

Annual Statement Report 2024

Acorn Surgery

Purpose

This annual statement will be generated each year in December in accordance with the requirements of the [Health and Social Care Act 2008 Code of Practice](#) on the prevention and control of infections and related guidance.

It summarises

- Any infection transmission incidents and any action taken (these will have been reported following 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

The lead for infection prevention and control at Acorn Surgery is Candice Yezek, Practice Nurse

The IPC lead is supported by Victoria Pilkington, Practice Manager

Infection transmission incidents (significant learning events)

Significant learning events (which may involve examples of good practice as well as challenging events) are investigated in detail to see what can be learned and to indicate changes that might lead to future improvements.

All infection control-related significant learning events are reviewed and discussed at weekly Practice Meetings. Any learning points and best practices are cascaded to all relevant staff, this may also include an action plan, including audits or policy review.

In the past year, there have been two significant learning events raised related to infection control. A needle stick injury and cold chain breach due to a fridge seal malfunction. In both instances, the protocol was followed. As a result of the cold chain breach the practice will no longer hold medication for any patients no matter the reason. There have been no complaints made by patients or stakeholders regarding cleanliness or infection control.

Infection prevention audit and actions

The annual infection Prevention and control audit was completed by Candice Yezek and Victoria Pilkington.

As a result of the audit, the following actions have been taken or scheduled

- Cover overflows and remind staff to use hand towels when turning off taps

- Alternative storage or cover sources for trolleys
- Plastic lidded boxes purchased for storing items on the shelves in consulting rooms

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:

- General IPC risks: Annual Infection Control Risk Assessment completed throughout the year.
- Cleaning specifications, frequencies, and cleanliness: We work with our cleaners to ensure that the surgery is kept as clean as possible. Regular assessments of cleaning processes are conducted with our cleaning contractors to identify areas for improvement
- Privacy 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
- Immunisations. As a practice, we risk assess to ensure that all our staff are up to date with their Hepatitis B immunisations and are 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 to our patient population.
- Legionella (Water safety) Assessment: Completed by the landlord reviews its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors, or staff.
- Fridge: An annual audit of all clinical fridges is completed to ensure there are no risks to the patients and ensure compliance with the cold chain policy
- Hand Hygiene audit

Training

In addition to staff being involved in risk assessments and significant events, at Acorn Surgery all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receives refresher training annually through TeamNet ilearn online or at PCN Mandatory training sessions.

IPC lead should attend regular IPC forums organised by Cambridge and Peterborough ICB

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:

Infection Prevention Control Policy
Blood Borne virus including needle stick injury
Hand Hygiene Policy
Cold chain Policy
Cleaning Schedule for routine cleaning of vaccine fridge
Invasive Devices Policy

Patient Placement and Assessment for infection
Safe Management of Blood and Bodily Spillages

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. Changes to the policy are shared with the team via our intranet

Responsibility

It is the responsibility of all staff members at Acorn Surgery to be familiar with this statement, and their roles and responsibilities under it.

Review

The IPC lead and Victoria Pilkington, Practice Manager are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before January 2026

Signed by



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Dr Mary Simpson
Senior GP Partner