

SBAR report

Deal Community Phlebotomy Service

Situation

This paper outlines the next steps to procuring the Deal Community Phlebotomy Service, which will be supplementary to the existing commissioned phlebotomy service in Deal general practices.

The contents of this paper include a background overview, details of the proposal, procurement milestones, and a concluding recommendation.

Background

Kent Community Health NHS Foundation Trust (KCHFT) gave notice of their phlebotomy services operating from Victoria Hospital, Deal - with the service ending on 31 October 2021.

As general practice was already contracted to provide blood testing, the decision was taken to work with existing practices in Deal to deliver sufficient capacity for all needs of their patients from 1 November 2021. With blood testing remaining available from all general practices in Deal, it did not reach the threshold for a change which required formal public consultation. This is because the service remained available but from an alternative location. Whilst formal public consultation wasn't required, engagement with the public was required and was completed. If the service had been decommissioned in its entirety, it would have reached the threshold for formal public consultation.

The practices affected by the Victoria Hospital phlebotomy service ceasing were Manor Road Surgery, St Richard's and Golf Road Surgery, The Balmoral Surgery and The Cedars Surgery. This represents all practices in the Deal and Sandwich PCN with the exception of Sandwich Medical Practice, which remain unaffected.

In February 2022, the CCG received a petition on the issue. At the time of receipt, the petition had received over 2,000 paper signatures and 1,300 online signatures. For information, the petition reads, "We the undersigned demand the reinstatement of the Phlebotomy Service to ensure all residents of Deal and District, especially the ill, vulnerable, elderly, disabled, carers and young, have their blood tests LOCALLY and in a TIMELY manner."

In addition to the petition, Natalie Elphicke, MP, launched an engagement exercise on 28 February seeking feedback from residents. An online and paper-based survey was open until late April. The survey received 3,200 responses and a full report was produced.

In July 2022, NHS Kent and Medway agreed that the phlebotomy service continues to be accessible to Deal residents from their registered general practice.

Since July 2022, members of the NHS Kent and Medway Executive Team have been meeting with Natalie Elphicke, MP, local councillors and campaigners to work in collaboration to resolve any further concerns. During this period, a three-month review plan was completed by the Integrated Care Board (ICB). The plan focussed on the themes of access, care, and patient satisfaction. In developing the plan, all Deal practices undertook a patient engagement exercise to ascertain actual patient experience. The feedback was positive, albeit with some areas of focus for improvement.

In September 2020, a 'Proposal for a Phlebotomy Service at Deal Hospital' was developed by the Deal and Surrounding Area Health Action Team and presented to the ICB. The proposal recommended that East Kent Hospital University Foundation Trust (EKHUFT) should provide a service 6 days a week at Deal Hospital with staffing provided by Buckland Hospital as a pilot for a period of 12 months.

NHS Kent and Medway gave due consideration to the pilot scheme proposal, which included sharing with EKHUFT for comments, and identified a third party to undertake an independent review of the concerns raised in relation to access to timely blood tests in Deal. The independent review was completed by Bexley Health Neighbourhood Care, who concluded that whilst there are a number of positive outcomes following the service changes, further consideration should be given to the following:

- All practices to consider ways to improve access to reception / appointment booking administrators, one option to consider could be for an at-scale solution for patients to call and book an appointment, delivered at PCN level.
- Practices to consider a number of protected urgent slots to address the need for urgent appointments.
- Practices to work together to support any practice which is not offering 5-day service to be booked at another Deal practice for any urgent requests therefore reducing the need to attend EKHUFT further.
- Practices and their Patient Participation Groups (PPGs) to work with community leaders, stakeholders and campaigners to co-design patient feedback surveys to identify any ongoing issues and collectively consider and agree any future improvements.
- To increase public engagement by using this report as a catalyst to re-engage, present the data and findings and highlighting the positive but also the areas of possible improvements.
- Any further changes to services are communicated either by consultation or discussion to better understand the community needs and communicated in a more timely manner

As part of this review, it was reported that Natalie Elphicke, MP met with Mairead McCormick, Chief Executive at KCHFT to discuss reinstating phlebotomy at Victoria Hospital, Deal, in view of the site becoming a community diagnostic hub. KCHFT responded with a costed proposal. In addition, EKHUFT also responded to the pilot developed by Deal and Surrounding Area Health Action Team with a revised cost proposal.

Assessment

Proposal

NHS Kent and Medway has considered the proposal presented by the Blood Service Health Action and the proposals from EKHUFT and KCHFT.

The conclusion is that, despite patients accessing phlebotomy five days a week AM and PM, and an upward trajectory of growth in phlebotomy activity in general practice, which correlates with a reduction in the number of patients being bled in secondary care, this paper is proposing to procure a Deal Community Phlebotomy Service, which will be supplementary to the existing commissioned phlebotomy service in Deal general practices. The service is accessible to patients who require a blood test for the following reasons:

- fasting
- urgent
- difficult venipuncture
- pre-chemotherapy requests
- glucose tolerance testing
- children aged between 5 years and 16 years.

And excludes patients for the following reasons:

- routine blood tests requested by primary care and secondary care that are outside of the above criteria.
- patients not registered with a general practice in the Kent and Medway
- patients unwilling or likely to be unable to be compliant with the service.
- non-NHS patients
- patients in secondary care (i.e., 2WW/urgent pathway or outpatient patient) where a blood test is deemed clinically appropriate on the same day.
- patients under the care of Accident & Emergency
- inpatients
- children aged 5 years and under are excluded from this service and should be referred to paediatric services by their healthcare provider.

The concerns raised in MP Natalie Elphicke's report were themed as follows:

- *there has been a severe impact on residents with diabetes, cancer and long-term conditions.*
- *older residents with mobility or financial challenges have been badly affected.*
- *there has been gaps in provision for children, including a report of a child with serious conditions who are now missing school time in order to travel for regular blood tests.*
- *the adverse environmental impact of travelling outside the area was also raised as an issue of concern.*
- *difficulties accessing the service were reported to be having knock on effects for acute healthcare as well as for self-care and treatment.*
- *a number of residents reported that they were not following medical advice or had experienced delays in receiving or changing medication, which is likely to result in adverse health consequences in such cases.*
- *there are likely to be adverse additional costs to acute health care where blood tests are supposed to be done locally, but so many people are having them carried out at acute hospitals.*
- *there is also likely to result in inefficient use of resources in acute health care, in particular there were a number of reports where consultant requested blood tests could not be carried out in a timely fashion.*
- *a large number of respondents expressed anxiety and stress on their behalf and on behalf of other family members about delays and problems accessing blood tests the priority groups identified.*

This proposal responds to many of the themes from MP Natalie Elphicke's report. It is accessible to patients who require pre-chemotherapy blood tests and glucose tolerance testing, and to children aged between 5 years and 16 years. The additional provision seeks to improve access to timely blood tests for those who require urgent or fasting blood tests and mitigate the requirement of travelling outside the area. It is envisaged that the additional provision will reduce the waiting time for all other blood test

appointments in general practice. The statement that there are adverse additional costs to the acute sector is unfounded and, in contrast, the growth in phlebotomy activity in general practice correlates with a reduction in the number of patients being bled in secondary care. Of note, whilst this service is accessible to patients from both primary and secondary care, there are other commissioned contractual arrangements for consultant requested blood tests in secondary care. Finally, it is difficult to comment on unique examples where family members have expressed anxiety and stress with regards to family members accessing blood tests. It is hoped that this additional phlebotomy provision will lessen the impact of this, but if it remains, it is recommended that the ICB review these on a case-by-case basis.

The service specification details that the service should operate Monday to Friday, 8am to 1pm, excluding Bank and Public Holidays i.e., 50.5 weeks. Appointments should be 10 minutes in duration (maximum of 7,575 appointments per annum), and the provider shall provide an appointment only service with a dedicated patient booking system/Local Referral Unit (LRU) accessible to patients via the telephone with optional online appointments.

The recommendation is that the contract length is 12 months with an option to extend for a further 12 months. The decision to extend the service will be subject to agreement from members of the Executive Team. A service evaluation will be completed nine months after the contract commencement date.

Recommendations

To note the contents of this paper which describes the next steps to procuring the Deal Community Phlebotomy Service, which will be supplementary to the existing commissioned phlebotomy service in Deal general practices.