

# SCREENING MATTERS Breast



Newsletter of the Northern Ireland Screening Programmes

Issue 14 Produced by the QARC for Health Professionals in the NI Screening Programme Spring/Summer 2008

#### **NEW CLINICAL MODULE TRAINING**

On Tuesday 19th February 2008, Kim Stoddard, Deputy Programme Manager of the Warwickshire, Solihull & Coventry Breast Screening Service, undertook one day's training at Fern House, Antrim Hospital in the new Clinical Module of the National Breast Screening System (NBSS). Participants included admin staff from all four Breast Screening Units and Dr Adrian Mairs, QA Director of the NI BSP. The NBSS is the national database which facilitates the management of all women called for breast screening within Northern Ireland from initial invitation to results—including



assessment and return to routine screening. It was explained at the course that improvements with the launch of the new

module included: screens and reports changing to modernise and simplify the recording of assessment and treatment data; data no longer relevant to modern clinical practice being dropped; obsolete record types no longer being used and the introduction of a new record type MDM, to allow the recording of multidisciplinary meetings in line with recommended best practice. This later change should in turn facilitate the use of direct entry of results by clinicians. Participants agreed the training had been of considerable benefit to their daily working practices.

## BREAST SCREENING NI Uptake Rate 2005 –2006

N. Ireland 73.2%

EHSSB 69.2%

NHSSB 69.3%

SHSSB 77.0%

WHSSB 79.2%

New Appointments See pages 2 & 3

### NEW STRUCTURES WITHIN NI SCREENING PROGRAMMES

The Northern Ireland Breast and Cervical Screening Programmes have undergone considerable change recently with regard to accountability structures for quality assurance within the programmes. These changes are the result of a number of factors including recommendations from the External QA Visit for

the NI BSP in a d d i t i o n, increased colleagues programmes UK and the capitalise on



October 2006. In there has been interaction with involved in elsewhere in the NISP are keen to examples of best

practice and established initiatives which help to maximise the benefits of both programmes. Further, following the Review of Public Administration and the recent statement by the Minister of Health, the main elements of the new

model of Services province to quality responsive to and standards driven



Health and Social within the includes "access services need" and quality continuing "to be upwards without

compromise". With the above and additional issues in mind, including ensuring appropriate measures are in place for the avoidance of adverse incidents, the QARC will continue to focus on key areas such as adherence to quality standards for both programmes as well as supporting the wide range of clinicians involved in the delivery of a quality service.

Contact Northern Ireland Screening Programmes on (02890) 553-949 or email chall@ehssb.n-i.nhs.uk

## **New Appointments**

**Dr Adrian Mairs** was appointed as Director of Quality Assurance for the NI Breast Screening Programme in January 2008. He is also a Consultant in Public Health Medicine in the Northern Health & Social Services Board. His role is to regularly monitor the quality of the programme against national standards and take action when necessary. He said "Now that we have good data systems in place, I am keen to see QARC develop a more proactive role and to support staff in providing a high quality service."



Also in January 2008 **Dr Gavin Briggs** was appointed QA Lead for Radiology within the NI BSP. As part of his remit he will take the lead in communicating all relevant radiological data and information to colleagues, specifically in relation to national standards, equipment development and examples of best practice.

#### Jeni Rosborough

Ms Jeni Rosborough has taken up the post of Office Manager for the Eastern Board Breast Screening Unit. She has also taken on the role of Regional QA Admin. Representative which involves coordinating the quality assurance of the administration and clerical functions of the NI Breast Screening Programme.

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#### **Geraldine Hughes**

Ms Geraldine Hughes took up the post of Office Manager for the Southern Board in January 2008. Her role will be to assist in the operational running of the Breast Screening Service in the Southern Board and participate in improvement plans.

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#### BREAST CARE SURVEY

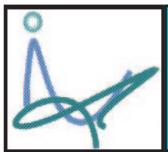
This survey was designed to evaluate the role of the Breast Care Nurse within the NI Breast Screening Programme. The survey was carried out at the Eastern, Northern and Western Boards during the month of June 2007.

43%	Of women felt anxious when they arrived for their assessment.				
88%	Were aware that a Breast Care Nurse was available to them in their invitation letter.				
90%	Contacted the Breast Care Nurse before they attended the assessment clinic.				
93%	Were happy with the amount of information they received.				
90%	Women found seeing a Breast Care Nurse was beneficial to them.				
79%	Were not anxious when leaving the assessment clinic.				

#### BREAST SCREENING SATISFACTION SURVEY

During the third week of October 2007, the Northern Trust carried out a Breast Screening Satisfaction Survey. The areas taking part at the static site were Rasharkin and Kilrea. The mobile unit was in the Ballymoney area.

33.7%	Of the ladies that took part in the survey stated it was their first visit to the screening unit.					
98%	Of the ladies were satisfied with the amount of notice they received prior to their appointment.					
77%	Of the ladies found the literature enclosed with their screening invite excellent.					
55%	Stated their mammogram was taken on time.					
40%	Found the mammogram comfortable, 53% found it uncomfortable, 5% found it painful.					
88%	Stated the reception staff and radiographers were friendly.					
92%	Rated the quality of the service they received as very good.					
98%	Of the ladies said they would encourage others who asked them about Breast Screening to come along.					
98%	Of the ladies intend to come back in three years time even if they are over 64.					



# SCREENING MATTERS Cervical



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### Cervical Screening QA Director Appointed

**Dr Tracy Owen**, Consultant in Public Health Medicine at the Southern Health and Social Services Board (SHSSB) has recently been appointed as QA Director for the Northern Ireland Cervical Screening Programme. Dr Owen was an undergraduate at Queen's University Belfast and undertook specialised training in Public Health Medicine in Northern Ireland. She was appointed as a consultant in 2003 and has been the Area Screening Coordinator for the SHSSB since that time. Her new role as Regional QA Director will involve monitoring the NI CSP's performance against regional standards, improving on existing outcomes where possible and responding to changing demands of the programme.

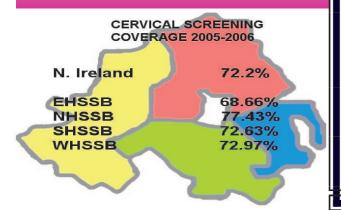


**Dr Rosemary Clarke**, a Consultant Cytopathologist at Craigavon Area Hospital, has also recently been appointed QA Lead for Pathology within the NI CSP. As part of her remit, Dr Clarke will take the lead in communicating all relevant pathological data and information to colleagues specifically in relation to national standards, IT and equipment needs and examples of best practice.

## Audit of Under 25s Attending Colposcopy

A regional audit of under 25s attending colposcopy is underway and will be presented at the Educational Conference of NI Colposcopist and Gynae-Oncologists to be held in May 2008. The audit will look at the number of women who had attended colposcopy clinics between 1st January 2006—June 30th 2006. The audit will also look at the screening uptake of 20-25 year-olds and the number of women under 25 being referred to colposcopy clinics, the treatment offered, and the outcomes.

The findings of this audit and other scientific data is being gathered to allow an informed decision on whether the screening programme in Northern Ireland will continue to invite women for routine screening from the age of 20, or whether it is appropriate to consider an alternative.





A DVD jointly funded by NI's 4 Health & Social Care Boards and Action Cancer is being made available to Health professionals in the next few months.

The DVD relates primarily to breast care and carries information on cervical screening. It aims to target women with learning difficulties, physical disabilities and women whose first language is not English. The DVD can also be used to support education in areas of social deprivation where uptake rates are extremely low.

## AUDIT OF INVASIVE CERVICAL CANCER

Since 1st October 2007, there have been 32 cases of Invasive Cervical Cancer in Northern Ireland. *QARC 28 Feb 2008* 

When a woman has been diagnosed histologically with an invasive cervical cancer, a team of health professionals will gather audit information on the case. This audit is combined with controls, anonymised and sent to the National Cervical Screening Programme and Cancer Research UK who will analyse the hundreds of cases and control data from England, Wales and Northern Ireland to see if the screening programme can be improved, to minimise the women that, despite being part of the screening programme, still develop an invasive cervical cancer. The NI team involves Hospital Based Programme Coordinators (HBPCs), Consultants Cytology, Histology and Colposcopy, Call and Recall Managers, Primary Care teams, QARC, NI Cancer Registry and, in England, Cancer Research UK.

GPs are also involved in the audit and are being asked to fill in a proforma to provide information to their HBPC. Leads in Laboratories, Colposcopy and Histology will also participate in providing data for the audit.

Once all the audit data is gathered it will form the Regional Audit of Invasive Cervical Cancer and will be summarised in this publication as in previous years.

The audit will also be used as part of the National Audit undertaken by a team lead by Professor Peter Sasieni of Cancer Research UK's Department of Epidemiology, Mathematics and Statistics at the Wolfson Institute in London.

The latest figures (1995-2005) for women diagnosed with invasive cancer in Northern Ireland are found below.

## SHORTS

FACT

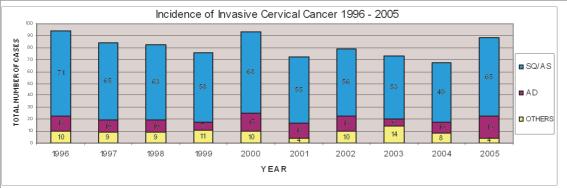
In the UK, approximately 3,000 women are diagnosed with cervical cancer each year. Cancer of the neck of the womb occurs frequently in women who are under 35 years old. Breast cancer is the only other cancer to occur more often within this age group.

#### Fact

Almost 64 million women have been screened for cervical cancer in the past two decades; 400,000 "significant cervical abnormalities" have been detected since the work began in 1988.

#### **HPV** Immunisation

Northern Ireland women should soon be benefitting from the introduction of HPV Immunisation. Plans are in the final stages and an announcement is expected soon. The programme will initially be aimed at girls aged 12/13 with a catch-up programme for girls aged up to 18 years in the following year, through the schools' immunisation programme.



### **WOMEN'S HEALTH ACTION TEAM PROJECT**

May 2007 saw the launch of the Women's Health Action Team Mobile Screening Unit, a concept pioneered by Louise Logan, Mobile Screening Coordinator within the Belfast Trust. From May till 31st December 2007, 36 outreach locations were visited and working relationships established at each site. 513 women attended with 256 women (49.9%) taking the opportunity to have a cervical smear test. For 12 women (4.68%) it was their first ever smear test. One lady reported it was 30 years since she last had a smear test!



The Women's Health according to Louise, has significant progress in outcomes during its first operation. It is proactively and vulnerable women

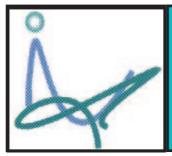


Action Team, achieved very terms of its outputs and eight months in targeting marginalised within the EHSSB area



using a community development approach to outreach effectively to local communities and offer "ONE-STOP" access to a range of women's health services including cervical screening.

An interim evaluation report covering the project will be available shortly. It will provide greater detail on the services offered, the effectiveness of the project and will make recommendations possibly on expanding the geographical area and the portfolio of services offered.



# SCREENING MATTERS Colposcopy



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## Colposcopy Computerisation

## Future Introduction of KC65 (Quarterly) Returns

Adherence to national quality standards is vital to ensure quality screening services. The NHS Cervical Screening Programme (NHSCSP) has a comprehensive programme of regional and local quality assurance. In Northern Ireland however, there is no national or consistent monitoring of colposcopy performance indicators. We hope a Regional Computerised Colposcopy Information System will be introduced to Northern Ireland where direct monitoring of the colposcopy service will be available.

The introduction of a data collection system, like that offered by the KC65 return will, for the first time, allow direct monitoring of the colposcopy service in Northern Ireland. Locally, KC65 data could be used by colposcopy services to monitor their performance against national standards. Regionally, QA Teams, Commissioners and Directors of Public Health would be able to assess the performance and workload of services. Nationally, it would provide detailed information on the status of women screened that could be used for evaluation and comparison of colposcopy services. In England, KC65 is a mandatory return for the Department of Health (DoH). While KC65 data is also collected locally, regionally and nationally in both Wales and Scotland it is not a mandatory requirement. It is expected that Northern Ireland will follow along these same lines.

The performance of colposcopy services would be reviewed on an annual basis by the return of KC65 data from each colposcopy unit within the NI Cervical Screening Programme. The information collected could be used at 3 levels:

- Locally for internal quality assurance
- Regionally for the Quality Assurance Reference Centre to examine the broad overview of each unit's activities
- Regionally by the DHSS&PSNI to examine the provision of the service

Information from KC65 includes referral profiles, waiting times, clinical attendances, treatment data and biopsy details. There are 5 parts to the return (ABCD&E) which is completed for submission (in England) to the DoH:

- Part A refers to the indication for referral to the colposcopy unit
- Part B indicates the time of referral to the first appointment irrespective of the grade of smear (i.e, low or high grade)
- Part C analyses the type of procedure undertaken at first visit in respect of the individual smear

- Part D examines the time taken from when the biopsy is procured to when the patient is informed of the biopsy result
- Part E reports the type of histological abnormality that is confirmed within the first 12 weeks of the referral to the clinic.

As there is no Regional Colposcopy Information System in place there are currently no accurate statistics collected on the number of women referred for colposcopy on a local or regional level. Lead Colposcopists in Northern Ireland have agreed a limited core dataset of information to ensure uniformity in the collection of data allowing measurement against specific standards.



The challenge now is for the data collected on this dataset to be processed on a Colposcopy Clinical Information System to enable defined report production from individual clinics to enable comparison monitoring on a regional and national basis.

As the KC65 statistical return becomes established practice within the Cervical Screening Programme in Northern Ireland, the monitoring of activity in the colposcopy service will play a major role in ensuring quality screening services are in place.

If you would like to submit a news item, or would like to publish the results of an audit in **Screening Matters,** please contact Ken McInnes on 02890-553-949 or QARC, 4th floor Champion House, 12-22 Linenhall Street, Belfast BT2 8BS

For further information and back issues, please visit our website at :

www.cancerscreening.n-i.nhs.uk

## **Project Update**

### NI Computerised Colposcopy Information System

As reported in Screening Matters (Issue 12), progress on the above-mentioned project remains ongoing towards the delivery of a new regional colposcopy system. While the Business Case has not yet been submitted to the DHSS&PSNI Business Case Unit there have been some positive developments:

- The Project Board have received letters of support for the project from the Joint Commissioning Committee, the 4 Area Boards and the 5 Health and Social Care Trusts.
- The Business Case has been submitted to the HSC ICT Programme Board who fully endorsed the need for a Regional Computerised Colposcopy Information System.
- Also, a new Evaluation Group was established to assist in the procurement of the system and held their first meeting in Bush House, Antrim Hospital on 5<sup>th</sup> November 2007.

The Business Case must receive unanimous endorsement from the HSC ICT Programme Board before it can progress onto the Business Case Unit in the DHSS&PSNI, thus the delay in submission. This will be on the agenda for the next meeting of the Programme Board which will be April 2008.

Consent will then be sought by the Project Board to progress onto the next stage to assess the various colposcopy system solutions available. This newsletter will keep everyone informed on progress at each stage.

In future editions, the Project Board will ensure that details on key stages of the project such as the Colposcopy System chosen, procurement and implementation information, roll-out of the system and plans in relation to training are brought to your attention.

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#### **Planning and Contracts - EHSSB**

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## **COLPOSCOPY CONFERENCE 2008**

**22 May 2008**: Health Professionals from across the province gathered for the Annual Colposcopy & Gynaecological Oncology Conference 2008. The conference, facilitated by the NI QARC was held this year in the Manor House Hotel, Killadeas Co. Fermanagh. The event proved to be very popular with Colposcopist, Gynae-Oncologists and Health Professionals across the province. Eight speakers (local, national and international) gave presentations at the event. Topics included: Colposcopy in The Sudan and the Invasive Cervical Cancer Audit with a further 7 poster presentations displays being exhibited in the entrance foyer. A detailed report on the conference will appear in the next issue.

