

Infection Control Annual Statement

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*. 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 Waterside Medical Practice has 1 Lead for Infection Prevention and Control: Emma Lewis, HCA.

The IPC Lead is supported by: Alice Forsdick, Operations Manager.

Emma attended an IPC Lead training course in 2026 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 fortnightly 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

An audit on Minor Surgery will be undertaken by Emma in May.

An audit on hand washing was undertaken in April. This was discussed at the clinical staff meeting.

The Waterside Medical Practice plan to undertake the following audits in 2026:

- Hand hygiene
- Minor Surgery
- Nurse trolleys, doctors boxes
- PPE availability and appropriate use (including curtains in clinical rooms)
- Non clinical areas
- Staff IPC training

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 reviewed:

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, 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 provide only wipeable toys. Toys are kept in a sealed box in reception. If the seal is broken, toys will be cleaned and the box will be resealed.

Cleanliness: We have cleaning schedules in all clinical rooms which are completed every day and checked by the IPC team on a weekly basis. We also have cleaning schedules in reception for the blood pressure machine and the scales at the entrance to the surgery.

Training

All our staff receive training in infection prevention and control.

All staff (clinical and non clinical) undertake IPC Level 1 training every 3 years. This is an e-learning module and assessment.

Our clinical staff undertake IPC Level 2 training every year. This is also an e-learning module and assessment.

Policies

Our Infection Prevention and Control policy is up to date.

The Infection Prevent and Control Policy is available to all staff and is reviewed and updated bi-annually, and amended on an ongoing basis is current advice, guidance and legislation changes

Responsibility

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

Review date

15th April 2027

Responsibility for Review

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