Protocol: Infection Prevention and Control Annual Statement

Agreed By: The Partners of Cavendish Health Centre

Reviewed: Annually

Latest review date: 06.03.2025 TD



Infection Prevention and Control Annual Statement

Purpose

This annual statement will be generated each year in March, 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 Cavendish Health Centre is Iwona Kopka (Practice Nurse).

The IPC lead is supported by Dr Chatsuda Chierakul (GP Partner) and Tamsin Dart (Practice Manager).

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.

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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 have been 0 significant events raised which related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

b. Infection prevention audit and actions

There were no actions relating to Infection Control following our last CQC visit (full inspection 2015, new premises inspection January 2022).

There were no actions following the external Infection Control audit and inspection carried out by NWL ICB on 7 December 2021.

Internal Infection Control inspection undertaken in November 2024 and March 2025 (we carry these out every 6 months).

c. Risk assessments

Risk assessments are carried out at as part of the Infection Control audit 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.

d. Training

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

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 (IPC) Handbook (all policies included).

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 Cavendish Health Centre to be familiar with this statement and their roles and responsibilities under it.

g. Review

The IPC lead and Practice Manager are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before March 2026.