

Infection Control Annual Statement Report for 2020

Mapesbury Medical Group

25th January 2021

Purpose

This annual statement will be generated each year in January 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 undertaken 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 leads for infection prevention and control at Mapesbury Medical Group are Dr Chi Chung – GP and Suman Bellare, Practice Nurse.

The IPC leads are supported by Elaine Clements, Practice Manager

a. Infection transmission incidents (significant events)

Significant events involve examples of good practice as well as challenging events.

Positive events are discussed at meetings to allow all staff to be appraised of areas of best practice.

Negative events are managed by the staff member who either identified or was advised of any potential shortcoming. This person will complete a Significant Event Analysis (SEA) form that commences an investigation process to establish what can be learnt and to indicate changes that might lead to future improvements.

All significant events are reviewed and discussed at several meetings each month. Any learning points are cascaded to all relevant staff where an action plan, including audits or policy review, may follow.

In the past year there have been 4 significant events raised that related to infection control. There have been no complaints made regarding cleanliness or infection control.

b. Infection prevention audit and actions

External IPC Audit carried out across both sites in October 2020 by Suman Bellare, Practice Nurse and Bindhu Justin, IPC Nurse for Brent CCG.

- Results were discussed at clinical meeting and full team meeting
- A full action plan was produced by the practice manager
- The practice is working towards completion of the actions agreed

Cold Chain Audit was carried out in July 2020 – with no future actions – noted that there were more than 4 weeks supply of travel vaccines due to their non-use during the pandemic

A full annual schedule for audits including sharps bins, environmental and waste audits has been produced – an action log is currently being produced to include feedback mechanisms- these audits had not been carried out regularly enough in the past.

Since March 2020, extra cleaning schedules were introduced to ensure protection for staff and patients during the pandemic. The following measures were also introduced;

- Social distancing, ensuring staff were the required distance apart whilst working
- Several staff were able to work from home if space did not allow
- Limits to the numbers of people in the waiting room
- Screens are in place protecting staff and patients
- A one-way system is in place for patients, staff and visitors
- A regular cleaning schedule for staff work stations and communal areas
- Wearing of masks for staff and patients in the practice became mandatory in November 2020

c. Risk assessments

Risk assessments are carried out so that any risk is minimised to be as low as reasonably practicable. Additionally, a risk assessment that can identify best practice can be established and then followed.

In the last year, the following risk assessments were carried out/reviewed:

- Coronavirus Office Risk
- Staff Covid Risk
- Workplace fans
- Air conditioning
- COSHH database audit
- Curtain changes
- Water safety

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In the next year, the following risk assessment will also be reviewed:

Re audit : Coronavirus risk – office and staff

- Transfer of vaccines between sites

d. Training

In addition to staff being involved in risk assessments and significant events, at Mapesbury Medical Group all staff and contractors receive IPC induction training on commencing their post. Thereafter, all staff receive refresher training annually

Various elements of IPC training in the previous year have been delivered at the following times:

April 2020 – Pandemic safety at work training

e. Policies and procedures

Policies relating to infection prevention and control are available to all staff and are reviewed and updated annually. Additionally, all policies are amended on an ongoing basis as per current advice, guidance and legislation changes.

f. Responsibility

It is the responsibility of all staff members at Mapesbury Medical Group to be familiar with this statement and their roles and responsibilities under it.

g. Review

The IPC lead and Elaine Clements, Practice Manager are responsible for reviewing and producing the annual statement.

This annual statement will be updated during January 2022 for the year 2021

Signed by

Elaine Clements

Elaine Clements
For and on behalf of Mapesbury Medical Group