Purpose

- To support GP practices and other services taking cervical screening samples to restore services and begin to build up capacity for this programme, so that women can access the national cervical screening programme.

What has happened so far:

- Significantly fewer samples than normal are being taken, but practices are continuing to provide a minimum level of service where it is most needed. Thank you.

- To support providers to respond to the COVID-19 pandemic, the national call/recall services delayed sending routine and early recall invitation letters and reminders, for 8 weeks from 9 April, so very few women have received a new invitation since 9 April.

- Practices will have been continuing to receive PNLs and should have been acting on them normally or according to the ‘technical guidance’ that was issued in early April (NHS Cervical Screening Programme – Sample Taking Initial Guidance during the coronavirus (Covid-19) pandemic).

- Some women had a letter in March or early April and have not been seen when they normally would. We understand some may have contacted their practice or clinic and been told to book later, but many may not have contacted you or made any attempt to attend for screening, believing they were safer to stay at home and that the NHS should be protected by staying away.

- The laboratories in our area have completed pre-COVID backlogs arising from implementation issues with the HPV mobilisation, and are now turning samples around very promptly. They are now in a position to accept all samples sent in up to and over normal levels.

- As the backlog in cervical samples has been addressed you should be getting results returned within 2 weeks from the lab and sample takers should follow up any samples where a result has not been received within this timeframe with the lab in line with normal cervical screening failsafe guidelines.

- All of the colposcopy units in our area are open and are seeing the patients referred to them, in line with recommendations. Some women who have been referred with a low-grade abnormality are having their appointments delayed by 3-6 months. However, most units are starting or preparing to invite in any women whose appointment had been delayed, and are preparing to restore normal levels of capacity.

NHS England and NHS Improvement
What you can do now:

Now that the NHS is moving into ‘phase 2’ and starting to restore and recover services, all sample taking providers should begin to consider how you can offer more cervical screening sample taking appointments as part of face to face care on ‘cold’ sites or with whatever local measures you are implementing for care. If you have lists of women who previously planned to attend, and had to have their appointment rescheduled or lists of women who are now overdue, you should contact them now. General practices should start to consider how to encourage women who are due to book an appointment, if they have received an invitation letter at any point.

What will happen next:

From 6 June women who were due to have an invitation letter after 9 April will start to receive their letters. Individuals with delayed invitations for surveillance are being prioritised. Between June and September, the system will be brought back to sending letters to women at the normal date in relation to their next test due date. The phasing of this work is being informed by the normal pattern of booking appointments, and by our understanding of potential capacity at every step of the cervical screening pathway. A key action is for you to make sure that your reception and appointment booking staff are aware from now on that if women call for a cervical screen they should be booked in for an appointment, and should not be sent away.

You should also review your local records or use final non-responder lists to identify individuals whose screening may have been affected by COVID-19 (for example, their appointment has been cancelled and not been rebooked, they have been refused an appointment during the pandemic response, or they have not responded to a reminder letter) and be proactive in contacting them about their screening and giving them opportunity to attend. Many practices had been reviewing their processes for improving coverage as part of the Cervical Screening Innovation project, and this would be a good time to refresh those projects and consider how you can use the work you had done previously to support the restoration work needed now. We will be in touch with those practices directly.

Individuals for screening should now only be deferred on OpenExeter for screening in line with programme guidance (https://www.gov.uk/government/publications/cervical-screening-removing-women-from-routine-invitations/ceasing-and-deferring-women-from-the-nhs-cervical-screening-programme#deferral) and the ‘practice invitation’ reason for delaying screening should no longer be used.

Due to delays in recall, some women may be aged 65 by the time their last screening test is taken. These samples should be marked as ‘test delayed due to COVID-19’ to ensure they are processed correctly by the lab.

There will be a rate of increase of enquiries that will peak and then level off at normal levels. We are working to try to reduce the risk that this activity coincides with other busy periods in general practice particularly, such as the flu season. Everything you can do to get women
through the practice in July / August / September will help to reduce the risk of large levels of demand in the autumn period.

Please let us know if you are currently unable to provide cervical sample taking either to previously identified higher risk women or the routine cohort by emailing phcontractssouthwest@nhs.net. Similarly, please do not hesitate to contact us if you have any other cervical screening concerns, e.g. if you are finding that unmanageable numbers of women are calling for a screening appointment. By closely monitoring the situation and hearing about your issues and concerns, we may be able to adjust the ‘catch-up’ process to ensure that services are not overwhelmed.

What about PPE?


What about PPE?

Please send queries regarding this communication to: phcontractssouthwest@nhs.net

We propose to continue to use this route to keep providing you with information relevant to the cervical screening programme over the course of the recovery period.

Anna Masserick

South West Public Health Commissioning team

3 June 2020
6.1 Prioritisation Groups

People invited but not screened and people with a delayed invitation

Invitation and reminder letters will begin being issued from the beginning of June 2020. Over the next 3 to 4 months, the invitation and reminder letters that have previously been held back will be added back into the system incrementally so there may be more individuals than usual requesting a screening test over the catch up period. Individuals with delayed invitations for surveillance are being prioritised for letter production.

People invited for routine screening (due or overdue)

Individuals who request screening should be offered an appointment.

Primary care providers should review their local records or use final non-responder lists to identify individuals whose screening may have been affected by COVID-19 (for example, their appointment has been cancelled and not been rebooked, they have been refused an appointment during the pandemic response, or they have not responded to a reminder letter) and be proactive in contacting them about their screening and giving them opportunity to attend.

Primary care providers should only defer individuals for screening in accordance with programme guidance and may not use the deferral process to postpone invitations for any other reason. The “practice invitation” reason for delaying screening that may have been used initially in the early part of the COVID-19 response, should no longer be used.

6.2 Older women

Some older women who are due, or became overdue in the last 6 months, for their final routine screen may have had limited opportunity to make that appointment due to COVID-19. These are women who are aged between 59 and 64 and they remain eligible to be tested.

Records should be carefully checked to ensure they have the opportunity to attend for this last routine screening test. Final non-responder lists can be used to help with this. Proactive contact could be made to check the woman’s intentions in relation to her screening. Where there is any concern that the laboratory may not accept the test due to the age of the woman, the sample request should be marked as “test delayed due to COVID-19”.

NHS England and NHS Improvement
Cervical screening useful contacts

Queries regarding sample transport, eligibility for screening and HPV Primary screening please contact your HPV screening laboratory for your area.

Queries regarding access to OpenExeter please contact PCSE. Information is available on their website:
https://pcse.england.nhs.uk/services/open-exeter/

Queries regarding sample taker codes/access to sample taker database please contact South Central & West Commissioning Support Unit:
cervicalsamptaker.scwcsu@nhs.net

Queries regarding call/recall and ceasing please contact Cervical Screening Administration Service. Information is available on their website:
https://www.csas.nhs.uk/support/

Queries regarding trainee sample takers please contact your training provider directly.

• PDI: support@pdinet.com
• South West Cytology Training School: www.cytology-training.co.uk
• Devon Training Hub: www.devontraininghub.co.uk
• Wiltshire Training contact: jane.vowles@wiltshire.gov.uk
• Clinical Training Ltd: https://www.clinicaltrainingltd.co.uk

There is further information about the screening programme here:

If you have a query that cannot be resolved via one of these routes please contact the South West Screening & Immunisation Team: england.swscreeningandimms@nhs.net