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240 Wexham Road Surgery
Slough
Berkshire
SL2 5JP

INFECTION CONTROL ANNUAL STATEMENT 2024/2025

Purpose

This annual statement will be generated and reviewed each year 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 practice 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 undertaken, 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 guideline

Background:

240 Wexham Road Surgery Lead for Infection Prevention and Control is Dr Veena Sharma, supported by May Teodoro Practice Nurse, Namita Sharma Business Manager.

This team keep updated with infection prevention & control practices and share necessary information with staff and patients throughout the year.

Significant Events:

Infection transmission incidents (Significant Events)

In the past year we have recorded three Significant Events that related to infection prevention & control

- C-difficile Infection (Hospital Acquired)
- MRSA (Colonisation Requiring Prophylactic Treatment)
- Confirmed Measles

There have been zero patient complaints made regarding cleanliness or infection control.

Disease Outbreak Control

With Measles cases on the rise nationally and the increase in probable cases in unvaccinated children in Slough, we carried out an urgent staff meeting to discuss ways we could support our patients and staff.

The practice nurse team contacted all unvaccinated children to carry out a disease prevention consultation and promote benefit of MMR vaccine. We sent a text message to all patients aged under 18 providing them with links to NHS advice and guidance regarding measles symptoms: [Measles - NHS \(www.nhs.uk\)](http://www.nhs.uk).

We reviewed our staff immunisation policy and carried out risk assessments where appropriate to provide the greatest safety possible to patients and staff.

We introduced additional internal protocols and assigned a clinical room with external entry/exit door as the isolation consultation room. Patients were assessed in the isolation room at the end of morning surgery, midday, or last appointment in the evening. This prevented the likelihood of exposure to staff and patients in the practice, enabled appropriate PPE don and doffing and to carry out appropriate decontamination and cleaning procedures following consultation.

Care Navigators were provided with a rash and fever triage support tool. Posters were displayed at the surgery entrance, advising patients with a rash and fever to telephone and speak to a member of staff before entering the practice. Posters alerting to the outbreak were placed on the notification board in the waiting rooms.

The practice has had one confirmed case of Measles this year – Immunisation declined by parents

Premises

Following NHS IPC building and environment guidance ([Infection control in the built environment | National Services Scotland \(nhs.scot\)](http://www.nhs.uk)) the practice has replaced all six consulting room sinks and replaced them with HBN 00-10 IPC compliant sink units. In addition to this, and following the guidance, the surgery has fitted new coving and capped clinical flooring to five consulting rooms.

Audits:

Annual internal IPC audit and hand washing audits have been completed

Detail what audits were undertaken and by whom and any key changes to practice implemented as a result.

- General IPC
- Hand Washing Soap Dispenser Audits
- Hand Hygiene
- Cold Chain
- Staff vaccinations

- Water safety
- Vaccine storage
- Clinical and Non-Clinical Waste Audit
- Cleaning standards
- Control of substances hazardous to health (COSHH)

Risk Assessments:

Regular risk assessments are undertaken to minimise the risk of infection and to ensure the safety of patients and staff. The following risk assessments related to infection prevention & controls have been completed in the past year and appropriate actions have been taken:

- Staff Immunisations
- Health and Safety
 - Control of substances hazardous to health (COSHH)
 - Fire
 - Legionella risk assessment
 - Disability Access
- Disposal of clinical and non- clinical waste
- Spillage Kits
- Sharps injury
- Use of personal protective clothing/equipment
- Risk of body fluid spills
- PPE

Staff Training

All staff participate in risk assessments and significant event reports and reviews. New employees receive IPC mandatory training commencing their post. Thereafter, all staff receive annual refresher training.

One new starter joined the practice 240 Wexham Road Surgery in the past 12-months, they have received infection control and hand-washing training within 6 months of employment.

100% of the Practice Clinical staff completed their annual infection prevention & control update training via Blue Stream/eLfH online training.

100% of the Practice non-clinical staff completed their annual infection prevention & control update training.

The Infection Control Lead and support team have attended annual updates for their role provided the Infection Prevention & Control Nurse for Berkshire East ICB.

Infection Control Advice to Patients:

Patients are encouraged to use the alcohol hand gel/sanitiser dispensers that are available throughout the surgery.

There are posters displayed in the practice on:

- MRSA
- Norovirus
- Measles
- Influenza (seasonal)
- The importance of immunisations (e.g. in childhood and overseas travel)
- Recognising symptoms of TB
- Hand hygiene

Policies, procedures, and guidelines

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:

- BCP Continuity Plan
- IPC Infection Control Policy
- Staff Immunisation Policy
- Handwashing Policy
- COSHH Policy
- Cold Chain Policy
- PAT Testing Policy
- Assistance dogs Policy
- Covid - Living with Policy
- Specimen Collection Policy

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

Responsibility

It is the responsibility of all staff members at 240 Wexham Road to be familiar with the IPC statement and their roles and responsibilities within the statement.

IPC Annual Statement Review

The IPC lead and IPC support team/compliance managers are responsible for reviewing and producing the annual statement.

This Annual Statement was reviewed, updated, and published to the practice website on 28.6.2024

The annual statement will be updated on or before June 2025