Annual Infection Prevention and Control Statement for Cockhedge Medical Centre

Purpose

This annual statement covers the period from June 2025 to June 2026 and has been completed in accordance with the requirement of the Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance

The purpose of this statement is to provide assurance that the practice has effective systems in place to minimise the risk of infection to patients, staff and visitors and to demonstrate continuous improvement in infection prevention and control.

The practice leads for infection prevention and control (IPC) is Sarah Bridge, Nurse Practitioner and Stephanie Whitenburgh, Practice Manager. They have overall responsibility for

- Ensuring compliance with national guidance and legislation.
- Reviewing IPC policies and procedures.
- Monitoring infection prevention standards.
- Investigating significant infection-related incidents where appropriate.
- Ensuring staff receive appropriate IPC training.

Infection Prevention and Control Policies

The practice maintains an Infection Prevention and Control Policy that is reviewed annually or sooner if national guidance changes.

Supporting policies include:

- Hand hygiene
- Standard Infection Control Precautions
- Personal Protective Equipment (PPE)
- Cleaning and Decontamination
- Safe Management of Clinical Waste
- Sharps Safety
- Blood and Body Fluid Spillage
- Management of Exposure Incidents
- Immunisation of Staff

All policies are available to staff.

Staff Training

All staff complete Infection Prevention and Control training appropriate to their role during induction and receive regular updates.

Training includes:

- Hand hygiene
- PPE use

- Standard Infection Control Precautions
- Sharps safety
- Waste management
- Cleaning responsibilities

Training compliance is monitored and recorded.

Audits Undertaken

The following audits have been completed during the reporting period:

- Hand hygiene audit
- Cleaning standards audit
- Clinical room cleanliness audit
- Equipment decontamination audit
- Waste segregation audit

Any actions identified have been completed or incorporated into the practice action plan

Cleaning Arrangements

The practice follows documented cleaning schedules for clinical and non-clinical areas.

Clinical equipment is cleaned between patients in accordance with manufacturer guidance and national recommendations.

Cleaning responsibilities are clearly allocated and monitored.

Decontamination of Equipment

Reusable medical equipment is cleaned and decontaminated after each use in accordance with manufacturer instructions.

Single-use equipment is disposed of appropriately after use.

Records of servicing and maintenance are maintained where applicable.

Waste Management

Clinical waste, sharps and domestic waste are segregated and disposed of safely using approved waste contractors.

Sharps bins are correctly assembled, labelled and replaced before reaching the recommended fill level.

Staff Health

Staff are encouraged to maintain recommended immunisations relevant to their role, including Hepatitis B where indicated.

Procedures are in place for managing sharps injuries and occupational exposure incidents.

Significant Events

During this reporting period:

- No significant infection prevention incidents occurred requiring external reporting.

Learning from incidents is shared with staff and incorporated into practice procedures where necessary.

Antimicrobial Stewardship

The practice supports responsible antimicrobial prescribing in line with local and national guidance.

Prescribing is reviewed as part of routine clinical governance activities where appropriate.

Improvements During the Year

- Annual review of IPC policies completed.
- Completion of IPC audits.
- Refresher training completed by all staff.
- Review of cleaning schedules.

Priorities for the Coming Year

The practice will continue to:

- Maintain compliance with national IPC guidance.
- Complete annual IPC audits.
- Review staff training requirements.
- Review cleaning schedules and equipment maintenance.
- Continue monitoring infection prevention through practice meetings.

Declaration

The practice believes it has appropriate systems in place to minimise the risk of healthcare-associated infection and is committed to maintaining high standards of infection prevention and control for patients, staff and visitors.

Signed: S Whitenburgh

Practice Manager