

Coastal Medical Partnership Infection Control Annual Statement 2021-22

Purpose

This annual statement will be generated each year in March 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 cleaning / 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) Leadership

Each site within Coastal has a Lead GP and Lead Infection Control Nurse, supported by the Healthcare Assistants.

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 the Quarterly Practice meetings and learning is cascaded to all relevant staff.

In the past year there have been **NO** significant events raised that related to infection control.

Infection Prevention Audit and Actions

An Infection Prevention and Control audit was completed in April 2020 by the CCG as part of their COVID assurance visits.

As a result of the audit and observations, the following actions were taken:

Clinical rooms are no longer carpeted – remaining room at NMHC is planned to be changed.

All patient chairs in the ground floor waiting room and GP consulting rooms have been covered with a wipeable vinyl.

Every GP who performs minor surgeries reviews their patients on an annual basis for the purpose of appraisal and revalidation. The infection rate remains at 0%.

Lubricating Jelly is now ordered in individual sachets rather than tubes.

Plans are in place at Barton Surgery to plaster the exposed brick in clinical rooms

IMMUNISATION

As a practice we ensure that all of our clinical staff are offered any occupational health vaccinations applicable to their role (i.e. Hepatitis B, MMR, Seasonal Flu). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population. We are also involved in the COVID 19 Immunisation programme at our New Milton Health Centre site and this is on going, with all infection control procedures in place.

PPE (Personal Protective Equipment)

The practice provides PPE for all members of the team in line with their role, and this is very important during the COVID Pandemic that stocks are high.

Clinical staff are provided with aprons, several different types and sizes of gloves and goggles/face shields, and there are no issues with supply currently.

Reception staff are provided with gloves for the handling of sample pots and sharps bins. Sharps bins must be disposed of i.e. incinerated, after 3 months and not to be kept for longer than this. The correct lidded sharps bin should be used depending on what is being disposed; for example, a live vaccine such as Rotarix would go into a purple topped bin. They should be signed and locked as per protocol to avoid sharps injury and contamination.

We have installed a new suggestion/comments box in the practice reception available for patients to make comments, feedback or express concerns with regards to infection control issues such as cleanliness of the premises.

The Practice has in place an ISOLATION OF A CONTAGIOUS PATIENT Procedure, to guide all staff to isolate patients with possible infectious rashes i.e. chicken pox. An Isolation of a Contagious Patient Policy has been written, discussed and now in implementation.

All staff members are made aware on induction of the new correct procedure introduced for the management of sharps and contamination incidents following a needle stick injury.

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DOMESTIC CLEANING

We have confirmed with Two Counties, the practice cleaning company that they are compliant with The Revised Healthcare Cleaning Manual as set out by the National Patient Safety Agency.

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed.

Training

Infection Control Education Meetings, including Hand Washing training, led by the lead Nurse & HCA to update the current and educate new members of reception and other non-clinical staff over the past 2 years. We plan to continue this in 2021, with handwashing training and Infection control as part of new staff induction programmes.

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 linked to our Practice Policies Index which can be viewed by all staff at any time.

Responsibility

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

Covid-19

With the emergence of Covid-19, the majority of face to face GP consultations have moved to total telephone triage, more GPs are remote working sometimes because of self-isolation or the fact they maybe at greater risk or even by choice, and there are designated "hot site" clinics for patients who have or are suspected to have Covid-19.

Our clear aim remains to provide efficient and effective patient care.

The waiting room seating has been rearranged to allow for social distancing. The check in area now has plastic screens installed and clear markers so that patients remain socially distanced from themselves and the Reception staff they are speaking to, thus protecting patients and our staff too.

The digital checking-in machine has been switched off, therefore all patients check in at the reception desk, which is surrounded by a social distancing barrier, to protect the patients and the Reception staff.

The children and teenage immunisation programmes are still being undertaken, along with essential services such as wound care and blood tests.

We are encouraging patients to purchase home blood pressure monitoring machines as due to infection control implications, the BP machine in the waiting room has been removed. This reduces the need for having to come in to the surgery as well during Pandemic.

We have access to all types of PPE which is worn appropriately by the clinical staff in the correct situation, our All staff throughout the building wear face masks at all times, and have access to hand gel dispensers. Hand gel dispensers are also accessible for patient use on entry to clinical areas and we encourage patients to wear a face covering if possible.

During the pandemic, all staff have been doing twice weekly COVID lateral flow tests and following reporting procedure and protocol as set out by NHS COVID-19 website.

Review date

March 2022

Responsibility for Review

The Infection Prevention and Control Lead and the Practice Manager are responsible for reviewing and producing the Annual Statement.



Dr. Hannah Rycroft
IPC Lead Partner



Miss Kelly Anderson
Practice Manager
For and on behalf of The Arnewood Practice