

# The Glenfield Surgery

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## Infection Control Annual Statement

(April 2019 -March 2020)

### **1. PURPOSE**

In line with the Health and Social Care Act 2008: Code of practice on prevention and control of infection (July 2015) and its related guidance, this Annual Statement will be generated each year. It will summarise:

- Any infection transmission incidents and any lessons learnt and action taken
- Details of any infection prevention and control (IPC) audits undertaken and any subsequent actions taken arising from these audits
- Details of any issues that may challenge infection prevention and control including risk assessment undertaken and subsequent actions implemented as a result
- Details of staff IPC training
- Details of review and update of IPC policies, procedures and guidance
- To highlight priorities for the upcoming year.

### **2. INFECTION CONTROL LEAD**

The Infection Control Lead will enable the integration of Infection Control principles into standards of care within the practice, by acting as a link between the surgery and Leicester, Leicestershire and Rutland Infection Control Team. They will be the first point of contact for practice staff in respect of Infection Control issues. They will help create and maintain an environment which will ensure the safety of the patient / client, carers, visitors and health care workers in relation to Healthcare Associated Infection (HCAI).

The Infection Control Lead will carry out the following within the practice:

- Increase awareness of Infection Control issues amongst staff and clients
- Help motivate colleagues to improve practice
- Improve local implementation of Infection Control policies
- Ensure that practice based Infection Control audits are undertaken
- Assist in the education of colleagues
- Help identify any Infection Control problems within the practice and work to resolve these, where necessary in conjunction with the local Infection Control Team
- Act as a role model within the practice
- Disseminate key Infection Control messages to their colleagues within the practice

Practice Infection Control Lead: Jo Marlow

Environment and Decontamination Lead: Jo Marlow

### 3. SIGNIFICANT EVENTS

There have been **(no) significant events** reported regarding infection control issues in the period covered by this report.

### 4. AUDITS / RISK ASSESSMENT

The following audits/ assessments were carried out in the practice

- Infection control annual audit
  - Carried Out:  
**12<sup>th</sup> June 2019 – No Incidents**
  - Audit Key findings/ Recommendations / Updates  
**Nil**
  - Infection Control and cleaning added to the practice staff meeting as a regular agenda.  
**Yes**
  - Annual statement produced annually and available on the website.  
**Yes**
  - The practice has a copy of the legionella risk assessment report including the recommendations for legionella control in the premises.  
**Yes**
  - Suggestion box available in the practice for patients to make comments, feedback or express concerns with regards to infection control issues such as cleanliness of the premises.  
**Yes**
  - Practice has a policy and/or procedure in place to guide staff including receptionist to isolate patients with possible infectious rashes i.e. chicken pox.  
**Yes**

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- The practice should be assured that all staff members are aware of the correct procedure following a needle stick injury. The management of inoculation injuries should to be included as an agenda item at the next staff meeting

## Yes

- Environmental cleaning audit
  - Audit period. **This is done on a 6 monthly basis.**

## 5. STAFF TRAINING

The infection Control Lead and Link Nurse for the Practice have attended Infection Control training in the last year. All other clinicians and members of admin staff have completed Infection Control training on Blue Stream. As part of new recruitment, all new members of staff are asked to complete an Infection Control Assessment Sheet.

## 6. POLICIES, PROTOCOLS AND GUIDELINES

The Policies below have been updated this Year. They are reviewed annually or earlier when appropriate due to changes in regulations and evidence based guidance.

- Standard Infection Control Precautions
- Aseptic Technique
- Isolation of Service Users with an Infection
- Safe Handling and Disposal of Sharps
- Prevention and Management of Occupational Exposure to Blood and Body Fluids (including sharps injuries)
- Safe Handling and Disposal of Waste
- Packaging and Handling of Specimens
- Immunisation of Patients
- Decontamination of Re-usable Medical Devices and Equipment
- Single Use Medical Devices
- Outbreaks of Infection / Communicable Disease/ Isolation of Infective Patients
- Reporting of Infections to the Health Protection Agency or Local Authority
- CJD / vCJD – handling of instruments and devices
- Environmental Cleaning
- Uniform Policy / Dress Code
- Antimicrobial Prescribing

## 7. PRIORITIES AND KEY POINTS FOR THE NEXT 12 MONTHS

Clinical Lead will update after audits.