

Annual Statement for Infection Prevention and Control (Primary Care)

It is a requirement of The Health and Social Care Act 2008 Code of Practice on the prevention and

control of infections and related guidance that the Infection Prevention and Control Lead produces an annual statement regarding compliance with good practice on infection prevention and control and makes it available for anyone who wishes to see it, including patients and regulatory authorities.

As best practice, the Annual Statement should be published on the Practice website.

The Annual Statement should provide a short review of any:

• known infection transmission event and actions arising from this.

• audits undertaken and subsequent actions.

• risk assessments undertaken for prevention and control of infection.

• training received by staff; and

• review and update of policies, procedures and guidance.

Infection Control Annual Statement

Purpose

This annual statement will be generated each year in March 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) Leads

The Spa Medical Centre has two Infection Prevention and Control Leads:

➢ Clinical Lead Nurse, GMS.

➢ Wendy Jones, Surgical Services

The IPC Leads are supported by GP Partner Dr Amy Gately.

The IPC leads are responsible for promoting good infection control practice within Spa Medical Centre. They are to ensure that:

* They provide timely advice to colleagues, service users and relatives (where applicable)
* Training is provided regarding the standard principles of infection prevention control, specifically training in hand decontamination, the use of PPE and the safe use of and disposal of sharps (this list is not exhaustive)
* Appropriate supplies of sharps containers, PPE and materials for hand decontamination are available
* Daily and Deep Cleaning Schedules are maintained

Staff at Spa Medical Centre are to support the IPC leads in maintaining high standards of infection prevention and cleanliness.

Promoting these high standards and then providing evidence of the organisation’s compliance is essential for reputational purposes coupled with the need to maintain high levels of both patient and staff safety.

Connie Timmins is the Lead Nurse for Infection Prevention and Control at NHS Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board. The organisation leads are to ensure that any specialist advice is sought as required.

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 in the Quarterly Practice Development Meetings and learning is cascaded to all relevant staff.

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

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by All IPC Leads in Febuary 2024. Any issues that arose have been addressed and a plan of action made.

* Four GP consulting rooms carpets to be removed and hard flooring installed imminently.
* Three HCAs now restock, check for out of date stock and clean hard surfaces in all GP consulting rooms weekly.
* Handyman grout repair and sealant issued identified and drain plug holes corroded and in need of replacement in staff toilets, message placed in his communication book for work to be completed.
* Taps to be descaled – list given to cleaning company supervisor.
* 2 clinical waste bins on order for F23 and G9. Initial replacements delivered damaged in Nov 23 and Feb 2024.
* Downstairs kitchen floor to be replaced with suitable hard flooring, kitchen units and work tops to be replaced, booked for March 2024.
* Nursing corridor walls marked and grubby in need of repainting.
* Cloth non wipeable chairs in some consulting rooms needs to be changed to wipeable.
* Nursing corridor clinical rooms daily cleaning and checks now on Team Net and will eventually be rolled out to the GP rooms.
* Nursing corridor – where floor seams have shrunk, hazard tape applied, awaiting quote for repair.
* Fridge temperature daily recordings now recorded on Team net.
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* Nursing /Paramedic/ HCA Task spreadsheet updated and completed for designated tasks such as restocking of rooms, sharps bin rotation, room audits, and checking expiry dates of sterile stock in all clinical rooms implemented in the Library section Team Net.

Spa Medical Centre plans to undertake the following audits in 2024:

Clinical Room Audit

GMS-Infection Control Audits

Clinical Waste Bin Streaming Audit

 Sharps Bin Audit

Theatre IPC Audit encompassing all rooms in theatre suite

Handwashing Audit

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed.

Training

Annual Competency Check to ensure compliance with

* Clinical Waste Protocol
* Blood Spillage Protocol
* Sharps Bin Protocol
* Handwashing Protocol
* Daily and Deep Cleaning Protocols
* Laundry Protocols
* Donning and Doffing of PPE

Mandatory- Agilio Teamnet Infection Control modules completed annually by all clinical staff.

Next overarching Infection Control Audit, due September 2024.

Policies

Infection Prevention & Control Policy for both Surgical Services and GMS has been reviewed this year and is available for all staff to read on Agilio Team Net

 It is reviewed on an annual basis and updated accordingly in line with current advice, guidance and legislation changes

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

Review date : March 2024

Responsibility for Review : The Infection Prevention and Control Leads and the Practice Manager are responsible for reviewing and producing the Annual Statement.

Clinical Lead Nurse,

Helen Clarke, Practice Manager.

For and on behalf of the Spa Medical Centre