

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) Lead

The New Forest Central Medical Group has 1 Lead for Infection Prevention and Control: Dr Melissa Carrell

The IPC Lead is supported by: Rosalie Torah and Ellie Douse

Dr Melissa Carrell has attended an IPC Lead training course in 2012 and keeps updated on infection prevention practice. Rosalie Torah and Ellie Douse completed an online course in November 2018 and they both attend regular infection control forum meetings every month.

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 Partner 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 audits were completed by Rosalie Torah and Ellie Douse.

As a result of the October 2019 audit, we have found that we are >90% compliant and we will continue to carry out good infection control standards. The infection control audits continue to be managed and actioned by Rosalie Torah and Ellie Douse.

The New Forest Central Medical Group plan to undertake the following audits in 2020/21:

- Annual Infection Prevention and Control audit



- Domestic Cleaning audit
- Hand hygiene audit
- Hand hygiene training for all staff

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 carries out weekly checks to ensure that the water supply does not pose a risk to patients, visitors or staff. This involves testing the water temperature and flushing 'dead legs'.

Immunisation: As a practice we ensure that all of our 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). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Curtains: The NHS Cleaning Specifications advise that couch 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. 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. 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.

Cleaning specifications, frequencies and cleanliness: We also have a cleaning specification and frequency policy which our cleaners 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 our staff receives regular training in Health and Safety, including infection prevention and control.

Infection Control training is carried out for clinical and non-clinical staff in 'lunch for learning' sessions or completing an online course. New staff members are made aware of the procedures for dealing with specimens and the use of hand gel etc.

Dr Mark Orton has undertaken specialist training in Minor Surgery and Joint Injections

Dr Ian Fitzsimmons has undertaken specialist training in Joint Injections.

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 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 meetings on an annual basis.



**New Forest
Central Medical Group**
SWAY & BROCKENHURST SURGERIES

Responsibility

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

Review date

March 2021

Responsibility for Review

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

A handwritten signature in black ink, appearing to read 'Naomi Evans'.

Naomi Evans

Assistant Practice Manager

For and on behalf of the New Forest Central Medical Group