

Putnoe Medical Centre Infection Control Annual Statement 2023/24

The Practice Infection Control Lead is Rachel M White, Practice Nurse.
We aim to keep our surgery clean and tidy and offer a safe environment to our patients and staff.

We are proud of our modern, purpose built Practice and endeavour to keep it clean and well maintained at all times.

If you have any concerns about cleanliness or infection control, please report these to our Reception staff.

Our GPs and nursing staff follow our Infection Control Policy to ensure the care we deliver and the equipment we use is safe.

We take additional measures to ensure we maintain the highest standards:

- Encourage staff and patients to raise any issues or report any incidents relating to cleanliness and infection control. We can discuss these and identify improvements we can make to avoid any future problems.
- Carry out an annual infection control audit to make sure our infection control procedures are working.
- Provide annual staff updates and training on cleanliness and infection control
- Review our policies and procedures to make sure they are adequate and meet national guidance.
- Maintain the premises and equipment to a high standard, within the available financial resources, and ensure that all reasonable steps are taken to reduce or remove infection risk.
- Use disposable items such as couch rolls, modesty curtains, towels and surgical equipment. Modesty curtains are changed frequently to minimise risk of infection.
- Make Alcohol Hand Rub Gel available throughout the building

Significant Events

In the past year there have been no significant events raised that related to infection control.

Audits

An annual Infection Control Audit is undertaken in the Practice. This is based on the audit tool provided to us by the Bedfordshire, Luton and Milton Keynes (BLMK) ICB.

We have taken the following actions as a consequence of our most recent audit conducted in late 2022/early 2023:

- Replaced old metal clinical waste bins with new plastic bins with lids that close fully and are foot operated.
- Added privacy glass to the windows in our “minor ops” room.
- Reviewed our sharps bin process so that they are always disposed of after 3 months in line with national guidance. To avoid cost implications/wastage, the bins from the doctors rooms that are not used very often are transferred to the nurses room prior to the 3 month expiry date.
- We have further standardised our cleaning regime with our cleaning contractor.
- Reminded staff about clear desk policy and regularly cleaning desks and equipment such as blood pressure machines.
- Provided allocated time to complete Infection Control training for new staff during HEAT training sessions.
- Staff have been reminded to regularly clean items that come into contact with patients – for example, blood pressure machine cuffs and the baby scales.
- Disposable curtains expiry dates have been checked.

- We have changed the way we manage dirty water (for example water that has been used for dressing changes) so that it is now disposed of in a dedicated area.
- A reminder sent to all staff to wear PPE/gloves when potentially come into contact with patient's bodily fluids – e.g. blood tests.
- Where possible mixed hot and cold water taps have been installed but due to plumbing restrictions this has not been possible everywhere.
- We have already installed several additional alcohol gel dispensers throughout the building during the Covid-19 pandemic but since this audit we have also installed hand cream dispensers alongside some of these to help reduce the risk of damaged/dry skin.
- Reminder sent to all staff regarding nail care/not to wear false nails or varnish.
- Reminder that waste bags shouldn't be attached to trolleys, the relevant waste bins should be used.
- Fridge cleaning schedule implemented.
- The minor surgery room has a formal cleaning schedule twice a week and before each minor surgery session.

Cleaning Specifications

Our staff work to structured cleaning schedules. We contract twice daily cleaning of the Practice to a company who follow national NHS guidance. The public areas are cleaned at lunchtimes as well as every evening.

Books and magazines

These have been removed from the waiting room to reduce infection risk.

Curtains and Blinds

The Practice has various blinds at the windows in the consulting rooms and the regular cleaning of these has been added to our new cleaning schedule.

The modesty curtains in treatment rooms are disposable and are changed every 6 months in line with our Practice Policy.

Carpets and Chairs

We have replaced all carpets in clinical rooms and the Waiting Room with vinyl flooring. All fabric chairs have been replaced with easy-to-clean vinyl chairs.

Staff training

All staff have undertaken an on line NHS training programme (one for clinical and one for non-clinical staff). This will be done every 3 years and our Infection Control Lead Nurse provides an annual update at an in-practice training session.

The Practice Infection Control Lead keeps up to date by completing appropriate training.

Infection Control Policy

The Infection Control Policy is reviewed and updated when advice changes.

Maintenance of the Building

We have a dedicated administrator who ensures that the building is maintained to a high standard to assure patients and staff safety.

A Legionella Risk Assessment and service of the gas boilers is undertaken bi-annually.

Accountability

The GP partners are responsible for ensuring that the building is a safe environment for all who visit or work in it.