



Public Health
England

SOUTH EAST REGION SCREENING & IMMUNISATIONS CERVICAL SCREENING NEWSLETTER

NHS

**August 2021
Issue**

Your news for:

Surrey & Sussex
Kent & Medway
Hampshire, Isle of Wight
Thames Valley

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Plus

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Your contacts for the South East Screening & Immunisation Teams

For queries please use the generic Screening & Immunisation team (SIT) email addresses:

- ◆ Hampshire Isle of Wight:
England.Wessexph@nhs.net
- ◆ Kent & Medway:
phst@nhs.net
- ◆ Surrey & Sussex:
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- ◆ Thames Valley:
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Welcome to the first issue of our Cervical Screening Newsletter. With a focus on all things related to cervical screening in the South East, we want to give you the latest information and updates from the South East Screening teams.

Covid Update



A huge thank you to you to all for the fantastic work you have been doing to support the cervical screening programme during what has been an extraordinarily challenging year.

- Activity for April 2020 to March 2021 is estimated to be approximately 250,000 lower than the average of the previous 2 years
- March 2021 activity is approximately 125% compared to the average of the previous 2 years
- Cervical screening recovered well after the first lockdown with activity higher than normal August-March 2021

Across the SE Region Primary Care has continued to offer screening in most settings during the pandemic. Since October, when the Call/Recall team resumed the sending of invitation letters, the number of samples



received by the laboratory each week has been higher than pre-Covid expected levels. February and March saw record numbers of samples arrive in the laboratory from across its footprint.

BSPS have worked tirelessly to recruit and train new staff, implement new process to clear their pre-Covid backlog and process samples in a timely fashion. They are achieving 96.8% turnaround within 10 days and received a commendation from the National team for their performance and effectively managing to cope with high demand.

There's no room for complacency, as Covid restrictions are relaxed we must redouble our efforts to encourage those who have not taken up the invitation to make an appointment to be screened. The SITs will be working closely with the Cancer Action Working Groups to develop service improvement plans focusing in practical activities to tackle and reduce inequalities and improve uptake.

Colposcopy appointment slots have increased to keep pace with demand in most provider units as the number of referrals has increased. Whilst most providers are meeting the 2 week waiting time standards, there are a few that are struggling to meet the high demand.

Sarah MacDonald, Director of Primary Care and Public Health Commissioning NHS England and NHS Improvement - South East Region, has written to CCGs to remind them of the funding that was made available to support colposcopy increase following implementation of HPV Primary Screening. She asked that they ensure that the needs of colposcopy are factored into plans for the elective recovery funding, enabling colposcopy to recover and/or maintain waiting times in the short to medium term. Secondly to agree plans to expand colposcopy capacity in line with the investment in the long-term plan.



NHS England and Improvement are conducting a cervical screening ceasing audit as part of a national assurance process which normally takes place annually. This is to ensure that all women recorded as being ceased from the programme have been ceased correctly.

Phase 1 of the audit is expected to commence on 20th August 2021 and will include all patients who have been recorded on the national cervical screening

call and recall system since 1st April 2010 as:

- having no cervix (and are therefore no longer eligible for cervical screening) and;
- where there is no record that a ceasing notification letter was sent to them when they were originally ceased.

GP practices are asked to lookout for communications from CSAS

Sample Labelling Errors - Important Information

148 cervical screening samples were rejected by the laboratory between January and March 2021 because of errors in sample labelling.

This 148 does not include sample pots that were completely unlabeled and rejected.

The 148 samples required repeating at 20 minutes per appointment, which translates to:

- ⇒ almost 50 hours of practice nurse time
- ⇒ wasted resources in terms of laboratory time and kit, sample pots
- ⇒ additional letters that need to be sent out
- ⇒ the cost and inconvenience to the patient and the risk that they won't re-attend
- ⇒ reputational damage to the screening programme.

The majority of samples are rejected because fewer than 3 of the required patient identifiers are on the pot or request form. These errors largely involve missing dates of birth or the NHS number.

There has also been an increase in the number of related incidents reported over the last year to the Screening Quality Assurance Service (CQAS), where two or more patients are involved. For example, where the lab receives two pots from the same practice, both labelled with the same patient's details.

WHAT CAN YOU DO TO REDUCE THE NUMBER OF LABELLING INCIDENTS?



ALWAYS: 'CHECK THE POT AND THE FORM WITH THE PATIENT'

- ◆ Always check that the details on the pot match the details on the request form and then cross check these with the patient BEFORE they leave the consultation room. Most mistakes are human error but if you always check the pot and the form with the patient, then errors can be rectified before the patient leaves the room.
- ◆ If you print off sticky labels for your pot then ALWAYS make sure any spare labels are disposed of prior to inviting the next patient into the room.
- ◆ Check your ICE request forms for typos and correct sample taker details
- ◆ Ensure that sample labelling meets the minimum identifying requirements: the patient's full name (at least first and surname), the patient's DOB and a fourth identifier (NHS number or patient address).

Get it right first time! Avoid unnecessary repeats!

Sample vials/pots reminder:

To avoid rejection please remember to check that the sample vial is in date and has at least 14 days left before its expiry (the time period left must be at least equivalent to the average waiting time for results) before using it.

Transport bags:

Please ensure your practice is doing the following:

1. Place HPV cytology samples in a small blue plastic bag (provided with the sample kits) with the request form and seal the bag.
2. So that all of the tests are kept together, put all sealed blue plastic bags in to the slightly larger see-through green pathology bag (also provided with the sample kits) provided to you by BPS (do not put any other tests inside the green bags – these must only be HPV cytology tests). *If there is only a single HPV sample being handed over at a practice, then it can just be sealed in the smaller blue bag (and does not need to also be put in to a green bag).*

Use of lubricants:

If a lubricant is required when obtaining the screening sample, please ensure it is a carbomer- free lubricant.



Guidance Updates



Covid Recovery

Cervical screening in primary care should continue to be prioritised alongside cancer referrals, including both high risk and regular call/recall invitations to screening. People on the Shielded Patient List should continue to be invited to and encouraged to attend screening appointments as normal.

Withdrawal of supplementary invitation Letters

Where patient addresses change on NHAIS after an invitation letter has been sent the system will no longer generate a new letter with the new address. This highlights the importance of good data maintenance including a patient's address details to ensure they receive invitation and reminder letters.

Complaints

Some practices will not book screening appointments without a copy of the patient's invitation letter. This is outside of national guidance. Practices should always check if screening is due on Open Exeter.

NHS Adult Screening Programmes: Guidance for individuals in care home settings following screening appointments

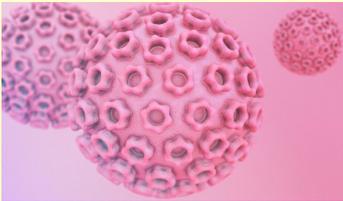
Local screening providers are reporting that care homes are mistakenly requiring residents to isolate in their rooms for up to 14 days after attending a screening appointment, leading to poor screening uptake by residents in care homes.

If screening is undertaken in a Covid19 safe way, there is no need for residents to isolate for 14 days following a screening visit.

The guidance for '*Discharge into care homes: designated settings*', (Feb 2021), states that the 14 day isolation period does not apply to: "... people using hospital services, including emergency departments, outpatients, emergency assessment areas and day care facilities, who are not admitted to a bed for an overnight stay, providing that appropriate infection prevention and control measures are followed whilst in the healthcare facility. (Section 2:11)

The guidance can be found at the following link; <https://www.gov.uk/government/publications/designated-settings-for-people-discharged-to-a-care-home/discharge-into-care-homes-designated-settings>

Human Papillomavirus home testing kits trialed in England



London trial

More than 31,000 women in London will be offered kits to carry out sample taking in the privacy and convenience of their own homes in the first trial of HPV home testing kits in England.

The swab tests will be posted or given out by a GP to increase take-up of screening for HPV.

The trial will be rolled out across 166 GP practices, with kits being sent to women aged 25-64 years who are 15 months overdue for a test and live in Barnet, Camden, Islington, Newham and Tower Hamlets.

HPVvalidate is another trial comparing results from self collected samples with those taken by clinicians.

Recruitment of participants will commence following the training of selected GP and colposcopy sites. Women attending their GP practice for cervical screening, or who have been referred to colposcopy, will be invited to take a self-test. Over the course of the study 5,000 samples will be collected from GPs and 1,750 from colposcopy clinics. For further information: [Recruitment for cervical screening self-sampling study now underway - PHE Screening \(blog.gov.uk\)](#)

Support for people who feel anxious about attending cervical screening

New national information resource published



Attending cervical screening is a personal choice but, for some people, that choice may be harder because of the anxiety it provokes. This may be because of:

- ◇ mental health issues
- ◇ previous traumatic experiences
- ◇ sexual abuse

Recognising this, a new national information resource has been published to support eligible people who feel anxious about cervical screening: [Cervical screening: support for people who find it hard to attend.](#)

People who feel anxious about attending NHS cervical screening appointments can use the information and accompanying checklist to help decide whether to attend and to plan for their appointment. The information is available in digital format and as a [downloadable A4 PDF](#) to print out for people who cannot access the internet.

The content is based on the information in the [standard national leaflet](#), but includes additional guidance on:

- ◇ booking the screening test, including pre-visits, early morning appointments and longer appointments
- ◇ planning your journey to the appointment
- ◇ questions to ask the health professional taking the sample
- ◇ other support services.

The accompanying checklist can be printed out, taken to a screening appointment and passed to the sample taker to explain what extra support may be required.

New Cervical Screening Management System goes live on 30 October! (NHAIS/Open Exeter replacement)



The new NHS Cervical Screening Management System is being implemented on the 30th October 2021. This new system, which will be simpler and easier to use, will replace the current call/recall IT system for cervical screening on the National Health Application and Infrastructure Services (NHAIS) platform which is also accessed by the Open Exeter system.

NHS Digital has been commissioned by NHSX to develop and implement the new system. The interface for staff will look and feel different and screening participants will be easier to find as the new system will comprise of a single database rather than the 94 locality-based databases currently in use across England. It will also provide better data to support programme management and commissioning.

Access to the new system will be via an NHS smartcard only, replacing the current access via Open Exeter.

Show and tell sessions are available for those who wish to see the system in development and NHSD training resources for sample takers will be available 2 months before the launch date.

The programme call and recall guidance will be updated to reflect the changes in the new system.

NHSD have sent communications to all NHS cervical screening provider organisations (Trusts and CSUs) giving the IT requirements needed to ensure that the system will work when it goes live in October. Further comms to Primary Care starts in July.

It is important that action is taken to ensure the prerequisites are met to enable you to access the new system after 30th October.



Trust based CSPL are asked to contact their IT teams and the Registration Authority (RA) responsible for setting up and issuing smartcards to ensure the necessary actions are taken:

Actions for local IT teams about the system IT prerequisites, to ensure that:

- computers are using the Version 2.3 NHS Identity agent software
- the new NHS Credential Management has been installed
- devices are ready with smartcard readers in place.

We also recommend that your organisation's computers are upgraded to Windows 10 as older versions of Windows will not be supported in the future. Further guidance to assist IT leads is available on the NHS Digital website.

For more [information about the new NHS Cervical Screening Management System](#) please visit the NHS Digital website.

Actions for RA about smartcards and workgroups

Most staff working in cervical screening services will already have an NHS smartcard set up with the correct role, however, we anticipate that a small percentage of staff may need to apply for an NHS smartcard. For all staff working in cervical screening services, a new workgroup will need to be applied to limit access only to those staff who are authorised to use the new system. **We are seeking your support with arranging the following:**

- Ensure that RA agents are aware of the need for NHS smartcard access to the new cervical screening management system.
- Process NHS smartcard requests for cervical screening staff who do not currently have one in a timely manner when they submit their application.
- Process requests for additional role-based access codes (RBAC) functions and workgroups to be added to ensure the correct permissions are in place for existing NHS smartcards holders who work in cervical screening services.

Further guidance and detailed information including RBAC is available to assist RA agents on the NHS Digital website.

If you have any questions or concerns about the new NHS Cervical Screening Management system, please email screening_implementation@nhs.net

Cervical screening awareness campaign

Jo's trust cervical screening awareness week ran from 14-21 June 2021.

Campaign materials and resources can be found here:

[Cervical Screening Awareness Week 2021 | Jo's Cervical Cancer Trust \(jostrust.org.uk\)](https://www.jostrust.org.uk/Cervical-Screening-Awareness-Week-2021)

Cervical Screening Programme - Coverage Statistics

The new General Practice Data Hub provides a collection of interactive dashboards relating to general practice.

Check the latest data for cervical screening coverage at your practice via the link below:

[General practice data hub - NHS Digital](#)

Cervical screening: cervical sample taker training

National updated guidance on the training of new cervical sample takers can be found here:

<https://www.gov.uk/government/publications/cervical-screening-cervical-sample-taker-training/training-for-cervical-sample-takers-education-pathway>.



Training Update — take a new virtual tour of the BSPS laboratory



The BSPS laboratory have produced a new virtual tour of the laboratory which will replace on site laboratory tours.

This is an essential part of sample taker training but it is also useful for all sample takers, especially if you trained some time ago.

Please follow the links to access the video online:

- ⇒ Laboratory tour: <https://youtu.be/NoRdz22gAnQ>
- ⇒ Explanation of Tomcat machine: <https://www.youtube.com/watch?v=0nDSBLjEMUY>
- ⇒ Explanation of Panther machine: <https://www.youtube.com/watch?v=PU1FBbd-7mE>

This video is the only route to complete this part of the training process due to access restrictions to the HPV screening laboratory in order to comply with strict regulations about the management of contamination risks in molecular laboratories

If you have any questions or comments about the Video please contact the BSPS HPV helpdesk on 01932 726622 or email asp-tr.bspshpv@nhs.net

The Cervical Screening Administration Service (CSAS)



Cervical Screening
Administration Service

CSAS supports the National Cervical Screening Programme by:

- Providing Prior Notification Lists (PNLs) of patients eligible for screening to GP practices
- Sending out call and recall letters to patients eligible for cervical screening tests
- Notifying patients of test results once we receive these from laboratories

Find out more about our screening administration support services provided to:

- [GP Practices/Practice Nurses](#)
- [Laboratories, Colposcopy and Gynecology Clinics](#)

Practices should submit Cease and Deferral requests via Open Exeter to CSAS before the cut off shown on the Open Exeter Prior Notification List (PNL) to avoid inappropriate invitations.

Instructions can be found here [CSAS support for Primary Care](#)

Resources:

[Cervical screening: lesbian and bisexual women - GOV.UK \(www.gov.uk\)](#)

Anyone aged 25 to 64 with a cervix is eligible for cervical screening.

This guidance is for lesbian and bisexual women, and includes information on:

- what screening does
- where to go for cervical screening
- what to do if you are told you do not need to be screened
- cervical cancer symptoms

[NHS population screening: information for transgender people - GOV.UK \(www.gov.uk\)](#)

Screening providers should make this information available to trans and non-binary people to inform them about:

- breast screening
- cervical screening
- abdominal aortic aneurysm screening
- bowel screening

[Cervical screening pathway requirements specification - GOV.UK \(www.gov.uk\)](#)

This document provides an overview of cervical screening by describing what should happen at each stage of the end-to-end pathway.



Other contacts

- ⇒ BSPS help line (professional use only not to be shared with patients):
- ⇒ 01932 726622 or by emailing asp-tr.bspshpv@nhs.net
- ⇒ Sample Taker Database: for all technical support in accessing this site: if you are registered, login to website: [Sample Taker Database Login](#) with your user name & password; or contact: cervicalsampletaker.scwcu@nhs.net
- ⇒ To contact CSAS on a range of Cervical Screening related topics follow this link: www.csas.nhs.uk
- ⇒ Open Exeter helpdesk exeter.helpdesk@nhs.net or by calling 0300 303 4034

