

The Spitalfields Practice

20 Old Montague Street, London E1 5PB

Tel: 020 7247 7070 Fax: 020 7650 1920

Dr A Ali

Dr S Desai

Dr A Uddin

Dr K Ahmed

Dr S Nahar

Dr V Bernhardt

Dr H MacCarthy

Infection Control Annual Statement May 2023

Purpose

This annual statement will be generated each year in April/ May 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*. It summarises:

- Any infection transmission incidents and any action taken (these will be 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 Spitalfields Practice's Lead for Infection Prevention and Control is Kirsty McQuade (Practice Nurse).

The IPC lead is supported by Sam Bala (Facilities Manager) and Lead Practice Nurse (Maria Hijas).

In February 2020 Kirsty McQuade attended a two day face-to-face Infection Prevention and Control training course.

All staff at the practice are required to undertake a minimum of yearly infection and prevention control training via an on-line learning system called Bluestream Academy.

Infection transmission incidents (Significant Events)

Significant events (which may involve examples of good practice as well as identifying areas for improvement) 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 monthly meetings and learning cascaded to all relevant staff. Electronic copies of all significant events are kept in the Significant Events folder in the shared drive.

During the past year, we have had three significant events in relation to infection prevention and control.

During a routine sharps bin audit of all the clinical rooms, Nurse Kirsty discovered a used sharps box sitting by an open window, where the temporary closure was not used. This was identified as a potential 'never event', therefore the sharps bin was moved to a more secure location and the temporary closure activated. The team discussed the significant event in a practice meeting to facilitate further learning.

During a CQC visit, it was noted, that one of the sharp bins had been over-filled and the label had not been completed correctly. The room is used by non-practice staff from other NHS teams that make use of our facilities. This incident was cascaded to their management team to ensure their staff learn from this event and employ safe sharp use and disposal practices.

During a routine sharps bin audit of all the clinical rooms, Nurse Kirsty discovered a sharps bin that had not been assembled correctly and not labelled. It had not been used, yet had the potential for a clinician to use it without realising it had not been assembled correctly. A significant event was completed, to facilitate staff learning. It was suggested, that un-assembled sharp bins, should be left in a manner that makes it clear it has not been assembled. This will be discussed at a forthcoming practice meeting.

Infection Prevention Audits and Actions

The annual infection prevention and control audit was completed by Kirsty McQuade in May 2023.

The audit highlighted that some staff are not aware of the symbol for single use items but they were able to identify what items, were single use. Re-educated staff of what the symbol is.

It highlighted that the building would benefit from upgrading but due to financial pressures, this would not be possible in the near future.

It highlighted some improvements that would be possible within the next few months – there were fabric chairs in use in clinical rooms, whereas wipe-able chairs are recommended for infection prevention and control.

Regular Sharps bin audits and hand washing audits were also completed throughout 2022/2023. Any issues were immediately discussed with staff and re-assessed later to check if improvement had been made.

The Spitalfields Practice plan to undertake the following audits in 2023/2024:

- Annual Infection Prevention and Control audit
- Sharps bin audit
- Hand-washing audit

Risk Assessments

Risk assessments are carried out so that risks can be identified and mitigated against. They also help to identify best practice so that this can be implemented and embedded in the work we carry out. In the last year the following risk assessments were carried out/ reviewed.

Legionella (Water) Risk Assessment

The practice completed an in house risk assessment for water safety to ensure that the water supply does not pose a risk to patients, visitors and staff. The risk assessment was carried out by the Facilities Manager.

Staff Immunisation Review

As a practice we ensure that all of our staff are up to date with their Hepatitis B immunisations and offered any occupational health immunisations applicable to their role (i.e MMR, seasonal flu). We also provide our patient population with the recommended immunisations set out by Public Health England provided either in practice or in the patient's home (supported by the district nursing team).

Policies

All Infection Prevention and Control policies have been updated this year. They are all available to our staff via the Policies & Procedures Current folder in our shared drive. Policy reviews take place bi-annually or sooner if necessary.

Responsibility

It is the responsibility of each individual member of the practice team to be familiar with this statement and their roles and responsibilities under this.

Review date

May 2024

Responsibility for review

Infection Prevention Control Lead

Practice Manager