

Annual Statement on the Prevention and Control of Infections

This is an annual statement, for anyone who wishes to see it, including patients and regulatory authorities.

Decontamination Lead: Pamela Drabble

Known infection transmission event/s in the year and actions arising from them:

nil

Risk assessments undertaken for prevention and control of infection:

Health and safety risk assessment (M 250B) [filed in the Health and Safety Folder 2]
Risk assessment of hazardous substance (M 267B) [filed in COSHH Folder 4]
Legionella Risk Assessment due 2020 planned 2020[filed in Infection Prevention Folder 5]
Domestic Cleaning Risk Assessment (M 257I) [filed in Infection Prevention Folder 5]

Covid 19 Practice Risk Assessment (C204)

Audits undertaken and subsequent actions:

Infection prevention bi-annual audit (M 257P)
Infection prevention bi-annual audits (G 180-FIC/SIC) in iComply Application Folder 10]
Follow up actions are detailed as ToDos in iComply Application

Infection prevention procedures, policies and guidance are reviewed and updated:

[Infection Prevention and Control Review in (G 180-FIC/SIC) and the Annual Management Review (G 170-TM2) – iComply members filed in Folder 10]
Other:

Training received by staff is recorded:

In the Staff Training Records (M 222E) which are filed in individual staff files as detailed in Folder 7, Staff Handbook
The attendance registers from practice meetings are kept in (G 170-ATR)

Signature of Decontamination Lead when this statement completed:

Date of this review: July 2021

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