

| Version | Date Published | Review Status |
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| 3.0 | Oct 2015 | Reviewed Sep 2020 Reviewed by Priory View July 2024 |

ANNUAL INFECTION CONTROL STATEMENT

Introduction

This practice is committed to the control of infection within the building and in relation to the clinical procedures carried out within it. This statement has been produced in line with the Health and Social Care Act 2008 and details the practice's compliance with guidelines on infection control and cleanliness between the dates of 1/8/2023 and 31/7/24.

The author of this statement is Helen Walker.

Infection Control Lead

The practice's clinical lead for infection control is Fiona Hanson, Practice Nurse.
The practice's non-clinical lead for infection control is Helen Walker, Practice Manager.

The infection control lead has the following duties and responsibilities within the practice:

- Overall responsibility for the maintenance of personal protective equipment and the provision of personal cleaning supplies within clinical areas
- Overall responsibility for the maintenance of the provision of personal cleaning supplies within non-clinical areas
- Overall responsibility for the maintenance of sterile equipment and supplies, and for ensuring that all items remain "in date"
- Providing staff training and guidance on all infection control matters.
- Undertaking audits, risk assessments and ensuring actions are completed

Significant Events related to Infection Control

There have been 0 significant events relating to infection control at the practice between the dates of 1/8/2023 and 31/7/24.

Audits relating to Infection Control

The following audits relating to Infection Control have been undertaken at the practice between the dates of 1/8/23 and 31/7/24, and the following recommendations and/or actions plans were produced in response to the findings:

- Monthly Infection Prevention Room Checks
- Hand Hygiene checks
- Infection Control Risk Assessment
- Legionella contamination

Action plans agreed (brought forward from 2019-20 (awaiting funding):

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- Replacement of flooring in consulting rooms on middle floor (scheduled work commencing Autumn 2024)
- Replacement of non compliant sinks/taps in all rooms floor (scheduled work commencing Autumn 2024)

New findings from 2023-4 audit;

Sinks non compliant (see above)

Flooring on middle floor non compliant (see above)

Descaling of taps required during quarterly deep clean

Display of "Spillage Kit location" poster

Poster required in public toilet to help promote reports of hygiene and cleanliness breaches

Practice Policies, Procedures and Guidance relating to Infection Control

The practice maintains the upkeep of the following policies, procedures and guidance related to infection control. These policies, procedures and guidance are reviewed and updated every 12 months, as well as **being** amended on an ongoing basis to keep up with changes in regulation etc.

Infection Control Policy V3.0

Sample Handling Protocol V1.7

Infection Control Biological Substances Protocol V2.4

Control of substances hazardous to health (COSHH) V4.1

Hand Washing and Hygiene protocol V1.1

Aseptic technique V3.0

BBVs (Blood-borne viruses) V3.0

C.difficile (Clostridioides difficile) V3.0

Invasive Devices V3.0

MDROs including ESBL and CPO (multidrug-resistant organisms including Extended-Spectrum Beta-Lactamase and carbapenemase-producing organism) V2.0

MRSA (Meticillin resistant Staphylococcus aureus) V2.0

Notifiable Diseases V3.0

Outbreaks of communicable disease V2.0

Patient placement and assessment for infection risk V3.0

PPE (Personal Protective Equipment) V2.0

PVL-SA (Panton-Valentine Leukocidin staphylococcus aureus) V3.0

Respiratory and cough hygiene V3.0

Waste management Disposal Protocol V2.7

Safe management of care equipment V3.0

Safe management of sharps and inoculation injuries V2.0

Safe management of care environment V3.0

Safe management of linen (including uniforms and workwear) V2.0

Scabies V4.0

Venepuncture V3.0

Viral gastroenteritis/Norovirus V4.0

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All have been updated between the dates 1/8/23 and 31/7/24

Training relating to Infection Control

The following staff members have received instruction, information or training relating to Infection Prevention and Control between the dates of 1/8/23 and 31/7/24:

- Hand washing techniques (new GPs and Clinical staff)
- Infection Prevention and Control – Level 1 (all staff)
- Infection Prevention and Control – Level 2 (GPs and Clinical staff)
- Healthcare Waste Management and Disposal (all staff)
- Sepsis in Primary Care (Clinical Staff)
- Sepsis in Primary Care – GP Reception Learning (All Administrative staff)