

Health and Beyond Annual Report for Infection Prevention and Control

Purpose

This annual statement will be generated each year in March in accordance with the requirements of The Health and Social Care Act 2008 Code of Practice on the Control of Infections and related guidance. This report demonstrates the commitment of Health and Beyond Practices to deliver high quality and safe care to registered patients and also that we use effective Prevention and Control of Infection measures to ensure the safety and well-being of patients, staff and visitors. This report will be published on the practices website and includes:

- Any infection transmission incidents and any action taken (these will have been reported in accordance with our Significant Event procedure)
- Update on Covid-19 measures.
- 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

The IPC Lead for the organisation is the Lead Nurse with the support of the Clinical Director

Infection Transmission Incidents

There have been no reported Significant events or transmission of infections in the last year, any incidents in any of our practices will be documented here.

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 by the Management team and any learning is cascaded to all staff.

Update on COVID -19 Measures

All of our practices have returned to normal business, following an internal risk assessment and in line with National Guidance routine use of masks for patients and staff were discontinued. Patients can still opt to wear a mask or face covering if desired and may request for their clinician to wear one as well. As of 31st March 2023, staff are no longer required to undertake routine testing using Lateral Flow tests. Staff are recommended to stay away from work if feeling unwell, in line with other infectious illnesses.

Infection Prevention Audits

1. Hand Hygiene Audit

Hand Hygiene audits for all staff groups are undertaken at each site every 3 months, these audits are unannounced to ensure results are reliable. This method of audit gives assurance of compliance to Infection Control measures within our teams.

Staff are audited using the NHS Hand Hygiene Audit Tool for General Practice and any areas of non-compliance is identified and addressed as a learning opportunity, this audit gives high levels of assurance.

2. Infection Control Audits

Full Infection Control Audits are carried out annually by Royal Wolverhampton Hospital Trusts Infection Prevention Team, these audits measure our organisation's compliance to Infection Prevention Rules and Regulations. For the 2023/24 period all of our practices were marked as Good and any actions identified have been addressed.

Quarterly IPC Audits are also undertaken in house at each practice by the IPC Link Nurse, these audits are shared with the Hub Managers and the organisations Quality manager and any issues identified are actioned.

Legionella Audits are completed monthly by an outside agency Managed Water Services Ltd and the results of these audits are shared with the Hub Managers and continue to remain within recommended guidelines.

Daily Audits take place in all practices, these audits include Medical Fridges, Sharps Bins, Tap Running and Equipment checks.

3. Practice Cleaning Audits

Cleaning of our buildings is carried out by External Cleaning Company's. These partners carry out daily and monthly Audits and present these audits to our organisations Quality Manager for review and sign off.

Risk Assessments

IPC Risk Assessments are carried out in line with any new or changing Government Guidelines and Recommendations. The organisation has carried out 2 Risk Assessments this year

1. COVID Risk Assessment
2. MMR Risk Assessment

These Risk Assessments have been carried out using the most up to date published Government Guidelines and Recommendations, following on from these Risk Assessments new Guidelines were put into place across the organization, these Guidelines were published to all staff groups via Clarity Team Net.

Staff Training

All staff receive training in Infection Prevention and Control appropriate to their job role, this mandatory training includes general IPC, clinical waste, hand hygiene, personal protective equipment (PPE), safe use and disposal of sharps, risk management and sepsis awareness.

Infection Control Policy's

All IPC policies have been reviewed and are in date, all policies are reviewed annually but also on an ongoing basis as current advice, guidance and legislation changes. IPC policies are available on Clarity Team Net for all staff to access.



Kaye Staite

Kaye Staite – Lead Nurse
March 2024

Dr Reehana – Medical Director
March 2024