

A. Service Specifications

Mandatory headings 1 – 4: mandatory but detail for local determination and agreement

Optional headings 5-7: optional to use, detail for local determination and agreement.

Service Specification No.	
Service	Community Phlebotomy
Commissioner Lead	Alex Degan & Mandy Seymour
Provider Lead	Devon Trusts
Period	1 April 2020 – 31 March 2021 (3 months' notice will be required to terminate this contract by either party)
Date of Review	The CCG aim to review this LES in March 2021

1. Population Needs							
1.1 Local context	<p>This enhanced service is commissioned by Devon CCG a. The service is for the provision of a phlebotomy service for patients requiring general blood tests that relate to hospital specialist-initiated activity, e.g. blood tests relating to outpatient appointments.</p> <p>The aim of this commissioned service is to recognise the primary care-based phlebotomy is not part of the GP core contract or other local enhanced service. This service is not intended to replace the hospital phlebotomy service but to support it.</p> <p>By providing this service in primary care it will relieve the pressure on the secondary care service and provide a much more convenient service for patients requiring blood tests for this purpose.</p>						
2. Outcomes							
2.1 <u>NHS Outcomes Framework Domains & Indicators</u>	<table border="1"> <tr> <td>Domain 1</td> <td><u>Preventing people from dying prematurely</u> Reducing deaths in babies and young children</td> <td></td> </tr> <tr> <td>Domain 2</td> <td><u>Enhancing quality of life for people with long-term conditions</u></td> <td></td> </tr> </table>	Domain 1	<u>Preventing people from dying prematurely</u> Reducing deaths in babies and young children		Domain 2	<u>Enhancing quality of life for people with long-term conditions</u>	
Domain 1	<u>Preventing people from dying prematurely</u> Reducing deaths in babies and young children						
Domain 2	<u>Enhancing quality of life for people with long-term conditions</u>						

	<u>Health related quality of life for people with long term conditions</u> <u>Ensuring people feel supported to manage their condition</u> <u>Improving functional ability in people with long term conditions</u>	X
Domain 3	<u>Helping people to recover from episodes of ill-health or following injury</u> Emergency admissions for acute conditions that should not usually require hospital admission	X
Domain 4	<u>Ensuring people have a positive experience of care</u> Patient experience of primary Care Patient experience of hospital care Friends and family Test <u>Improving children and young people’s experience of healthcare</u> <u>Improving peoples experience of integrated care</u>	X X
Domain 5	<u>Treating and caring for people in safe environment and protecting them from avoidable harm</u> Patient safety Incidents reported Reducing the incidence of avoidable harm	X

3. Scope

3.1 Aims and objectives of service

The provider (GP) will be required to provide the following phlebotomy service to patients:

- Take blood samples that relate to hospital specialist-initiated activity, e.g. blood tests relating to outpatient appointments.
- Following a request from the patient for a hospital generated blood test; provide the blood test service at an appropriate time, location and environment.
- Provide the equipment necessary to provide the service. This includes ensuring that the equipment meets the requirements of the local laboratory service.
- Take blood sample and label
- Record blood test on clinical system using the following SNOMED code: -

**Phlebotomy generated from secondary care done by practice
XaK2I (165791000000107)**

There is no requirement to:

- Record any additional information as this is a provision of phlebotomy only service.
- Operate any aspect of a recall system
- Review results or take any action associated with results

Providers are encouraged to consider collaboration if more appropriate either by Primary Care Networks or other agreed practice grouping.

3.2 Service description/care pathway

- The provider who is treating the patient will supply the patient with a blood test request form or label that will ensure that the results will be returned to and followed up by that requesting department. The system to achieve this is not currently operating in all localities however it is possible for results of blood tests to be copied to the Consultant under whom the request was made.
- Patient advised by acute trust specialist team to arrange their blood test at their GP practice.
- Provider (GP) to book appropriate time slot with appropriately skilled phlebotomist, nurse or HCA
- Take blood sample and label
- Record blood test on clinical system using the following SNOMED code: -

**Phlebotomy generated from secondary care done by practice
XaK2I (165791000000107)**

3.3 Population covered

The registered GP provider population or GP provider network population.

3.4 Any acceptance and exclusion criteria and thresholds

Acceptance

- Patient with a blood test form clearly identifying results have been requested by (state specialist and department) and will be followed up by that department.
- General blood tests that relate to hospital specialist activity, e.g. blood tests relating to outpatient appointments.
- Fasting blood test

Exclusions

- **Patients with no blood test request form, as results must be followed up by the requesting specialist. This clause will come into operation as soon as the laboratory requesting systems are fully enabled to make it operational. Ensuring this is in place will be an important component of the review of**

this LES in March 2021.

- Children under 16 years
- Patients unable to attend practice premises
- Glucose tolerance tests
- Synacthen tests
- Any blood test requiring additional administration or medication
- Phlebotomy relating to the management of patients prescribed specialised medicines under a share care agreement with the acute provider (SMS LES)
- Phlebotomy where need is identified within General Practice for purpose of diagnosis or condition management within primary care (PPO LES)
- Phlebotomy that is otherwise explicitly commissioned

There is no requirement to:

- Record any additional information as this is a provision of phlebotomy only service.
- Operate any aspect of a recall system
- Review results or take any action associated with results as this is the responsibility of the requesting clinician from the Acute Provider.

3.5 Interdependence with other services/providers

The provider must ensure they work in partnership with local courier services for the collection and delivery of samples to the local laboratory safely and within allocated time frames.

4. Applicable Service Standards

4.1 Applicable national standards (eg NICE)

World Health Organisation (2010) WHO guidelines on drawing blood – best practice in phlebotomy

https://www.who.int/infection-prevention/publications/drawing_blood_best/en/

5. Applicable quality requirements and CQUIN goals

5.1 Applicable Quality Requirements (See Schedule 4 Parts [A-D])

Quality requirement not identified at this time.

5.2 Applicable CQUIN goals (See Schedule 4 Part [E])

No CQUIN goal established or required

Each practice must ensure that any personnel involved in providing any aspect of care under this scheme has the necessary training, skill and competency to do so.

Audit and Incident requirements are described below:

Formal incidents should continue to be reported to NHS England using the SEA form:-
<https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2015/08/sea-incident-report-form.doc>

For any other issues of poor quality of service, part of the system not working well or negative patient experience. Please continue to complete a Yellow Card form which can be found on the CCG's website:-
<https://devonccg.nhs.uk/contact-us/yellow-card>

6. Key Service Outcomes

Patients will receive a blood test in a primary care setting, reducing the number of patient contacts with secondary care and the number of journeys to hospital.

7. Financial Requirements

Budget for this service will be £3.27 x 104,293 bloods, this being the anticipated volume based on available historic activity data. This gives a value of £341,038. All parties recognise that the price of £3.27 is not sufficient to cover the full cost of this service and should be seen as a contribution towards it.

Each provider (GP) contracted to provide this service will receive their share of that budget on a weighted patient basis. This will be calculated as their share of the total weighted patient list for Practices within the Devon CCG area.

Each provider will receive a fixed amount per month without the need to claim and outstanding payments accrued since April 2020 will be included in the first payment.

There is a commitment by the CCG to monitor the number of blood tests completed. Practices will be required to submit their activity via the Commissioning Intelligence portal using the following SNOMED code to identify the number of tests per month: -

- **Phlebotomy generated from secondary care done by practice
XaK2I (165791000000107)**

The CCG will be mindful of national guidance relating to the annual inflationary uplift.

8. Location of Provider Premises

The Provider's (GP) Premises.