

Infection Control Annual Statement

Purpose

This annual statement will be generated each year in 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 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

Baddow Village Surgery has one Lead for Infection Prevention and Control: Dr Prabha Venkatesh (GP Partner)

The IPC Lead is supported by ANP Sasha, Danielle (Practice Nurse) and Sophie (Health Care Assistant)

Dr Venkatesh has completed Infection Control training and keeps updated on infection prevention

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 three monthly practice meetings and learning is cascaded to all relevant staff.

In the past year there have been two significant events related to infection control. Learning from these event includes:

- All staff to revisit the needle-stick injury policy
- All staff to revisit the IPC policy and review hand washing guidance

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by ANP Sacha and Practice Nurse Danielle in conjunction with Alana Shears, Practice Manager. As a result of the audit, the following things have been changed in Baddow Village Surgery:

- Patient lavatories have been refurbished
- GP and nurse consulting rooms have been redecorated
- Open storage in GP and nurse consulting rooms has been removed
- Patient waiting area has been redecorated
- Patient chairs in the waiting room have been replaced to the correct standard and wipe clean
- IPC audit of all clinical rooms, patient areas and dispensary
- hand washing audit was carried out in December 2018
- audit on minor surgery has been completed
- vaccines audit has been completed

Audits to be carried out in following year:

- Hand hygiene audit
- Asepsis competencies for all nurses and HCAs
- Domestic cleaning audit
- IPC audit of all clinical rooms and patient areas

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 a scheduled water risk assessment on 14 February 2019 to ensure that the water supply does not pose a risk to patients, visitors or staff.

Water temperatures are checked monthly and water flushing is carried out weekly

Immunisation:

As a practice we ensure that all of our clinical staff are up to date with their Hepatitis B immunisations.

All staff are offered any occupational health vaccinations applicable to their role (i.e. Seasonal Flu). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Other examples:

Curtains:

The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced as recommended.

The window blinds are very low risk and therefore do not require a particular cleaning regime other than regular vacuuming to prevent build-up of dust. We do wash the blinds on a bi-annual basis and they are due for cleaning in July 2019.

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 housekeepers and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the surgery including cleanliness of equipment.

Training

All staff complete annual training in infection prevention and control.

Policies

All Infection Prevention and Control related policies were reviewed in November 2018. Policies relating to Infection Prevention and Control are available to all staff and are reviewed three-early and all are amended on an on-going basis as appropriate when current advice, guidance and legislation changes dictate. Infection Control policies are circulated amongst staff for reading whenever there is an update.

Responsibility

It is the responsibility of each individual 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.

Agreed by Dr Prabha Venkatesh 26 February 2019