

Infection Control Annual Statement 2026

Purpose

This annual statement will be generated each year in May 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 taken
- 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 Argyll House Surgery has three Lead(s) for Infection Prevention and Control: Nikki Dee (Lead Practice Nurse), Rosie Thebe (Practice Manager) and Chris Wheeler (Specialist Nurse)

Chris Wheeler has attended an IPC Lead training course in 2025 and keeps updated on infection prevention practice.

Infection transmission incidents (Significant Events)

Significant events (which may involve examples of good practice as well as challenging events) are investigated in detail to see what can be learnt and to indicate changes that might lead to future improvements. All significant events are reviewed in the management meeting and partner meetings, and learning is cascaded to all relevant staff.

In the past year, there have been no significant events related to infection control.

Infection Prevention Audit and Actions

The Annual Infection Prevention and Control audit was completed by Nikki Dee in February 2026.

As a result of the audit, the following things have been changed

- Segregated waste
- Room refurbishment due to general wear and tear

The Argyll House Surgery plans to undertake the following audits in 2026:

- Annual Infection Prevention and Control audit
- Domestic Cleaning audit

- Hand hygiene audit

Risk Assessments

Risk assessments are carried out so that best practice can be established and then followed. In the last year the following risk assessments were carried out / reviewed:

Legionella (Water) Risk Assessment: The practice has conducted/reviewed its water safety risk assessment to ensure that the water supply does not pose a risk to patients, visitors or staff.

Immunisation: As a practice we ensure that all our staff are up to date with their Hepatitis B immunisations and offer any occupational health vaccinations applicable to their role (i.e. MMR, Seasonal Flu). We take part in the National Immunisation campaigns for patients and offer vaccinations in house and via home visits to our patient population.

Curtains: Curtains are changed in line with the National Standards of Healthcare Cleanliness 2021 guidelines. All curtains are regularly reviewed and changed if visibly soiled. Patients do not touch our modesty curtains, and clinicians are trained to take off their gloves prior to touching the modesty curtains.

Cleaning specifications, frequencies and cleanliness: We have cleaning specifications and frequency schedules for clinical equipment. We also have a cleaning specification and frequency policy which our cleaners and staff work to. An assessment of cleanliness is conducted by the cleaning team and logged. This includes all aspects in the surgery including cleanliness of equipment.

Argyll House has recently changed cleaning company to Top Mops. Top Mops have over 25 years cleaning experience and states that they maintain a clean and safe space for all their clients

Hand washing sinks: We have recently upgraded our liquid soap with wall mounted soap dispensers to ensure cleanliness and added hand towel dispensers to all rooms.

Toys: We do not have toys within the surgery waiting room or clinical rooms

Training

All our staff receive Annual training in infection prevention and control.

Policies

All Infection Prevention and Control related policies are in date for this year.

Policies relating to Infection Prevention and Control are available to all staff and are reviewed and updated annually, and all are amended on an on-going basis as current advice, guidance and legislation changes.

Infection Control policies are circulated amongst staff for reading and discussed at meetings on an annual basis.

Responsibility

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

Review date

February 2027

Responsibility for Review

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

Nichola Dee

Lead Practice Nurse

For and on behalf of the Argyll House Surgery