**ARCH HEALTHCARE**

**INFECTION CONTROL ANNUAL STATEMENT**

**2023**

**Purpose:**

This annual statement is generated each year in April. It will summarise:

* Any infection transmission incidents and any actions taken (these will also have been actioned via our significant events procedure)
* Details of infection control audits undertaken and actions that where put in place.
* Details of any infection control risks assessments undertaken
* Details of staff training and new staff induction
* Any review of policies, procedures or guidelines.

**Background:**

Arch Healthcare has one lead for infection control; Advanced Nurse Practitioner Hannah Bishop.

Hannah Bishop attends infection control updates provided by RCN online and also received updates related to IPC on 01.04.22, 23.05.23, 06.01.23 and 28.03.23. IPC link meetings have been attended on 21.06.22 and 21.10.22..

Following updates information is shared with the team through practice meetings and emails to the team.

**Significant Events:**

In 2022/23 there have not been any significant events raised in relation to infection control.

**Audits:**

In March 2022 an Infection Control Audit was undertaken by Hannah Bishop. An action Plan was completed following the audit which summarised the areas that needed improving or where action needed to be taken. The infection control audit was undertaken again in March/April 2023.The action plan has been regularly reviewed in order to monitor progress in making the necessary changes. Monthly audits are also under taken to monitor vaccines, waste and sharps. Daily monitoring of the cleanliness of the clinical rooms and equipment is undertaken by the nursing team and documented in each room. The cleaning of the surgery is also audited monthly by Fred Corneby, SCFT Facilities Supervisor. A list of rectifications are fed back to the cleaners and Arch are also notified of these. A certificate, including a star rating is sent to Arch to be displayed in a public area.

**Assessment of risk:**

Risk assessments are carried out so best practice can be established and risk modified where possible. Premises are checked each day and spot checks carried out throughout the year.

Staff document the cleaning of non-invasive equipment against a check list on a weekly basis.

All clinical rooms are cleaned as per the National Guidelines by the staff employed by Sussex Community Foundation Trust Facilities team. There is regular contact with SCFT to monitor and address any problems identified with cleaning.

**Cleaning specification, frequencies and cleanliness of equipment:**

We continue to have the presence of high levels of Covid 19 virus circulating in the community. This has meant the continuation of additional cleaning and decontamination measures have been in place.

Arch Healthcare has a decontamination policy (within the Infection Control Policy) which ensures the cleanliness of all clinical equipment. Clinical staff are updated annually on this policy. Staff are aware of single use equipment and are trained on the safe disposable of single use only equipment.

All clinical rooms have detergent wipes available to ensure compliance with cleaning of equipment.

**Curtains/Blinds:**

Arch Healthcare has various blinds, both at windows around the building and in clinical areas and consulting rooms. SCFT supply a cleaning schedule to ensure the blinds are clean as per the recommended standards. Regular reviews are undertaken with SCFT and any inadequacies are actioned. Privacy curtains in consulting and treatment rooms are disposable and changed 6 monthly as per the policy. Should a privacy curtain become soiled before its scheduled change then they are changed at that time.

**Infectious Diseases:**

Arch Healthcare will inform patients of any seasonal or notifiable diseases that they need to be aware of, this will be through posters in reception, during their consultations and if deemed required, a text to all patients with advice and guidance will be sent. In December 2022 and January 2023 there was an increased number of patient with Group A streptococcal infections. Clinicians at the surgery were advised to have a higher level of suspicion of Group A streptococcal infections, we had 5 patients that had positive swabs for the infection and were treated appropriately. Health protection teams where informed and aware.

Patients who are thought to have an infectious disease are asked to come to the surgery only at the designated time for their appointment. We do not have the facilities to accommodate patients in a separate area and so all reasonable steps are taken to ensure patients are adequately separated from other patients using the surgery. For patients with suspected Covid 19 that require a face to face appointment they are asked to attend at the end of clinic to allow for air exchange and decontamination after they have been seen.

Arch Healthcare takes a proactive approach to the prevention and spread of infectious diseases and actively screens and/or immunises patients against HIV, Syphilis, and Hepatitis.

Arch Healthcare works closely with the specialist hepatology nurses to identify patients with Hepatitis C and support them to access treatment.

**Staff Training:**

At Arch Healthcare Infection Control and Hand Washing training is undertaken each year.

**Policies and Procedures, Guidelines:**

Policies relating to Infection Control are reviewed annually and updated accordingly, as required.

New evidence and guidelines are included as they become available and relevant procedures and policies amended.