

# IPC Annual Statement Report

---

Ayton & Snainton Medical Practice

29<sup>th</sup> January 2025

## Purpose

This annual statement will be generated each year in January 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 Ayton & Snainton Medical Practice is Sister Amanda Cherry.

The IPC lead is supported by Kerry Kay, Operations Manager.

### 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 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 that related to infection control. There have also been 2 complaints made regarding cleanliness or infection control.

**b. Infection prevention audit and actions**

Hand hygiene audits are ongoing at all sites. The aim is to have had all team members, both clinical and non-clinical, audited within a twelve-month period.

In line with the NHS National Standards of Cleanliness, site audits take place monthly to ensure high standards of infection prevention and control throughout. These are undertaken by Kerry Kay and supervised by Sister Amanda Cherry. Audit reports are uploaded to the Practice Index Library Audits area for all team members to view, with follow ups diarised to ensure actions are taken and standards maintained, and feedback given to the appropriate members of the team.

**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 that can identify best practice can be established and then followed.

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

- COSHH
- Needlestick
- Legionella
- Portable Fans
- Cleaning & Hygiene
- Transportation & handling of samples
- Invasive Procedures
- Clinical Waste
- Lack of elbow or sensor taps

**d. Training**

In addition to staff being involved in risk assessments and significant event analysis and discussion, at Ayton & Snainton Medical Practice all staff receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually.

Sister Amanda Cherry attended the Infection Prevention and Control Training Event for General Practice in April 2024. Sister Amanda Cherry and Kerry Kay, Operations Manager, will be attending this years Infection Prevention and Control Training Event for General Practice in February 2025. The learning and development from these events is brought back to practice and disseminated through the whole surgery team, as appropriate.

**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:

- Infection Prevention and Control Policy
- Blood Borne Viruses Policy
- Cleaning Standards and Schedule Policy
- Safe Management of Sharps and Inoculation Injuries
- Statement for Clinicians regarding the use of reusable care equipment

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 Ayton & Snainton Medical Practice to be familiar with this statement and their roles and responsibilities under it.

**g. Review**

Sister Amanda Cherry (IPC lead) and Kerry Kay (Operations Manager) are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before 1<sup>st</sup> February 2026 .

**Signed by**

*A. Cherry*

*K. Kay*

Sister Amanda Cherry & Kerry Kay  
For and on behalf of Ayton & Snainton Medical Practice