

# Holmes Chapel Health Centre

## Infection Prevention Control Statement of Intent

### 2024-2025

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08 March 2024

#### Purpose

This annual statement will be generated each year in **March** 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 **Holmes Chapel Health Centre** is **Jennifer Heath, Advanced Clinical Practitioner**

The IPC lead is supported by **Paula Griffin, 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 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 **1** significant event raised which related to infection control. There have also been **0** complaints made regarding cleanliness or infection control.

##### b. Infection prevention audit and actions

Previous CQC inspection was 2016, the practice is awaiting further inspection and any actions following this inspection will be updated accordingly.

##### Infection prevention audit and actions

External Infection Prevention Audit was conducted November 23 which resulted in the following actions:

- Review of waiting room chairs as damage noticed on some of the chairs

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- Review of skirting boards as some areas are coming away from the wall, internal audit to be conducted
- Review baby changing area to include supply of wipes for parent use to wipe down area
- Cleaning Schedule to be reviewed with Quality Clean
- Review with staff the correct method of securing the sharps bin lids

### Internal Audits

- Clinical curtain audit - 2023

### Projected Audits

- Hand Hygiene Audit
- IPC General Practice Audit

### c. Risk assessments

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

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

- Legionella
- COSHH in progress

### d. Training

In addition to staff being involved in risk assessments and significant events, at **Holmes Chapel Health Centre** all staff receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training **annually or 3 yearly depending on their position within the organisation.**

### 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:

**Health and Safety Policy – updated 23/1/2024**

**Significant Event and Incident Policy – updated 5/2/2024**

**Freedom to Speak up Policy – updated 31/1/2024**

**Duty of Candour Policy – updated 31/1/2024**

**Accident Reporting Policy – updated 15/2/2024**

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 **Holmes Chapel Health Centre** to be familiar with this statement and their roles and responsibilities under it.

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**g. Review**

The IPC lead and **Operations Manager** are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before **31/3/2024**

**Signed by**

**Jennifer Heath and Paula Griffin**

For and on behalf of **Holmes Chapel Health Centre**