Lancashire and South Cumbria
Integrated Care Board

Level 3, Christ Church Precinct
County Hall
Fishergate Hill
Preston
PR1 8XB

Tel: 0300 373 3550
www.lancashireandsouthcumbria.icb.nhs.uk

3rd July 2026

Phlebotomy LES 2026/27 – Expected Activity Modelling and Clarification of Activity Recording

Dear Colleagues

Following feedback received from practices regarding the expected activity levels for the **2026/27 Phlebotomy Local Enhanced Service (LES**), we have undertaken further analysis using 2025/26 phlebotomy delivery data. We also wanted to provide further clarification on how phlebotomy activity is counted and recorded.

Expected Activity Modelling

As part of this work, we analysed 2025/26 phlebotomy delivery data across the system and modelled several different approaches to calculating expected activity levels.

This included assessing benchmarks based on the Top 25%, Lower 25% and Middle 50% of practices to identify the approach that most closely reflected overall system delivery.

The analysis showed that the average delivery rate achieved by the Middle 50% of practices (the interquartile benchmark) most closely aligned with the overall system delivery rate. The **interquartile benchmark was 567 activities per 1,000 weighted population**, compared with the **overall system average delivery rate of 568 activities per 1,000 weighted population**.

The benchmarking analysis demonstrated that the existing expected activity levels already reflect the 75% threshold for full payment set out in the Phlebotomy LES Year-End Payment Approach 2026/27. As a result, the existing expected activity levels will continue to apply throughout 2026/27.

Activity Recording Clarification

For clarity, expected activity is not based on one individual patient equalling one activity. Expected activity reflects the total number of phlebotomy contacts delivered across the year.

For example, if a practice has an expected activity level of 5,000, this does not mean 5,000 individual patients. If a patient requires phlebotomy on multiple occasions throughout the year, each attendance contributes towards the overall activity total. A patient attending for four separate phlebotomy appointments during the year would therefore count as four activities.

Activity should continue to be recorded on a **per contact basis**; that is, one activity for each phlebotomy attendance or blood draw, in line with the existing coding guidance.

If you have any questions or require further clarification, please contact the generic LES inbox at - lscicb.primarycareles@nhs.net

Kind regards,

Peter Tinson
Director of Primary & Community Care Commissioning
L & SC Integrated Care Board

Donna Roberts
Associate Director, Primary Care