

EXTERNAL SERVICES SELECT COMMITTEE - DEVELOPMENTS IN ADULT PHLEBOTOMY PROVISION IN HILLINGDON

Committee name	External Services Select Committee
Officer reporting	Richard Ellis, NWL CCG Hillingdon Borough Director
Papers with report	Appendix
Ward	n/a

HEADLINES

This paper is to brief members of the Committee on developments in phlebotomy services provided over the period of the pandemic and into recovery. Routine Phlebotomy services are now provided in practices in all PCNs with full primary care coverage across the borough.

The drivers for the transfer of Phlebotomy clinics from THHT hospital sites to general practice were outlined in the paper presented to this Committee in July 2021. This transition programme has received positive feedback from patients and staff alike and resulted in a huge fall in patient demand for the hospital Phlebotomy clinics at Mount Vernon Hospital (MVH).

Recently there have been discussions for Practices/PCNs to also offer phlebotomy for Urgent blood tests with this taking effect from mid-March 2022, with THH and MVH to have a contingency in place to support.

RECOMMENDATION

For External Services Select Committee to note:

1. the content of the paper, and acknowledge plans by MVH to stand down routine phlebotomy clinics from 14th March 2022 in response to the transfer of the routine Phlebotomy service into Primary Care sites;
2. the options for urgent blood tests, to be taken at Practices/PCN level rather than MVH; and
3. the separate proposals by MVH for use of their phlebotomy outpatient estate.

SUPPORTING INFORMATION

Table 1 below shows the local Borough plan for primary care Phlebotomy activity for the service from **full** roll out in July 2021 and the actual activity year to date as at December 2021. (Note: the activity is below plan due to vacutainer supply shortages. This has been a national issue and is still ongoing although supply availability is improving.)

Table 2 shows the activity figures for MVH Phlebotomy Clinics for 2021/22 which demonstrates the reduction in the demand for the service since Phlebotomy clinics at GP Practices were **fully** rolled out in July 2021 to replace the service previously provided at the Hillingdon Hospital site.

1.0 Hillingdon Borough Plan and current activity for routine bloods

Quarter	Plan	Actual Activity
Q2 – July – Sept 2021	45,835	35,006
Q3 – Oct – Dec 2021	45,835	32,437 (awaiting correct figures from one PCN so could be higher)
Q4 – Jan – Mar 2022	45,835	(40,000 expected across the quarter could be higher due to practices completing checks)
Total	137505 (FYE Plan: 183,300)	80000

2.0 MVH routine activity – (NB: figures do not include Urgent bloods or DNAs)

Note that the annual activity for phlebotomy at Hillingdon Hospital and MVH combined in 2019/20 was 175,031 (20/21 figures are not comparable due to suspension of services during lockdowns). Approximate breakdown between the two sites was: 103,000 at Hillingdon Hospital, 72,000 at MVH, with an average quarterly activity for MVH approx. 18,000 slots.

Quarter	MVH Activity 2021/22
Q2 – July – Sept 2021	8943
Q3 – Oct – Dec 2021	5484
Q4 – Jan – Mar 2022	Still tbc
Total	14427 for 2 quarters

The demand at MVH has fallen by 60% to date, due to the replacement of services by general practice. We believe that demand would have fallen even further without the vacutainer shortage; practices were unsure that they would have sufficient stocks to meet patient demand, and hence continued to refer to MVH in the expectation that hospital stocks were more robust.

3.0 Next steps for Routine and Urgent Phlebotomy Clinics

We believe that it now makes clinical sense for routine blood tests to be carried out entirely in general practice, and for MVH to concentrate their phlebotomy activity on their own outpatient clinics only. General practice would therefore be responsible for GP-generated blood tests and (by agreement on a case-to-case basis with the hospital) blood-tests initiated by hospital consultants prior to a referral or hospital treatment. Patients have been very supportive of this shift of phlebotomy from hospital to community, since it reduces the need for travel or hospital waits.

We have also been discussing moving urgent weekday bloods to the community, while retaining contingency support (and of course emergency cover) at THH and MVH. We have defined 'urgent' as 'a test requiring same day results to inform possible changes to clinical management'. Two principal options for providing this service have been developed in consultation with practices and PCNs, and are set out in more detail in the options appraisal.

Option 1 – Practices to provide their own urgent phlebotomy, using on-site phlebotomist

Option 2 – Practices to nominate a hub practice within their PCN to receive all patients requiring an ‘urgent’ blood test that day

Practices can offer both options – by agreement within their PCN - if they think this will work best in guaranteeing continuity of service for their patients.

Since all blood tests are analysed at Charing Cross Hospital, one key logistical issue is collection and delivery of the samples to enable prompt reporting. We have agreed with the laboratories that:

- Where the urgent sample reaches the lab by 13:30 (Monday to Friday), the result will be sent back to the practice before 18.00 on the same day, so that the practice can contact the patient in the event of any adverse results
- Where the sample reaches the lab after 13.30, or if the results are not available till after 18.00, the lab will advise NHS 111 in the event of an adverse result. NHS 111 will take the necessary steps to contact the patient, and alert GP out of hours or advise attending Hillingdon A & E etc. This is the current practice by the lab for any adverse result, routine or urgent, where the referring clinician is not likely to be available to see the patient. This will ensure that full support is maintained to the patient, even on a Friday or over a Bank Holiday weekend.
- Results that prove to be ‘within limits’ will be available to the practice the next day (or Monday following Friday) in the usual way

Phlebotomy Clinic moves at MVH

The onset of the new Omicron variant of CoVID meant that in December 2021 there was a need to create a local Hillingdon Hospitals space for a NHS staff PCR swabbing hub. This has been running well over recent weeks, serving primary care, hospital staff, CNWL staff, and (by arrangement) a number of other health and local authority staff. With the changes in current Government guidance, it is likely that this service will be stood down shortly. The situation will of course be kept under close review.

As a result, phlebotomy services have been moved at MVH from its original clinic into 2 side-rooms in the Main Outpatients Department. This is consistent with the THH decant programme underway in preparation of the new build at THH, which was due to move Phlebotomy from the lower ground Annex corridor by July 2022 in any case.

To ensure safe use of the physical space, and reduce cross-infection risk between patients and staff, it is proposed to finalise the transfer of routine phlebotomy services from MVH to general practice, and concentrate the MVH service on the patients due to attend their own outpatient clinics.

There has been a history of close partnership working between MVH phlebotomy and general practice services, both before and during the pandemic, and both sides will ensure that contingency cover will be offered for urgent (and routine) tests in the event of service demand.