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## INFECTION CONTROL ANNUAL STATEMENT 2018-2019

### **PURPOSE**

This annual statement will be generated each year in November: It will summarise:

- Any infection transmission incidents and any action taken (these will have been reported in accordance with our Significant Event Policy).
- Details of any infection control audits undertaken and actions taken.
- Details of any infection control risk assessments undertaken.
- Details of staff training.
- Any review and update of policies, procedures and guidelines.

### **Significant Events**

In the past year there has been 1 significant event regarding infection transmission incident.

### **Audits**

Due to the associated increased risk of C Diff, the Practice monitors the prescribing of Co-amoxiclav. Current community antibiotic guidelines advocate the use of Co-amoxiclav for 1<sup>st</sup> line treatment in animal/human bites and 2<sup>nd</sup> line treatment for acute rhinosinusitis if persistent. Prescribing of Co-amoxiclav was audited in November 2018. Results – 19 prescriptions, 16 were out of guidelines (8 done by Locum GPs). This was discussed at our November clinical meeting to ensure that GP's, ANP's and prescribing Nurses were aware of and following the Stockport Community Antibiotic Guidelines with regards to Co-amoxiclav. Further audit planned in March 2019.

### **We carry out a continuous hand washing audit**

Our Senior Practice Nurse randomly checks members of staff (both clinical and non-clinical) and results are recorded.

### **Risk Assessments**

Risk assessments were carried out Oct 18 to enable best practice to be established and then followed.

### **Curtains**

The surgery has curtains in consulting rooms as modesty screens to be used around couches during examinations. 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 modesty curtains although handled by clinicians were never handled by patients and clinicians would always remove gloves after an examination and before touching the curtains.

### **Toys**

There are no toys at the surgery

### **Staff Training**

Infection Control policies are in the Docman library and all staff are aware of them. They are also available in paper form in files at both sites. The Policies are reviewed annually and discussed firstly at clinical meeting and then at the following staff meeting. All new staff are informed of the policies at induction.

An Infection Control training course for all non-clinical staff was held at the Practice in January 2018. All the nursing team will be attending annual training in November and December 2018.

### **Policies, Procedures and Guidelines**

Most policies are formally reviewed annually, however all are amended on an ongoing basis as current advice changes, or need arises.

Labelling, Storage and Transportation of Specimens– reviewed January 2018

Spillage of bodily fluids – reviewed January 2018

Hand Decontamination Policy – reviewed January 2018

Decontamination of Equipment Policy – reviewed January 2018

Infection Control/Hand decontamination – reviewed January 2018

Sharps and Needlestick injuries – reviewed January 2018

Disposal of Waste including sharps disposal – reviewed January 2018

Management of Clostridium Difficile Infection – reviewed January 2018

Control of Substances Hazardous to health (COSHH) –reviewed January 2018

Vaccine Cold Chain and Storage – reviewed January 2018

Use of personal protective equipment – reviewed January 2018

Hep B – reviewed January 2018

Infection Control Policy – reviewed January 2018

**In April 2018, Offerton Health Centre had an Infection Control Audit carried out and was rated outstanding across all areas. In September 2018, an audit was carried out at Hillgate surgery and was rated outstanding or good across all areas.**