

Qualified Circumcision Clinic

Inspection report

3 Skye Edge Avenue
Sheffield
S2 5FX
Tel:

Date of inspection visit: 23 January 2022
Date of publication: 25/02/2022

This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location

Good



Are services safe?

Good



Overall summary

This service is rated as Good overall. The service was last inspected on 8 February 2020 when it was rated Good overall, with a rating of Requires Improvement for the key question of Safe, and Good for all other key questions.

The key question inspected was rated as:

Are services safe? – Good

We carried out an focused desktop inspection at Qualified Circumcision Clinic to follow up on breaches of the Health and Social Care Act 2008 Regulated Activities Regulations 2014. As a result of our inspection undertaken in February 2020, we issued the provider with a requirement notice under Regulation 17: Good governance due to areas of non-compliance we found. At this inspection, we looked across the key question of Safe in order to assess the improvement, and to review compliance with the requirement notice.

The service provided a circumcision service for children and adults for therapeutic and non-therapeutic reasons. The service is offered on a private, fee paying basis only, and is accessible to people who choose to use it.

The provider is the sole clinician for this service and carries out all of the circumcision procedures at the clinic.

At the previous inspection in February 2020 we found that in relation to the breach of Regulation 17: Good governance:

- On the day of procedure, no checks were undertaken to formally verify and record the identity of parents, or those with legal parental authority, who had brought in a child to receive a circumcision.
- Quality improvement and clinical audit activity was limited and lacked depth.
- Information held in personnel and staff recruitment files was not sufficient to fully evidence staff suitability for their roles, and to identify any possible issues or concerns. Issues identified included a lack of references, and limited evidence of training attainment.

In addition, as part of this inspection we told the provider that they should make improvement to:

- Undertake to update the consent policy to include references to mental capacity.

We checked all of these areas as part of this focused desktop inspection and found that the majority of these issues had been resolved. The only area which still required further improvement related to clinical audits, which although improved since the last inspection still lacked depth, scope and detail.

How we inspected this service

Throughout the pandemic CQC has continued to regulate and respond to risk. However, considering the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This was a focused desktop inspection which looked at the key question;

- Is it safe?
- Clinicians and non-clinical staff were up to date with necessary training. This included basic life support.
- The level of information held in staff personnel and recruitment files had increased and clearly showed information such as staff training attainment.

Overall summary

The inspection was undertaken via telephone interviews with the provider and physical review of documents on 23 January 2022.

Note: Within the report where there is reference to a parent or parents this also includes those who act as a legal guardian or legal guardians of an infant or child.

Our key findings were:

- Circumcision procedures were safely managed and there were effective levels of patient support and aftercare.
- The service had procedures in place regarding consent, and when required the formal identification of those with parental responsibility.
- The service had systems in place to identify, investigate and learn from incidents relating to the safety of patients and staff members.
- There were systems, processes and practices in place to safeguard patients from abuse. We saw staff had received safeguarding training appropriate to their roles. In addition, consent procedures had been updated and included reference to individual mental capacity.
- The service had increased the quality improvement work that had been undertaken by the service. However, it was noted that this activity was limited in scope, depth and detail in respects of methodology and improvements identified and made.

The area which the provider **should** make improvement is:

- Improve the depth, scope and detail within clinical audits used to assess outcomes for patients and compliance with service standards.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

Our inspection team was led by a CQC lead inspector and included a CQC national clinical advisor.

Background to Qualified Circumcision Clinic

Mr Altaf Mangera operates as an independent circumcision provider. The provider operates as the Qualified Circumcision Clinic and delivers services from two locations in Sheffield and one in Coventry. One of the Sheffield based services operates from accommodation within Dovercourt Surgery, 3 Skye Edge Avenue, Sheffield, South Yorkshire, S2 5FX. The service provides circumcision to children and adults for therapeutic and non-therapeutic reasons under local anaesthetic and carries out post procedural reviews and revisions of patients who have undergone circumcision at the clinic. The majority of circumcisions carried out by the clinic were on children under one year of age. The service is registered with the Care Quality Commission for the provision of Surgical procedures and the Treatment of disease, disorder or injury.

Dovercourt Surgery where this service is hosted is a modern GP practice which is easily accessible for those bringing children or young people to the clinic, or for those with mobility issues. For example, it has level floor surfaces, automatic doors and parking is available. The Qualified Circumcision Clinic utilises the minor surgery room within the practice for the delivery of services, as well as ancillary areas such as two recovery rooms, a waiting area and toilets.

The service is operated by a single named provider, and procedures are undertaken by the provider (male) who is a qualified and registered urologist. Other staff working at the clinic includes a clinical support worker (male) and a receptionist (female).

The Sheffield based service operates clinics depending on demand and the availability of accommodation within the host GP practice.

The service has a web site www.qcclinic.co.uk

Are services safe?

We rated safe as Good:

At the last rated inspection in February 2020 we rated the service Requires Improvement because:

- On the day of the surgical procedure the service had no processes in place to formally check and establish the identity of those who purported to have parental responsibility for a child brought in for a circumcision.
- We could not verify that all receptionists had received training in basic life support.
- Staff personnel and recruitment files lacked detail.

At this inspection we saw that:

- The service had put in place processes to formally identify and establish the identity and parental authority of those who brought children to the service for circumcision.
- All members of reception staff had now undertaken training in basic life support.
- Staff personnel and recruitment files carried more detail and gave assurance that necessary training and development had been undertaken.
- In addition, we asked following the previous inspection that the service make reference to the mental capacity of patients in relation to their consent, and wider safeguarding. We saw at this inspection that this had been actioned and the consent policy had been updated to reflect this.

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse.

- The service had systems in place to safeguard children and vulnerable persons from abuse. Policies were regularly reviewed and were up to date. Whilst the service had not had occasion to raise any safeguarding concerns at this location, both the provider and staff were fully aware how they would do so if required. Staff took steps to protect service users from abuse, neglect, harassment, discrimination and breaches of their dignity and respect. All staff had received up-to-date safeguarding and safety training appropriate to their role.
- The service sought to confirm with parents prior to the procedure if a child was subject to a child protection plan, as well as confirming their parental authority to consent to the circumcision or any aftercare treatment. The patient record was detailed and recorded the assessment of parental authority, and the identification of all parties concerned with the consent process. As an example of consent processes undertaken, this included specific details and evidence of identification documentation which had been checked such as parental passport numbers.
- The provider carried out staff checks at the time of recruitment and on an ongoing basis where appropriate, which included taking up references from third parties. Disclosure and Barring Service (DBS) checks were undertaken where required. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). Should it be decided that a DBS check was not required, a formal process was undertaken to risk assess and support this decision.
- Staff personnel and recruitment files were detailed and gave assurance that staff had received the necessary training and development to undertake their roles and responsibilities.

Risks to patients

There were systems to assess, monitor and manage risks to patient safety.

- Records completed by the provider showed that clinicians and non-clinical staff were up to date with necessary training. This included basic life support.

Are services safe?

Lessons learned and improvements made

The service learned and made improvements when things went wrong.

- There were adequate systems for reviewing and investigating when things went wrong. We saw evidence that the service learned and shared lessons identified themes and took action to improve safety in the service. The service had recorded one significant event over the previous 12 months. We saw that this had been investigated and learning outcomes considered.
- As part of their learning and quality improvement work. We saw that the level of clinical audit had increased and included audits into:
 - Post procedural bleeding
 - Post procedural infection
 - Circumcision device retention
 - Consent.

However, it was noted that the monitoring of compliance and resultant audit activity lacked depth and detail as to the methodology used, patient numbers assessed, and subsequent actions taken.