

ADULT CARE AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE**20 MARCH 2018**

REPORT TITLE	Community Phlebotomy Service Update
REPORT OF	Chief Officer, NHS Wirral Clinical Commissioning Group

REPORT SUMMARY

This report details current progress to date for the delivery of the Community Phlebotomy Service.

In April 2017 GP Members demonstrated a high level of interest to deliver a GP practice-led provision. Subsequent GP member and public engagement was undertaken during May 2017. Findings from this engagement were used to inform the new service design.

In December 2017, NHS Wirral CCG's Governing Body approved the proposal of a GP practice led approach, subject to additional assurances being received from all GP practices, in addition to the completion of outline implementation plans.

The commission is now about to enter the mobilisation phase, and is working towards a 1 July 2018 start date.

The Community Phlebotomy Service will support the *Healthy Wirral* agenda as part of the Wirral Plan 2020 by helping to support Wirral residents to keep as healthy as possible and reduce health inequalities.

This new service will have an impact upon all residents in all Wards within the Borough.

RECOMMENDATION

The Adult Care and Health Overview and Scrutiny Committee are asked to note the content of this report.

SUPPORTING INFORMATION

1.0 INTRODUCTION

- 1.1 During the April 2017 GP Members meeting, members demonstrated a level of appetite for a practice-led provision. As a result further GP member engagement was undertaken to establish the wider level of interest. In addition, public engagement was also undertaken to inform service redesign.
- 1.2 Due to the level of patient and member interest for practice-led delivery, the proposed procurement option was to disaggregate the existing annual total budget individually amongst all 52 Wirral GP practices to enable the delivery of a GP practice led service.
- 1.3 Existing contracts with Wirral Community NHS Trust and the ten practices who deliver the service independently have been extended until 30 June 2018, with the new service commencing on 1 July 2018.

2.0 ENGAGEMENT

2.1 Member Engagement

- 2.2 In May 2017, a survey of all GP member practices was undertaken to determine their preference for an in-house or alternative delivery model i.e. to continue with the existing hub delivery model. Overall 55% (29) practices wanted to provide their own in-house service and 42% (22) opted for a hub service model. 3% (2) had no preference.

2.3 Patient Engagement

- 2.4 In May 2017, daytime and evening stakeholder events were held. Feedback received informed the development of the revised service specification.
- 2.5 A public survey was also undertaken in May 2017. This engagement was supported by local partners and stakeholders such as, Healthwatch; WIRED and GP practices via patient participation groups. A total of 505 responses were received.
- 2.6 A summary of what was most important to patients is highlighted below;

55% (277)	To attend my local GP practice
30% (150)	To be able to walk into a venue at a day/time of choice
29% (148)	Parking
28% (139)	To have a pre-booked appointment
22% (112)	To attend a venue of my choice
13% (65)	Later appointments
9% (46)	Good transport links

3.0 NEW SERVICE DESIGN

- 3.1 The key changes to the new service provision following clinical and patient engagement are as follows:

- All practices will offer a combination of appointments and drop-in locations. These may be at a patient's own practice or a neighbouring practice, depending upon the practice's delivery model.
- Greater choice for patients.
- All practices are responsible for paediatrics and home visits. Currently this is varied across amongst practices delivering the service
- Response timeframes have been adjusted following clinical engagement. Routine referrals will be seen within 5 working days of referral and urgent referrals will be seen within 2 working days of referral.
- Opening hours to be extended from 8am with a potentially later opening time of 6pm. The proposed closing time is currently being considered in regards to the new delivery models and impact upon laboratory resources.
- Maximum wait for patients at drop-in locations will be 30 minutes.

4.0 COMMISSIONING APPROACH

- 4.1 Following the GP member engagement, a significant number of member practices advised they wanted to either provide an independent in-house service for their patients or work collaboratively with their respective Federation for the service to be delivered on their behalf.
- 4.2 The total annual budget will be disaggregated amongst all 52 member practices as part of a Locally Commissioned Service, via a NHS Standard Contract.
- 4.3 In December 2017 Wirral CCG's Governing Body approved the proposal of a GP Practice led service delivery model, subject to further assurance being received from practices and/or Federations for the areas of governance, service delivery, mobilisation and contract responsibilities. In addition, outline implementation plans were requested from interested practices and Federations. Engagement with the Local Medical Council has also undertaken throughout the commissioning process.

5.0 SERVICE IMPLEMENTATION

- 5.1 Outline implementation plans and assurance has been received from both Wirral GP Provider (GPW-Fed) Ltd and Primary Care Wirral Federation on behalf of their member practices. In addition, individual plans have been received from: St Catherine's Health Centre; Heatherlands Medical Centre; Hamilton Medical Centre and TCG Medical Services consisting of TG Medial Centre; Leasowe Primary Care Centre; Townfield Health Centre; Woodchurch Medical Centre and Prenton Medical Centre. Where a practice has no interest to deliver the service themselves, they have worked with their respective Federation who will make arrangements to deliver the service on their behalf.
- 5.2 The commission is now in the phase of mobilisation. NHS Wirral CCG is working closely with both the Wirral Community NHS Foundation Trust as current provider,

and the new providers to ensure service transition is as smooth as possible for patients.

- 5.3 The new service changes will be promoted and communicated to patients prior to and following service launch via patient participation groups; GP practices; CCG website and social media.

6.0 FINANCIAL IMPLICATIONS

- 6.1 The total annual budget of £798,709 will be disaggregated amongst the 52 individual member practices.

7.0 LEGAL IMPLICATIONS

- 7.1 NHS Wirral CCG has sought formal legal advice in regards to the adopted commissioning approach.

8.0 RESOURCE IMPLICATIONS: ICT, STAFFING AND ASSETS

- 8.1 NHS Wirral CCG has sought legal advice in regards to the position on TUPE (Transfer of Undertakings (Protection of Employment)). NHS Wirral CCG also advised practices and Federations to seek independent advice regarding this matter.

- 8.2 One GP Federation is working in collaboration with the current provider - Wirral Community NHS Foundation Trust, and have co-designed their delivery model. This includes utilising existing Trust staffing resources, thus minimising any potential redundancy implications.

- 8.3 Following the receipt of proposed delivery models, discussions are now being progressed with Wirral University Teaching Hospital Pathology Laboratory regarding the timely transfer and processing of blood samples in line with resources and wider considerations. This may result in adjustments to the newly proposed closing time of 6pm to ensure blood samples are tested within clinical time restrictions.

9.0 RELEVANT RISKS

- 9.1 Risks and mitigating actions are being monitored and reviewed throughout the commissioning process.

10.0 EQUALITY IMPLICATIONS

- (a) Yes, an Equality Impact Statement has been completed.

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SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Not Applicable	