

Cedar Practice Infection Prevention Control Annual Statement

Purpose

This annual statement will be generated each year in April 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 undertaken 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 Cedar Practice is Felicity Tucker, Nurse Prescriber.

The IPC Lead is supported by Dr Ben Saw and non-clinical support by Katie O'Beirne.

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 of 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 that 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 in 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 that related to infection control. There have also been 0 complaints made regarding cleanliness or infection control.

b. Infection prevention audit and actions

Infection Prevention Society Audit Tool was completed in March 2026 and resulted in the following actions:

- Chair covers in patient waiting room to be removed and replaced with wipeable seating cover compliant with IPC Guidelines
- Consulting chairs in consulting room to be removed and replaced with new chairs
- Specimen Policy completed

- Sharps box policy changed to prevent wastage
- Staff training audit
- Laminate all posters and information in patient waiting area

The IPS Audit tool is due to be reviewed January 2026.

c. Risk Assessments

Risk assessments are carried out so that any risk is minimised to be as low as reasonably practicable. Additionally, a risk assessment which can identify best practice can be established and then followed.

In the last year the following risk assessments were carried out/reviewed:

- Measles
- COSHH

In the next year, the following risk assessment will also be reviewed:

- Legionella
- Clinical Waste Streams including sharps
- Privacy Curtains

d. Training

In addition to staff being involved in risk assessments and significant events, at Cedar Practice all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually. The level of training is dependent on the staff members role and responsibilities.

Various elements of IPC training in the previous year have been delivered via online training supported by Blue Stream Academy, the ICB update training provided via Teams on Covid-19, Local Measles outbreak and regular Encircle events.

e. Policies and procedures

The infection prevention and control related policies and procedures which have been written, updated or reviewed in the last year include, but are not limited, to:

- Infection Prevention Control Handbook
- Risk assessment of staff in relation to MMR vaccinations

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.

Responsibility

It is the responsibility of all staff members at Cedar Practice to be familiar with this statement and their roles and responsibilities under it.

Review

This annual statement will be updated on or before March 2027.