

**Cervical Screening Quality Assurance Visit 2016
Health Overview and Scrutiny Committee Briefing Paper**

1 Introduction

- 1.1 This briefing paper is to inform the Health Overview and Scrutiny Committee (HOSC) about progress on the recommendations made by the South East Coast Cervical Screening Quality Assurance Programme visit in April 2016. The review team identified several areas of good practice in cytology and colposcopy that were worth sharing nationally.
- a) The cytology laboratory has continued to place greatest emphasis on the maintenance of screening quality, despite severe difficulties with workload and staffing
 - b) The four colposcopy clinics have begun to work towards an integrated Trust wide service, including centralised first appointments and common protocols

Upon inspection, overall, the review team found a safe service. They did however identify a number of non-conformities considered high priority. This included one immediate concern related to business continuity, which related to an area of service that relied on a single member of admin staff. Necessary measures were put in place to partially mitigate the immediate risks within the programme and a further response was submitted to the QA programme office, which was sent and received within 7 days.

All the high priority issues have now been addressed. The cytology service expects achievement of the 14 day TAT for results of screening by May 2017. It has formalised its relationship with Maidstone and Tunbridge Wells NHS Trust (MTW) for provision of HPV testing and the colposcopy service has built in resilience to its administrative function. The Division has also ensured effective leadership of the service is in place, mitigated against estate issues on the Kent & Canterbury Hospital (K&C) site and ensured protocols and best practices are being adhered to in a standardised way.

2 Background

- 2.1 The East Kent cervical screening programme serves approximately 362,500 women and is provided by EKHUFT. The cervical cytology component is provided at the William Harvey hospital (WHH) site along with the cervical histology service. The cytology laboratory had a UKAS accreditation visit in 2013. The programme incorporated HPV testing (Triage and Test of Cure) into the cervical screening service in 2012 and this is provided by MTW. The programme offers further assessment and treatment at four colposcopy clinics at WHH, Buckland Hospital Dover (BHD), KCH and Queen Elizabeth the Queen Mother Hospital Margate (QEQM).

In April 2016 a Quality Assurance review was undertaken at East Kent Hospitals University NHS Foundation Trust East Kent. QA visits are undertaken by Public Health England Assurance Service and the aim of the visit is to maintain standards and promote continuous improvement in cervical screening.



3 Recommendations from QA Programme visit and mitigation

A number of recommendations were made related to the immediate and high Level issues and are summarised in the table below:

Level	Theme	Description of recommendation	Mitigation
Immediate	Colposcopy	Business continuity requires that more resilience is introduced to the Colposcopy coordinator role.	A deputy co-ordinator post has been established and filled and maternity cover for the current admin support has also been provided.
High	Colposcopy	Fully implement national test of cure protocol, including discharge after treatment. Written protocols and practice should be updated.	The clinical Colposcopy Lead has ensured that Trust protocols and practices have been revised to ensure compliance with national guidelines.
High	Colposcopy	K&C accommodation should be reviewed and reconfigured to improve facilities and provide a recovery facility in accordance with NHSCSP 20.	A full review of facilities at Canterbury has been undertaken with the estates department. An option to move the service from Canterbury to Buckland Hospital in Dover is currently being explored. Mitigating actions have been identified and put into place whilst this review is completed.
High	Governance & Leadership	There should be a Trust wide lead Colposcopist to enhance a single approach to Colposcopy across the Trust. The Trust lead will require a job description showing lines of accountability and sufficient allocated time within their job plan.	A Trust wide Colposcopy Lead has been appointed with clear lines of responsibility and the job plan has been signed off by the Divisional Medical Director and role being undertaken
High	Cytology	Implement changes in laboratory processes and working practices to facilitate achievement of two week (14 days) turnaround of Cytology results.	Changes implemented to improve working practices to facilitate achievement of 14 day target. Backlog significantly reduced with overtime and locum use during the summer 2016 to meet KPI. However this remained challenging when locum left and difficulties in recruitment. We now have agreement to outsource to Taunton Laboratory to bring position back in line with KPI. Backlog continually reviewed and monitored closely. 98% of cytology results communicated within 14 days will not be achieved until May 2017.
High	Governance & Leadership	Formalise the East Kent Hospitals NHS Trust agreement with Maidstone & Tunbridge Wells NHS Trust for provision of HPV testing for triage and test of cure.	Contract agreement with MTW and EKHUFT in place
High	Histology	All Histopathologists should use either a standard proforma or minimum dataset list for the reporting of cervical treatment specimens to ensure that all national required elements are included and an associated SOP detailing this should be devised.	Histopathology has introduced a standard pro-forma for reporting of cervical biopsies and LLETZ and the necessary associated SOP detailing this.



4 Key points of note

- 4.1 EKHUFT advises the HOSC that the cytology service at now has optimal staffing and measures are in place to reduce the backlog of cervical screening slides and meet the agreed KPI. The department also adopted a policy whereby if the 8 day KPI is breached, overtime is immediately triggered to maintain service delivery. Colposcopy has put in place mitigation to transfer patients that have fainted to Outpatients for recovery which is geographically next door to Colposcopy. This has been worked up with both staff and outpatients. It should be noted that there have been no patient safety issues.

5 Conclusion

- 5.1 EKHUFT advises the HOSC that the cytology service expects to meet and maintain the necessary national KPI by May 2017 to facilitate achievement of 14 days turnaround of Gynae Cytology results and improve the patient experience. Between now and 2019 the cytology department at EKHUFT will face further challenges in maintaining service delivery due to the impending conversion from conventional screening methodology to HPV testing. Therefore, EKHUFT will continue to work in collaboration with MTW as part of the present configuration and future pathology transformation. The colposcopy service has built in resilience to its administrative function; ensured effective leadership of the service is in place; mitigated against estate issues at K&C and ensured protocols and best practices are being adhered to in a standardised way.

