

**Cervical Screening Placement Audit Form & Environment Form**

**TO BE COMPLETED BY YOUR SUPERVISING STAFF MEMBER**

**CERVICAL SAMPLE TAKER – Additional Admission Criteria and environment Form. PLEASE COMPLETE ALL SECTIONS:**

**Name of Applicant:**

**Place where training will occur: (If more than one practice then please add both and indicate where most of the training will occur)**

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In order for the above named person to be accepted on the module ‘Cervical Cytology Screening’ you need to assurethe University /training provider that you meet the following placement standards for training.

**The In-House Professional Support MUST:** please tick.

* Be a current registered cervical sample taker with current NEYH regional code.
* Be a qualified sample taker for at least 1 year
* Take at least 20 samples a year and demonstrate continuing competence in cervical sample taking.
* Be undertaking self-audit in relation to their adequate/inadequate rates and have undertaken at least 20 samples in the past year with an adequate rate of at least 80%
* Understand that the student will require 20 adequate samples to proceed to final assessment
* Be in attendance when external mentor attends
* Have met the training updates in line with NHSCSP requirements which includes the cervical training update e-learning and HPV e-learning. Both can be found at <https://portal.e-lfh.org.uk/> and should then be uploaded to the database for checking by the external mentor service
* Nurses should hold a recognised qualification in cervical screening (or equivalent) or have commenced sample taking prior to 1998 when the ‘National Training Guidance’ was implemented.
* Be present on site whilst the trainee undertakes all unsupervised samples.

**Named IN-HOUSE Professional Support Details:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| SAMPLE TAKER CODE: | |  |  |  |  |  |
| Surname: | | First Name(s): | | | | |
| Contact work Email: | |  | | | | |
| Contact work Telephone: | |  | | | | |
| Work Address where student will train: |  | | | | | |
|  | | | | | | |
| How many samples taken in the last 12 months? | |  | | | | |
| How many samples were inadequate? | |  | | | | |
| Date of most recent cervical screening update e-learning\*  This should be within the last 3 years | |  | | | | |
| Date of HPV elearning | |  | | | | |
| Sample Taker Co-ordinator for the Practice (name) | |  | | | | |

**\*This must be within the last 3 years. Will the e-learning still be in date when the student commences training? Yes/No**

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| I/They understand that as soon as the nurse has been offered and accepted a place the practice will apply for a trainee sample taker code. | **YES\*** | **NO\*** |
| The nurse will be given appropriate access to OPEN EXETER, electronic records and the Gateshead cervical screening ordering system | **YES\*** | **NO\*** |
| The nurse will be able to attend the training institutions induction day^ | **YES\*** | **NO\*** |
| The External Mentor is required to take samples within your practice to demonstrate the process to the student. You will enable IT access with their own username and password to record the necessary clinical details. | **YES\*** | **NO\*** |
| The training Nurse will be allocated 30 minutes per appointment | **YES\*** | **NO\*** |

NB: In your practice the External Mentor is permitted to take high vaginal and endocervical on women they sample however, they are not permitted to perform swabs on women sampled by the student.

|  |  |
| --- | --- |
| My Role in Practice: | Name: |
| Signature: | Date: |

Now complete the environment check: this will be reviewed for accuracy of completion during the first visit by the assigned external trainer.

**Environment Check**

The North East, Yorkshire and the Humber have high standards and lead the way in good practice for training nurses in cervical screening. The following items must be in place before your nurse will be able to start taking samples. The external mentor will go through a more detailed check list with the in house support, and any items not meeting the standards will mean the student will not be able to start sample taking.

|  |  |
| --- | --- |
| **Items for room the student will train in** | **In Place Delete as applicable** |
| Educational Audit completed in the last 2 years by a local HEI (for student nurse placements) | Yes / No/ NA |
| Room/s with lockable door(s) / or engaged signage and curtains around couch to preserve woman’s dignity. | Yes / No |
| IT access | Yes / No |
| Cervix brushes area available | Yes / No |
| Endocervical brushes are available | Yes / No but will be purchased |
| **Room 1 at base practice area**  **All** equipment for taking a sample safely is in place:  Adjustable Light, sterile equipment/ packs, couch roll, LBC kit, single sachets lubricating jelly.  Cervex Brush and Rover's Endo-Cervex Brush,  swabs, waste disposal, selection of gloves, speculums various sizes, access to information leaflets | Yes / No / in Part  If not, will it be at the time of nurse starting - *Comment:* |
| **Room 2 (optional) at *same practice or another Location***  **All** equipment for taking a sample safely is in place:  Adjustable Light, sterile equipment/ packs, couch roll, LBC kit, single sachets lubricating jelly.  Cervex Brush and Rover's Endo-Cervex Brush,  swabs, waste disposal, selection of gloves, speculums various sizes, access to information leaflets | ***Location***: 2- |
| Yes / No / in part  If not, will it be at the time of nurse starting - *Comment:* |
| Examination couch accessible for the nurse in question (right or left handed) | Yes / No |
| Access to a hydraulic couch in the practice | Yes / No |
| Insurance in place for the PG practice nurse trainee | Yes/No |
| Process for managing results | Yes / No |
| Process for managing non-attenders / problems | Yes / No |
| Time for trainee nurse to manage data and results | Yes /No |
| Open Exeter Set up | Yes / No / N/A or will be by start of programme |

***Thank You for your co-operation.***

A PDF version of this form should be submitted by the nurse along with the application form. (If more than one person is to be the in house supporter, a form is needed for each person).

For any questions about this form contact the Admissions team;

[admissionscpd@bradford.ac.uk](mailto:admissionscpd@bradford.ac.uk)

The programmes fill up quickly so places will be offered on a first come first served basis.

**PLEASE INFORM THE UNIVERSITY OF ANY CHANGES TO IN-HOUSE SUPPORT AND/OR PLACE OF WORK PRIOR TO COMMENCING THE COURSE AS YOU WILL NEED TO FILL IN THE CORRECT FORMS AND THIS COULD HAVE AN IMPACT ON WHO YOU ARE ALLOCATED FROM THE EXTERNAL MENTOR SERVICE**