



Long Term Biomedical Scientist Workforce Plan

Ensuring the NHS has the biomedical
scientist workforce it needs for the future

FOREWORD

The Institute of Biomedical Science (IBMS) Workforce Plan presents a bold strategy for the UK to develop the biomedical scientist workforce to operate at the highest levels of practice through training, experience and professional qualifications.

In 2017, Health Education England (HEE) launched a draft workforce strategy *Facing the Facts, Shaping the Future* for consultation. It predicted that if demand-led growth for healthcare remained constant, 190,000 new posts would be needed by 2027. Fast forward to 2023 and the new NHS England (NHSE) *Long Term Workforce Plan*¹ predicts a shortfall of between 260,000 and 360,000 staff by 2036/37. It also identifies “the lack of a sufficient workforce, in number and mix of skills, is already impacting patient experience, service capacity and productivity, and constrains our ability to transform the way we look after our patients”.

In the same year, the Royal College of Pathologists (RCPATH) surveyed its histopathology workforce² and the responding departments showed:

- Only 3% had enough staff to meet clinical demand, and this demand continues to grow.
- A quarter of all histopathologists are aged 55 or over and there are insufficient trainee doctors in post to fill the gaps in the workforce.
- Of the departments who responded to questions on costs, around £9.8m a year is spent on locums, covering 77 posts at an annual average of £127,000 each. If this figure was extrapolated to cover the UK, it equates to around £17m.

Cancer Research UK’s document *Testing Times to come? An evaluation of pathology capacity in England*³, published in November 2016, identified that while cancer survival is at its highest ever level, the health services are under increasing pressure from increasing cancer incidence. It estimated that, with a growing and ageing population, the projected increase in the number of cancer cases would be more than 40% above current levels to about 514,000 new cases per year in 2035.

Two of the report’s key recommendations were to “ensure biomedical scientists are being utilised to cut up specimens where possible, in accordance with Principles of Good Practice for Biomedical Scientists Involved in Histopathological Dissection”⁴ and to “ensure widespread use of biomedical scientist reporting following their completion of the Biomedical Scientist reporting programme”.

In response to the workforce challenges, the bowel and cervical screening programmes are now looking to the scientist workforce to help support the workload they generate that cannot be supported by the current medically qualified pathologist workforce alone. The training of professionally regulated biomedical scientists and clinical scientists to undertake selected histopathology reporting through IBMS qualifications is financially a highly efficient and clinically safe solution within constrained budgets. The examination costs for a scientist to complete the four-year training programme to report the full spectrum of gastrointestinal or gynaecological samples is less than £2000. For a scientist to qualify to report bowel and cervical screening biopsies alone it takes approximately eighteen months with examination costs of less than £1000.

1 NHS England (NHSE). *Long Term Workforce Plan* <https://www.england.nhs.uk/publication/nhs-long-term-workforce-plan/>

2 The Royal College of Pathologists. *The Pathology Workforce – Latest Figures* <https://www.rcpath.org/discover-pathology/news/workforce-report-2017.html>

3 Cancer Research UK. *Testing Times to come? An evaluation of pathology capacity in England* <https://www.cancerresearchuk.org/about-us/we-develop-policy/our-policy-on-early-diagnosis/our-policy-on-diagnostic-services/our-policy-on-pathology-capacity>

4 IBMS *Principles of Good Practice for Biomedical Scientists Involved in Histopathological Dissection* <https://www.ibms.org/resources/documents/principles-of-good-practice-for-biomedical-scientist/>

The growing need for diagnostics can only be met by a workforce that has both the capacity and the knowledge and skills. The IBMS recognises that it can play a significant part in helping NHSE meet the objectives of its Long Term Workforce Plan in the context of pathology through the biomedical scientist workforce.

NHSE has recognised the potential of the scientist workforce to address elements of the medical skills gap and the role of the IBMS in enabling this upskilling, through an award of £1.5m funding already made to support biomedical scientist post-registration professional qualifications. It also recognises the IBMS as the organisation that has the experience and capacity to deliver the primary qualification routes for biomedical scientists in pathology.

The IBMS believes that the biomedical scientist workforce has a key role to play in the delivery of the Government's Major Conditions Strategy when it is published. As part of our response, the IBMS will be submitting a case to the Commission on Human Medicines for biomedical scientists to have defined prescribing rights that would enable them to operate more effectively and efficiently in clinics with patients with chronic and long-term conditions. This will be in addition to our ongoing application for Patient Group Direction (PGD) rights for the administration of named drugs to defined patient groups. The IBMS seeks support for both to be successful and to be supported for a change in legislation. The use of PGDs and the approval of prescribing rights for biomedical scientists would bring many benefits to patients, commissioners, and providers by facilitating the redesign of services that are focussed on enhancing the quality of patient care whilst also increasing capacity through effective use of the workforce.

The IBMS has the experience and the infrastructure to support and upskill the biomedical scientist workforce in a manner that is safe, efficient and meets nationally recognised standards. This is our plan to make it happen.



INSTITUTE OF BIOMEDICAL SCIENCE

LONG TERM BIOMEDICAL SCIENTIST WORKFORCE PLAN

SUMMARY OF KEY RECOMMENDATIONS

Introduce a registration training grant for departments to train individuals completing their IBMS Registration Training Portfolio.

Expand the number of training positions and enable more biomedical science graduates to become registered biomedical scientists and prevent an interruption in the pipeline of talent.

Ensure biomedical scientists are recognised as the key health service workforce in pathology and diagnostics, with IBMS qualifications as the primary route to its further development.

Support and cooperation from NHSE and the Government to deliver the pledges set out throughout this plan.

OUR PLEDGE

The IBMS welcomes the publication of the NHS Long Term Workforce Plan and is committed to ensuring, through its own Long Term Biomedical Scientist Workforce Plan, that the biomedical scientist workforce will be a key part of its successful delivery.

BIOMEDICAL SCIENTISTS – A WORKFORCE OF ALL THE TALENTS

Biomedical scientists are one of the longest established regulated healthcare professions, having been regulated by statute since 1960. They also form the largest professional group within healthcare science (40%) and account for more than 27,000 of the Health and Care Professions Council (HCPC) registrants⁵. Biomedical scientists are the largest staff group in UK pathology laboratories at approximately 14,000, with the remainder of registrants in management roles, NHS Blood and Transplant, public health services (UKHSA), private laboratories, research, armed forces (Royal Army Medical Corps), the diagnostics industry and academia. Biomedical scientists make up the bulk of the pathology workforce working alongside smaller numbers of medically qualified pathologists and, in some departments, a small number of clinical scientists, and are supported in most laboratories by unregulated laboratory support staff.

The biomedical scientist workforce has extensive experience of both NHS laboratory management and advanced clinical practice and has vast knowledge and experience of haematology, transfusion science, clinical chemistry, microbiology, cellular pathology, immunology, molecular pathology and genomics – the widest knowledge base of all healthcare professionals covering from before conception to after death. This is the workforce with the capacity and capability to respond to large and rapid increases in demand for laboratory testing services generated by a pandemic. This is the workforce with the capacity and capability to undertake advanced clinical roles to enable them to report histopathology samples alongside medically qualified pathologists – helping to support the UK cancer screening programmes and meet the challenge of early diagnosis and treatment of cancers as per the UK Major Conditions Strategy.

5 Health and Care Professions Council. *Registrant snapshot – 1 March 2023* <https://www.hcpc-uk.org/resources/data/2023/registrant-snapshot-march-2023/>

SUPPORTING WORKFORCE DEVELOPMENT

The IBMS is the UK professional body for biomedical science with approximately 20,000 members employed mainly in NHS pathology laboratories and some members across the globe. The IBMS is the standard-setting organisation for the profession and is also the awarding body of the Certificate of Competence that enables biomedical science graduates to apply for registration with the HCPC. This, combined with its role as the provider of the biomedical science post-registration qualification framework, makes the IBMS uniquely positioned to offer expertise and perspective on the service needs of the UK pathology laboratory services and to offer a bold but achievable plan to develop an already highly trained and qualified workforce to meet the expanding and changing needs of patients safely, effectively and efficiently.

GROWING AND TRAINING A SUSTAINABLE WORKFORCE

Registration as a biomedical scientist requires an IBMS Accredited biomedical science degree (or equivalent) plus laboratory-based training, either delivered as a placement during the degree or subsequently as a graduate in a laboratory approved for registration training. The IBMS currently accredits 60 UK universities that deliver biomedical science degree programmes and that will rise to 65 by the end of 2023. There are three IBMS Accredited Practitioner Training Programme (PTP) degrees that were introduced by higher education institutions in response to the Modernising Scientific Careers project, but most have been withdrawn as, unlike the IBMS Accredited biomedical science degrees, they do not meet service needs.

The inflexibility of the PTP clinical placement model cannot be easily accommodated by laboratories and it contrasts unfavourably with the more flexible integrated biomedical science degrees, which also have a higher volume of taught theory. Consequently, universities have responded to employer needs and primarily offer the preferred qualification for biomedical scientists, which is an IBMS Accredited biomedical science degree. These degrees and training places are not commissioned and as such do not receive any central funding. Despite this, these courses are among the most heavily subscribed science degrees in the UK.

IBMS ACCREDITED UK BIOMEDICAL SCIENCE DEGREES

- 59 *3-year BSc Biomedical Science*
- 17 *BSc Biomedical Science with an optional clinical sandwich placement*
- 30 *BSc Applied Biomedical Science (i.e. a full-time degree with an integrated placement)*
- 14 *IBMS Accredited Level 6 degree apprenticeships (i.e. have integrated Registration Training Portfolio completion as part of the degree)*

The multidisciplinary content of IBMS Accredited biomedical science degrees enables the subsequent registrants to work in any of the different pathology specialisms. While it is usual for biomedical scientists to specialise post-registration in one specific discipline, there is a growing shift towards expertise in two or more areas of pathology services, driven in part by the technology and breadth of capability of the analysers that deliver a significant proportion of laboratory testing services.

The multidisciplinary education and generic registration training of biomedical scientists delivers a highly flexible workforce equipped to meet the evolving needs of the laboratory diagnostic services in both acute and primary care settings. The flexibility of the biomedical scientist workforce was demonstrated during the COVID-19 pandemic whereby staff could be deployed to areas of greatest need to increase testing capacity, with only low-level supplementary training requirements, whilst still providing very high-quality patient care and diagnostic services.

The IBMS issues more than 1000 Certificates of Competence each year to biomedical science graduates from IBMS Accredited biomedical science degrees who have completed their pre-registration training in an IBMS-approved training laboratory.

OUR PLEDGE

- The IBMS recognises the risk of a potential skills gap due to an ageing workforce approaching retirement and are putting in place measures to support the supply stream of biomedical science graduates entering the profession and seeking HCPC registration.

The table below shows the changing age demographics of the UK population⁶, and the rise in the over-65 population, with their more complex health needs, to almost 25% of the UK population by 2045.

Year	Population in millions	0–15 yrs %	16–64 yrs %	65+ %
2005	60.4	19.3	64.7	15.9
2015	65.0	18.1	63.3	17.8
2025	69.5	18.9	60.9	20.2
2035	73.0	18.1	58.3	23.6
2045	76.1	17.7	57.8	24.6

- The IBMS is undergoing the biggest and most comprehensive investment in technology it has ever made. From Autumn 2023 we will move our Registration Training Portfolios entirely online using one of the most academically recognised and trusted commercially available platforms.
- The IBMS will provide a combination of webinar and face-to-face training for departmental training officers and our Registration Training Portfolio assessors. We will take our training sessions to all four UK countries and to those NHS England regions that request a training visit.
- The IBMS will commit to provide an ongoing schedule of Registration Training Portfolio assessor training to further increase our pool of Registration Training Portfolio assessors to reduce the time for the assessment process and to minimise delays to those seeking HCPC registration.

Year	Certificate of Competence Certificates Issued for HCPC registration
2018	984
2019	1032
2020	1014
2021	1117
2022	1237
2023	967

OUR RECOMMENDATION

The greatest impediment to the delivery of registered biomedical scientists is the absence of central funds to support this process. Newer graduates increasingly find themselves either unable to secure laboratory training positions or kept in support worker roles due to the lack of available registration training. Consequently, good graduates from IBMS Accredited biomedical science degrees are lost as they seek alternative careers due to a lack of training opportunities.

6 Office for National Statistics *Overview of the UK population: March 2017* <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/mar2017>

We know that a registration training grant for departments training individuals completing their IBMS Registration Training Portfolio would ease a constriction that is impeding the qualification pipeline of a profession that has the potential to make pathology services more efficient and affordable in meeting the demands of an increasing workload. Graduates from IBMS Accredited biomedical science degrees can complete their pre-registration training within 12 months, unlike those who enter the profession with a non-accredited degree (the combination of additional undergraduate study can add a further 12 months to the pre-registration training period).

SPECIALIST KNOWLEDGE AND SKILLS

Beyond HCPC registration the IBMS has developed a suite of professional qualifications to provide a structured and standardised framework for training. The first level of post-registration qualifications is the Specialist Diploma, which is available in each of the individual laboratory specialisms and will soon be available in a modular format to enable departments to structure post-registration training to meet their exact service needs. In most UK laboratories an IBMS Specialist Diploma is a requirement for the NHS Agenda for Change Band 6 roles.

The IBMS issues between 400 and 500 Specialist Diplomas each year to biomedical scientists who have undergone a structured programme of laboratory-based training in an IBMS-approved training laboratory, completed a Specialist Portfolio and been independently assessed by an IBMS assessor.

Year	Post graduate Specialist Diploma Certificates Issued
2018	326
2019	409
2020	402
2021	519
2022	471
2023	284

OUR PLEDGE

The IBMS:

- recognises that diagnostic laboratory services are undergoing a science and technology-driven revolution that requires its workforce to acquire new knowledge, new skills and often to work differently. In response, it is undergoing the most far-reaching review of its post-registration Specialist Portfolios since they were launched 20 years ago
- supports the early years of the new registrant workforce by reviewing the syllabi of the respective Specialist Portfolios to ensure their currency and their inclusion of the expanding repertoire of molecular pathology techniques
- is developing new Specialist Portfolios in Molecular Pathology and Genomics to support the post-registration training of biomedical scientists who are taking up roles in the new genomic hubs and to enable the expansion of a competent scientist workforce to meet the growing workload
- from 2024, will begin the development of a new Specialist Portfolio in Andrology to provide a more standardised approach to post-registration training for biomedical scientists working in the highly specialised fertility services laboratories.

LEADING AND MANAGING OUR LABORATORY SERVICES

Modern NHS laboratories are complex environments; innovation and the development of diagnostic laboratory services across all acute and chronic disease and emergency conditions have contributed to making patient care more targeted and effective. Pathology diagnostic investigations are now a significant part of over 80% of all patient care pathways⁷ and with the arrival of genomic testing and personalised medicine, this is likely to increase.

In addition to high-level scientific knowledge and skills, biomedical scientists manage the quality, safety, equipment, contracts, budgets and staff within their laboratory service. This scope and level of responsibility requires confident and competent individuals with a deep understanding of their service and its role in the multiple patient care pathways. The knowledge and skills to manage a laboratory service or aspects thereof cannot be fully learned 'on the job' and the generally available management courses do not fully meet the needs of this workforce either. In response, the IBMS has developed a suite of short duration Certificate of Expert Practice (CEP) distance learning courses to introduce new managers to some of the specific aspects and responsibilities of laboratory management.

In 2023, the IBMS launched a new CEP in Laboratory Information Technology and Clinical Informatics. The aim is to help individuals who are taking on an increasing role in delivering laboratory IT projects, and for laboratory IT managers who may not have a biomedical scientist background to gain a better understanding of the service they are supporting.

Year on year the number of applicants for these courses is growing as their value to service is recognised.

CERTIFICATE OF EXPERT PRACTICE CANDIDATE PASSES

Discipline	2023	2022	2021	2020	2019	2018
Laboratory Information Technology and Clinical Informatics	17					
Leadership and Management	61	56	55	43	47	36
Molecular Pathology	18	17	12	7	14	9
Point of Care Testing	36	17	10	18		
Quality Management	73	62	67	56	62	63
Training	57	49	49	47	48	49
TOTAL	262	201	199	171	171	157

⁷ Department of Health and Social Care *Modernising Scientific Careers: The UK Way Forward* <https://nshcs.hee.nhs.uk/publications/modernising-scientific-careers-the-uk-way-forward-2010/>

OUR PLEDGE

The IBMS will:

- ensure that places are available on all CEP courses by recruiting additional module tutors where required
- ensure that tutors review the content of the modules of each of the qualifications annually to ensure they remain current and directly relevant to professional practice
- commit to ensuring access to IBMS qualifications where they are needed. To achieve this, registered nurses will be accepted on to the Point-of-Care Testing qualification, and the Laboratory Information Technology and Clinical Informatics CEP will be open to non-scientific individuals who are managing or working within laboratory IT and responsible for supporting laboratory IT systems.

WORKING AND TRAINING DIFFERENTLY

The biomedical scientist workforce is unique within healthcare for its access to a 'whole career' suite of professional qualifications that are specifically designed to be affordable to both employers and employees and to exactly meet the needs of a particular service.

Master's degrees are well-respected and recognised high-level academic qualifications that are held by many of the health services' well-qualified staff. However, an academic qualification is not intended to exactly reflect professional practice, unlike a professional qualification.

In response to the need for access to a level 7-equivalent qualification and in recognition of the limitations of access due to the high cost of academic master's programmes the IBMS offers a level 7-equivalent professional qualification: the Higher Specialist Diploma (HSD). This qualification is available in all the main laboratory specialisms and in addition to the science, candidates are prepared with the insight and knowledge to lead and manage their laboratory services. Although an extremely challenging qualification to acquire, around 40 biomedical scientists achieve a pass each year and use the qualification to take on more senior laboratory roles.

"I would recommend a Higher Specialist Diploma as a great way to progress your career. I chose to study the IBMS Higher Specialist Diploma in Transfusion Science to build on my existing knowledge. Completing it enabled me to progress to my current Advanced Biomedical Scientist role."

Emily Lloyd, Healthcare Science Section Leader in Haematology and Haemostasis,
Freeman Hospital, Newcastle upon Tyne

OUR PLEDGE

The IBMS will:

- continue to encourage laboratories to see the service and financial benefits of a level 7-equivalent professional qualification to support the upskilling of their workforce
- begin the development of training and learning support materials for those candidates undertaking the higher qualifications
- continue to ensure that these qualifications are affordable and offer best value for money for individuals and departments
- promote these professional qualifications and a service-oriented alternative to master's programmes.

UPSKILLING THE WORKFORCE

One of the most insightful and beneficial high-level decisions taken so far has been to support and encourage the development of advanced and consultant-level practice for scientists working in the health services of all four UK countries. This is already accepted practice in nursing and many of the allied health professions but has been accepted at a slower pace within biomedical science.

NHSE has been instrumental in seeing the acceleration of such posts and sees the benefits of introducing advanced and consultant practice biomedical scientist roles across all pathology disciplines to bring increased capacity for diagnosis and treatment, monitoring direct and indirect patient care, both in primary, secondary and community diagnostic hubs. This is one of the most powerful examples of forward thinking to meet the challenges posed by the increasing size of the older population and the resultant increase in complex comorbidities, which are placing growing demands on healthcare services.

Increasing numbers of biomedical scientists are now undertaking professional qualifications that enable them to work alongside medical pathologists as part of the pathology dissection and reporting team. Nationally there has been an increase in histopathology activity of 30% since 2018/19; however, the consultant workforce has grown by only 8% over the same period⁸. Twenty years of safe and effective advanced and consultant scientist practice is evidence that the biomedical scientist workforce is key to expanding the delivery of advanced diagnostic services and the support and encouragement of the four UK health departments to find safe but innovative means of utilising workforce skills to better deliver patient services should be acknowledged.

In England, cervical screening prevents 70% of cervical cancer deaths⁹. Highly trained and professionally qualified biomedical scientists have been reporting abnormal cervical smears for more than 20 years. They are now accepted as a key part of the cytopathology reporting workforce alongside medically qualified pathologists.

Every year over 40,000 cases of bowel cancer are diagnosed in the UK¹⁰, usually on biopsies taken at colonoscopy, either taken to investigate symptoms that patients may have presented with, or from patients who are being investigated via the national Bowel Cancer Screening Programme. These diagnoses are made by consultant histopathologists, and now increasingly by consultant scientists who have been in training to report histopathology samples from the gastrointestinal tract (as well as other sites).

Working closely with the RCPATH, the IBMS has qualified more than 200 biomedical scientists to dissect histopathology samples, including those from the most complex cancer cases, freeing up many hours of consultant pathologist time each week to focus on the reporting of these cases.

As part of the collaboration with the RCPATH the IBMS has jointly developed a histopathology reporting training programme for scientists. Since 2020, 21 biomedical scientists have qualified to undertake the reporting of gynaecological, gastrointestinal and skin histopathology samples, with over 60 more scientists currently in training. These individuals, through this joint training and qualification initiative, have the potential to make a significant positive contribution to the histopathology reporting workforce and consequently to help meet the cancer targets of the Major Conditions Strategy.

8 NHS England. *Transforming Histopathology in England*. Awaiting publication.

9 Department of Health and Social Care. *New national cervical screening campaign launches – as nearly 1 in 3 don't take up screening offer* <https://www.gov.uk/government/news/new-national-cervical-screening-campaign-launches-as-nearly-1-in-3-dont-take-up-screening-offer>

10 Bowel Cancer UK. *Facts and figures about bowel cancer* <https://www.bowelcanceruk.org.uk/about-bowel-cancer/bowel-cancer/>.

“I had a very supportive and positive experience during my training from the pathologist, clinical teams and also from consultant pathologists at Addenbrooke’s Hospital.”

Rachael Gooch, Consultant Biomedical Scientist, West Suffolk Foundation Trust

“My mentor took my training very seriously and comprehensively supported my development in all areas. Her ‘pay back’ is having me fully functional as part of her reporting team – something I am only too happy to now be doing. As well as participating in reporting, multidisciplinary team meeting attendance, audits and dissection she has me on the junior doctor training rota because I add a dimension to the trainees’ education they don’t get from others.”

Lindsey Dixon, University Hospitals Sussex NHS Foundation Trust

BEYOND HISTOPATHOLOGY

While the most recent focus has been on histopathology, there is a concern that the pathologist shortage seen in histopathology is being replicated in other pathology specialisms, in particular haematology and microbiology. As the need for expert clinical haematologist input is increasing, medically qualified haematologists are taking on an increasing clinical workload, resulting in less available time in the laboratory.

In recognition of the expanding pressures within haematology services the IBMS is developing two new high-level and highly specialist training programmes and qualifications in haematology: haemostasis and thrombosis and red cell disorders. It is intended that the IBMS will put in place the means to upskill members of the scientist workforce in haematology to support their medical colleagues in a safe and efficient manner.

OUR PLEDGE

The IBMS will:

- work with NHSE and the RCPATH to help deliver the vision in the Histopathology Transformation Six-Point Plan
- launch two new ‘limited scope’ histopathology reporting qualifications designed specifically to support the bowel and cervical screening programmes
- deliver condensed and targeted training programmes with the intention of delivering qualified reporting scientists within a period of 18 months
- work with the RCPATH to identify other histopathology reporting specialisms with medical workforce shortages and respond by developing further scientist reporting qualifications
- deliver new extended practice qualifications in haematology by the end of 2023
- launch extended practice qualifications in microbiology in 2024.

The key is to encourage departments to meet the aim of the NHSE Long Term Workforce Plan by focussing on expanding advanced and consultant scientist roles to support the medical pathologist reporting workforce while offering good careers for well-qualified people.

The biomedical scientist workforce represents a safe and effective solution, working more collaboratively through integrated training programmes, to safely sustain and improve histopathology services, ensuring that every person diagnosed with bowel cancer or cervical cancer receives the right diagnosis and right treatment at the right time.

INDUSTRY AND INNOVATION

Biomedical science is a rapidly evolving element of healthcare that is flexible and adaptable to meet the growing and changing needs of patients and society. Pathology laboratories and the diagnostic industries share a symbiotic relationship. An innovative diagnostics industry enables the delivery of better diagnostic services faster, more accurately and closer to the patient. Improving patient outcomes, reduces the cost of healthcare and leads to shorter stays in hospital and lower cost interventions. The benefits of targeted antibiotic treatment are well recognised and applied. The rapid identification of an infective agent enables the most effective drug to be applied in the shortest time. Reducing the use of multiple broad-spectrum antibiotics and treatment delays for patients reduces the opportunity for the development of antibiotic resistant strains of bacteria.

Similarly, new technology being deployed outside of the laboratory by some ambulance services, and supported by biomedical scientists, is seeing an urgent blood test that can detect the presence of specific heart proteins. Known as cardiac markers, they help to diagnose a heart attack and enable the most appropriate treatment regime to commence before the patient reaches hospital.

Cancer care pathways are among the most costly and lengthy in healthcare. Today, patients benefit from genomic testing that enables the use of treatments specifically tailored to them. However, the IBMS, believes the approach taken for cancer should now be the use of rapid genomic or proteomic testing of cancer patients with the objective of reducing the time to target treatment. The biomedical scientist workforce is in every laboratory that supports every cancer treatment centre. The diagnostics industry has the technology to deliver even greater diagnostic options and solutions at lower costs while achieving the best patient outcomes.

OUR PLEDGE

The IBMS offers to NHSE its diagnostics experience, links to industry and innovation. Working together will drive improvement and the adoption of new diagnostic strategies to deliver the most rapid, effective, and efficient treatments for patients that utilises the biomedical science workforce to speed up adoption of proven, effective technologies and diagnostic tests.

BRINGING THE IBMS LONG TERM BIOMEDICAL SCIENTIST WORKFORCE PLAN TO REALITY

The NHS workforce of 15,000 biomedical scientists, with high-level clinical and scientific knowledge, has supported the expansion of the pathology test repertoire. There are now hundreds of diagnostic tests, many of which can be performed within hours (sometimes minutes) of receiving the patient's sample. This is critical to enable timely clinical interventions, reduce waiting times and to prevent further disease prevention.

The IBMS has stated its intention to expand its programme of training and qualifications for biomedical scientists to help support the aims of the NHSE Long Term Workforce Plan. However, it must be stated that the cost pressures and efficiency savings over a number of years have resulted in widespread loss of higher-band roles (Band 7 and above) in pathology and with them the associated expertise and enhanced skills. The net result is that the pool of available scientists who could take a more clinical direction of career development rather than that of laboratory management is smaller than is needed. The added benefits in terms of both cost efficiencies and career choices has already been demonstrated by the introduction of more advanced and consultant scientist roles. This progressive approach needs to be accelerated, not constricted, if it is to help stem the 'brain drain' and meet the increasing diagnostic and care demands of the UK.

The COVID-19 pandemic provided the biggest real-life learning exercise in the history of the health service and showed that within the NHS there is knowledge, teamwork, expertise and ability to work together at pace. Most powerfully it also demonstrated the need to seek input from those with the professional knowledge and expertise.

This plan is not just a statement, it represents an opportunity to engage with the IBMS to access and use those with the professional knowledge and expertise to help deliver the NHSE ambitious plans for transforming healthcare and the workforces that deliver it.

Looking ahead, the IBMS recognises the importance of pathology in supporting the delivery of the anticipated Major Conditions Strategy¹¹. Cardiovascular disease and cancers are the two main causes of death and disability in the UK. The IBMS plan is achievable and has the potential to make a significant and positive difference to pathology services. As an agile, dynamic organisation with credible, respected leaders at the helm, the IBMS can deliver the plan. With NHSE support, the IBMS can deliver it in a bigger and more impactful manner.

THE ROUTE FORWARD

The IBMS is asking for biomedical scientists to be recognised as the key health service workforce in pathology and diagnostics, with IBMS qualifications the primary route to its further development. The plan states our intentions, which we will deliver, enabling the biomedical scientist profession to contribute positively to the delivery of the Government's new Major Conditions Strategy, with its focus on primary and secondary prevention, early diagnosis, managing multiple conditions effectively, and helping people live well after they have been diagnosed.

The IBMS, by taking the NHSE Long Term Workforce Plan and providing the delivery detail, costs and benefits in respect of the biomedical scientist workforce, will make this happen faster and on a greater scale through the application of Long Term Workforce Plan funding for the pledges that have been committed in this plan, benefiting the healthcare system and patients.

11 Department of Health and Social Care. *Major conditions strategy: case for change and our strategic framework* <https://www.gov.uk/government/publications/major-conditions-strategy-case-for-change-and-our-strategic-framework/major-conditions-strategy-case-for-change-and-our-strategic-framework--2>





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