

Infection Control Annual Statement

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 regarding compliance with good practice on infection prevention and control and cleanliness and makes it available for anyone who wishes to see it, including patients and regulatory authorities

- 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 any staff training.
- Any review and update of policies, procedures and guidelines.

Infection Control (IPC) Lead

Rebecca Sansbury, Practice Nurse

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/ learning events are reviewed in the monthly practice meetings and learning is cascaded to all relevant staff.

There have been no significant events raised that related to infection control in the last Year.

Infection Prevention Audits and Actions

The practice carries out an Infection Prevention and Control audit every 12 months the last audit was completed in July 2026. This involves a comprehensive review of all aspects of infection prevention control within the surgery.

External Infection Prevention and Control audits take place biannual the last inspection was completed in September 2025 by the 3 Boroughs IPC Team

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.

- Legionella (Water) Risk Assessments: The water safety risk assessment is to ensure that the water supply does not pose a risk to patients, visitors, or staff.
- Cleaning specifications, frequencies, and cleanliness: we work the cleaning company and with their cleaners to ensure that the surgery is kept as clean as possible. Monthly assessments of cleaning processes are completed.
- Immunisations: As a practice we ensure that all our clinical 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). We take part in the National Immunisation campaigns for patients and offer vaccinations in the surgery and via home visits to our patient population.
- Curtains: Disposable curtains are used in clinical rooms and are changed every 6 months in the treatment rooms. All curtains are regularly reviewed and changed more frequently if damaged or soiled.
- Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use. We have wall mounted liquid soap dispensers and elbow taps on all sinks.

Training

All our staff undertake annual Infection Control training on eLearning for Health and our Infection Prevention Control lead attends regular updates with the 3 Boroughs IPC Team.

Policies

All Infection Prevention Control related policies are in date.

Policies relating to Infection Control are available to all staff and are reviewed and updated -biannual or as appropriate, and all are amended on an on-going basis as current advice, guidance and legislation changes. Infection Control policies are available on the Practice shared J drive for all staff to read.

Responsibility

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

Review Date

September 2027

Responsibility for Review

The Infection Prevention and Control Lead is responsible for reviewing and producing the Annual Statement.