

About the Implementation Plan for the Recommendations of the Report of the CervicalCheck Scoping Inquiry

Background

On 12 September, the Report of the Scoping Inquiry into CervicalCheck was published on the website of the Department of Health. On publishing the Report, the Minister for Health, Simon Harris, T.D., undertook to return to Government within three months with a full Implementation Plan. The Plan has now been approved by Government. The Plan includes implementation actions for all 56 recommendations of the Scoping Inquiry.

How the Plan was developed

The Minister wrote on 14 September to the relevant agencies including the HSE, the National Cancer Registry of Ireland, the State Claims Agency and the Medical Council outlining the requirement for a robust and comprehensive implementation plan, encompassing all State agencies involved, to be overseen by the Department of Health. Agencies were asked to give immediate priority consideration to implementation planning for the recommendations, with the Department to engage with the agencies, under the auspices of the CervicalCheck Steering Committee.

The CervicalCheck Steering Committee

The CervicalCheck Steering Committee was established by the Minister in June this year, and is chaired by the Chief Medical Officer of his Department, and the Assistant Secretary, Acute Hospitals Policy, Department of Health. The Committee includes patient representatives and patient advocates, clinicians, and senior officials from the Department of Health and the HSE. Since September, the Committee has overseen the development of an overall Plan, incorporating implementation plans of each body which is responsible for implementation recommendations in the report. On 4 December last it signed off on the Plan.

Future evolution of the Plan during the implementation process

It is important to say that this Plan is not a static document. It is expected that it will be revised at various stages of the implementation process. For example, some timelines and future actions cannot be confirmed until the early stages of implementation are progressed. There may be unforeseen issues that impact timelines. Actions in the Plan may have to be adapted to take account of additional requirements that could be identified as the work progresses. At each stage where the Plan is revised, the new update will be published.

Independent review of the Plan as recommended by the Scoping Inquiry report

The Report of the Scoping Inquiry called for an independent review of the implementation plans of the various bodies involved. The Minister asked Dr Gabriel Scally to undertake this review. Over the past two weeks, Dr Scally has been meeting with the various bodies involved. On 30 November, Dr Scally wrote to the Minister and confirmed that he is satisfied that all parties are taking seriously the findings and recommendations of the Scoping Inquiry report, and that resources have been allocated to take the work forward at a high level of priority. He also noted the impressive commitment to rapid progress.

Dr Scally's engagement with the bodies concerned is ongoing. When this is complete, later this month, he intends to write to the Minister again to set out in more detail his observations on the Plan.

During his engagement so far, Dr Scally has already identified some ways in which the actions set out in the Plan can be clarified, to better reflect the detailed work ongoing. While commending the commitment shown in the Plan to making rapid progress, Dr Scally has also suggested some timelines may be too ambitious. Once all of his observations have been formally received in December, this Implementation Plan will be reviewed to take account of all Dr Scally's observations. The new update will be published once approved by the CervicalCheck Steering Committee and by the Minister.

Summary of what is included in the Implementation Plan

The Report of the Scoping Inquiry made recommendations across a number of areas. The Plan sets out the recommendations under each of these areas, together with the actions to be taken. These areas are described below. Some of the actions in the Plan have been devised in direct response to Dr Scally's recommendations, while others reflect work that was already ongoing in the health service and which will, when complete, address or help to address the recommendation.

Impact on the women and families directly affected

The Report makes recommendations in relation both to women's health, and to examining current arrangements for patients to have access to medical records. These are sensitive issues for the women and families affected by CervicalCheck and they also resonate across the broader health service. The Plan commits to continuation of the current dedicated team within CervicalCheck to ensure access to medical records, and addresses improvement planning across the service. It also reflects a focus on women's health including collaboration already initiated with the National Women's Council of Ireland.

Organisation and governance of the cervical screening programme

The Plan includes details on work already ongoing to address Dr Scally's recommendations in the area of organisation and governance, as well as new actions developed in response to his recommendations.

The inclusion of patient advocates on the HSE Board is already reflected in the HSE Governance Bill currently before the Oireachtas. Improvements to governance and risk management processes are also linked with appointment of a Board, which is underway. In addition, actions to progress early establishment of a National Screening Committee are set out in the Plan, along with actions to ensure greater professional and public health expertise within screening including new appointments; the role of public health was a particular focus in Dr Scally's report.

Laboratory services

While Dr Scally was satisfied with the quality management processes in the labs contracted by CervicalCheck, nevertheless, the Scoping Inquiry identified a number of weaknesses in the overall procurement approach for laboratory services, and the specification of quality and service level expectations. There was a strong focus in the Final Report on laboratory services including quality assurance, programme standards and comparability of data. It made important and quite technical recommendations which will be addressed through a series of defined actions. Detailed actions to address the procurement recommendations are also included in this Plan, and will be reflected in the procurement process for the HPV primary screening test in due course.

Auditing of cervical screening

To address recommendations relating to audit in the Final Report, the Plan sets out the establishment of an Expert Group within the HSE to review clinical audit processes across all cancer screening programmes. The National Screening Service will implement the recommendations that arise from this review. Patient advocates will be included in this process, to ensure the patient perspective is central in the oversight of clinical audit.

Open disclosure

Dr Scally's Final Report found that the current HSE and State Claims Agency policy and health service practice in relation to open disclosure was contradictory and unsatisfactory, and that the issue of non-disclosure has been felt very intensely by the women and families involved. He made a significant number of recommendations relating to open disclosure, including the need for mandatory disclosure.

This is also a key policy focus for the Department of Health and is addressed within the forthcoming Patient Safety Bill, the General Scheme of which was published earlier this year. The Bill is currently being drafted. This legislation is one element in a concerted range of actions that are required to strengthen the culture of open disclosure and ensure that it takes place in all circumstances where it is required. The establishment of an Independent Patient Safety Council, which will as its first action undertake a review of open disclosure policies, is in progress. Education, training and other supports for clinicians, nurses and allied health professionals are essential elements of open disclosure and these are reflected within the Plan and will be considered further as the work progresses.

Cancer registration

The plan reflects a range of actions to be led by the National Cancer Registry which will address data sharing, data definitions and collection of patient level details as between it and the NSS; governance; and strengthening the capacity and capability of the Registry further. Significant progress has already been made with a data sharing agreement between the HSE and the NCRI now signed.

Other screening programmes

Dr Scally made important recommendations on cross-programme learning between the cancer screening programmes, including quality assurance. The plan reflects a number of detailed actions to address these recommendations in relation to quality assurance committees, training and development and review of Key Performance Indicators for routine monitoring.

Resolution

The Plan includes two recommendations relating to how women and families can be facilitated in meeting with the clinician involved in their care and/or disclosure, and to a meeting between representatives of the women and families and the medical organisations, as part of resolution for the women and families concerned. The Plan commits the Department to consulting with the HSE and representatives from the 221+ advocacy group, representing affected women and families, in relation to such engagement, while the group intends to lead on the final recommendation regarding meeting with the medical organisations.

Funding for the implementation of Dr Scally's recommendations

Additional funding was provided for the screening service in Budget 2019 to address the implementation of Dr Scally's recommendations. This funding will support implementation of those actions that require additional posts or other investment in 2019. In addition, the funding provided for 2019 provides for the planned switch to the HPV test as the primary screening test. Funding in 2019 is also provided for the extension of the HPV vaccine to boys.