

Infection Control Annual Statement 2023/2024

Purpose

The annual statement will be generated each year. It will summarise:

- Any learning connected to cases of *C. difficile* infection and *Meticillin-resistant Staphylococcus aureus* blood stream infections and action undertaken;
- The annual infection control audit summary and actions undertaken:
- Infection Control risk assessments and actions undertaken;
- Details of staff training (both as part of induction and annual training) with regards to infection prevention & control;
- Details of infection control advice to patients;
- Any review and update of policies, procedures, and guidelines.

Background:

Waddesdon Surgery, Lead for Infection Prevention /Control is Cheryl Walker, role Advanced Nurse Practitioner, who is supported by Janet Higgins, role Practice Manager, Shirley Westall, role Practice Nurse and Dr Kate Preston role GP Partner.

This team keeps updated with infection prevention & control practices and share necessary information with staff and patients throughout the year.

Significant events:

Detailed post-infection reviews are carried out across the whole health economy for cases of *C. difficile* infection and *Meticillin Resistant Staphylococcus aureus* (MRSA) blood stream infections. This includes reviewing the care given by the GP and other primary care colleagues. Any learning is identified and fed back to the surgery for actioning.

This year the surgery has been involved in no *C. difficile* case reviews and no MRSA blood stream infection reviews.

Audits:

Detail what audits were undertaken and by whom and any key changes to practice implemented as a result.

Audit	Date	Auditor/s	Key changes
Infection Prevention	22/11/2023	Cheryl	Update signage, and
Control and Efficacy		Walker/	replace some equipment/
		Janet	blinds
		Higgins	
Hand Hygiene	25/10/2023	Janet	None
, ,		Higgins	
Aseptic technique and	12/12/2023	Kate	Knowledge of ANTT and
Decontamination Audit		Preston	compliance adhered to.

National Standards of Healthcare Cleanliness Technical	16/11/2023	Kate Preston	Cleaning improved	standards

Infection Control Risk Assessments:

Regular Infection Control risk assessments are undertaken to minimise the risk of infection and to ensure the safety of patients and staff. The following Infection Control risk assessments have been completed in the past year and appropriate actions have been taken:

- COVID-19 outbreak
- Control of substances hazardous to health (COSHH)
- Disposal of waste
- Healthcare-associated infections (HCAIs) and occupational infections
- Minor surgery
- Sharps injury
- Use of personal protective clothing/equipment
- Risk of body fluid spills
- Legionella risk assessment
- Buildings and facilities that do not meet IPC best practice

NB – only list risk assessments that have been completed in the past 12-months & ensure there is evidence of actions taken as a result (as the CQC may ask to see these documents). List any Cold Chain events and actions taken.

Staff training:

6 new staff joined this Surgery in the past 12-months and received infection control, hand-washing, and donning and doffing training within 3 months of employment.

100% of the practice patient-facing staff (clinical and reception staff) completed their annual infection prevention & control update training in person.

100% of the practice non-patient-facing staff completed their 3-yearly/annual infection prevention & control update training.

The IPC nurse/practitioner attended training updates for their role. Training is provided by the BOB ICB Webinars.

Infection Control Advice to Patients:

Patients are encouraged to use the alcohol hand gel/sanitiser dispensers that are available throughout the Medical Centre/Surgery. Additional IPC measures on hands, face, space have been implemented due to the COVID-19 Pandemic.

There are leaflets/posters available in the Surgery -regarding:

The second of th			
MRSA	Chickenpox & shingles		
COVID-19	Norovirus		
Influenza Recognising symptoms of TB			
The importance of immunisations (e.g. in childhood and preparation for overseas travel)			

Policies, procedures, and guidelines.

Documents related to infection prevention & control are available to all and reviewed in line with national and local guidance changes and are updated 2-yearly (or sooner in the event on new guidance).

Review

The IPC lead and Cheryl Walker ANP are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before 25/11/2024.

Signed by



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Janet Higgins and Cheryl Walker For and on behalf of Waddesdon Surgery