Infection Control Annual Statement 2023

Manor Field Surgery

This annual statement will be generated each year in August 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

Manor Field Surgery has two leads for Infection Prevention and Control:

- Karen Yakub: ANP/Nurse manager
- Jayne Docherty: HCA

The IPC Leads are supported by: Dr Mellor – GP Partner,

Both Karen and Jayne have attended an accredited IPC Lead training course in and keep regularly 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 regular staff 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 Karen and Jayne in August 2023

As a result of the recent audit, the following things have been changed in Manor Field Surgery

- Damaged patient's chairs in the reception & waiting room are to be replaced
- Curtains in the clinical rooms have been replaced with disposables

 Damaged skirting has been addressed with the building manager to be repaired in several of our clinical areas

Manor Field Surgery plan to undertake the following audits in 2023/24

- Annual Infection Prevention and Control audit
- Hand hygiene audit
- Monthly Sharps bin audit
- Weekly/monthly cleaning logs spot checks
- Cold chain audit

Risk Assessments

Risk assessments are carried out annually. Risk assessments were last carried out / reviewed: September 2023

Legionella (Water) Risk Assessment: The practice has had 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 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 and Covid vaccinations). 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 now use disposable curtains and ensure they are on a schedule to be changed every 6 months. The window blinds are very low risk and therefore do not require a particular cleaning regime other than regular damp dusting to prevent build-up of dust. The modesty curtains although handled by clinicians are never normally 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 early if visibly soiled.

Cleaning specifications, frequencies, and cleanliness

We also have a cleaning specification and frequency policy which our cleaning team and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the surgery.

Hand washing sinks

The practice has clinical hand washing sinks in every room for staff to use.

Training

- All our staff receive annual training in infection prevention and control
- All clinical and non-clinical staff have completed the eLfH infection control training level 1 for non-clinical staff and level 2 for clinical staff
- All clinical and non-clinical staff have completed recent updated training in waste management.

Policies

All Infection Prevention and Control related policies are in date for this year 2023

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 at least an annual basis.

Responsibility

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

Review date

August 2024

Responsibility for Review

The Infection Prevention and Control Leads Karen Yakub and Jayne Docherty are responsible for reviewing and producing the Annual Statement for and on behalf of Manor Field Surgery