Newbridge Surgery
Dedicated, Quality Care

INFECTION CONTROL ANNUAL STATEMENT FOR 2025-2026

Purpose

This annual statement is generated each year in September. It summarises the work we have done throughout the year to promote best practice in Infection Prevention and Control in Newbridge Surgery and to ensure we deliver safe and effective care.

This statement summarises:

- 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 staff training.
- Any review and update of policies, procedures and guidelines.

Background

In the last year, a new lead for infection prevention and Control was appointed.
Our lead nurse, Jo Kingston attends regular IPC area meetings to ensure knowledge stays current and is evidence-based.

Jo is supported in this role by Megan Flint, our Nurse Associate, who is responsible for completing audits and providing feedback on identified actions.

Last year the Infection Control teamnet page was created.
27 policies were adopted from the Infection Prevention and Control for General Practice.
All the policies were reviewed by the lead nurse and uploaded to teamnet, enabling easy access to these documents for the whole team.

Significant Events

A needlestick injury occurred during a childhood vaccination clinic.
Following this, the nurse involved reviewed the relevant sharps management and inoculation injury policy and reflected on her practice.
Both of these actions have safeguarded against future recurrences.

Audits

Audits completed in the last year include; Quality Improvement Annual Audit, Examination Couches, Curtains, Sharps and Disposal of clinical waste containers, Hand hygiene, Vaccine Storage and Vaccine Fridges.

Megan carries out monthly audits to enable us to demonstrate that we are complying with best practice guidance.

Staff Training

Clinical staff have completed annual refresher training in Infection Control and Prevention, which was undertaken through an online course.

Non-clinical staff receive training via E-learning as part of their mandatory training

Policies, Procedures and Guidelines

A monthly infection control audit is carried out by Megan Flint.
This is uploaded to our teamnet page where all staff can view it.
If any actions are needed, Megan will liaise with the Lead nurse, Jo Kingston.
Any actions taken are documented in the audit.

Our IPC general practice policies are reviewed annually but are also updated as current advice changes, or a need arises.

There are 27 policies, as listed below.
The practice is audited with an audit tool to ensure conformity to these policies is maintained.

Antimicrobial stewardship
Aseptic technique
Blood-borne viruses
C. Difficile
CJD
Hand hygiene
Invasive devices
MRGNB including CPE
MRSA
Notifiable diseases
Outbreaks of communicable disease
Patient placement and assessment of infection risk
PPE
PVL
Respiratory and cough hygiene
Respiratory illnesses
Safe disposal of waste, including sharps
Safe management of blood and body fluid spillages
Safe management of care equipment
Safe management of linen
Safe management of sharps and inoculation injuries
Safe management of the care environment
Scabies
SICPs and TBPs
Specimen collection
Venepuncture
Viral gastroenteritis

We have also reviewed the relevant Health & Safety policies regarding handling of specimens, spillages, and needlestick contamination.
These are all laminated and displayed in clinical rooms.
They have all been updated to be IPC compliant and show the most up-to-date and relevant information.

Distribution: Noticeboards in waiting room and for staff; Clarity teamnet, website