

Elgar House Surgery

04/08/2025

## **Purpose**

This annual statement will be generated each year in August, 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 Elgar House Surgery is Rhea Randhawa, Practice Nurse Lead.

The IPC lead is supported by Jessica Eaborn

### **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.

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

**Internal Audits completed this year are:**

**Annual Infection Control Audit**

## **Hand Hygiene**

## **Personal Protective Equipment**

## **Aseptic Technique Audit**

## **Safe Management of Care Equipment**

### **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.

A suggested list, but one that is not exhaustive, could contain the following:

- General IPC risks
- Staffing, new joiners and ongoing training
- COSHH
- Cleaning standards
- Privacy curtain cleaning or changes
- Staff vaccinations
- Infrastructure changes
- Sharps
- Water safety
- Toys
- Assistance dogs

### **d. Training**

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

### **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 Control Handbook

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 Elgar House surgery to be familiar with this statement, and their roles and responsibilities under it.

### **g. Review**

The IPC lead and Jessica Bethel are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before August 2026

**Signed by**

Dr Fiona Newman

For and on behalf of Elgar House Surgery