

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

15 JULY 2010

PHLEBOTOMY SERVICE PROPOSAL

Report from: Rose Collinson, Director of Children and Adults

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Summary

Members are asked to consider a report received setting out proposed changes to the phlebotomy (blood collection) service in Medway.

1. Budget and Policy Framework

- 1.1 Under Chapter 4 – Rules, paragraph 22.2 (c) terms of reference for Health and Adult Social Care Overview and Scrutiny Committee has powers to review and scrutinise matters relating to the health service in the area including NHS Scrutiny.

2. Background

- 2.1. Each local NHS body has a duty to consult the relevant Overview and Scrutiny Committees (OSCs) set up by Medway Council on any proposal it may have under consideration for any substantial development of the health service in or affecting Medway or on any proposal to make any substantial variation in the provision of such services. This is additional to any discussions that NHS bodies will have with the Council, as distinct from the OSCs about service developments, especially where they link to services provided or commissioned by the Council. The duty to consult relevant OSC Committees is also additional to the duty placed upon NHS bodies to consult and involve patients and the public. Appendix A sets out a briefing on the topic.
- 2.2. Appendix B sets out the completed questionnaire relating to a substantial service variation or development in relation to changes to the phlebotomy service in Medway.

3. Financial and legal implications

- 3.1 There are no financial, legal or risk implications specifically arising from this report.

4. Recommendations

4.1 Members are asked to comment on the attached report.

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Background papers - none



MEDWAY PRIMARY CARE TRUST

BRIEFING PAPER – PHLEBOTOMY SERVICE PROPOSAL

1. Introduction

The aim of this paper is to examine the opportunities for the development of more community based phlebotomy services. The movement to more community based services supports the Care Closer to Home agenda, and will enable greater local access for patients, whilst reducing delivery pressures on secondary care providers.

2. Background

NHS Medway currently commissions phlebotomy services from Medway NHS Foundation Trust (MFT) and Medway Community Healthcare (MCH). Twenty three GP practices are also signed up to a Locally Enhanced Service (LES) for phlebotomy.

The key issues with the current phlebotomy service are:

- Increasing activity year on year across all providers. MFT in particular have raised this matter as part of the contract negotiation meetings and it remains on the issues log. MFT has formally written outlining options for the service.
- Poor access and choice in terms of clinic provision, particularly for those patients who live in more rural areas e.g. Isle of Grain.
- Long waiting times are also a source of frustration for patients.
- Opening times are restricted to Monday to Friday usually between the hours of 8.30am to 11.30am for most providers (with the exception of MFT who offer services until 4.30pm). No early appointments are currently available (before 8.00am) or weekend appointments (Saturday morning) which would be of benefit for the working population.
- Issues with the transportation of bloods from clinics and GP practices to the pathology lab are restricting the development of the service in the community. Clinics and GP practices are prevented from expanding their services, which would allow greater choice for patients because of the inflexible blood collection times.

3. Proposal

It is proposed to review the Phlebotomy Services in Medway with a view to:

- Improving access to a quality phlebotomy service that is closer to home (including a greater choice of clinic locations and appointments at times that are more convenient for patients)
- Improving patient choice of phlebotomy providers
- Improving patient experience
- Reducing waiting times for patients and delivery pressures on providers

A demand and capacity exercise will be undertaken across all current providers, to identify whether there is sufficient capacity within current providers to meet the increasing demand for this service.

A market research exercise will be undertaken to establish the nature and extent of the provider landscape for the phlebotomy, services which will seek to identify the range of providers able to deliver this service.

Priority will be given to improving the service for the Isle of Grain following a patient petition received. Negotiations are underway to pilot a service there within the current contract with MCH. Further work needs to be undertaken to examine the current geographical spread of clinics across the rest of Medway and determine whether they are located in areas of greatest need.

Service options will be modelled and costed, following a benchmarking exercise, assessment of demand drivers, good practice evaluation and value for money assessments.

4. Patient and Public Involvement

A patient survey is being undertaken across all providers. This was designed to support the care closer to home agenda and identify areas for improvement for patient experience through better access and waiting times. Over 100 questionnaires have been completed by service users attending MFT, MCH and GP clinics as at the end of June 2010. The outcome of the questionnaire will inform and shape the final configuration of phlebotomy services in Medway. The final results are currently pending.

5. Timescales

A paper outlining options for the service will be presented to Planned Care, multi agency Strategic Commissioning Group on 13 July 2010. If appropriate, this will then be escalated to full business case.

**Tracy Bishop
Commissioning Manager Planned Care
June 2010**

MEDWAY COUNCIL

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Health Overview and Scrutiny**Health Service development or variation -
 assessment form**

In order that the relevant Health Overview and Scrutiny Committee can assess whether it agrees that a proposed service change or development is “substantial” please provide the following details.

A brief outline of the proposal with reasons for the change and timescales

It is proposed to review the phlebotomy services in Medway, with a view to:

- Improving access to a quality phlebotomy service that is closer to home (including a greater choice of clinic locations and appointments at times that are more convenient for patients)
- Improving patient choice of phlebotomy providers
- Improving patient experience
- Reducing waiting times for patients and delivery pressures on providers
- Business case to be written by July 2010

Extent of consultation

- (a) Have patients and the public been involved in planning and developing the proposal?
- (b) List the groups and stakeholders that have been consulted
- (c) Has there been engagement with the Medway LINK?
- (d) What has been the outcome of the consultation?
- (e) Weight given to patient, public and stakeholder views

The phlebotomy review was prompted following the receipt of a petition submitted from the Grain Disabled and Carer’s Group regarding the lack of phlebotomy provision on the Isle of Grain and several patient complaints. Discussions are ongoing with local GPs, and a meeting is to be set up with the Grain Disabled and Carer’s group to discuss future service options.

Regular communication is made with PALS, who provide feedback in relation to any patient complaints or queries concerning phlebotomy, in order to identify common themes.

With regard to the review, further patient engagement processes are planned. Comments have also been sought from GP clinical leads, the Head of

Business Management and Performance at Medway Community Healthcare (CH) and the General Manager for Diagnostic and Outpatients at Medway Foundation Trust (FT). The questionnaire will be used to ascertain patient's views and satisfaction levels in relation to the location of clinics, waiting times and access to clinics.

It is intended that the outcome of the questionnaires and meetings with interest groups will be reflected in the business plan and service specification for the proposed service.

Effect on access to services

- (a) The number of patients likely to be affected
- (b) Will a service be withdrawn from any patients?
- (c) Will new services be available to patients?
- (d) Will patients and carers experience a change in the way they access services (ie changes to travel or times of the day)?

Just over 124,000 patients accessed phlebotomy services during 2009/2010. This includes patients who accessed services via community clinics provided by Medway CH, Medway FT and GPs who are signed up to a Locally Enhanced Service contract.

It is anticipated that more patients will be accessing this service during 2010/2011 due to the roll out of health checks in Medway. If the number of patients invited to attend for a health check take up their invitation, an additional 9,404 patients will require phlebotomy services.

The final configuration for phlebotomy services has not been agreed. It is intended that the proposed service will offer more localised clinics closer to patient's homes, shorter travel distances, easier access/parking and shorter waiting times. It is also proposed that patients will be offered more choice via the introduction of extended opening times, including earlier access in the morning (from 7 am) and late evening (open until 8pm at least one evening a week) and weekend access (Saturday mornings). These proposals are subject to agreement and verification following patient engagement exercises and consultation with providers.

Demographic assumptions

- (a) What demographic projections have been taken into account in formulating the proposals?
- (b) What are the implications for future patient flows and catchment areas for the service?

By offering phlebotomy services in a greater number of locations, that are closer to patient's homes, it is anticipated that this will reduce pressure on providers. Extended hours will offer patients greater choice and should help prevent long waits at peak times.

Work to plot access times to clinics and patient flows from GP practices is underway. It is proposed that there will be an agreed access time (walking or by car) for all clinics.

Can you estimate the impact this will have on specific groups?

- (a) What will be the impact on children?
- (b) What will be the impact on people with disabilities?
- (c) What will be the impact on older people?
- (d) Has an equalities impact assessment been carried out of this proposal?

An Equalities Impact Assessment has not yet been carried out but will be as part of this exercise.

A domiciliary service provided by District Nurses currently exists for patients who are housebound. This service would be expected to continue.

It is proposed that the impact of the phlebotomy review, will have a positive outcome for all those groups listed, as regardless of where a patient lives they should be able to access a local, quality service, within agreed distance/travelling times and be seen within agreed waiting times.

Choice and commissioning

- (a) Will the change generate a significant increase or decrease in demand for a service arising from patient choice, payment by results and practice based commissioning?
- (b) Have plans been made for “financial cushioning” if additional capacity is not taken up?
- (c) Is the proposal consistent with World Class Commissioning and reflected in NHS Medway commissioning plans?

The proposed reconfiguration of the phlebotomy service will not increase demand for the service. External factors (e.g. health checks) will have a greater influence. The availability of more clinic locations and extended hours should reduce the pressures on current providers.

This proposal is reflected in NHS Medway’s commissioning plans and the Annual Operation Plan:

Care Pathways - Closer to Home

- Developing the capacity and capability of local services whilst offering more choice and greater responsiveness to local need

It is also consistent with the following WCC principle:

- Promotion of continuous improvements in quality and outcomes through clinical and provider innovation and configuration

Clinical evidence

- (a) Is there evidence to show the change will deliver the same or better clinical outcomes for patients?
- (b) Will any groups be less well off?
- (c) Will the proposal contribute to achievement of national and local priorities/targets?

The clinical outcome for patients will not alter as there will be no change in clinical practice. However, we may find that by helping patients to access services, this will have a resulting impact on improving patient’s compliance

with treatment.
 No patient groups will be less well off.
 The proposal is in line with national and local priorities/targets regarding care closer to home.

Joint Working

- (a) How will the proposed change contribute to joint working and improved pathways of care?

It will facilitate better joint working with providers of the service. One of the key factors in changing the current service involves the transportation of bloods. It is essential that agreement is reached on changes to the current collection system, in order to be able to offer more localised clinics. With this agreement, a significant change could be made to current service provision, which would result in improvements for both providers and patients alike.

Health inequalities

- (a) Has this proposal been created with the intention of addressing health inequalities and health improvement goals in this area?
 (b) What health inequalities will this proposal address?
 (c) What modelling or needs assessment has been done to support this?
 (d) How does this proposal reflect priorities in the JSNA?

The proposal will take account of existing inequities within the current provision. There is disparity in access to services, as well as service provision. Currently some patients living in remote areas (e.g. Hoo Peninsula and the Isle of Grain) have restricted access to local services. The Grain Disabled and Carer's Group have identified that a number of elderly patients do not have access to their own transport and so have to rely on infrequent public transport, in order to access the service, which is both costly and time-consuming. Work is underway to plot and confirm access times to services via car and bus routes. An assessment of the population's need for this service in this area will also be undertaken.

With regard to service provision, of those patients registered with GPs who are signed up to the phlebotomy LES, the majority are able to book appointments and have their blood taken at their practice. All other patients do not have the option of booking an appointment, and have significantly longer waits at either Medway FT or Medway CH clinics. It is proposed that waiting times should be consistent and achieved within an agreed time limit across all clinics.

Wider Infrastructure

- (a) What infrastructure will be available to support the redesigned or reconfigured service?
 (b) Please comment on transport implications in the context of sustainability and access

The proposed service will make use of existing community buildings e.g. healthy living centres, community clinics/community hospitals.

Transport – parking is likely to be easier for patients in community settings.

Public transport links are established to current community clinics/healthy living centres/community hospitals.

Do you believe the outlined proposal is a substantial variation or development?

No

Is there any other information you feel the Committee should consider in making its decision?

No

