



Recognising the vital role of healthcare scientists, clinical physiologists and technologists

Healthcare scientists, clinical physiologists and technologists are a vital part of the clinical workforce supporting the care of patients, and work alongside most medical specialties. COVID-19 has demonstrated how critical this workforce is to the NHS. It will continue to be crucial as we face a second wave of COVID-19 infection that exacerbates usual winter capacity pressures.

A huge range of services are provided by healthcare scientists, clinical physiologists and technologists. Despite their importance however, they often have a low profile in their employing organisations due to the relative small size of their departments.

The organisations listed on page 2 wish to formally acknowledge the significant contributions made by this workforce during COVID-19 and their importance to the future of patient care in the NHS.

We are committed to supporting these professions and will campaign for:

1. Recognition, investment and support for these services in workforce and clinical service planning as the NHS moves towards comprehensive integrated care services by March 2021
2. Championing the benefits of these services for patient care and excellence as evidenced by the [‘Getting It Right First Time’ \(GIRFT\) programme](#)
3. Improved recording of such activity through NHS coding procedures
4. Support for staff in these services to improve their wellbeing and working lives

Examples of the vitally important roles this workforce has played during COVID-19 include but are not limited to:

- > Renal service technologists delivering support services in critical care when demand for dialysis in ventilated patients reached historically high levels. This was a major determinant in providing those patients with the best chance of recovering from their illness.



- > Respiratory healthcare scientists and physiologists supporting pressure support ventilation in non-intensive therapy units.
- > The rapid reorganisation of echocardiography and pacemaker/defibrillator follow up by cardiac physiologists and scientists to ensure COVID-19 and suspected COVID-19 patients received appropriate care, but also that essential device checks could be performed safely.
- > Gastrointestinal (GI) physiologists assessing GI motility disorders and patients prior to surgery, and running GI clinical laboratories including breath tests.
- > Clinical physiologists in neurophysiology continuing their electroencephalogram (EEG) service amid increasing cases, for patients in ITU with both epilepsy and coma. Their role in nerve conduction and other studies will be critical in tackling the backlog of patients awaiting surgery.
- > Nuclear medicine technologists ensuring the continuation of diagnostic and therapeutic nuclear medicine services, while many radiographers and doctors were forced to cover gaps in other areas.

The following organisations have formally endorsed this statement:

Association of British Clinical Diabetologists	British Cardiovascular Society	Clinical Genetics Society
Association of British Neurologists	British Geriatrics Society	Faculty of Intensive Care Medicine
Association of Cancer Physicians	British Nuclear Medicine Society	Faculty of Sport and Exercise Medicine
Association for Palliative Medicine	British Society for Allergy & Clinical Immunology	National Blood Transfusion Committee
British Association of Dermatologists	British Society for Clinical Neurophysiology	Renal Association
British Association for Sexual Health and HIV	British Society for Haematology	Royal College of Physicians
British Association of Stroke Physicians	British Society of Gastroenterology	
	British Thoracic Society	