

**Annual statement on compliance with IPC practice (including cleanliness) for General Practice.**

**Introduction**

This Annual statement has been drawn up on 15/05/2025 in accordance with the requirement of the Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance for Laurel Bank surgery.

It summarises:

1. Infection transmission incidents and actions taken
2. IPC audits undertaken and subsequent actions implemented
3. Risk assessments undertaken and any actions taken for prevention and control of infection
4. Staff training
5. Review and update of IPC policies, procedures and guidelines
6. Antimicrobial prescribing and stewardship

This statement has been drawn up by:

Name: Charlotte Langan – Practice Nurse

Infection Prevent and Control (IPC) Lead

It is endorsed by the Partners, Malpas Surgery.

1. **Infection transmission incidents**

*Provide details of infection transmission incidents (which may involve examples of good practice as well as challenging events), how they were investigated, any lessons learnt and changes made as a result to facilitate future improvements.*

Learning and significant events (which may involve examples of good practice as well as challenging events) are investigated in detail to see what can be learnt and to indicate changes that might lead to future improvements. All significant events are reviewed in the monthly staff meetings and learning is cascaded to all relevant staff.

In the past 12 months there have been no learning and significant events raised that relate to infection control.

1. **IPC Audits and actions**

*Provide an overview of IPC audit programme as well as examples of good practice and actions taken to address suboptimal compliance.*

The annual infection prevention control audit was completed by Charlotte Langan in May 2025.

There were no major actions identified as a result of this audit. Laurel Bank Surgery has recently undergone extensive renovations, and all areas of the building are in line with infection prevention control standards.

Laurel Bank surgery plan to undertake the following audits in 2025

* Annual Infection Prevention and Control audit
* Hand hygiene audit
* New Cleaning Standards – 3 Monthly Room Audits
* 3 Monthly Waste audit
* 3 Monthly Sharps bin audit
* Weekly Cleaning Spot Checks
1. **Risk Assessments**

*Provide details of IPC related risk assessments carried out and actions taken to prevent and control infection.*

Legionella (Water) Risk Assessment: The practice has conducted/reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors, or staff. Last reviewed on 14/04/2025 and is reviewed every 6 months.

Immunisation: As a practice we ensure that all our staff are up to date with their Hepatitis B immunisations and offered any occupational health vaccinations applicable to their role (i.e., MMR, Seasonal Flu and Covid vaccinations). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every 6 months. To this effect we use disposable curtains and ensure they are changed every 6 months. The window blinds are very low risk and therefore do not require a particular cleaning regime other than regular vacuuming to prevent build-up of dust. The modesty curtains although handled by clinicians are never handled by patients and clinicians have been reminded to always remove gloves and clean hands after an examination and before touching the curtains. All curtains are regularly reviewed and changed if visibly soiled.

Cleaning specifications, frequencies, and cleanliness: We also have a cleaning specification and frequency policy which our cleaners and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the surgery including cleanliness of equipment.

Hand washing sinks: The practice has clinical hand washing sinks in every room for staff to use.

1. **Staff training**

*Provide details of IPC induction training, annual updates and any other IPC related training.*

* All our staff receive annual training in infection prevention and control.
* IPC lead should attend quarterly IPC Lead Practice Nurse forums organised by CWP.
1. **IPC Policies, procedures and guidance**

*Provide details of all policy reviews and updates, together with details of how changes have been implemented.*

All Infection Prevention and Control related policies are in date for this year.

Policies relating to Infection Prevention and Control are available to all staff and are reviewed and updated annually and all are amended on an on-going basis as current advice, guidance, and legislation changes. Infection Control policies are circulated amongst staff for reading and discussed at meetings on an annual basis.

1. **Antimicrobial prescribing and stewardship**

*Provide details of all activities undertaken to promote and improve antimicrobial prescribing and stewardship.*

Laurel Bank Surgery’s Prescribing Lead GP, Dr Mark Edney and the Practice Clinical Pharmacist, Georgi Georgiev, leads on antimicrobial prescribing and stewardship to ensure that as a practice, we are following all relevant guidance.

This includes

* Annual audits as per local medicines management team
* Discussing changes to guidance, legislation and advice during regular clinical meetings.
* Monitoring the use of antibiotics within the practice and identifying

The most recent audit completed on the prescription of broad-spectrum antibiotics was scored at 8% out of all antibiotics prescribed at the surgery. This is a positive score as the aim is to keep this at 10% or below.

**IPC statement Review**

May 2026

**Responsibility for Review**

The Infection Prevention and Control Lead Charlotte Langan is responsible for reviewing and producing the Annual Statement for and on behalf of Laurel Bank Surgery.