Executive Licensing Panel - minutes

Centre 0295 (Bristol Centre for Reproductive Medicine)

Progress Report

Friday, 7 October 2016

HFEA, 10 Spring Gardens, London SW1A 2BU

Panel members	Juliet Tizzard (Chair) Joanne Anton Trisram Dawahoo	Director of Strategy & Corporate Affairs Head of Regulatory Policy Digital Communications Manager
Members of the Executive	Dee Knoyle	Secretary
External adviser		
Observers		

Declarations of interest

- Members of the panel declared that they had no conflicts of interest in relation to this item.

The panel had before it:

- 8th edition of the HFEA Code of Practice
- Standard licensing and approvals pack for committee members.

1. Background

1.1. Bristol Centre for Reproductive Medicine is located in Southmead Hospital, Bristol and has held a treatment and storage licence with the HFEA since 2007. The centre provides a full range of fertility services.

1.2. The Executive Licensing Panel considered the centre's interim inspection report at its meeting on 9 September 2016. The panel noted that at the time of the interim inspection on 14 June 2016 the inspectorate identified one major area of non-compliance relating to medicines management and four other areas of non-compliance relating to infection control, the quality management system, information displayed on the centre's website and the safe storage of cylinders. The panel noted that the Person Responsible (PR) had committed to implementing all of the recommendations.

1.3. The panel also noted that there were recommendations with timescales for implementation set shortly after the Executive Licensing Panel meeting held on 9 September 2016. The Panel agreed that the inspectorate should provide an update, at the next available meeting, confirming whether the recommendations were implemented within the prescribed timescales.

2. Consideration of application

2.1. The panel considered the papers, which included an executive update, inspection report and licensing minutes for the past three years.

2.2. The panel noted that the PR has addressed the major area of non-compliance relating to medicines management and further audits are due in December 2016.

2.3. The panel noted that the PR has addressed the other area of non-compliance relating to the safe storage of cylinders.

2.4. The panel noted that appropriate steps have been taken towards implementing the remaining other areas of non-compliance relating to infection control, the quality management system and the centre's website. The inspectorate has requested final confirmation, by December 2016, that all required actions have been undertaken.

3. Decision

3.1. The panel noted the executive update and was satisfied with the centres progress to date.

4. Chair's signature

4.1. I confirm this is a true and accurate record of the meeting.

Signature

Name

Juliet Tizzard

Date

18 October 2016

Update for Executive Licensing Panel
7 October 2016

Centre number	0295
Centre name	Bristol Centre for Reproductive Medicine
Person Responsible	Mr Valentine Akande

Update on recommendations made following an interim inspection.

Background

1. Following an interim inspection on 14 June 2016, recommendations were made in one area of major non compliance and four 'other' areas of practice that required improvement.

2. An Executive Licensing Panel considered this report on 9 September 2016 and in their minutes 'noted that there are recommendations with timescales for implementation set shortly [14 September] after this meeting and agreed that the inspectorate should provide the panel with an update, at the next available meeting, confirming whether the outstanding recommendations were implemented within the prescribed timescales.

Update

3. The required action for the one major non compliance relating to medicines management due by 14 September has been taken. Further audits are due in December 2016.

4. The required action for the 'other' area of practice relating to the safe storage of compressed gases has been implemented. Appropriate steps have been taken towards implementing the remaining 'other' areas of practice relating to infection control, the quality management system and the centre's website. However, the inspector awaits final confirmation that all required actions have been taken which has been requested by December 2016.

Douglas Gray
Inspector