**New Islington Medical practice**

**Infection Control Annual Statement**

**Written March 2022**

**Covering 2021/22**

Purpose

This annual statement will be generated each year in March 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 details:

* 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 undertaken and actions undertaken
* Details of any risk assessments undertaken for prevention and control of infection
* Details of staff training
* Any review and update of policies, procedures and guidelines

Infection Prevention and Control (IPC) Lead

New Islington medical practice has 3 Leads for Infection Prevention and Control:

* The Nursing IPC lead for the practice is: Darryl (Lead Nurse)

* The Medical IPC lead for the practice is: Dr Ali (Senior Partner)

* Non clinical IPC Lead for the practice is: Deepa Turner (Practice Manager)

Infection transmission incidents (Significant Events)

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 six monthly with Estates Manager and Nursing Lead with learning cascaded to all relevant staff.

In the past year(s) there has been a significant event of Covid-19. Response – All staff to follow Government guidance of social distancing, hand washing, face masks and training on use of PPE, ensured adequate supplies, Practice zoning, staggered breaks/restricted numbers, Total triage of all patients, patient screening at door entrance, broad messaging to patients about Covid-19 and use of surgery.

In the Last month Covid -19 restrictions have changed, and the surgery is continuing to follow national guidelines. In House the decision has been made to continue with some of the measurements as the environment means we work with vulnerable people.

There has been no other reported significant events, or infection control incidents at New Islington medical practice 2021/2022

Infection Prevention Audit and Actions

The Infection Control policies have been updated by Deepa Turner in 2020/21 – these policies are reviewed 3 yearly.

The Annual Infection Prevention and Control audit was completed by Nurse Katie Illingworth in March 2022.

The Annual Hand Hygiene audit was completed by Nurse Katie Illingworth in March 2022

The annual PPE Audit was complete by Nurse Katie Illingworth in March 2022

Dr Ali undertakes a Minor Operations clinic, therefore Aseptic technique is audited, alongside an Audit on Minor surgery post-operative infections audit on an annual basis. There have not been any post op infections in the last year.

The Aseptic technique Audit was completed by Nurse Katie Illingworth in March 2022

New Islington Medical Practice plan to undertake the following audits in 2022/2023:

* Annual Infection Prevention and Control audit
* Minor Surgery outcomes audit
* Hand hygiene audit
* Aseptic technique
* PPE
* Sharps
* Cold Chain

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed. In the last year the following risk assessments were carried out / reviewed:

**Legionella (Water) Risk Assessment:** The practice has conducted/reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors or staff. The building is managed, and in house checks are done by the building management team.

**Immunisation:** As a practice we ensure all staff are up to date with their Hepatitis B immunisations and offered any occupational health vaccinations applicable to their role (i.e. MMR, Seasonal Flu, Covid-19). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

**Privacy Curtains:** The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable privacy curtains, replaced every 6 – 12 months. To this effect we use disposable privacy curtains and ensure they are changed every 6 – 12 months. The privacy modesty curtains although handled by clinicians are never handled by patients and clinicians have been reminded to always remove gloves and clean hands after an examination and before touching the curtains. All curtains are regularly reviewed and changed if visibly soiled.

**Toys:** NHS Cleaning Specifications recommend that all toys are cleaned regularly, and we therefore provide only wipeable toys in waiting / consultation rooms. All toys have been removed from waiting/consulting rooms due to Covid-19.

**Cleaning specifications, frequencies, and cleanliness:** We have a cleaning specification and frequency policy which our cleaners and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the surgery including cleanliness of equipment.

**Hand washing sinks:** The practice has clinical hand washing sinks in every room for staff to use, which meet the latest standards. We have also replaced our liquid soap with wall mounted soap dispensers to ensure cleanliness. The use of long handled taps means a non-touch technique can be used.

**Sharps:** The practice disposes of sharps in sharps bins. There are different coloured bins for different needs. The collection and disposal of the sharps is outsourced. We plan in 2022/23 to undertake a Sharps Audit.

**Cold Chain:** Vaccines and Medicine that need to be stored between 2 – 8c are kept in the surgery fridge. The practice has one fridge which is monitored daily for the temperature, this is logged online, we also keep an electronic monitor in the fridge which we download the data from. New stock is immediately put in the fridge, and stock is rotated regularly.

**Emergency equipment and drugs:** New Islington medical practice has on site emergency equipment and drugs. The defibrillator is owned by the building, and they undertake the checks required. Oxygen is checked weekly to ensure sufficient in stock, and in date. Emergency drugs are monitored annually. We plan in 2022/23 to review our monitoring and auditing process.

Training

All staff receives annual online training in infection prevention and control.

Hand Hygiene training and audit is carried out annually by our Lead Nurse.

Policies

All Infection Prevention and Control related policies are in date for this year.

Policies relating to Infection Prevention and Control are available to all staff and are reviewed and updated annually. All are amended on an on-going basis as current advice, guidance, and legislation changes. The Infection Control policy is uploaded onto the Practice Intranet once reviewed with notification sent to staff.

Responsibility

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

Review date

March 2023

Responsibility for Review

The Infection Prevention and Control Lead Nurse and the Estates Manager are responsible for reviewing and producing the Annual Statement.

Written by Nurse Katie Illingworth 09/03/2022