentation: An Irritable Infant with a Surprise Diagnosis Mick Henderson August 2003 Mick.Henderson@leedsth.nhs.uk
Training and	Diagnosis of CDG Enzyme Analysis and Other Investigations Viki Worthington April 2005
Education	Fat oxidation and defects of the mitochondrial respiratory chain Simon Olpin June 2005
	Galactosaemia and Immunoreactive Trypsin Dr Jacqui Calvin April 2005 jacqui.calvin@addenbrookes.nhs.uk
MetBioNet Home Page	GSD diagnosis – can liver biopsy be avoided? Sue Alger April 2005
Chromatograms	Management of neonatal jaundice Cath Harrison May 2005
Presentations	Mitochondrial Diseases Due To Nuclear Gene Defects Garry Brown June 2005 garry.brown@bioch.ox.ac.uk
5	Mitochondrial DNA Disease: Clinical and histochemical features Doug Turnbull June 2005 D.M.Turnbull@newcastle.ac.uk
NHS	Mitochondrial Respiratory Chain Enzyme Analysis Simon Heales June 2005 simon.heales@uclh.nhs.uk
NHS Fun ded Project	Neonatal Biochemistry: Investigation for Inherited Metabolic Disorders (IMDs) Anne Green May 2005 anne.green@bch.nhs.uk
copyright of Metbloriet 2004	Organisation of Laboratory Testing Dr JR Bonham June 2005 jim.bonham@sch.nhs.uk
	Paediatric Emergencies Jean Kirk May 2005 Jean.Kirk@luht.scot.nhs.uk
	Peroxisomal disorders Guy Besley July 2003 Guy.Besley@CMMC.nhs.uk
	Presentation and investigation of mitochondrial disease in children Andrew Morris June 2005 andrew.morris@cmmc.nhs.uk
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Website Management

Metabolic Assay Directory

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Metabolic Assay Directory - Search

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Acyl carnitines (by tandem MS)

Laboratory name	Specimen	Sample requirements
Birmingham - Birmingham Childrens Hospital NHS Trust	Plasma & Blood Spot	
	plasma or serum	0.2ml
Cambridge - Addenbrookes Hospital	Blood Spot	
Cardiff - University Hospital of Wales	Blood	Blood spot - LiHeparin
Glasgow - Royal Hospital for Sick Children	Blood spot and Li Hep Plasma	50 ul
Leeds - St. Jamess University Hospital	dried blood spot, plasma	
London - Great Ormond Street Hospital	Bloodspot	
London - Guy's and St. Thomas' Trust Chemical Pathology	Plasma	1ml Freshly Frozen
Manchester - Willink Biochemical Genetics Unit	Dried blood spot	or 1ml EDTA blood
Newcastle upon Tyne - Spence Biochemical Genetics Unit	Dried Blood spots or Whole blood (0.5ml EDTA)	Send by 1st class post
	Fibroblasts	Skin biopsy or cultured cells
	Urine	1ml
	Tissue	At least 30mg send frozen
Sheffield - Sheffield Childrens Hospital		

Done

Stakeholder Details

Stakeholder Resources Links Training and Education Best Practice Guidelines Quality Metabolic Assay Directory

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Outcomes

- Training
- Web site

- Workshops
 - 2 2003/4
 - 3 2004/5
 - 4 2005/6





Outcomes

- Web site
- Training
- Workshops

Best Practice Guidelines

- 5 completed
- 11 in preparation



Best Practice Guidelines



Best Practice Guidelines



Stakeholder Details Stakeholder Resources

Links
Training and Education
Best Practice Guidelines
Quality
Metabolic Assay Directory

Home Page About Us

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Contents

Guidelines for the Biochemical Investigation of Patients with Foetal and Neonatal Hydrops
Guidelines for Investigation of Fits and Seizures (Instruction Sheet for CSF sample collection)
Guidelines for the Investigation of Hypoglycaemia in Infants and Children
Guidelines for the Investigation of Hyperammonaemia for Inherited Metabolic Disorders
Appendix - Notes on the measurement of ammonia in blood/plasma
Skin Biopsy - Information Sheet for parents/carers
Skin Biopsy - Consent form
Neonatal Jaundice in Inherited Metabolic Disorders

Disclaimer for all Guidelines

These are laboratory guidelines reflecting current base practice in specialist metabolic laboratories the UK. They are not evidence based but reflect expert opinion. The network cannot accept any responsibility for any errors/omissions and users must take responsibility for use.

Website Management

Outcomes

- Web site
- Manpower & Training
- Workshops
- Best Practice Guidelines
- Quality
 - Oversee QA (annual meeting)
 - CPA recognition as Paediatric Metabolic Biochemistry
 - EQAS summary
 - Audit initiatives



Outcomes

- Web site
- Manpower & Training
- Workshops
- Best Practice Guidelines
- Quality
- Service Provision (Questionnaire)
 - Training/staffing special skills
 - Equipment needs
 - Rationalisation/development rare tests
 - Out of hours needs



Service assessment

- Questionnaire
 - October Dec 2003
 - 100% return
- Lab size
- Core test provision
- Specialist test provision
- Equipment
- Turnaround times
- Staffing
- Training



Stakeholder Laboratories(n=16) Lab size/ Populations served

Size of Population

- 4 million or greater 5
- 3 3.9 million 2
- 2 2.9 million 6
- 1 1.9 million 3

CPA Accreditation

- 15/16 accredited



Manpower 2004/5

Clinical Scientists Grade	Number (wte)
Consultant (scientist & medical)	22 (13.6)
Principal	24 (19.85)
Senior	25 (21.7)



Manpower

- Manpower plan
 - Input to national workforce planning
 - Annual Q-update



Acyl Carnitine workload (requests p.a.) vs population served(millions)





Organic Acids workload (requests pa) vs population served(millions)





Urine amino acid workload (requests pa) vs population served(millions)





Main laboratory findings

- Vulnerability of some tests
- Compromised turn around times
- No formal out of hours service
- Accommodation increasingly inadequate
- Urgent need for new and replacement equipment (AA, GCMS)
- Need recruitment of 49 new trainee clinical scientist and 46 biomedical scientists over next 5 years
- Continuing support for laboratory network





What Next

- Dissemination of Guidelines
- Assay Directory
 - Link to disorders
 - Link to molecular

- Manpower planning & training
- Service issues





Review of National Needs for IMD – whole service

- BIMDG
- Metabolic Biochemistry Network
- Joint Committee in Medical Genetics
 - Adult services
- National review with DH support



Main areas of investigation

- Epidemiology
- Outcomes
- Review of laboratory services
- Review of clinical services
- The nursing role
- The specialist dietitian role
- Roles and view of the voluntary sector
- Specialist commissioning





How many new cases per year?

From literature

• About 900 per year

New epidemiological research

- From UK laboratory diagnoses
 - 500-600 per year
- From new diagnoses in West Midlands over a 5 year period
 - About 1 in 800 live births
 - About 800 per year in UK



Clinical teams are very patchy



Ten-fold regional variation in total clinical workforce per million population



Total clinical workforce (wte) per million population



Comparisons of regional rates of outpatient provision



Average weekly out-patient sessions per million population



Critical mass: implications for clinical governance



10-fold geographic variation in patients per 100,000 population



Estimates of shortfall for patients in specialist care

	Children	Adults
Estimated number for UK*	12103	6827
Totals reported	6547	3499
Shortfall	5556	3328

***Based on Northwest rates**



Summary of recommendations

- Strategic advisory group
- Explicit commissioning
- Clinical networks
- Strengthen laboratory and clinical services
- Developing shared care arrangements
- Manpower planning and education
- Close work with voluntary groups





Laboratory recommendations

- Continue and develop as integral part of MDT
- Increase workforce resources
- Capital investment
- Investment in education and training
- Review of accommodation
- Develop database for IMD diagnoses
- Detailed planning for very specialised tests



The End

