

Annual statement on compliance with IPC practice (including cleanliness) for General Practice

Purpose of the 'Annual statement'

The *Health and Social Care Act 2008: code of practice on the prevention and control of infection and related guidance* requires the Infection Prevention and Control (IPC) Lead to produce an annual statement. This statement should be made available for anyone who wishes to see it, including patients and regulatory authorities and should also be published on the General Practice website.

Introduction

This Annual statement has been drawn up on 13th January 2025 in accordance with the requirement of the *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance* for General Practice. It summarises:

1. Infection transmission incidents and actions taken;
2. IPC audits undertaken and subsequent actions implemented;
3. Risk assessments undertaken and any actions taken for prevention and control of infection;
4. Staff training;
5. Review and update of IPC policies, procedures and guidelines;
6. Antimicrobial prescribing and stewardship.

This statement has been drawn up by:

Name: Amy Harding, Clinical Nurse Lead and Infection Prevent and Control (IPC) Lead

1. Infection transmission incidents

No infection transmission incidents have been identified at this Practice.

2. IPC Audits and actions

Infection prevention control audits are undertaken by the Lead Nurse within the Practice. Our Lead Nurse audits a selected range of clinical rooms, quarterly, throughout the year. An action plan is produced as a result of each audit and the outcomes and any actions that need to be taken are then communicated to the whole Practice team. The Lead Nurse follows up any outstanding actions to ensure that they are completed in a timely manner.

3. Risk Assessments

The following risk assessments that relate to Infection prevention control are conducted annually: Calibration, COSHH, First Aid, Needlestick, Waste Disposal and Working Environment. Legionella checks are conducted weekly, monthly, quarterly, six monthly and annually, in conjunction with an annual risk assessment.

4. Staff training

Induction training covers: All Infection prevention and control policies and procedures, Hand Hygiene, Electronic Learning Accounts and associated training. It also covers applicable risk assessments, e.g. working alone or at home & pregnant women or new mothers, Personal hygiene, Reporting of accidents/accident book, PPE, Safety rules and Dangerous substances (COSHH)

5. IPC Policies, procedures and guidance

The Practice has the following, Infection prevention control related policies, procedures guidance and related audits:

- Infection Control
- Occupational Health
- Hep B
- Aseptic Technique
- Minor Operations/Surgery
- Waste
- Hand Hygiene
- Specimens Handling
- Personal Protective Equipment
- Vaccine Storage
- Isolation & Infectious Diseases
- Clostridium Difficile
- Scabies
- Respiratory Illnesses
- Needlestick
- Legionella
- MRSA & PVL
- Blinds & curtains
- Staff Induction Documents, Checklist, Job Descriptions
- Clean Plan and Related Documents

All of which are reviewed and updated on 1,3 or 5-year cyclical bases, as determined appropriate by the Lead for that specific area of the Practice. An audit trail is maintained of any updates to our policies.

6. Antimicrobial prescribing and stewardship

The Practice adopts the NICE - Summary of antimicrobial prescribing guidance for managing common infections and The Nottinghamshire Area Prescribing Committee – Antimicrobial Guidelines for Primary Care.

7. Outcomes and action plans

Based on the outcome of any incidents, audits and/or risk assessment, the Practice produces an action plan, which includes the responsible person, the action to be undertaken and a completion date, the actions are followed by the person responsible for initiating the audit.