

**Disclaimer: this document is currently under review**

# Notification requirement for the National Cervical Screening Program (NCSP) - Factsheet for Colposcopists

1 December 2017 marks the commencement of the renewed NCSP which will be supported by the National Cancer Screening Register (the Register).

From 1 December 2017, colposcopists and other healthcare providers who perform colposcopies will be required to notify prescribed cervical screening information to the Commonwealth Chief Medical Officer (CMO) through the Register.

## What is the legal basis for mandatory notification of cervical screening information?

The *National Cancer Screening Register Act 2016* (the Act) includes a requirement for prescribed individual healthcare providers to notify prescribed cervical screening information to the CMO by the prescribed timeframe. The details of the information to be notified to the Register are prescribed in the National Cancer Screening Register Rules 2017 (the Rules).

## What is the purpose of the Rules?

The Rules provide a legislative basis for the collection of individuals’ screening test results, results of relevant follow-up procedures up to and including the diagnosis (or clearance) of cancer, and treatment in relation to pre-cancerous abnormalities to be notified to the Register.

The notification requirement supports the screening processes and clinical pathways, the monitoring of program quality, safety and effectiveness and the safety net function of the Register.

## Why mandate colposcopy notification?

The NCSP has historically only relied on pathology reports for supporting women along the screening pathway. This has resulted in a gap in clinical information in the registers when a woman attends colposcopy for management. Colposcopy notification will fill this information gap to inform the safety net function of the Register and ensure full clinical histories are available for clinical decision making.

In addition, colposcopy notification will enable program quality and performance monitoring across the entire cervical screening pathway. High quality data will also help inform policy for national screening programs and service delivery at the local level.

## Are there other benefits to the notification requirement?

For colposcopists, the data they notify to the Register may be accessed as aggregated reports about the tests and treatments they have administered as part of the renewed NCSP. Colposcopists can use these reports for quality improvement purposes, benchmarking performance against national standards and certification in a recognised quality assurance program such as C-QuIP.

## When do the Rules take effect?

The requirement to notify prescribed information to the CMO commences on 1 December 2017.

## Who is the person responsible for notifying the required information?

The Act defines an individual healthcare provider as:

(a) an individual who has provided, provides, or is to provide, healthcare; or

(b) is registered by a registration authority as a member of a particular health profession.

The individual healthcare provider for the purpose of colposcopy notification includes colposcopists, that is, specialists or other healthcare providers who perform colposcopies.

## What information do colposcopists need to notify?

The Rules give effect to the notification requirement in the Act thereby requiring colposcopists to notify:

* individuals’ screening test results;
* results of follow-up procedures;
* diagnosis (or clearance) of cancer; and
* treatment information in relation to pre-cancerous abnormalities.

The Colposcopy & Treatment Form contains the prescribed information to facilitate the notification requirement (see questions below). The required screening test information is available at Attachment A.

## What if the colposcopy is conducted as part of a clinical trial?

Colposcopies carried out as part of a clinical trial approved by an ethics committee (within the meaning of the Therapeutic Goods Act 1989) are exempted from the mandatory notification requirement.

As per the Therapeutic Goods Act 1989, an ethics committee means a committee:

1. constituted and operating as an ethics committee in accordance with guidelines issued by the CEO of the National Health and Medical Research Council as in force from time to time; and
2. which has notified its existence to the Australian Health Ethics Committee established under the National Health and Medical Research Council Act 1992.

An example of a clinical trial exempted from the notification requirement is the Compass trial.

## How do colposcopists notify the CMO?

### **Approved Form:**

The Colposcopy & Treatment Form should be used to notify colposcopy information to the CMO. The form contains the prescribed information and provides instructions on how to complete the form as well as definitions for terminology used in the form.

The Colposcopy & Treatment Form can be downloaded from the [cancer screening website](http://www.cancerscreening.gov.au/cervicalforms).

The Colposcopy & Treatment Form is an approved form for the purpose of section 25 of the Act.

### **Lodging the form:**

The Register provides the capability for colposcopists to notify prescribed information to the CMO.

Once completed, the original form can be lodged with the Register by:

* Post to National Cervical Screening Program, Reply Paid 90964, SUNSHINE VIC 3020, or
* Fax on 1800 627 702

Colposcopists can obtain assistance with lodging the form by contacting the Program Contact Centre on 1800 627 701.

## What is the timeframe for notification?

Colposcopists are required to notify prescribed information to the CMO through the Register within 14 days. The 14 days commences the day after the colposcopy is carried out.

## How was the prescribed information determined?

A Colposcopy Sub-group of the NCSP Quality and Safety Monitoring Committee considered the data requirements as part of the Quality Framework for the NCSP.

The data items have been determined to enable reporting against agreed quality standards. They are based on Colposcopy Data Collection Form developed in consultation with RANZCOG and user-tested among colposcopists.

## What can I do to prepare for the commencement of the mandatory notification requirement?

It is important that colposcopists familiarise themselves with the new terminology for colposcopy. Education on the new terminology is available on the [Cancer Council website](http://wiki.cancer.org.au/australia/Clinical_question%3AColposcopy_terminology).

An education module on the renewed NCSP is also available through the [NPS MedicineWise website](https://learn.nps.org.au/mod/page/view.php?id=7804).

## Is there a penalty for not complying with the notification requirement?

The Act creates an offense for non-compliance with the notification requirement. The maximum fine per offence is 30 penalty units. A penalty unit is $210.

The penalty commences from 1 May 2018.

## What happens if I fail to notify?

The Department recognises that encouraging compliance and raising awareness regarding the requirement to notify will help minimise the need to enforce regulatory action.

Where considered appropriate, the Department of Health will provide sufficient notice through warning letters prior to enforcing regulatory action.

## Where can I find more information?

More information is available on the Australian Government Department of Health’s [website](http://www.health.gov.au/internet/main/publishing.nsf/Content/National-Cancer-Screening-Register).

**Disclaimer: this document is currently under review**

### ATTACHMENT A

**Information for colposcopists**

1. Individual’s details

1. Medicare number (If known)
2. Name
3. Date of birth
4. Indigenous status (If known)
5. Country of origin (If known)
6. Preferred language (If known)
7. Address

2. Colposcopist’s details

1. Name
2. Clinic name
3. Provider number

3. Information about the colposcopy

1. Date of colposcopy
2. Indication for colposcopy\*
3. Adequacy of colposcopy\*
4. Visibility of Transformation zone\*
5. Clinical diagnosis or impression\*
6. Biopsy performed this episode (Y/N)
7. Individual pregnant at time of colposcopy (Y/N)
8. Treatment performed this episode (Y/N)

4. If treatment performed this episode

1. Kind of treatment
2. If excision – excision type\*
3. If excision – modality or method\*
4. If ablation - ablation type\*
5. Hysterectomy performed (Y)
6. Anaesthetic type\* Yes
7. Location of treatment\*

\*The Colposcopy and Treatment Form will provide further data items under these headings to facilitate notification.

**Disclaimer: this document is currently under review**