SILKIN HEALTH

Infection Control Annual Statement 2025

Silkin Health's annual statement will be generated each year in the month of February 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 shall summarise:

- 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 undertaken, and actions required.
- Details of any risk assessments undertaken for prevention and control of infection
- Any review and update of policies, procedures and guidelines
- Details of staff training.

Infection Prevention and Control (IPC) Lead

Sister Tammy Worthington is the Lead Clinician for Infection Prevention and Control (IPC) at Silkin Health. The IPC lead is supported by Nurse Manager Sister Laura Tyrer both staff members have completed the primary development centres infection control (IPC) training at level 2.

Infection transmission incidents (Significant Events)

Significant IPC events are investigated in detail to identify what can be learnt and to indicate changes that might lead to future improvements. All significant IPC events are reviewed in clinical meetings and learning is cascaded to all relevant staff.

Silkin Health are very pleased to report there have been no significant infection events in the last 12 months.

Silkin Health has been awarded a 4* rating in line with The National Standards of Healthcare Cleanliness (2021) by Vanguard in 2022.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by Laura Tyrer and Helen Phillips in January 2025.

The result of this audit are as follows:

Sutton Hill Site:

- Room 1 new wipeable chair to be purchased.
- Room 5 large groove to wall cause by backs of plastic chair to be repaired.
- Room 10 -small groove to wall caused by seating to be repaired.
- Room 12 Needs new doorstop to prevent further damage to wall.
- Waiting room 4 x seats with rips/tears- to be repaired.
- Audit of handwashing- due to take place Feb 2025.

Stirchley Site:

- Room 11- Blind missing two slats, bin to be replaced, wall marked from chair.
- Room 13- slat missing from blind.
- Room 15- weights needed for blinds.
- Room 17- Floor damage awaiting repair.

Risk Assessments

As part of our continued commitment to providing safe healthcare a quarterly audit is completed which reviews all the Coils, Implants, along with Vasectomies & surgical minor Operations that have been performed to identify post operative complications and infections.

As well as regular audits, thorough risk assessments are performed at Silkin Health which include:

- Ensuring our clinical staff are wearing appropriate uniform, have regular hand washing checks.
- Our clinical couches are checked every 3 months to ensure they are free from damage.
- Our privacy Curtains are changed every 6 monthly in high-risk areas and annually in all other clinical areas.
- Our Vaccine fridges are checked and cleaned quarterly.
- A Full building inspection of both sites is performed Monthly by Vanguard and every 6 months by Laura Tyrer and Helen Phillips.
- Legionella testing on water supplies. The practice has conducted/reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors, or staff.

Training

- All staff receive annual IPC training via E learning (Bluestream)
- IPC induction for all new starters provided by The Infection Control Lead
- IPC Lead will attend Annual IPC updates, information will be cascaded to relevant staff.

At Silkin Health we are pleased to report there have been no significant events identified during these audits over the last 12 months.

Policies

All Infection Prevention and Control related policies are reviewed and updated annual or sooner if requirements change. These can be found on Teamnet.

Responsibility

It is the responsibility of everyone to be familiar with this Statement and their roles and responsibilities under this.

Responsibility for Review

The Infection Prevention and Control Lead and the Practice Manager are responsible for reviewing and producing the Annual Statement.

Our next Review date is February 2026.