Review of Cervical Screening unit standard

Feedback Form

NZQA, National Qualifications Services is interested in your feedback.

Please use the following table to comment on the proposed unit standard, and include your name and organisation at the end.
Title: Conduct cervical screening

Your feedback
### a) Purpose of the standard

The knowledge, skills, behaviours, attitudes and values the unit standard recognises.

The New Zealand Nurses Organisation (NZNO) welcomes the opportunity to comment on the draft NZQA review of Cervical Screening Unit Standard. We support the intent of the document which is related to the appropriate training and standards required for safe and competent cervical screening practice. We believe that the document should use a holistic approach to addressing basic health issues that would aid women having cervical screening by:

- addressing barriers to access for priority women;
- cultural competency training for cervical screening takers;
- credentialing for cervical smear takers; and
- further education required.

### Right to health

NZNO acknowledges that Māori have an equal right to the highest standards of health, and the State is responsible for ensuring this is achieved under article 24.2 of the United Nations Declaration on the Rights of Indigenous peoples. We also acknowledge the rights under te Tiriti o Waitangi of Māori to good health that encompasses wellness in its fullest sense and including the physical, spiritual and cultural wellbeing of Māori as individuals and collectively.

While it is widely acknowledged that there are long standing and significant disparities in health outcomes for Māori - shorter lives, less access to primary health care, less access to treatment, poorer treatment - we do not agree that such inequalities are acceptable, just, necessary or fair in a developed country like Aotearoa New Zealand in 2016.

### Addressing barriers to access for priority women

We are aware that the health system requires support and services to provide clear and relevant health messages that empower people to make informed choices. We are aware that
Māori women have higher rates of sickness and death from cervical cancer than non-Māori women.

We are disappointed that the standards does not address cultural issues with cervical screening services for the priority group of women, (Māori, Pasifika and Asian women aged 20-69 years, and other women aged between 30-69 years who are either unscreened or who have not had a cervical screening test in the previous five years).

NZNO recommends that the standard include a Te Ao Māori perspective on cervical screening that acknowledges Māori association with te whare tangata. A Te Ao Māori perspective can be reflected in the following whakatauaki;

*Ko te wahine te whare tangata o te ao Māori – ā he mea whakanui rātou i tōna mana whakawhānau oranga (Te Ara 2014).* Women are the house of humanity of the Māori world – and they are venerated for creating life’.

‘*Ka Ora te wahine Puapua Ka ora te Whānau – Pūāwai Ka ora te Hapū – Pūāwānanga Ka ora te Hapū – Pūāwānanga*’.

If the woman is cherished then the family will have wellness - In turn the communities will be strong thus the beauty of the tribe will be seen.

Both whakatauaki identify that Māori women are central to the health of children, their whānau, family, hapū, iwi and the community as a whole. By keeping women well and strong, this in turn strengthens the tribe. Women link past to present and future through pregnancy. Childbirth and nurturing their babies, ensuring the ongoing survival of the whānau, hapū and iwi.

NZNO acknowledges the cultural diversity of Aotearoa New Zealand women, and recommends including a section on culturally appropriate care for Aotearoa diverse population of women including Pasifika, Muslim, Refugee, Asian women.  

Cultural competency training
We agree that training in cultural safety should be mandatory for all smear takers as is clinical competency training for all frontline staff across all clinical settings.

Regulatory bodies such as the Nursing Council of New Zealand have included cultural safety into nursing scopes of practice which require the nurse to practise nursing in a manner that the health consumer determines as being culturally safe, and to demonstrate the ability to apply the principles of te Tiriti o Waitangi to nursing practice.

While most nursing students are educated on inclusive models of health and wellbeing like Mason Durie’s Te Whare Tapa Whā (Ministry of Health, 2009) it is essential that overseas registered health professionals are required to complete any bicultural training before working with Māori.

Credentialing
Our members have indicated that there are currently different standard requirements for different groups of health professionals, (ie: experience medical practitioners do not currently have to complete cervical screening/smear taking training in the same way that other practitioners are required to and as indicated in this document). We strongly agree that inconsistencies in training standards is not acceptable practice and we recommend consistent standards be required by all smear takers (regardless of experience) and to complete the credentialing process. Currently, other areas of clinical practice such as IV cannulation and CPR/resus, have consistent standards for all practitioners, and the same should be considered for cervical screening as there is a greater risk associated with poor practice.

Further education required
Our members have indicated that the standards needs to include the following:

- to provide further training for smear takers to understand the results of smears, demonstrating they have actually spoken to their patients about the results prior to referral,
## Title: Conduct cervical screening

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<td>they have given their patients some education on the cause of abnormal smears and explaining to them what their results mean in a way they that they don't come into the clinic feeling so anxious thinking they have the worst possible thing;</td>
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<td>• to provide further education and information for women prior to having a smear to help reduce anxiety and worry and inform them about the procedures and what the test involves, i.e. it is not indicative of cervical cancer the patient can be told that there is no suggestion of cervical cancer on this smear test;</td>
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<td>• To provide further information and education to women prior to receiving colposcopy treatment as this procedure can cause anxiety.</td>
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### b) Explanatory Notes

How well these assist in the interpretation of the unit standard and/or increase the likelihood of consistent assessment.

### c) Outcome statements

How well these describe what has to be achieved.

**Evidence requirements**

How well these specify the quality of the critical evidence required to meet the outcomes.

**Range statements**

How well these distinguish the items that need to be considered and whether a sufficient breadth of evidence is required.
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Name: Leanne Manson, Policy Analyst Māori

Organisation: New Zealand Nurses Organisation

Please return the feedback form by close of business **Wednesday 1 June 2016** to:

NZQA Qualifications Services
Email: ngs@nzqa.govt.nz