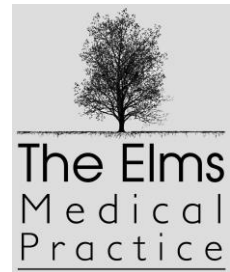


The Elms Medical Practice INFECTION CONTROL ANNUAL STATEMENT 2019

We aim to keep the surgery clean and tidy, and to offer a safe environment for all our staff, patients and relatives.

Our GP's and Nurses follow procedures to make sure that the treatment of our patients and the clinical equipment used meets infection control and safety standards guidance.

The GP Partners encourage staff and patients to raise any issues or report any significant incidents relating to cleanliness and infection control. If any arise then the practice teams meet to discuss and identify improvements we can make to avoid any future problems.



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This annual statement will be generated each year.
It will summarise:

- 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 undertaken and actions taken.
- Details of any infection control risk assessments undertaken.
- Details of staff training.
- Any review and update of policies, procedures and guidelines.

Background

The Elms Lead for Infection, Prevention and Control:
Dr Bethan Rees

Dr Rees attends regular infection control training courses (last training certificate 6th December 2018) and shares this information with the team via the nurses meetings, GP meetings and team leader meetings. The minutes are also placed on the Practice Intranet.

Significant Events

In the past year there has been no significant events raised relating to infection control.

Audits

Quarterly audits are carried out with regard to Minor Surgery undertaken here at The Elms and no infections were reported.

With the formation of our new Harpenden Primary Care Network with The Village Surgery and Davenport House we hope to in future cross audit each other's practices.

We will continue to notify patients of any seasonal outbreaks via our plasma screen display in the waiting room and on our practice website (including the recent measles outbreak 2019)

The surgery looked at the cleaners contract in April 2016 as we had been approached by many other contract cleaners but it was decided to remain with the long standing local cleaner. They have always remained hard working, flexible, thorough and to a high standard. We regularly check their contracts are in line with the CQC guidelines and we have had a meeting to make sure it was understood and if any amendments were necessary. The contract is a rolling one and communication will continue to make sure these high standards are held.

We continue to enforce to all clinical and non-clinical staff that hand hygiene is the single most effective method of preventing cross infection and recommend everyone washes their hands or use an alcoholic gel regularly. All staff had recent handwashing training on 5th March 2019.

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed up. In the last year a number of risk assessments were carried out.

Toys

Toys that cannot be cleaned easily are a clear infection risk to our patients. Due to the onerous task of cleaning each item after each child had played with a toy in the waiting room it was decided to remove all toys and the playhouse from the waiting room. It was felt to be sensible however to have plastic toys available in the GP consulting rooms as this had often proved useful when dealing with a nervous child. The toy could then be wiped with a sterilising cloth before any further contact with another child. We would still encourage parents to bring their own toys.

Curtains

The surgery has various curtains and blinds, both at the windows and in consulting rooms as modesty screens to be used around couches during examinations. The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every 6 months. In line with this The Elms believes the latter is best practice and has therefore moved to Williams disposable curtains throughout the surgery. To this effect we had blinds especially made in a fabric that requires wet wiping or vacuum only to prevent dust build up and on assessment generally found the window blinds were very low risk. We are currently in the process of replacing any tatty or broken blinds. Also all blinds in public areas have been replaced in line with new safety guidelines with regards to regulatory pulley systems. Nurse treatment rooms have been replaced with PVC blinds.

Legionella

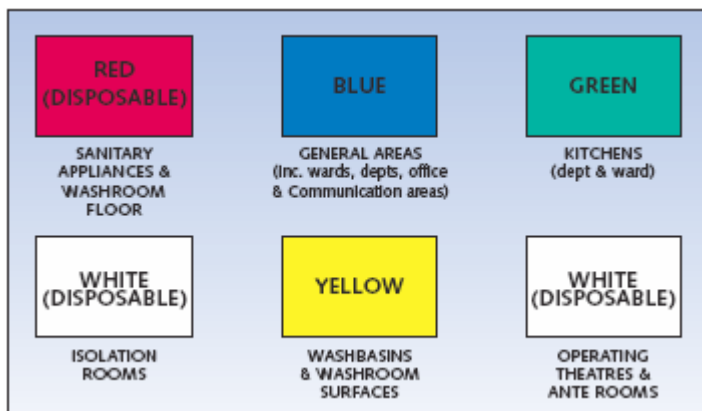
A Legionella risk assessment is completed every 2 years. This was last carried out on 6th November 2018 by a company called 'Yes Results'. The findings of this risk was minimal. The surgery continues to take temperature readings of both the hot and cold water at their sentinel points every month and we watch for any changes. This continues to be actioned and the findings are noted. There was lime scale noted in the water tank but following an inspection by a professional local plumber it was felt the lime scale deposits were negligible particularly for this area and noted that water clean and safe.

Guide Dogs and Hearing dogs

The new protocol has been written with regard to guide dogs and hearing dogs coming into the practice. The key factor is cleaning all areas the dog has been and informing the cleaners to do a thorough deep clean at the end of that day.

Cleaning Cloths

The surgery has introduced a more stringent cleaning regime and now using colour coded cloths. This further reduces the risk of cross contamination:



The cleaners and the nurse team stick by the golden rule: Work from the cleanest area toward the dirtiest area.

Staff Training

Nurse Ruth Mayo continues to provide Infection, Prevention and Control induction training to all new members of staff.

Ruth's most recent Infection Control update course was 20th March 2019

If you have any concerns about cleanliness or infection control, please report this to our Patient Services Lead or a member of the reception team.

Policies, Procedures and Guidelines

Most policies are formally reviewed annually, however all are amended on an ongoing basis as current advice changes, or need arises. With the introduction of CQC (Care Quality Commission) it has made everyone at the Elms look in great depth at our policies and protocols and to make sure that they continue to be workable and appropriate.

**Last Risk Assessment Date: 24.5.19 carried out by Sarah Brindley and Ruth Mayo
A copy of the report can be requested. No significant events reported.**