

Tudor House Medical Practice

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

**Introduction**

This Annual statement has been drawn up on 7 Aug 2024 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 Tudor House Medical 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:

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1. **Infection transmission incidents**

*Provide details of infection transmission incidents (which may involve examples of good practice as well as challenging events), how they were investigated, any lessons learnt and changes made as a result to facilitate future improvements.*

Learning/significant events are raised in the event of an incident. These are clearly detailed on the practice TeamNet site and shared with all staff members/discussed at team meetings.

In the past year there have been 0 significant events raised that related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

1. **IPC Audits and actions**

*Provide an overview of IPC audit programme as well as examples of good practice and actions taken to address suboptimal compliance.*

The practice undertakes quarterly internal audit checks to ensure the highest standards of cleanliness and infection control compliance is achieved.

The practice is audited by Nottingham CityCare infection control team on behalf of NHS England every 2 years and they provide a detailed action plan. The last audit was in 2022 and our overall scores were between 96-100%.

A number of minor actions were identified which, where possible, have been corrected. Identified actions included not all treatment room cupboards being boxed to the ceiling/have sloped tops but these are part of a robust cleaning schedule so we mitigate the risk in areas where this still exists. Since the 2022 audit a number of rooms have been upgraded and this area addressed.

The next internal audit is Aug 2024 and the next NHS England commissioned audit is Sep 2024.

1. **Risk Assessments**

*Provide details of IPC related risk assessments carried out and actions taken to prevent and control infection.*

Ad-hoc risk assessments are carried out as required e.g. in response to local/national directives (measles).

Regular risk assessments are carried out for:

* Legionella (every 2 years)
* Clinical waste (every 2 years)
1. **Staff training**

*Provide details of IPC induction training, annual updates and any other IPC related training.*

All staff undertake Infection control training as part of their induction at a level relevant to their role.

Hand hygiene training is completed annually by all staff.

The practice manager and lead nurse undertake ad-hoc training/updates as and when required/available.

1. **IPC Policies, procedures and guidance**

*Provide details of all policy reviews and updates, together with details of how changes have been implemented.*

The Practice sits within the Nottingham City ICB and reports to NHS England. As part of its governing role NHSE commission a bi-annual Infection Control audit from Nottingham CityCare.

The practice has therefore adopted the Infection Control policies from Nottingham CityCare.

Policies are available to download/view on Agilio TeamNet which all staff have access to.

1. **Antimicrobial prescribing and stewardship**

*Provide details of all activities undertaken to promote and improve antimicrobial prescribing and stewardship.*

All our clinicians play a role in reducing antibiotic resistance by practicing antibiotic stewardship. This means not prescribing antibiotics for patients who are unlikely to suffer from bacterial infection, whilst ensuring that patients who do require antibiotic treatment receive the appropriate antibiotics, at the correct dose and for the proper duration as per the Nottinghamshire Area Prescribing Committee guidelines.

We monitor our prescribing of antibiotics via bi-annual Prescribing reports and ongoing through any learning events.

This statement will be reviewed annually – next review date August 2025.