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INFECTION CONTROL ANNUAL STATEMENT

July 2022

INTRODUCTION

Glastonbury Health Centre 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 July 2022 and March 2023.

INFECTION CONTROL LEAD

The practice's clinical lead for infection control is Sheila Burrows (RGN).
The practice's non-clinical lead is Jo Ninemae (clerical).
The practice's overall lead is Georgina Ball (practice manager).

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

- To keep up to date with changes in infection control
- Check PPE
- Monthly routine checks

Checking the surgery for cleanliness.

SIGNIFICANT EVENTS RELATED TO INFECTION CONTROL

There has been one significant event relating to infection control within this timeframe.

There was a break in the cold chain as the vaccine fridge didn't alarm when accidentally turned off, as no batteries were installed in the fridge when installed.

All manufacturers of the vaccines were contacted and were advised it would be safe to administer the vaccines but would be off license. All parents of the children vaccinated were informed that the vaccines were given off license.

Batteries have since been installed in the fridge.

AUDITS RELATING TO INFECTION CONTROL

Audits relating to infection control have been undertaken at the practice between April 2022 – July 2022, and the recommendations and /or action plans were produced in response to the findings. Audits have been performed every month. Any problems were discussed with Tracey Holle (previous practice manager).

RISK ASSESSMENTS RELATING TO INFECTION CONTROL

The following risk assessments relating to infection control have been undertaken at the practice between April 2021 – July 2022. The following recommendations and/or action plans were produced in response to the findings:

- Keeping up with guidance for covid and use of PPE
- Monitoring cleaning rotas for clinical rooms
- Working closely with Green Machine (our cleaning company).

PRACTICE POLICIES, PROCEDURES AND GUIDANCE RELATING TO INFECTION CONTROL

The practice maintains the upkeep of the following policies, procedures and guidance relating to infection control. These policies, procedures and guidance will be reviewed and updated every April as well as being amended on an ongoing basis to keep up with changes in regulations.

Covid 2020 – 2021 regulations and guidance were changing almost daily and were amended as required.

TRAINING RELATING TO INFECTION CONTROL

The following staff members have received instruction, information or training relating to infection prevention and control.

Sheila Burrows attends ccg IP & C meetings when available.

Jo Ninemae will attend meetings if Sheila is unable to attend

Georgina Ball will attend meetings at a higher level.

ESTATES AND FACILITIES

The surgery utilizes the Green Machine cleaning company who ensure the premises are kept clean. They have their own specific cleaning schedule which they adhere to and carry out their own cleaning audits.

PRIORITIES AND OBJECTIVES FOR THE FORTHCOMING YEAR

To ensure all policies and audits are completed.

To amend any audits and policies as changes occur.

To have allocated protected time to complete any outstanding policies and audits.

POLICIES

The practice is striving to complete all relevant infection prevention and control related policies are in date.

Policies relating to infection control are available to all staff and are available on the Y drive, these policies will be reviewed and updated annually.

All policies will be amended on an ongoing basis as current advice, guidance and legislation changes occur.

RESPONSIBILITIES

It is the responsibility of the infection control leads within the practice to be familiar with this statement and their roles and responsibilities under the current statement.

Review date April 2023