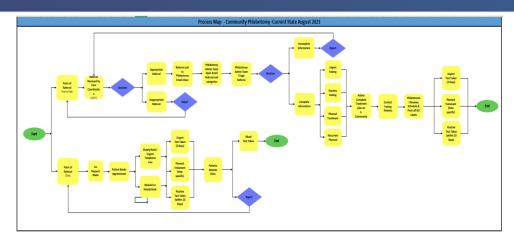
Community Phlebotomy Service



Laura Meacham, Matron Emma Bishop, Senior Sister Jasvinder Sahota, Service Delivery Manager





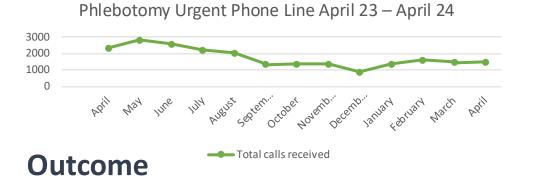
SMART Aim

To increase the compliance of the referral process into the Community Phlebotomy service of all Wolverhampton GP Practices. The aim is to achieve 95% compliance by April 2024 for all Wolverhampton GPs.

The timescale of the SMART aim was altered due to external delays.

Methodology

Key stakeholders were identified and engaged with the process. A driver diagram and process map were developed. The referral process was streamlined and shared with the GP practices in a staged roll out using the PDSA approach. The initial cycle focused on the VI practices with the second cycle including the remaining GPs across Wolverhampton.



The SMART aim was achieved in January 2024 with 98.2% GP compliance and has been sustained for the following 3 months.

Additional outcomes were achieved with increasing Phlebotomy activity, reducing calls to the Phlebotomy urgent telephone line by over 50%, and improved accessibility for patients booking online with iPad installation at VI practices. Improved patient experience was also noted.

Background

The team were tasked with improving Community Phlebotomy activity and increasing awareness of changes to the referral process to aid compliance. Patients were experiencing delayed blood tests due to being turned away at clinic as there was no ICE request for the Phlebotomist to action. There have also been IG breaches due to patients being given the incorrect printed ICE form.



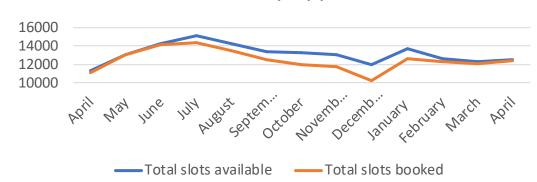
GP ICE compliance % December 23 - April 24



Measure

Whilst a risk identified within the project was the lack of auditable reporting of no ICE request available, with the numbers reported by the Phlebotomists during their huddle, GP compliance was estimated to 90%. Additional outcomes were added to the Simply Book system to allow for accurate GP compliance audits.





Community Ambulatory Care - Phlebotomy