

Infection Control Annual Statement 2023/2024

Purpose

The annual statement will be generated each year. It will summarise:

- Any learning connected to cases of *C. difficile* infection and *Meticillin-resistant Staphylococcus aureus* blood stream infections and action undertaken;
- The annual infection control audit summary and actions undertaken;
- Infection Control risk assessments and actions undertaken;
- Details of staff training (both as part of induction and annual training) with regards to infection prevention & control;
- Details of infection control advice to patients;
- Any review and update of policies, procedures, and guidelines.

Background:

Long Furlong Centre, Lead for Infection Prevention /Control is Alison Plaistow, Practice Nurse, who is supported by Debbie Major, Practice Manager.

This team keeps updated with infection prevention & control practices and share necessary information with staff and patients throughout the year.

Significant events:

Detailed post-infection reviews are carried out across the whole health economy for cases of *C. difficile* infection and *Meticillin Resistant Staphylococcus aureus* (MRSA) blood stream infections. This includes reviewing the care given by the GP and other primary care colleagues. Any learning is identified and fed back to the surgery for actioning.

This year the surgery has been involved in zero *C. difficile* case reviews and zero MRSA blood stream infection reviews.

Audits:

Detail what audits were undertaken and by whom and any key changes to practice implemented as a result.

| Audit | Date | Auditor/s | Key changes |
|----------------------------------------------|-----------|-----------|------------------------------------------|
| Infection Prevention Control and Efficacy | 1/7/24 | Alison | |
| Hand Hygiene | July 2023 | Alison | Light box in use over the next few weeks |
| ANTT | 1/7/24 | Alison | |

Infection Control Risk Assessments:

Regular Infection Control risk assessments are undertaken to minimise the risk of infection and to ensure the safety of patients and staff. The following Infection Control risk assessments have been completed in the past year and appropriate actions have been taken

- Control of substances hazardous to health (COSHH)
- Disposal of waste
- Sharps injury
- Risk of body fluid spills
- Legionella risk assessment
- Cold Chain Event data logger not recorded properly, PHE contacted for advice and advised vaccines in the fridge were safe to use

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Staff training:

4 new staff joined this Medical Centre/Surgery in the past 12-months and received infection control and hand-washing within 1 month of employment.

100% of the practice patient-facing staff (clinical and reception staff) completed their annual infection prevention & control update training (specific whether this was in a formal training session or online).

The IPC nurse/practitioner attended training updates for their role. Training is provided by the BOB ICB Webinars.

Infection Control Advice to Patients:

Patients are encouraged to use the alcohol hand gel/sanitiser dispensers that are available throughout the Medical Centre/Surgery. Additional IPC measures on hands, face, space have been implemented due to the COVID-19 Pandemic.

| There are leaflets/posters available in the Medical Centre/Surgery -regarding: |
|--------------------------------------------------------------------------------|
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| MRSA | Chickenpox & shingles | |
|-----------------------------------------------------------------------------------------|----------------------------|--|
| COVID-19 | Norovirus | |
| Influenza | Recognising symptoms of TB | |
| The importance of immunisations (e.g. in childhood and preparation for overseas travel) | | |

Policies, procedures, and guidelines.

Documents related to infection prevention & control are available to all and reviewed in line with national and local guidance changes and are updated 2-yearly (or sooner in the event on new guidance).

July 2024