**Infection Control Annual Statement 27/01/2021**

**Aim**

* Provide and maintain a clean and tidy surgery
* Prevent and control the risk of the acquisition of an infection in all our activities
* Promote a safe environment for all patients, staff, users, visitors and the public

**Purpose**

The Annual Statement will be generated each year in December. It will summarise:-

* Details of any infection control audits undertaken and actions taken
* Significant events relating to infection control and subsequent action plan
* Details of any infection control risk assessments undertaken and actions taken
* Review of training, policies, procedures and guidelines

**Background**

* The IPC lead is Julia Hawkhead (Practice Nurse)
* The Practice Operational Lead Kay Harvey oversees compliance

**Significant Events**

In the past year (31/12/2019-27/01/2021) there has been one significant event raised that relates to infection control. A trainee doctor wore a nonsurgical facemask to assess a patient showing symptoms of Covid 19. The event was reported and the staff member followed the recommended guidelines for exposure to Covid 19 without PPE.

**Audit**

The Infection control lead completes a self-audit for the surgery yearly and then a face-to-face audit is completed by the IPC team tri-annually. A member of the IPC team completed this audit with JH in July 2020. It was noted that the risks associated with the environment from previous inspections have been recognised and a significant amount of investment has been made to upgrade some of the hand wash basins and floor coverings. The treatment room now has an additional sink and there has been remodelling of cupboards to ensure all items can be put away to avoid accumulation of dust. Surface wipes holders are now fixed to walls in all clinical rooms and reception office for easy access. There are new splash backs to sinks in all clinical rooms to aid effective cleaning. The treatment room is going to be redecorated and the flooring replaced in 2021. A quote has already been obtained. The clinical environment overall intact and well maintained and all areas visited were tidy and well managed. The general standard of cleanliness was variable with some dust accumulation on high surfaces, couch frames and bins. The cleaning and facilities management is provided by Leeds city council. J Hawkhead and M Harvey have worked with the cleaner to ensure that these are now up to standard. Compliance with sharps and PPE management was noted to be very good and the team were applauded for their high standards in these areas. The team had a compliant IPC policy in electronic and hard copy version. However, this was difficult to find on the server. This has been moved so that all members of the team are able to access the document easily. The policy has been updated as requested to include additional information relating to standard infection control procedures and the 5 moments of hand hygiene.

**Policies, Procedures and Guidelines**

Policies relating to Infection control are reviewed and updated every 3 years (next due 13/01/2024). However, all policies are amended on an on-going basis as current advice changes.

Written by :- Julia Hawkhead – IPC Lead