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Chief Executive Jill Rodney

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Dr Brendan Cooper President, AHCS 1 The Terrace Rugby road Lutterworth Leicestershire LE17 4BW

Dear Brendan

Re: NHS England Medicines Scoping Project

In response to the request for professional bodies to input in to the project to determine whether there is a need to extend the current prescribing and medicines supply mechanisms, the Institute of Biomedical Science supports the need to allow healthcare scientists as a professional group to be eligible to prescribe where appropriate. The current bar to healthcare scientists prescribing has prevented role developments while expanding opportunities for nurses and pharmacists to extend roles in to territory that could be considered equally as that of healthcare scientists. In respect of biomedical scientists the Institute would wish to make the following points:

Biomedical Scientists in Transfusion Science sometimes prescribe anti-D immunoglobulin, although the amount prescribed would depend on the size of the feto-maternal haemorrhage (and, to a certain amount, the woman), and this is often calculated by a physician. In addition to prophylactic anti-D biomedical scientists are also involved in the provision and prescription of blood products (not blood components) which are classed as medicines and which include:

- Haemostatic drugs (clotting factor concentrates, PCCs etc.)
- Solvent detergent treated plasma (e.g. Octoplas)

In the warfarin clinic context, in addition to the prescription of Warfarin, there is also the issuing of Vitamin K as a reversal agent.

Any extension of prescribing rights to healthcare scientists should include both HCPC registered biomedical scientists and clinical scientists. This would recognize the likely longer term situation in primary care where the individual undertaking diagnostic monitoring for a range of long term conditions, where diagnostic result based therapeutics is not limited to just clotting, is a scientist.

An issue that should also be considered is the required training. A negative aspect of the current prescribing training is that its scope is so substantial that an individual may be deterred from undergoing such an extensive programme simply to issue Vitamin K. Consideration of the necessary scope of the training programme may be required in order to prevent it being a disincentive to potential applicants.

The Institute would be pleased to offer its input in to any appropriate workstream that derives from this project, however, I have been contacted directly by Suzanne Rastrick requesting that the Institute nominates its own representative to both the scoping project and also to the programme board so I have submitted names directly to Suzanne.

Yours sincerely

Nick Kirk

President