

Station Drive Surgery

Infection Control Annual Statement

2018-19

Purpose

The Annual statement will be generated each year in May 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 taken
- 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)

Station Drive surgery has a Lead for Infection Prevention and Control: Tonia Meyrick, Practice nurse.

The IPC Lead is supported by: Dr Caron Morton, GP Partner

Tonia Meyrick has attended infection prevention and control training courses and keeps updated on infection prevention practice; she will be attending an infection prevention and control course in November 2019.

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. All significant events are reviewed at the trimonthly practice meetings of the whole practice and learning is cascaded to all relevant staff.

In the past year there have been three significant events related to infection control.

Learning from these events included:

- Reinforcement of existing staff members' training/knowledge of infection control procedures is required
- New staff (cleaners) require more training regarding infection control/waste disposal

As a result of these events:

- Procedures have remained unchanged but additional training given to reinforce infection control procedures

Infection Prevention Audit and Actions

The practice audits the cleaning of the premises throughout the year using a rolling schedule of walk through audits which use the 'Check to Protect' documentation for consistency in the audit.

- Every week one clinical room is audited
- Every month one non-clinical area is audited

The practice was aware that the staff toilets were not off an acceptable standard conducive to the prevention of transmission of infections and therefore these have been refurbished. The refurbishment has include alternations to the layout, installation of anti-slip wipe clean flooring, vanity unit with no plug basin and hands free tap and a hand dryer.

Infection Prevention Audits for 2019-2020

The practice will audit the following:

- Handwashing
- Sharps disposal
- Continuation of the cleaning audits

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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:

Legionella (Water) Risk Assessment: The practice has reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors or staff. This was completed in September 2018.

The practice intends to carry out in 2019-2020 a risk assessment regarding its use of disposal privacy curtains and the frequency of changes to ensure that the curtains do not pose a risk to patients or staff.

The *Health and Social Care Act 2008, Code of Practice on the prevention and control of infections and related guidance* references the national specifications of cleanliness in the NHS which states that 'Curtains/blinds should be visibly clean with no blood or body substances, dust, dirt, debris, stains or spillages.'

Immunisation

As a practice we ensure that all of our staff are up to date with their Hepatitis B immunisations and are offered any occupational health vaccinations applicable to their role i.e. MMR, seasonal influenza. We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Training

All our staff participate in e-learning Infection Prevention and Control training using the Relias software.

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 via GP TeamNet and are reviewed and updated annually. These are also amended on an on-going basis as current advice, guidance and legislation changes. Infection Control policies are made available to staff via GP TeamNet for reading and discussion at meetings.

Review Date

This statement will be reviewed in May 2020.

Responsibility for Review

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