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Newcastle Circumcision Services

Inspection report

Fenham Community Clinic
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Website: N/A

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Overall summary

We previously carried out an announced comprehensive inspection at Newcastle Circumcision Services on 17 November 2017, during which we found the provider was not providing safe or well led services.

We identified two breaches of regulations relating to safe care and treatment and good governance, and issued requirement notices. We also told the provider there were areas where they should make improvements. However, we found they were providing effective, caring and responsive services, in accordance with the relevant regulations.

The full comprehensive report relating to the November 2017 inspection can be found by selecting the 'all reports' link for Newcastle Circumcision Services, on our website www.cqc.org.uk.

We carried out this announced focused inspection at Newcastle Circumcision Services on 25 September 2018. We inspected the following key questions: Safe; Effective; Well led. This was to check the service met the requirements of Regulations 12 (Safe care and treatment) and 17 (Good governance), of the Health and Social Care Act (Regulated Activities) Regulations 2014, and had made the necessary improvements.

Our findings were:

Are services safe?

We found the service was providing safe care in accordance with the relevant regulations. Specifically, the provider had addressed the requirement notice we set and had made improvements to how they provided safe care and treatment.

Are services well-led?

We found that this service was providing well-led care in accordance with the relevant regulations. Specifically, the provider had:

- Established effective systems and processes to ensure good governance, in accordance with the Fundamental Standards of Care.
- Improved their arrangements for assessing, monitoring and improving the quality and safety of the services they provided.

Following our inspection in November 2017, we also asked the provider to review their:

- Arrangements for, and the risks associated with, carrying out circumcision procedures on children aged over 12 months, in a community setting. At this inspection, we found the provider had reviewed their arrangements for providing circumcisions for children

Summary of findings

aged over 12 months, within a community setting. The provider told us they had revised and strengthened their case selection process, to make sure that only children who could safely undergo a circumcision procedure were circumcised.

- Complaints procedure to make sure it provides people who use the service with clear and accurate advice, about what to do if they are dissatisfied with how their complaint has been handled by the provider. At this inspection, we found the provider had reviewed and updated their complaints procedure. The procedure now states that the complainant should contact the Care Quality Commission (CQC), if they are dissatisfied with the action taken by the provider to address their complaint. We told the provider CQC does not investigate complaints and that they should review their policy further, and that they should consider signposting patients who may be dissatisfied with the response to a complaint for further adjudication. Within 48 hours of our visit, the provider had made arrangements with a GP located in the Newcastle area, to act as an independent complaints adjudicator, should this be required. The provider's complaints procedure had been updated to reflect this.
- Approach to seeking feedback from people who use the service, so they have access to feedback about all aspects of the care and treatment they provide, to help improve the quality of the service. At this inspection, we found the provider had devised a new text feedback form, which they now send to the parents or, where appropriate, legal guardians of children following completion of a circumcision procedure. The provider told us they had received some feedback, but not as much as they would have liked.

The areas where the provider **should** make improvements are:

- Strengthen their arrangements for ensuring they maintain patient identifiable information in line with data security standards and retain medical records for the required period of time.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Newcastle Circumcision Services

Detailed findings

Background to this inspection

Newcastle Circumcision Services is an independent healthcare provider located in Newcastle-upon-Tyne. The service operates from accommodation (a podiatry clinic room and a waiting room) based at the Fenham Community Clinic, 17 Nuns Moore Road, Newcastle-upon-Tyne, NE4 9AU.

The service is registered to provide circumcision to male children within the following age bands: 0 to 3 years; 4 to 12 years; 13 to 18 years and younger adults. Circumcisions were only carried out for cultural and religious reasons, under local anaesthetic, at the request of parents.

Fenham Community Clinic, which hosts the service, provides a satisfactory environment for carrying out circumcision procedures. The two rooms used by the provider are located on the ground floor. However, there is a step that leads directly from the pavement into the waiting room and, because of this, the premises were not accessible to people who require the use of a wheelchair. Disabled parking is not provided. The provider utilises the podiatry clinic room for the delivery of clinical services, and people who use the service have access to a waiting room. Toilet facilities were not provided. Appointments are usually provided on alternate Sundays, in accordance with demand for the service.

Newcastle Circumcision Services is delivered by one doctor who is also the provider. (There is no registered manager as the provider is in day-to-day control of the service, when the regulated activity is delivered.) The provider has state registered qualifications, is registered with the General Medical Council and is on the National Performers List of recognised General Practitioners or Specialists.

How we inspected this service

We carried out an announced focused inspection of this location on 25 September 2018. The inspection was carried out to check that improvements had been made at the service, following our comprehensive inspection on 17 November 2017.

Our inspection team was led by a CQC Lead Inspector. The team included a professional GP adviser. During our visit we:

- Spoke with the provider.
- Looked at the records, policies and other documentation the provider maintained in relation to the provision of services.
- Checked the premises used to carry out circumcision procedures.

The five key questions we ask and what we found

Are services safe?

We found that this service was providing safe care in accordance with the relevant regulations.

Are services well led?

We found that this service was providing well led care in accordance with the relevant regulations.

Are services safe?

Our findings

We previously carried out an announced comprehensive inspection at Newcastle Circumcision Services on 17 November 2017, during which we found the service was not providing safe services. A requirement notice was issued. Examples of the concerns covered by the requirement notice we issued included:

- The provider had not ensured appropriate identity checks had been completed in relation to the child undergoing the circumcision procedure and those giving consent to it being carried out. Also, they had not always obtained the written consent of those consenting to the procedure.
- The provider had not kept appropriate records of the administration of local anaesthetic medicines.
- The provider had not established a system to assure themselves that there were no contraindications, or health or safeguarding issues in relation to children who were to undergo a circumcision procedure, that would prevent it from being carried out safely.

During this inspection, we found the provider had complied with the breaches of legal requirement we identified during our previous inspection and was now providing safe care in accordance with the relevant regulations. In particular, the provider had:

- Set up a system that demonstrated how they responded to the safety alerts they had received for the service.
- Devised a policy to support the safe use of a circumstraint during a circumcision procedure. The provider had assessed the potential risks associated with the use of this item of equipment.
- Introduced a system which strengthened the arrangements for ensuring that appropriate identity checks were completed in relation to a child undergoing a circumcision procedure and those giving consent to it being carried out.
- Put arrangements in place to ensure they obtained the written consent of both parents or, where appropriate, their legal guardians, prior to a child undergoing a circumcision procedure.
- Improved the quality of the records they kept in relation to the administration of local anaesthetic medicines. We looked at five medical records and found they now included details of the batch numbers of the local anaesthetic medicines that had been administered.
- Improved the arrangements for making sure they are aware of any reasons why a child should not be circumcised. The provider now ensures they always check a child's Red Book before they carry out a circumcision procedure.
- Improved their arrangements for managing emergencies. The provider now has access to a supply of medical-grade oxygen during their clinics.

At this inspection we also found the provider had made other improvements, since our last visit in November 2017. The provider had devised an infection control audit tool and carried out an audit, which had recently been updated. They had also revised their overall health and safety risk assessment to cover infection control risks.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

Our findings

We previously carried out an announced comprehensive inspection at Newcastle Circumcision Services on 17 November 2017, during which we found the service was not providing well led services. A requirement notice was issued. In particular, we found the provider had not:

- Taken effective action to assess, monitor and improve the quality and safety of the services provided.
- Carried out appropriate assessments of some of the risks relating to the health, safety and welfare of people using the service.
- Taken appropriate action to mitigate risks relating to the health, safety and welfare of people using the service.

During this inspection, we found the provider had complied with the breaches of legal requirement we identified during our previous inspection, and was now providing well led care in accordance with the relevant regulations. In particular, the provider had:

- Introduced a new system which supported them to demonstrate they action they had taken, in response to the safety alerts they received for this service.
- Reviewed their policies and procedures to ensure they were specific to the services they provided. We reviewed a sample of policies and procedures and they were all specific to the service.
- The provider had introduced a system, to assure themselves that the premises were maintained to a sufficiently high standard of cleanliness. During this inspection we looked at the two rooms used during the clinic and found them to be clean and dust-free. At our previous inspection we found that the small adjoining toilet to the treatment room had not been maintained in a suitable state of decoration. At this inspection, the provider told us they no longer offered access to a toilet facility. They also said they informed people using the service that a toilet facility was not provided.
- Updated their health and safety risk assessment to address the areas of risk we identified during our previous inspection. For example, their overall health and safety risk assessment had been updated, to cover the risks associated with not having access to a defibrillator during their clinics. In addition, the risks associated with the use of a circumstraint had also been assessed and added to the overall health and safety risk assessment.
- Introduced a new system to help them establish the identities of a child, and their parents or, where appropriate, their legal guardians, before a circumcision procedure was carried out.
- Introduced a new system to ensure they obtained the written consent of both parents, or their legal guardian, before carrying out a circumcision procedure.

During this inspection, we asked the provider to tell us about their arrangements for:

- Ensuring that the personal identifiable data they kept relating to the patient care they delivered, was handled in line with data security standards. Whilst we found that, overall, the provider had satisfactory arrangements in place to protect patient identifiable data, they had not registered with the Information Commissioner's Office (ICO). (Every organisation that processes personal information is required to register with the ICO and pay a fee, unless they are exempt.) The provider told us they would immediately take steps to register with the ICO and would send us evidence confirming this.
- Retaining medical records, should they no longer continue to provide the service for which they are presently registered. The provider told us they were in the process of reviewing how their clinical records could be archived and would take this into account.