

Introduction

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3 What is your organisation?

Organisation:

Regional Public Health

What is your feedback on the proposed revised HPV primary screening clinical pathway?

4 Please add your comments

What is your feedback on the proposed revised HPV primary screening clinical pathway?:

Regional Public Health commends the Ministry of Health on drawing on a robust evidence-base, including data from the Australian programme, to inform the rationale for this policy change and endorses that self-testing is a valuable way to promote screening among priority populations. RPH supports the value and benefits of implementing this screening pathway and recommends that the following factors are considered when developing the policy changes:

- Self-testing is a valuable way to promote screening, especially among priority populations. It is important that cervical screening is embedded in all forms of reproductive health, including contraceptive use and regular testing for sexually transmitted infections. Implementing self-testing alongside such existing programmes would complement current resources, especially those available specifically for priority populations. RPH recommends that any proposed changes to self-testing should not detract resources from existing programmes, especially for priority populations.

- Following up with clients who test positive for oncogenic and non-oncogenic HPV as well as cytology abnormalities will be especially important. The consultation document addresses the importance of follow-ups, but does not outline specific pathways. This is a particular issue due to difficulty accessing primary care services in some regions (GPs not taking on any new patients) and for women who move frequently due to insecure employment or housing. While the consultation document does mention that management of this group will be reviewed after the first five years of screening, or as more evidence becomes available, we would like to highlight the importance of following up with and providing support for clients. RPH recommends that the follow-up of clients is implemented in an equitable way, as this will be especially important in reducing adverse outcomes (cervical cancer incidence and mortality) among priority populations.

What is your feedback on self-testing vs clinician-taken HPV tests?

5 Please add your comments

What is your feedback on self-testing vs clinician-taken HPV tests?:

RPH considers that an important factor for the success of self-testing will be centred on robust communications. In particular, supporting information must be communicated in a range of languages, including te reo Māori as well as Pacific and Asian languages. Additionally, communication must include assurance and clarity of the confidentiality and privacy factors that encompass this self-testing programme.

RPH recognises the importance of additional services that patients receive when seeing a clinician face-to-face. In particular, ensuring women are asymptomatic, and not missing other health issues identified when patients are screened in-person. This is especially important among older patients.

Self-testing will support an overall uptake in screening. However RPH has considered that a possible side-result will likely be that some issues that may have previously been picked up during a clinician-taken HPV test will be go unchecked for a longer period of time. We recommend to the Ministry of Health that this unintentional factor is considered.

Do you foresee any problems with self-testing in a clinical setting, as part of the transition of the programme? What do you perceive as benefits?

6 Please add your comments

Do you foresee any problems with self-testing in a clinical setting, as part of the transition of the programme? What do you perceive as benefits?:

RPH does not foresee any problems with self-testing in a clinical setting as part of the transition of the programme. RPH observes the benefits of patient education and strongly recommends the inclusion of education alongside the self-testing in a clinical setting.

Do you foresee any likely impact on access and equity?

7 Please add your comments

Do you foresee any likely impact on access and equity?:

RPH commends the Ministry on improving the equity of outcomes (cervical cancer incidence and mortality) across all population groups as a guiding principle for the proposed change. Ensuring that implementation is pro-equity for Māori, Pacific, and Asian populations who all have lower rates of screening in current programme will be especially important in improving access and uptake.

8 Official Information Act responses

Include my personal details in responses to Official Information Act requests