

<b>Subject:</b>	<i>Retirement of Korner Returns KC53, KC61 and KC65 - Cervical Screening Central Returns</i>
<b>Approval Status:</b>	<i>This DDCN was approved by the DSCN Sub-Group on the 5<sup>th</sup> February 2013</i>
<b>Data Dictionary Version:</b>	<b>4.2</b>
<b>Reference Number:</b>	<b>DDCN 2013 / 04</b>
<b>Version Number:</b>	5
<b>Publication Date:</b>	27 <sup>th</sup> February 2013
<b>Relevant DSCN:</b>	<a href="#">DSCN 07/2004</a> <a href="#">DSCN 08/2004</a> <a href="#">DSCN 09/2004</a>

## Reason for Change

Information on cervical screening in Wales relates to the annual national reporting of Cervical Screening and Colposcopy Clinic activity and also outcome data following any uptakes of invitations for screening. This information is published annually in the Cervical Screening Wales annual statistical release '*Cervical Screening Programme, Wales*'.

The central collection of information on cervical screening began in 1988 and was originally collected through Korner returns KC53, KC61 and KC65.

In recent years there has been a change in the collection of this information so that the information that was previously collected via the KC53, KC61 and KC65 proformas is now extracted directly from various administrative and clinical systems. It is collated, processed and aggregated on a central server at Public Health Wales (PHW) prior to its publication on the Cervical Screening Wales (CSW) website. Therefore, although the original proformas have been retired, similar information is still collected through alternative means.

The NHS Wales Data Dictionary currently contains a list of terms and definitions associated with the now redundant KC53, KC61 and KC65 proformas. The definitions associated with the current arrangements for the collection of this information are available elsewhere, such as in the CSW statistical release. All references to the KC53,

KC61 and KC65 returns themselves and all associated definitions are therefore being removed from the NHS Wales Data Dictionary.

A further DSCN will be issued to describe the current reporting arrangements for the collection of information on cervical screening.

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## **Description of Change**

To remove references to KC53, KC61, KC65 and associated definitions from the NHS Wales Data Dictionary.

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## **Data Dictionary Version**

Where applicable, this DDCN reflects changes introduced by DDCN and/or DSCN since the release of version 4.1 of the NHS Wales Data Dictionary.

The changes introduced by such DDCNs will be published in version 4.2 of the NHS Wales Data Dictionary.

**Section 1: Table reflecting areas that are impacted as a result of this DDCN**

The following table shows all Data Items, Terms and associated areas that are linked with the changes documented within this DDCN.

<b>Data Definition Type</b>	<b>Name</b>	<b>New / Retired / Changed</b>	<b>Page Number</b>
Korner Returns – Korner List	KC53 - Cervical Screening Administrative Department Return	Retired	4
Korner Returns – Korner List	KC61 – Pathology Laboratories Cervical Screening Return	Retired	5
Korner Returns – Korner List	KC65 - Colposcopy Clinics: Referrals, Treatments and Outcomes	Retired	6
Terms	Biopsy Referral Outcome	Retired	9
Terms	Cervical Cytology Screening	Retired	9
Terms	Colposcopy	Retired	10
Terms	Colposcopy Prime Procedure Type	Retired	10
Terms	Colposcopy Results Type	Retired	11
Terms	Colposcopy Visit Type	Retired	11
Terms	Cytology Results Type	Retired	11
Terms	Cytology Screening Action Type	Retired	12
Terms	Screening Invitation Date	Retired	12
Terms	Screening Invitation Type	Retired	12
Terms	Screening Programmes	Retired	12
Terms	Screening Status	Retired	13
Terms	Screening Test Date	Retired	13
Terms	Smear Source Type	Retired	13
Terms	Target Population	Retired	13
Terms	Surveillance	Retired	14

## **Section 2: Highlighted changes to be made to the NHS Wales Data Dictionary**

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a **strikethrough**. The text shaded in **grey** shows existing text copied from the NHS Wales Data Dictionary.

### **Deletion of Sections KC53, KC61 and KC65 from section 'Korner – List' under 'Korner Returns'**

#### **~~KC53 – Cervical Screening Administrative Department Return~~**

~~The Department, NHS Cervical Screening Programme (NHSCSP) and Local Health Boards require information on Cervical Screening.~~

~~The information helps to monitor the process of achieving the Government's target to reduce the incidence of invasive cervical cancer and to ensure that the screening programme is managed effectively.~~

~~Information on the call and recall system is collected mainly on the KC53 return (a computer generated report common to England and Wales) from Cervical Screening Administration Departments.~~

~~Information based on the KC53 return is published annually by the Department in the Statistical Bulletin 'Cervical Screening Programme'.~~

~~This is an annual return providing information up to the year end of 31 March. The return is expected to be submitted within 2 months of this date.~~

~~The return is made up of the Parts A – F.~~

~~Figures in each part are broken down into the following age bands:-~~

~~Under 20  
20-24  
25-29  
30-34  
35-39  
40-44  
45-49  
50-54  
55-59  
60-65  
65-69  
70-74  
75+~~

~~But note that part A is further split to 75-79 and 80+~~

~~Part A: Test Status of Women and coverage, by age at 31 March~~

~~Part A requires information on the [Screening Status](#) of all eligible women as at 31 March.~~

~~Part B: Number of Women Invited in the Year, by Type of Invitation and age at 31 March~~

Part B requires age-banded data on the number of women invited for screening broken down by [Screening Invitation Type](#). The figures relate to those with a [Screening Invitation Date](#) between 1 April and 31 March. Where a woman is invited on more than one occasion in the year, the first invitation is recorded on KC53.

**Part C: Number of Women Tested, by Type of Invitation and age at 31 March**

Part C requires data on the women screened in the year by [Screening Invitation Type](#). The figures relate to those with a [Screening Test Date](#) between 1 April and 31 March. Where a woman is screened more than once in the year, for whatever reason, her [Screening Invitation Type](#) at her first [Screening Test Date](#) in the review period is to be recorded.

Note:—

Part C1 is the invitation type by age (first test)

Part C2 — is the invitation type by result (first test, 20–64 year olds only)

Part C3 — is the invitation type by result (all tests, all ages)

**Part D: Number of Test Results by Age at 31 March**

Part D of KC53 requires age-banded data on the most severe results of cervical screening tests recorded during the year. It does not include inadequate tests. Where a woman has only one smear tested in the year, which turns out to be inadequate, or more than one, all of which are inadequate, no entry is required.

Results are broken down into [Cytology Results Type](#) and are in accordance with the categories shown in box 22 of HMR 101/5 Request/Report for Cervical or Vaginal Cytology.

**Part E: Cervical Screening Programme — Notification of Result — Waiting Times**

In Wales, figures to derive this table are collected, but this table is not submitted as part of the return, as England do not request the information.

**Part F: Cervical Screening Programme — Test Recall/Status of women following most severe screening result in the year**

In Wales, figures to derive this table are collected, but this table is not submitted as part of the return, as England do not request the information.

**KC61 — Pathology Laboratories Cervical Screening Return**

Change History	-
DDCN 2011/05	Changes to Family Planning Clinic References
DDCN 08/04 (W)	KC61 Pathology Laboratories Cervical Screening Return

The Department, NHS Cervical Screening Programme (NHSCSP) and Local Health Boards require information on Cervical Screening.

The information helps to monitor the process of achieving the Government's target to reduce the incidence of invasive cervical cancer and to ensure that the screening programme is managed effectively.

Information about cervical smears examined by pathology laboratories is collected on the KC61 return, which includes symptomatic smears as well as smears examined as a result of uptake of invitations for screening.

This is an annual return providing information up to the year end of 31 March. The return is expected to be produced within 2 months of this date.

The return is made up of the Parts A – C.

Part A: Number of smears examined by pathology laboratories, and number found inadequate, by source of smear and result of test

Part A is broken down by laboratory and provides data on the number of results recorded, showing figures by Smear Source Type and Cytology Result Type.

Part B: Result of test, by laboratory

Part B provides information against each laboratory and relates to the results of smears examined. But only those results where the Smear Source Type is classified as either *General Medical Practitioner* or *NHS Community Clinic (this includes Sexual and Reproductive Health Clinics, Well Women clinics and young persons' clinics, other than those run by General Medical Practitioners)* are counted.

Figures are broken down by Cytology Result Type, and by age bands. The band is the age of the woman at the date of the smear and not the woman's age on 31 March. The age bands range from Under 20, to over 75.

Part C: Outcome for women recommended for gynaecological referral during April xxxx – March xxxx

Part C provides data, broken down by laboratory, analysing the number of women subsequently referred for gynaecological investigation the previous year following an abnormal smear. This is where the Cytology Screening Action Type has a status of '*Refer for medical assessment or under medical treatment (Suspend) (S)*'.

This data is commonly displayed by separating the figures for low grade results (inadequate / borderline / mild dyskaryosis) and high grade results (moderate dyskaryosis or worse) the Positive Predictive Values are calculated from the high grade figures.

Figures are given for women by Cytology Result Type and by Biopsy Referral Outcome.

Cytology Result Type with a value of *Negative* are not counted.

## **KC65 – Colposcopy Clinics: Referrals, Treatments and Outcomes**

The Department, NHS Cervical Screening Programme (NHSCSP) and Regional Offices require information from NHS Local Health Boards on Colposcopy clinic activity.

The KC65 forms part of the wider NHS Cancer Information Strategy which aims to improve the effectiveness and efficiency of care delivery for those with actual or suspected cancer, throughout the patient journey.

The information is used to monitor the process of achieving the Government's target to reduce the incidence of invasive cervical cancer and to monitor the performance of Colposcopy clinics on local, regional and national levels.

Information based on the KC65 return is published annually by the Department in the Statistical Bulletin *Cervical Screening Programme*.

This is an annual return providing information up to the year end of 31 March. The return is expected to be produced within 6 months of this date.

The British Society for Colposcopy and Cervical Pathology has agreed a Data Set (DS) for Colposcopy services, currently being introduced into Colposcopy Clinics. The DS meets professional requirements for audit and quality improvement as well as departmental needs, and provides the information needed to complete the KC65.

In Wales, the following tables are collated to form the KC65 return:-

Number of New Patients seen, by Referral Smear Result (Colposcopy Results Type) and Colposcopy Clinic

Time from Receipt of Referral to First Offered Appointment, by Colposcopy Clinic

Total attended Visits, by Type of Visit (Colposcopy Visit Type) and Colposcopy Clinic

Number of New Referrals seen, by Result of Referral Smear (Colposcopy Results Type), and Most Significant Procedure (Colposcopy Prime Procedure Type)

Number of New Referrals seen, by Most Significant Procedure (Colposcopy Prime Procedure Type), and by Colposcopy Clinic

Number of New Patients seen, by Colposcopic Opinion, and Worst Outcome of Histology (Biopsy Referral Outcome)

Number of New Patients having a Biopsy Taken, by Colposcopy Clinic, and Worst Outcome of Histology (Biopsy Referral Outcome)

Number of Cervical Biopsies taken, by type and Worst Outcome of Histology (Biopsy Referral Outcome)

Correlation of Outcome from an Initial Punch Biopsy with a subsequent LLETZ

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## Changes to Terms:

### Korner – Terms

[Action Taken](#) - **KO41(A)/KO41(B)**

[Ambulance Service](#) - **KA34**

[Assessment](#) - **KC62**

[Biopsy Referral Outcome](#) —~~**KC61, KC65**~~

[Cancers Diagnosed](#) - **KC62**

[Cervical Cytology Screening](#) —~~**KC53, KC61**~~

[Colposcopy](#) —~~**KC65**~~

[Colposcopy Prime Procedure Type](#) —~~**KC65**~~

[Colposcopy Results Type](#) —~~**KC65**~~

[Colposcopy Visit Type](#) —~~**KC65**~~

[Community Episode](#) - **KC50**

[Complaint](#) - **KO41(A)/KO41(B)**

[Contact](#) - **KC60**

[Cross Section Analysis of Population Coverage within Period 1/4/XXXX – 31/3/XXXX](#) - **KC63**

[Cytology Results Type](#) —~~**KC53, KC61**~~

[Cytology Screening Action Type](#) —~~**KC61**~~

[Data Completeness Indicators](#) - **KC62**

[Detained Patient](#) - **KP90**

[Domiciliary Visit](#) - ~~**KC50**~~ **6360**

[Early Recalls](#) - **KC62**

[Emergency Call](#) - **KA34**

[Emergency Journey](#) - **KA34**

[First Invitation for Routine Screening](#) - **KC62**

[Initial Contact](#) - **KC60**

[Invitations and Outcomes](#) - **KC62**

[Legal Status](#) - **KP90**

[Mental Category](#) - **KP90**

[Outcome Measures](#) - **KC62**

[Patient Journey](#) - **KA34**

[Percentile Time Values](#) - **KA34**

[Primary Course Of Immunisation](#) - **KC50**

[Priority Of Journey](#) - **KA34**

[Psychiatric Patient](#) - **KP90**

[Psychopathic Disorder](#) - **KP90**

[Response Time](#) - **KA34**

[Routine Invitation to Previous Attendees \(last screen more than 5 years previously\)](#) - **KC62**

[Routine Invitation to Previous Attendees \(last screen within 5 years\)](#) - **KC62**

[Routine Invitation to Previous Non-attendees](#) - **KC62**

[Screening Invitation Date](#) —~~**KC53**~~

[Screening Invitation Type](#) —~~**KC53**~~

[Screening Programmes](#) —~~**KC53**~~

[Screening Status](#) —~~**KC53**~~

[Screening Test Date](#) —~~**KC53**~~



[Self/GP Referrals of Women Not Screened Previously](#) - **KC62**  
[Self/GP Referrals of Women Not Screened Previously \(last screen more than 5 years previously\)](#) - **KC62**  
[Self/GP Referrals of Women Screened Previously \(last screen within 5 years\)](#) - **KC62**  
[Sexually Transmitted Diseases](#) - **KC60**  
[Skin Test](#) - **KC50**  
[Smear Source Type](#) - **KC61**  
[Special Journey](#) - **KA34**  
[Status of Cancer](#) - **KC62**  
[Target Population](#) - **KC50-53**  
[Tuberculin Skin Test](#) - **KC50**  
[Type Of Complaint](#) - **KO41 (A)/KO41 (B)**  
[Urgent Journey](#) - **KA34**  
[Women with Open Episodes](#) - **KC63**

## Changes to Terms (A-Z)

### Biopsy Referral Outcome

A code used to reference an outcome of a referral for a biopsy. For cervical histology, biopsies are taken after a Colposcopy has been performed. For cervical histology for KC61 purposes, the breakdown is:

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- Cervical Cancer (including micro-invasive)
- Adenocarcinoma in situ / CGIN
- CIN3
- CIN2
- CIN1
- HPV only
- No CIN/No HPV
- Inadequate biopsy
- Colposcopy - Nothing Abnormal Detected (NAD)/no biopsy taken
- Results not known by laboratory

### Cervical Cytology Screening

Change History	-
<a href="#">DSCN 2009/09</a>	NHS Reforms: NHS Wales Data Definition Update

The regular testing of women for possible cervical cancer through examination of cells, removed from the surface of the cervix, for signs of abnormal cells which might develop into cancer if left untreated.

**Number of women screened** as part of national call and recall system, includes:

a)	Only women screened within 6 months of an initial invitation from the Local Health Board/Trust completing the return.
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b)	Women invited by the Local Health Board/Trust completing the return, but screened outside the District.
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**Excludes:**

a)	Inadequate tests which result in a request for a re-test.
b)	Women screened at an early recall following a previous abnormal or positive result.

**Women no longer required to be screened** includes, for example those recorded as having undergone an operation to remove the cervix.

**Number known to have had a smear in the last five years should:**

a)	include all qualifying women for whatever reason the smear was performed.
b)	exclude any woman who has had only an inadequate test.

**Test results:**

a)	<b>Abnormal:</b> CIN grade I or II (mild and moderate dysplasia)
b)	<b>Positive</b> are results classified as:
i.	CIN grade III (severe dysplasia or carcinoma in situ)
ii.	"Carcinoma in situ/invasive"
iii.	"Glandular neoplasia"

**Colposcopy**

Colposcopy is a procedure carried out on a woman who has been referred to a Colposcopy Clinic following a screening test carried out either as part of a screening programme or opportunistically. Alternatively the woman may be referred as a result of clinical indications

**Colposcopy Prime Procedure Type**

The Colposcopy Prime Procedure Type identifies the prime procedure undertaken during the first Colposcopy attendance.

More than one procedure may be carried out, but only one should be recorded for KC65 purposes, this being determined by the order of severity.

The classifications are listed in order of severity with the most severe being listed first:

A	Ablation; treatment method recorded as ablation. This will include cold coagulation, cryotherapy, cautery and diathermy
-	(i) — biopsy taken result available or not known by clinic
-	(ii) — no biopsy taken

B	Loop/laser excision or knife cone; treatment method recorded as loop/laser excision or knife cone and biopsy type recorded as other than no biopsy. This will include LLETZ and NEEP.
C	Diagnostic biopsy (punch); no treatment received and biopsy type recorded as directed biopsy or multiple directed biopsies, or any other biopsy taken for diagnostic purposes only.
D	Other; treatment method recorded as other and biopsy type recorded as other than no biopsy. This will include polyp avulsion and treatment with silver nitrate
E	No treatment; no treatment received and no biopsy taken.

**Note** where the patient opts to defer treatment to a later time the classification E – No treatment; no treatment received and no biopsy taken – should be recorded.

## Colposcopy Results Type

Inadequate  
 Negative  
 Borderline Changes  
 Mild dyskaryosis  
 Moderate dyskaryosis  
 Severe dyskaryosis  
 Severe dyskaryosis / ?invasive carcinoma  
 Severe dyskaryosis / ?glandular neoplasia  
 No referral smear

## Colposcopy Visit Type

Colposcopic assessment	This should be the first attended visit where the woman is assessed
Select and treat	This relates to any first visit where treatment is conducted
Planned treatment	-
Post treatment colposcopy follow up	A follow up assessment visit following previous treatment
Non treatment colposcopy follow up	A follow up assessment visit following NO previous treatment
Smear only	No colposcopy assessment
Consultation only	No clinical activity
Visit Type not specified	-

## Cytology Results Type

The results of a cytology screening test which is analysed in Pathology Laboratories. These results are classified into:-

Inadequate sample  
Negative  
Mild dyskaryosis  
Moderate dyskaryosis, including abnormal, unclassifiable and ungraded smears  
Severe dyskaryosis  
Severe dyskaryosis/invasive carcinoma  
Glandular neoplasia  
Other

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## Cytology Screening Action Type

The action recommended as a consequence of a Cytology Screening Test. Classifications are:

Standard Primary Care Trust recall interval (Normal) (A)  
Repeat at interval specified (R)  
Refer for medical assessment or under medical treatment (Suspend) (S)  
Make no change to recall date (H)

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## Screening Invitation Date

This is the date on which an invitation for a screening test was sent out.

See [Date Format](#)

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## Screening Invitation Type

The type of invitation for a screening; these are:

First Call  
Routine Recall  
Repeat in less than three years for surveillance  
Repeat in less than three years because of abnormality  
Repeat in less than three years because of inadequate smear

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## Screening Programmes

A programme directed towards the detection of a specific disease or condition in a target group: e.g.

a)	Cervical cancer in women of a particular age group
b)	Hypertension in adults of a particular age group
c)	Hearing impairment in school children

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Screening makes use of the tests which can be applied rapidly to apparently well persons as a means of distinguishing those who probably have the condition from those who probably do not.

An individual may require retesting after an initial test for technical reasons or due to an inconclusive result. The screening test is not complete until such re-tests have been satisfactorily completed.

See [Cervical Cytology Screening](#)

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## Screening Status

This is an indication of the call status of the person in the Screening Programme.

These statuses are:—

The status of the population on Part A is defined as:

Eligible

Recall ceased—clinical reasons

Recall ceased—age reasons

Recall ceased—other reasons

The status of the population on Part C is defined as:

First Call

Routine Recall

Non-routine/early recall advised within 3 years for surveillance

Non-routine/early recall advised within 3 years because of abnormality

Non-routine/early recall advised within 3 years because of inadequate smear

Recall suspended

Recall ceased

Not invited by the programme

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## Screening Test Date

This is the date on which the screening test was performed. In the case of cervical screening, this is the date the cervical smear was taken.

See [Date Format](#)

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## Smear Source Type

This is the source of smears examined by Pathology Laboratories, for which statistical information is to be gathered.

Classifications are:—

General Medical Practitioners

NHS Community Clinic—this includes Sexual and Reproductive Health Clinics, Well Women Clinics and young persons' clinics, other than those run by General Medical Practitioners

GUM Clinic

NHS Hospital

Private

Other

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## Target Population

That part of the population which the structured programme e.g. screening, immunisation or surveillance aimed to reach.

See [Surveillance](#)

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## **Surveillance**

A surveillance programme is a programme delivered to individuals and directed towards the identification of a range of possible disorders which can be treated, or their adverse consequences reduced, more effectively by earlier, rather than later, intervention.

The broad objective is the general oversight of health or monitoring of development which involves assessment of a selected group of the population by means of practical and uniform observations and measurements which can be applied rapidly.

The number of stages in a District's surveillance programme will be determined locally although generally there will be not more than 5 stages of surveillance prior to school entry and not more than 4 stages while the child is of school age.

**Additional Information:**

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You can find changes made to the NHS Wales Data Dictionary via the following link:  
<http://www.datadictionary.wales.nhs.uk/>