



HEALTH OVERVIEW AND SCRUTINY SUB-COMMITTEE, 11 NOVEMBER 2021

Subject Heading:

Community Phlebotomy Update

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Policy context:

Community phlebotomy is a key service for local people and has therefore been as a subject for scrutiny by the Sub-Committee.

Financial summary:

No impact of presenting information itself.

SUMMARY

- 1.1 The new pilot model for community phlebotomy provision commenced on 1st July 2021. The chosen service model is being piloted to ensure that we are able to "test" ideas in an agile way and adapt the service as necessary to meet emerging demands as nationally we move out of the lockdown.
- 1.2 The new service model went live on 1st July 2021 and implementation is going well. All sites across Barking & Dagenham, Havering and Redbridge (BHR) are operational and patients are waiting less than five days for a routine appointment and 0-2 days for an urgent appointment.

- 1.3 Patient feedback is very positive in regards to the new model. Feedback received for the latest period (July and August) shows that for the 7,993 patients who completed surveys, 93% of respondents gave the service an overall experience rating of either 'very good' or 'good'.
- 1.4 Having fewer and larger sites did result in blood sample delays (upon arrival at the lab) this has dropped from its peak of 13% of all GP samples rejected in March 2021 to 4.4% in August 2021.
- 1.5 The new service model will ensure that patients/residents are able to access blood testing in a timely manner, closer to home and without the need to travel to an acute hospital site (in most cases).
- 1.6 Through the use of bookable appointment slots and extended hours, it should also mean that services are more convenient and accessible to all, including those who require carer/family support to attend.

RECOMMENDATIONS

- 2.1 It is recommended that the Committee notes the update of the BHR phlebotomy service one year pilot and its delivery so far.

REPORT DETAIL

Pilot Service Model - Update

- 3.1 Delivery of the pilot model required engagement with NELFT and the Primary Care Networks (PCNs) as providers. The selection of the sites for the 11 NELFT and 4 PCNs has been approved by the Executive Phlebotomy Group. These are set out on the maps in Appendix 1. The full list of phlebotomy provision is listed in Appendix 2.
- 3.2 The sites have been selected based on dispersal across the boroughs, ease of access, availability of car parking and/or availability of sites.
- 3.3 The previous arrangements for the GP LIS and for Westlands Medical Centre came to an end on 30th June 2021. The service provided by the Hurley Group, situated in Havering, was in place until the end of September 2021.

- 3.4 BHR PCNs were given the opportunity to continue phlebotomy services under the new pilot model. Four Redbridge PCNs sent in their Expressions of Interest and are transitioning to the new system wide model.
- 3.6 NELFT sites are operational across BHR. In addition, there are now 2 extra weekend phlebotomy chairs at Elm Park (until 14th November 2021) as extra capacity was required to compensate for the lack of phlebotomy provision by Havering PCNs. This will be closely monitored.
- 3.7 NELFT have increased their phlebotomy workforce across BHR from 20.71 WTE to 45.6 WTE, an increase of 45.4%. Recruitment and on-boarding of permanent staff is taking place. BHRUT laboratory staffing requirements had to be re-arranged and additional resources put in because of the increase in weekend and late evening working and re-routing of drop offs has taken place to spread the work across the two BHRUT sites.
- 3.8 The Executive Phlebotomy Steering Group, which consists of members from NELFT, BHRUT, NEL CCG and the Clinical Lead, has created a patient survey that is available for patients to complete an hour after their appointment as patients get the link to the survey. Patient feedback received for the latest period (July and August) shows that of 7,993 patients who completed a survey, 93% of respondents gave the service an overall experience rating of either 'very good' or 'good'.
- 3.9 The CCG will be working with local community groups and partners to reach out to those who do not have web/mobile phone access for their feedback to ensure that feedback is representative.
- 3.10 Transport runs from the blood collection sites to the laboratories have been reviewed and refined to ensure efficiency and blood sample integrity. Sample integrity starts to deteriorate after 4 hours (depending on storage conditions, etc). Samples that are tested more than 4 hours after the blood is drawn can affect results. In particular with potassium, there can be falsely elevated readings as samples get older. A high reading prompts an emergency call to the patient to come into the Emergency Department (ED). There have been examples of patients being called to ED unnecessarily because of delayed samples being tested. With the improvements in transport and phlebotomy opening hours under this new model, the sample delayed rate dropped from its peak at 13% of all GP samples rejected in March 2021 to 4.4% in August 2021.

- 3.11 Centrifugation, which is a process that spins the blood test tubes to separate the components of the blood and increases the sample integrity time, is being piloted to determine feasibility for roll out in BHR to further address the risk of transport delays. BHRUT reports that the number of rejected samples because of transport delay has reduced considerably in samples from the two pilot venues where centrifuges have been located.
- 3.12 Local and NEL wide stakeholder fortnightly updates are being provided to invite local feedback.
- 3.13 Waiting times for services are being closely monitored and at time of writing same day appointments are available at three of the four NELFT sites in Havering (Cranham, Harold Hill and Raphael House) and next day at Elm Park.
- 3.15 On average 3,500 online appointments are made each week across BHR.

IMPLICATIONS AND RISKS

Financial implications and risks: None of this covering report.

Legal implications and risks: None of this covering report.

Human Resources implications and risks: None of this covering report.

Equalities implications and risks: None of this covering report.

BACKGROUND PAPERS

Appendix 1 – Phlebotomy pilot model sites

Appendix 2 – Where to go to have a blood test