

February 2024

Purpose

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 organisation's website and will include the following summary:

- Any infection transmission incidents and any action taken (these will have been reported in accordance with our significant event procedure)
- Details of any infection control audits carried out and actions undertaken
- Details of any risk assessments undertaken for the 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 lead for infection prevention and control at Merton Lodge Surgery is Emma Watson, ANP Partner.

The IPC lead is supported by Charlotte Wright, Management Administrator.

a. Infection transmission incidents (significant events)

Significant events involve examples of good practice as well as challenging events.

Positive events are discussed at meetings to allow all staff to be appraised in areas of best practice.

Negative events are managed by the staff member who either identified or was advised of any potential shortcoming. This person will complete a Significant Event Analysis (SEA) form which commences an investigation process to establish what can be learnt and to indicate changes that might lead to future improvements.

All significant events are reviewed and discussed at several meetings each month. Any learning points are cascaded to all relevant staff where an action plan, including audits or policy review, may follow.

In the past year, there has been 1 significant event raised which related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

b. Infection prevention audit and actions

An internal audit was conducted on 16th January 2024.

Actions from the audit are noted below:

1. Upstairs waiting room - Flooring ideally should be hard safety flooring as high traffic area, areas of carpet worn – **Flooring quotes obtained, and new flooring scheduled to be fitted April 2024.**
2. Room 6 – Flooring at entrance needs replacing - **Flooring quotes obtained, and new flooring scheduled to be fitted April 2024.**
3. Room 1 – Carpeted area needs replacing with vinyl safety flooring - **Flooring quotes obtained, and new flooring scheduled to be fitted April 2024.**
4. Room 3 – Requires re-paint – **Repaint woodwork and walls in wipeable paint by August 2024**
5. Corridors – Walls are marked, peeling paint - **Repaint woodwork and walls in wipeable paint by August 2024**
6. Entrance – Requires re-paint - **Planning in place with council for 106 application**

c. Risk assessments

Risk assessments are carried out so that any risk is minimised and made to be as low as is reasonably practicable. Additionally, a risk assessment that can identify best practice can be established and then followed.

In the last year, the following risk assessments were carried out/reviewed:

- General IPC risks
- COSHH

In the next year, the following risk assessment will also be reviewed:

- Staff vaccinations
- Sharps

d. Training

In addition to staff being involved in risk assessments and significant events, at Merton Lodge Surgery all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually.

Various elements of IPC training in the previous year have been delivered at the following times: via Bluestream Training online platform.

e. Policies and procedures

The infection prevention and control-related policies and procedures that have been written, updated or reviewed in the last year include, but are not limited, to:

- Infection Prevention Control guidance policy
- COSHH policy
- Waste Management policy
- Cleaning Standards and Schedule policy
- Cold Chain policy
- Hand Hygiene policy
- Safe Management of Sharps and Inoculation Injuries policy
- Uniform policy

Policies relating to infection prevention and control are available to all staff and are reviewed and updated annually. Additionally, all policies are amended on an ongoing basis as per current advice, guidance and legislation changes.


f. Responsibility

It is the responsibility of all staff members at Merton Lodge Surgery to be familiar with this statement and their roles and responsibilities under it.

g. Review

The IPC lead and Charlotte Wright, Management Administrator are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before 9th February 2025.



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Signed by



Emma Watson, ANP Partner
For and on behalf of Merton Lodge Surgery



Charlotte Wright, Management Administrator
For and on behalf of Merton Lodge Surgery