Huntingdon Road Surgery

**Infection Prevention & Control Meeting – 25 January 2022**

Present: Dr Hayton – IPC Lead, Aben Betancor Diaz- Lead Nurse,

Jessica Taylor – Admin

The minutes of the last meeting were agreed.

**ACTION POINTS**

1. **Legionella/Water checks -**

All checks are conducted and recorded satisfactorily with no concerns raised.

Jessica is responsible for organising weekly legionella checks, monthly water checks at Huntingdon Road and at Girton (with Bev), quarterly and annual checks and bringing records of these checks to meetings. To raise concerns if any. JT

1. **IPC Training** –

Aben is providing face-2-face handwashing training with all staff annually, and with all new employees. This is currently up-to-date, with the exception of 2 new starters who have both had prior training – these are scheduled.

The annual Practice-wide IPC update (delivered by the CCG IPC lead nurse) was scheduled in October 2020 but was postponed due to COVID. Aben is contacting the CCG IPC lead nurse with a view of re-scheduling a forthcoming date for a Tuesday.

 AB

1. **Audits**

**A. Prescribing of sharps bins** – temporarily on hold due to COVID.

We will add a sharps bin to the repeat list of all patients with sharp items on prescription, and send SMS explaining.

**B. Infections post ear irrigation** - temporarily on hold due to COVID.

This service remains suspended.

**C. Infections after minor surgery –** temporarily on hold due to COVID.

We are again doing minor surgery so should restart this audit. DMH

**D. COVID Secure Audit**

This is a comprehensive checklist of COVID measures, provided by the CCG IPC team.

AB, DMH

1. **Buildings Inspection –**

Due in summer, a year after the last inspection.

The CCG IPC team have introduced a new audit tool, which will allow them to have better sight into our audit activity and performance. We may postpone the next buildings inspection until this is launched. DMH to find out when this is expected.

 DMH

1. **Healthcare Acquired Infections -**

Nil

1. **CleanSlate Cleaners -**

There have been no cleaning standards problems reported.

We discussed the procedures for use of COVID isolation room. We agreed that the signage needs to be updated to remind users that they should not only close the room, but inform Management of the need for a deep clean.

 AB

1. **IPC Report –**

The next Annual Report is due in June 2022.

1. **Staff Vaccinations –**

DMH updated our Staff Immunisation Policy in October 2021 and conducted a review of all staff vaccination records. Each member of staff concerned has had a discussion with one of our Practice Nurses about the Green Book recommendations and the “gap”. Some staff chose to have missing vaccinations. All staff with residual “gaps” were referred to the new CCG Occupational Health Service. We have not heard back about any of those referrals.

DMH has reviewed the remaining gaps, staff roles and the corresponding risks to staff and patients. Most of the gaps were only in documentation (e.g. staff who were sure they had vaccinations but were unable to provide proof). DMH did not feel any further risk management measures should be implemented pending the CCG OH review.

New staff have joined since October 2021. DMH to review records again. DMH

1. **Corona Virus –**

We are following current government guidance for Coronavirus and, due to its constant changing, our Coronavirus policies are discussed regularly in the weekly Monday meetings. Staff are informed of any changes to our policies.

Additionally, Huntingdon Road Surgery will be carrying out a COVID Secure Audit. (See **3.D**).

Our Vaccination Clinics have now come to an end, but we may offer this again if needed.

**New SOP’s/Policies**

The following new policies have been implemented/updated since the start of the pandemic:

* + SOP Staff Member with Suspected COVID-19 –how we implement the new Government COVID rules (August 2021) and protect staff and patients from exposure to suspected COVID infection. This is constantly updated.
	+ Staff Uniform Policy – reducing spread of COVID from work to home
	+ Patient Flow – reducing patient-patient contacts and time in the surgery. The decision as to whether patients should continue to wait outside for their appointments, unless vulnerable, is reviewed weekly in the Monday meetings.
	+ SOP Hot Rooms – how to book and use the “hot” room; PPE and decontamination

**10 Room 24 –**

The room is fully functioning as an additional Administration Office. The room still requires tidying and organising, and extra supplies are to be moved upstairs. PPE is still being ordered through the PPE Portal, which was set up during the pandemic. Nitrile gloves, rather than Vinyl gloves should be used for clinical examination. Aben is going to check the surgery’s stock of gloves and hand sanitiser and will inform DMH who will bring this up in a Monday meeting. The fridge in Room 24 needs to be replaced before the next flu season.

AB

**11 AOB -**

**Ear Syringing** - we discussed restarting our ear syringing service.

Patients are currently unable to access ear syringing at the Extended Access GP as it is currently closed due to the pandemic.

Aben is going to check with RJT whether ear syringing is comes under the minor treatment package.

Currently, due to COVID risks, the benefits of restarting ear irrigation are still considered to be outweighed by the risks to staff.

 AB

**Spirometry –**we discussed restarting this service.

Has restarted at some surgeries. Milton surgery have shared their COVID spirometry risk assessment, which we could adapt for our use prior to restarting our service. However there is also now a requirement that the HCA/nurse doing spirometry is registered to do so, which means they must undertake not only some online learning modules but also some practical learning on live cases under supervision.

No one in our team is currently able to undertake spirometry. We understand this is the case at most local GP practices.

Aben is going to check with Neil about arranging funding for an external nurse to do Spirometry at the surgery.

Karen is currently doing the online training modules, and we agreed to support her with the practical experience if we can secure an external nurse to supervise.

 AB

**Feno Tests** –

Training for this test has been completed. This service is now offered routinely, with COVID safe measures, for patients who have been prioritised (e.g. poor asthma control). We agreed that this has proven a useful tool, and patients have benefitted.

 AB

**Next meeting – May 2022**

**Review Dates for Diary**

Annual Report – due June 2022 (action DMH)

All-Site Building Inspection – due Summer 2022 (on hold pending new audit tool)

Date of Review Needle Stick Policy – due April 2023

Date of review of IPC Policy – due April 2023

Date of Review of Waste Management Policy – due April 2023

cc:

Neil Paterson – Business Manager

S-J Jarrold – Operations Manager