

INFECTION CONTROL MEASURES AMONG NURSES WORKING AT
(500) BEDDED, BAGO GENERAL HOSPITAL

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ABSTRACT

Nurses are at risk of acquiring and transmitting hospital infection in the courses of delivering the nursing care. This study was to determine the knowledge, perception and practice on infection control among nurses working at Bago General Hospital. A cross sectional survey of 106 nurses from all wards was simple random selected and conducted using self-administered semi structured questionnaires and observed checklist. All of respondents were female, the largest proportionate age group was (21-25) year group and 69.9% were single. The 38.7% of respondents received training for infection control.

The 54.7% of respondents gained high knowledge score based on cutoff point of mean knowledge score (40.6) and 45.3% of respondents gained low knowledge score. The cutoff point of perception score was 60, the 67.9% had positive perception towards infection control and 32.1% perceived negative perception too. Regarding the practice, 61.3% reported as good practice based on cutoff point of mean practice score, 22 and 38.7% reported as poor practice. Concerning with demographic character of respondents, there was statistical significant association between rank of nurse and knowledge score. The higher proportion of staff nurses achieved high knowledge score than trained nurses (69.8% Vs 39.6%, p 0.002).

Regarding the knowledge on infection control, they had more knowledge on standard precaution than additional precaution. The 100% realized the hand hygiene and < 30% knew the air borne infection such as measles, chicken pox and meningitis. Majorities were lacked of knowledge on mode of transmission of hospital infection and disposal method.

Concerning with perception towards infection control, 1/3 of respondents had negative perception on standard precaution of hand hygiene and recapped the needle. They had high knowledge on hand hygiene standard precaution however it did not translated into appropriate practice. The 30.2% did not practice on 40-60 seconds duration in hand washing with soap and water. The 28.3% used N-95 mask in air-borne infection control that was lowest percent compare with others in utilization of PPE. Regarding the WHO color coding waste management, less than 50 % practiced correctly.

In this study there was another statistical significant association between perception score and practice score, the higher proportion of the positive perception respondents had good practice on infection control than negative perception respondents had good practice (68.06% Vs 47.06%, $p < 0.038$). The O&G ward had high facilities for infection control than the other wards through observed checklist. The half of respondents had high knowledge score and 2/3 of respondents perceived positive perception and reported as good practice. The infection control committee started to develop with lack of adequate resources and infection control team was running with available resources. These finding are useful in planning appropriate measures to improve the knowledge, perception and practice on infection control among nurses.