

Via Email: loncstd.england@nhs.net

Attention of:

Dr Joanne Murfitt Director of Public Health Commissioning, Health in the Justice System & Military Health London Region NHS England, London Region 105 Victoria Street Southside London SW1E 6QT

6th October 2015

Dear Dr Mufitt

I am writing in relation to your letter of 29th September regarding the proposed Pan-London Cervical Sample Taker Database (CSTD).

In this case, I am writing on behalf of both Surrey and Sussex and Londonwide LMCs. Both LMCs are concerned to establish the meaning of the phrase "..... evidence of training attended".

This is because there is no requirement for General Practitioners to undertake any training in relation to taking cervical smears. This competence is part of normal medical training and skills and I enclose a Gateway letter from Barbara Hakin, (Gateway 16943, entitled: "Cervical Cytology Training for GPs") confirming this when the issue was raised on a previous occasion.

I would be grateful if you could urgently confirm that in relation to GMC registered General Practitioners to be included on the Sample Taker Database, no evidence of further training is required.

I look forward to hearing from you.

With best wishes.

Yours sincerely

Dr Julius Parker **Chief Executive**

Enc.

cc Dr Tony Grewal – Medical Director: Londonwide LMCs

Local Medical Committees for Croydon, Kingston & Richmond, Surrey, East Sussex and West Sussex

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To: PCT Cluster Medical Directors and Primary Care Leads

15 December 2011

Dear Colleague

Cervical cytology training for GPs

The Department has been made aware that a number of PCTs are specifying that all GPs must undertake update training in cervical smear taking. The purpose of this letter is to clarify that:

- it is good practice for PCTs to ensure that GP practices are aware of guidance on training in this and other clinical areas
- PCTs will wish to monitor the quality of cytology services and to take action if this reveals evidence of any shortcomings in quality
- there are, however, no contractual grounds for requiring all GPs to undertake update training, unless this is expressly agreed as part of local PMS or APMS contractual arrangements.

The NHS Cervical Screening Programme recommends that all practitioners taking cervical smear samples should undertake a minimum of a half day training programme every three years¹ in order to ensure that they are up to date with both the programme and the method of smear taking. This standard for training of those taking cervical smear samples has been in place since 1998.

Over 3 million cervical smear samples are taken each year and there is good evidence that the quality of smear taking improves the effectiveness of the NHS Cervical Screening Programme and improves patient outcomes.

The NHS Cervical Screening Programme advise that the majority of smear samples are taken by practice nurses and that the majority of sample takers are undertaking the recommended training.

PCTs as commissioners will want to ensure practices are aware of the guidance from the NHS Cervical Screening Programme in relation to update training for practitioners who take cervical smear samples, whether GPs or practice nurses.

¹ Good Practice for Cervical Sample Takers, NHS Cervical Screening Programme Good Practice Guide No2, July 2011

The GMS contract contains provisions relating to experience and training to undertake clinical practice. These provisions would enable a PCT to require specific steps such as training as part of a remedial notice where there are problems with the quality of a clinical service in a GP practice.

The GMS arrangements do not, however, allow PCTs to set mandatory requirements for training. As part of their clinical governance processes, GP practices should ensure that GPs and others who take cervical smear samples have the competences necessary to undertake them. PCTs should monitor the quality of services provided and take action if there is evidence of problems. These are principles that apply to the range of training issues relating to GPs and GP practices and are in line with an outcomes based approach to commissioning, contracting and monitoring.

Yours sincerely,

Dame Barbara Hakin

National Managing Director of Commissioning Development