Elgin Clinic – Febuary2018 Afoida Maisanda – IPC Lead

Infection Control Annual Statement 2018-2019

1. PURPOSE

In line with the Health and Social Care Act 2008: Code of practice on prevention and control of infection and its related guidance, this Annual Statement will be generated each year. It will summarise:

- Any infection transmission incidents and any lessons learnt and action taken
- Details of any infection prevention and control (IPC) audits undertaken and any subsequent actions taken arising from these audits
- Details of any issues that may challenge infection prevention and control including risk assessment undertaken and subsequent actions implemented as a result
- Details of staff IPC training
- Details of review and update of IPC policies, procedures and guidance.

2. INFECTION CONTROL LEAD

The Infection Control Lead (IC) will enable the integration of Infection Control principles into standards of care within the practice, by acting as a link between the surgery and WLCCG Infection Control Team. Practice Infection Control Lead: Afodia Maisanda Cleaning and Decontamination Lead: Raul Labajo– HCA With support from the Practice Manager – Debbie McCarthy

They will be the first point of contact for practice staff in respect of Infection Control issues. They will help create and maintain an environment which will ensure the safety of the patient / client, carers, visitors and health care workers in relation to Healthcare Associated Infection (HCAI).

The Infection Control Lead will carry out the following within the practice:

- Increase awareness of Infection Control issues amongst staff and clients
- Help motivate colleagues to improve practice
- Improve local implementation of Infection Control policies
- Ensure that practice based Infection Control audits are undertaken
- Assist in the education of colleagues
- Help identify any Infection Control problems within the practice and work to resolve these, where necessary in conjunction with the local Infection Control Team
- Act as a role model within the practice
- Disseminate key Infection Control messages to their colleagues within the practice

3. SIGNIFICANT EVENTS

There have been no significant events reported regarding infection control issues in the period covered by this report.

4. AUDITS

The following audit was carried out in the practice:

This year an internal annual audit was carried out in adherence to the Code of Practice. The following actions were taken as a result of the feedback/outcome of the audit:

- We clearly identified the named IC lead and have made all practice staff aware of this
- IC is now a regular agenda item in our monthly clinical/practice meetings
- We have updated some posters around our clinical areas to give better information on sharps/sharps safety/infection control contacts.
- Staff training session included IC issues such as what to do with a potentially infectious person
- Our infection control policy has been reviewed
- Cleaning or equipment has been added to the cleaning schedule in each room.
- We have introduced an alcohol hand gel sanitiser in the reception area for patients and visitors and within all consultation rooms and reception office. Posters signpost where they are located.
- Hand cream is now available for all staff and in each consultation room.
- We reviewed our staff procedure on handling specimens.
- Environmental cleaning audit this was carried out by the Practice Manager

5. STAFF TRAINING

The following members of staff have all attended Infection Control training within the last Year:

- All admin and clinical staff have received eLearning training

Enhanced training has been given to the following people

Afodia Maisanda Raul Labajo Dr Jayatilaka Dr Deere Dr Mackney Jackie Ravdan

The cleaner will receive eLearning training and reviewed periodically ensure the cleaning schedule is adhered to and deep cleaning is done within prescribed timescales.

6. POLICIES, PROTOCOLS AND GUIDELINES

We have updated and consolidated our infection control policies and protocols and amalgamated most of the important aspects into one clear document 'Infection Control Policy'. We have also updated the following information within our practice infection control folder;

- Standard Infection Control Precautions
- Isolation of Service Users with an Infection included in staff training and protocol made for staff to follow.
- Prevention and Management of Occupational Exposure to Blood and Body Fluids (including sharps injuries) this document has been added to our infection control guidelines. We have a spillage kit located in cleaners Cupboard and sleuce room.
- Packaging and Handling of Specimens discussed at clinical/ practice meeting.
- Reporting of Infections to the Health Protection Agency or Local Authority
- Cleaning Schedule updated
- Antimicrobial Prescribing

Date of the report: 19.2.2018