# Institute of Biomedical Science 12 Coldbath Square, London EC1R 5HL

Tel: 020 7713 0214 • Fax: 020 7837 9658

E-mail: mail@ibms.org Website: www.ibms.org



Chief Executive Jill Rodney

9 October 2015

Dr Paul Cross Consultant Cellular Pathologist Department of Pathology, Queen Elizabeth Hospital, Tyne and Wear, Gateshead, NE9 6SX

**Dear Paul** 

#### Re: Role of Biomedical Scientists within the provision of a non-gynaecological cytology service

Thank you for giving the Institute the opportunity to comment on this helpful and comprehensive document. We feel this is timely and will be welcomed in cytology, particularly in the light of the expansion of biomedical scientist roles and the introduction of the two and conjoint examinations on non-gynaecological cytology (NGC).

The document has been circulated to the Institute's Council and also to our Cytopathology Advisory Panel and we would wish to make the following comments and recommendations:

#### Nomenclature

Please could the title 'biomedical scientist' be used throughout the document rather than the BMS acronym?

#### Sample preparation

In most organisations standard operating procedures (SOPs) are produced and agreed by the quality department where the medical head is also a member.

#### Reporting

It may be helpful to commend the practice of pre-screening of non-gynaecological samples by a biomedical scientist prior to reporting as it improves quality and is a valuable means of training for biomedical scientists.

In view of the medical representation on the quality committee, could the agreement for biomedical scientist reporting of negative NGC be reworded to require agreement within the department's quality assurance processes rather than solely with the medical head of department?

In respect of biomedical scientist staff who hold the Advanced Specialist Diploma in Cytology, we feel an additional sentence should be added to this paragraph to state words to the effect: "As is

the case for Pathologists, no biomedical scientist should be working in isolation, and should have access to colleague(s) for case discussion.

## Sample assessment of adequacy for reporting

In respect of adequacy assessment for reporting we would suggest that the statement regarding this as a delegated role is removed and instead made dependent on competency and service needs.

## **Multi-disciplinary Team Meetings (MDTMs)**

We request that the following sentence is added to the paragraph:

"Biomedical scientists who hold the Advanced Specialist Diploma in Cytology can review and present appropriate cytology (ref. IBMS/RCPath ASD guidelines).

### **Clinical Scientists in Cytology**

Although the roles of biomedical and clinical scientists can have a considerable degree of overlap, the Health and care professions Council (HCPC) Clinical Scientist Standards of Proficiency state that they are able to practise as an autonomous professional, exercising their own professional judgement. The inclusion of a specific reference to clinical scientists in this document as separate from biomedical scientists should include this clear distinction.

The Institute would be happy to discuss any of the points it has raised if required.

Yours sincerely

Sarah May

**Deputy Chief Executive** 

sarahmay@ibms.org