

Infection Control Annual Statement

Thurleigh Road Practice

Annual Infection Control Statement 2023

This annual statement will be generated each year in January in accordance with the requirements of The Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance. It summarises:

- Any infection transmission incidents and any action taken (these will have been reported in accordance with our Significant Event procedure)
- Details of any infection control audits undertaken, and actions undertaken
- Details of any risk assessments undertaken for prevention and control of infection
- Details of staff training
- Any review and update of policies, procedures, and guidelines

Infection Prevention and Control (IPC) Lead

Thurleigh Road Practice has one Lead for Infection Prevention and Control: Emily James – Practice Nurse

The IPC Lead is supported by: Nana Abban Interim Practice Manager – As well as Nursing Team.

Emily James has attended an IPC Lead training course in and keeps updated on infection prevention practice.

Infection transmission incidents (Significant Events)

Significant events (which may involve examples of good practice as well as challenging events) are investigated in detail to see what can be learnt and to indicate changes that might lead to future improvements. All significant events are reviewed in the monthly staff meetings and learning is cascaded to all relevant staff.

In the past year there have been no significant events raised that related to infection control.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by Stella Ojo Infection Prevention and Control Nurse Specialist Public Health Infection Prevention and Control Team in March 2023.

As a result of the audit, the following things have been changed in Thurleigh Road Practice.

- The clinical room's carpet flooring is to be replaced with new washable flooring, to the correct safety standards
- Hand wash appliances have been audited throughout the surgery with a plan to replace the Clinical Room with the correct recommended standard hand washing sink
- Patient's chairs in the reception & waiting room areas are being replaced with new wipeable fixed to the floor seating
- All the fabric chairs in the Clinical rooms for the patients and clinicians have been removed and are being replaced with wipeable chairs

An audit on hand washing was last undertaken on 05/4/2023

Thurleigh Road Practice plan to undertake the following audits in 2023

- Annual Infection Prevention and Control audit
- Cleaning audit
- Hand hygiene audit
- New Cleaning Standards – Monthly Room Audits
- Monthly Waste audit
- Monthly Sharps bin audit
- Weekly Cleaning Spot Checks

Risk Assessments

Risk assessments are carried out quarterly. risk assessments were last carried out / reviewed:

Legionella (Water) Risk Assessment: The practice has conducted/reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors, or staff, last reviewed

Immunisation: As a practice we ensure that all our staff are up to date with their Hepatitis B immunisations and offered any occupational health vaccinations applicable to their role (i.e., MMR, Seasonal Flu and Covid vaccinations). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every 6 months. To this effect we use disposable curtains and ensure they are changed every 6 months. The window blinds are very low risk and therefore do not require a particular cleaning regime other than regular vacuuming to prevent build-up of dust. The modesty curtains although handled by clinicians are never handled by patients and clinicians have been reminded to always remove gloves and clean hands after an examination and before touching the curtains. All curtains are regularly reviewed and changed if visibly soiled

Cleaning specifications, frequencies, and cleanliness: We also have a cleaning specification and frequency policy which our cleaners and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the surgery including cleanliness of equipment.

Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use.

Training

- All our staff receive annual training in infection prevention and

control

- All clinical and non -clinical staff have completed blue stream e-learning training.
- IPC lead should attend quarterly IPC Lead Practice Nurse forums organised by CCG

Policies

All Infection Prevention and Control related policies are in date for this year.

Policies relating to Infection Prevention and Control are available to all staff and are reviewed and updated annually and all are amended on an on-going basis as current advice, guidance and legislation changes. Infection Control policies are circulated amongst staff for reading and discussed at meetings on an annual basis.

Responsibility

It is the responsibility of everyone to be familiar with this Statement and their roles and responsibilities under this.

Review date

April 2024

Responsibility for Review

The Infection Prevention and Control Lead, Emily James, is responsible for reviewing and producing the Annual Statement for and on behalf of the Thurleigh Road Practice.