



THE BOSMERE MEDICAL PRACTICE

Bosmere Medical Centre, Solent Road, Havant,
Hampshire PO9 1DQ. Tel 02392 476941 Fax 02392 492524

Infection Control Annual statement for 2014-2015

PURPOSE

This Annual Statement will be generated each year in June. It will summarise:

- Any infection transmission incidents and any action taken (reported in accordance with our Significant Event procedure).
- Details of any infection control audits undertaken and any subsequent actions taken as a result.
- Details of any infection control risk assessment undertaken and any subsequent actions taken as a result.
- Any review and update of policies, procedures and guidelines.

INFECTION CONTROL LEAD

Nurse Practitioner Katie Raley is the Practice Lead for Infection Control at the Bosmere Medical Practice assisted by Mrs Sally Walker, Practice Manager and Miss Anita Moth Operational Manager.

An annual audit will be carried out by Nurse Practitioner Raley, with risk assessments as necessary.

SIGNIFICANT EVENTS

There was one significant event which occurred in September 2014. One of the regular cleaner had a needle-stick injury. The Needlestick Protocol was followed, with the local Occupational Health department advising screening blood tests for hepatitis C and HIV, with a further 3 month follow up.

AUDITS

The annual infection control audit was carried out in May 2015 by Nurse Practitioner Raley. The main findings of the audit were as follows:

The cleaning contractors must tighten up their procedures, such as correct storage of mop heads.
--

The touch screen for patient arrivals was felt to be a potential source of infection and this was added to the receptionists' daily job sheet. An additional sanitizing spray

dispenser is to be put on the wall close to the touch screen for patient use.

All instruments are now disposable.

The chairs in both waiting rooms and clinical rooms should be deep cleaned at least 12 monthly.

Carpets should be cleaned annually.

RISK ASSESSMENTS

A risk assessment was carried out on the single remaining table top toy in each of the waiting rooms and it was felt that these could be retained if cleaned regularly with Clinell Wipes which is not harmful to children.

A risk assessment was carried out on the disposable curtains surrounding the examination beds. It was felt that high use areas which include the three treatment rooms and the 3 main duty rooms should have the examination curtains replaced 6 monthly. Other clinical areas which are less used should have the examination curtains changed annually, or more frequently if this is seen to be necessary. This routine is being maintained.

A Legionella Risk Assessment was carried out in October 2014. The finding of this risk assessment showed that the risk was minimal as long as the taps are de-scaled regularly and the shower is run at least weekly. Laboratory testing has confirmed that the water supply at Bosmere is free of legionella and water samples from different areas of the premises will continue to be tested for legionella every twelve months.

STAFF TRAINING

Annual training to be undertaken as follows:

- Infection Control Lead to attend an Infection Prevention and Control update course
- 'Infection Prevention and You' e- learning course for all clinicians
- Handwashing Training for all staff

POLICIES, PROTOCOLS AND GUIDELINES

The following are in use at the Practice. These are reviewed annually and updated when anything changes:

- Infection Prevention and Control Policy

- Cleaning and Decontamination of Equipment Protocol
- Hand Hygiene Protocol
- Handling of Specimens Protocol
- Clinical Waste Protocol
- Clinical Fridge Cleaning Protocol
- Needle Stick Injury Protocol
- Sharps Protocol
- Personal Protective Equipment Protocol
- Body Fluid Spillage Protocol
- Isolation Policy
- Single Use Instruments Protocol
- Minor Surgery Protocol
