# Annual Statement for Infection Prevention and Control (Primary Care) 2026

It is a requirement of The Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance that the Infection Prevention and Control Lead produces an annual statement regarding compliance with good practice on infection prevention and control and makes it available for anyone who wishes to see it, including patients and regulatory authorities.

As best practice, the Annual Statement should be published on the Practice website.

The Annual Statement should provide a short review of any:

- Known infection transmission event and actions arising from this.
- Audits undertaken and subsequent actions.
- Risk assessments undertaken for prevention and control of infection.
- Training received by staff; and
- Review and update of policies, procedures and guidance.

## Infection Control Annual Statement

**Purpose**

This annual statement has been generated each year in July 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 summarises:

- 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) Leads

The Spa Medical Centre has one Infection Prevention and Control Lead and Surgical IPC Lead:

➢ **Alex Dickenson, Nurse Manager**

The IPC Lead is supported by GP Partner Dr Amy Gately.

The IPC Lead is responsible for promoting good infection control practice within Spa Medical Centre. They are to ensure that:

- They provide timely advice to colleagues, service users and relatives (where applicable).
- Training is provided regarding the standard principles of infection prevention and control, specifically training in hand decontamination, the use of PPE and the safe use of and disposal of sharps (this list is not exhaustive).
- Appropriate supplies of sharps containers, PPE and materials for hand decontamination are available.
- Daily and Deep Cleaning Schedules are maintained.
- Infection prevention and control audits are undertaken and action plans monitored.

Staff at Spa Medical Centre support the IPC Lead in maintaining high standards of infection prevention and cleanliness.

Promoting these high standards and then providing evidence of the organisation's compliance is essential for reputational purposes coupled with the need to maintain high levels of both patient and staff safety.

Connie Timmins is the Lead Nurse for Infection Prevention and Control at NHS Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board. The organisation leads are to ensure that any specialist advice is sought as required.

## Infection Transmission Incidents (Significant Events)

Significant events (which may involve examples of good practice as well as challenging events) are investigated in detail to identify learning opportunities and indicate changes that may lead to future improvements. All significant events are reviewed in the Quarterly Practice Development Meetings and learning is cascaded to all relevant staff.

During the reporting period there were no infection transmission incidents.

There were two sharps injuries involving members of staff. The incidents were managed in accordance with the Practice Needlestick Injury Protocol. Appropriate first aid, reporting, risk assessment and follow-up procedures were completed, and no further concerns were identified.

There were no outbreaks of communicable disease within the practice during the reporting period.

## Infection Prevention Audit and Actions

A comprehensive whole-building Infection Prevention and Control Audit was completed in May 2026 by the IPC Lead.

All clinical and non-clinical areas were reviewed against current infection prevention and control standards. An action plan and audit tracker were developed to monitor progress, allocate responsibilities and ensure completion of identified actions.

**Theatre Audits and Cleaning**

The theatre suite continues to be monitored closely to maintain high infection prevention and control standards.

- Monthly Theatre Infection Prevention and Control Audits were undertaken throughout the reporting period.
- Monthly Theatre Deep Cleans were completed and documented.
- Any minor issues identified were addressed promptly through local action plans and ongoing monitoring.

## Environmental Monitoring

Cleaning standards continue to be monitored across the practice to ensure a safe and clean environment for patients and staff.

The practice remains committed to continuous improvement and will continue to monitor progress against identified audit actions throughout 2026/27.

## Risk Assessments

Risk assessments are carried out so that best practice can be established and followed.

During the reporting period:

- A designated Isolation Room (G1) was identified and allocated for patients requiring isolation due to suspected infectious illness.
- Appropriate isolation signage has been installed and made available to staff.
- Environmental infection prevention and control risks continue to be assessed through routine audits and action plan monitoring.
- Ongoing review of clinical and non-clinical environments forms part of the practice's infection prevention and control programme.

## Training

The Practice remains committed to ensuring staff receive appropriate infection prevention and control training relevant to their role.

During the reporting period:

## Mandatory Training and Competency

Compliance with infection prevention and control requirements is achieved through:

- Completion of mandatory Infection Prevention and Control training via Agilio TeamNet.
- Review and acknowledgment of updated infection prevention and control policies and procedures published on Agilio TeamNet.
- Access to current guidance and protocols relating to:
    - Clinical Waste Management.
    - Blood and Body Fluid Spillage Management.
    - Sharps Safety and Disposal.
    - Hand Hygiene.

    - Cleaning and Decontamination.
    - Laundry Management.
    - Personal Protective Equipment (PPE).

Clinical staff are required to complete annual Infection Prevention and Control training modules and maintain awareness of policy updates relevant to their role.

## Additional Training

Reception and Administration staff received training in:

- Infection Prevention and Control principles.
- Recognition and management of patients requiring isolation.
- Use of the Practice Isolation Room (G1).
- Appropriate escalation procedures where infectious illness is suspected.

A Hand Hygiene Drop-In Training Session is planned for the second half of 2026 to reinforce best practice and support continued compliance with hand hygiene standards across all staff groups.

## Policies

The Infection Prevention and Control Policy has been reviewed during the reporting period and remains available to all staff via Agilio TeamNet.

Relevant infection prevention and control procedures, policies and guidance continue to be reviewed and updated in line with current legislation, national guidance and best practice recommendations.

The Practice remains committed to maintaining robust infection prevention and control systems and ensuring that all staff have access to current policies and procedures.

## Planned Audits and Activity for 2026/27

Spa Medical Centre plans to undertake the following audits and monitoring activities during 2026/27:

- Clinical Room Audit.
- Annual Infection Prevention and Control Audit.
- Clinical Waste Stream Audit.
- Sharps Bin Audit.
- Monthly Theatre IPC Audits.
- Monthly Theatre Deep Clean Reviews.
- Ongoing monitoring of audit action plans and environmental improvements.
- Hand Hygiene Training and Compliance Monitoring.

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

**Review Date:** July 2027

**Responsibility for Review:** The Infection Prevention and Control Lead and Practice Manager are responsible for reviewing and producing the Annual Statement.

**Nurse Manager / IPC & Surgical IPC Lead – Alex Dickenson**

**Practice Manager – Naomi Grist**

**For and on behalf of The Spa Medical Centre**