

# Publication Report



## Scottish Cervical Screening Programme Statistics 2014-15

Annual update to 31<sup>st</sup> March 2015

Publication date – 1<sup>st</sup> September 2015



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## **Review of the current Scottish Cervical Screening Programme Statistics publication**

In the August 2014 publication, we advised that we planned to review the content and format of the cervical screening publication with the aim of focussing on patient outcomes rather than laboratory workload statistics. We had hoped to include these changes in this publication (September 2015). However, this work is taking longer than anticipated due to technical issues extracting the information, so rather than delay the publication we have decided to publish in the same format as 2014. It is still planned to make changes to future publications. If you would like to feedback any comments or suggestions for future publications please contact ISD at [nss.isdcancerstats@nhs.net](mailto:nss.isdcancerstats@nhs.net).

## Introduction

Cervical screening was introduced in Scotland in the 1960s. Although large numbers of women were offered tests, the service at this time was not introduced as a population based programme.

The national cervical screening programme was introduced in Scotland in 1988 with the aim of reducing the incidence of invasive cancer of the cervix. Cervical screening is offered routinely to eligible women aged 20-60 every three years. Women with an abnormal screening history will continue to be invited for follow-up as appropriate.

Cervical screening is used to identify cell changes which could develop to be cancerous, in women who otherwise have no symptoms; at this stage, any changes can be easily treated, and treatment is usually very effective.

Within Scotland (as part of the Scottish Cervical Screening Programme) data for publication and management information are compiled by ISD on a quarterly and annual basis. This release includes data on uptake, laboratory turnaround times, number of cervical screening tests processed and results. The cervical screening year runs from 1st April to 31st March; this current release includes data to 31<sup>st</sup> March 2015. The Scottish Cervical Screening Programme Statistics for 2014-15 is a National Statistics publication which has been assessed by the UK Statistics Authority as complying with the Code of Practice.

Eligible women are invited to attend cervical screening once every 3 years; uptake statistics are therefore based on women attending in the previous 3.5 years. The additional 0.5 year ensures that all data for women who have attended for screening within that 3 year time period are reported on.

## Key points

At 31<sup>st</sup> March 2015

- Of eligible women, 70.4% had been screened in the previous 3.5 years, this is 0.3 percentage points lower than the 31<sup>st</sup> March 2014 figure (70.7%).
- Compared to 31<sup>st</sup> March 2014, uptake rates have decreased slightly in all the mainland boards except for NHS Lanarkshire. All NHS Boards have a lower uptake rate compared to 5 years ago (based on the pre-2006 configuration of Health Boards).

In 2014-15

- 397,673 cervical screening tests were processed within the programme which is an increase of 3.5% compared to 2013-14.
- Of all tests processed, 97.3% were of satisfactory quality. Of satisfactory results, 91.0% had a negative result, 7.7% had a low grade cell change and the remaining 1.3% had high grade cell changes.
- The lowest laboratory turnaround time for processing cervical screening tests was found in quarter 2 (July to September), when 95% of tests were processed within 20 working days.

## Results and Commentary

Please note that the following tables and charts are based on the pre-2006 Health Board configuration (former Argyll & Clyde). Figures for NHS Highland do not include the Argyll & Bute area and figures for NHS Greater Glasgow do not include the Clyde area.

Details of all cervical screening statistics included within this publication can be found on the [Cervical Screening](#) homepage.

### Annual Data

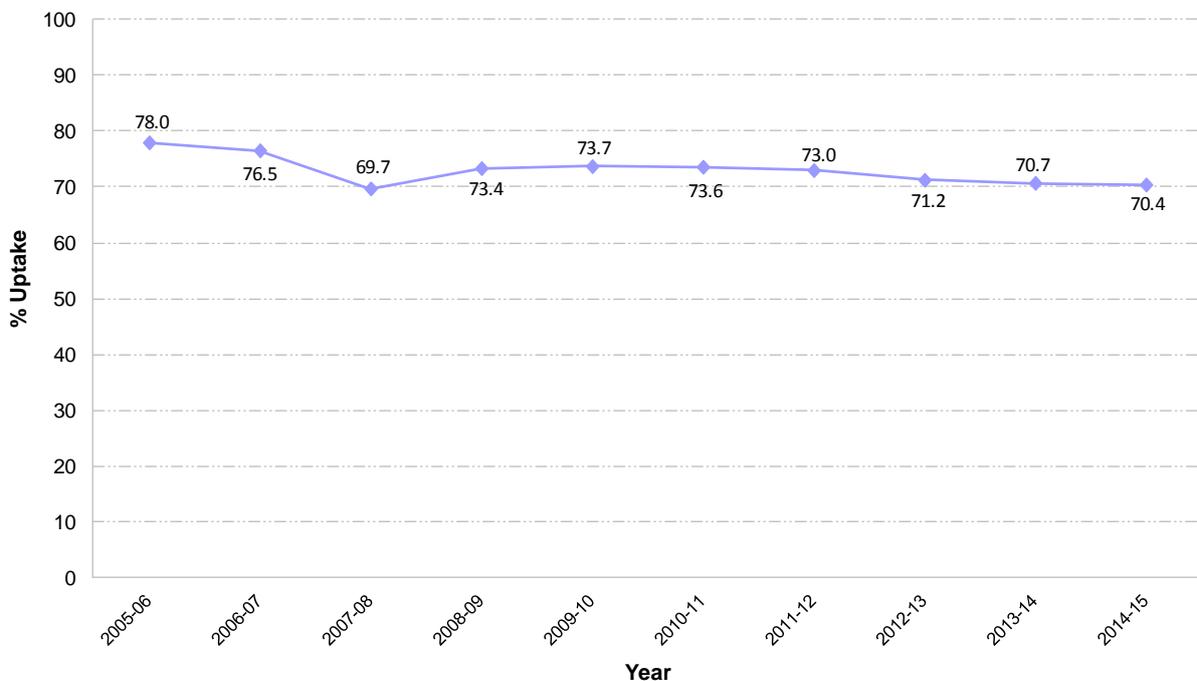
#### Uptake

The population denominator used for calculating uptake includes women aged 20-60 years (excluding medically ineligible women). The numerator is the number of these women with a record of a previous screening test in the last 3.5 years.

Women are invited to attend cervical screening once every three years. As at 31<sup>st</sup> March 2015:

- Of eligible women, 70.4% had been screened in the previous 3.5 years (Figure 1 and Table 1), this is 0.3 percentage points lower than the 31<sup>st</sup> March 2014 figure (70.7%). Over the last 10 years presented there has been a general decrease in the percentage uptake.

**Figure 1. Trends in the Percentage uptake rates of females in Scotland aged 20-60<sup>1</sup> with a record of a previous screening test taken within the last 3.5 years<sup>2</sup>, Scotland, 1 April 2005 to 31 March 2015**



1. Based on the Scottish Cervical Call Recall System (SCCRS) population denominator (excluding medically ineligible women)

2. Cervical screening year runs from 1<sup>st</sup> April to 31<sup>st</sup> March.

- Compared to 31<sup>st</sup> March 2014, uptake rates have decreased slightly in all the mainland boards except for NHS Lanarkshire. All NHS Boards have a lower uptake rate compared to 5 years ago (based on the pre-2006 configuration of Health Boards).

**Table 1. Percentage uptake rates of females in Scotland aged 20-60<sup>1</sup> with a record of a previous screening test taken within the last 3.5 years<sup>2</sup>, by NHS Board of Residence<sup>3</sup>**

NHS Board of Residence	Percentage uptake					
	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
(Former) Argyll & Clyde <sup>3</sup>	74.2	74.6	74.2	72.7	72.1	71.7
Ayrshire & Arran	75.6	75.3	74.7	73.0	73.1	72.9
Borders	78.4	77.9	77.0	75.2	75.0	75.0
Dumfries & Galloway	76.8	76.6	76.6	76.1	75.5	75.2
Fife	72.6	72.6	72.1	70.8	70.5	70.4
Forth Valley	76.2	75.1	75.0	73.0	72.7	72.6
Grampian	76.1	75.9	75.3	73.5	73.1	72.9
Greater Glasgow <sup>3</sup>	70.1	70.1	69.5	67.4	66.3	65.1
Highland <sup>3</sup>	76.5	76.4	75.9	74.2	73.8	73.5
Lanarkshire	74.0	73.9	73.7	72.4	72.1	72.3
Lothian	72.5	72.5	71.3	69.2	68.5	67.9
Orkney	79.3	80.2	79.9	79.5	78.2	77.6
Shetland	81.0	80.6	80.1	78.2	78.8	78.2
Tayside	74.2	74.0	73.3	71.8	71.7	71.6
Western Isles	74.7	74.7	74.1	72.6	72.8	72.6
<b>Scotland</b>	<b>73.7</b>	<b>73.6</b>	<b>73.0</b>	<b>71.2</b>	<b>70.7</b>	<b>70.4</b>

1. Based on SCCRS population denominator (excluding medically ineligible women).

2. Cervical screening year runs from 1<sup>st</sup> April to 31<sup>st</sup> March.

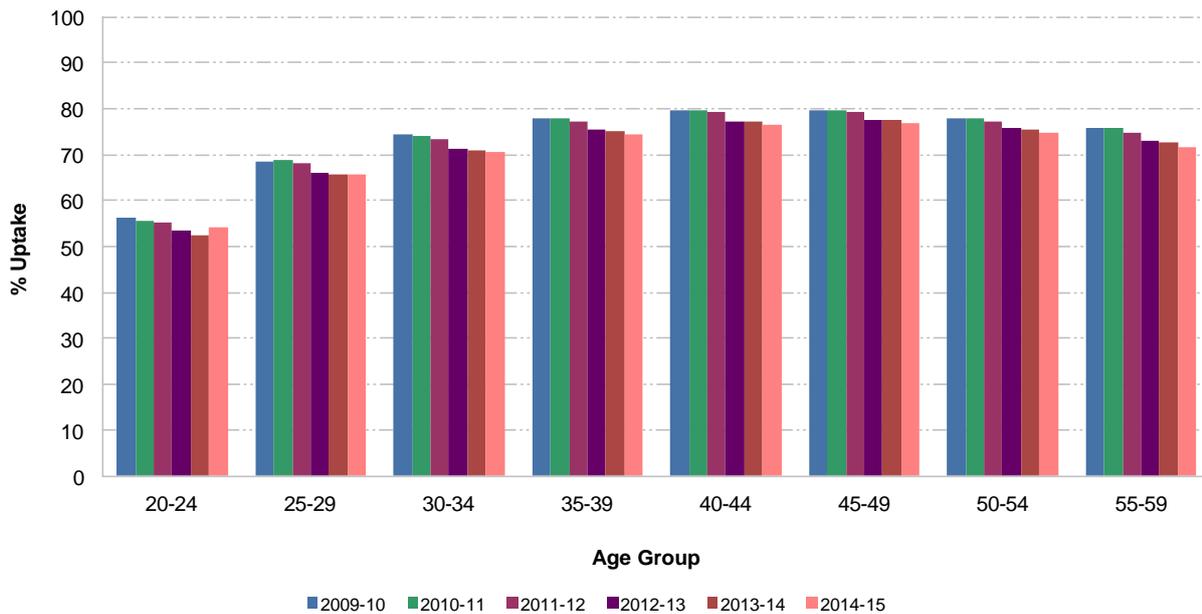
3. These data are based on the pre-2006 Health Board configuration (former Argyll & Clyde). Figures for NHS Highland do not include the Argyll & Bute area and figures for NHS Greater Glasgow do not include the Clyde area

## Uptake by age group

At 31<sup>st</sup> March 2015

- Of those screened in the previous 3.5 years, the number of women attending cervical screening has fallen slightly in all 5 year age bands from 30-34 years upwards. There has been a slight increase in the number attending screening in the 20-24 age group (Figure 2).

**Figure 2. Percentage uptake rates of females in Scotland aged 20 - 60<sup>1</sup> with a record of a previous screening test taken within the last 3.5 years<sup>2</sup>, by age group**



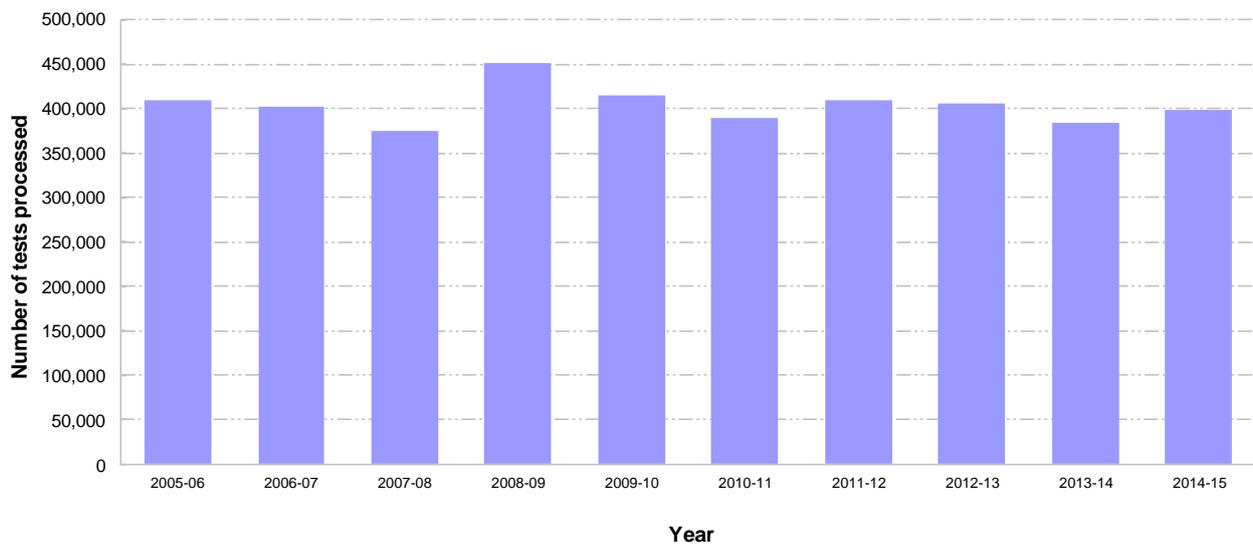
1. Based on SCCRS population denominator (excluding medically ineligible women).

2. Cervical screening year runs from 1<sup>st</sup> April to 31<sup>st</sup> March.

## Workload statistics

- In 2014-15, 397,673 cervical screening tests were processed within the programme, an increase of 3.5% (13,377 tests) compared to the previous year (Figure 3).
- The number of tests processed in the last 10 years has varied between around 375,500 and 415,500 with the exception of 2008-09 (450,500), which saw a sharp increase from preceding years most likely due to the impact of publicity surrounding the introduction of the HPV vaccination programme and the diagnosis and subsequent death of Jade Goody in March 2009 (Figure 3).

**Figure 3. Number of cervical screening tests processed<sup>1</sup> at NHS laboratories: Scotland, 1<sup>st</sup> April 2005<sup>2</sup> to 31<sup>st</sup> March 2015**



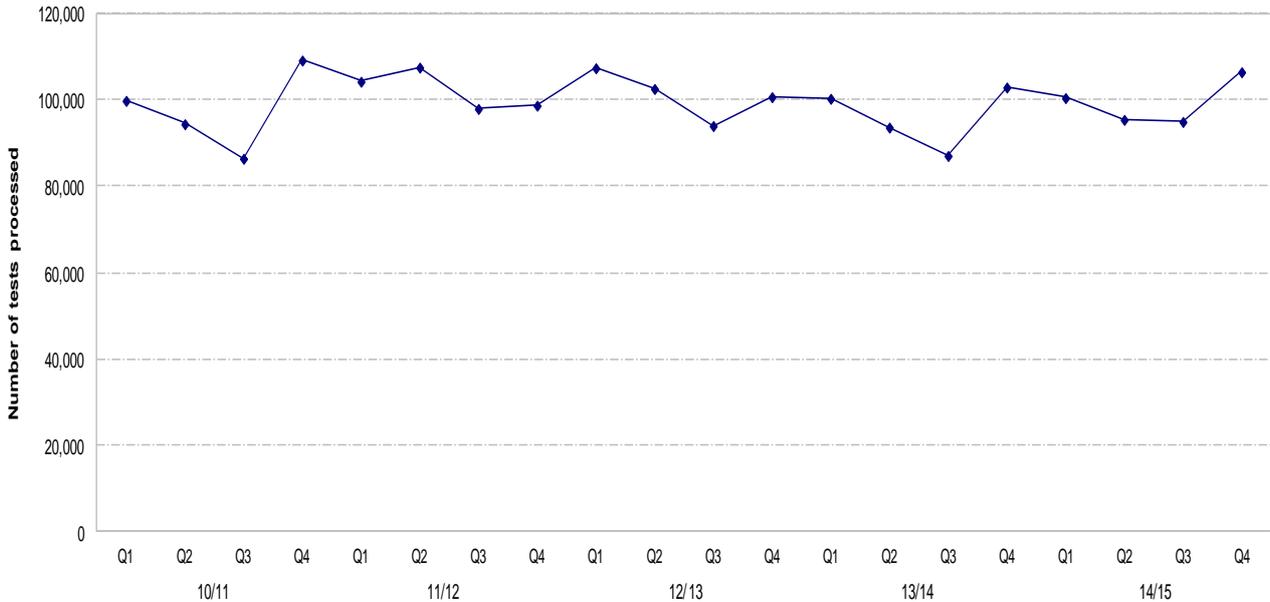
1. Data include unsatisfactory screening tests.

2. Cervical screening year runs from 1st April to 31st March except for years 1995-1997 which are reported by calendar year.

Trends in the number of cervical screening tests processed:

- The highest number of screening tests processed in 2014-15 was in Q4 when 106,557 tests were processed. This is an increase of 3.4% compared to Q4 of 2013-14. The lowest number of screening tests processed in 2014-15 was in Q3. All quarters in 2014-15 are higher than the equivalent quarter in 2013-14 (Figure 4).

**Figure 4. Trends in the number of cervical screening tests processed<sup>1</sup> by quarter: Scotland, 1<sup>st</sup> January 2010<sup>2</sup> to 31<sup>st</sup> March 2015**



1. Data include unsatisfactory screening tests
2. Cervical screening year runs from 1<sup>st</sup> April to 31<sup>st</sup> March

## Cervical screening results

In 2012/13 changes were made to screening test result categories in accordance with those agreed by the British Association for Cytopathology. These have been incorporated in all tables and charts. Please see [glossary](#) for more information.

- The percentage of screening test results indicating high grade cell changes, which require a further examination, has remained low at around 1.3-1.4% since 2005-06 (Table 2).

**Table 2. Total number of satisfactory screening tests and percentage results: Scotland, 1<sup>st</sup> April 2005<sup>1</sup> to 31<sup>st</sup> March 2015**

Year	Total satisfactory screening tests	Negative	Low grade cell changes	High grade cell changes
2005-06	401 301	92.6	6.1	1.3
2006-07	392 219	92.4	6.2	1.4
2007-08	364 842	92.3	6.4	1.3
2008-09	436 881	91.6	7.0	1.4
2009-10	402 905	91.3	7.4	1.3
2010-11	379 355	90.8	7.9	1.3
2011-12	398 858	90.9	7.8	1.3
2012-13	394 995	90.3	8.3	1.4
2013-14	374 047	90.6	8.0	1.4
2014-15	387 008	91.0	7.7	1.3

1. Cervical screening year runs from 1<sup>st</sup> April to 31<sup>st</sup> March.
2. Please refer to the glossary on page 14 to see how low and high grade cell change are categorised

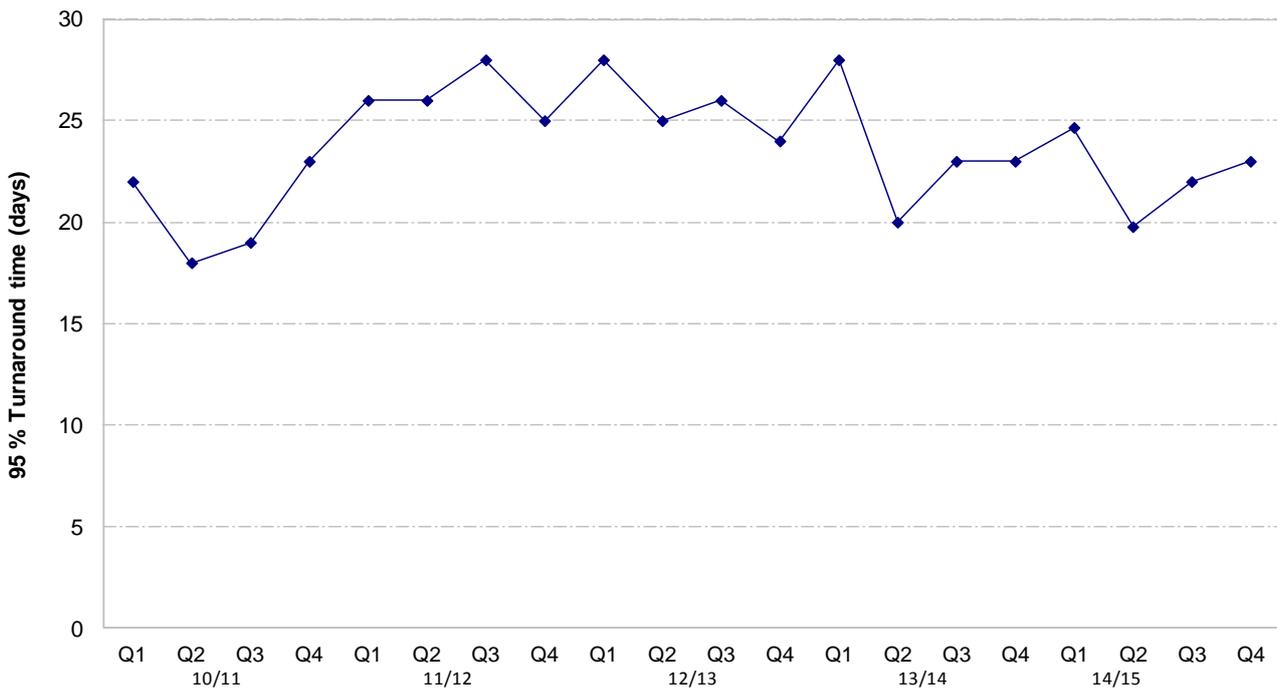
## Additional cervical screening statistics

### Laboratory turnaround times

From the 2013 publication, it was agreed by members of the Scottish Cervical Screening Programme Quality Assurance Reference Committee (QARC) that turnaround times for 95% of all screening tests processed in Scotland provide a more informative reflection of the time taken to turnaround samples than the mean figure (as published prior to 2013). Previously published mean turnaround figures are available [here](#).

- In 2014-15 the laboratory turnaround time for 95% of all cervical screening tests processed in Scotland ranged from 20 days in Q2 to 25 days in Q1 (Figure 5). The figures for 2014-15 show a decrease in turnaround times in Q1 & Q3 with Q2 and Q4 remaining the same when compared to 2013-14.
- The laboratory turnaround time of 20 days, in Q2 for 2014-15, for processing 95% of cervical screening tests was equal to the turnaround time of Q2 in 2013-14. This is the lowest turnaround time since Q2 of 2010-11.

**Figure 5. Turnaround times<sup>1</sup> (days) for 95% of all cervical screening tests processed by quarter: Scotland, 1<sup>st</sup> April 2010 to 31<sup>st</sup> March 2015**



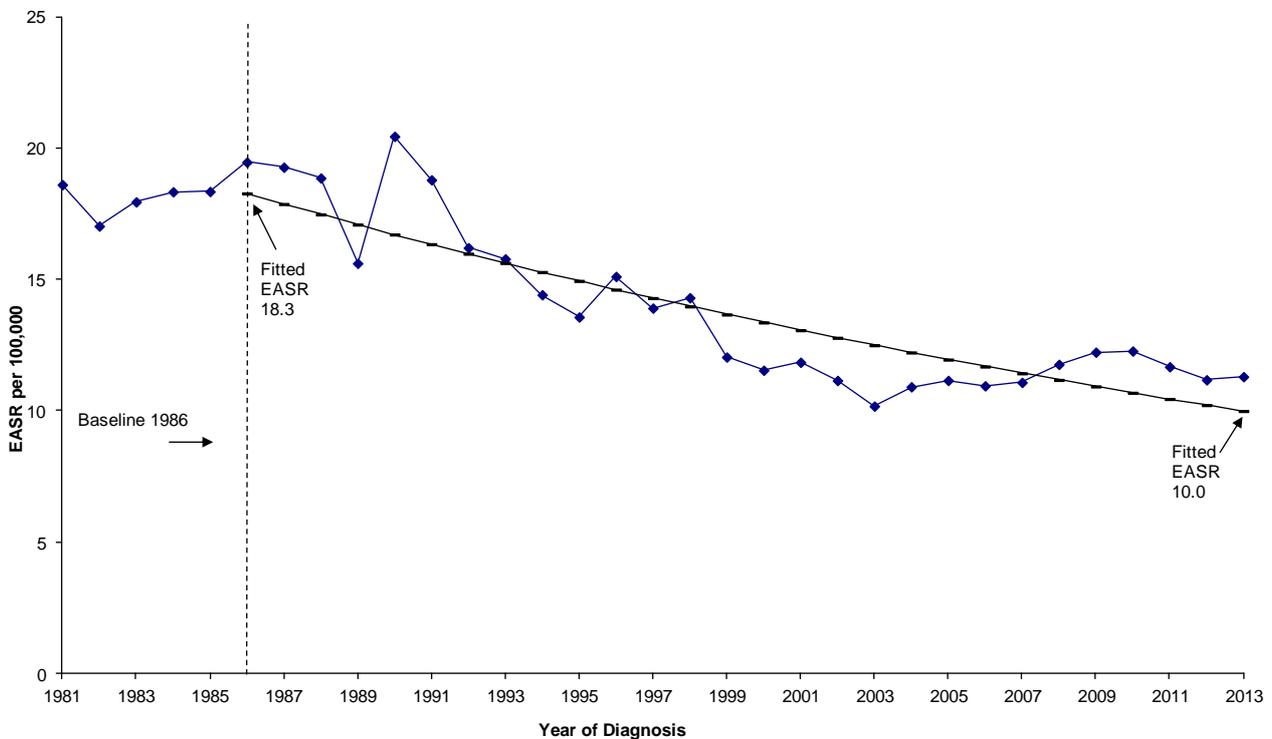
1. The turnaround time is defined as the number of days from the date the sample was received by the laboratory to the date the report was issued by the laboratory.

2. Cervical screening year runs from 1<sup>st</sup> April to 31<sup>st</sup> March.

## Invasive cervical cancer incidence

- Between 2012 and 2013 cervical cancer incidence increased from 11.2 to 11.3 (European Age Standardised Rate per 100,000 females).
- Overall, the incidence rate of invasive cancer of the cervix has decreased by 45.3% between 1986 and 2013 (Based on the fitted EASR in Figure 6).
- Over the last 32 years, European age-standardised rates have fallen from 18.6 diagnoses of cervical cancer per 100,000 persons in 1981, to 11.3 in 2013 (Figure 6), as expected in the presence of a cervical screening programme.

**Figure 6. Cervical Cancer Incidence (European Age Standardised Rates<sup>1</sup>) Females of all ages, Scotland 1981 – 2013**



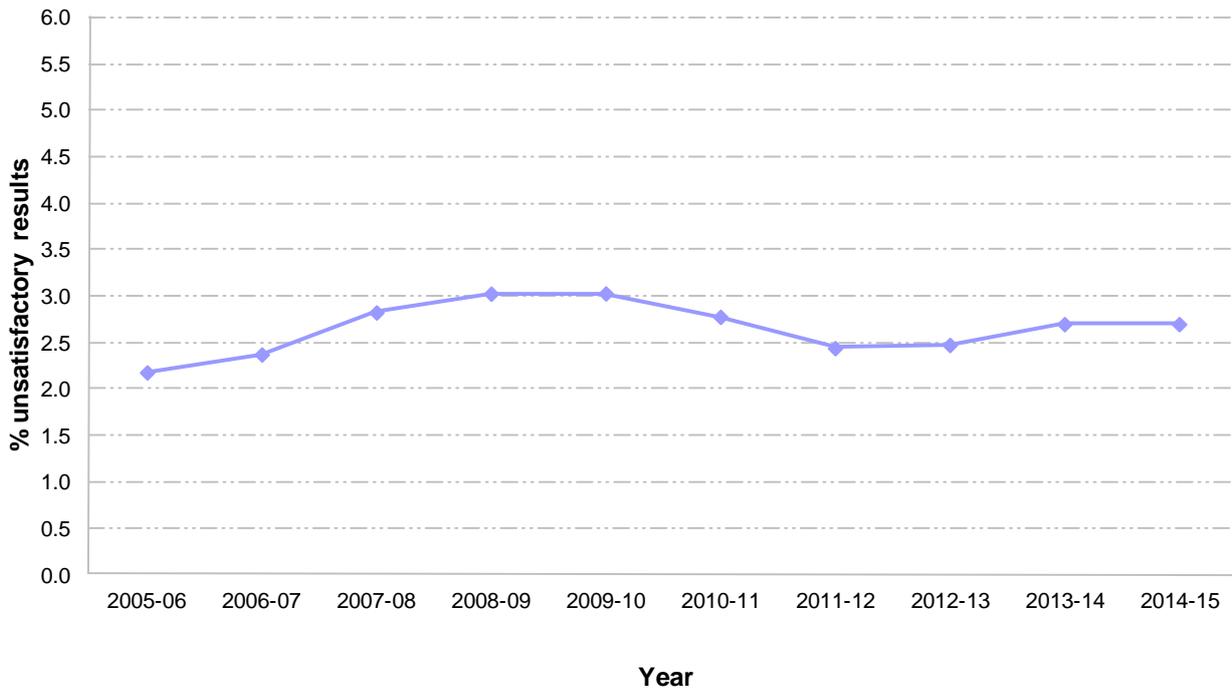
1. Incidence rates have been age-standardised to the European Standard Population and cover females of all ages.
2. The European Standard Population (ESP), which was first used in 1976, was revised in 2013. Figures using ESP1976 and ESP2013 are not comparable.
3. Best fit line produced using Poisson regression.

Detailed cervical cancer incidence and mortality data, lifetime risk, prevalence and survival statistics can be found on the [cervical cancer statistics](#) page of the Cancer website. Information on the most recent cancer incidence publication can be found [here](#).

### Unsatisfactory screening results

- In 2014-15 the percentage of unsatisfactory screening tests, where insufficient cells have been taken for testing, has stayed level at 2.7% compared to 2013-14 and has increased by 0.5 percentage points in the last 10 years (since 2005-06) (Figure 7).

**Figure 7. Percentage of unsatisfactory screening results: Scotland, 1<sup>st</sup> April 2005<sup>1</sup> to 31<sup>st</sup> March 2015**



1. Cervical screening year runs from 1st April to 31st March

## Glossary

Cytology - the study of cells

Dyskaryosis - cell changes which could develop to be cancerous

Low grade cell changes - result grouping which covers borderline change in squamous cells/endocervical cells and low grade dyskaryosis results

High grade cell changes - result grouping which covers high grade dyskaryosis (moderate and severe), high grade dyskaryosis, invasive, glandular abnormality and endocervical adenocarcinoma results

Cervical screening test - a test which detects changes in the cells of the cervix and enables affected women to have treatment early

Adenocarcinoma - a particular type of malignant tumour arising from glands

Liquid Based Cytology (LBC) - a method of assessing cell changes

Satisfactory screening test - a test that is of sufficient quality to enable the cytopathologist to interpret the findings and provide a working diagnosis

Cervical screening terms relating to the data within this publication can be found within our [Glossary](#) document on the [Cervical Screening](#) homepage

## List of Tables

Table No.	Name	Time period	File & size
1	<a href="#">Annual uptake data</a>	1 <sup>st</sup> April 2005 to 31 <sup>st</sup> March 2015	Excel [119kb]
2	<a href="#">Annual workload data</a>	1 <sup>st</sup> April 2005 to 31 <sup>st</sup> March 2015	Excel [104kb]
3	<a href="#">Number of screening tests processed</a>	1 <sup>st</sup> April 2005 to 31 <sup>st</sup> March 2015	Excel [57kb]
4	<a href="#">Turnaround times</a>	1 <sup>st</sup> April 2008 to 31 <sup>st</sup> March 2015	Excel [85kb]
5	<a href="#">Reporting times</a>	1 <sup>st</sup> April 2007 to 31 <sup>st</sup> March 2015	Excel [56kb]
6	<a href="#">Workload with turnaround times</a>	1 <sup>st</sup> April 2008 to 31 <sup>st</sup> March 2015	Excel [34kb]
7	<a href="#">Percentage of unsatisfactory screening tests</a>	1 <sup>st</sup> April 1999 to 31 <sup>st</sup> March 2007	Excel [33kb]
8	<a href="#">Screening test results by quarter (numbers)</a>	1 <sup>st</sup> April 1999 to 31 <sup>st</sup> March 2007	Excel [274kb]
9	<a href="#">Screening test results by quarter (percentages)</a>	1 <sup>st</sup> April 1999 to 31 <sup>st</sup> March 2007	Excel [296kb]
10	<a href="#">Crosstabulation by quarter</a>	1 <sup>st</sup> April 1999 to 31 <sup>st</sup> March 2007	Excel [281kb]
11	<a href="#">Cervical cancer incidence and mortality</a>	1 <sup>st</sup> January 1975 to 31 <sup>st</sup> December 2013	Excel [115kb]

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## Further Information

Further information can be found on the [ISD website](#)

## Rate this publication

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## Appendix

### A1 – Background Information

The use of cervical screening to detect changes in cells, which could develop to be cancerous, has been shown to reduce cervical cancer incidence and mortality. The test involves analysing cells which have been taken from the neck area of the womb, also known as the cervix. Routine checks ensure that any changes in cells can be picked up, monitored and treated if necessary.

In Scotland, eligible women between 20 and 60 years of age are invited routinely to attend cervical screening once every 3 years. Uptake rates are therefore based on women attending in the previous 3.5 years, with the additional 0.5 year to ensure that all data for women, who have attended for screening within that 3 year time period, have been reported.

Cervical screening uptake data are also reported based on a 5.5 year period. The main reason for this is to reference against indicators from the Quality and Outcomes Framework (QOF), a voluntary source of potential income for general practices across the UK. The indicator in question (CS1) measures the percentage of patients aged from 21 to 60 whose notes record that a cervical screening test has been performed in the last 5 years. As above, the 0.5 year is to ensure that data on all women who have attended within the previous 5 years have been reported. For further information on QOF please visit [here](#). The uptake data for 5.5 years are also used to compare against other cervical screening programmes within the United Kingdom.

Until May 2007, Cervical Cytology Statistics were collected quarterly from laboratories on form ISD(D)1Q and annually from health boards on form ISD(D)4, with data being compiled by ISD Scotland. More information can be found on our Data Sources page.

In May 2007, following a review of local call recall arrangements in Scotland, a new national IT system, the Scottish Cervical Call Recall System (SCCRS), was introduced across NHS Scotland. Cervical screening data are currently collected by each of the laboratories in Scotland and retained on the Scottish Cervical Call Recall System (SCCRS). SCCRS collects information relating to each step as a woman moves through her screening episode. More information on SCCRS can be found on the National Services Division website at [www.nsd.scot.nhs.uk](http://www.nsd.scot.nhs.uk).

For publication and management turnaround, ISD extracts data from SCCRS on cervical screening tests carried out in Scotland on a quarterly basis, for periods ending 31st March, 30th June, 30th September and 31st December. In addition to this, ISD also extract information on cervical screening uptake figures on an annual basis, for years ending 31st March. Until 31st March 2008, uptake rates for those women invited to attend cervical screening in the previous 3.5 years had declined year on year across Scotland. The majority of the decrease, almost 7%, occurred between 31st March 2007 and 31st March 2008. This decline coincided with the implementation of a new standardised recording system, which has improved the quality of the data collected and could explain some of the decrease.

For the 2013 publication onwards, it was agreed by members of the Scottish Cervical Screening Programme Quality Assurance Reference Committee (QARC) that turnaround times for 95% of all screening tests processed in Scotland provide a more informative reflection of the time taken to turnaround samples than the mean figure (as published prior to 2013).

All analytical support of the Scottish Cervical Screening Programme is provided by ISD Scotland.

**A2 – Publication Metadata (including revisions details)**

<b>Metadata Indicator</b>	<b>Description</b>
Publication title	Scottish Cervical Screening Programme Statistics 2014-15
Description	Annual and quarterly cervical screening statistics including uptake by age group and NHS Board, average reporting and laboratory turnaround times, number of cervical screening tests processed and results of tests, all reported by NHS Board/laboratory.
Theme	Health and Social Care
Topic	Conditions and Diseases
Format	Excel workbooks
Data source(s)	Scottish Cervical Call Recall System (SCCRS) from 2007-08. Any data previous to May 2007 were collected from laboratories using ISD(D) forms 4 and 1Q.
Date that data are acquired	August 2015
Release date	1 <sup>st</sup> September 2015
Frequency	Annual
Timeframe of data and timeliness	Data up to 31st March 2015. No delays between receipt and processing of data for publication.
Continuity of data	<p>Annual uptake figures (of females who had a record of a previous screening test taken within last 3.5 years) by NHS Board are reported from 2005/06.</p> <p>Annual uptake figures (of females who had a record of a previous screening test taken within last 5.5 years) by NHS Board are reported from 2005/06.</p> <p>Annual uptake figures (of females who had a record of a previous screening test taken within the last 3.5 years) by age group are reported from 2005/06.</p> <p>Annual uptake figures (of females who had a record of a previous screening test taken within the last 5.5 years) by age group are reported from 2005/06.</p> <p>Annual workload data showing the number of cervical screening tests processed by NHS Board/laboratory are reported from 2005/06.</p> <p>Annual workload data showing the results and % results of cervical screening tests by NHS Board are reported for</p>

	<p>2005/06.</p> <p>Annual workload data showing the results and % results of cervical screening tests processed in Scotland are reported from 2005/06.</p> <p>Annual workload data showing the % of unsatisfactory screening tests by NHS Board/laboratory are reported from 2005/06.</p> <p>Quarterly workload data on the number of cervical screening tests processed by NHS Board/laboratory are reported from 2005/06.</p> <p>Turnaround times for completion of 95% of screening tests by quarter and laboratory are reported from 2008/09.</p> <p>Number of cervical screening tests processed and turnaround times for completion of 95% of screening tests by quarter are reported on from 2008/09.</p> <p>Historical quarterly data on the number of cervical screening tests processed and the corresponding results are reported on from 1999.</p>
<p>Revisions statement</p>	<p>A national IT system, the Scottish Cervical Call Recall System (SCCRS), was introduced across Scotland in May 2007 to standardise the recording of cervical screening information. The SCCRS system has improved the quality of the data collected. Data included in this publication prior to May 2007 is compiled from legacy applications.</p>
<p>Revisions relevant to this publication</p>	<p>It was agreed by members of the Scottish Cervical Screening Programme Quality Assurance Reference Committee (QARC) that turnaround times for 95% of all screening tests processed in Scotland provide a more informative reflection of the time taken to turnaround samples than the mean figure (as previously published). Previously published mean turnaround figures are available <a href="#">here</a>.</p>
<p>Concepts and definitions</p>	<p>Please see Cervical Screening <a href="#">FAQ</a> and <a href="#">Glossary</a> document found at the bottom of the <a href="#">Cervical Screening</a> homepage.</p>
<p>Relevance and key uses of the statistics</p>	<p>ISD's Scottish Cervical Screening Programme statistics are designed for monitoring and evaluating the effectiveness of the Scottish Cervical Screening</p>

	<p>Programme. The statistics are used for a variety of purposes, including:</p> <ul style="list-style-type: none"> <li>• informing Scottish Government planning, including NHS spending and the development of the Scottish cancer care action plan;</li> <li>• informing Health Boards' planning and commissioning of cancer services;</li> <li>• health services research and clinical audit;</li> <li>• promoting changes in societal behaviour, such as increasing screening uptake rates; and</li> <li>• providing information to compare with UK and international health data.</li> </ul>
Accuracy	<p>All cervical screening data are subject to validation when entered onto SCCRS.</p> <p>Further checks on figures are carried out by individual laboratories on a quarterly basis. Any inaccuracies are then reported back for investigation and correction, if necessary.</p>
Completeness	<p>At time of extraction, data for the most recent year are estimated to be complete. See above note on Revisions.</p>
Comparability	<p>Currently, cervical screening statistics are not generally compared with other areas of the UK &amp; NI. The eligible age range for invitation to cervical screening varies within the UK.</p>
Accessibility	<p>It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a>.</p>
Coherence and clarity	<p>All cervical screening tables are accessible via the <a href="#">Cervical Screening</a> homepage.</p> <p>Cervical screening data are presented within Excel spreadsheets for each table.</p>
Value type and unit of measurement	<p>Number of cervical screening tests, results of tests and average turnaround times are reported as a count; uptake and % results are reported as a percentage.</p>
Disclosure	<p>The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.</p>
Official Statistics designation	<p>National Statistics</p>
UK Statistics Authority Assessment	<p>Assessment by UK Statistics Authority for National Statistics designation completed.</p>
Last published	<p>26<sup>th</sup> August 2014</p>
Next published	<p>6<sup>th</sup> September 2016</p>
Date of first publication	<p>3.5 &amp; 5.5 year uptake information by NHS Board of</p>

	<p>Residence is available from 1st January 1995.</p> <p>Annual workload information, for the number of cervical screening tests processed, is available from 1st January 1995.</p>
Help email	<a href="mailto:nss.isdcancerstats@nhs.net">nss.isdcancerstats@nhs.net</a>
Date form completed	20th August 2015

## **A3 – Early Access details (including Pre-Release Access)**

### **Pre-Release Access**

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

#### **Standard Pre-Release Access:**

- Scottish Government Health Department
- NHS Board Chief Executives
- NHS Board Communication leads

#### **Early Access for Management Information**

These statistics will also have been made available to those who needed access to 'management information', ie as part of the delivery of health and care:

- NHS Board Screening Coordinators

#### **Early Access for Quality Assurance**

These statistics will also have been made available to those who needed access to help quality assure the publication:

- Scottish Cervical Screening Programme National Coordinator and Programme Manager – National Service Division
- Scottish Government Health Directorate, CMO and Public Health Directorate
- NHS Board Cervical Screening Laboratory contacts
- Cervical screening Quality Assurance Reference Committee (QARC)

## A4 – ISD and Official Statistics

### About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

**Purpose:** To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

### Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.