

# ANNUAL INFECTION CONTROL STATEMENT

## Introduction

This practice is committed to the control of infection within the building and in relation to the clinical procedures carried out within it. This statement has been produced in line with the Health and Social Care Act 2008 and details the practice's compliance with guidelines on infection control and cleanliness between the dates of October 2014 and October 2015.

The author of this statement is: Sarah Morcom.

## Infection Control Lead

The practice's clinical lead for infection control is: Janet Speake – Practice Nurse

The practice's non-clinical lead for infection control is: Sarah Morcom – Practice Manager

The infection control lead has the following duties and responsibilities within the practice:

Annual risk assessment

Annual Audit

Review of policies relating to infection control

Practical hand hygiene training for staff

Attend regular training updates

## Significant Events related to Infection Control

There have NOT been any significant events relating to infection control at the practice between the dates of October 2014 and October 2015.

**[If applicable]** Details of Outbreak

*[Detail the nature of the infection/outbreak here]*

The duration of the outbreak was *[Insert length of time]*, between the dates of *[insert dates]*.

*[Insert number]* people were affected in the outbreak.

Actions Taken/Lessons Learned from Outbreak

*[Insert details here]*.

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## **Audits relating to Infection Control**

An Infection Control audit and risk assessment was undertaken at the practice on 15/10/2015 and the following recommendations and/or actions plans were produced in response to the findings:

### **Section 1: Hand Hygiene**

Point 12 -Elbow taps are available at sinks in clinical areas. Compliant in both treatment rooms. Taps in consulting rooms 1 & 2 are not compliant in this area. – Sink being replaced in Room 1 Sink in room 2 to be replaced when room is refurbished

### **Section 3: Sharps handling and disposal** - compliant in all areas with the exception of point 4

Point 4 – Sharps boxes are is correctly assembled – check lid is secure – Lid not secured into temporary position on all opened boxes *Staff to be reminded of this point.*

### **Section 6: Environment**

Point 1- All general areas are clean – Toilet floors stained – *Consider replacing flooring*

Point 4 – Treatment rooms have easily cleanable flooring – Carpet flooring in consulting rooms 1 & 2 – *To be replaced during refurbishment*

Point 11 – Disposable paper towel roll in Room 2, placed on floor – *Paper towel roll to be placed on trolley next to couch*

### **Section 7: Cleaning Products**

Point 5 – Dilution for disinfection of the environment and blood spillages is known – *spillage kits for removal of blood spillages to be purchased*

## **Risk Assessments relating to Infection Control**

See above – incorporated with audit

## **Practice Policies, Procedures and Guidance relating to Infection Control**

The practice maintains the upkeep of the following policies, procedures and guidance related to infection control. These policies, procedures and guidance are reviewed and updated annually, as well as being amended on an ongoing basis to keep up with changes in regulation etc.

Hand Hygiene  
Waste Disposal  
Sharps Injuries  
Management of spillages

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## **Training relating to Infection Control**

The following staff members have received instruction, information or training relating to Infection Prevention and Control between the dates of October 2014 and October 2015

Janet Speake – Practice Nurse – Regular attendance at IC forums

Anna Reynolds – Practice Nurse 14.04.2015

Nikki Johns – Receptionist 08.06.2015

Jean Powell – Receptionist 11.05.2015

Trish Keane – Receptionist 08.05.2015

Kathy Flynn – Receptionist 08.06.2015

Liane Clay – Receptionist 08.05.2015

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