



BROMLEY CIVIC CENTRE, STOCKWELL CLOSE, BROMLEY BRI 3UH

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## HEALTH SCRUTINY SUB-COMMITTEE

**Meeting to be held on Tuesday 6 March 2018**

Please see the attached report marked "to follow" on the agenda.

- 8 PHLEBOTOMY SERVICE AT PRINCESS ROYAL UNIVERSITY HOSPITAL - DIRECT ACCESS (CCG) (Pages 3 - 6)**

*Copies of the documents referred to above can be obtained from*  
<http://cds.bromley.gov.uk/>

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## London Borough of Bromley

### PART 1 - PUBLIC

#### Briefing for Health Scrutiny Sub-Committee 6<sup>th</sup> March 2018

## DIRECT ACCESS PHLEBOTOMY SERVICES IN BROMLEY

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Chief Officer: Dr Angela Bhan, Bromley Clinical Commissioning Group

### 1. Summary

- 1.1 This report is to provide an update on potential changes to phlebotomy services in Bromley to the HOSC.
- 1.2 King's College Hospital NHS Foundation Trust (KCH) wish to use the phlebotomy (blood taking) space at the Princess Royal University Hospital (PRUH) for other patient services, and they have requested that the CCG commissions a different provider to deliver these phlebotomy services on a different site. Some discussions have taken place so far, and Bromley CCG is working to provide alternative arrangements for patients who use the PRUH to ensure they continue to have access to blood tests requested by their GP or other community clinician.
- 1.3 The PRUH will continue to provide phlebotomy for patients on their wards and those using their outpatient services. Children's blood tests would not be impacted by this change. There will still be a walk-in phlebotomy service at both Beckenham Beacon and Orpington Hospital. However, the change being proposed will mean there would no longer be a walk-in phlebotomy service at the PRUH for people referred by their GP (or community based clinician) for a blood test.

### 2. **THE BRIEFING**

#### 2.1 *Direct Access Phlebotomy in Hospital*

2.2 Going for a blood test following an appointment with a GP is something nearly all NHS patients experience at some stage. "Direct Access" phlebotomy is the term used to describe the blood tests that have been requested by a GP or community based clinician. The majority of adults referred by their GP for a blood test use their nearest hospital offering **walk-in clinics** Monday to Friday between 7.30am-5pm (at Beckenham Beacon, Orpington Hospital, and PRUH).

#### 2.3 *What do we currently have in the community for phlebotomy?*

2.4 In addition to phlebotomy services provided at the PRUH, Beckenham Beacon and Orpington Hospital, two other services are available for Bromley patients:

- 1) Bromley CCG has a contract with 28 general practices to deliver phlebotomy on-site in the surgery as an “Enhanced Service”. Not all general practices provide this themselves and many practices sub-contract to Bromley Healthcare. Bromley Healthcare also delivers the District Nursing service and part of their role is to take bloods for patients who are housebound.
- 2) A pilot of a booked appointment service provided by the Bromley GP Alliance has recently been put in place. This service is delivered from three phlebotomy ‘hubs’ (based at Ballater Surgery, Dysart Surgery, and Oaks Park Medical Centre) and has been very successful; patient feedback has been exceptionally positive. The pilot started in January 2017 and the service is now subject to a contract. By the end of March 2018, the service is projected to have offered 8000 appointments and is now fully utilised by patients.

2.5 *What is the extra demand that will need to be met in the community with the PRUH changes?*

2.6 The KCH team (and the CCG) have undertaken a week long audit of activity at the PRUH in January 2018 to estimate the annual number of blood tests taken as a result of GP/community referrals at the site. This is estimated to be 37180, and is not the same as the total numbers of patients using the clinics, as some patients have more than one test in a year. Figure 1 demonstrates the results of this audit.

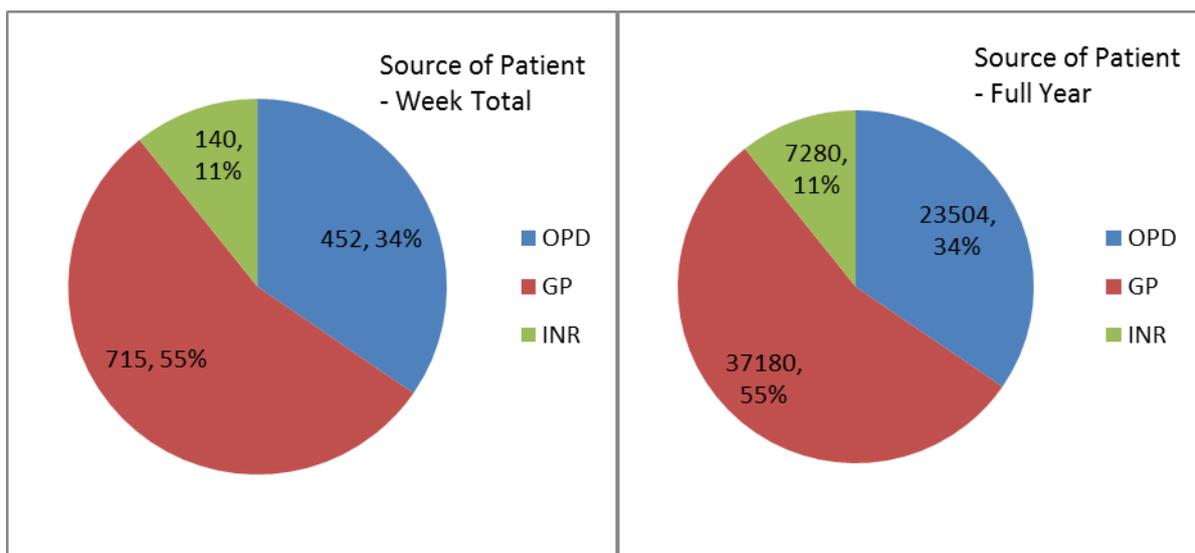
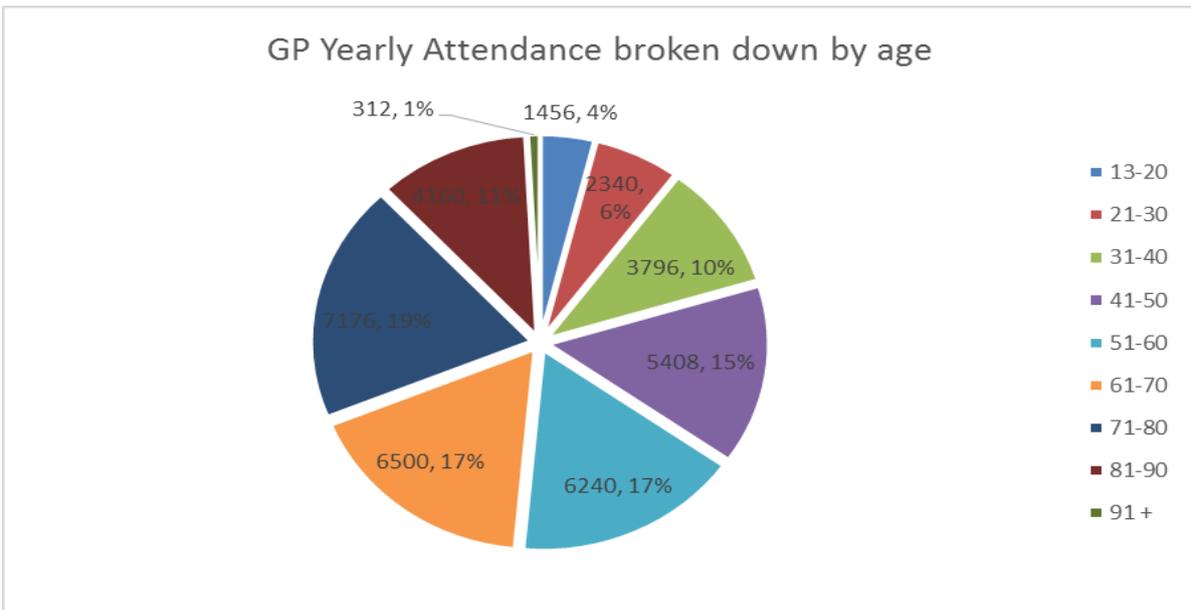


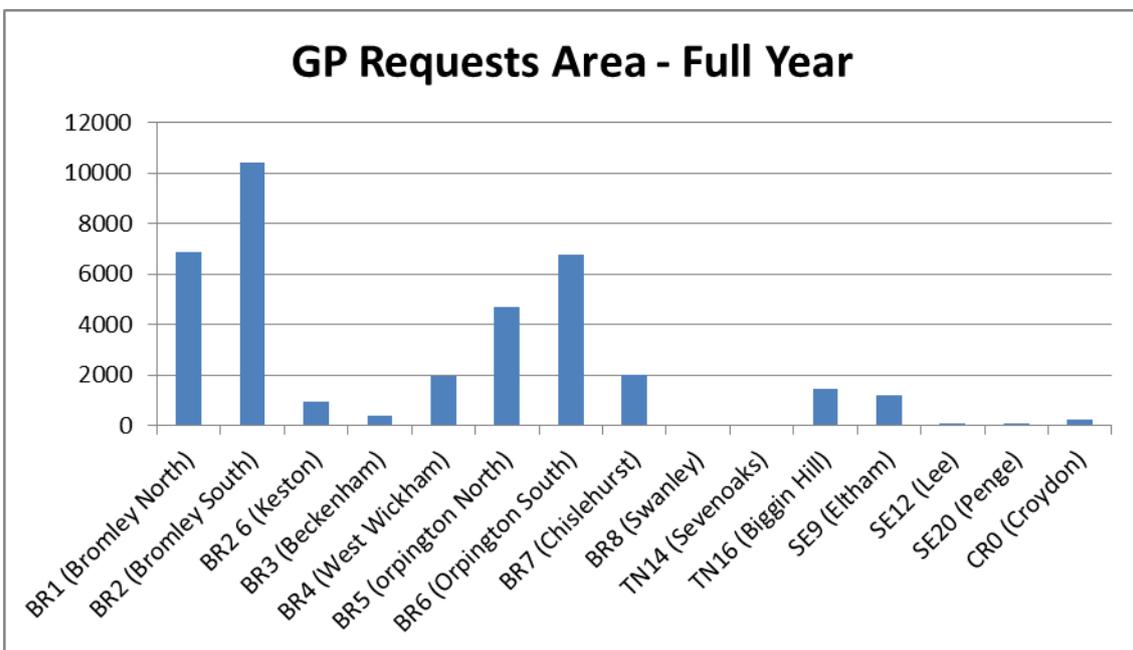
Figure 1. Source of Patient indicating total for week and extrapolation for full year effect (OPD: outpatients. GP: “Direct Access” / community referrals. INR: patients on an anticoagulant medication requiring regular monitoring of their International Normalised Ratios)

2.7 It is expected that the group most affected by the PRUH change would be older, ambulatory people (those patients who are not housebound and are not eligible for patient transport; they may be dependent on public transport). Whilst the majority of users of the PRUH walk-in clinics are working age adults, a large number of people over 60 currently use the service (figure 2). There is also a cohort of patients on anticoagulation medication who regularly have phlebotomy to check their INR (International Normalised Ratio) levels.



**Figure 2. Direct Access referrals to PRUH broken down by age**

2.8 Unsurprisingly, populations close to the PRUH will be most affected by this change with particularly high usage of the walk-in service from those living in Bromley South and Orpington South (figure 3). It is not anticipated that Beckenham Beacon or Orpington Hospital could cope with the extra demand from phlebotomy patients ‘displaced’ from the PRUH and any mitigating actions would have to take this into account.



**Figure 3. GP requests related to Patient Address (attending PRUH walk-in)**

2.9 *What are we going to do?*

2.10 Bromley CCG has been working on both a short term and a long term plan.

a) *Short term*

In the first instance, an interim service with local providers is being developed to pick up patients who would normally use the PRUH. This will enable the PRUH to use the phlebotomy

space for other much needed patient services. A date for the change in service can then be agreed, that would enable patient engagement and communication to take place.

### **Aims for the interim service**

- Increase the capacity for phlebotomy in the community to meet the extra demand
- Provide extra phlebotomists and clinics and extended clinic times
- An extra 'hub' or venue is required in the area near the PRUH
- Ideally, the service should offer a combination of booked appointments and walk-in sessions
- To minimise disruption to the availability of phlebotomy in Bromley by maintaining strong working relationships with GPs, transport, and pathology labs.

Another aim of the interim service is to afford the CCG the time to launch and complete a full procurement and mobilisation of a consolidated community-based phlebotomy service.

#### *b) Long term*

The CCG's long term vision for Bromley is that there will be a single phlebotomy service with a number of accessible venues across the borough offering a mix of booked appointments and walk-in sessions, and incorporating all the aims of the interim service.

The options for where and when to get a blood test would be explained on one side of paper or leaflet that would be handed out with the blood test request form. The information would also be widely available across the borough, on websites, etc. We want to take this opportunity to create a simple and straightforward service for Bromley people to easily access phlebotomy at the right time and place. It is likely to take at least 9-12 months to develop this service.

### **Glossary**

CCG Clinical Commissioning Group

GP General Practitioner or General Practice

INR International Normalised Ratio levels (used to judge the dose of anticoagulants required)

KCH King's College Hospital NHS Foundation

PRUH Princess Royal University Hospital