NAME: Howard Morris, IFCC President
Presentation Title: Strategic Plan 2018-2020

On behalf of the Executive Board

Welcome dear delegates
IFCC Membership

Advancing excellence in laboratory medicine for better healthcare worldwide

A federation of 92 national societies as Full members and 15 national societies as Affiliate members and 41 Corporate members representing more than 45,000 clinical laboratory specialists

Why are we meeting today?

• The General Conference is held every 3 years for National Society representatives to work with IFCC officers, to identify the major issues for our profession over the coming period and to advise on a strategic plan to effectively address these issues.

• Your responses to the recent survey on the challenges facing National Societies were very useful – thank you to all who responded
Why do we need professional organizations?

Why should national societies be members of IFCC?
Why should clinical laboratory specialists join national societies?

Professional organizations need to support members through:

• Assisting them meet their daily challenges in clinical laboratory practice
• Support their pursuit of a fulfilling career
• Provide opportunities for meeting, networking and exchanging views with like-minded people
Assisting our members meet their daily challenges in clinical laboratory practice

Healthcare is facing major challenges internationally

- Growing rates of chronic diseases
- Increasing patient expectations
- Ageing of the population
- Increasing costs of medical advances
- Limited growth of healthcare budgets

Our laboratories are facing increased demands without the appropriate resources

A case study: my laboratory

The example of Central Adelaide Local Health Network (CALHN)

- August 2018: $0.25 Billion over budget out of a total budget $1.65 Billion – administrators (KordaMentha) called in to provide recommendations
- History – 2004, identified that if rate of increase of South Australia Health budget continued then total budget would be consumed by health by 2025. Actions initiated – construction of new hospital ($2.8B opened 2017), major reorganization of public healthcare under ‘Transforming Health’ program
- Despite 10 years of implementing changes, overspending of allocated budgets continues
Current strategy of KordaMentha review -

Key areas of focus:

• Workforce planning and Capacity Building

• Clinical Service Planning and Delivery Models

• Cultural Enhancement and Renewal

Where do the diagnostic disciplines stand?

SA Pathology, SA Imaging and SA Pharmacy exist outside the clinical areas in State-wide Clinical Support Services. Current involvement will be to discuss how the price of the ‘services’ can be reduced – current expenditure $0.1B. Clearly SA Health/ CALHN has a major sustainability issue but does not consider diagnostic disciplines as part of the solution other than through reducing their budgets.
Healthcare is facing major challenges internationally

- Growing rates of chronic diseases
- Increasing patient expectations
- Ageing of the population
- Increasing costs of medical advances
- Limited growth of healthcare budgets

Under these conditions all healthcare workers have a responsibility and self-interest to work towards alternate methods for delivering sustainable healthcare.

We need to be part of the solution not part of the problem.

What is the major challenge facing you?

A. Funding; budget or reimbursement constraints
B. Quality laboratory performance/ specifications
C. New technologies, new biomarkers
D. Training and continuing professional development
E. Opportunities for career development
How is the IFCC contributing?

IFCC response

• Develop tools and conduct research to demonstrate and leverage the value of laboratory medicine.
A. Funding; Budget or reimbursement constraints

IFCC response

• Develop tools and conduct research to demonstrate and leverage the value of laboratory medicine.

Why this approach?

Implementing quality analytical procedures such as standardization are necessary but are insufficient by themselves.

50 years of improving the quality of laboratory medicine has rarely been recognized across clinical disciplines nor by financial controllers.
An extra dimension is needed – publicity based on evidence

We need a high quality evidence base, including peer-reviewed scientific publications, reporting the impact of quality analytical improvements on patient and financial outcomes.

We need to generate a body of knowledge

We need to leverage the value of laboratory medicine – make use of raising the profile of laboratory medicine.

A Case Study – cholesterol assays

The adoption of traceable cholesterol assays with an imprecision of ≤ 3% and bias ± 3% (NCEP Guidelines for an assay fit for clinical purpose) was widely achieved by the end of 20th century.
A Case study – cholesterol assays

- The adoption of traceable cholesterol assays with an imprecision of ≤ 3% and bias ± 3% (NCEP Guidelines for an assay fit for clinical purpose) was widely achieved by the end of 20th century.

- Only in 2016 were patient outcomes and financial impact presented. (Wu L, Jülicher P, Liu L; ChiMei Medical Center, Tainan, Taiwan and Abbott Diagnostics, Germany Poster, ISPOR 7th Asia-Pacific Conference, 3-6 September 2016, Singapore)

- Attainment of NCEP performance resulted in savings of 131 life years and US$280,096 of CVD-related life-time costs per 1,000 subjects undergoing CVD screening.

A. Funding; Budget or reimbursement constraints

This research needs to be conducted, possibly in each of our institutions, because of differences in clinical practices, differences in expenses and differences in funding or reimbursement.

How do we transfer the knowledge and skills so that clinical laboratory practitioners in each laboratory can make these calculations in their environment?
The IFCC response: 1

The EMD has established a Joint Committee with WASPaLM on the Value Proposition in Laboratory Medicine (C-VPLM).

Aims: To conduct research on the use of the value proposition to demonstrate the impact of medical tests on patient outcome and healthcare expenditure

To develop a compendium of tools for such research to be widely conducted by clinical laboratory specialists

The IFCC response: 2 – identifying and publicising successful projects/achievements

UNIVANTS of Healthcare Excellence Award

IFCC has joined a wide-ranging partnership with AACC, EHMA, Modern Healthcare, Abbott Diagnostics and others to administer this Award

A major component of the prize for the first round winners will be the opportunity to present their work in a symposium at WorldLab 2020 Seoul
A. Funding; Budget or reimbursement constraints

The IFCC response: 3

Continue the publicity largely through CPD activities C-PR

B. Quality laboratory performance/specifications

Quality clinical laboratory practice continues to lie at the heart of optimal patient outcomes

While we seek to demonstrate the value of laboratory medicine, quality is the key component of value

The level of quality we need is identified by the quality laboratory specifications – this work is largely being undertaken by the EFLM

Defining optimal pre-analytical practice is being undertaken by EFLM and COLABIOCLI

All regional federations are conducting scientific projects
IFCC response:

The inclusion of representatives of each of the Regional Federations on the Executive Board of IFCC (commencing 2018) has brought us closer together. This renders the work being undertaken by the Regional Federations more accessible to the international audience. This work is well publicised by our colleagues. IFCC can assist to ensure the availability of this work internationally.

Standardization of assays remains a key component of quality laboratory performance. The IFCC Scientific Division continues to provide leadership; it has generated an enviable record. This work is translated into our routine laboratories by the Joint Committee for Traceability in Laboratory Medicine, (JCTLM) a partnership between IFCC, BIPM and ILAC. JCTLM is a key resource for the IVD industry to ensure the assays in our laboratories are striving for optimal quality.
B. Quality laboratory performance/
specifications

IFCC response:
IFCC Office now hosts the International Consortium for Harmonization of Clinical Laboratory Results (ICHCLR) and IFCC is an ICHCLR Council member.

22

B. Quality laboratory performance/
specifications

IFCC response:
Capitalise on our work to improve the quality of laboratory performance by calculating the impact of improved assays on patient and financial outcomes. The work of the C-VPLM will be applied in this research.
C. New technologies, new biomarkers

IFCC response:
Establishment of a fourth Division;
Emerging Technologies Division (ETD),
Chair, Prof Sergio Bernardini

D. Training and continuing professional development

IFCC response:
Continuing investment in the eAcademy as a significant on-line educational activity providing training and continuing professional development
Leverage all IFCC educational activities by focussing on the eAcademy
National Societies can utilise the eAcademy webinars as an educational resource for meetings.

This education will be enhanced if groups of members come together to listen to the webinars, discuss the topics and undertake the examination to obtain certificates.

Make the eAcademy a resource to build your national society by providing this training and continuing professional development.
E. Opportunities for career development

• National Societies can play a key role in the career development of their members by publicising and providing access for their members to the training programs of the IFCC

• The eAcademy webinar resources for enabling members gain IFCC certification or as training for their own qualifications in particular areas of scientific skills and laboratory management

E. Opportunities for career development

• Task Force for Young Scientists – programs for networking and skills development
Professional Exchange Programme (PEP)

IFCC scholarships for young scientists to:

- Promote international co-operation between laboratories
- Facilitate the exchange of young laboratory scientists between IFCC Member societies
- Share high level scientific or management skills
- Introduce new or improved scientific or management skills to the applicant’s laboratory

Applications may come from any IFCC Full or Affiliate Member national society.

Two different professional exchange programmes:

- PROFESSIONAL SCIENTIFIC EXCHANGE PROGRAMME (PSEP)
- PROFESSIONAL MANAGEMENT EXCHANGE PROGRAMME (PMEP)

Professional Scientific Exchange Programme (PSEP)

The purpose of a PSEP is to exchange or develop high level scientific information or skills.

Applications for a PSEP may come from any IFCC Full or Affiliate Member national society.

Professional Management Exchange Programme (PMEP)

The purpose of a PMEP is to develop appropriate quality management skills in order to improve the performance and quality of service offered to patients by the base laboratory.

Examples of PMEP include:

- Acquiring skills to introduce effective internal quality control;
- Acquiring skills to introduce an external quality assurance scheme to a country;
- Acquiring skills to introduce quality management to the base laboratory;
- Preparation to enable the base laboratory to apply for laboratory accreditation in line with ISO Standard 15189.

INFORMATION AND FORMS ARE AVAILABLE ON THE IFCC WEBSITE, UNDER EMD
IFCC Travel Scholarships, sponsored by Roche, allow young scientists to participate in relevant international scientific congresses and conferences. Applicants should be working in a developing country whose national society is member of an IFCC, less than 40y of age on 1 January of the year in which the congress or conference occurs. Each year IFCC promotes the scheme and lists some IFCC meetings that do qualify, but this list is not exclusive.

**ASK FOR ELEGIBILITY AND APPLICATION FORMS TO THE IFCC OFFICE!**

(ifcc@ifcc.org)

The IFCC Mentoring Programme now part of the IFCC Working Group for Personal Support (WG-PS), matches a Young Scientist with a well-respected experienced laboratory practitioner based on shared interests. The programme is conducted by e-mail and/or Skype at no cost to any participant. It enables an Associate to seek advice on any laboratory or research issue on an on-going basis. A Mentor is required to answer the Associate's questions or find someone who can.

**MORE INFORMATION AND APPLICATION FORM AT:** ifcc@ifcc.org

To date we have about 30 Associates and a questionnaire has shown that the programme is seen to be very beneficial to them.
E. Opportunities for career development

• National societies can support their members to conduct research on the value of laboratory medicine by directing them to the tools being developed by the C-VPLM

• By providing venues for their members reporting on their research in this area

• Expand the current auditing of clinical laboratory practice to include value by assessing impact of current or new medical testing on patient outcomes and financial implications for the healthcare system

IFCC Membership

Membership categories recognized within our Statutes and Rules:
- Full members
- Affiliate members
- Corporate members
- Regional Federations
Membership categories recognized within our constitution:

Full members

Affiliate members – encourage recruitment to bring into IFCC skills in disciplines other than chemistry

EB will place before IFCC Council a motion to change the dues structure of Affiliate members from a flat fee to one based on membership numbers and World Bank socioeconomic status – similar to the Full Members dues structure but at a discount because of the nature of Affiliate Membership

Corporate members

Regional Federations

Corporate Members

Aim to publicize that Corporate members have largely the benefits of Full and Affiliate members – ie access to expertise and proposals for projects

IFCC Response

• Establish a Task Force made up of Corporate Members to identify and prioritize CM needs in particular with reference to possible projects. Projects will be assigned to the appropriate Division.
• Promote to Corporate Members the use of the IFCC Registry of Experts.
Thank you for your attention and Questions and Comments