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Meg Hillier MP
Public Accounts Committee
House of Commons
London
SW1A 0AA

March 2021

Dear Ms Hillier,

House of Commons Committee of Public Accounts Ninety- Sixth Report of Session 2017-19, Adult Health Screening

I am writing to provide the Committee with an update from the Department of Health and Social Care and NHS England and NHS Improvement on progress against the outstanding recommendation in the above-named report.

Recommendation 5: NHS England should set out a clear plan for how it intends to deliver this inherently risky project on time without making the service provided to women undergoing screening even worse.

As demonstrated in the latest Treasury Minutes, HPV Primary Screening was fully implemented within the NHS Cervical Screening Programme in England on 2nd December 2019. The backlog of samples that accumulated during the implementation of HPV Primary Screening has been cleared, and the latest unpublished management data indicates that national 14-day turnaround time performance improved considerably during 2020/21 when compared to 2019/20. Responsibility for the delivery of the NHS Cervical Screening Administrative Service (CSAS) transferred from Capita Primary Care Support England (PCSE) to the North of England CSU on 1st August 2019 with NHSEI leading those contractual changes. The service has migrated onto the North of England CSU's IT and robotics platform, and staff have transferred from the Capita site in Leeds to an independent premise in the city. Since September 2020, PCSE and CSAS are no longer located on the same site in either Leeds or Preston.

While it has been impacted by the Covid-19 pandemic, work has continued at pace to develop a new cervical screening call/recall IT system to replace the existing system

which is currently dependent on the NHAIS (National Health Application and Infrastructure Services) platform which is being decommissioned. NHS X has commissioned NHS Digital to design and implement the new cervical screening call/recall IT system and governance arrangements have been established within NHSEI to oversee the switchover to the new system. To mitigate any issues arising from the delay to moving from NHAIS, we continue to oversee performance in the Quality and Risk Group. The group is attended by Public Health England, and has implemented additional task and finish groups to ensure consistent delivery as we prepare to move to the new system.

NHSX's Digital Transformation of Screening Programme Board is responsible for reviewing progress of the development of the new cervical screening IT system and NHSEI's switchover board is responsible for assessing the state of readiness to be able to approve its implementation. NHSD is preparing the implementation and mobilisation plan of the new solution, and the date of implementation is dependent on:

- Agreement of the final detailed design of the new IT system and its functional specification based on the work that is being progressed via regular joint meetings between NHS X, NHS Digital, NHSEI and PHE.
- Data quality and transition. The programme team at NHS Digital are leading on this work.
- Engaging with the circa 40,000 front line NHS staff who deliver the cervical screening pathway and who are therefore required to use the new IT system so they are prepared, trained and ready to use it with the right equipment.

The NHS remains committed to ensuring that the outstanding elements of this recommendation are implemented. We will ensure the new cervical screening IT system is mobilised and thus will enable safe transfer from NHAIS onto PDS as the source of demographic data for the screening programme.

Yours sincerely,



Deborah Tomalin
Director of Public Health Commissioning and Operations
NHS England and NHS Improvement