



Infection Prevention and Control Annual Statement 2024

Purpose

This annual statement will be generated each year in June 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*.

This is relevant to all employees, visitors, contractors and any one on training placements – the infection prevention and control Policy must be adhered to.

Commitment of the Practice

All staff within the Parchmore group are committed to minimising the risk of infection and ensuring patient safety.

Infection Prevention and Control Lead

The Parchmore group has one infection control Lead – Jo Yanzu

The IPC Lead is supported by Managing Partner – Teresa Chapman

The IPC Lead is supported by the Lead GP for Infection Control

At Parchmore Medical Centre – Dr S Shaikh

At Haling Park Medical Practice- Dr S Sivarajan

The Lead Nurse has attended the 2 day IPC course training in April 2022 and both Lead Nurse and Managing Partner regularly attend training courses to keep up to date on the topic.

Respiratory/ droplet spread infections.

For the protection of respiratory/ droplet spread infections, the IPC lead and team have ensured:

- Protective screens have been placed around reception areas.
- The national and local IPC guidance/changes are cascaded to staff via meetings and emails.
- Clinical staff are reminded to wear masks when engaging in patient care when there are any respiratory symptoms or unconfirmed rashes present.
- Staff are reminded regularly to perform good hand hygiene perform IPC in line with national guidance.

- Non-Clinical Staff are reminded to keep desks clutter free and clean their working environment daily as outlined in cleaning agreement.
- Clinical staff are reminded to keep desks clutter free, ensure specified equipment is cleaned between patient use and to clean their working environment as outlined in cleaning agreement.
- Patients are reminded to use hand sanitisers that are placed throughout the building.

Significant events

Significant events are investigated in detail in order to identify what can be learnt and changed which will lead to future improvements. Significant events are discussed monthly.

Risk Assessments

Risk assessments are carried out to establish best practice and ensure it is followed. In the last year the following risk assessments have been performed:

- Legionella risk assessment: The Practices have reviewed its water safety risk assessment to ensure that checks are carried out and the water supply does not pose a risk to staff, patients or visitors. This will be done annually.
- Sharps assessment: carried out annually.
- Measles – staff immunisation risk assessment carried out.

Infection Control Audits

Infection control audits are run on an annual basis

- The annual handwashing audit is a rolling audit annually due to staff numbers. Staff are informed of this and expected to participate.
- All staff complete IPC training as part of their induction on eLearning. This is also done annually and at meetings if there are updates to discuss.
- All policies are reviewed and updated annually.
- All policies are available to staff to view on the shared drive.

Immunisations

All staff are offered Hep B immunisation along with other occupational health vaccines relevant to their role i.e MMR, Influenza and Covid vaccinations. We participate in the National Immunisation programmes/ campaigns for patients and can offer vaccines within the Surgery or as Home visits as required.

Other examples

Cleaning specifications:

Cleaning is performed by cleaners from a company employed by the practices. They follow NHS cleaning specifications with regards to infection control and cleaning standards.

The cleaning supervisor and IPC lead carry out cleaning audits quarterly to ensure a good standard is maintained.

Toys:

The Parchmore Group has a no toys policy in waiting rooms to promote good infection control.

Handwashing sinks:

All of our clinical rooms have handwashing sinks for staff to use. They all meet the latest standards for sinks as best practice guidelines. All clinical rooms have wall mounted soap and sanitiser dispensers to ensure cleanliness.

Responsibility:

It is the responsibility of each individual to be familiar with this statement, the IPC policy and their roles and responsibilities under this.

Responsibility to review:

The IPC Lead Nurse and IPC Lead GP are responsible for reviewing the annual statement

Jo Yanzu (Lead Clinic Nurse and IPC Lead)

Dr S Shaikh (IPC Lead GP)

For and on behalf of The Parchmore Group.