

Infection Control Statement 2025

This report is written to evidence our commitment to and compliance with infection control legislation.

Infection Control Lead: Rebecca Shearer ANP and Lead Nurse (IPC lead)

Person who oversees compliance: Practice Manager

Staff representative for infection control: Rebecca Shearer – Lead Nurse and ANP

Registered Manager for CQC: Dr Lorna Longworth

Annual Audit Results

In January 2025 an unannounced infection control audit was conducted by the Practice Manager. The audit showed good compliance with infection control policy. The annual audit revealed:

- Staff were aware of their duties regarding infection control
- Policies and procedures were in line with current guidance and updated appropriately
- Clinical areas were free from clutter and very clean
- Handwashing posters and PPE were present in all areas and were stored correctly
- Redecoration earlier in the year had improved the appearance of all rooms
- Policies were up to date and the IPC lead Rebecca Shearer was up to date with training updates

24/25 Infection Control achievements

In 24/25 Rebecca Shearer joined a forum with the lead infection control nurse at NuTH (the link for primary care infection control). This is a good forum to share best practice and receive updates.

The practice appointed a new Administrative, Premises and Compliance Officer to support the safe and compliant running of the practice. The APCO attended training updates in health and safety / risk assessment and has worked with Northumbrian Water and the practice manager to review all legionella policies and protocols in the practice. The APCO also audits COSHH compliance monthly and ensures all new staff complete the required infection control topics included in the practice's induction.

Staff are aware of the rules around infection control when they have been unwell with an infectious illness and those protocols have been strictly followed by management.

The infection control lead Rebecca Shearer has completed monthly audits of rooms and there is clear evidence that any actions required are completed.

Staff completed e learning on healthcare waste management disposal to ensure correct usage of clinical waste bins and other waste removal.

Antimicrobial stewardship remains good with prescribing data showing the practice is very close to the baseline recommended levels. We are the lowest prescribers of anti-microbials in our PCN.

It is evident that there is a culture of pride within the staff team when it comes to infection control. Staff make suggestions to management and take an active role.

Action plan for 25/26

- Continue to promote anti-microbial stewardship, particularly with new GPs and newly qualified prescribers
- Participate in the IPC leads forum
- Explore additional training opportunities for staff to supplement mandatory training ad hoc to their role.