

Infection Prevention and Control Annual Statement

(January 2026)

Purpose

Pond Tail Surgery is committed to the control of infection within the premises. This annual statement will be produced each year in January in line with the requirements of the Health and Social Care Act 2008. It provides the practice's compliance with guidelines on the prevention and control of infections for the last 12 months (1st January- 31st December 2025). It summarises:

- Any infection transmission incident and any action taken (these will have been reported through our Significant Events procedure)
- Details of any infection control audits undertaken and actions
- Details of any risk assessments undertaken for 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 Pond Tail Surgery is Sharon Halpin (Advanced Nurse Practitioner).

The IPC Lead is supported by Fran Lemanska (Practice Manager).

Infection Transmission Incidents (Significant Events)

Significant 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 when they occur and followed up in the weekly Clinical/Senior Leadership Meetings as well as being discussed in Quarterly Significant Events Meetings involving all Practice staff. Learning is cascaded to all relevant staff during these meetings.

In the past year, there have been 5 significant events raised that relate to sharps and which had the potential to cause infection transmission. These included full sharp bins not being disposed of at the correct time or being left unlocked and incorrect disposal of needles. Although none of these incidents resulted in a needlestick injury as they were found by staff and procedure was then followed, there were lessons learnt and changes made to facilitate improvements:

- Education provided for clinicians around the procedure involving sharps including where the key is kept to the outside yellow bin where sharps bins should be disposed of when full and that temporary closures on sharps should be in the locked position when they are not in use in the clinical rooms. Also, that staff are responsible for checking that their workspace is clear of needles before leaving for the day

- Updated policy around sharps management and introduced a sharps risk assessment which all clinicians were asked to read and implement
- Discussion and consideration given to changing acupuncture appointments to reduce the chance of these smaller needles slipping down the sides of the clinical couches and not making it into sharps bins for disposal

There have been no complaints regarding cleanliness or infection control during the last 12 months.

Infection Prevention Audits and Actions

Infection Control Audits are carried out twice a year at Pond Tail. In the past 12 months, audits were completed in June and October 2025 which includes one from an external contractor.

As a result of these audits, actions were identified and the following changes were made:

- Cleaning equipment is now colour coded (mops and buckets) and cleaners are keeping it clean. The cleaning cupboard has been tidied, mops and buckets are being stored correctly and new cleaning schedules have been implemented to meet the National Standards of Healthcare Cleanliness
- Sharps Risk Assessment created and implemented
- Planned works to seal work surfaces and flooring in clinical rooms and staff kitchen

Risk Assessments

Risk assessments are performed on a required basis so that any risk is eliminated or reduced to be as minimal as possible ensuring best practice is established. In the last year, the following risk assessments were carried out or reviewed:

- Management of Sharps Risk Assessment
- Legionella Risk Assessment, annual water sampling tests and associated monthly water checks
- COSHH Risk Assessment
- Health & Safety Assessment
- Privacy curtains and pillows/covers changed in clinical rooms
- Stock checks on first aid boxes, emergency drugs /equipment and protective equipment on site to ensure adequate supplies
- Cleaning logs for the premises and equipment including the cleaning of fridges

Training

All staff receive training in Infection Prevention and Control via e-learning. Clinical staff complete Level 2 and non-clinical staff complete Level 1 every three years. All staff are expected to undergo a Handwashing Practical annually to demonstrate that they are aware of the correct handwashing procedures.

In person updates, reminders or practical demonstrations in Infection Control have been shared in Practice meetings to raise awareness, refresh knowledge and disseminate the latest guidance, e.g. the use of spillage kits.

The IPC Lead attends Quarterly forums regarding Infection Prevention and Control.

Policies

All Infection Prevention and Control policies are in date for the year and available to staff.

Policies are reviewed and updated annually or amended on an on-going basis when legislation, guidance or information changes.

Responsibility

It is the responsibility of all staff who work at Pond Tail Surgery to be familiar with this statement and their roles and responsibilities.

Review

The IPC Lead and Practice Manager are responsible for reviewing and generating the annual statement.

Last updated on 20/01/2026. Next review due January 2027.