29th September 2023

**Purpose**

This annual statement will be generated each year in October 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 undertaken, 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 Spinney Brook Medical Centre is ANP Beverly Groom.

The IPC lead is supported by Michelle Carroll Practice Manager.

**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 of 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 that 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 year there have been 0 significant events raised that related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

**b. Infection prevention audit and actions**

An annual audit was completed in September 2023 resulting in an action plan which is reviewed on a regular basis.

IPC is discussed at our monthly PHCT meetings and clinical meetings to ensure IPC is always at the forefront of our clinician’s actions. A hand hygiene audit is carried out monthly with different staff members, each staff member should be audited at least once every 12 month period. An aseptic technique audit is carried out annually.

**c. Risk assessments**

Risk assessments are carried out so that any risk is minimised to be as low as 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:

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

* General IPC risks
* COSHH
* Cleaning standards
* Privacy curtain cleaning or changes
* Staff vaccinations
* Water safety
* Toys
* Assistance dogs

**d. Training**

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

**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:

* Assistance dogs
* Cleaning Schedule and Standards
* Cold Chain Policy
* Infection Prevention and Control Policy
* 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 Spinney Brook Medical Centre to be familiar with this statement and their roles and responsibilities under it.

**g. Review**

The IPC lead and Practice Manager are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before October 2024.

**Signed by**



Michelle Carroll

For and on behalf of Spinney Brook Medical Centre