
From:
Sent: 29 June 2021 15:44
To:
Subject: FW: SCSP adverse incidents - comms plan needed
Attachments: Submission to Ministers - cervical screening incident.docx

Expires: 25 April 2021 00:00

Categories: SCSP adverse incidents - comms plan needed

From: [Redacted]
Sent: 11 March 2021 12:27
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Hi [Redacted]

Cab Sec was copied into a sub on Tuesday night [attached redacted], along with FM Briefing Unit and SpAds.

Cheers.
[Redacted]

From: [Redacted]
Sent: 11 March 2021 12:20
To: [Redacted]
Cc: [Redacted]
Subject: SCSP adverse incidents - comms plan needed

Hi [Redacted],

Thanks for this. Following further discussion with colleagues in SG News we feel the risk of this coming out prior to the completion of work with boards is substantial and we ought to be looking at how we announce it.

This is also bearing in mind that a report from the [Redacted], and so [Redacted] is likely to be subject to more than usual scrutiny in the coming weeks.

Can I check – as I don't think this has been clear in previous discussions, has Cab Sec been informed of this? If not, I think policy should ensure she is aware and I will approach PO and Spads with a recommendation that we need to decide on a handling plan and possible announcement asap.

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Sent: 11 March 2021 12:09
To: [Redacted]

Cc: [Redacted]
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Just to add that I have had a very helpful conversation with [Redacted] just now. We don't know the answer to your second question just yet, [Redacted], but [Redacted] is making enquiries.

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Sent: 11 March 2021 10:50
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Cc: [Redacted]
Subject: RE: SG comms/SCSP

Thank you [Redacted], I am hoping [Redacted] can help us with that question.

[Redacted]
Population Health Directorate, Scottish Government
☎ [Redacted]

From: [Redacted]
Sent: 11 March 2021 10:13
To: [Redacted]
Cc: [Redacted]
Subject: RE: SG comms/SCSP

Yes, thanks [Redacted] and [Redacted], I should have picked up on that. Changed, now, below.

It would also be useful to know what has been communicated to the [redacted] women involved, and when that was,

[Redacted]

From: [Redacted]
Sent: 11 March 2021 10:10
To: [Redacted]
Cc: [Redacted]
Subject: RE: SG comms/SCSP

Thanks [Redacted],

Better to say 'a small number' of cases? I am mindful of [Redacted]'s comment yesterday evening.

[Redacted]

[Redacted]
Population Health Directorate, Scottish Government
☎ [Redacted]

From: [Redacted]
Sent: 11 March 2021 09:56
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Cc: [Redacted]

Subject: RE: SG comms/SCSP

Hello,

Yes, could very well be the case, so we would need some reactive lines sooner rather than later, even if they are holding ones.

Could I suggest something along these lines, based on [redacted]'s quotes from yesterday?:

The Scottish Cervical Screening Programme has been made aware of a small number of cases of cervical cancer in a single NHS Board involving individuals who had been mistakenly excluded from the programme many years ago.

Additional control measures have been put in place to prevent any new patients from being incorrectly excluded from the Screening Programme.

The Screening Programme is in the process of coordinating an urgent review across all NHS Boards to assess whether there is a risk of any further individuals being affected.

We could add further detail to the quotes or to the background note. I do think that if our lines are very tightly worded, as above, they are unlikely to satisfy any media interest if [redacted] women/families do come forward, so I'd be happy if colleagues feel we can add to this at all.

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Sent: 11 March 2021 09:46
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Cc: [Redacted]
Subject: RE: SG comms/SCSP

Thanks [Redacted]. The original lines I drafted were for that purpose – another reason they were so high level/tightly worded. I'm not sure how much communication with the [reacted] women has taken place – [redacted] will be able to advise. I'm mindful that both will be Duty of Candour events so there is a formal process that needs to be followed (with time limits etc).

From: [Redacted]
Sent: 11 March 2021 09:33
To: [redacted]
Cc: [Redacted]
Subject: RE: SG comms/SCSP

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I am wondering if it is possible that the [redacted] of the [redacted] adverse events in [Redacted] might become public knowledge (if one of the families chose to make it so) before the review of the Boards' records is ready to go ahead? Might we need a separate set of reactive lines ready to deal with that?

[Redacted]

[Redacted]
Population Health Directorate, Scottish Government
☎ [Redacted]

From: [Redacted]
Sent: 11 March 2021 09:06
To: [Redacted]
Cc: [Redacted]
Subject: Re: SG comms/SCSP

[Redacted]

From: [Redacted]
Sent: Thursday, March 11, 2021 9:04:18 AM
To: [Redacted]
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Subject: RE: SG comms/SCSP

Hi [Redacted]

Just for clarity, we're talking about a few weeks to extract the data for the Boards, and then around a fortnight (at best) for the boards to complete the audit. So around 5 weeks in total before we would have results?

Cheers.

Redacted
Ext: [Redacted]
Mob: [Redacted]

From: [Redacted]
Sent: 10 March 2021 18:23
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Cc: [Redacted]
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Unfortunately we are not yet in a position to be able to say how we will manage the wider screening population. We are planning an initial audit in Boards to look at just the sub-total hysterectomies to start with, to indicate whether similar issues have occurred elsewhere. However, the task of reviewing the records of all women excluded from the programme due to all types of hysterectomy is enormous and we need to do a detailed options appraisal to find the best approach to manage the situation safely, whilst not compromising the care of women who currently require cervical screening and colposcopy.

We will go back to clinical colleagues to look for an alternative form of wording if the lines below are insufficient.

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I don't think it would be clear to the average reader of a newspaper what the problem was here and that risks giving the impression of a lack of openness. I'd propose some changes, as below.

I've used the term 'partial hysterectomy' as opposed to 'incomplete' as I think the latter suggests the procedure was unfinished or incomplete by accident. If we need to use the term 'incomplete' I think it needs a background note explaining that this is normal, and when/why it would be used or explaining the significance of trans-abdominal surgery.

In addition to the text below I think we need to say what will be done if the Health Board reviews throw up additional cases and what people should do if they are worried, particularly those who have had partial hysterectomies, or think they may have done.

In terms of having lines ready to go out, my view is that we need at least to have reactive lines ready in case the media get wind of this when the request is made of boards for an audit of women in their area.

Hope this is helpful,

regards

[Redacted]

The Scottish Cervical Screening Programme has been made aware of [redacted] cases of cervical cancer in a single NHS Board involving individuals who had been excluded from the programme many years ago. It has now been established that these exclusions should not have been applied.

The patients affected had had hysterectomies and had been excluded on the basis that they no longer had cervixes. However in a small proportion of cases where partial hysterectomies are carried out the cervix, or part of it, may remain.

Additional control measures have been put in place to prevent any new further patients who have had partial hysterectomies from being incorrectly excluded from the Screening Programme.

The Screening Programme is in the process of coordinating an urgent review across all NHS Boards to assess the potential risk of any further individuals being affected.

From: [redacted]
Sent: 10 March 2021 14:46
To: [Redacted]
Cc: [Redacted]
Subject: RE: SG comms

Hi [Redacted]

[Redacted] met with ATOS and PHS today so will be able to advise how long it will take them to be able to pull out all the records on women with an exclusion status on SCCRS who have a record of sub-total hysterectomy on SMR01 or SMR02. I imagine this will be at the very least a week (if not more), so probably 3 weeks minimum before we can ask boards to audit the women.

I've drafted some media lines which I'm just about to share with the AEMT group for comments. Here they are:

The Scottish Cervical Screening Programme has been made aware of [redacted] cases of cervical cancer in a single NHS Board involving individuals who had been excluded from the programme many years ago. It has now been established that the exclusion should not have been applied. Additional control measures have been put in place to prevent any new exclusions from being applied incorrectly. The Screening Programme is in the process of coordinating an urgent review across all NHS Boards to assess the potential risk of any further individuals being affected.

Thanks
[Redacted]

[Redacted]

NHS National Services Scotland

Tel [Redacted]

PLEASE NOTE MY NHS.NET EMAIL ADDRESS NO LONGER EXISTS – PLEASE UPDATE YOUR DISTRIBUTION LISTS WITH: [Redacted]

From: [Redacted]
Sent: 10 March 2021 14:32
To: [Redacted]
Cc: [Redacted]
Subject: SG comms

Hi all

Just to confirm that [Redacted] from SG (copied in) will lead on comms from our end, so it would be useful if he could be kept involved with any comms discussions.

Can I also check when the boards will be asked to begin their initial audits? I know potentially a fortnight to complete them was agreed, but I'm not sure if a date for the request was decided on, given that PHS were going to do some work first. Having lines ready to go for when the ask goes out is our current thinking.

Cheers.

[Redacted]

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From:
Sent: 29 June 2021 15:50
To:
Subject: FW: SCSP adverse incidents - comms plan needed
Categories: SCSP adverse incidents - comms plan needed

From: [Redacted]
Sent: 11 March 2021 15:36
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

That's fine for me too, thanks,

[Redacted]

From: [Redacted]
Sent: 11 March 2021 15:35
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

I can make that time, thanks [Redacted]

[Redacted]
Population Health Directorate, Scottish Government
☎ [Redacted]

From: [Redacted]
Sent: 11 March 2021 14:53
To: [Redacted]
Cc: [Redacted]
Subject: Re: SCSP adverse incidents - comms plan needed

Yes I can do this.

Regards

[Redacted]

From: [Redacted]
Sent: 11 March 2021 14:29
To: [Redacted]
Cc: [Redacted]
Subject: Re: SCSP adverse incidents - comms plan needed

Works for me.

[Redacted]
NHS National Services Scotland

E: [Redacted]
Media and communications enquiries: [Redacted]

Web: www.nhsnss.org
twitter: @nhsnss

Media enquiries by phone: Contact our communications team on [Redacted] – available Monday to Friday, 9am to 6pm.

Please consider the environment before printing this email.

From: [Redacted]
Sent: 11 March 2021 14:00
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Yes

[Redacted]

National Specialist and Screening Directorate (NSD) | Procurement, Commissioning and Facilities (PCF)
NHS National Services Scotland | Gyle Square | Area 062 | 1 South Gyle Crescent | Edinburgh EH12 9EB
tel: [Redacted] | mob: [Redacted]

Please consider the environment before printing this email.

From: [Redacted]
Sent: 11 March 2021 14:00
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

2.30pm tomorrow any good for people?

From: [Redacted]
Sent: 11 March 2021 13:30
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Tomorrow morning is fine for me - ideally not before 10.30, but I can manage earlier if that suits others better,

[Redacted]

From: [Redacted]
Sent: 11 March 2021 13:17
To: [Redacted]

Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Happy to attend a meeting after 3:30 if others are, but conscious there is another screening programme board meeting from 3:30 until 5pm that some of us may be at. Is tomorrow morning possible?

[Redacted]
[Redacted]
Clinical Directorate, NHS National Services Scotland
Gyle Square | 1 South Gyle Crescent | Edinburgh | EH12 9EB
Email: [Redacted]
Tel: [Redacted]

From: [Redacted]
Sent: 11 March 2021 13:03
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Thanks all, I could join a meeting after 3.30pm if that works for others?

From: [Redacted]
Sent: 11 March 2021 12:58
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Hi [Redacted]

I think our concern is less about the actual prominence of the incidents than how it might be made to look in a pretty sensitive period.

But it would be good to set up a teams meeting to discuss, yes. I'm tied up until about 1.30pm but could manage something after that and for the rest of the afternoon if a time can be arranged that works for you?

Thanks

[Redacted]

From: [Redacted]
Sent: 11 March 2021 12:45
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Hi

I agree. At the moment we have [redacted] women in one part of the country who have been affected. NHS [redacted] has responsibility for dealing with the issues around this, which are complex, and we have to avoid causing undue alarm to many thousands of other women. Certainly we shouldn't be making any announcement with discussions with [redacted].

Happy to be involved in any discussion.

[Redacted]

Clinical Directorate, NHS National Services Scotland
Gyle Square | 1 South Gyle Crescent | Edinburgh | EH12 9EB
Email: [Redacted]
Tel: [Redacted]

From: [Redacted]
Sent: 11 March 2021 12:29
To: [Redacted]
Cc: [Redacted]
Subject: RE: SCSP adverse incidents - comms plan needed

Hi [Redacted]

I'm really concerned that things are spiralling out of control here. Can I clarify that so far, this is an adverse event in a single NHS Board. We have no evidence so far to say that it is a national screening incident. We need to do an initial small audit across all Boards, consider the findings and do a detailed options appraisal to determine what further actions are required. We should not be announcing this at the moment. Happy to arrange a Teams Meeting to discuss further.

Thanks

[Redacted]

NHS National Services Scotland

Tel [Redacted]

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From: [Redacted]
Sent: 11 March 2021 12:20
To: [Redacted]
Cc: [Redacted]
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Hi [redacted]

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This is also bearing in mind that a report from [redacted], and so [redacted] is likely to be subject to more than usual scrutiny in the coming weeks.

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regards

[Redacted]

The Scottish Cervical Screening Programme has been made aware of [redacted] cases of cervical cancer in a single NHS Board involving individuals who had been excluded from the programme many years ago. It has now been established that these exclusions should not have been applied.

The patients affected had had hysterectomies and had been excluded on the basis that they no longer had cervixes. However in a small proportion of cases where partial hysterectomies are carried out the cervix, or part of it, may remain.

Additional control measures have been put in place to prevent any new further patients who have had partial hysterectomies from being incorrectly excluded from the Screening Programme.

The Screening Programme is in the process of coordinating an urgent review across all NHS Boards to assess the potential risk of any further individuals being affected.

From: [Redacted]

Sent: 10 March 2021 14:46

To: [Redacted]

Cc: [Redacted]

Subject: RE: SG comms

Hi [Redacted]

[Redacted] met with ATOS and PHS today so will be able to advise how long it will take them to be able to pull out all the records on women with an exclusion status on SCCRS who have a record of sub-total hysterectomy on SMR01 or SMR02. I imagine this will be at the very least a week (if not more), so probably 3 weeks minimum before we can ask boards to audit the women.

I've drafted some media lines which I'm just about to share with the AEMT group for comments. Here they are:

The Scottish Cervical Screening Programme has been made aware of [redacted] cases of cervical cancer in a single NHS Board involving individuals who had been excluded from the programme many years ago. It has now been established that the exclusion should not have been applied. Additional control measures have been put in place to prevent any new exclusions from being applied incorrectly. The Screening Programme is in the process of coordinating an urgent review across all NHS Boards to assess the potential risk of any further individuals being affected.

Thanks

[Redacted]

[Redacted]

NHS National Services Scotland

Tel [Redacted]

PLEASE NOTE MY NHS.NET EMAIL ADDRESS NO LONGER EXISTS – PLEASE UPDATE YOUR DISTRIBUTION LISTS WITH: [Redacted]

From: [Redacted]
Sent: 10 March 2021 14:32
To: [Redacted]
Cc: [Redacted]
Subject: SG comms

Hi all

Just to confirm that [Redacted] from SG (copied in) will lead on comms from our end, so it would be useful if he could be kept involved with any comms discussions.

Can I also check when the boards will be asked to begin their initial audits? I know potentially a fortnight to complete them was agreed, but I'm not sure if a date for the request was decided on, given that PHS were going to do some work first. Having lines ready to go for when the ask goes out is our current thinking.

Cheers.

[Redacted]

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