



## **Infection Control Annual Statement**

**December 2023**

### **InsideVue**

#### **Purpose**

This annual statement will be generated each year in December 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**

InsideVue' s Lead for Infection Prevention and Control is the host practices infection control lead and the Operations Manager at InsideVue.

The Operations Manager attends the IPC Leads Forums held by the Infection Prevention Lead for Frimley ICB. She keeps updated on infection prevention practice.

#### **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.

In the past year there have been no significant event raised that related to infection control within InsideVue.

Infection control is a standing agenda item at InsideVue Bi-Monthly clinical meeting .

#### **Infection Prevention Audit and Actions**

**The Annual Infection Prevention and Control audit** was completed by the host practice in December 2023.

As a result of the audit, the following things have been changed in the host practice.

- Clinical Waste bins and bags updated in line with local guidelines.
- Updated local contacts for infection prevention control and advice, available to clinicians.
- Continuing programme of recovering furniture in impermeable and washable material
- Detailed equipment cleaning schedules in every consulting room

An audit on hand washing was undertaken and completed in November 2023.

All staff were compliant in hand washing and hand hygiene.

The following audits were undertaken by the host practices.

- Annual Infection Prevention and Control audit
- Domestic Cleaning audit
- Environmental audit
- Hand hygiene audit

## **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:

**Legionella:** (Water) Risk Assessment: The practice is based in Farnham Centre for Health and landlords conduct /review water safety risk assessments to ensure that the water supply does not pose a risk to patients, visitors or staff.

**Immunisation:** As an organistaion we ensure that all of our staff are up to date with immunisations relevant to their roles.

All staff have been vaccinated and received boosters for Covid-19.

All staff are encouraged to have the seasonal flu vaccination.

**Curtains:** The NHS Cleaning Specifications state that disposable curtains should be changed every 6 months. All curtains are regularly reviewed and if visibly soiled are changed at this time.

**Window Blinds:** these are very low risk. They require regular vacuuming to prevent build-up of dust and are cleaned by our external cleaning company every 6 months.

**Chairs and Carpets.** These are steam cleaned by our cleaning company every 6 months.

**Toys:** all toys have been removed from the waiting room

**Hand washing sinks:** The practice has clinical hand washing sinks in every room for staff to use. Some of our sinks do not meet the latest standards for sinks but we have removed plugs, covered overflows and reminded staff to turn of taps that are not 'hands free' with paper towels to keep patients safe.

**Clinical rooms** have liquid soap with wall mounted dispensers to ensure cleanliness.

We also have a cleaning specification and frequency policy which our cleaners and staff work to.

Staff are responsible for cleaning equipment in their rooms and logging that this has been done.

Any posters displayed in clinical consulting rooms are laminated.

## **Training**

All our staff are required to undertake training in infection prevention and control as part of their induction. Clinical staff are required to update this on a yearly basis, as either face to face or online training.

All staff receive training updates from the host practice clinician in infection prevention and control, at the time of the yearly hand washing audit. This includes when to use liquid soap and when to use hand washing gel, importance of the staff immunisation programme and receiving of samples.

## **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. All are amended on an on-going basis as current advice, guidance, and legislation changes. Infection Control policies are available to staff and are stored on InsideVue's shared drive.

## **Responsibility**

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

## **Next Review Date**

1<sup>st</sup> December 2024

## **Responsibility for Review**

The Operations Manager is responsible for reviewing and producing the Annual Statement.

Anne Green

For and on behalf of InsideVue.