FORDINGBRIDGE SURGERY

Infection Control Annual Statement

September 2026

Purpose

This annual statement will be generated each year in September 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*. It details:

- 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 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 Fordingbridge Surgery has 3 Leads for Infection Prevention and Control:

- The Nursing IPC lead for the practice is: Susie Hayball (Lead Nurse)
- The Medical IPC lead for the practice is: Dr P Downes (Senior Partner)
- Non clinical IPC Lead for the practice is: Janet Malt & Sarah Bishop (Estates Dept)

Infection transmission incidents (Significant Events)

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 six monthly with Estates Manager and Nursing Lead with learning cascaded to all relevant staff.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by Susie Hayball and Janet Malt in September 2025.

Dr Wallis undertakes a Minor Ops audit on an annual basis and will inform the Infection Control leads of any reported incidents. There has not been any post op infections in the last year.

An audit on hand washing was undertaken in July 2026. The Fordingbridge Surgery/Practice plan to undertake the following audits in 2026/2027:

- Annual Infection Prevention and Control audit
- Minor Surgery outcomes audit
- Domestic Cleaning audit
- Hand hygiene audit
- Sharps
- Cold Chain

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed. In the last year the following risk assessments were carried out / reviewed:

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.

Immunisation: As a practice we ensure all 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, Covid-19). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Other examples:

Privacy Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable privacy curtains, replaced every 6 months. To this effect we use disposable privacy curtains and ensure they are changed every 6 months. The window blinds cleaning regime is currently being reviewed. The privacy 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 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, which meet the latest standards. We have also replaced our liquid soap with wall mounted soap dispensers to ensure cleanliness.

Training

All staff receive annual online training in infection prevention and control.

Hand Hygiene training and audit is carried out annually by our Lead Nurse.

Policies

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. All are amended on an on-going basis as current advice, guidance and legislation changes. The Infection Control policy is uploaded onto the Practice Intranet once reviewed with notification sent to staff.

Responsibility

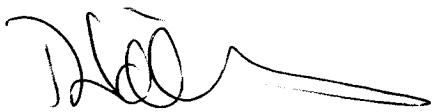
It is the responsibility of each individual to be familiar with this Statement and their roles and responsibilities under this.

Review date

September 2027

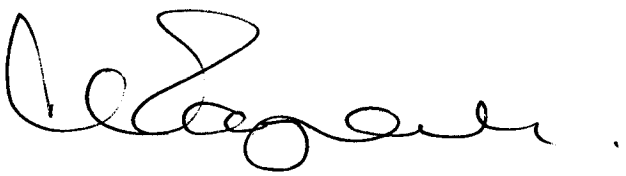
Responsibility for Review

The Infection Prevention and Control Lead Nurse and the Estates Dept are responsible for reviewing and producing the Annual Statement.



GP Partner

For and on behalf of Fordingbridge Surgery



Practice Manager