

## Completing the 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 with regard to 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.

Below is a suggested template for the Annual Statement compiled from national guidance and examples of best practice found on the internet. Practices can (and should) adapt the template and add further detail/headings/examples but the five key headings (above) must be included. If the practice is unable to complete one or more of the five key headings, it is likely that the practice are not compliant with the health and Social Care Act.



# New Forest Central Medical Group

SWAY & BROCKENHURST SURGERIES

## Infection Control Annual Statement

### Purpose

This annual statement will be generated each year in **July** 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: **Practice Nurse Susan Fox**.

The IPC Lead is supported by: **Rosalie Torah** (HCA) and **Helena MacDonald** (Ops Manager)

**Susan Fox** has attended an IPC Lead training course in **September 2024** and keeps updated on infection prevention practice.

### 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 **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 audit was completed by **Susan Fox** in **November 2024, with a further follow up completed in April 2025**.

As a result of the audit, the following things have been changed in New Forest Central Medical Group:

- Actions given to Cleaning Contractor and close monitoring of their compliance with CQC standards
- Replacement of general waste bins in clinical areas to ensure pedal only bins.

- Maintenance of light fittings and patient toilets
- Replacement of medical trolleys
- Updating and additional signage in staff and public areas.

An **audit** on **hand washing** was undertaken in **June 2025** This will be discussed at a monthly clinical/partner meeting.

**Legionella Sampling** carried out in **March 2025** (all clear)

**New Forest Central Medical Group** plan to undertake the following audits in **2025/2026**:

- Annual Infection Prevention and Control audit (annually)
- Cold Chain audit (annually)
- Domestic Cleaning audit
- Hand hygiene audit (annually)
- Phlebotomy audit (biannually)
- Legionella Testing (annually)

## 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 conducted/reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors or staff.

**Immunisation:** As a practice we ensure that all appropriate staff are up to date with their Hepatitis B Immunisation and offered any occupational health vaccinations applicable to their role (i.e. MMR, Seasonal Flu, COVID). 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 state the 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**. 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. 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:** We have no toys in the practice.

## Training

All our staff receive **regular** training in infection prevention and control.

Clinicians complete the e-learning for health modules (Level 1 & 2) every year.

Nonclinical staff complete the e-learning for health module Level 1 every 3 years.

**Susan Fox** has undertaken specialist training in Infection Control (Infection Prevention and Control MOOC 2024-25 – issued by University of Bangor on 11<sup>th</sup> November 2024)

## 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.

## Responsibility

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

## Reviewed on

**03/07/2025**

## Responsibility for Review

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

**Infection Control Lead:**

**Susan Fox – Practice Nurse**

For and on behalf of the **New Forest Central Medical Group**