



- The HPV test will be the primary cervical screening test from 12 September 2023.
- Participants have the choice of two cervical screening options:
 1. HPV vaginal swab test, either a self-test or assisted by a clinician
 2. A clinician-taken cervical specimen, previously referred to as a smear test, which is tested for HPV. If HPV is detected cytology will be processed automatically without the person needing to return for another test.
- Free cervical screening for the priority participant groups.
- Screening intervals will increase to five years (three years for people with immune deficiency) after HPV not detected results.
- Screening is extended to ages 70-74 if unscreened or under-screened.
- Practices may choose to offer a take-home option for the self-test.
- A new population-based NCSP-Register will support the cervical screening programme.
- The NSU will continue to provide the monthly PHO report showing the screening status and relevant clinical and demographic information for participants enrolled with the PHO to support follow-up.

Why?

- HPV testing is highly sensitive and accurate. It will identify the 10% of those screened who have high-risk HPV and are at increased risk of developing precancerous cervical cell changes.
- The HPV self-test is much more acceptable and will help achieve equity outcomes.
- Research has shown a significant increase in screening uptake compared to the cervical smear test, particularly in Māori and Pacific peoples.
- Early detection of HPV enables monitoring or treatment leading to improved outcomes.

Eligibility

- ✓ Women or people with a cervix aged 25 to 69, who have ever had intimate skin-to-skin contact or any sexual activity, no matter their sexual orientation.
- ✓ Transgender men and non-binary people who were assigned female at birth will not be on the NCSP-Register if their assigned gender in the PMS is male. Enrolment in NCSP must be notified.

Who's Involved in General Practice?

- Informed consent for HPV screening and follow-up of test results must be performed by responsible clinicians who are current sample-takers.
- Responsible clinicians are either: GPs, midwives, or nurses who have completed the NZQA Unit Standard 29556.
- In the future, the workforce will be expanded to include nurses who have not completed NZQA training and non-clinical team members. They will work under the delegation of a responsible clinician.

Free Cervical Screening

Te Whatu Ora has announced funding to provide free cervical screening services for key groups from 12 September 2023, as part of its move to the new HPV test. The mechanism to implement this funding is being developed.

Free screening will be available from 12 September for:

- women and people with a cervix 30 years and over who are unscreened (have never had a screening test) or under-screened (haven't had a cytology test in the past 5 years)
- anyone requiring follow up
- Māori and Pacific
- anyone who is a community service card holder.



Training and Education

- ✓ Familiarise yourself with the Clinical Practice Guidelines for Cervical Screening in Aotearoa.
- ✓ Ensure current sample-takers in the practice undertake the training course, Cervical Screening Using Human Papillomavirus (HPV) Testing at [LearnOnline.health.nz](https://www.learnonline.health.nz).
- ✓ View, order and download consumer resources from [HealthEd.govt.nz](https://www.healthed.govt.nz) from late August.



Working with Labs

- ✓ Screening kits for HPV testing and LBC will be available from contracted labs from end of August.
- ✓ Monitor testing kit supplies and expiry dates of consumables.
- ✓ Take care when labelling kits – incomplete labelling or labels coming off may require the test to be repeated.
- ✓ Complete lab forms thoroughly, incomplete data may result in incorrect recommendations or an unprocessed test.
- ✓ Labs will not process HPV tests prior to 12 September 2023.



Contacting Participants

- ✓ Contact priority group participants in an appropriate way – they are more likely to respond to a personal invitation from a trusted healthcare provider.
- ✓ Continue contacting non-priority participants according to your normal processes.
- ✓ Continue contacting all participants who are overdue for screening.
- ✓ Contact your Screening Support Service provider to establish a communication pathway for shared participant management.
- ✓ Continue attempting to contact participants who are not attending recommended follow-ups.



Cervical Screening

- ✓ Record consent (verbal or written) in the clinical notes.
- ✓ Create tasks to follow up with any participants who have been offered off-site self-testing to ensure tests are returned to primary care facilities so they can be sent to the labs in a timely manner.
- ✓ Implement any PMS software updates. Find more information on PMS changes related to cervical screening at the following link: [nsu.govt.nz/health-professionals/national-cervical-screening-programme/patient-management-systems](https://www.nsu.govt.nz/health-professionals/national-cervical-screening-programme/patient-management-systems)



Participant Record Management

- ✓ Use the PHO Cervical Screening status report generated by the NCSP-Register to find the most up-to-date information on a participant's screening status.
- ✓ Checking and updating participant ethnicity and contact information will ensure the NCSP-Register is updated.
- ✓ Use appointment scanning to identify eligible participants in advance.
- ✓ Use reminders / prompts during consultations to offer opportunistic screening.