

## Annual statement on compliance with IPC practice (including cleanliness) for General Practice Template

### Purpose of the 'Annual statement'

The *Health and Social Care Act 2008: code of practice on the prevention and control of infection and related guidance* requires the Infection Prevention and Control (IPC) Lead to produce an annual statement. This statement should be made available for anyone who wishes to see it, including patients and regulatory authorities and should also be published on the General Practice website.

Below is a suggested template for the Annual statement. General Practices can (and should) adapt the template and add further details, but the six key headings below must be included. The Annual statement and related forward programme/quality improvement plan, should be reviewed and signed off by the relevant General Practice governance group.

### Introduction

This Annual statement has been drawn up on  in accordance with the requirement of the *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance* for  It summarises:

1. Infection transmission incidents and actions taken
2. IPC audits undertaken and subsequent actions implemented
3. Risk assessments undertaken and any actions taken for prevention and control of infection
4. Staff training
5. Review and update of IPC policies, procedures and guidelines
6. Antimicrobial prescribing and stewardship

This statement has been drawn up by:

Name:   
Infection Prevent and Control (IPC) Lead

### 1. Infection transmission incidents

*Provide details of infection transmission incidents (which may involve examples of good practice as well as challenging events), how they were investigated, any lessons learnt and changes made as a result to facilitate future improvements.*

Covid posed a significant challenge in the early days, setting up the red room and ensuring staff and patients were kept safe.

The red room worked well, whereby patients came to the back door of the health centre and were seen in isolation whilst the clinician was in full PPE.

We kept staff wearing masks for much longer than other NHS establishments, but this resulted in a workforce that did not get as unwell as they could have been. Clinical staff fared very well and just proved to us that the use of PPE and infection control measures and cleaning worked well.

## 2. IPC Audits and actions

Provide an overview of IPC audit programme as well as examples of good practice and actions taken to address suboptimal compliance.

Room, Vaccine Storage and Environment Audits carried out regularly across both sites.  
Annual IPC Audit carried out by the ICB.  
Antibiotic Prescribing carried out Annually.

## 3. Risk Assessments

Provide details of IPC related risk assessments carried out and actions taken to prevent and control infection.

2 members of staff with Cancer diagnosis, risk assessments completed in relation to working area, risk from patients and other staff.

## 4. Staff training

Provide details of IPC induction training, annual updates and any other IPC related training.

All Admin staff have annual Tier 1 training, clinical staff tier 2 and 3 training annually.  
All staff at induction complete the training.

## 5. IPC Policies, procedures and guidance

Provide details of all policy reviews and updates, together with details of how changes have been implemented.

Policies all current and reviewed July 2024. Slight changes to the red room provision for Mpox and Measles added.

## 6. Antimicrobial prescribing and stewardship

Provide details of all activities undertaken to promote and improve antimicrobial prescribing and stewardship.

Lead Dr Penny Wilson, advises on strategies and pharmacy team and Registrar conduct audit.

## Forward plan/Quality improvement plan

Issue	Actions	Date for completion	Person responsible	Progress
Corridor Floor EHC	Request to NHSP to take up carpet and replace	June 2024	SKing	Completed May 2024
Holes in walls, general wear and tear	Request NHSP update building	July 2024	SKing	Awaiting
Floors in Patient toilets coming away from wall	Request NHSP change flooring to comply with IPC regs	July 2024	SKing	Awaiting

## Forward plan/Quality improvement plan review date:

January 2025