



# HPV CERVICAL SCREENING NEWSLETTER

March 2025

# **Programme Updates**

**CervicalCheck Charter** 

We've published an <u>updated charter</u> <u>for CervicalCheck</u>. Our charter tells people what to expect when they are using our cervical screening and colposcopy services. It shows how people can help us make our services work better for them and for others.

#### What we did

We worked with people who use our services, our staff and our partners, to develop the charter.

We reviewed and updated the 'CervicalCheck Women's Charter' in line with our core values of care, compassion, trust and learning. We incorporated the goals of our corporate strategy, <u>Choose Screening 2023-2027</u> and our <u>Equity Framework</u>, to increase the value of the partnership between us and our cervical screening participants. In reviewing our charter have we aimed to:



- communicate clearly and effectively about our standards and intent to all participants, stakeholders and staff
- maintain trust and confidence in cervical screening through open and transparent communication in line with plain language standards, our communications values, and behavioural science insights
- provide information to people on how they can help us ensure cervical screening is as effective as it can be in preventing and detecting cervical cancer
- support women to make an informed choice about taking part in screening.
   You can read about our the charter in <u>our blog</u>.

#### 5 years of HPV cervical screening in Ireland

Today is an important day for us all in the CervicalCheck pathway as we mark 5 years since we introduced primary HPV screening on 30 March 2020. Since CervicalCheck began in 2008, the incidence of cervical cancer has dropped from 15.8 per 100,000 women to 10.1 per 100,000.

Working with you, we are helping Ireland to eliminate cervical cancer by 2040 and the introduction of primary HPV screening means that we will reach this target three years earlier than we would have with the old cytology test. Primary HPV screening provides better outcomes for women who choose screening. Compared to cytology, which has a sensitivity of about 75%, HPV testing is superior, with a sensitivity of around 90%. In simple terms, cytology picked up about 15 out of 20 abnormalities in every 1,000 women screened. HPV testing detects 18 out of those 20. The chance of a false negative test is lower with HPV testing.

Seeing this in practice over the last five years has reaffirmed the benefits of HPV screening. It's better at identifying women with high-grade abnormalities. Without screening and treatment, women with high-grade abnormalities would have a 31% chance of developing cancer. With treatment, that risk drops to 0.5% (1 in 200). It's an incredible reduction, demonstrating the effectiveness of cervical screening.

With the introduction of primary HPV screening, we extended the eligible age rage for screening to women aged 65, and changes to test intervals meant fewer screening tests for women that do not have HPV. Over the past five years we have worked to increase screening coverage and delivered on many projects and initiatives to increase equity and support women to come for screening. This work would not be possible without your support – your work ensures that when women come for screening, their needs for follow-up care are met. Thank you for your support and the vital role you play in the delivery of CervicalCheck.

# **International HPV awareness Day**

Marking HPV Awareness Day (04 March 2025), we announced the development of new resources that enable healthcare staff to support women attending colposcopy to understand the <u>link</u> between smoking, HPV and cervical cancer and to access stop smoking services, if they chose to.

Smoking, HPV and cervical cancer

Colposcopy clinics are a suitable setting for brief interventions about smoking. Approximately 41.5% of women who attend colposcopy clinics in Ireland are smokers. These <u>resources and supports</u> aim to aid women who are smokers so that they can better understand the relationship between smoking, HPV and cervical cancer and to understand the benefits of quitting. The resources also support staff in colposcopy clinics to actively practice their intervention skills and refer women to stop smoking services.

#### Use of Healthmail for important correspondence

CervicalCheck prioritises the use of Healthmail to communicate both important programme updates and individual clinical queries to contracted doctors and clinics. If you have not received recent updates, please email <a href="mailto:admin@cervicalcheck.ie">admin@cervicalcheck.ie</a> to ensure that we hold the correct Healthmail address for you.

#### Reminder: early recall letters

In February 2025 we began sending screening invitations to women who were due to be invited in August and September 2025 on five-year recall. This is because our modelling for the next two years is showing that we can expect a significant increase in the number of women who will be due their cervical screening test in late 2025 and throughout 2026. We are telling women in their invite letter why we are offering them a test before their due date and ask that they book their test now. If you have any questions, please contact info@cervicalcheck.ie



#### Failsafe tip

The failsafe process in CervicalCheck is used when a service user with an abnormal result or a discharge recommendation from colposcopy does not attend for her next recommended action as part of the CervicalCheck programme. As the clinically responsible doctor for resulted tests where follow-up recommendations have not been followed in a timely manner, you receive failsafe letters (also known as abnormal follow-up letters) requesting information about the service user. The information that you provide is used to update the service user's record on the Cervical Screening Register to ensure that CervicalCheck maintains contact with her for her follow-up.

The Primary Care chapter of the <u>Standards for QA in Cervical Screening in Primary Care & Other Settings</u> requires two recorded attempts to contact the service user in relation to her follow-up. This means you must record them on either the hardcopy or <u>online failsafe</u> and include the types (phone, email, etc...) and date(s) of contact. If you have information that the service user has emigrated, has changed address, has decided to attend private colposcopy or attend for a private cervical screening test, these should be added to the failsafe response. Once you have submitted the failsafe response to CervicalCheck, your obligation for follow-up has been completed.

#### Updated guidance for the obgyn community

We are pleased to announce the launch of three new Clinical Guidance Notes:

- Management of Abnormal Bleeding or Other Symptoms of Cancer
- <u>Cervical Screening Post-Hysterectomy</u>
- Cervical Screening Not Advised

We encourage you to take the time to review these documents thoroughly. Please note an important new update within the guidance on Cervical Screening Post-Hysterectomy:

In cases where unexpected CIN is found in post-hysterectomy histology, follow-up should be conducted via colposcopy, including vaginal vault colposcopy and HPV testing at 6 and 18 months post-surgery.

We trust these updates will support you in your clinical practice. If you have any questions, please contact <a href="mailto:stu@cervicalcheck.ie">stu@cervicalcheck.ie</a>.

### Review of use of MCRN on cervical screening forms

CervicalCheck is currently undertaking a validation exercise of all registered Clinically Responsible Doctors i.e. contract holders and the health professionals who take cervical screening samples under their governance (4000+).

We are doing this validation exercise to ensure our records, which display to the public on the CervicalCheck website, are correct. This also helps us identify unknown sample takers who have yet to register with the Programme.

We have now contacted contract holders in 16 counties, and we will be contacting the remaining contract holders over the coming months. We will next be in contact with contract holders in Kerry, followed by Monaghan, Cavan and Louth. Since CervicalCheck commenced the validation exercise more than 1,400 sample takers have been made inactive, 291 sample takers moved to another practice, and 47 sample takers remained in the same practice under the governance of a different contract holder. In addition, 137 sample takers have now taken the opportunity to become contract holders.

You are requested to respond to our email <a href="mailto:cvalidate@screeningservice.ie">cvalidate@screeningservice.ie</a> within the required timeframe. Failure to do so requires us to recontact you and delays your records being updated. These details are extremely important to us and ensure the successful operation of CervicalCheck.

Please note if your sample taker is not registered with us, they may not take a screening test. You are required to inform us when a sample taker is no longer under your governance.

If you, or the health professionals under your governance, have not completed the CervicalCheck in Practice Introductory Online Module (1 hour in duration) please ensure you do so, you may access same on <a href="MSSresources.ie">MSSresources.ie</a>

#### **Translated videos**

As part of our Community Champions work, videos have been created in <u>English</u>, <u>Arabic</u>, <u>Bulgarian</u>, <u>Czech</u>, <u>Polish</u>, <u>Pashto</u>, <u>Romanian</u>, <u>Slovak</u> and <u>Somali</u>. These videos explain what cervical screening is and who is invited.



### **Vial expiration**

Please note the upcoming 2024 vial batch expiry dates, as follows:

Pro	duct	Lot Number	Expiry Date
V	ïal	3039BA	08/02/2025
V	ïal	3172AA	21/06/2025

These vials should be reviewed as expiry dates near. Payment will not issue for tests submitted to the programme laboratory in expired vials. Samples may also have to be destroyed and tests repeated. The vial ID sticker must be placed by the requesting sample taker on the cervical screening form.

Please also be aware that when the expiry date on the new purple Hologic vial (silver text) is covered with an addressograph label, it cannot be read. If the expiry date is obscured by a patient label, the manufacturers' lot numbers are an alternative way to confirm the expiry date. If neither the expiry date nor the lot number are visible (obscured by a label), the sample will be destroyed.

# Schedule of learning events: Jan - Jun 2025

We are continuing our lunchtime webinars into 2025. Get more information about <u>January - June dates and topics</u>. You can also watch <u>recordings of previous webinars</u>.

May 2025	Speaker	Date & Time	Link to register
Screening women over 50 CervicalCheck Clinical Update	Dr Sarah Fitzgibbon, Primary care advisor	Tuesday 13 <sup>th</sup> May 2025 1-2pm	Click here to register
June 2025	Speaker	Date & Time	Link to register
Cervical Screening Troubleshooting: Tackling Common Challenges in Primary Care	Dr Rachael Comer Ms Laura Tobin Dr Sarah Fitzgibbon, Primary care advisor	Tuesday 10 <sup>th</sup> June 2025 1-2pm	Click here to register

# Contact us

Email: <u>info@cervicalcheck.ie</u> Freephone: 1800 45 45 55 Website: hse.ie/cervicalcheck

Post: CervicalCheck, Freepost LK407,

Limerick.

#### **Primary Care Coordinator**

Email: <a href="mailto:primarycarecoordinator@cervicalcheck.ie">primarycarecoordinator@cervicalcheck.ie</a> Telephone: 061 406 547 or 061 406 567

#### **Access queries**

Email: access@cervicalcheck.ie





Keeping up with the latest social media trends, we have joined Bluesky, in addition to X (@NSShse) and LinkedIn. If you've joined Bluesky, make sure to follow us:

@nsshse.

#choosescreening

