

Commissioning of Non-therapeutic Male Circumcisions

Briefing Note

12 December 2012

Sheffield CCG is currently developing commissioning intentions for the 2013/14 financial year and prioritising the focus of its £740m budget.

As part of this process this specific proposal will be considered by the Shadow Governing Body in January when all of the commissioning intentions and priorities will be formally agreed.

It is proposed that circumcisions for non-therapeutic reasons should no longer be locally NHS funded. (Note: circumcisions for medical reasons will still be funded).

The Department of Health website states that this intervention is not funded where it is requested for non-medical reasons. However, commissioning arrangements across the UK are not always consistent with this.

Sheffield Clinical Commissioning Group has a remit to commission interventions where there is a clinical need and a local policy for circumcisions for medical reasons has been in place for several years.

Sheffield Clinical Commissioning Group proposes to cease to commission circumcisions for non-medical reasons as this diverts funding away from mainstream health activity.

It is acknowledged that there may be an impact on those seeking this intervention for non-medical reasons and so a number of mitigating actions have been proposed below. It is also understood that this decision would have a particular impact on the Muslim community and, indirectly, therefore have a differential impact on certain ethnic groups.

Discussions with Sheffield Children's Hospital

The clinical lead and management team at Sheffield Children's Hospital are exploring the potential to develop a service which will provide care under local anaesthetic on a private basis and paid for by the child's parents.

The cost of a service offered by SCH may be unattractive to families and SCH may decide not to proceed for that reason. However, if it is not possible for SCH to provide this service they are willing to host guidance on their website which will support parents to make an informed decision with regard to where they might source this service.

Engagement

An engagement plan has been developed which will allow local leaders and community groups to advise on how best to implement the recommendations. This will also provide

an opportunity to raise any issues or concerns so that the shadow governing body can be confident that these have been considered before the issue is discussed at a public session of the CCG.

It should be noted that local service users come from a number of ethnic backgrounds and are not a single homogenous group and so can be difficult to reach. Please see the attached draft engagement plan for details of how we plan to engage. A number of approaches will be utilised to 'maximise coverage'.

The engagement will focus on two broad areas:

1. Enabling any issues to be raised and discussed
2. Confirming the information parents need to make an informed/safe choice and it is proposed that this is based on guidance taken from the joint statement from the Royal Colleges¹ that,
 - The operation should be performed by or under the supervision of doctors trained in children's surgery
 - The child must receive adequate pain control during and after the operation
 - The parents and, when competent, the child, must be made fully aware of the implications of this operation as it is a non-reversible procedure
 - This operation must be undertaken in an operating theatre or an environment capable of fulfilling guidelines for any other surgical operation
 - The person responsible for the operation must be available and capable of dealing with any complications which may arise
 - There should be close links with the patient's GP and community services for continuing care after the operation

The engagement will also attempt to understand from a local perspective what language and format for this information would be most useful and where this should be made available.

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¹ <http://www.rcseng.ac.uk/media/medianews/statementonmalecircumcision>