“Shaping the Future of Laboratory Medicine” - 2017

What next for 2018 -2020?

With Acknowledgement to Graham Beastall
Survey of IFCC Full Members: Nov 2013

• 100% are active in clinical chemistry
• >70% are active in immunology and haematology
• >60% are active in microbiology, molecular pathology
• >50% are active in genetics and virology
• <50% are active in transfusion, transplantation, informatics
• Only 2 IFCC Full Members are active in anatomic pathology

Conclusions:
IFCC should not seek to include anatomic pathology
A case can be made for greater inclusivity in laboratory medicine
Laboratory Medicine continues to face significant pressures in every country

- Quality
  - Analytical quality
  - Quality assurance
  - Accreditation

- Clinical Effectiveness
  - Clinical outcomes
  - Patient focus
  - Timeliness

- Cost Effectiveness
  - Total cost
  - Value for money
  - Appropriate use
Technological Advances lead to Integrated Diagnostics

Chemistry
Haematology
Microbiology
Immunology
Molecular
Pathology

Laboratory Medicine
Imaging
Endoscopy

Integrated Patient Pathways

Informatics & Knowledge Management

Erosion of traditional boundaries of Laboratory Medicine
Threats for IFCC

Restricted financial resources due to financial pressures on national society and corporate membership including the Medtech Code

- Ageing of our workforce and need to establish relevance to Young Scientists
- Retain our current status with global clinical organisations
- A fragmented global voice for laboratory medicine
- Limit activities to those we have experience and skills
- Remaining largely outside the development of global practice standards & guidelines
- Difficulty maintaining range and quality of services for IFCC Members
How can we respond to these threats?

• A key issue is the providing laboratory medicine specialists, including our partners in the IVD industry, with the skills to quantify the impact of clinical laboratory testing on the healthcare budget

• To expand the discussion of clinical laboratory testing from quality analytical metrics to include financial metrics for healthcare delivery
What does this need?

• Initially the development of these skills amongst a specialist group within our discipline
• More importantly we need a professional organization that can champion this discussion, firstly internationally amongst laboratory medicine practitioners, and then amongst all healthcare professionals
• A stronger IFCC is imperative
Opportunities for IFCC

- Economies of scale for Full & Corporate Members
- Improved range and quality of services for IFCC Members
- Increased credibility with global clinical organisations
- Increased focus on added value and clinical outcomes
- Increased influence with World Health Organisation
- More global standardisation & harmonisation
- More global practice standards & guidelines
- A more effective global voice for laboratory medicine
What are the major challenges for IFCC?

• The major challenge is taking a step out of the familiar
• Initially working to represent all of laboratory medicine and living up to the name we adopted in 1999:

The International Federation of Clinical Chemistry and Laboratory Medicine
How do we meet this challenge for IFCC?

There are at least three pathways

1. Individual national societies reach out to colleagues in all the laboratory medicine professional organizations for amalgamation.

2. Increase the number Affiliate Members to include societies representing our laboratory medicine colleagues

3. We accept more than one professional society as a member of IFCC

I would like to see this discussion continue over the term of the next Executive Board