

Welcome

to the Winter edition of **links**, the newsletter designed to keep colleagues delivering the NHS Cervical Screening Programme up to date with news and progress from within the community.

This is your newsletter so please let us know of any local news and events by emailing us at **press.office@nhscancerscreening.co.uk** or call on **020 7400 4499**.

We'd especially love to hear about any activities you're running that are aimed at engaging with hard-to-reach groups. Sharing innovative ideas will help deliver best practice and a better service for all.

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NHS Improvement Cytology Pilot Scheme

Phase one of the pilot scheme established to test how to achieve a two-week turnaround time for women who have cervical screening tests has been extremely successful.

The NHS Cervical Screening Programme set up the pilot scheme with NHS Improvement in October 2008 to work towards meeting the two-week target for cytology samples. Achieving a shorter turnaround time is an important step to improve the early diagnosis of cancer, ensure quicker treatment, reduce anxiety for the women and improve acceptability of the programme.

10 pilot sites expressed an interest to take part in the scheme and were selected by NHS Improvement and the NHS Cancer Screening Programmes.



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Director of Diagnostics at the NHS

Lesley Wright, the Director of Diagnostics at NHS Improvement said: “The 10 pilot sites all started from a very different position against the 14-day target. Each handles at least 35,000 samples a year and, with the support of the SHA and Trust chief executive, was fully committed to the pilot.”

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Under the scheme, a multidisciplinary group of staff were trained in 'Lean Methodology', a process designed to remove waste, which originated from Toyota. Staff are taught to identify the waste and are shown how to eliminate it. In cytology, there are three largely separate teams working together through

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the sample pathway: the GP or nurse taking the sample, the laboratory, who analyse the sample and report the findings, and the call and recall centre who distribute the result to the woman. There has been a particular emphasis on co-ordinating their efforts to work as one. NHS Improvement held training workshops to bring the 10 teams together and encouraged localised 'buddy events' to share best practice.

Following their selection, the pilot sites all provided baseline data to benchmark current practice against the future target. Progress against a 14-day target has been reported utilising a one-week sample of data taken at the same point every month.

The results from phase one of the pilot scheme are excellent, with all of the 10 sites achieving significant reductions in turnaround times. Most sites met the 14-day turnaround time target in 98-100 per cent of cases, with several having smashed the target of 14 days by delivering over 90 per cent within 7 days.

Lesley Wright is delighted with the commitment of the teams and the impressive improvements they have made. She said: "I want to congratulate all the sites for working so incredibly hard. They have worked fantastically well under very difficult circumstances. There was a huge wave of additional, unexpected demand in the spring of this year surrounding the tragic death of Jade Goody. The 10 sites coped with this remarkably well, sticking with the principles of re-design and improvement. They held their nerve and had the confidence to believe that the right process would produce the right results. I am very proud of the commitment and dedication shown at every level."

NHS Improvement and the NHS Cancer Screening Programmes are now starting the roll out of phase two of the pilot scheme. On 4th November the 10 sites came together to demonstrate to the next phase of pilot sites how such impressive results can be achieved. At this event NHS improvement launched the 'Cytology Improvement Guide - achieving a 14 day turnaround time in cytology': a culmination of learning from the phase one pilot sites. The guide demonstrates how to use lean methodology and is supported by case studies or tried and tested ideas from each site.

The phase two pilot sites will be supported to take the learning from phase one and, by using and applying this knowledge, will accelerate the pace of implementation of this target. Craig Roberts, from the Royal Hampshire County Hospital in Winchester said: "The Mid and North Hampshire cervical screening service is delighted to be participating in the phase two pilot. We have seen what is achievable, using lean methodology, in the phase one sites and are excited at the prospect of implementing lean here to achieve and sustain the 14-day turnaround target".

Lesley Wright added: "We plan to hold a further event in April 2010, to demonstrate how phase one sites have sustained their improvement and how phase two have taken and applied this learning".

The Cytology Guide can be found on the NHS Improvement website www.improvement.nhs.uk/cytology

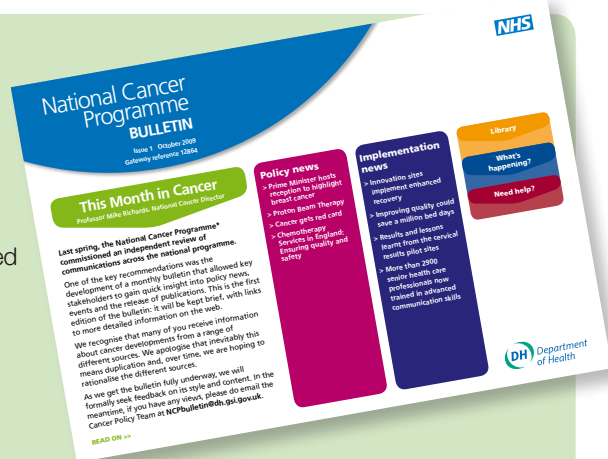
2009
Cytology
Improvement
Guide



New National Cancer Programme Bulletin

In the spring of 2009, the National Cancer Programme commissioned an independent review of communications across the national programme. One of the key recommendations was the development of a monthly bulletin that allowed key stakeholders to gain quick insight into policy news, events and the

release of publications. The first edition of the bulletin was published in October 2009. This can be accessed at the following web link: http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_108057.pdf



Publication of Cervical Cancer stats 2009



“Jade’s bravery and openness in her fight against cervical cancer has brought home to young women across the country the importance of regularly going for these checks.”

Julietta Patnick, Director of the NHS Cervical Screening Programme

For the first time since 2002, there has been a noticeable increase in uptake for cervical screening. Published on the 22 October, the cervical screening statistics for 2008/09 show a 12 per cent rise in the number of women aged 25 to 64 being screened for cervical cancer, increasing from 3.2 million to 3.6 million, in the last year.

Julietta Patnick CBE, Director of the NHS Cancer Screening Programmes commented: “We are particularly pleased to see that there has been a noticeable increase in acceptance rates in the younger age groups. Over the past decade the number of women aged between 25 and 35 years old who accept their screening invitations has been declining – we have been working hard to address this and it’s pleasing to see the increase in uptake this year.”

The statistics provide clear evidence of the ‘Jade effect’ and the influence of her high-profile case in encouraging others to attend their appointments. Andy Burnham, Secretary of State for Health, commented: “These figures show the remarkable effect that Jade Goody’s tragic case has had in reversing a downward trend in the numbers of young women attending cervical screening. Jade’s bravery and openness in her fight against cervical cancer has brought home to young women across the country the importance of regularly going for these checks”.

Not only have women been more inclined to accept invitations throughout the country, but many have also been calling their hospital clinics asking for appointments to be rescheduled if they had missed one.

Jade remained in the public eye during her battle with the disease. Prior to her death in February, she expressed her desire to raise awareness of cervical cancer, urging all women to accept screening invitations. She also made a plea to symptomatic women to see their GPs immediately: “Don’t ignore the symptoms I had. Don’t leave it too late”.

While the number of young women attending appointments has clearly increased, the results do show that coverage in the older age groups (55 to 64) has declined over the last year. It is important to address this issue and encourage all women to accept their screening invitations, regardless of how old they are.



Media

Boots offers HPV jab

There has been widespread national and regional coverage of the decision by Boots pharmacies to sell cervical cancer vaccinations over the counter. Dr Graham Marshall, Boots’ medical director, was reported to have said: “Boots pharmacists have undergone training – written and agreed by an independent panel of experts – to

provide the service.” The decision to sell the product, which will cost customers £405, provokes some controversy. Many papers report on warnings by health officials that the vaccine should not, under any circumstances, be viewed as an alternative to screening.



Boots Pharmacy are selling the vaccination

Cervical cancer mortality

Many British newspapers and journals have picked up on a study published in *The European Journal of Cancer* showing major differences in cancer mortality across the European Union. The report found that age standardised

mortality rates have fallen significantly in the older member states. However, in the newer member countries in Eastern Europe and the Baltic states, mortality has either shown smaller falls, remained high, or has risen.





Parliament

In Parliament on 14 October, Brooks Newmark MP (Con, Braintree), asked for a bill to be introduced to lower the cervical screening age to 20 arguing that: “This test can make the difference between life and death”. He claimed that, if the screening age was lowered to 20: “An extra 1.3 million women would be given a choice.” The UK currently has a vaccination programme that ends at 18 and screening programme that begins at 25, leaving a group of women in “medical limbo”.

Furthermore, Newmark insisted that the HPV vaccination is not a “silver bullet” and women still need to attend their screening appointments. Newmark urged that the government’s health policy needs to move with the times and changing lifestyles, especially as teenagers become sexually active earlier. With regards to worry over false-positives, he said that: “It was not for the government to know best what young women want.”



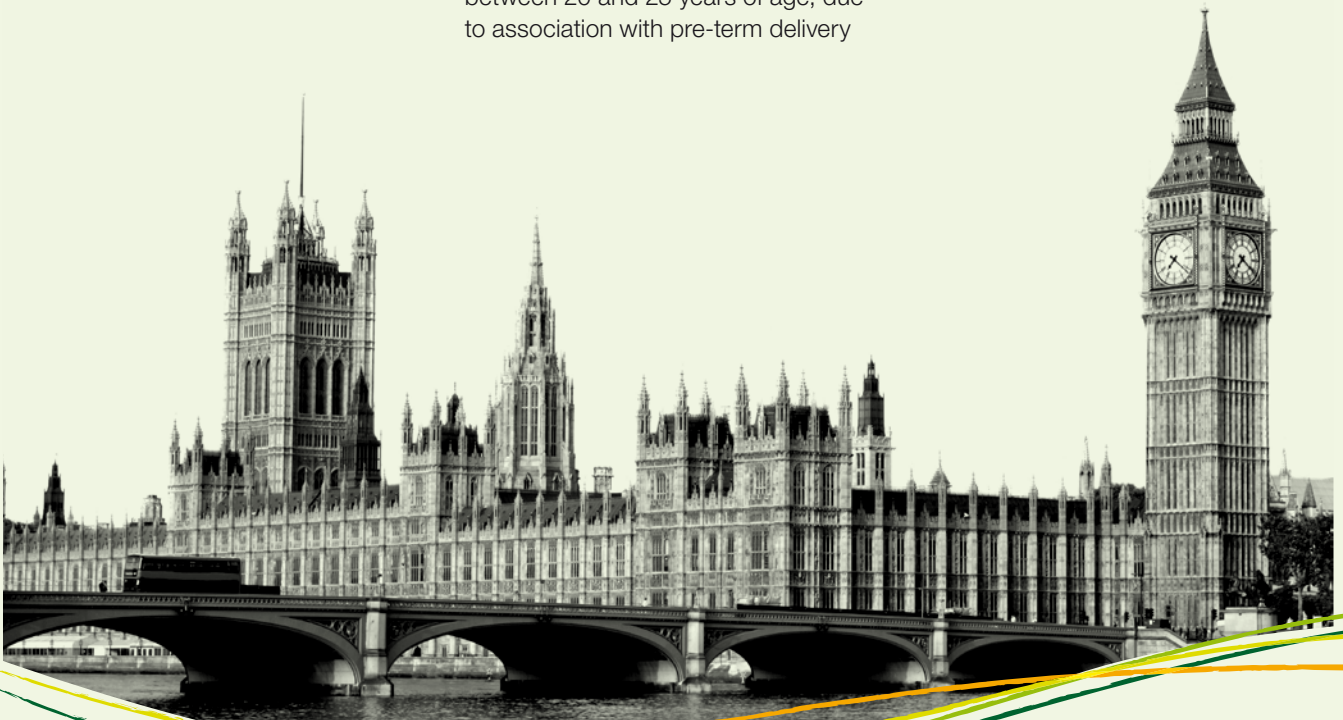
Dr Evan Harris MP

Dr Evan Harris MP (LD, Oxford West & Abingdon) voiced opposition to the bill insisting that false positives are a real issue: “When we are talking about public money, it is important to take an evidence-based approach.” He referenced the article by Professor Sasieni: Effectiveness of cervical screening with age: population based case-control study of prospectively recorded data (BMJ, 28 July 2009), quoting its conclusion: While there are cases of cervical cancer in women under the age of 25, these are very rare and there is an unfavourable risk-benefit analysis for screening of women between 20 and 25 years of age, due to association with pre-term delivery

and complications and dangers to mother and child.

As always, health was at the forefront of the 2009 party conference agenda. Secretary of State for Health, Andy Burnham, condemned the “shameful” waiting times during the Conservative government history and reiterated the Prime Minister’s announcement of a “radical reform” of the cancer services. He announced that the two-week urgent referral target for cancer will become a “permanent right”, GP’s will be given direct access to ultrasound and MRI scans, and promised that his party was working towards a one-week target for diagnosis and test results.

Shadow Health Secretary Andrew Lansley highlighted the shortcomings of the NHS in cancer care and announced plans to make the NHS more competitive with its European counterparts; in particular making one-year and five-year cancer survival rates as good as the rest of Europe. The Liberal Democrats echoed this criticism of lagging survival rates.



Hospital to text appointment reminders



Jersey General Hospital's gynaecology department is piloting a scheme to send text messages to remind patients of appointments. They are aiming to start the scheme in early 2010, initially using text reminders for colposcopy appointments, before ultimately rolling them out for all gynaecological appointments.

“I wanted to do something that would help improve the management of colposcopy appointments in a noticeable way.”

Anne Howell, a colposcopy nurse on Rayners's ward

Anne Howell, a colposcopy nurse on Rayners's ward came up with the idea while looking for ways to improve efficiency. She said: "I wanted to do something that would help improve the management of colposcopy appointments in a noticeable way.

I had just received a text message reminding me of my dentist appointment and I thought, why not try this idea in our hospital?"

Having carried out extensive research into the subject, she presented her findings to the hospital's senior management team. The idea was quickly approved and Anne expects to see it begin on 1 January 2010.

The scheme has been granted a budget of £700 to set up and run for the first year. Given that the hospital loses approximately £70 for each missed appointment, this represents a cost effective and time efficient way of ensuring that as many patients as possible attend for these essential checks. Anne said: "We are concentrating on text messages at this stage, with a view to possibly sending emails in the future. Nearly everyone has a mobile phone, but not all people have access to internet at the moment."

Anne is now in the process of gathering contact details from patients as they come in, in order to text them when their follow-ups are due. She is very pleased that the idea has been so widely welcomed by both staff and patients at the hospital: "Of the 60 or so women I have asked about it, the response has been overwhelmingly positive. Obviously a few have said they would rather not be contacted in this way and that is absolutely fine with us. But in general, people seem very supportive of the idea."

Anne has also heard from other hospital departments interested in implementing a similar scheme in the future: "The paediatrics department in particular have been very enthusiastic about the idea and are keeping a close eye on how we get on". The success of the scheme will be formally evaluated at the end of 2010.

Events / Training / Diary

East of England Cytology Training Centre

Westbrooke House, 3 The Oaks,
Newmarket, Suffolk CB8 7XN

- Introduction to Cervical Cytology for Receptionists and Administrators
9 December 2009
- Sample Taker Visit (morning and afternoon sessions)
13 January 2010
- Update Course in Cervical Cytology
2 – 4 February 2010
- Sample Taker Visit (morning and afternoon sessions)
15 April 2010

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North of England Regional Cervical Screening Training

Cervical screening training, New Croft
House, Market Street East,
Newcastle upon Tyne NE1 6ND

Website: www.cstraining.nnt.nhs.uk

Basic course:

(please note there are only 15 places
on each of these)

- North of Tyne
19 – 20 January 2010
New Croft House, Newcastle
- Durham
4 – 5 February 2010
Pioneering Centre, Newton Aycliffe
- South Yorkshire
23 – 24 March 2010
Priory Campus, Barnsley

Update Courses:

- Leeds
3 December 2009
John Charles Centre for Sport,
South Leeds Stadium, Leeds
- Tees
10 December 2009
Teaching & Learning Centre,
Middlesbrough
- Durham
13 January 2010
Chester Le Street Cricket Club,
Co. Durham
- East Yorkshire
26 January 2010
Village Hotel & Leisure Club, Hull
- North of Tyne
28 January 2010
Dissington Hall, Ponteland
- North Yorkshire
11 February 2010
Solberge Hall Hotel, Northallerton
- Wakefield
9 March 2010
Darrington Golf Club, Pontefract
- Lincs
20 April 2010
Reeds Hotel, Barton upon Humber

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0191 229 2950
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East Pennine Cytology Training Centre

Raynham House, 2 Capitol Close,
Capitol Park West, Leeds LS27 0WH

- One-Day Update Endometrial Lesions in SurePath Samples
14 December 2009
12 January 2010
2 February 2010
18 March 2010
- One-Day Update Hyperchromatic Crowded Groups & False Negative Samples
15 December 2009
7 January 2010
2 March 2010
- One-Day Update Atrophic Samples and their Evaluation in SurePath Samples
16 December 2009
14 January 2010
4 March 2010
- One-Day Course in Future Technologies in Cervical Screening
19 January 2010
- Pre-Exam Course for the Certificate in Cervical Cytology
27 – 29 January 2010
- Introductory Course for the City & Guilds Diploma in Cervical Cytology
15 February – 19 March 2010
- One-Day Update Course (Specific to Primary Screeners)
31 March 2010
- Two-Day Course in Cervical Screening for PCT Leads and Screening Programme Commissioners
24 – 25 May 2010

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