# IPC Annual Statement Report

Waddesdon Surgery

16/06/25

**Purpose**

This annual statement will be generated each year in May, in accordance with the requirements of the [Health and Social Care Act 2008 Code of Practice](https://www.gov.uk/government/publications/the-health-and-social-care-act-2008-code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance) on the prevention and control of infections and related guidance. The report will be published on the practice website and will include the following summary:

* 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 carried out, and actions undertaken
* Details of any risk assessments undertaken for the 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 lead for infection prevention and control at Waddesdon Surgery is Janet Higgins.

The IPC lead is supported by Shirly Westall.

**a. Infection transmission incidents (significant events)**

Significant events involve examples of good practice as well as challenging events.

Positive events are discussed at meetings to allow all staff to be appraised in areas of best practice.

Negative events are managed by the staff member who either identified or was advised of any potential shortcoming. This person will complete a Significant Event Analysis (SEA) form which commences an investigation process to establish what can be learnt and to indicate changes that might lead to future improvements.

All significant events are reviewed and discussed at several meetings each month. Any learning points are cascaded to all relevant staff where an action plan, including audits or policy review, may follow.

In the past years, there have been no significant events raised which related to infection control. There have also been no complaints made regarding cleanliness or infection control.

**b. Infection prevention audit and actions**

All staff are trained on Blue stream and are responsible for their areas of infection control. There is a system in place to inform the cleaners of any requirements and the staff fill in audits for cleaning.

We also document cleaning and risk assessments.

The audits are documented on team net and paper files are copied onto N drive Infection control.

**c. Risk assessments**

Risk assessments are carried out so that any risk is minimised and made to be as low as is reasonably practicable. Additionally, a risk assessment that can identify best practice can be established and then followed.

In the last year, the following risk assessments were carried out/reviewed:

The clinical beds were assessed, and we have a rolling replacement with a bariatric clinical bed has been sourced and assessed for functionality.

Phlebotomy room has been assessed by plumber and a quote is being done to replace sink and taps, measured for a bed.

All blinds have been measured for replacement and supplier contacted. Sample being sent.

Curtains are on a rolling check via teamnet.

Trollies to source getting the tray resprayed.

Cleaning company have been informed of short falls in standards of cleaning and are currently putting in place changes.

A suggested list, but one that is not exhaustive, could contain the following:

* General IPC risks
* Staffing, new joiners and ongoing training
* COSHH
* Cleaning standards
* Privacy curtain cleaning or changes
* Staff vaccinations
* Infrastructure changes
* Sharps
* Water safety
* Assistance dogs

**d. Training**

In addition to staff being involved in risk assessments and significant events, at Waddesdon Surgery, all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually.

Various elements of IPC training in the previous year have been delivered at the following times: Protected Learning Times

**e. Policies and procedures**

The infection prevention and control-related policies and procedures that have been written, updated, or reviewed in the last year include, but are not limited, to:

Cleaning standards policy

Clinical waste management protocol

Cold chain policy

Disposable instruments policy

Face Coverings in Waddesdon Surgery

Needlestick injuries Protocol

Notification of infectious diseases

Oxygen and Defibrillator check protocol

Oxygen handling and storage protocol

Refrigeration of pharmaceutical products protocol

Sharps safe use and disposal protocol.

Storage of non-controlled drugs and Vaccine.

Staff immunisation policy

Policies relating to infection prevention and control are available to all staff and are reviewed and updated annually. Additionally, all policies are amended on an ongoing basis as per current advice, guidance, and legislation changes.

**f. Responsibility**

It is the responsibility of all staff members at Waddesdon Surgery to be familiar with this statement, and their roles and responsibilities under it.

**g. Review**

The IPC lead and Shirley Westall are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before 16/06/26.

**Signed by**

Janet Higgins and Shirley Westall

For and on behalf of Waddesdon Surgery