

For the attention of:
NHS Organisational Lead Healthcare Scientists and
NHS I Pathology Network Leads

NHS E and I
80 London Road
Skipton House
London SE1 6LH

24th October 2019

Dear Colleagues

Life Science Industry Professional Accredited Registration ('Credentialing')

A while ago we wrote to your organisation outlining how as an NHS Organisation you need to be able to assure that representatives from industry partners and suppliers, entering your organisations, have the appropriate competency to; train NHS Staff in the use of supplied equipment; maintain equipment; assure appropriate calibration and accuracy; can adhere to and maintain patient safety and safeguarding requirements to an approved code of conduct, when in your Organisations. The Life Sciences Industry Accredited Credentialing Register (LSI ACR), accredited by the Professional Standards Authority (PSA), aims to achieve this. It is free to use by NHS Organisations, being funded by Industry Partners, on a non-profit basis, as they become registered. Currently, there are several costly credentialing and scheduling systems in place or under development at a local level. To reduce fragmentation and cost, NHS E and I have worked with the Academy for Healthcare Science, MIA and Industry Partners to provide a Life Science Industry Accredited Credentialing Register (LSI ACR) that can be universally adopted, avoiding any cost or increase in bureaucracy to Trusts, whilst safeguarding staff and patients. The implementation of a single, national system supported by the Life Science Industries, that is transparent, practical and proportionate, keeping cost and bureaucracy to a minimum, is the optimal approach for the NHS. It also assists the Life Science Industry to focus on one universal non-commercial accredited Register.

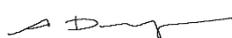
Current experience suggests that a blanket policy in the implementation of the LSI ACR for patient facing areas and non-patient areas can also add additional cost and administration – it has also been the cause of delays in services when emergency engineers have been unable to attend sites putting critical services at risk. This can be avoided if local requirements are defined according to level of risk. For example, an engineer visiting a staffed clinical laboratory should not have the same training requirements or requirement for DBS Checking as an individual entering a ward or clinic. Please refer to the links below where more information is available.

Further information on the Life Science Industry accredited credentialing Register can be found at <https://lifescienceindustry.co.uk/>

To arrange a discussion on the LSI accredited credentialing Register, please contact lsiadmin@ahcs.ac.uk

We are calling on Organisational Lead Scientists and Pathology Network Leads to raise awareness and support the implementation of this LSI Accredited Credentialing Register in your organisations with your Organisations Operational Management teams.

Yours sincerely



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