

Infection Control Annual Statement

2020-2021

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*. It will summarise:

- Any infection transmission incidents and any action taken (these will have been recorded in accordance with our Significant Event procedure)
- Details of any infection control audits undertaken and actions taken.
- Details of any infection control risk assessments undertaken.
- Details of staff training.
- Any review and update of policies, procedures and guidelines

Background

Grove House Surgery has 2 leads for infection, prevention control.

- Clinical lead – Perdita Stone, Practice Nurse
- Environmental lead – Rachel Witcombe, Practice Manager

Infection transmission incidents

In the past year what has been challenging is the Coronavirus (COVID-19) pandemic. This has changed the way we are consulting with our patients. Following government directives and social distancing policies we have had to minimise the amount of patients we can see at the surgery. The surgery is following guidance on PPE use and strict infection control measures are in place.

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 monthly Clinical Meetings and learning is cascaded to all relevant staff.

Audits

A hand hygiene audit was performed by in June/July 2020. This was to identify poor or incorrect hand washing. This highlighted the importance of hand washing for all staff involved in patient care and the recommended method and procedure to follow when washing hands. A further handwashing audit has been planned for all staff in June 2021.

A sharps audit was performed in July 2020, this identified that the temporary closure flap on several of our bins was not in use. Following this a risk assessment was undertaken and it was established that all our bins are placed on a stable surface away from the edge of the counter and all out needles have safety devices so therefore it is a low risk.

A waste audit was also undertaken in July 2020 to ascertain if we are appropriately using our clinical waste bins. It was identified that all our clinical bins are being used appropriately.

Lizzy House (Nurse Practitioner) and Nurse Perdita Stone used an audit tool for a full clinical infection control inspection on the premises

This included:

1. Hand washing facilities. At GHS we have clinical hand wash basins with overflow with the faucet in line with the water outlet.
2. Clinical practice including specimen handling and equipment.
3. Sharps handling and disposal.
4. Waste Management.
5. Decontamination of equipment.
6. Environment including checking of cleanliness. We redecorated most of the clinical rooms and the waiting area 2 years ago. Our carpets are regularly deep cleaned and we have hard flooring in the clinical rooms.
7. Cleaning products and ensuring with have data sheets of all our products in case of unforeseen accidents.
8. Specimen handling.
9. Vaccine transport and storage.

Staff Training

All staff receives annual training in infection prevention and control. Due to social distancing measures in place this has been completed online.

All staff watched an online video on handwashing and then they were assessed by Nurse Stone in June 2020.

Lizzy House and Rachel Witcombe will provide infection, prevention and control induction training to all new members of staff.

Policies, Procedures, Guidelines

All infection control policies are formally reviewed annually, however all are amended on an ongoing basis as current advice changes, or need arises. All our policies have been recently updated to our clinical systems so all staff can easily access.

Risk Assessments

Sharps risk assessment- July 2020

Venepuncture risk assessment- July 2020

Sluice risk assessment- July 2020

Sink risk assessment- July 2020

Covid 19 risk assessment for reception and admin staff- May 2020

Audits undertaken 2019

Infection Control Audit – Nurse Perdita Stone and Lizzy House – June 2020

Hand Hygiene staff audit of hand washing technique– June and July 2020

Waste Audit- April 2019

Sharps Audit- April 2019

Responsibility

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

Review Date

July 2021

Responsibility for Review

Lizzy House ANP

