

## Annual Statement

Linden Medical Group

18/09/2024

**It is a requirement of the Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance that the Infection Prevention and Control Lead produces an annual statement with regard to Compliance with good practice on infection prevention and control.**

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 any staff training.
- Any review and update of policies, procedures, and guidelines.

### **Infection Control Lead**

The practice's clinical lead for infection control is Karen Kidger (Practice Nurse) .

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

- Keep up to date with changes in Infection Control
- Check PPE
- Checking the Surgery for Cleanliness

### **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 Practice Meetings and learning is cascaded to all relevant staff.

As a result of these events, The Linden Medical Group has

- Continued with two yearly infection control updates for both clinical and non-clinical staff.
- Ensure infection control guidance remains accessible to all staff.
- Training is logged on Team Net and in Personnel Files.

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

### **Infection Prevention Audits and Actions**

The practice carries out an Infection Prevention and Control audit every 6 months; the last in-house audit was completed on 15/8/2024. Infection Control audit from the Infection Control team was 28/8/2024. This involves a comprehensive review of all aspects of infection prevention and control within the surgery.

As a result of this audit, the following changes are planned:

- Aim to replace certain chairs in waiting area that are ripped or damaged.
- To replace carpeted area in reception with vinyl -responsibility of Health Centre Manager
- To replace sink taps to the dirty utility room in line with current guidance- responsibility of Health centre manager .
- Health centre manager/Mitre to review domestic cleaning cupboard and equipment, ensuring both are cleaned and included in the cleaning schedule.
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## **Risk Assessments**

Risk assessments are carried out so that best practice can be established and then followed. In the last year the following risk assessments were carried out/reviewed.

- Legionella (Water) Risk Assessments: The Stapleford Care Centre Manager reviews its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors, or staff.
- Cleaning specifications, frequencies, and cleanliness: The Stapleford Care Centre manager employs and works with our cleaners to ensure that the surgery is kept as clean as possible.
- 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). We take part in the National Immunisation campaigns for patients and offer vaccinations and home visits to our housebound patient population.
- Curtains: Disposable curtains are used in clinical rooms and are changed every 6 months. All curtains are regularly reviewed and changed more frequently if damaged or soiled.
- Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use. Our sink in the dirty utility does not meet the latest standards for sinks but we have mitigated this by removing plugs; covering overflows and reminding staff to turn taps off with paper towels.
- Audits: Infection control audits are carried out every six months, Handwashing annually, medical fridges are checked daily, Sharps bin are changed by clinical staff as required.

## **Training**

All our staff receives two yearly training in infection prevention and control via online learning on Team Net

Hand Hygiene training and audit is carried out annually by our Practice Nurse for training and education.

## **Policies**

All Infection Prevention Control related policies are in date.

Policies relating to Infection Control are available to all staff and are reviewed and updated as appropriate, and all are amended on an on-going basis as current advice, guidance, and legislation changes. Infection Control policies are available on the Linden Medical Group Teamnet site

**Responsibility**

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

**Review Date**

29/8/2025

**Responsibility for Review**

The Infection Prevention and Control Lead is responsible for reviewing and producing the Annual Statement.