

Infection Control Annual Statement February 2020

Purpose

This annual statement will be generated each year in January 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 waterfront and Solent surgery has a Lead for Infection Prevention and Control: Joanne Bowles, Practice Nurse.

The IPC Lead is supported by: Vicky Etheridge PA to the Practice Manager and Dr Andy Hoyle GP partner.

Joanne Bowles has attended an IPC Lead training course in 2017 and keeps updated on infection prevention practice by attending quarterly IC forums.

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 bimonthly clinical 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 Joanne Bowles and Vicky Etheridge in January 2020

As a result of the audit, the following things have been changed in Waterfront surgery

- Introduced an Isolation box which contains Aprons, Masks, goggles, gloves, spills kit and detergent for decontamination, this will be stored behind reception.

- To aim to have all posters laminated in all clinical rooms and in the waiting room, so they can be wiped clean.
- To aim to have all sharps box's mounted to the wall for patient safety.

An audit on Minor Surgery is planned for this year

No infections were reported for patients who had had minor surgery at the Waterfront surgery

One infection was reported which occurred as a result of a patient having a joint injection at the Waterfront surgery

The practice has not changed as a direct result from this infection as this infection was considered to be unavoidable. But we do take appropriate measures when undertaking a joint injection for example we use a non-touch aseptic technique, we use a sterile swab to clean the vial, and prepare the skin with chlorhexidine and alcohol.

The Waterfront surgery plan to undertake the following audits in 2020

- Annual Infection Prevention and Control audit
- Minor Surgery outcomes audit
- Domestic Cleaning audit
- Hand hygiene audit

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 / reviewed:

Legionella (Water) Risk Assessment: The practice has 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 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). 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: NHS Cleaning Specifications recommend that all toys are cleaned regularly and we therefore provide only wipeable toys in waiting / consultation rooms.

Cleaning specifications, frequencies and cleanliness: We have added a cleaning specification and frequency policy poster in the waiting room to inform our patients of what they can expect in the way of cleanliness. We

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

Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use. Some of our sinks do not meet the latest standards for sinks but we have removed plugs, covered overflows and reminded staff to turn off taps that are not 'hands free' with paper towels to keep patients safe. We have also replaced our liquid soap with wall mounted soap dispensers to ensure cleanliness.

Training

All our staff receives yearly training in infection prevention and control.

All clinical staff including GP's attended face to face training with a training presentation in July 2019

All Non clinical staff attended face to face training with a training presentation in July 2019

The infection control lead nurse attends quarterly practice nurse forum sessions relating to infection control.

Policies

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

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 an annual basis.

Responsibility

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

Review date

12.02.2020

Responsibility for Review

The Infection Prevention and Control Lead and the GP Partner are responsible for reviewing and producing the Annual Statement.

Joanne Bowles, Lead nurse for PIC and Practice Nurse

For and on behalf of the Waterfront and Solent Surgery