North of England Pathology & Screening Education Centre

Cervical Sample Taker Initial Training
Prospectus 2019

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Introduction
The NHS Cervical Screening Programme (NHSCSP) requires that all cytology sample takers have undertaken appropriate training in the cervical screening programme and sample taking technique.

North of England Pathology Screening & Education Centre currently offers the basic training course in cervical cytology sample taking, and has recognised accreditation from the Royal College of Nursing for the theoretical elements.

The course is not intended to be used for three yearly update training for experienced sample takers – that training is provided separately or available elsewhere.

The training is in two parts - a theoretical course plus a period of mentored practical training. The theoretical course is a two-day course run a number of times each year in the areas indicated on the front page. It is also offered as a module on the BSc/PG Certificate in Practice Nursing course with De Montfort University and Bishop Grosseteste University. Practical training will take place in the trainee’s place of work and must be supervised by an appropriate nominated mentor. Trainees must also visit a cytology laboratory and a colposcopy clinic local to their practice during their training. All training must be completed within a nine month period.

Training audience
This training course is intended to be used for training qualified doctors, registered nurses because it assumes prior knowledge and experience of professional standards and delivery of patient care. It is anticipated that the majority of trainees will be practice nurses whose employers require them to commence cytology sample taking in the NHS cervical screening programme. Suitably accredited Physician Associates and RCN registered Nurse Associates may also undertake this programme.

The trainee’s employer must consider whether the trainee is employed for a sufficient number of hours to allow them to complete the minimum requirements of this programme of learning within the given timeframe. It is suggested that trainees work in practice for a minimum of 15 hours per week and must anticipate continued stable employment for at least 9 months following theoretical training for the practical training under the supervision of a mentor to be effective.

This is a comprehensive RCN accredited course that requires full commitment to the nine month training period. Please do not underestimate the time and commitment required to successfully complete the course.
Course structure
The course will consist of:

- Two days theoretical training with a practical element in a classroom setting.

- Observation of mentor taking at least two samples.

- Five samples taken from women attending for screening, directly supervised by a mentor, with reflective practice recorded in clinical training record book.

- 20 samples taken from women attending for screening, unsupervised (without direct supervision but with a mentor available), with reflections recorded in clinical training record book.

- Completion of a TZ Audit of 20 adequate cytology samples (in women 50 years old and under)

- Assessment of competence by an external assessor (observation of the trainee conducting at least three samples) on completion of 20 unsupervised adequate samples.

- Limited sample taking is permitted between completion of 20 unsupervised samples and final assessment (after assessment arrangements have been made) but no more than 30 samples (supervised and unsupervised) may be taken before assessment without permission from the training provider.

- Completion and submission of course work to Training Centre, including reflective practice on all samples taken, which is evaluated by the trainer.

- If a trainee has undertaken their final assessment without significant negative feedback and submitted their course work, they can continue to take a limited number of samples but must not exceed a further 10 samples in the interval before receiving notification of their training outcome. This is subject to the trainee having enough trainee sampling capacity remaining. The maximum number of samples a trainee may take in total is 60 (see table on page 11). Trainees should pursue notification of their training outcome if nearing that limit.
Theoretical training content
The theoretical training course content will contain the following as a minimum:

- Anatomy & physiology of female reproductive system
- Overview of the NHS Cervical Screening Programme
  - Aims of the NHSCSP
  - History of the screening programme
  - Current statistics/success of the programme
  - Important elements in the success of the programme
  - Uptake, coverage and cancer prevention rates
  - Recommended screening intervals
  - Unscheduled screening tests
- The background to cervical screening
  - Epidemiology and HPV
  - Risk factors
  - Principles of cervical screening
  - Effectiveness and limitations of cervical screening
  - Future developments of cervical screening
- Organisation of the NHSCSP
  - NHSCSP activities
  - Screening protocols
  - Sample Taker responsibilities
  - Commissioning
  - Call/Recall
  - General Practice
  - Other clinicians who provide cervical screening services
  - The role of the laboratory – including visit and reflection
  - The role of colposcopy – including visit and reflection
  - The role of the Hospitals Based Programme Coordinator
  - The role of Quality Assurance
  - National co-ordination and the role of the SITs and local cervical screening committees
- Equality of Access to cervical screening
  - Invitation information
  - Informed choice
  - Checking for understanding
  - Women from minority ethnic groups
  - Female Genital Mutilation
  - Women with learning disabilities
  - Women with physical disabilities
  - Female to male transgender
  - Women who are not registered with a GP
  - Ceasing or withdrawal criteria
- Understanding the test results
  - Cytology results
  - HPV testing
- Legal & Professional issues
  - Professional responsibility and accountability
  - Confidentiality
  - Obtaining informed consent
  - Medico-legal considerations
  - Preparing a room
  - Equipment for taking LBC samples
  - Checking identity
Taking clinical history
Taking screening history
Preparing & completing the request form
Choosing the appropriate speculum
Appearance of the cervix
TZ Sampling
Taking the sample
Infection control
Ending the consultation
Sending the sample
Auditing test results
- Local practice & issues
- Allocation and use of sample taker numbers

Training records
Each trainee should keep a record of their practical training in a personal training record book (Log Book/Portfolio), which will be provided to them on the first day of the theoretical course. Trainees must record the topics covered by theoretical training in their personal training record and must document their practical training. A Practical Record Sheet must be completed for every sample taken – it will be necessary for trainees to take some copies of the blank record sheets provided.

Trainees should also document and reflect on their visits to a cytology laboratory and colposcopy clinic. Trainees are strongly advised to undertake those visits soon after the theoretical training days and they MUST take their personal training record book with them to allow an appropriate person to sign the appropriate sections.

Practical training
Before enrolling, a trainee must identify a suitable mentor for their sessions of practical observation and training. This individual will usually be an experienced sample taker working at the trainee’s practice or clinic, who is able to provide day to day support to the trainee sample taker as they commence sample taking, and after they have attended theoretical sample taker training. In some circumstances the mentor may need to be someone external and this should be discussed with the North of England Pathology & Screening Education Centre in the first instance.

Mentors are there to provide support for trainees and new sample takers by allowing them to observe their practice, advising them on their own clinical practice and observing their counselling, documentation and sample taking technique to ensure that they are competent. Mentors take on this role as part of their professional responsibility to share education and skills. Should there be a necessity to change mentor for any reason during the 9 months training, this must be discussed directly with the North of England Pathology & Screening Education Centre and the course facilitator before it occurs.
Mentors should have effective teaching and communication skills and ideally hold a relevant mentoring and/or teaching qualification. They must:

- Be a practicing cervical sample taker
- Have had a minimum of 12 months continuous experience following completion of initial cervical sample taker training
- Have undertaken a minimum of 50 adequate samples following completion of initial cervical sample taker training
- Have undertaken cervical screening update training at least every three years

Additionally, the Mentor must be able to show continuing competence in taking samples for cervical screening with particular reference to:

- Equipment and sample preparation
- Sampling technique
- Transformation Zone sampling (if reported by the local laboratory)
- Audit of results and feedback from trainees
- Have read:
  - The relevant and most current training course prospectus.
  - NHSCSP Guidance for the training of cervical sample takers.

**External assessment**
The final practical assessment will be arranged by an external assessor appointed by the North of England Pathology & Screening Education Centre.

Assessors are experienced sample takers who are employed by the training centre to visit a trainee in their place of work (or exceptionally have them visit the assessor’s place of work), to observe their practice and provide a response on their competence. An assessor must observe the trainee taking at least three samples, although at least five appointments should be made for the assessment session, to allow for non-attendance. Patients attending the assessment session must be told that the assessment is taking place and must give consent to the presence of the assessor.

*If only three patients turn up on the day and the Assessor is not confident about the nurses’ competency after observing just three samples a return visit may be necessary.*

The nominated mentor should ideally be available after the external assessment for final discussion with the assessor and trainee, although this may not always be possible.

Before completing their course work, each trainee must arrange to visit a cytology laboratory and colposcopy clinic. Trainees are responsible for making their own arrangements for this, but contact details will be given at the theoretical training days.
Training venues & dates
Theoretical training will usually be delivered in suitable premises in locations considered reasonably accessible to sample takers:

- North West – delivered from the NEPSEC training facilities at Manchester Royal Infirmary
- Derbyshire, Nottinghamshire & Leicestershire – usually delivered once each at a location in Derby, Chesterfield, Nottingham and Leicester
- De Montfort University and Bishop Grosseteste University – delivered at a location within the university buildings
- Kent & Medway – delivered from six locations spread throughout the Kent/Medway area
- Surrey & Sussex – delivered from six locations spread throughout the Surrey/Sussex area
- Yorkshire & The Humber – delivered from the NEPSEC training facilities at Wakefield Office Village

It is impossible to identify locations convenient to everyone but it is hoped to keep travel to a minimum. Trainees or their employers are responsible for the cost of travel to the venue, parking and any overnight accommodation costs. Unfortunately the North of England Pathology & Screening Education Centre cannot help with arrangements for overnight accommodation.

Training dates have not been included in this prospectus as they are subject to demand and availability of trainers and venue. For a list of planned dates, please contact the North of England Pathology & Screening Education Centre (Wakefield: 0113 246 6330, Manchester 0161 276 5114).

Trainers
Training will be delivered by our trainers: Jenny Greenfield, Gail Oliver, Jane Manning, Sarah Pountain, Lesley Crewe, Valerie Steele, Wendy Patrick or Rachel Lyon.

Jenny has been a Senior Practice Nurse and Nurse Manager for 30 years. She has been involved as a Lecturer Practitioner at her local University for several years, running cervical screening for post registration nurses, as well as an independent trainer in women’s health. She holds a MSc in Professional Development and Education in Health and Social Care.

Gail is a nurse colposcopist at the Conquest Hospital, Hastings, with over 10 years’ experience working within the cervical screening programme, and training sample takers in the clinic setting.

Jane has over 20 years’ experience in Practice Nursing, including Accident & Emergency. She also has 10 years’ experience of teaching and practice development and including personal development in clinical examination competencies. She has a special interest in Women’s Health and also accepts student nurse placements from the University of Greenwich.
Lesley has over 25 years' experience as Practice Nurse and cervical sample taker including in practices involved in clinical trials and HPV. She was previously the Cervical Screening Co-ordinator in Salford and transferred to PHE as Screening & Immunisations Co-ordinator. She is currently Senior Practice Nurse running Well Woman clinics.

Sarah has over 20 years' experience in primary care and 13 years' experience as Practice Nurse, progressing to cervical screening co-ordinator and practice nurse development lead within the PCT. She has developed GPST sample taker training with GP lead and QA before supporting the course rolled out across the North West under the management of NEPSEC. She transferred to PHE in 2014 and continues as an active cervical sample taker and immunisations nurse on a self-employed basis.

Valerie Steele is a very experienced nurse practitioner/manager in Derbyshire, who has been delivering sample taker training to primary care and other staff for over 10 years. She holds a PGC in Primary Care Studies and certificate in Teaching and Assessing in Clinical Practice. She has been instrumental in the development of sample taker training rolled out across the North and East Midlands under the management of NEPSEC.

Wendy has 18 years’ experience as a Registered Nurse with over 14 years’ experience as a Ward Sister in Gynaecology, as well as family planning clinics in Leicester. She also acts as an External Nurse Mentor for the De Montfort University nursing qualifications.

The trainers have administrative support from Kathryn Hawke, Amy Harris, Jen Bradburn and Isabelle Caillet at the North of England Pathology & Screening Education Centre. Students are advised to keep regular contact with the administrators in order for progress records to be maintained.

There will also be invited external speakers.

**Sample Taker (ST) Numbers**

In order to ensure all cervical cytology samples taken as part of the NHS Cervical Screening Programme in all areas are taken by suitably trained individuals, it is essential that each sample taker has a unique Sample Taker ID number. This number denotes that the sample taker has undergone basic training in SurePath™ or Thinprep® LBC technology and is registered on the central database of sample takers held at the following locations:

- **South East Coast:** Screening and Immunisation Teams (SIT)
- **Derbyshire/Nottinghamshire/DMU/BGU:** Regional sample taker database support service, Kettering General Hospital
- **North West:** Once entered and activated Trainees will use their NMC number
- **Yorkshire & Humber:** Regional sample taker database support service, Queen Elizabeth Hospital, Gateshead
Trainees will be allocated a Sample Taker Number prior to taking any samples. This may be suffixed with a ‘T’ or may have some other trainee identifiable mechanism. That number is unique to the individual and must not be shared. No sample taker should use another person’s Sample Taker Number. The trainee must insert their number on the request form of all samples sent to the cytology laboratory in the training period. However, the T may not be accepted on the ICE system. In such cases submit the request using your unique sample taker number without the ‘T’.

Samples may be rejected by the cytology laboratory if the documentation is not completed with the inclusion of the trainee’s valid sample taker number.

When a trainee has completed theoretical and practical training and has successfully passed the practical assessment and course work assessment, they will be notified of their pass by the trainer and where the ‘T’ is used they will be told that it may be removed from their Sample Taker Number. From that point, they may submit samples without the ‘T’.

On successful completion of theoretical and practical training, the North of England Pathology & Screening Education Centre will issue trainees with a Certificate of Completion, which should be kept in their personal file.

Clinical Audit - ‘Blue Forms’
Students are provided with sufficient clinical audit forms or ‘blue forms’ to complete a full TZ audit. These audit forms are printed on blue paper and must be submitted to the laboratory with every sample that is taken by the trainee sample taker whether supervised or unsupervised. These blue forms are a visual indicator to the laboratory that the sample has been taken by somebody in training. This will ensure they prepare a slide and report appropriately on that sample including providing TZ cell content information and in a timely manner. Many laboratories return the blue forms to the students completed. Other laboratories include the required information in their standard result reports and do not send the blue forms back. However, every student must submit their samples to the lab accompanied by a blue form.

Incomplete or failed training
The course may be failed due to failure to attend a training day, difficulties understanding the theoretical training, failure to submit coursework, coursework which does not demonstrate sufficient understanding, failure of final clinical assessment or leaving the course and so failing to complete within the given timeframe.

If a trainee cannot attend a scheduled theoretical training day due to unforeseen circumstances, they will be offered a place on another scheduled course (for one or two days, depending on which day has been missed).

If a trainee is aware they have not understood the training content sufficiently at a theoretical training day, they must raise their concerns with the trainer at the time. If they become aware of training issues after the theoretical training days, they should discuss the matter with their mentor in the first instance. If the mentor is unable to help, the trainer will be very glad to provide assistance and support. It is far better to resolve issues early on than continue with difficulty.
If a trainee leaves employment or wishes to cease training for another reason during the practical training period, they are asked to notify North of England Pathology & Screening Education Centre and the course facilitator.

Practical training is recorded in the personal training record book, which constitutes the coursework, and which must be submitted within nine calendar months of the 2nd training day; a pass must be obtained within nine calendar months of the 2nd training day, or the trainee will automatically fail.

If a trainee fails to achieve the required standard in the TZ Audit subsequent to further intervention/support and an action plan to include further sampling, they will be deemed to have failed the course.

Any mitigating circumstances must be submitted in writing and will be considered on an individual basis, but NEPSEC and the course facilitator will make the final decision.

In order to ensure excessive sample taking is not undertaken before qualification, the following limits have been placed on numbers of samples which may be taken at each stage of the training process following theoretical training and must not be exceeded:

**Table 1: Number of samples permitted by stage of training**

<table>
<thead>
<tr>
<th>Training phase</th>
<th>Notes</th>
<th>Number</th>
<th>Max</th>
</tr>
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<tbody>
<tr>
<td>Observation</td>
<td>Observation of mentor taking samples</td>
<td>Minimum 2</td>
<td>n/a</td>
</tr>
<tr>
<td>Supervised</td>
<td>Samples taken under direct supervision of mentor</td>
<td>Minimum 5</td>
<td>15</td>
</tr>
<tr>
<td>Unsupervised</td>
<td>Samples taken under indirect supervision of mentor (often referred to as “unsupervised”)</td>
<td>Minimum 20</td>
<td>20</td>
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**STOP!**
Report to the training centre if you believe you need to take further samples
If not, calculate your sampling audit with the results you have before requesting an assessment

**Additional samples only as advised by your Trainer**
This must be upon the advice of your trainer.
Additional samples, to include supervised and unsupervised, may be required if less than 20 unsupervised samples prove ‘adequate’ upon receipt of results or if less than 80% TZ has been achieved.
Minimum 1 | 20

**STOP!**
Calculate your sampling audit with the results you have before requesting an assessment visit

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Book 5 appointments in case of DNAs (3 required for assessment)</th>
<th>Required 3</th>
<th>5</th>
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**Absolute maximum in training period** 60

Practice Managers are requested to arrange for the trainee to be allowed 30 minutes per patient when taking cervical samples. This will give the student sufficient time to think carefully about their actions and reflections during their practical learning experience and complete the extra record keeping required for their portfolio of evidence.
In accordance with advice received from the Regional Quality Assurance Teams the sample taker trainee may continue taking further unsupervised samples as a trainee, up to a maximum of 10 additional samples (i.e., to a maximum of 30 total unsupervised samples). There should not be more than 30 unsupervised samples taken as a trainee before the final clinical assessment, which should be promptly arranged as soon as 20 adequate results are received.

| Interval between passing the final practical assessment and awaiting the result from the submitted coursework | Continuation is only applicable if at the time of the practical assessment the 80% TZ standard has been achieved on a minimum of 20 samples AND if the absolute maximum sampling allowance has not been reached | Min 1 | Max 10 |

If the External Assessor is not satisfied that the trainee is able to conduct a cervical screening consultation satisfactorily and/or has significant concerns about their sample taking technique, they will inform the trainee that they must take no more samples. The assessor will convey their concerns to the trainer and the training provider who will contact the trainee with regard to their training outcome.

If the coursework submitted to the trainer does not demonstrate sufficient understanding of the cervical screening programme and evidence of a learning curve, the trainee will fail the course and must enrol again if they wish to be a cervical sample taker.

At any point in supervision, the mentor may raise concerns about the trainee with the trainer, which could ultimately lead to failure of training.

The primary aim of the course is to train sample takers to provide high quality sample taking to women, backed up by a good understanding of the NHS Cervical Screening Programme. In all circumstances, the decision on pass or fail rests with the training provider and is not open to dispute, although the trainer will provide feedback and clarification of problem areas to the trainee, throughout the course as necessary.

In all instances, pass or fail results will also be advised to the trainee’s employer, SIT and the cytology laboratory to which their samples are submitted.

**Feedback**

Trainees will be asked to complete feedback forms at the end of the two day theoretical training and again on completion of coursework. Trainees are welcome to raise any issues with the trainer at any point in the training pathway.
Enrolment
Course fees are currently set at £350 per person, which includes the following;

- Theoretical study sessions
- Theoretical training packs
- Trainer support
- 1 Final Clinical Assessment
- Personal Training Record Book Marking Fees
- Certification

On occasion a trainee may require further intervention training or additional assessment visits by members of the training or assessing teams. **Intervention training is chargeable at £30 per hour and additional assessment visits are chargeable at £120 per visit.** The training centre will arrange for an invoice to be sent directly to the employing organisation as appropriate.

Potential trainees must read the terms & conditions below and enrol directly with the North of England Pathology & Screening Education Centre.

A Sample Taker Initial Training application form **must** be completed in full before confirmation of a place on the course can be confirmed.

A course pack containing course paperwork, personal file and venue details will be provided.

If there are insufficient trainees to run a course, all applicants will be notified and a place on the next available course will be offered.

**Terms & conditions of enrolment**

1. Trainees must be a registered nurse, registered doctor, RCN registered Nurse Associate or physician associate registered on the PAMVR. They must anticipating stable employment in a place of work where regular cytology sample taking is undertaken for at least nine months following theoretical training.

2. Each trainee must identify a mentor with whom they have regular contact. The mentor must comply with the criteria in this document (pg. 5). The mentor’s ST number must be provided on the trainee’s enrolment form. Should a change in mentor be necessary during the 9 month training period, this should be discussed directly with the North of England Pathology & Screening Education Centre and the course facilitator before it occurs.

3. Each trainee and their employer must consent to the presence of an external assessor for at least half a day in the trainee’s place of work, and must allow the assessor access to cytology sample taking clinical consultations for observation purposes. It is advisable to book at least five patients for the half day in case of non-attendance. Patients attending the assessment session must be told that the assessment is taking place and must give consent to the presence of the assessor. Care must be taken to give the assessor sufficient notice of expected
completion of 20 unsupervised samples – assessments can rarely be arranged at very short notice.

4. Each trainee should keep a record of their training in a personal training record book.

5. Each trainee must make their own arrangements to visit a cytology laboratory and colposcopy clinic during the training period. It is advisable to do this as early as possible following theoretical training.

6. Each trainee must use their allocated ST number while in training and must not share that number. Where in use the ‘T’ may only be removed on successful completion of training (except whilst entering details onto the Manchester ICE system, which doesn’t accept the T). The trainee sample taker number may only be used for a limited number of samples – it is vital that routine screening work is not undertaken until the trainee has passed the course.

7. The decision on training outcome rests with the trainer and training provider and is not open to dispute.

8. Practical training must be completed and reflected in coursework which must be received by the North of England Pathology & Screening Education Centre within nine calendar months of the 2nd theoretical training day, or the trainee will be deemed to have failed.