

Annual statement on compliance with IPC practice (including cleanliness) for General Practice

Introduction

This Annual statement has been drawn up on 2nd January 2025 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 for General Practice*. It summarises:

1. Infection transmission incidents and actions taken
2. IPC audits undertaken and subsequent actions implemented
3. Risk assessments undertaken and any actions taken for prevention and control of infection
4. Staff training
5. Review and update of IPC policies, procedures and guidelines
6. Antimicrobial prescribing and stewardship

This statement has been drawn up by:

Name: Simon F Temple-Pollington & Pippa Roberts

Role: Operations Manager & Infection Prevent and Control (IPC) Lead Nurse

1. Infection transmission incidents

There have been no incidents reported in the last 12 months. Any incidents reported would be discussed with the Integrated Care Board IP&C Team and raised as a significant event. Control measures would be reviewed and a plan put into place to ensure patient safety.

2. IPC Audits and actions

Monthly audits of the environment are carried out and documented accordingly. Any breaches of policy are reported internally, rectified and communicated with the team.

3. Risk Assessments

Provide details of IPC related risk assessments carried out and actions taken to prevent and control infection.

There are risk assessments carried out for staff who are vulnerable and where patients present with a communicable disease. In the instance that there is an IP&C risk, appropriate risk assessments are undertaken to promote compliance.

4. Staff training

All staff undertake mandatory training in IP&C and compliance with training is monitored centrally.

5. IPC Policies, procedures and guidance

IP&C Policies are linked to training courses and are reviewed yearly. All policies are accessible via the training platform.

6. Antimicrobial prescribing and stewardship

Provide details of all activities undertaken to promote and improve antimicrobial prescribing and stewardship.

Antimicrobial prescribing and stewardship is monitored through the Prescribing meetings and Clinical Governance processes. Reports are presented to the team and Audits are carried out of the effective use of medication.

Forward plan/Quality improvement plan

Issue	Actions	Date for completion	Person responsible	Progress
No Issues identified				

Forward plan/Quality improvement plan review date:

N/A

IPC statement and Forward plan/Quality improvement plan for presentation to

Clinical Governance Meeting

On

9th Jan 2025

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