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Gateway reference: 16943

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