NEWPORT SURGERY

Infection prevention and control annual statement.

 **June 2024.**

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 with regards to compliance and good practice on infection prevention and control and makes it available for anyone who wishes to see it, including patients and regular authorities. As best practice, the Annual Statement should be published on the Practice website.

The Annual Statement should provide a short review of any:

• Known infection transmission event and actions arising from this;

• Audits undertaken and subsequent actions;

• Risk assessments undertaken for prevent and control of infection;

• Training received by staff and;

• Review and update of policies, procedures and guidance.

Infection Control Annual Statement

**Purpose;**

This annual statement will be generated each year 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.*

-Any infection transmission incidents and actions taken

-Details of any infection control audits

-Details of any risk assessments undertaken for the prevention and control of infection

-Details of staff training

-Review and update of any policies, procedures and guidelines

**Infections Prevention and Control (IPC) Lead**

-Jennifer Styles-Advanced Clinical Practitioner, Newport Surgery.

Infection transmission incidents

-In the past year there has been one significant event raised to the ICS infection control team, which was investigated by the ICS infection control team and deemed to have started outside of the surgery in the community and was not spread throughout staff/surgery, this was related to a COVID 19 outbreak amongst staff.

We have an isolation room within the practice, potentially contagious patients are offered a telephone consultation with a clinician prior to a face to face assessment.

**Infection prevention audit and actions**

-All staff have annual infection control training via Bluestream training which is mandatory.

-Laminated posters are available in the treatment room providing information on managing needlestick injuries.

-Sharps bins are dated and signed.

-Daily cleaning schedules are in every clinical room to ensure high standards of cleanliness are maintained.

-Stock checks are undertaken weekly.

-Curtains are changed every 6 months in clinical rooms.

-Fridge temperature and cleaning schedules are in use.

-Hand washing audits were undertaken monthly.

-Handwashing posters are available at every handwashing sink.

-PPE donning and doffing posters are available in every clinical room.

-Staff have received up to date information regarding Newport surgeries policies and expectations.

-Legionella water risk assessment takes place every year.

-Sinks that are not for handwashing are signed as such.

-All furniture is wipeable.

**Policies**

-All policies are up to date and are available to staff both on the shared drive and printed copies

Responsibilities

It is the responsibility of all staff to comply with the infection control policies