

## **Infection Control Annual Statement**

Fressingfield Medical Centre

01/04/2020

### **Purpose**

This annual statement will be generated each year in April 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 Fressingfield Medical Centre is Suzanne Stones, Lead Practice Nurse

The IPC Lead is supported by Jacquie Andrew, Practice Nurse and Katie Civil, Practice Manager who offers managerial support.

#### **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 in 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 0 significant events raised that related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

## **b. Infection prevention audit and actions**

We carried out substantive infection control audits across both of our sites during November 2019, there were a total of 30 action points which were discussed within the practice and solutions implemented for all points.

The action points and outcomes of the audit were discussed within clinical meetings and communicated across the practice team as infection control is a shared responsibility.

The practice meets with cleaning companies on a regular basis to assess cleaning standards and review the monthly audits of cleaning standards (although due to Covid restrictions and guidance that the Cleaning Company is following, monthly meetings and audits has not always been possible during the Covid outbreak).

## **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 which can identify best practice can be established and then followed.

In the last year the following risk assessments were carried out/reviewed:

- General IPC risks
- Staffing, new joiners and ongoing training
- COSHH
- Cleaning standards
- Curtain cleaning or changes
- Sharps (as part of the infection control audit)
- Water safety (Legionella)

In the next year, the following risk assessment will also be reviewed:

All Risk Assessments pertaining to practice safety are reviewed annually.

## **d. Training**

In addition to staff being involved in risk assessments and significant events, at Fressingfield Medical Centre all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually.

## **e. Policies and procedures**

Date of Last Review: August 2020  
Issue 3.0

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- Infection Control Policy
- Cleaning Protocol
- Clinical Waste Management Protocol
- Various protocols for cleaning medical equipment

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.

## **Responsibility**

It is the responsibility of all staff members at Fressingfield Medical Centre to be familiar with this statement and their roles and responsibilities under it.

## **Review**

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

This annual statement will be updated on or before 31/03/2021

## **Signed by**

Katie Civil  
For and on behalf of Fressingfield Medical Centre