



Infection Control Annual Statement

Purpose

This annual statement will be generated each year in April 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 in accordance with our Significant Event procedure)
- Details of any infection control audits undertaken and actions undertaken
- Details of any risk assessments undertaken for 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 Adelaide Medical Centre Lead for Infection Prevention and Control is PN Beverley Whitehouse Lead Nurse

The IPC Lead is supported by: Debbie Turner PM and SHCSW Tara Hudgell.

Beverley Whitehouse has attended an IPC Lead training course in March 2019 and keeps updated every 3 months on infection prevention practice.

Infection transmission incidents (Significant Events)

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. Any significant events are reviewed in Practice meetings and learning is cascaded to all relevant staff.

In the past year there have been no significant events raised that related to infection control.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by Beverley Whitehouse in April 2025 and is now ongoing every quarter.

As a result of these audits, the following things have been changed in Adelaide Medical Centre:

Contracts with cleaning service is being continually monitored to ensure an even more rigorous level of cleanliness throughout the Practice.

An ongoing audit is now requested of the cleaners due to areas being identified for improvement. The outcomes are reviewed after each audit and feedback given to the cleaning company for actioning.

The system of monitoring the cleaning of equipment in rooms to be continued to be audited annually.

Clinical rooms are to remain free from clutter to facilitate dusting/cleaning procedures and prevent any cross contamination.

Air purifiers have now been set up in all rooms without an external opening window to enhance air quality for both patients and staff and reduce risk of airborne infections.

Cold chain procedure providing documentary evidence of safety continues.

Urine specimen collection is constantly under review and any changes cascaded to staff and patients as appropriate.

Documentation improved to show evidence of the above.

The Adelaide Medical Centre plan to undertake the following audits in 2025/2026:

- Annual Infection Prevention and Control audit
- Cold chain audit
- Minor Surgery outcomes audit
- Domestic Cleaning audit
- Cleaning of equipment audit

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed. In the last year the following risk assessments were carried out / reviewed:

Legionella (Water) Risk Assessment: The practice has conducted its water safety risk assessment monthly to ensure that the water supply does not pose a risk to patients, visitors or staff.

Immunisation: As a practice we ensure that all our clinical staff are up to date with their Hepatitis B immunisations and offered any occupational health vaccinations applicable to their role (i.e. MMR, Seasonal Flu and more recently Covid). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population. During the Covid 19 pandemic we have been providing vaccinations via the Andover PCN vaccination Hub in the town centre and will continue to do so as necessary.

Other examples:

We now aim to be a clutter free surgery in clinical rooms to prevent cross contamination and facilitate dusting /cleaning procedures. All chairs both in the waiting room and consulting rooms are now wipeable too help facilitate an enhanced cleaning regime.

Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every 6 months. To this effect we use disposable curtains and ensure they are changed every 6 months. The window blinds have recently been renewed and are very low risk and therefore do not require a

particular cleaning regime other than regular vacuuming to prevent build-up of dust. The modesty curtains although handled by clinicians are never handled by patients and clinicians have been reminded to always remove gloves and clean hands after an examination and before touching the curtains. All curtains are regularly reviewed and changed if visibly soiled.

Toys: NHS Cleaning Specifications recommend that all toys are cleaned regularly, and we therefore provide only wipeable toys in waiting / consultation rooms.

Cleaning specifications, frequencies and cleanliness: We have a cleaning specification and frequency policy which our cleaners and staff work to. (It is laminated in each room). An assessment of cleanliness is conducted by the cleaning team and logged.

The Nursing Team also monitor the cleanliness of equipment in consulting rooms and ensure the appropriate cleaning between patients is carried out by the member of the team in that room. This is logged. Each consulting room also has an auditable cleaning log in it where queries can be answered by the specific cleaner who has signed to say they have cleaned the room; this is to enhance the service provided. The surgery has also now switched to online documenting of cleaning of equipment by each clinician in their rooms.

Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use. Instructions for effective handwashing is next to each sink too. Some of our sinks do not meet the latest standards for sinks but we have removed plugs, covered overflows and reminded staff to turn of taps that are not 'hands free' with paper towels to keep patients safe. We have also replaced our liquid soap with wall mounted soap dispensers to ensure cleanliness.

Covid/measles safety measures: As we are now all learning to live alongside COVID it is important to still be mindful of space/masks and handwashing within the surgery.

Measles and Mpox are currently in the news, and we have taken in house measures to provide an isolation room if any suspected cases were to present and all staff are trained with the use of PPE and decontamination.

Air purifiers introduced into clinical rooms without windows.

Training

All our staff receive training in infection prevention and control as it forms part of the induction program.

Clinical staff and non-clinical staff undertake infection control training via Clarity E-Learning and eLearning for health initially and then annually.

Debbie Turner has undertaken specialist training in water safety.

ANP Clare Bolam has undertaken specialist training in Joint injections and Minor surgery and is providing clinics according to demand.

ALL Clinical staff attend quarterly TARGET meetings which includes latest updates on infection control.

Nurse Bev Whitehouse updates clinical staff in any topical Infection control news once she attended IPC updates with the regional team.

Policies

All Infection Prevention and Control related policies are in date for this year.

Policies relating to Infection Prevention and Control are available to all staff on clarity and are reviewed and updated annually and all are amended on an on-going basis as current advice, guidance and legislation changes. Infection Control policies are circulated amongst staff for reading and discussed at clinical meetings when there have been any significant changes.

Responsibility

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

Review date

April 2026

Responsibility for Review

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

Beverley Whitehouse/Debbie Turner

Lead Nurse/Practice manager

For and on behalf of the Adelaide Medical Centre