



Screening: cervical screening (50 to 64 years)

NICE indicator

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www.nice.org.uk/indicators/ind177

Indicator

The proportion of patients eligible for cervical screening and aged 50 to 64 years at end of period reported whose notes record that an adequate cervical screening test has been performed in the previous 5.5 years.

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

Rationale

A cervical screening test is a way of detecting abnormal cells on the cervix. Detecting and removing abnormal cervical cells can prevent cervical cancer. Cervical screening aims to reduce the number of people who develop cervical cancer and the number who die from it. Cervical cancer often has no symptoms in its early stages. In 2016 to 2018 there were approximately 3,200 new cases in the UK every year (see [Cancer Research, 2021](#)), and around 32% of cervical cancer cases are detected by screening (see [NHS England's data on routes to diagnosis for 2020](#)). The first invitation for cervical screening is sent when an individual reaches 24.5 years of age. People are recalled every 3 years until they turn 50 when the recall interval changes to every 5 years. This indicator aims to improve uptake of cervical screening and ensure it is performed at the appropriate intervals according to the person's age.

Source guidance

- [NHS population screening: reporting data definitions. Public Health England \(2024\)](#)
- [Cervical screening standards valid for data collected from 1 April 2020. Public Health England \(2021\)](#)

Specification

Numerator: The number of patients in the denominator whose notes record that an adequate cervical screening test has been performed in the preceding 5.5 years.

Denominator: The number of patients eligible for cervical screening aged 50 to 64 years

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions:

- Patients without a cervix.
- Patients who have not responded to 3 invitations to screening.
- Patients who are pregnant.

Personalised care adjustments or exception reporting should be considered to account for situations where the patient declines, does not attend or if cervical screening is not appropriate.

Expected population size: [Quality and Outcomes Framework data for 2022 to 2023 \(indicator CS006\)](#) shows that 8.5% of people in England are eligible for cervical screening aged 50 to 64 years: 848 patients for an average practice with 10,000 patients. To be suitable for use in QOF, there should be more than 20 patients eligible for inclusion in the denominator, per average practice with 10,000 patients, prior to application of personalised care adjustments.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

Update information

Minor changes since publication

September 2024: We replaced information about the minimum population with that of the expected population size. We added information about personalised care adjustments and exception reporting. We also updated references in the rationale and source guidance sections.

November 2020: We added a specification and information about the minimum population. We removed the introduction section and recommendation wording. We updated the source guidance section to align with current evidence sources.

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