Birchwood Medical Practice – Updated 28/12/22

**ANNUAL INFECTION CONTROL STATEMENT**

**Introduction**

This practice is committed to the control of infection within the building and in relation to the clinical procedures carried out within it. This statement has been produced in line with the Health and Social Care Act 2008 and details the practice’s compliance with guidelines on infection control and cleanliness between the dates of 02/12/21and 28/12/22

The author of this statement is Charlotte McGhie, Lead Nurse.

**Infection Control Lead**

The practice’s clinical lead for infection control is Gabby Armstrong, Practice Nurse.

The practice’s non-clinical lead for infection control is Deb Spencer, Practice Manager.

The infection control lead has the following duties and responsibilities within the practice:

Annual audit

Risk assessments as required

Reviewing significant events

Updating policies/protocols/SOPs

Providing annual staff training

**Significant Events related to Infection Control**

 Details of Outbreaks

* The continued COVID19 outbreak has increased the need for infection control procedures within the practice. As such we have implemented SOP’s in line with NHS standards which include guidance on how to assess at risk patents, procedure risk assessments, the continued appropriate use of PPE and staff personal risk assessments <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-guidance-for-maintaining-services-within-health-and-care-settings-infection-prevention-and-control-recommendations#PPE>

**Audits relating to Infection Control**

The following audits relating to Infection Control have been undertaken at the practice, and the following recommendations and/or actions plans were produced in response to the findings:

|  |  |
| --- | --- |
| [IPC audit](IPC%20audit%20findings%202022.xlsx) |  |
| [Hand hygiene](IPC%20Spreadsheet%202022.xlsx) | No action required |
| [Sharps Box Audit](IPC%20Spreadsheet%202022.xlsx) | Repeating monthly to ensure compliance |
| [Cold Chain](file:///Y%3A%5CNurses%5CCold%20Chain%5CFridge%20Temp%20Audit%5CTemp%20Audits%5C2022%20Cold%20CHain%20Audit%5C2022%20Fridge%20Audit.xlsx) | Issue with new reception members understanding- training and protocols updated for reception |
| [Waste](file:///C%3A%5CUsers%5Cnicola.gibson%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.MSO%5C2018%5CWaste%20Audit%202018.docx) | No action required |
| [Fridge Temp Audit](Fridge%20cleaning%20audit%20%202022.docx) | New policy/3 monthly audit of temp checks  |
| [Room Cleaning](Room%20cleaning%20audit%202022.docx) | Visible documentation now in all clinical rooms |
|  |  |

**Risk Assessments relating to Infection Control**

The following risk assessments relating to Infection Control have been undertaken at the practice and various recommendations and/or actions plans were produced in response to the findings:

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| [Alcohol gel](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CAlcohol%20gel.docx) |
| [Covid](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CCovid%2019.docx) 19 |
| [Clinical waste](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CClinical%20waste.docx) |
| [Curtains](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CCurtains.docx) |
| [Gloves for dressings](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CGloves%20for%20dressings.docx) |
| [Specimen fridge](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CSpecimen%20fridge.docx) |
| [Venepuncture](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CVenepuncture.docx) |
| [Home BP](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CHome%20BP.docx) |
| [Child Imms](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CChild%20Imms.docx) |
| [Dressings](file:///Y%3A%5CNurses%5CInfection%20Control%5CIPC%20risk%20assessments%20and%20incidents%5CRisk%20Assessments%5CDressings.docx) |

**Practice Policies, Procedures and Guidance relating to Infection Control**

The practice maintains the upkeep of the following policies, procedures and guidance related to infection control. These policies, procedures and guidance are reviewed and updated every year in December as well as being amended on an ongoing basis to keep up with changes in regulation etc.

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| --- |
| [Aseptic Policy](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CAseptic-technique-2021-Version-2.00-1.pdf) |
| [C. Diff policy](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CC.-difficile-2021-Version-2.00-1.pdf) |
| [Cold chain](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CCold%20Chain.docx) |
| [COSHH](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CCOSHH.docx) |
| [Decontamination](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CDecontamination-Safe-management-of-care-equipment-July-2021-Version-2.00-1.pdf) |
| [Hand washing](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CHandwashing.docx)  |
| [Hep B status for staff](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CHep%20B.docx) |
| [IPC](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CInfection%20Control.docx) |
| [Isolation](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CIsolation%20policy%202022.pdf) |
| [Laundering uniforms](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CLaundry.docx) |
| [Needlestick](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CNeedlestick.docx) |
| [Outbreaks of communicable diseases](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5COutbreaks-of-communicable-disease-2021-Version-2.00-2.pdf) |
| [Room cleaning](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CRoom%20cleaning.docx) |
| [Sample handling](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CSample%20handing.docx) |
| [Sharps](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CSharps.docx) |
| [Spillage](file:///%5C%5Cbristol.xswhealth.nhs.uk%5CGP%5CBirchwood%20Medical%20Practice%5CPracticeArea%5CNurses%5CInfection%20Control%5CPolicies%5CSpillages.docx) |
| [Toys](file:///Y%3A%5CNurses%5CInfection%20Control%5CPolicies%5CToys.docx) |
| [Waste management](file:///Y%3A%5CNurses%5CInfection%20Control%5CPolicies%5CWaste.docx) |

**Training relating to Infection Control**

The following staff members have received instruction, information or training relating to Infection Prevention and Control:

All staff are updated annually in January. Sue Owen monitors everyone’s annual training.