

IPC Annual Statement Report – 2026 - 2027

The Crouch Oak Family Practice aims to keep the Practice clean and tidy in order to offer a safe environment for all staff, patients and visitors.

If you have any concerns about cleanliness or infection control, please report it to our Reception Staff.

Our Clinicians and Nursing Team follow procedures to ensure that treatment of our patients and any clinical equipment used meet infection control guidance, along with annual calibration testing.

13th January 2026

Purpose

This annual statement will be generated each year, 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. The report will be published on the practice website and will include the following summary:

- 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 carried out, and actions undertaken
- 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 lead for infection prevention and control at The Crouch Oak Family Practice Dr Maria Nyekiova – Partner.

The IPC lead is supported by Susan Gomersall – Practice Manager.

Infection transmission incidents (significant events)

Significant events involve examples of good practice as well as challenging events. Significant events are investigated in detail to see what can be learnt and to indicate changes that might lead to future improvements.

There have been no confirmed infection transmission incidents within the Practice during the reporting period. Any concerns relating to infection prevention and control are managed through the Practice Significant Event process and reviewed as part of the monthly Training and Education Meetings.

Infection prevention audit and actions

The Annual Infection Prevention Control Audit was carried out on 13th January 2026.

As a result of the audit the following have been actioned:

- Reinforced appropriate use of PPE
- Observations of hand hygiene of selected members of staff.
- Renewal of some clinical equipment due to wear and tear.
- Walk round with NHSPS Cleaning Supervisor to highlight areas of concern. A plan of action for concerns is produced by NHSPS for cleaning staff to follow to rectify areas falling below cleaning standard.
- All sharps bins show a date of first usage and not filled above the required line. This was highlighted in last year's audit and reiterated in 2025 due to new members joining the Practice. This subject is reinforced regularly.
- Staff informed regularly to keep work surfaces clear to enable cleaners to clean all areas and to limit dust and debris accumulating on desks

Environmental Monitoring

Monthly environmental walk-rounds are undertaken by the Practice Manager, and any areas of concern are escalated to NHS Property Services for remedial action.

Risk Assessments

Most risk assessments are reviewed annually or sooner where circumstances change. During the reporting period, the following assessments and monitoring activities were undertaken:

- Legionella risk assessment and water safety monitoring – NHS Property Services.
- Gas safety and boiler inspections – NHS Property Services.
- Fixed electrical wiring testing (five yearly).
- Health and Safety assessments undertaken by Milne Health.
- Air conditioning servicing and maintenance.
- Cleaning audits undertaken by NHS Property Services and internal audits.
- COSHH assessments for hazardous substances used within the Practice.
- Assessment of reusable clinical equipment cleaning and decontamination procedures.
- Assessment of sharps safety arrangements and prevention of needlestick injuries.
- Assessment of waste segregation, storage and disposal arrangements.
- Review of specimen handling and transportation procedures.
- Assessment of hand hygiene facilities and availability of hand hygiene products.
- Review of staff immunisation status relevant to role.
- Review of procedures for the management of blood and body fluid exposure incidents.
- Review of privacy curtain replacement schedules in accordance with national guidance.
- Review of toys and patient information resources within waiting areas to ensure they can be effectively cleaned.
- Review of cleaning schedules for clinical rooms, with completion monitored at the end of each clinical session.
- Induction assessments for all new staff members to identify role-specific training requirements

Training

In addition to staff being involved in risk assessments and significant events, at The Crouch Oak Family Practice, all staff and contractors receive IPC induction training through Bluestream on commencing their post. Thereafter, all staff receive online refresher training annually.

Infection Prevention Control Lead attends quarterly IPC Forum organised by the ICB.

Policies and procedures

Policies relating to infection prevention and control are available to all staff and are reviewed at least annually or sooner if national guidance, legislation or local procedures change.

Responsibility

It is the responsibility of all staff members at The Crouch Oak Family Practice to be familiar with this statement, and their roles and responsibilities under it.

Review

The IPC lead, Dr Maria Nyekiouva, GP Partner and Susan Gomersall, Practice Manager are responsible for reviewing and producing the annual statement.

This annual statement will be updated on or before January 2027

Signed by

Dr Maria Nyekiouva

Dr Maria Nyekiouva
GP Partner
For and on behalf of The Crouch Oak Family Practice