

National Cervical Screening Program screening data 2016–2018; Quality Statement

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Identifying and definitional attributes

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Data quality

Summary of Key Issues

- These are the first data to be reported under the renewed National Cervical Screening Program (NCSP) that commenced on 1 December 2017.
- NCSP data are now maintained in the National Cancer Screening Register (NCSR), which is operated by Telstra Health (TH) on behalf of the Australian Department of Health.
- The renewed NCSP has a new screening pathway that is based on a woman's risk of significant cervical abnormality. It uses a Cervical Screening Test (CST) as the screening test, which is an HPV test with partial genotyping and reflex liquid based cytology (LBC).
- As a result of significant changes to the NCSP, it must be recognised that program data presented in this report are not comparable to data published in previous years. Further, due to insufficient time having elapsed to adequately measure all performance indicators, in addition to current limitations of data held in the NCSR, this report presents a snapshot that is transitional in nature and cannot be considered directly comparable to data that will be published in future reports.

Description

The NCSP is a highly successful public health initiative in Australia, halving cervical cancer incidence and mortality since it was introduced in 1991. This has been achieved through organised, population-based cervical screening using 2-yearly Pap tests to detect precancerous changes to cervical cells, allowing treatment before any progression to cervical cancer, thereby preventing this disease. Cervical screening using Pap tests has been supported by high-quality cervical cytology through pathology laboratories, and by state and territory cervical cytology registers, that supported appropriate recommendations for clinical management, and provided a safety net to women who participated in cervical screening.

Improvements in technology, a greater understanding of the role of human papillomavirus (HPV) in the development of cervical cancer, and the introduction of an HPV vaccine that is now administered to girls and boys under the National Immunisation Program, led to a process by which the NCSP was reviewed and 'renewed', to ensure that the NCSP continued to provide Australian women with safe and effective cervical screening. As a result of this process, on 1 December 2017, a 'renewed' NCSP was introduced.

The renewed NCSP includes a new screening pathway, and changes to the way that women are screened. Instead of women aged 20–69 having a Pap test every 2 years, women aged 25–74 will now have a CST every 5 years (the CST is an HPV test, followed by a cytology test if HPV is found). Another change is the collection of cervical screening data by the NCSR, which is now the sole source of national cervical screening data.

Data from the NCSR are available for download monthly.

Policies related to the new program are available from the [National Cervical Screening Program](#) site.

The new screening pathway can be found in the [National Cervical Screening Program Quality Framework](#).

The NCSP is monitored annually by the Australian Institute of Health and Welfare (AIHW). Results are compiled and reported at the national level by the AIHW in an annual NCSP monitoring report.

Institutional environment: The AIHW is a major national agency set up in 1987 by the Australian Government under the [Australian Institute of Health and Welfare Act 1987](#) (Cwlth) to provide reliable, regular and relevant information and statistics on Australia's health and welfare. It is an independent statutory authority, which is governed by a [management board](#), and accountable to the Australian Parliament through the Australian Government Health portfolio.

The AIHW aims to improve the health and wellbeing of Australians through better health and welfare information and statistics. It collects and reports information on a wide variety of topics and issues, including health and welfare expenditure, hospitals, disease and injury, mental health, ageing, homelessness, disability and child protection.

The AIHW also plays a role in developing and maintaining national metadata standards. This work helps improve the quality and consistency of national health and welfare statistics. The AIHW works closely with governments and non-government organisations to achieve greater adherence to those standards in administrative data collections to promote national consistency and comparability of data and reporting.

One of the main functions of the AIHW is to work with the states and territories to improve the quality of administrative data and, where possible, to compile national data sets based on data from each jurisdiction, analyse the data sets, and disseminate information and statistics.

Compliance with the provisions of both the *Australian Institute of Health and Welfare Act* and the [Privacy Act 1988](#) (Cwlth) ensures that the data collections managed by the AIHW are kept securely and under the strictest conditions to preserve privacy and confidentiality.

For further information, see www.aihw.gov.au.

Under agreement with the Department of Health and the AIHW, TH provides a raw data extract of the NCSR data tables monthly that the AIHW can download for analysis. Data reported by the AIHW represent a 'snapshot' of the NCSR database at the time of extraction, and may not include retrospective updates made to data after the time of extraction.

Timeliness: The data discussed in this data quality statement cover the period 1 January 2016 to 31 December 2018.

Accessibility: General enquiries about AIHW publications can be made to the Strategic Communications and Stakeholder Engagement Unit on (02) 6244 1000 or via email to info@aihw.gov.au.

Interpretability: 20 performance indicators were developed for the renewed NCSP which can be found in [National Cervical Screening Program Data Dictionary version 1.0](#)

While the concept of participation is easy to interpret, the NCSP screening pathway, other concepts, and statistical calculations are more complex. All concepts are explained within the body of the report presenting these data, along with footnotes to provide further details and caveats. Additional detail on the data sources, classifications, and the statistical methods used can be found in the Appendixes of the report.

Relevance: NCSP data are highly relevant for monitoring trends in cervical screening participation, and for monitoring key measures along the NCSP screening pathway. The data are used for many purposes by policy-makers and researchers, but are supplied and analysed specifically to monitor and inform the NCSP. Any Cervical Screening Test performed in Australia, unless the woman has opted out of the NCSR, are included in these data. NCSR data also include data from the previous NCSP, as all historical data held in state and territory cervical screening registers were provided to TH for inclusion in historical data tables.

Therefore the NCSR has the potential to contain every cervical screening test performed in Australia from 1991 to the present.

Accuracy:

The NCSR is the source of cervical screening data in Australia, following the migration and consolidation of state and territory cervical screening register data. This change may impact comparisons with previous NCSP reporting, particularly for women who screen in a different state or territory to which they reside.

The data in this report reflect the NCSR as at 18 October 2019. At this time, screening data were considered to be of an acceptable level of completeness to report on recruitment and screening performance indicators, although there remains an unknown number of screening tests that have not yet been ingested into the NCSR.

There are known issues with the completeness of colposcopy and histology data that have prevented the reporting of those performance indicators that rely on these data. These issues also relate to an unknown number of histology tests and colposcopy forms not yet provided to the NCSR by pathology laboratories or practitioners.

It is expected that these transition issues will resolve in future, after which time performance indicators that require complete colposcopy and histology data will be able to be reported. Transition issues include tests that have not been ingested into the NCSR, incomplete colposcopy and histology data, undermatching of women who have moved between jurisdictions, and an indeterminant effect on the reporting of performance indicators going forward.

It is also possible that data for performance indicators that have been reported will change in future as transition issues are resolved, since these may affect results if, for example, there are a high number of uningested screening tests added, which would change participation and screening data reported.

It is not possible to anticipate if and how these data may change, as at this time it is not possible to know the impact of NCSR transition data issues on the screening data that have been reported.

As a result of significant changes to the NCSP, it must be recognised that program data presented in this report are not comparable to data published in previous years. Further, due to insufficient time having elapsed to adequately measure all performance indicators, in addition to current limitations of data held in the NCSR, this report presents a snapshot that is transitional in nature and cannot be considered directly comparable to data that will be published in future reports.

In addition, the level of incomplete Indigenous status data in the NCSR does not support the estimation of cervical screening by Indigenous status at this time.

Further work will need to occur over the coming years to improve Indigenous identification on the NCSR and explore additional methodology to enable participation of Indigenous women to be estimated using NCSR data.

Coherence:

NCSP cervical screening data are reported and published annually by the AIHW. However, the 2019 NCSP monitoring report was the first to report on the renewed NCSP using data from the NCSR. Therefore, results in reports from December 2019 onwards cannot be compared with earlier reports.

Differences in cervical screening data reported by the AIHW and from other users of the NCSR may be due to retrospective updates to data and differences in the data extraction and analysis methodologies used.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Relational attributes

Related metadata references:

Has been superseded by [National Cervical Screening Program screening data 2018–2019; Quality Statement](#)
[AIHW Data Quality Statements](#), Standard 01/12/2020