



# Health (National Cervical Screening Programme) Amendment Act 2004

## FACT SHEET 4

### Benefits of the National Cervical Screening Programme

#### Reducing cervical cancer

Since 1990, the National Cervical Screening Programme has achieved approximately a 40 percent reduction in the number of women who develop cervical cancer, and a 60 percent reduction in deaths from cervical cancer.

#### The Programme backs up smear taker systems

The Programme acts as a backup to smear taker recall systems by:

- maintaining a record of a woman's complete cervical screening history, regardless of whether she changes her smear taker
- sending women a reminder if their smear test is a few months overdue
- sending a letter to every woman who has a smear result that is not normal
- checking that women with abnormal smears are followed up
- checking for quality at all stages of screening, including health promotion, smear taking, laboratory and colposcopy services
- supplying a copy to women who want to see their screening record
- sending a letter to women when they no longer need to have cervical smears.

#### The Programme ensures wide enrolment

High numbers of eligible women must have regular cervical smears to enable the programme to work well and achieve its aims for women. Eligible women are those aged from 20 until they turn 70.

Just over a million women or more than 99 percent of the eligible population are currently enrolled on the NCSP-Register.

The Programme funds health promotion of cervical screening, focused on priority populations – women who have never had a smear, those whose previous smear was more than five years ago, and Māori and Pacific women.

Examples of health promotion include the production of pamphlets about screening, advertising, participation in community health events and alliances with women-oriented community projects so they include screening information.

The Programme aims to ensure that 85 percent of all eligible women have had a smear recorded on the NCSP-Register in the previous 36 months. Currently the three-year coverage rate is 73 percent, which compares favourably with the UK (66 percent) and New South Wales (73 percent).

#### The Programme monitors quality

One of the main differences between an organised screening programme and opportunistic screening is that in a programme all activities are nationally planned, co-ordinated, and evaluated. Opportunistic screening tends to happen when a woman goes to her health service for another reason, and the smear taker uses that opportunity to invite her to have a cervical smear.

In 2000, the National Cervical Screening Programme produced Operational Policy and Quality Standards for all areas of the Programme. The Programme monitors the quality of laboratories, colposcopy and the whole screening service by, for example:

- providing feedback on the quality of cervical smears to smear takers, so they know how their performance compares with other smear takers