

Belvidere Medical Practice

Annual Infection, Prevention Control Statement.

16.1.2026

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 organisation's 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 Belvidere Medical Practice is Mandy Till, Lead Practice Nurse/ Prescriber.

The IPC lead is supported by Jane Read, Quality 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 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 a Significant Event Analysis (SEA) 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 have also been 0 complaints made regarding cleanliness or infection control.

b. Infection prevention audits, risk assessments and actions.

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

In the last year the following were carried out and reviewed.

Full IPC annual Audit completed in September 2025- actions as a result-

Biannual deep clean of carpets in waiting room- with carpet replacement placed on planned building maintenance schedule when due to be changed.

Vernagel being used to ensure urine samples are safely disposed of in clinical waste bin without risk of bottle leaking.

3 monthly environmental cleanliness audits continue, with liaison with the cleaning company of any shortfalls seen. Also, the cleaning company managers do cleanliness audits according to the function risk rating of the clinical rooms.

Annual handwashing audit of all clinicians- on a rolling basis.

Sharps bins audit. In addition to regular checks to ensure bins are less than 3/4 full. Sharps bins are no longer replaced every 3 months to comply with the technical memorandum- Department of Health (2022) *Health Technical Memorandum 07-01: Safe and sustainable management of healthcare waste*

Annual Waste management audit completed December 2025.

Respiratory Infection prevention. The Practice continues to offer masks and hand gel for patients to wear and use in reception if attending with respiratory infection symptoms. Staff are wearing masks also if have respiratory symptoms to try to prevent any spread of infection. Patients are being asked to wait in cars if able and are seen in a room that requires minimal transit through the surgery if there is a risk they might have infectious illness. There is a room cleaning kit available for quick grab in the sluice room.

c. Training

In addition to staff being involved in risk assessments and significant events, at Belvidere Medical Practice all staff and contractors receive IPC induction training on commencing their post.

Thereafter, all staff receive refresher training via blue-stream academy or face to face every 12-18 months.

Infection Control is on the agenda of every clinical meeting and as needed mentioned in the daily morning huddle.

d. **Policies and procedures.**

Our IPC policy was updated 12/24 has been reviewed and remains current and reflects our responsibility to provide safe care and treatment in well maintained, clean, secure suitable premises and equipment as per the Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2025.

Waste Management Policy was updated 12/25

The IPC policies for staff to follow are found on the shared drive under Infection Control.

e. **Responsibility**

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

f. **Review.**

The IPC Lead is responsible for reviewing and producing the annual statement. This annual statement will be updated on or before 02/2027.

Signed by.

Mandy Till

For and on behalf of Belvidere Medical Practice