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| Jubilee Park Medical PartnershipPark House Medical Centre61 Burton RoadCarltonNottinghamNG4 3DQTelephone: 0115 9404333 |  | Jubilee Park Medical PartnershipLowdham Medical CentreFrancklin RoadLowdhamNottinghamNG14 7BGTelephone: 0115 9663633 |

Jubilee Park Medical Partnership

20th May 2024

**Purpose**

This annual statement will be generated each year in May, in accordance with the requirements of the [Health and Social Care Act 2008 Code of Practice](https://www.gov.uk/government/publications/the-health-and-social-care-act-2008-code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance) on the prevention and control of infections and related guidance. The report will be published on the organisation’s website and will include the following summary:

* 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 carried out and actions undertaken
* Details of any risk assessments undertaken for the prevention and control of infection
* Details of staff training
* Any review and update of policies, procedures and guidelines

**Infection Prevention and Control (IPC) lead**

Infection Prevention and Control (IPC) lead – Charlotte Beatty, Practice Manager

The IPC lead is supported by The Nursing Team

Non-clinician responsible – Rachel White, Executive Manager

Responsible for waste management and cleaning of Lowdham site is Alison Brandrith.

Responsible for waste management and cleaning of Carlton site is Julia Jeffery CHP tenant liaison manager and this is sub contracted to OCS cleaning services.

**a. Infection transmission incidents (significant events)**

Significant events involve examples of good practice as well as challenging events.

Positive events are discussed at meetings to allow all staff to be appraised in areas of best practice.

Negative events are managed by the staff member who either identified or was advised of any potential shortcoming. This person will complete a Significant Event Analysis (SEA) form which commences an investigation process to establish what can be learnt and to indicate changes that might lead to future improvements.

All significant events are reviewed and discussed at several meetings each month. Any learning points are cascaded to all relevant staff where an action plan, including audits or policy review, may follow.

In the past year, there have been 2 significant events raised which related to infection control. There have been no complaints made regarding cleanliness or infection control.

**b. Infection prevention audit and actions**

* Hand hygiene – all staff checked
* Policies and procedures reviewed and updated in line with guidance.
* Emergency drugs and resuscitation equipment at both sites is checked monthly.
* All fridges were serviced on an annual basis in January 2024.
* 6 monthly internal infection control audits are carried out across both sites.
* IPC team carried out IPC audit at the Lowdham site in September 2023 and an action plan was put in place for areas of concern.
* The IPC team carried out an IPC audit at the Carlton site in January 2023 and an action plan was put in place for areas of concern.
* Monthly cleaning audits are carried out at the Carlton site by CHP and shared with the tenants. Areas of concern are highlighted to OCS for rectification. Any areas of concern that the practice find are reported to CHP for rectification.

**c. Risk assessments**

Risk assessments are carried out so that any risk is minimised and made to be as low as is reasonably practicable. Additionally, a risk assessment that can identify best practice can be established and then followed.

In the last year, the following risk assessments were carried out/reviewed:

* Legionella Risk Assessment The practice has conducted its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors or staff. Last carried out December 2023 at our Lowdham site and April 2024 at our Carlton site.
* External Cleaning company standard of cleaning – Monthly spot checks carried out by CHP at our Carlton site and Joanna Brown, Practice Supervisor at our Lowdham site. Last carried out May 2024

In the next year, the following risk assessment will also be reviewed:

* Infrastructure changes – Building improvements to our Lowdham site are planned for the hopefully in the next year. Including, sink replacements, cupboard replacements.
* Infrastructure changes – CHP plan to restructure the space which was previously used a café and change this into a clinical and storage space.
* Sharps – We have had issues with CHP not delivering our sharps bins in a timely manner. We have requested that they replace the full sharps bins with a like for like empty sharp bin at the time of removal. CHP have confirmed this is not currently the process for the removal and replacement of the bins. They have agreed to trial this process in the new way.
* Sharps Management - Safe handling of sharps bins, spot checks to be carried out quarterly, next due June 2024. These will be carried out by IPC lead quarterly.

**d. Training**

In addition to staff being involved in risk assessments and significant events, at Jubilee Park Medical Partnership all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually.

Various elements of IPC training in the previous year have been delivered at the following times: Hand washing light box training (October 2023)

**e. Policies and procedures**

The infection prevention and control-related policies and procedures that have been written, updated or reviewed in the last year include, but are not limited, to:

###  [Aseptic Non-Touch Technique and Clean Technique Policy and Procedure](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/5e541f85-70d8-45f7-a813-af1400c3010a)

### [Cleaning and Decontamination Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/ff62a6c5-fd79-4bfd-88fb-abdd01025ae1)

### [Hand Hygiene Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/9028c6dc-6474-4590-a394-abdd01025aeb)

### [Handling of Blood and Body Fluid Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/9ff7eef3-8187-4e74-8e97-abdd01025af4)

### [Infectious Disease Notification Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/0e4bfecf-7228-41ae-a25d-abdd01025af9)

### [Management of Clostridiodies difficile](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/ea635803-fd50-4676-b281-abdd01025b03)

### [Management of PVL infections in General Practice](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/bc72852a-a7d8-4a1c-8341-abdd01025b03)

### [Management of Scabies](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/dd65ec2c-e6dc-4275-acb4-abdd01025b0a)

### [Management of Seasonal Influenza Outbreaks](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/ed554a30-ce3a-4026-b5b6-abdd01025b0d)

### [Management of spillages of Blood, Body fluids and Vaccines](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/fa39995d-a2a5-4985-b319-abdd01025b11)

### [Minor Surgery Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/1b457c02-73ce-4be6-942f-abdd01025b15)

### [MRSA Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/0f825d2f-3f2f-4f3b-8891-abdd01025b19)

### [Needlestick Injury Protocol](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/6177ba96-86d6-4098-a59c-ae22009c9936)

### [Patient Isolation Protocol](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/3369b444-847f-480e-b0ab-abdd01025b1b)

### [PHE Communicable Disease Outbreak Management Operational Guidance](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/a8dabb83-5828-4cfd-801f-abdd01025b1e)

### [PPE Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/cbca12ff-b532-4c86-a1f3-abdd01025b20)

### [Protocol for sharps injury, bloods splash or body fluid incident](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/3909096a-bee1-47b5-a403-abdd01025b24)

### [Safe Use and Disposal of Sharps Protocol](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/e7719be2-389a-431d-b2a9-abdd01025b27)

### [Single Use Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/3f3ca852-72bb-4a5e-bbd9-abdd01025b2e)

### [Waste Management Policy](https://teamnet.clarity.co.uk/c84613/Library/View/Attached/9f5afefb-124a-4f33-a5bf-abe600ff11ca)

Policies relating to infection prevention and control are available to all staff and are reviewed and updated annually. Additionally, all policies are amended on an ongoing basis as per current advice, guidance and legislation changes.

**f. Responsibility**

It is the responsibility of all staff members at Jubilee Park Medical Partnership to be familiar with this statement and their roles and responsibilities under it.

**g. Review**

The IPC lead and Rachel White, Executive Manager are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before 20th May 2025.

**Signed by**

Charlotte Beatty, Practice Manager

For and on behalf of Jubilee Park Medical Partnership