

**Progress on all activities relating to the Phlebotomy Procurement**

**1. Background**

- 1.1. A report regarding proposed changes to Phlebotomy service provision for people referred by their GP for a blood test was considered at the Health and Adult Social Care Overview and Scrutiny Committee on 9 April 2013. It was agreed that the changes did not constitute a substantial variation or service development.
- 1.2. It was requested that a further report should be presented to the June meeting of the Committee, setting out the key aspects of the specification of the service to be procured to replace that currently available for these patients at Medway NHS Foundation Trust, including opening times.
- 1.3. Members had particular concerns about certain areas of Medway, which were more remote and wanted to reassure themselves that the new service was accessible to the public and not in any way disadvantageous. (The majority of phlebotomy services, which are provided at GP practices and Medway Community Healthcare clinics across Medway, do not form part of this procurement and are not subject to change.)
- 1.4. As discussed at the committee on 9 April, the CCG confirmed that the specification would not list specific locations for provision. The specification would detail criteria that focused on access to a service.
- 1.5. NHS Medway Clinical Commissioning Group will ensure that commissioned services are accessible and that patients continue to have a choice.

**2. Patient Engagement Summary**

- 2.1. NHS Medway CCG has completed patient engagement activity related to the GP referred phlebotomy services.

2.2. A phlebotomy patient questionnaire, developed in conjunction with the Communications and Engagement team, was distributed widely to a range of organisations, groups and individuals across Medway at the end of April 2013. This included distribution at phlebotomy clinics at Medway GP practices, Medway Community Healthcare and Medway NHS Foundation Trust.

Patients were given the opportunity to engage in the following ways:

- Completing a patient questionnaire - either paper copy, on-line version or a telephone interview
- Attending a patient focus group
- Talking to representatives from the Commissioning and Engagement teams who visited a number of Healthy Living Centres and Health Centres, as well as Medway NHS Foundation trust, to gain service users' views directly on the service.

2.3. The engagement period ran for four weeks, (between 29 April 2013 and 24May 2013) and the questionnaire activity can be summarised as follows:

Total number of questionnaires sent out	2938
Total number of fully completed questionnaires returned by hand /post	906
Total number of questionnaires completed on-line	79
Total number of spoilt questionnaires (not fully completed/wrong questionnaire returned)	49
Total number of questionnaires received after the closing date	58

2.4. Of the 2938 questionnaires sent out, a total of 906 fully completed questionnaires were returned (30.8 per cent) with a further 79 questionnaires being completed on line. A total of 985 questionnaires were analysed.

2.5. The percentage response rate for all questionnaires returned by the deadline of 24 May 2013 is outlined in **Appendix 1**.

### **3. Summary of Phlebotomy Service Specification**

3.1. The service specification for the phlebotomy service, replacing that currently provided at Medway NHS Foundation Trust has been informed by the patient engagement activities.

3.2. The service will be commissioned to provide GP referred phlebotomy services (including Glucose Tolerance Testing) to both Adults and Children.

3.3. The specification was reviewed and supported at the CCG Clinical Advisory Group meeting held on 4 June 2013 and is being presented for approval at the CCG Commissioning Committee on 12 June 2013.

3.4. As discussed at the HASC on 9 April, the move to have earlier opening times for the phlebotomy service at the hospital had proved very popular and it was intended to move forward with a service in a community, which provided an early morning service.

3.5. Early morning access was a key criteria identified through the recent patient engagement.

3.6. A table showing how the key themes from the patient engagement events have been incorporated into the service specification is attached in **Appendix 2**.

3.7. Appendix 2 provides clear information and read across including – question asked rationale for asking the questions, response from patients (via the questionnaire) and how the issue has been addressed in the service specification.

3.8. The committee should note, as discussed at the 9 April Committee, that the specification does not dictate clinic location.

3.9. Appendix 2 details the following regarding clinic location *'As part of the tender, the CCG will be highlighting current service provision within the geography of Medway. This will identify the need for provision within Gillingham and Central Chatham and depending upon the outcome of the tender, the CCG will work with both new and existing providers to ensure that access is available locally.'*

#### **4. Procurement Timeline**

4.1. The procurement timelines have been adjusted to allow for presentation of the output of the patient engagement activities and key aspects of the specification to the HASC on 25 June 2013.

4.2. The HASC was informed at the committee meeting on 9 April that the notice period for the service expired at the end of September 2013. The revised procurement timelines did not support achievement of procurement and mobilisation within the September timeline.

4.3. To ensure a robust procurement and continuity of service, the CCG has gained the agreement of Medway NHS Foundation Trust to extend the service for up to three months, to the end of December 2013. Mobilisation of the new service is expected during these three months.

4.4. The notification of the phlebotomy tender was posted on Supply2Health on 24<sup>th</sup> May 2013 and a Meet the Market event was held on the 5 June 2013.

4.5. To meet the extended procurement timescales the CCG is aiming to start procurement by the end of June 2013.

## **5. Recommendation**

The Committee is asked to note the report and output of the patient engagement work that has informed the service specification.