

# **Northern Ireland Cervical Screening Programme**

**Screening for Serving Personnel and Dependents registered  
with the Defence Primary Health Care Service**

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## **1. Introduction**

The provision and coordination of cervical screening for eligible serving personnel has traditionally been the responsibility of the Defence Medical Services (DMS).

In October 2016, the Department of Health agreed with the DMS that arrangements should be put in place to transfer this responsibility in Northern Ireland to Health and Social Care (HSC).

This document sets out the operational arrangements for cervical screening which have been agreed between DMS, the Public Health Agency, the Belfast Health and Social Care Trust and the Business Services Organisation. These arrangements will be kept under review at regular intervals and updated as appropriate. They are considered operational from 1 April 2017. An overview of the pathway and areas of responsibility are included at Appendix 1.

## **2. Who do these arrangements apply to?**

These arrangements apply to all women eligible for cervical screening who are registered with the DMS in Northern Ireland for their primary healthcare service. This applies to both serving personnel and dependents. Dependents that are registered with an HSC primary care practice in Northern Ireland are excluded, as they are offered cervical screening as per the resident civilian population.

## **3. Screening policy**

Women aged 25-49 are invited for cervical screening every 3 years and those aged 50-64 every 5 years.

Screening is by cervical cytology. Triage of low grade cytology abnormalities using high risk human papillomavirus (HR-HPV) testing was introduced into the screening pathway in 2013. HR-HPV testing is also used as a test of clearance following treatment for those referred to colposcopy.

While the Northern Ireland cervical screening programme largely follows the standards and guidelines set down by the NHS Cervical Screening Programme (England), specific additional guidance and patient and professional information for Northern Ireland can be accessed at [www.cancerscreening.hscni.net](http://www.cancerscreening.hscni.net).

## **4. Organisation of screening call/recall**

The administration of the call/recall process in Northern Ireland is provided by the Business Services Organisation (BSO). Women are identified for screening using the GP registration system as the demographic source (NHAIS). Screening invites are

issued directly to women at their home address based on their age and last recorded screening test result.

As women registered with the Defence Primary Health Care (DPHC) Service are not included in the demographic source, they are not invited for screening by BSO. In addition, any screening results from these women will not be linked to their electronic screening record as they will not be recognised on the Northern Ireland instance of NHAIS.

Until such times as an electronic interface is put in place between the DMS and NHAIS, the responsibility for the call/recall process for serving personnel and their dependents registered with the DPHC service, must remain with the DPHC team. The DPHC service will put in place a system to ensure that all eligible women are offered cervical screening at appropriate intervals and in line with Northern Ireland screening policy. Recall for screening will be informed by the management recommendations stated on laboratory reports and where appropriate, colposcopy outcomes.

Women registered with DPHC should receive the same patient information on the local screening programme with their invitation as the civilian population, to support them in making an informed decision on participation.

## **5. Laboratory services**

Cervical samples taken within the DPHC service will be submitted to the cytology laboratory of Belfast Health and Social Care Trust, using the regional cervical cytology request form. The request form has the three unique identifiers.

The laboratory will receive, process and report samples as per standard operating procedures, including triage by HR-HPV as indicated.

All sample results are available on Belfast Health Social Care Trust stand-alone lab centre and are issued in hard copy format to the DPHC service. The report will include the recommended patient management (i.e. repeat required, recall with timescale, referred to colposcopy).

It is the responsibility of the DPHC team to inform the woman of her cervical screening result.

## **6. Failsafe and referral to colposcopy**

A direct referral process is in place between the laboratory and Trust colposcopy services. The laboratory will make the referral to the preferred colposcopy unit nominated by DPHC and will be responsible for undertaking colposcopy failsafe (i.e. follow up to check that the woman attends for colposcopy).

The laboratory will liaise with DPHC on failsafe issues as required. In the event that a woman has moved outside Northern Ireland or been deployed in the interim period, it is the responsibility of DPHC to ensure she is followed up as appropriate. The laboratory failsafe episode will therefore be closed.

As the Trust does not have access to individual patient addresses for serving personnel and their dependents, on the receipt of a referral, the Trust colposcopy service will communicate directly with DPHC. It is the responsibility of DPHC to liaise with the patient to make arrangements for a colposcopy appointment.

The outcomes and discharge from colposcopy will be communicated to DPHC.

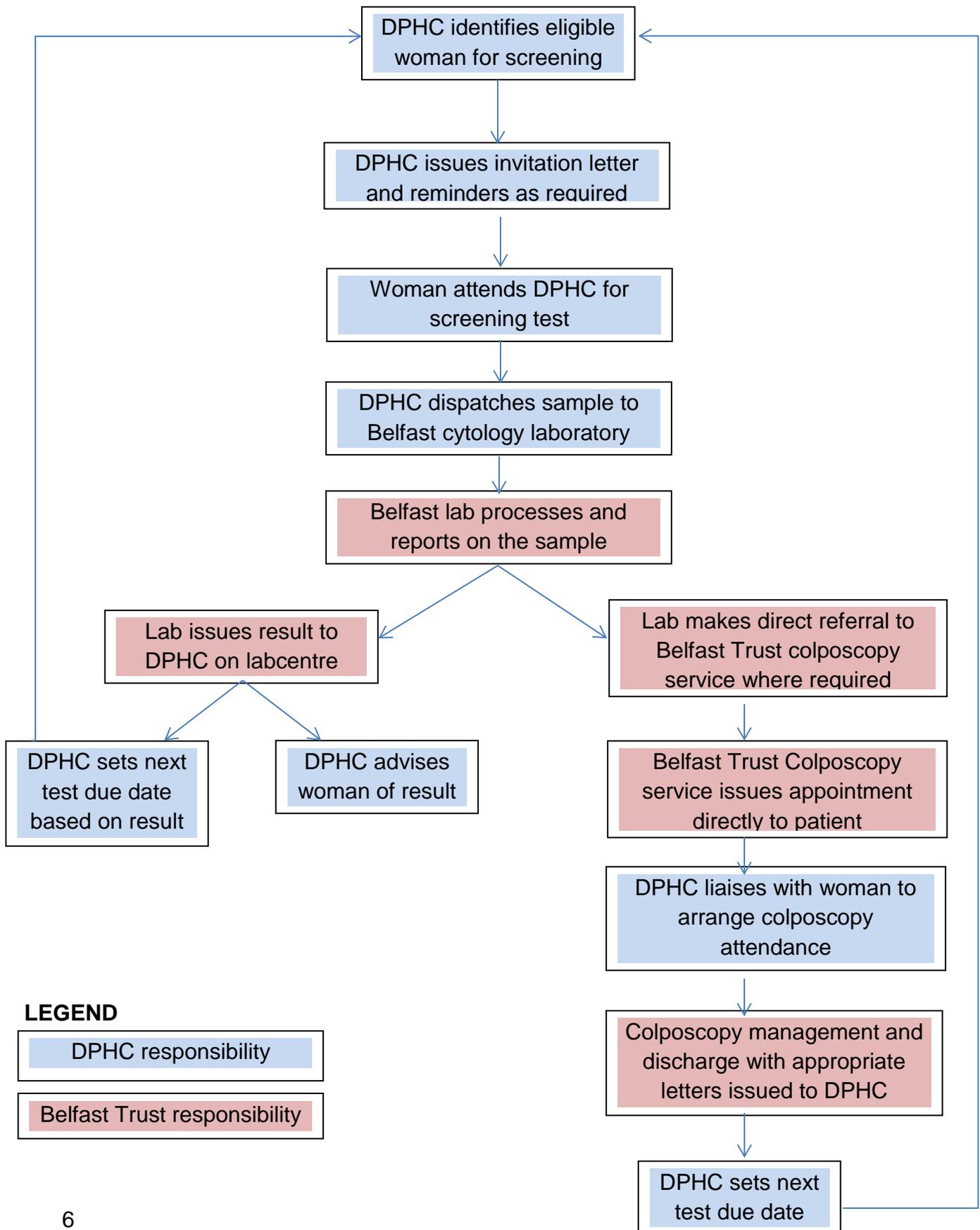
## **7. Communications**

The Public Health Agency will ensure that the DPHC clinical team are added to all appropriate distribution lists. This will include relevant communications on:

- Screening policy;
- Operational issues;
- Screening programme newsletters; and
- Training events.

Key contacts details for those involved in delivering the screening pathway for serving personnel and their dependents registered with DPHC are listed at Appendix 2.

## Appendix 1: Pathway for cervical screening for women registered with DPHC in Northern Ireland



## Appendix 2: Key contacts

<b>Public Health Agency</b>		
Dr Tracy Owen	Consultant in Public Health/Lead for NI Cervical Screening Programme	<a href="mailto:tracy.owen@hscni.net">tracy.owen@hscni.net</a> Tele: 028 9536 3468
Mrs Amy McAtamney	Cancer Screening Manager, NICSP	<a href="mailto:amy.mcatamney@hscni.net">amy.mcatamney@hscni.net</a> Tele: 028 9536 1657
Mr Kenneth McInnes	Support Manager, NICSP	<a href="mailto:kenneth.mcinnnes@hscni.net">kenneth.mcinnnes@hscni.net</a> Tele: 028 9536 1508
<b>Business Services Organisation</b>		
Ms Ciara Morgan	Family Practitioner Services	<a href="mailto:ciara.morgan3@hscni.net">ciara.morgan3@hscni.net</a> Tele: 028 9536 3854
<b>Belfast Health and Social Care Trust</b>		
Mr David Gillen	Operational Manager, Cellular Pathology	<a href="mailto:David.Gillan@belfasttrust.hscni.net">David.Gillan@belfasttrust.hscni.net</a> Tele: 028 9615 0221
<b>Defence Primary Health Care</b>		
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<b>DOCUMENT REVIEW</b>	
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<b>SUMMARY OF CHANGES</b>			
<b>Version</b>	<b>Date</b>	<b>Author(s)</b>	<b>Notes on Revisions/Modifications</b>
1.1	August 2020	Nicola Kelly	Contacts updated to reflect changes in personnel in partner organisations.  Addition of reference to Labcentre for results of tests.
