

## Ixworth Surgery

### Infection Control Annual Statement

#### **Introduction**

The Practice is committed to the control of infection. Our aim is to keep a clean and tidy surgery to promote a safe environment for staff, patients and visitors in accordance with national and local guidelines. This statement has been produced in line with the Health and Social Care Act 2008 and details the practice's compliance with guidance and our Infection Control Action Plan for the coming year.

#### **Purpose**

The annual statement will be generated each year and will summarise:

- Details of any infection transmission incidents and action taken
- Details of any infection control audits undertaken and action taken
- Details of any infection control risk assessments undertaken
- Staff training
- Review and update of policies/procedures/guidelines which may be required

All staff at Ixworth Surgery are responsible for maintaining high standards of infection prevention, we have allocated infection control leads within the Surgery to oversee and monitor this.

**Lead GP**

**Dr Karoline Chan**

**Lead Nurse**

**Ruth Bescoby**

We have adopted the CCG 'Infection Prevention and Control Manual' 2017 updated version for the use within our Surgery. This has been written by the Infection control lead for the CCG. All staff have access to this policy as either a hard copy in the infection control folder or electronically on our Surgery hard drive.

**CCG Infection Control Lead**

**Lynne Fuller**

We would ask that if any of you have any concerns regarding cleanliness or infection control that you speak with a member of our staff.

#### **Audits and Risk Assessments**

Following on from our external infection control audit in 2016 we have now completed our 2017 audit using a similar format, we have in the past year improved from 68% to 86.62%, this is a great

improvement, we have followed the action plan devised for us and the evidence of this can be seen in our overall achievement for 2017, it exceeds the 75% target which we set ourselves. In 9 of the 12 sections audited we are scoring in the high 80s-100%. This has been a team effort.

We continue to employ Minster as our cleaning company, we now have 2 regular cleaners, Paul and Rob who are doing an amazing job ensuring that our cleaning meets CQC criteria; they audit their work monthly and report back to our practice manager.

We have had a legionella risk assessment carried out.

An annual audit has been undertaken of infection transmission within the surgery in relation to Minor ops/surgery. We were found to have no incidents relating to this.

We will also be carrying out a hand hygiene audit in the coming months.

Our action plan following our most recent audit is more about monitoring and maintaining the standards we have achieved.

### **Staff Training**

Ruth has been on a 2 day Infection Prevention and Control Link Practitioner Course this year.

All staff have access to the CCG e-learning website and we aim to have all our clinical staff training completed within the next 6 months. Non-clinical staff will be able to complete an e-learning module about infection control.

### **Policies/procedures/guidelines**

Our CCG policy is now a completed version and has been updated this year already.

We have written a cold chain policy, specimen handling policy and carried out several risk assessments e.g. sharps, flooring.

We are producing a medical devices folder which will detail how each piece of re-useable equipment should be cleaned.

Please could we remind you that if you are asked to provide a specimen that you use the container provided for you. Please ensure that this is securely closed and has the appropriate paperwork submitted. Samples provided in inappropriate containers will be rejected by the surgery.

