## How Can the European Federation for Colposcopy Promote High Quality Colposcopy Throughout Europe?

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#### ABSTRACT

Since its inception in 1998, the European Federation for Colposcopy (EFC) now comprises 26 member societies. Its principle aim is to promote high quality colposcopy throughout Europe with special emphasis on training, education and treatment. This review summarises EFC's activities and achievements to date.

**Key words:** colposcopy, training, education

#### Introduction

Colposcopic diagnostic performance depends upon a practitioner's proficiency as well as the clinical context in which it is used. It is subjective and the related management decisions require problem solving skills and experience. Both diagnosis and subsequent management require not only adequate training but also a sufficient workload to maintain those skills.

There is increasing concern that patients should receive high quality and cost-effective care throughout Europe. The need to protect against inadequate practise is particularly relevant to colposcopy because it is subjective and because most women who are examined are well. Performed correctly colposcopy minimises damage but if performed badly the scope for needless damage is great. Whereas the indications for colposcopy may vary throughout Europe, its objective is the same, namely to detect cervical disease, particularly pre-invasive changes.

It is against this background that the need for shared standards throughout Europe has become increasingly recognised. These standards are needed in two key areas, namely training and treatment.

### The European Federation for Colposcopy

From its inception in Dublin in 1998, it was agreed that a priority for the European Federation for Colposcopy (EFC)<sup>1</sup> should be to work towards standardisation of training for colposcopy and agreement on audit methods and outcomes of treatment.

The EFC is a federation of colposcopic societies which now comprises 26 member societies throughout Europe. During its short history two large and successful triennial conferences have taken place in Greece (Rhodes, 2001) and France (Paris, 2004) as well as a third meeting to be held in Serbia (Belgrade) this year. The Federation's main educational aim has been to create a framework that should promote high quality and uniform training throughout Europe and a principle goal has been for all member societies to be able to offer a training programme that shares common aims and objectives.

#### **Core Curriculum**

The primary aim of the training programme was to produce competent diagnostic colposcopists because diagnosis is the foundation for clinical management. Despite the fact the colposcopy can be performed in different settings and for different indications throughout Europe, nonetheless, a common set of competences is required. It was decided to identify and use these necessary core competences as the basis for curriculum design. Each identified competence would then act as a learning

objective for the programme. In other words the training programme was more concerned with what a competent trained colposcopist should be able to do rather than producing a list of things they need to know<sup>2</sup>.

In 2001 a consensus exercise was done to identify what these essential core competencies were, using a consultative technique called the Delphi technique, which sought the views of a number of expert colposcopists throughout Europe<sup>3</sup>. In all, 28 participants from 21 countries took part. The list of identified core competencies was presented to the EFC at its scientific meeting in Rhodes in 2001 and they were accepted as the basis for designing colposcopy-training programmes in each of the member societies. Already a number of societies (UK, Germany and Spain) have now incorporated this core curriculum into their training programmes.

#### **Programme Structure**

In addition to deciding what needs to be taught, some agreement is necessary on how the training should occur. In part, this concerns the structure of European colposcopy training programmes and in 2004 a consensus agreement was been reached on what the recommendations should be. It is recognised that training must involve actual colposcopic experience that is supervised by a trainer in a recognised centre. The trainer and the experience received must meet certain standards in terms of workload and case-mix. It has been agreed that in EFC-recognised training programmes trainees would see a minimum of 100 patients, half of which should be new presentations and at least a third should have confirmed histological abnormality.

#### **Treatment Standards**

In conjunction with the work on training, in 2004 EFC initiated a modified Delphi survey concerning treat-

ment<sup>3</sup>. The term 'treatment' encompasses a wide range of considerations but we initially focused solely on treatment itself. Identifying standards is an important initial step in quality assurance which has again involved using a modified Delphi survey. The agreed standards can then be used as the basis for audit of treatment throughout Europe. It is possible that successful participation in this audit will be one of the criteria required for recognition as a training centre.

#### **Education**

Since 2006 the EFC has convened a number of educational meetings and courses on colposcopy in order to promote the principles embedded in the training and treatment initiatives. Courses were held in Italy (April 2006 in Turin as part of the EBCOG conference) and Greece (June 2006 in Athens). This year, further courses are planned in Croatia (April 2007 as part of the International Workshop on Human Papillomavirus and Consensus Recommendations for Cervical Cancer Prevention & Colposcopy Training), Romania and Serbia. The educational emphasis is on interactive teaching, focusing on image recognition and case discussion.

#### Where do We Go From Here?

The work to date has started to lay down a foundation on which to build a quality assurance structure. There is now an agreed core curriculum and training structure and quality standards for practise are now being developed. These are early but important steps. So far this partnership has been fruitful but continued success largely depends on how far each member state is prepared to realise the shared objectives of the EFC. It is clear that the role of the EFC is to co-ordinate the activities of its member societies and its goals will only be realised by the achievements of those societies.

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# KAKO DA EUROPSKA UDRUGA ZA KOLPOSKOPIJU PROMOVIRA VISOKO-KVALITETNU KOLPOSKOPIJU DILJEM EUROPE?

## SAŽETAK

Od samih početaka, u 1998. g., Europska udruga za kolposkopiju (EFC) obuhvaća 26 društava članova. Njezin ključni cilj je promovirati visoko-kvalitetnu kolposkopiju diljem Europe s posebnim naglaskom na usavršavanje, obrazovanju i liječenja. Ovaj članak sažima aktivnosti i postignute uspjehe EFC-e.