

## **Infection Prevention and Control (IPC) September 2025 Annual Statement**

### **Infection Prevention and Control Annual Statement 2025 Purpose**

The annual statement is to be generated each year in accordance with their 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 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) Leads:**

**GP Lead:** Dr Prasanna Chingale

**Nurse Lead:** Debbie Homan, RN

**IPC Lead:** Tori Lalka, RN

**Premises Lead:** Natalie Warner

### **Significant Events relating to infection transmission incidents.**

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 in the quarterly partner meetings and learning is cascaded to all relevant staff.

We have had some significant event in the year 2025

- Fridge Breach due to electric outage at village site work in the month of July 2025
- All the affected vaccines were removed, this was discussed as a learning event, all the staff was reminded to follow the policy to transfer the vaccines to a cold box container during the electricity outage maintain the cold chain.

We are currently conducting audits to monitor cold chains for vaccines, post-procedure infections, and hand hygiene practices.

In 2024, we received a visit from the ICB team to review our IPC policies and procedures. Additionally, we underwent another IPC inspection in August 2025 to ensure that all findings are addressed.

### **Staff sickness and absence**

Employees are instructed to notify the practice manager, IPC Lead, and HR Lead through the relevant leads regarding their sickness and absences.

We adhere to the ICB's Sickness Absence Policy within the Practice.

In cases where the absence is caused by a communicable infection, proper guidance on returning to work will be provided, and staff are encouraged to consult their GPs.

### **Staff Training**

All employees are currently up to date with their IPC Training.

IPC matters or updates should be addressed consistently throughout the year and will be included in staff meetings.

Employees are encouraged to bring any IPC concerns to the attention of the practice manager or IPC lead.

### **Whole Practice IPC audit**

In the years 2024-2025, IPC audits and site visits were carried out at both locations. These assessments revealed specific areas needing enhancement to ensure the practice aligns with best practice guidelines concerning IPC.

### **Actions completed.**

As a result of the audit certain steps have been put into place:

All clinicians were advised to remove any unnecessary items and any excess or unused equipment from their rooms. Annual IPC audit

Cold chain audit monitoring the safe storage and handling of vaccinations.

Hand Hygiene audit. Our last hand hygiene audit was conducted on all staff in January 2025 with 100% demonstrating correct technique during the audit carried out by **Tori Lalka, RN**, using IPC/ICB accredited light box and UV cream. Staff are aware of the importance of hand hygiene in reducing healthcare associated infections and regular training is provided, all new staff starting at the surgery are automatically sent for completion of the hand washing audit prior to carrying out any work. Next audit to be completed again the next coming January 2026.

Clinical room curtains: NHS Cleaning Specifications state that curtains should be cleaned, or if using disposable curtains replaced every 6 months. To this effect we use disposable curtains and ensure that they are changed every 6 months and was last changed July 2025 at Moor Lane and August 2025 at Village site.

### **Audits**

Routine audits are carried out on a regular basis and on-going basis:

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 not to be 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. Stock is kept at both sites if curtains become soiled.

Antimicrobial audits, which encompass antibiotic prescribing for otitis media, urinary tract infections, and sinusitis, are conducted annually from July to October. The findings are then communicated to all staff during practice meetings and protected learning sessions.

### **Risk Assessments**

As a practice we conduct risk assessments whenever necessary to ensure that best practice can be established and followed.

Recent risk assessments have included:

- 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.
- Immunisation: We ensure that all our staff are up to date with Hepatitis B
- immunisations and are offered occupational health vaccinations applicable to their role (including MMR, seasonal flu vaccines). We also take part in the National Immunisation Campaigns for patients and offer vaccinations in surgery and through home visits if necessary to our patient population.
- Pregnant staff are required to carry out a separate risk assessment to ensure that their workload and requirements remains safe for them.

### **IPC Advice to Patients**

As a practice we have worked hard to ensure that we have complied with all COVID 19 advice and guidance over the last year and we have strived to share COVID 19 advice with our patients.

We advise our patients to attend for the routine immunisations and all those eligible are sent routine reminders to make appointments; this includes for baby/child immunisations, pneumonia immunisations and shingles immunisations.

Parents/ Guardians are sent regular invites/ reminders for childhood immunisations. They are also encouraged to discuss vaccinations with our practice staff if they require further information about any immunisations.

In view of current outbreak of Whooping Cough infection, we are following the Guidelines provided by Public Health England. Once suspected case has been reported to PHE, the local health protection team will advise on appropriate tests for confirmation and surveillance. This will depend on the person's age, duration of symptoms, and local laboratory facilities. PHE will normally send out the swabs directly to the patient/s (affected) with a box to send directly to the correct lab with all the information on as this will then need to be in a hazardous bag labelled correctly.

## **IPC Policy**

Policies are amended on an on-going basis to ensure that they adhere to current advice, guidance, and legislation. Policies are available for all staff to view and are discussed annually at meetings.

Cleaning specifications, frequency and general cleanliness are reviewed regularly, and we work with our cleaners to ensure that the surgery is kept as clean as possible.

Quarterly assessments of the cleaning process are conducted with our cleaning contractors to identify areas for improvement. We also have a cleaning specification and frequency policy which our cleaners and staff work to.

## **Responsibility**

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

**The Infection Prevention and Control Lead and the Practice Manager are responsible for reviewing and producing the Annual Statement. The next review date for this statement will be September 2026.**