ANNUAL INFECTION PREVENTION AND CONTROL (IPC) STATEMENT

Practice Name: Peverell Park Surgery

Date: May 2025

Introduction

This Annual Infection Prevention and Control Statement has been produced in accordance with the requirements of the Health and Social Care Act 2008 and guidance issued by the Care Quality Commission.

The statement outlines the systems and processes in place to minimise the risk of infection and ensure patient and staff safety within the practice.

Infection Prevention and Control Lead

The designated Infection Prevention and Control (IPC) Leads for the practice are:

Name: Kayleigh Dymond

Role: Operational Lead Nurse

Name: Heidi Metcalfe

Role: Long Term Conditions Lead Nurse

The IPC Lead is responsible for overseeing infection prevention arrangements, staff training, audits, policy reviews, and monitoring compliance with current guidance.

Policies and Procedures

The practice has up-to-date Infection Prevention and Control policies and procedures which are reviewed regularly and made available to all staff.

Policies include (but not limited to):

- Hand hygiene
- Use of personal protective equipment (PPE)
- Cleaning and decontamination
- Waste management
- Sharps safety

- Management of exposure incidents
- Specimen handling

Staff Training

All staff receive IPC training appropriate to their role, including induction and refresher training.

Training completed during this reporting period included:

- Infection Prevention and Control
- Hand Hygiene
- PPE Use
- Sharps Safety
- Sepsis Awareness (where applicable)

Staff compliance with mandatory IPC training is monitored by the practice.

Audits and Risk Assessments

The practice undertakes regular IPC audits and risk assessments, including:

- Hand hygiene audits
- Vaccine cold chain monitoring

Any actions identified are documented and addressed appropriately.

Significant Events

During this reporting period: No significant IPC incidents occurred.

Cleaning and Decontamination

The practice maintains appropriate standards of cleanliness throughout all clinical and non-clinical areas.

An external cleaning company is employed for daily cleaning of the practice. Clinical equipment is cleaned and decontaminated in accordance with manufacturer guidance and national standards.

Staff Health

The practice encourages staff to comply with occupational health requirements and recommended immunisations, including seasonal influenza vaccination.

Staff are expected to report illness that may affect patient or staff safety.

Antimicrobial Stewardship

The practice supports responsible antimicrobial prescribing and follows local and national prescribing guidance to reduce antimicrobial resistance.

Review and Future Priorities

The practice remains committed to maintaining and improving Infection Prevention and Control standards.

Planned priorities for the next 12 months include:

- Leigonella Testing
- Implementing National Standards of healthcare cleanliness 2025 which are due to become mandatory within General Practice in 2027
- Reviewing and updating infection control policies and linked Standards of Practice
- Undertake a comprehensive clearout and reorganisation of clinical rooms to reduce clutter, optimise storage, and ensure supplies are accessible, standardised, and compliant with infection prevention and control requirements.

Signed: K.Dymond

Name: Kayleigh Dymond

Role: Operational Lead Nurse

Date: 30.06.2025