Infection Control Annual Statement for Denmead Health Centre 09.07.26

Purpose

This annual statement will be generated each year in July in accordance with the 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) Lead

Denmead Surgery has an ANP lead for infection Control Lead for Infection Prevention and Control: Lucy Blamire. Lucy has attended appropriate IPC Lead training courses and attends regular IPC updates through the ICB.

Infection transmission incidents (Significant Events)

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 significant event meetings and learning is cascaded to all relevant staff.
In the past year there have been no significant events raised that are related to infection control.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit is completed in 3 parts and the results of this are stored within our management system and cascade for staff to read.
As a result of the audit, the following things have been changed in Denmead Surgery

- Floor edging lifting in consultation room reported to NHS estates
- GPs reminded regarding clutter within their consultation rooms

An audit on hand washing was undertaken in July 2026
Both clinical and non-clinical staff undertook audits.
Records of this audit can be found on Teamnet

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed. In the last year the following risk assessments were carried out / reviewed:
Immunisation: As a practice we ensure that all of our staff are up to date with their Hepatitis B immunisations and offer any occupational health vaccinations applicable to their role (i.e. MMR, Seasonal Flu, COVID). We take part in the National Immunisation campaigns for patients and offer vaccinations in-house and via home visits to our patient population.
Other examples:

Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every 6 months. To this effect we use disposable curtains and ensure they are changed every 6 months. 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 never 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.
Toys: We have no toys in the practice OR NHS Cleaning Specifications recommend that all toys are cleaned regularly and we therefore provide only wipeable toys in waiting / consultation rooms.
Cleaning specifications, frequencies and cleanliness: Each clinical room has a cleaning form to be signed by clinical staff working within that room each day. We also have a cleaning specification and frequency policy which our cleaners work to.

Training

All our staff receive training in infection prevention and control on induction. Every staff member completes annual infection control training and records of this are maintained within Teamnet.

Policies

All Infection Prevention and Control related policies are in date for this year.

Policies relating to Infection Prevention and Control are available to all staff and are reviewed and updated annually, and all are amended on an on-going basis as current advice, guidance and legislation changes. Infection Control policies are circulated amongst staff for reading and discussed at meetings on an annual basis.

Responsibility

It is the responsibility of everyone to be familiar with this Statement and their roles and responsibilities under this.

Review date

07.2027

Responsibility for Review

The Infection Prevention and Control Lead is responsible for reviewing and producing the Annual Statement.