

Infection Control Annual Statement

Cockhedge Medical Centre 2025

This annual statement will be generated each year in February 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. The report will be published on the practice website and will include the following summary:

- Any infection transmission incidents and any actions 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

The Cockhedge Medical Centre has one lead for Infection Prevention and Control: Amanda Coombes who is supported by the IPC lead Dr M. Whitenburgh – GP Principal.

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 monthly staff 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 including the cleanliness of the practice.

Infection Prevention Audit and Actions

The annual infection prevention and control audit was completed by Stephanie Whitenburgh in February 2025.



Audit tool for
Primary Care 2024-2!

As a result of the audit, the following has been changed in Cockhedge Medical Centre:

- Two clinical rooms will have the flooring replaced to the required safety standard.
- Handwash appliances have been audited throughout the practice.
- Patients chairs in the waiting room have been replaced with wipeable seating.

- Chairs in the clinical room have been replaced as rips in the covers were observed.

An audit on hand washing was last undertaken on 03/02/2025.

The Cockhedge Medical Centre plan to undertake the following audits in 2025.

- Annual Infection and Prevention Audit.
- Hand hygiene audit.
- 3 monthly waste audits.
- 3 monthly sharps bin audit.
- Weekly cleaning spot check.
- Spot checks on clinicians – bare below the elbows.

Risk assessments

Risk assessments are carried out annually.

Legionella (water) Risk Assessment: the practice has a contract with a water specialist company to ensure that the water supply does not pose a risk to patients, visitors, or staff.

Immunisation: As a practice we ensure that all our staff are up to date with their Hepatitis B immunisations and are offered any occupational health vaccinations applicable to their role (i.e. MMR, Seasonal flu and covid vaccinations). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Curtains: The NHS cleaning specifications state the clinical curtains should be cleaned or if using disposable curtains, replaced every 6 months. To this effect we use disposable curtains and ensure they are changed every 6 months. The window blinds in the waiting room are very low risk and therefore do not require a specific cleaning regime other than regular vacuuming to prevent build-up of dust. The modesty curtains although handled by clinicians are not handled by patients and clinicians have been reminded to always remove gloves and clean hands after an examination and before touching the curtains. All curtains are regularly reviewed and changed if visibly soiled.

Cleaning specifications, frequencies, and cleanliness: We have a cleaning specification and frequency policy which our cleaner and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the practice including cleanliness of equipment.

Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use.

Training

- All our staff receive annual training in infection prevention and control.

- All clinical and non-clinical staff have completed blue stream e-learning training.
- IPC lead attends quarterly IPC link meetings organised by the infection control team, Bridgwater Community Health Care.

Policies

All Infection Prevention and Control 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 circulated amongst staff for reading and discussed at meetings on an annual basis.

Responsibility

It is the responsibility of all staff to be familiar with this statement and their roles and responsibilities within this.

Review date

February 2026

Responsibility for review

The Infection Prevention Lead is responsible for reviewing and producing the annual statement for and on behalf of the Cockhedge Medical Centre.

Audit tool completed by:

Stephanie Whitenburgh

Practice Manager