

Infection Control Annual Statement

2019

Purpose

This annual statement will be generated each year in January 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 summarises:

- Any infection transmission incidents and any action taken (these will have been reported in accordance with our Learning 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

Alchester Medical Group has 1 Lead for Infection Prevention and Control: Dr Helena Doucas, GP Partner.

The IPC Lead is supported by: Joanne Jackson, Nurse Manager, and assisted by: Sam Fincham, Deputy Nurse Manager.

Joanne Jackson and Sam Fincham keep updated on infection prevention and control practice. Both attended the annual update in 07/2019 lead by Hilary Munabe the Infection Protection and Control Locality Lead.

Infection transmission incidents (Learning Events)

Learning 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 learning events are reviewed in the quarterly practice Staff meetings and learning is cascaded to all relevant personnel.

In the past year there was one Learning Event raised that related to infection control, when a vacutainer with needle attached was found in a clinical waste bin by a clinician. No injury was sustained and the sharps item was transferred safely to the correct sharps bin. The incident was reported, investigated and all clinicians reminded of the Policy for Disposal of Sharps. Correct Sharps Disposal Posters on walls remain insitu next to all sharps bin.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit for Victoria House Surgery was completed by Joanne Jackson in December 2019

As a result of the audit, the following things have been changed at Alchester Medical Group, or are currently being reviewed:

- Carpet in waiting room stained
- Room 2 walls require painting
- Ceiling lights in Rm 2 and 3 without covers to improve lighting in room
- Wall hand wash dispenser in patient toilet opposite Rm 3 broken

- Baby changing room requires wall mounted wipes dispenser for cleaning baby table
- Tiles on wall near sinks in Rooms 7 & 8 loose or off wall
- Carpentry in patient toilet opposite Room 3 broken and chipped

The Annual Infection Prevention and Control audit for Langford Medical Practice was completed by Sam Fincham in December 2019.

As a result of the audit, the following things have been changed at Alchester Medical Group, or are currently being reviewed:

- Room 9 walls require painting
- Toilet next to Room 9 – walls marked and look unpleasant, also require painting
- Tile missing from wall next to sink in Room 2
- Walls cracked at ceiling join above PC in Room 7
- Broken kitchen cupboard door in Admin Office kitchen area
- Room 7 Wooden window frame rotting area that holds glass in place
- Cloth covered chairs in reception for patients and some are stained
- Staff toilet on the first floor needs repainting by the toilet area

An audit on sharps bins was done at Victoria House and Langford Medical Practice in January 2020. Although the majority of the bins were labeled, in date, and were not overfilled – improvement needs to be made. All clinical staff have been informed of sharps bins protocol and the audit will be repeated in 3 months' time.

An audit on Minor Surgery was undertaken by Dr Hadley in December 2019. 136 patients had a minor surgery procedure at Victoria House, and of these there was only 1 reported infection relating to their procedure but this was likely due to infection being present at the time of the procedure.

All planned surgery involving potential infection, such as toenail wedge resection, is placed at the end of the morning list in order to reduce the risk of cross-infection.

As a result of the audit, nothing has been changed.

An audit of IUCD insertions was undertaken in December 2019. Dr Van Stigt inserted 219 coils, and 95 implants, with no adverse reactions. Dr Bate inserted 17 implants with no adverse reactions. Dr Koralage inserted 7 coils and 10 implants, with no adverse reactions. No reported infections relating to any coil or implant insertions.

As a result of the audit, nothing has been changed

An audit on hand washing was undertaken in December 2019, all to a high standard. Hand hygiene is everybody's responsibility and good hand hygiene is the single most important factor which can prevent cross infection.

Review of 2018 Infection Control Audit:

Victoria House – all work highlighted in the 2018 audit was completed apart from the following:

- Hand soap dispensers were unable to attach to walls due to no suitable space being available.
- The patient toilet on the ground floor requires a repair to the pipe boxing

Langford Medical Practice – all work highlighted in the 2018 audit was completed apart from the following:

- Hand soap dispensers were unable to be wall mounted as the walls are not suitable for this fixture.
- Repainting of patient toilets next to Room 9

Alchester Medical Group plan to undertake the following audits in 2020:

- Annual Infection Prevention and Control audit
- Minor Surgery outcomes audit
- Domestic Cleaning audit
- Hand hygiene audit
- Decontamination of Equipment audit

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 reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors or staff. The water has had a sample sent off for testing, from both sites, in October 2019, and the results are clear.

Immunisation: As a practice we ensure that all of our 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). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home/Care Home visits to our patient population. In 2018 the cleaners completed their course of Hepatitis B vaccines and seroconverted successfully. In 2019 new members of cleaning staff have commenced the course of Hepatitis B vaccinations as per guidelines and will be followed up as per Occupational Health guidance. For the 2019/20 flu season, 38 staff at Alchester had a flu vaccine, an increase from last year where the total number of staff vaccinated was 30.

Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every 6 months. To this effect we use disposable curtains and ensure they are changed every 6 months. The window blinds are very low risk and therefore do not require a particular cleaning regime other than regular vacuuming to prevent build-up of dust. The 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 at Langford only – no toys are kept at Victoria House.

Cleaning specifications, frequencies and cleanliness: We have a cleaning specification and frequency policy which our cleaners and staff work to.

Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use. Some of our sinks do not meet the latest standards for sinks but we have removed plugs and reminded staff to turn off taps that are not 'hands free' with paper towels to keep patients safe.

Training

All our staff receive annual training in infection prevention and control, and hand hygiene.

We use BlueStream e-learning for all our staff mandatory and non-mandatory training, which provides separate infection prevention and control courses for non-clinical and clinical staff, and a hand hygiene course.

All hand washing facilities for patients and staff have a pictorial display of correct hand washing techniques. We try to demonstrate hand washing techniques on Staff yearly, when we do our Hand Washing Audit.

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 by Joanne Jackson, and all are amended on an on-going basis as current advice, guidance and legislation changes. Infection Control policies are available to staff for reading, on the shared drive as well in the printed Infection Prevention and Control Resource File.

Responsibility

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

Review date

January 2021

Responsibility for Review

The Infection Prevention and Control Lead and the IPC Lead nurse are responsible for reviewing and producing the Annual Statement.

Publication

A copy of this Annual Statement will be uploaded to our practice website, and we will notify patients of any seasonal or other outbreaks that they may need to be aware of via posters in the surgery and on our website.

Joanne Jackson

Nurse Manager

For and on behalf of the Alchester Medical Group, January 2020