

Infection Control Annual Statement Report

23rd December 2021

Purpose

This annual statement will be generated each year in December 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 undertaken 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 Sleights and Sandsend Medical Practice is Jess Shaw, Practice Nurse

The IPC lead is supported by Caroline Garrard, Practice Manager

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 of 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 that 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 zero significant events raised that related to infection control. There have also been zero complaints made regarding cleanliness or infection control.

b. Infection prevention audit and actions

The annual infection control audit took place on 13.10.2021

Every clinical room was inspected by the IPC lead using a comprehensive checklist and an action plan drawn up with areas of improvement required.

The following points were identified:

- Hand hygiene poster required in Sandsend treatment room (rectified)
- Liquid hand soap required in Sleights kitchen (rectified)
- Wipe clean footstools required in Sleights consultation rooms (To action)
- Non-clinical pedal bin required in Sleights HCA room and consultation room 5 (to action)
- Clinical flooring at skirting board level requires resealing in consultation room 5 (to action)
- Replace cracked ceiling light required in Sleights consultation room 2 (to action)

c. Risk assessments

Risk assessments are carried out so that any risk is minimised to be as low as 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:

- General health & safety
- Covid 19 staff and general procedures
- COSHH
- Cleaning standards
- Fire safety
- Legionnaires disease
- Staff vaccinations
- Staff young person
- Staff wellbeing
- Use of fans

d. Training

In addition to staff being involved in risk assessments and significant events, at Sleights and Sandsend Medical Practice 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
- Cleaning Standards and Schedule
- Safe water
- Health & Safety
- Staff Immunisation
- Staff Occupational Health
- Accident Reporting

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 Sleights and Sandsend Medical Practice to be familiar with this statement and their roles and responsibilities under it.

g. Review

The Practice Manager and IPC lead are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before 23.12.2022

Signed by



Caroline Garrard
Practice Manager
For and on behalf of Sleights and Sandsend Medical Practice