



## Priory Surgery Infection Control Statement

### Purpose

This annual statement will be generated each year in July 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 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 Priory Surgery is Laura Cox: Lead Nurse

The IPC lead is supported by Cara Fynn (Practice Business Manager) and Dr Carrie Saunders (Partner responsible for Health and Safety).

#### 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 an Incident Reporting form which commences an investigation process to establish what can be learnt and to indicate changes that might lead to future improvements.

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 has also been 1 complaint made regarding cleanliness or infection control.

#### b. Infection prevention audit and actions



The Practice has carried out the following IPC audits this year:

Annual IPC audit	27.07.24
Quarterly IPC Audits	April 24, Nov 24 and January 25
Monthly Audit of Daily Room checks	
Monthly audit of daily fridge checks	
Bi-monthly cleaning audits	

An operational meeting is held following every annual and quarterly audit. Any actions are added as appropriate to the premises work schedule, and/or followed up at practice, operational and team meetings.

**c. Risk assessments**

Risk assessments are carried out so that any risk is minimised and made to be as low as is reasonably practicable.

In addition to our IPC audits, in the last year, the following risk assessments were carried out/reviewed:

- Air Con and Fans
- Assistance Dogs
- COSHH
- Cleaning
- Clinical Waste Disposal
- Cold Chain
- Legionnaires
- MPOX
- Sharps handling
- Spillages
- Staff Vaccinations and Immunisations
- Toys policy reviewed

We review all IPC policies and processes on a yearly basis.

**d. Training**

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

Various elements of IPC training in the previous year have been delivered at the following times:



- Hand hygiene training for all teams spaced across the year
- New starter IPC training on commencement of employment.
- Spills kit training for our Nursing and Reception team on an annual basis
- Training on waste disposal processes for any new members of our cleaning staff

**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:

- Priory Surgery IPC Handbook

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 Priory Surgery 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 31.03.26

**Signed by**

A handwritten signature in black ink, appearing to read "Cara Fynn".

Cara Fynn  
For and on behalf of Priory Surgery

11<sup>th</sup> February 2025