Mayfield Medical Centre

Infection Prevention Control Annual Statement 2025- 2026

Introduction

Infection Prevention and Control (IPC) is the work an organisation does to identify potential risks for spread of infection between patients (and between patients and staff) and to take measures to reduce that risk.

The Practice takes its responsibility to do this very seriously. All staff take responsibility for their own role in this, and all staff receive regular training in their role in Infection Prevention Control. We take additional measures to ensure we maintain the highest standards:

- Encourage staff and patients to raise any issues or report any incidents relating to cleanliness and infection control. We discuss these and identify improvements we can make to avoid any future problems.
- Carry out infection control audits to make sure our infection control procedures are working.
- Provide staff training on infection control.
- Review our policies and procedures annually to ensure they are adequate and meet national guidance.
- Maintain premises and equipment to a high standard and ensure all reasonable steps are taken to reduce or remove all infection risk.
- Equipment is disposable where possible e.g. couch rolls, privacy curtains, hand towels etc.
- All non-disposable equipment is cleaned according to manufacturer's guidelines to reduce infection risk.
- Alcohol Hand Rub Gel is available throughout the practice for staff and visitors.

Annual Statement 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. It summarises:

- Any infection transmission incidents and action taken (in accordance with our **Significant Event** procedure)
- Details of any **infection control audits** and actions undertaken
- 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** for Infection Prevention and Control (IPC)

IPC Leads

IPC Champion : Hetty ARTHUR

IPC Deputy Champion: Grace PILLING

Practice Manager: Melissa Sood

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 identify changes that might lead to future improvements. These are documented and discussed in monthly clinical meetings and learning is cascaded to all relevant staff.

Infection Prevention Audit and Actions

Whiles undertaking the Annual Infection Prevention and Control and Environmental audits issues were highlighted that did not comply with Infection and Prevention Control and therefore actions were taken.

- Time allocated all staff to enable them to clean their workspace and rooms daily before and after each shift.
- Hand hygiene assessment conducted for all staff
- Venepuncture assessment conducted
- Legionella prevention: water flushing, and temperature checks done and documented on weekly basis
- Sepsis Lead appointed
- Antimicrobial Lead appointed – Dr Ayesha Aziz

Mayfield Medical Centre is planning to undertake the following audits in 2026:

- Annual comprehensive IPC Environment, policies and practices audit and action plan.
- Aseptic Technique competency Assessment
- Joint injection audit
- Implant and coil audit
- Duty of care self-waste audit

The Annual Infection Prevention and Control and Environmental audit was completed by Hetty ARTHUR and Grace PILLING.

Risk Assessments

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

- Following the outbreak of MPOX a protocol and policy along with correct PPE has been put in place.

Immunisation – MMR Outbreak: As an Organisation we ensure that all of our staff are up to date with their immunisations. All staff were asked to check their MMR immunisation status and/or offered the opportunity to be tested, and vaccinations were offered accordingly.

Actively offering for our non-vaccinated patients

Cold Chain & Fridge Storage – we use a Monthly Risk Assessment Self Audit Tool which assesses fridge and vaccine storage and compliance.

Curtains: The NHS Cleaning Specifications state the curtains should be cleaned or if using disposable curtains, replaced every six months. We use disposable curtains and audit every month to ensure they are safe to use.

Sharps: Sharps are audited on regular basis to ensure that they are not above the recommended line.

FPP3 Mask: All staff to be fit tested for FPP3 mask

Staff Training

All staff are encouraged to complete their annual mandatory training.
100% of Clinical staff and non-Clinical staff have completed e-learning in infection control.

Policies

All Infection control related policies are in date or actively in review for this year 2026

Policies relating to infection control are available to all staff via online staff intranet platform. They are reviewed and updated annually and are amended on an ongoing basis as current advice, guidance and legislation changes.

Concerns?

If you have any concerns about cleanliness or infection control within Mayfield Medical Centre, please report this to our reception staff.

Review and Approval

The Infection Prevention and Control Lead and Practice Manager are responsible for reviewing and issuing the Annual Statement for and on behalf of Mayfield Medical Centre.

Reviewed and approved by:

IPC Champion Lead:

Henrietta Arthur

Practice Manager:

Melissa Sood

Date: 01/26