Change Notification UK National Blood Services No. 32 - 2017

Applies to the Cell and Tissue Donor Selection Guidelines for Deceased Tissue Donors Live Tissue Donors, Cord Blood Donors and Bone Marrow & Peripheral Blood Stem Cell Donors

Complementary Therapy

Please make deletions and changes shown in red to the ‘obligatory’, ‘discretionary’, ‘additional information’ and ‘reason for change’ sections as shown below

Obligatory

1. Must not donate if:
   The condition for which treatment was given is not acceptable.

2. Therapies involving penetration by needles or other invasive procedures:

   Must not donate if:
   Less than 3 months from completing treatment

Discretionary

a) If oral or topical complementary medicines only and reason for which treatment was given is acceptable, accept

b) For all other therapies involving penetration by needles or other invasive procedures:

1. Performed within the NHS
   If performed by a suitably qualified NHS healthcare professional on NHS premises, accept.

2. Performed outside of the NHS
   2a) If performed by a Qualified Health Care Professional registered with the General Medical Council (GMC), Nursing and Midwifery Council (NMC), General Dental Council (GDC), The General Chiropractic Council (GCC), The General Optical Council (GOC), The
General Osteopathic Council (GOsC) or The Health and Care Professions Council (HCPC) (which regulates: Arts therapists, Biomedical Scientists, Chiropodists/ Podiatrists, Clinical Scientists, Dieticians, Hearing Aid Dispensers, Occupational Therapists, Operating Department Practitioners, Orthoptists, Paramedics, Pharmacists, Practitioner Psychologists, Physiotherapists, Prosthetists and Orthotists, Radiographers, Social Workers in England and Speech and Language Therapists), accept.

2b) Treatments performed within commercial premises in the UK: Accept.

2c) If performed within unlicensed, non-commercial premises in the UK, or for any treatment performed outside the UK more than 3 months ago: Accept.

Additional Information

Equipment that has been reused has passed infection from person to person. Therapists who are subject to discipline from statutorily constituted professional authorities are unlikely to re-use needles.

Under all current legislation it is a criminal offence to trade without registration (licensing) or to be in breach of the relevant byelaws. Similar provisions are in place in Scotland in the Civic Government (Scotland) Act 1982 (Licensing of Skin Piercing and Tattooing) Order 2006. Some London boroughs also require a ‘special treatment’ license. It is expected that all premises will follow infection control processes including using single needles for treatments.

In the UK local authorities are responsible for regulating and monitoring businesses providing tattooing, cosmetic piercings, semi-permanent skin colouring (micropigmentation, semi-permanent make-up and temporary tattooing), electrolysis and acupuncture. The focus of legislation covering local authorities in England, Wales and Northern Ireland (Local Government (Miscellaneous Provisions) Act 1982) is on minimising infection risks using compulsory registration of practitioners and premises and optional powers to make byelaws.

Healthcare professionals registered with statutory body may not need to register with the local authority as their statutory body is responsible for their regulation.

This guidance presumes that a validated NAT test for HIV, HBV and HCV is negative, if this test is stopped for any reason the guidance will change.
When there is any doubt about infection being passed on, waiting 3 months means infections are more likely to be picked up by the tests used by Blood & Tissue Services.

**Reason for Change**

This entry was updated in line with the recommendations of the SaBTO Donor Selection Criteria Review Report published on 23rd July 2017

**Update Information**

This entry was last updated in **TBC**

\[Signature\]

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