

Policy

Subject: Ageing Pathologists
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Pathologists have the ultimate responsibility for laboratory supervision and reporting of test results. They have to oversee quality and safety standards of the laboratory and advise clinicians on the interpretation of test results and further investigation of the patient. The College acknowledges the skill, dedication and contribution of pathologists who have long distinguished careers spent delivering on these expectations. The College also recognises that the medical profession is ageing in parallel with the wider community and that this has implications for both workforce planning and for ensuring these high standards are maintained. Pathologists are not immune to the effects of known age-related sensory and neurocognitive changes, such as a decline in processing speed, reduced problem-solving ability and fluid intelligence, impaired hearing and sight and reduced manual dexterity.

Determining exactly how ageing affects pathologist's performance isn't straightforward and nor is it easy to decide at what point older pathologists should be encouraged to retire rather than be encouraged to improve their skills.

Knowing when to give up work is an important decision for most pathologists and a critically difficult decision for some. A constructive, proactive approach that balances patient safety with the rights of pathologists who have provided a lifetime of dedicated service to their communities is required. Careful planning is required to reduce the emotional and psychological effects.

Employers faced with managing the ageing pathologist workforce should consider having a process for transitioning to retirement and workplace flexibility to allow for adjustments. It is a matter for the employer to act on concerns raised by colleagues, referring clinicians, accreditation agencies or registration authorities or on information arising from internal or external clinical audit indicating that there may be performance issues impacting on patient care.

For older practising pathologists:

- Plan for retirement. Thoughtful planning can help to ease the emotional and psychological adjustments involved in retirement from practice. These may include part-time work towards retirement, reduced after-hours call and shift work and reduced exposure to acute clinical work, with an increased focus on mentoring, teaching, administration and research.

It is important for all medical practitioners to have their own general practitioner. The older pathologist should consider having regular medical checks, including of vision and hearing, and may consider slowing down in aspects of laboratory work that require rapid cognitive processing.

- Listen carefully to the concerns of colleagues, friends and family. Given that pathologists have limited ability to self-assess performance, the observations of others can be helpful.
- Maintenance of full Continuing Professional Development requirements is mandatory for medical registration and therefore clinical practice. The older pathologist must fulfil these requirements, even when reducing clinical load or scope of practice. For morphological and interpretative disciplines, undertaking Internal Quality Assurance (IQA) framework to monitor their internal performance and also doing a minimum of 20 hours of activity under Category C - Quality activities outlined in the RCPA CPDP Manual. This includes a mandatory minimum of 10 hours per annum of peer review.
- Carefully consider finding interests outside medicine. Those worried about loss of income should receive financial counselling.

Prior to Retirement

Medical Records

Medical records need to be handed to the employer or new business owner or arrangements made for storage and access if winding down a solo practice:

- to ensure that they are available for patients' future treatment needs.
- in case of a complaint regarding treatment previously provided.
- to comply with record keeping legislation and NPAAC guidelines.

Advising Others

The pathologist should notify colleagues of retirement and the arrangements implemented for the continuing care of patients.

The pathologist should notify authorities and consider whether details need to be amended with professional bodies such as Medical Boards (non-practising registration is available in Australia). The College has a standard form to complete for retirement purposes so that fees will no longer be charged, but members can retain access to College publications/website. A retired Pathologist, who is not in active practice, may retain their post-nominals.

Medical Indemnity Insurer

The pathologists should inform their medical indemnity insurer as soon as possible of any plans to reduce work hours, undertake alternative medical work (including volunteer work), provide gratuitous service, or retire. This allows appropriate policy amendments to be made.