

This paper is to brief members of the Committee on developments in phlebotomy services provided over the period of the pandemic and into recovery. Phlebotomy services are now provided at locations across the borough with positive feedback being heard from patients and staff alike.

1.0 Introduction and Background

1.1 Covid-19 response by Hillingdon Hospitals (THH)

The outbreak of COVID-19 in 2020 has triggered reviews of many local services due to the need to reduce the risk to patients from unnecessary exposure to potential sources of COVID-19 infection, and to minimise cross-contamination through use of strict decontamination protocols.

Consequently a review of Hillingdon Hospitals' out-patient services identified that these requirements in the interests of patient safety impacted on the capacity of hospital services – for instance, by lengthening appointment slots to allow for infection prevention and control (IPC) processes - and on the use of the physical estate – for instance, by the requirement to implement social distancing guidance, to have separate entry/exit points, and waiting rooms with sufficient space to help maintain separation and reduce risk.

As a result of this reduced capacity, the number of available appointments was severely restricted. In addition, capacity was further reduced by redeployment of clinical staff to more urgent clinical duties, and by absent staff who were shielding or ill.

1.2 Consequences for Phlebotomy Services at THH

Phlebotomy Services - taking samples of patients' blood for laboratory testing and analysis - in Hillingdon have traditionally been a hospital-based service, with 86% of bloods taken in hospital-based clinics prior to Covid. Over 187,000 patient attendances were recorded annually (15,590 per month) at walk-in phlebotomy clinics at Hillingdon Hospital or Mount Vernon Hospital (MVH). A limited number of appointments were also available at 8 outreach clinics across the borough, as well as a home visiting service (operated by CNWL).

These were habitually very busy clinics, with 12 patients being seen every hour in 5-minute slots. This regularly led to long waiting-times for patients; even at the start of clinic, at 7.30 am, there were often more than 30 people waiting to be seen, with waiting-times during the day sometimes reaching 2-3 hours.

The numbers of patients involved, the limited clinical and waiting space available, and the pressures on the service meant that responding effectively to the IPC expectations caused by Covid reduced walk-in capacity at THH by 61%, since hospital appointment slots needed to lengthen to 10-12 minutes, with only 5 or 6 patients bled an hour. The impact of staff absence due to shielding or illness also meant that THH was forced to close half of the 8 outreach clinics.

Initially the impact for patients of the reduction in capacity was minimal because referrals from GPs also reduced, since they were required to focus on Covid-19 and urgent or essential services only.

By August 2020, however, the lack of capacity and the growing backlog of patients who needed blood tests led to waiting-times lengthening and considerable patient queues. This itself caused IPC concerns as the hospital outpatients waiting area can only safely accommodate 40 socially-distanced patients (as opposed to 80 pre-Covid), and MVH has very limited waiting space. The outreach walk-in clinics also proved difficult to manage social distancing in a safe manner, due to the unpredictability of the numbers of patients arriving at any one time.

In September 2020, following the Care Quality Commission's visit to Hillingdon Hospital, Trust management took the decision to close the phlebotomy clinics on the main hospital outpatient site, on the basis of patient safety and the proper protection of all staff, patients and carers attending the service.

Hillingdon CCG, with local Primary Care Networks and general practices, therefore decided to work with stakeholders, including THH and CNWL, to devise appropriate alternative arrangements that would maintain this fundamental clinical service for the benefit of patients.

2.0 A Practice-Based Phlebotomy Model

2.1 Local alignment with national good practice

As noted above, phlebotomy in Hillingdon has traditionally been hospital-based, but this is unusual both inside and outside NW London. Across London, most CCGs have had for several years a Local Enhanced Service (LES) for phlebotomy services provided by GPs in their practices, offering patients a more local and convenient service. The crisis of Covid therefore offered the opportunity to explore the feasibility of a safer service and one more local to patients' homes and communities.

Close collaboration with practices, PCNs, HHCP, CNWL and THH staff have developed the new service in 3 main stages over the last 12 months.

2.2.1 Initial Covid response (August/September 2020)

With the planned lifting of Covid restrictions last summer, there was a requirement to introduce services to manage the backlog of demand for phlebotomy, while maintaining a safe service for patients and staff. Hillingdon CCG therefore developed an interim solution to support the hospital to bridge some of its capacity gap and offer services in a safe environment. The Hillingdon GP Confederation set up and staffed 3 Primary Care sites in GP Practices, as a rapid interim solution, with the opportunity to test the running of phlebotomy in a primary care setting.

2.2.2 Interim Response to THH Phlebotomy Clinic Closure (January 2021)

The initial intention was to run this primary care-based service, alongside THH and the walk-in clinics, as a transitional service pending the development of a local phlebotomy LES from April 2021. However, the second wave of Covid-19, and the consequent decision by THHT to close its Phlebotomy clinics at Hillingdon Hospital in January 2021, meant that the CCG had rapidly to bring forward the introduction of a more locally-based service.

With the support of GPs, the Confederation, HHCP, CNWL and THH, replacement services were developed, comprising:

- new clinics in 3 GP Practices
- additional clinics at MVH and existing Community Health Centres
- extra clinics available at weekends

2.2.3 Longer Term Recovery and Management of Backlog (April 2021 to date)

Between April and July 2021, a primary care-based service has been steadily rolled out across the borough, predominantly in individual practices but with some joint services between neighbouring practices or at a shared hub. All patients in all 45 practices across Hillingdon now have access to local phlebotomy services, and no longer need to travel to THH or MVH unless for other clinical reasons.

It is likely that the existing MVH service will be transferred to practices once there is demonstrable and sustainable capacity to manage this service locally. This will have the added advantage of enabling the Trust to free up their phlebotomists to work on inpatient wards. However, this will be the subject of discussion with local practices, patients, MVH and THH staff.

Phlebotomy services continue on both hospital sites, not only for hospital ward and A & E clinical needs, but also for urgent same-day-result bleeds to support GPs with their clinical consultations, and for some specialist blood tests which require to be processed within a short time-period.

Contracting with the practices to provide this service will be done via a Locally Enhanced Service, likely to be offered from July 2021 by NWL CCG. The volumes of clinical samples will be monitored carefully throughout 21/22 to ensure that sufficient capacity is provided at local level, with appropriate waiting times and of course in a safe clinical environment. Although exact comparison of clinical activity has its own challenges, we are confident that the number of appointments offered in general practice will be higher than those historically offered in THH, with demonstrably improved local access.

A number of benefits for patients have already been demonstrated, as set out in section 3. These will continue to be monitored during 2021/22.

3. Benefits

3.1 Accessibility

Lord Carter's classic report into NHS Pathology Services concluded that: "priority should be given to ensuring that pathology services are made more responsive to users' requirements; and, in particular, that phlebotomy and sample collection services should be made more accessible and convenient"

Since 14 June, all Hillingdon practices are now offering a Phlebotomy service either in their own practice or through a hub in their local Primary Care Network. This has particularly improved access for patients in the South of the Borough by offering more convenient local access and thereby helping to reduce inequalities. We hope that, as the service becomes established, some practices will be looking to offer evening and weekend appointments.

Practices have already received feedback from their patients that they are delighted that they no longer have to travel to hospital for a blood test, with requirements for parking and associated stress. The unpredictable waiting-times had sometimes meant that patients were travelling across the Borough, and needing to wait for up to 2 hours to have a blood sample taken in a 5 minute appointment. Examples of feedback can be found at the end of this Appendix.

3.2 Patient safety

Offering booked appointments at the patient's practice enables safe management of patient flows and effective social distancing. Local services are safer for patients who previously were required to travel on public transport across the borough to the hospitals.

3.3 Equality and Diversity

There are no implications for groups with protected characteristics. An Equality Quality and Impact Assessment has been undertaken.

3.4 Paperless system

A practice-based service ensures that the phlebotomist has access to the EMIS GP system and is able to see the test request in the system, just as the GP is able to access the test result later at their convenience. The previous system, with transactions between the GP practice and THH, required a pathology test request from the GP. If this was mislaid, this would often cause delay and occasionally require the patient to return to the hospital with a replacement form.

3.5 Patient Experience

Blood tests taken in the practice offer continuity of care for patients in familiar surroundings, with a known clinician. The opportunity to choose an appointment date and time has been shown to improve patient satisfaction.

3.6 Carers Experience

Convenient local access means that carers will no longer have to travel to hospital with the patient they care for.

3.7 Clinical Effectiveness

Improved capacity and availability of urgent appointments in practices supports timely availability of test results to support evidence-based clinical intervention and reduces the need for the patient having to travel to the hospital for an urgent bleed.

3.8 Productivity and Innovation

Local GP-based services link with the proposals in the THH Redevelopment Plans for more community-based care, where safe and clinically sustainable. This model helps to relieve the pressure on the secondary care Phlebotomy service to focus hospital phlebotomy services on those for whom these are most appropriate, while freeing up resources to support inpatient wards.

Where practices manage their own phlebotomy services, this enables them to offer “one stop shop” services, and holistic Year of Care support, to patients with Long Term Conditions.

3.9 Staff Satisfaction

Clinical staff within the practices report improved job-satisfaction through providing holistic care to their patients. A reduced level of complaints from patients – indeed, an improved patient experience and higher satisfaction levels - supports the ability of both professional and non-clinical staff to provide the quality of care they aspire to.

4. Disbenefits

It is acknowledged that some patients prefer the convenience of walk-in services. There is some evidence that these services reduce DNAs (since there are fewer booked appointments made). However, it is evident that booked appointments are far more effective at protecting patients (and staff) from Covid infection risk.

The LES service specification enables practices/ PCNs to offer a walk-in service if they are able to manage it in a covid safe way should they feel this is best for their patient population.

5. Engagement

Due to the nature of our COVID-19 response and our requirement to expedite changes at pace to keep patients and staff safe, we have not been able to engage and consult with our local communities on these service changes in as much detail as we would normally have wished.

However, we believe that these actioned changes take into account the wider strategy outlined in the NHS Diagnostics Recovery and Renewal Plan (2020) that ‘community phlebotomy services should be improved, so that all patients can have blood samples taken close to their homes, at least six days a week, without needing to come to acute hospitals.’

Stakeholders have reviewed and assessed the most effective way to provide a more accessible service to Hillingdon patients while taking into consideration the strict infection prevention control measures that have to be adhered to as we continue to respond to the COVID-19 pandemic and the need to align services with the other 7 boroughs in NWL.

Patient feedback about the benefits and impacts of these service changes will be sought over July and August by:

- Reviews from patients who have used the phlebotomy service recently
- Practice Patient Participation Groups
- holding patient focus groups
- the general practice survey
- A patient experience questionnaire (paper and online versions) in conjunction with HealthWatch

A detailed engagement plan is being finalised.

This feedback will be collated, reviewed and used for any necessary changes in the light of experience, and will support future development and continuous improvement of the service.

BACKGROUND PAPERS

The NHS Long Term Plan: <https://www.longtermplan.nhs.uk/wpcontent/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf>

Report of the Review of NHS Pathology Services in England Chaired by Lord Carter of Coles [Carter Report second Dec08.pdf \(networks.nhs.uk\)](#)

NHS Diagnostics Recovery and Renewal Plan (2020) [BM2025Pu-item-5-diagnostics-recovery-and-renewal.pdf \(england.nhs.uk\)](#)

EXAMPLES OF PATIENT FEEDBACK ON PRIMARY CARE PHLEBOTOMY SERVICE

*Quote from Dr Selvi Dinakarababu Townfield Doctors Surgery Hayes.
"my patients love the practice Phlebotomy service particularly the elderly patients. When I say to them they need a blood test they say oh no I don't want to have to go to the hospital to have my blood taken. Then when I tell them that we can take the bloods in the surgery they are extremely happy"*

From feedback questionnaires of The Confederation service run by St Martins (Ickenham), Kincora (Hayes) and Acorn (Uxbridge) Medical Centres

<i>Social distancing was properly maintained by the staff. The lady who took the samples was really good and she did her job really well while maintaining all the safety measures.</i>
<i>Social distancing was properly maintained by the staff. The lady who took the samples was really good and she did her job really well while maintaining all the safety measures. The lady who took my blood was incredibly gentle and calm, she made me feel completely relaxed. It was amazingly quick and painless, extremely professional! Thank you, I'm usually so nervous and faint-y with blood tests but she was perfect. I only want my blood tests done by her!</i>
<i>Great! Everything very clean, organized and very friendly people! I am very happy with all the services! Miss. who collected my blood is also a love!!</i>
<i>Charming friendly phlebotomist</i>
<i>Very pleasant from reception & the person who done the phlebotomy.</i>
<i>The nurse the carried out my blood test was amazing kind and patient. So helpful to me as I was very teary and find this a traumatic experience. Please can she be thanked for such kindness. Thankyou. Nurse was based in room 1.</i>
<i>It was a wonderful experience and the staff were good and helpful</i>

My Phlebotomist was so lovely, really pleasant and smooth. She did it so quickly and painlessly. It was all done so promptly. I was called in to my appointment very promptly and the receptionist answered all my questions. Can't speak more highly of my Phlebotomist and experience.

Person collecting my blood sample made me feel extremely comfortable when I said that I am scared about the pricking part. I am very glad and thankful for her to make me feel this good. She made my day.

Can recommend this place very highly. The very helpful and friendly receptionist was fantastic. The superb, young nurse was very caring, gentle, friendly, lovely with great manners and she knew her way with a needle. She is amazing.

The lady who did my bloods was amazing and very professional. She's a real asset to the practice and NHS

The lady that did the blood test was very good. I'm needle phobic and she put my mind at ease, was quick and reassured me throughout. The most pleasant blood test I've had.