I am pleased to have the opportunity to update the Committee on the outcome of the Independent Expert Panel Review of CervicalCheck, established following a Government decision in May last year, and on the current position overall in regard to our national cervical screening programme.

I am joined by my colleagues, Ms Tracey Conroy, Dr Ronan Glynn and Ms Celeste O’Callaghan.

The failure to disclose the results of the CervicalCheck retrospective audit to women and families, which emerged in April last year, resulted in widespread concern about the programme. Since then, the Department’s overriding policy priority has been to ensure the viability and sustainability of our national cervical screening programme so that it can continue to save lives and improve outcomes for cervical cancer. Neither screening, nor HPV vaccination, alone is enough – we need both of these public health programmes if we are to make cervical cancer a rare disease in Ireland.

In pursuit of that goal, the Department has engaged very closely with the HSE and, in particular, the National Screening Service, on the implementation of Government decisions and on the range of very difficult strategic and operational issues faced by the programme.

It is important to recognise, however, that this work has involved multiple stakeholders coming together to work collectively through the many challenges arising. As well as those who have continued to deliver the service in a hugely pressurised environment, they have included patient advocates, patient representatives, clinicians and medical colleges. I want to take this opportunity to acknowledge their commitment, input and expertise.

Most particularly I want to thank today the Royal College of Obstetrics and Gynaecology who at our request agreed to undertake what has been an enormously complex and challenging task, in order to give individual women or their next of kin the opportunity to have expert independent assurance about their own case.

We have moved over the past 18 months from a period of crisis to a much more stable environment. Necessary laboratory capacity was secured to ensure continuation of the programme, following complex negotiations undertaken by the HSE. Recruitment of key posts has been undertaken, and investment is ongoing in development of national lab capacity, in colposcopy services and in the introduction of HPV primary screening. From the perspective of women and families involved in this issue, an ex gratia scheme to address the issue of non-disclosure was put in place, as well as a package of health and social care supports.

Also over the past 18 months, we have had two independent reviews of the programme - the Scoping Inquiry led by Dr Scally which concluded earlier this year, and the Independent Expert Panel review led by the Royal College of Obstetrics and Gynaecology which concluded two weeks ago and which is the subject of discussion today.
Scoping Inquiry
Dr Scally provided a Final Report in September last year, and a Supplementary Report in May this year. He found no evidence of deficiencies in screening quality, but he identified a significant number of management and governance issues and made a total of 58 recommendations to address these.

A comprehensive implementation plan was developed in late 2018 for these actions, with approximately 170 actions in total across the Department of Health, the HSE and the National Cancer Registry of Ireland. Strong progress has been made with overall two thirds of these actions completed to date. Quarterly progress reports are published on the website of the Department.

Patient representation
Patient representatives make a significant contribution on an ongoing basis to the work of the Department, the HSE and health agencies, and the patient voice has been central to the work of the past 18 months. Patient representatives have been active participants in the CervicalCheck Steering Committee chaired by the Department, and contributed very significant time also to working with the HSE in regard to the many operational issues arising over the past year and a half.

Ms Lorraine Walsh resigned from her work on the Steering Committee, and with individuals and committees in the HSE and CervicalCheck, at the end of October. The Minister has thanked her for all of her work, and her significant input to the work of the CervicalCheck Steering Committee since inception was acknowledged at its November meeting.

The Department is examining how best to provide for the necessary structures that would allow for appropriate selection and compensation policies to be put in place so as to ensure that patient representatives are appropriately recognised and remunerated for their work and contribution to health service design and reform. International models of patient representation are being examined as part of this work.

Independent Expert Panel Review
On the 3rd of December, the aggregate report of the International Clinical Expert Panel Review of CervicalCheck, carried out by the Royal College of Obstetricians and Gynaecologists in the UK and otherwise known as the ‘RCOG Review’, was published following the Government meeting.

The first key objective of this Review was to provide women, or their next of kin, with independent clinical assurance about the timing of their diagnosis and treatment. In total, 1,038 women chose to participate in this Review. This was a very welcome level of participation and has allowed for a robust and comprehensive analysis of the CervicalCheck programme.

The process of communicating individual reports to women, or their next of kin, commenced in late September. All who wished to do so have now received a report setting out the Review’s findings for them personally.

There is no doubt that this has been a difficult process for many women or their next of kin, where the woman has, sadly, died. The Department has engaged very closely throughout this
process with the HSE in regard to its planning for a communication process that is as sensitive and supportively delivered as possible. The Department recognises the very significant work done by the HSE, including the Clinical Lead for the National Women and Infants Health Programme, and the engagement of colposcopists around the country in supporting this process.

The second key objective of this Review was that the Expert Panel would produce an aggregate report of their findings, to include recommendations where appropriate, with the aim of improving care for women. Clearly, in the context of the concerns that first arose in April 2018, this was an important dimension of the work of the independent expert panel and adds to the work already undertaken by the separate Scoping Inquiry in examining the programme.

**Review Conclusions**

Based on their overall findings, the Expert Panel has stated:

- That it is not an understatement to say for many women who participated in this Review, screening undoubtedly saved their lives.
- That there is no doubt that the Programme has been successful and that it is working effectively.
- That women can have confidence in the CervicalCheck Programme, and
- That their findings at a population level, are in line with those seen in the English cervical screening programme and should not be viewed as cause for concern with respect to the population overall.

These conclusions are very welcome, given the importance of cervical screening from a public health perspective. Cervical screening saves lives. It is vital therefore that women feel they can have confidence in the programme. The Expert Panel’s findings mean that women can be reassured that the programme we have is working effectively now.

The Expert Panel has made ten recommendations, which generally align with work already ongoing in both organisations including in regard to the recommendations of Dr Scally. The Minister for Health has written to the HSE and to the National Cancer Registry of Ireland in regard to these recommendations.

The Independent Expert Panel’s report also concluded that many of the women who participated in the Review are alive today because of CervicalCheck. That conclusion underlines once again the crucial importance of ensuring a strong, viable and sustainable cervical screening programme, while working to ensure that cervical cancer becomes a rare disease in Ireland.

Both the Expert Panel, and Dr Scally, have said that through a combination of screening and vaccination, together with good uptake of both, we can achieve this goal.

The extension of the HPV vaccine to boys in September this year, and the introduction of HPV primary screening in Quarter 1 next year are key steps in this process. Funding for both was provided in 2019 and the Department continues to engage closely with the HSE in regard to this key priority.
In addition, the focus remains on the continued implementation of the recommendations of the Scoping Inquiry and the implementation now of the ten recommendations contained in the RCOG review aggregate report.

Through the combined effect of all these elements, we have the opportunity to ensure that Ireland has a world class cervical cancer prevention programme which will enable us to make cervical cancer a rare disease within a generation.

Thank you.