



**HEALTH AND ADULT SOCIAL CARE
OVERVIEW AND SCRUTINY COMMITTEE
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**ADULT COMMUNITY HEALTH SERVICES: CHANGES TO
PHLEBOTOMY SERVICES PROVISION**

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Summary

The changes to the phlebotomy service provision in the community is part of the wider changes to adult community health services; to transform the way services are delivered across Medway to make them easier for patients to access and to use.

There are nine phlebotomy clinics currently provided in Medway; these clinics are provided at a number of locations and are offered over different times and days of the week. There is currently no provision in central Chatham. MCH House in Gillingham is the one location that offers clinic provision over six days of the week, for the longest time period each day.

In line with the revised model of care for adult community health services – the seven key changes and the Medway Model, the CCG is working to ensure more services are joined up and located within local communities, closer to people's homes. This report outlines the phased approach being taken to provide phlebotomy services in each of the seven localities across Medway, to ensure that there is equitable access across each locality, and increasing the extended access provision to offer more choice to patients.

Appended to this report is a draft joint Communications Plan which sets out the communications schedule for the phased changes to the phlebotomy services provision, which will commence from September 2019. Please note that this is a working document and will continue to be updated during August 2019. Included within the draft communication plan in appendix 1 is the joint statement by the CCG and Medway Community Healthcare (MCH) that will be used to inform key stakeholders including patients and the public of these planned changes.

1. Budget and Policy Framework

- 1.1 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee as set out in the Council's Constitution.
- 1.2 The terms of reference for the Health and Adult Social Care Overview and Scrutiny Committee (Chapter 4 Part 5 paragraph 21.2 (c) of the Constitution) includes powers to review and scrutinise matters relating to the health service in the area including NHS Scrutiny.

2. Background

- 2.1 The adult community health services programme is critical to the development of the Medway Model – redesigning and improving the way in which community services are accessed and provided locally, supporting reductions in health inequalities, improving patient experience in using the services, which in turn, will ensure that patients remain well and cared for in their place of choice (home). This will also reduce the demand for A&E and inpatient care as well as continuing to support appropriate early discharge, and improving the use of technology.
- 2.2 The community phlebotomy service is currently provided by Medway Community Healthcare (MCH) and is included in the scope of the adult community health services programme. Therefore, this briefing paper summarises the key stakeholder engagement activities undertaken as part of this programme to provide greater context to engagement already undertaken and the planned changes to the phlebotomy service.

3. Adult community health services stakeholder engagement - summary of activities

- 3.1 In 2017, the CCG engaged widely with patients, families, residents and staff on their proposals for future adult community services including phlebotomy and the feedback informed the development of the proposed model.
- 3.2 In January 2018, the CCG ran a day long 'Whole System Planning Workshop' involving more than 100 patients, staff, voluntary sector representatives, commissioners, and other services in Medway. Participants tested the emerging model using a series of case studies and worked with other stakeholders to suggest solutions to any problems identified within the model.
- 3.3 The CCG used the feedback from the Whole System event to create a document detailing seven key changes that will improve patients' experience of adult community services. These are detailed below:

- The most common services will be provided locally in each Medway town, with specialist services provided centrally.
 - More multi-skilled community nurses and therapists supported by specialist teams.
 - Extending the hours and days of larger services in each of the six localities.
 - A central booking and co-ordination function.
 - Senior Community Clinicians will case manage the care of all patients with complex or three or more long-term conditions.
 - Speedier response within two hours for people with complex or three or more long-term conditions when they need urgent treatment or support.
 - More opportunities and support for people who use community health services to lead healthier lifestyles and to manage their own conditions.
- 3.4 From 3 September to 26 October, a programme of engagement events was organised to share the seven changes and to gain feedback on the proposed model. Engagement activities comprised:
- An online and a paper based survey available from GP practices, council offices, libraries, community and acute health services.
 - Four public engagement events were held across Medway at a range of dates, venues and times.
 - Discussion at the September GP monthly meeting.
 - Focus groups were run by the Involving Medway Community Engagement Team.
 - Community Health Researcher Volunteers conducted face-to-face interviews with people who use community health services.
 - Community nurses also helped to target feedback from housebound patients by distributing surveys on their caseloads.
- 3.5 The Public Engagement Agency (PEA), an independently commissioned company, analysed the findings and supported the engagement. The full engagement report was shared with the Health and Social Care Overview and Scrutiny Committee in January 2019 along with the You Said, We Did report which was the CCGs response to the Public Engagement report.
- 3.6 The majority of people who gave us their views broadly support the seven key changes proposed. 93% of those who responded to the survey agreed the changes will 'improve to some extent' or 'improve significantly' the experience of those using adult community health services in Medway.
- 3.7 People in events told us these proposals would mostly be an improvement as current services are fragmented and, for many, difficult to access. They welcomed the focus on multi-skilled teams, better co-ordination, improved access and prevention and education.
- 3.8 From all of the engagement activities between October 2017 and November 2018 detailed above, 1,592 local residents, staff, clinicians and patients either attended either an event, took part in an interview or community focus group or responded to a survey. These figures do not include the market engagement events where we discussed the proposals extensively with potential providers on a number of occasions.

4. Advice and analysis

- 4.1 The location of current adult community services are based on historical arrangements and do not reflect the needs of patients at a local level. Some of the most common services are not provided in each locality which means that some patients have to travel further for the same services.
- 4.2 As part of the adult community health services programme, the CCG has been working very closely with MCH to agree the re-alignment of adult community health services including phlebotomy service provision, to ensure there is equitable access across each locality to provide care closer to home.
- 4.3 Phlebotomy services are one of the most common services that will be provided in each locality; wrapping community services around each Primary Care Network (PCN).
- 4.4 Phlebotomy is a high volume service, that provides approximately 118,900 contacts per year (based on 2018/19 data). Currently, 48% of contacts are being undertaken at MCH House which means that just under half of all community phlebotomy is provided within this one clinic location. Around 50% of all contacts are currently provided within the Gillingham area.
- 4.5 There are 9 phlebotomy clinics currently provided in Medway. Clinics are provided over a range of days and times of the week, as reflected in the table (below). MCH House is currently the only clinic that offers clinic provision over six days of the week, for the longest time period each day.
- 4.6 There are a number of GP practices that also offer a phlebotomy service which includes a large proportion in the Rochester area therefore, to avoid duplication the community service provided by MCH is not provided within Rochester HLC. The GP led walk in service at Rochester HLC is also reflected on the table below to demonstrate cover across all HLCs and will remain as is.

Table 1: Current phlebotomy service provision

Clinics	Mon	Tue	Wed	Thu	Fri	Sat	Opening Hours
MCH House	X	X	X	X	X	X	7.00 – 15.30 (M-F) 8.00 – 11.30 (S)
Balmoral HLC				X			8.10 – 15.00
Lordswood HLC	X		X	X			8.10 - 11.45
Parkwood HC		X	X		X		8.10 – 11.45
Rainham HLC		X		X	X		8.10 – 11.45
Twydall Clinic	X			X	X		8.10 – 11.45
Walter Brice Centre	X	X	X		X		8.15 – 11.45
Keystone HC	X	X			X		8.15 – 11.45
Isle of Grain Clinic			X				8.30 – 11.30
<i>Rochester HLC (GP led walk in service)</i>	X	X	X	X	X		<i>8:15 – 11:30</i>

- 4.7 The CCG are working with MCH to ensure more equitable access to services provided in each of the existing Healthy Living Centres (HLCs), to offer more choice to patients. These buildings are purpose built health care facilities that offer a range of care services on one site. Providing services

in the HLCs and ensuring they are configured optimally for patient facing, clinical care is a key element of the Medway local estates strategy.

- 4.8 Information in the above table shows that phlebotomy service provision is already provided in HLCs but the current duration of provision is limited. The plan developed by the CCG and MCH will offer extended phlebotomy service provision in the HLCs listed above.
- 4.9 The other clinic sites in Medway that offer phlebotomy service provision: Twydall Clinic, Parkwood Health Centre, Walter Brice Centre and the Isle of Grain clinic will remain as listed in the table above.
- 4.10 In summary, the key changes to phlebotomy service provision in Medway are:
- From September 2019, phlebotomy clinics opening hours will be extended so that they are open from 7am in Lordswood, Rainham and Balmoral HLCs.
 - Between September 2019 and March 2020, services will be further extended to offer later opening times (until 3.30pm) in the above HLCs.
 - Balmoral HLC will offer phlebotomy service provision over 6 days of the week.
 - Provision for Saturday clinics will be increased and will be available in 2 locations (Lordswood and Balmoral HLCs).
 - An extra clinic day will be provided at Keystone Health Centre on a Thursday.
 - By the end of March 2020, phlebotomy service provision will no longer be offered at MCH House.
- 4.11 It is worth noting that patients will be able to access any of the services provided; either in or outside of the locality in which they live, which ever they feel is more convenient or easier to access.
- 4.12 The table below reflects all of the planned changes which will be in place by March 2020.

Table 2: Phlebotomy service provision by March 2020

Clinics	Mon	Tue	Wed	Thu	Fri	Sat	Opening Hours
Balmoral HLC	X	X	X	X	X	X	7.00 – 15.30 (M-F) 8.00 – 11.30 (S)
Lordswood HLC	X		X	X		X	7.00 – 15.30 (M-F) 8.00 – 11.30 (S)
Rainham HLC		X		X	X		7.00 – 3.30
Parkwood HC		X	X		X		8.15 – 11.30
Twydall Clinic	X			X	X		8.15 – 11.30
Walter Brice Centre	X	X	X		X		8.15 – 11.30
Keystone HC	X	X		X	X		8.15 – 11.30
Isle of Grain Clinic			X				8.15 – 11.30
Central Chatham	Details to be confirmed						
MCH House	Phlebotomy service provision will no longer be delivered at this site.						
<i>Rochester HLC (GP led walk in service)</i>	X	X	X	X	X		<i>8:15 – 11:30</i>

5. Service in Central Chatham

- 5.1 There is currently no phlebotomy service provision in central Chatham. The CCG and MCH are working collaboratively to explore options to also provide a phlebotomy service in this locality. A new HLC is planned for central Chatham however, until this is in place interim arrangements are being reviewed. This includes the use of existing GP premises, and the potential use of the Pentagon Centre in Chatham for delivery of this service (and potentially other adult community health services).

6. Analysis of data to provide equitable access across all localities

- 6.1 The data gathered to inform the re-alignment of services to ensure they are closer to home for patients, shows that where provision exists, most patients choose to go to their closest clinics, as shown in the table below.

Table 3: Showing clinic attendance by locality*

Current	Peninsula	Strood	Rochester	Chatham	Lordswood	Gillingham	Rainham
MCH House	2625	2662	2074	5014	13282	18395	12249
Balmoral HLC	93	13	5	120	267	2330	19
Walter Brice Centre	8346	506	55	56	68	74	40
Keystone HC	1116	8087	187	146	96	84	24
Lordswood HLC	62	55	128	355	10484	168	73
Twydall Clinic	123	14	26	146	122	3838	2336
Parkwood HC	32	19	14	45	115	848	7540
Rainham HLC	84	48	30	175	254	2248	10594
Isle of Grain	-						
Grand Total	12481	11404	2519	6057	24688	27985	32875

- 6.2 Analysis of MCH's performance reporting data was undertaken to identify which geographical localities patients were travelling from. This information was compared with clinic attendance data; to identify which phlebotomy clinics patients were attending.

*patient's GP practice code was used as a proxy measure for the geographical localities analysis.

- 6.3 The data showed that patients from the Lordswood, Rainham and Gillingham areas are currently attending clinics held in the HLCs. A number of patients from these same areas are also attending MCH House in Gillingham. Currently the provision at MCH House is much greater i.e. it is the clinic location that is open the greatest number of days per week, offering the longest number of hours each day. By improving access to phlebotomy service provision at the HLCs, patients will have more choice and opportunity to access services closer to home.
- 6.4 The number of contacts in Lordswood, Gillingham and Rainham are higher when compared to Strood, the Peninsula, Rochester and Chatham; there are GP practices which also offer a phlebotomy service including the Rochester area which could contribute to this.

6.5 Feedback from the eight week stakeholder engagement undertaken between September and October 2018 (for the adult community health services programme) also supports the need for changes to be made to the service, to ensure more equitable access across localities.

6.6 In response to extending the hours and days of larger services in each of the seven localities, 79% of respondents perceived this change as improving patient experience. As part of the engagement, feedback specifically relating to phlebotomy services was received. This highlighted that access to Phlebotomy services can be difficult in some areas particularly for those with mobility problems.

7. Transport and Access

7.1 The existing HLCs are centrally located for patients and are within close proximity to local transport routes. As part of the adult community health services programme, travel analysis was undertaken as part of the case for change on access routes to the HLCs for all services. The data showed:

- The average distance by road for patients to current community clinic locations is on average 5.8 miles compared to a reduced distance of 3.6 miles where all services are provided at Healthy Living Centres (HLC)*.

*Public Health analysis completed in May 2018 using 'Map Modeller' based on 2016/17 community contacts.

- 78% of the whole population will be able to reach a HLC within 20 minutes by public transport.
- Over half of the population will be able to walk to an appointment at a Healthy Living Centre within 25 minutes.

7.2 All HLCs have access to public car parks which are within close proximity of each of the HLCs – two provide free parking, with two providing fee paying parking.

7.3 Patients will be able to access any of the services provided; either in or outside of the locality in which they live, whichever they feel is more convenient or easier to access.

8. Risk management

8.1 Phlebotomy service provision risks

Risk	Description	Action to avoid or mitigate risk
Increase in the number of complaints when services start to move.	There is a risk of additional complaints if the communication plan does not adequately inform service users of the benefits of the service change and improved provision as phlebotomy services move from MCH House to increase provision across the rest of Medway.	Having a robust communications plan to inform service users of the changes will help to mitigate this risk. See attached draft communications plan. With the roll out Order Communications (the electronic system for ordering tests including blood tests) the new output forms issued to patients will contain the most up to date information for all phlebotomy clinic locations, days and times. As the days start to reduce at MCH house and increase in other clinic locations this information will be updated accordingly.

9. Financial implications

9.1 There are no financial implications to Medway Council directly arising from the contents of this report.

10. Legal implications

10.1 Regulation 23 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 requires relevant NHS bodies and health service providers (“responsible persons”) to consult a local authority about any proposal which they have under consideration for a substantial development of or variation in the provision of health services in the local authority’s area.

10.2 In January 2018, the Committee reached the following decision regarding the adult community health services programme: *“To protect the Overview and Scrutiny statutory right to comment and with no intention of slowing down the recommissioning process, the Committee determined that the revised model*

presented was a substantial development of or variation in the provision of health services in Medway.”

- 10.3 The Committee has been updated on progress of the adult community health services programme including the feedback on the public engagement on the seven key changes within community services. The Phlebotomy service is one of the services in scope of the adult community health services programme and was included in the engagement activities undertaken as part of this programme including the public engagement on the key changes.

11. Recommendations

11.1 The Committee is asked to:

- i) Note the planned changes to the phlebotomy service provision.
- ii) Note that these changes are in line with the seven key changes for the adult community health services and aligned to the Medway Model and that these changes will help to ensure more equitable access is offered across each of the seven localities, with more access to extended provision and offering more choice closer to home for patients.

Lead officer contact

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Appendices

Appendix 1 – DRAFT Joint Communications Plan which sets out the communications schedule for the changes to the phlebotomy services provision.

Please note that this is a draft document and will continue to be developed during August 2019. This also includes the joint statement from the CCG and MCH about the changes to the phlebotomy service provision in Medway (see Appendix 1 in the attached draft communication plan).