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# Manor House Surgery

## Infection Control Annual Statement

(April 2025-March 2026)

### **Purpose**

This annual statement will be generated each year in November, 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. The report will be published on the practice 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**

The lead for infection prevention and control at Manor House Surgery is Maria Lacey Practice Nurse.

The IPC lead is supported by GP Partner Dr Melanie Aram, and Practice Nurse Wendy Griffin.

#### **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 0 significant events raised which related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

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### **b. Infection prevention audit and actions**

We complete various IPC related audits each year, including handwashing audit and monthly room checks.

All actions are considered and carried out in accordance with the audit and timeframe required.

### **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:

Mask wearing

Portable Fan use

Torniquette Use

Cleaning Standards

### **d. Training**

In addition to staff being involved in risk assessments and significant events, at Manor House Surgery, all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher e-training and hand wash technique reviews.

### **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:

Infection Prevention and Control Handbook

Policies relating to infection prevention and control are available to all staff electronically 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**

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## Manor House Surgery

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

**g. Review**

The IPC lead with support are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before June 2026.

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