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The Role of Nursing in Dealing with Infectious Cases in Health Facilities: With Reference to Saudi Arabia

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Abstracts

Hospital received infections constitute a huge source of morbidity and mortality for each sufferer and healthcare professionals. Nursing professionals constitute a fundamental issue of any pleasant-related application in a medical institution, given their oversight and provision of nearly all healthcare services. Nurses' know-how and attitudes play a widespread function in healthcare delivery. inside Saudi Arabia, the superiority of clinic-received infections in health facility settings has brought on a growing emphasis on evaluating nursing know-how and adherence to practice requirements geared toward clinic-acquired contamination prevention. This present study aims at evaluating the scenario, based on the primary data collected from nurses. ANOVA test is being used to analyze the data.

1. Introduction

The scenario of healthcare in the world (On an average) is satisfying and it can be said that there is a great chance of improving the same in times to come. On the other hand there are so many diseases that are dependent on the proper care of patients, this stands true for the patients whoa re coming to the hospital for chronic diseases, surgery, amputations, etc. now when they are under observation during the process, their immunity is low and they are vulnerable to many types of infections, generally called as Health care associated infections. Such infections, at time may cause death of the patient and as per the report of WHO (2021) there is rise of 13% in the last 2 years for such deaths. As a matter of fact such infections are not only dangerous for

patients, rather the health care workers who are working in the close proximity of the patients, while curing them, are also open to the same.

Nursing tactics can each save you and contribute to health facility infections. The position of nurses in stopping sanatorium infections is pivotal. Nursing professionals represent an vital component of any high-quality-related program in a health facility, given their oversight and provision of nearly all healthcare services. consequently, nurses' expertise and attitudes play a giant function in healthcare delivery. studies have proven that continuing schooling has progressed nurses' professional conduct and understanding of patient care. furthermore, their understanding is encouraged through various elements, encompassing their personal and academic backgrounds, education publications, and motivational and managerial elements. greater know-how, superior training, and education, along with efficient disinfection and sterilization practices, stand because the most effective procedures to combat and reduce the prevalence of infections.

Despite progress made in healthcare systems, above mentioned infections persist as a substantial threat. The ramifications extend beyond heightened healthcare expenditures to encompass loss of life. While education and knowledge of nurses can effectively curtail the spread of infections in emergency departments, other factors can contribute to infection transmission. These factors encompass inadequate supervision and equipment, a taxing workload leading to staff fatigue, poor performance, and insufficient education. Education and knowledge play essential roles in formulating an infection control program aimed at reducing the incidence of such infections.

Brief Background of health care system in KSA:

KSA healthcare services have advanced over the years. the first public fitness department changed into set up in Mecca in 1925. The Ministry of health of KSA turned into instituted in 1950. The Saudi healthcare gadget consists of presidency-owned, public-zone hospitals and privately-owned hospitals. The Ministry of fitness is responsible for supplying and financing authorities' healthcare services. Hospitals and primary healthcare facilities comprise 26% of Saudi Arabian fitness offerings. further to the Ministry of fitness, different state bodies offer healthcare services to the overall population, in addition to serving their employees and dependents, these our bodies consist of the security forces (e.g., the national shield fitness affairs, the safety forces, and the navy), the Royal fee for Jubail and Yanbu health offerings, Johns Hopkins Aramco Healthcare, and faculty health devices run by means of the Ministry of schooling and the purple Crescent Society, country our bodies cooperatively run 39 government-owned hospitals with a complete of 10,000 beds imparting the majority (59%) of Saudi Arabian healthcare.

The KSA also has many non-public region healthcare services. The personal area runs 125 hospitals in general with eleven,833 beds and 2218 dispensaries and clinics which might be more often than not positioned in primary cities and cities. universal, KSA currently boasts over 53,000 sanatorium beds in step with 1000 residents. when blended with the general public area, KSA's bed consistent with population has risen to over 70,000 beds. The KSA healthcare device is divided into number one, secondary, and tertiary healthcare. number one healthcare affords simple healthcare services to every person in KSA. specialized remedy is obtainable at a few

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non-public and public facilities, with referrals being made to hospitals which include the King Faisal professional health facility, better schooling hospitals (coaching hospitals) and research centers. the general public quarter runs across all degrees of healthcare, from number one healthcare to tertiary healthcare and excessive-threat and emergency services. some government hospitals are specially designed to complement each other rather than competing, with a few hospitals being entirely committed to cancer and others to pediatric and maternity care, for instance. Saudi Arabians are afforded free treatment as are government contractors, inclusive of Aramco personnel and their households. The services presented by the public sector are incomparable with the overall health center healthcare services afforded by means of the private sector as public region healthcare is given unfastened at the factor of shipping to all Saudi citizens.

The WHO has ranked the KSA health machine as being the 25th great gadget in the international, beforehand of maximum developed countries. KSA's healthcare group of workers (HCW) is made from 423,940 healthcare workers, of which 248,000 are physicians and nurses. however, a large percent of physicians (74%) and nurses (48%) are foreigners from different middle Eastern nations.

Infection Prevention and Control in KSA:

Infectious illnesses have claimed many lives in KSA, despite the fact that most infectious sicknesses may be dealt with or averted. in keeping with reports published by way of the MOH, brucellosis, chickenpox, and amoebic dysentery are the most continual infections maximum without problems transmitted among human beings in KSA.



Source: GDIPC, 2023

Figure 1: Infection Prevention System for Patients

There are IPC pleasant guarantee departments which can be set up at a healthcare facility or organization with the task of implementing infection manage application and recommendations. IPC is a new however developing area in KSA, and at the country wide level, the Saudi MOH is answerable for organizing numerous facilities for sickness manipulate and prevention. as an instance, the Command-and-manage Centre (CCC) changed into set up with the aims of enhancing the prevention of infections and organizing structures to song infections in KSA and global. organizations such as the facilities for Medicare and Medicaid use health center information to tune health facility performance on subjects touching on IPC.

every Saudi healthcare facility is also required to layout, set up, and coordinate an IPC program to become aware of, and decrease the danger of, infection acquisition and transmission amongst patients, group of workers, and traffic. The MOH facilitated the establishment of contamination control services in all its hospitals. moreover, the MOH affords in-house training and discipline epidemiology education on infection control to all healthcare people. The Saudi Council for fitness Specialties also set up a subspecialty training group in infectious sickness in inner remedy and pediatrics to fulfil significant domestic needs. therefore, there may be now a huge quantity of nationally trained Saudi internists and pediatricians. Assiri et al. (2014) performed a passsectional interview-primarily based study to explain and assess the popularity of IPC program in KSA. The observe focused on the reputation of the eight middle components of IPC software that are deemed important in strengthening capability for the prevention of HAIs. The take a look at calculated a blended rating for the eight components for each healthcare facility, those eight center components include the enterprise of IPC packages, technical suggestions, human sources, surveillance of HAIs, microbiology lab guide, environment, monitoring and assessment, and public health links. The outcomes indicated that the centers' blended ratings ranged from 42% to 57%.

This present study tries to evaluate the role, knowledge and practices of nurses regarding infection prevention in the emergency department of selected hospitals in Taif.

Research Process:

Design of Study

This present study is based on primary data and was conducted at selected hospitals in the region of Taif. The duration of the study was three months. The sample units considered in the study were nurses working in the different department, with a total of 150 nurses recruited for participation.

Parameters of Sample Selection

- 1. Registered nurses actively hired in the different department of selected centers in Taif, were covered in the study.
- 2. Nurses with numerous tiers of clinical experience have been considered to seize various expertise inside the department. Participation turned into voluntary, contingent upon supplying digital consent (e-consent), making sure participants' comprehension of studies objectives and willingness to partake.

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- 3. Exclusion criteria encompassed nurses from departments aside from the emergency department, because they have a look at centered on insights specific to this healthcare putting. further, individuals disinclined to participate or on go away for the duration of facts series have been excluded.
- 4. Nurses with constrained scientific revel in, which would possibly have an effect on their contribution to contamination prevention insights, were additionally excluded.

Tools of Data Collection

The questionnaire initiation concerned collecting sociodemographic traits of the have a look at population, observed by know-how and practice evaluation. reaction facts were dealt with utmost confidentiality and controlled completely by using the predominant investigator. The questionnaire, includes three sections, starting with socio-demographic characteristics, it proceeded to know-how assessment, observed by practice assessment.

Statistical Tests used

This present study used the ANOVA test of analyzing the data, the platform used for performing the test was SPSS Ver. 24.0.

Data Analysis and Interpretation

Summary of ANOVA Results

On the Basis of Age	F	Sign
Aware about infection prevention principles	.155	.926
Only wearing gloves cannot prevent all types of infections	.688	.559
Cleansing hands after attending patient can prevent many types of infections	.660	.577
Exposure to blood and body fluids is infectious	.365	.778
Basic precautionary measures are compulsory after every procedure	.889	.446
Assortment of masks should be as per the type of exposure	4.408	3.005
Visible Contamination can be avoided easily	3.445	3.017
Safety box should be available all the time	.316	.814
On the Basis of Experience		
Aware about infection prevention principles	3.098	3.016
Only wearing gloves cannot prevent all types of infections	.534	.711
Cleansing hands after attending patient can prevent many types of infections	.983	.817

1.885	1.112
1.117	1.348
1.443	1.219
3.445	.017
.316	.814
.209	.890
.579	.629
.993	1.396
.593	.620
.456	.503
1.111	.344
3.445	3.112
.316	.414
	1.117 1.443 3.445 3.16 209 579 993 593 456 1.111 3.445

Interpretation:

As can be seen from the above given summary of ANOVA results, in most of the cases nurses are agreed to the point in question, this system of treatment is very good and can be carried out in the near future. There are some of the issues related to patient care and the exposure thereof, like in case of masks, the nurses are not very much curious i.e. they generally do not use different types of masks while dealing with respective patients. Then there was another concern about the visible contamination, the nurses use to work in close proximity with the patient with chronic ailments and any kind of visible contamination can harm the nurses, hence it should not be avoided in any case.

For all the other cases, it was found that the nurses are agreed to the point in question and take all the preventive measures while dealing with the patients suffering from chronic diseases.

2. Conclusion

In conclusion, this has a look at highlights the commendable tiers of know-how and exercise established with the aid of nurses inside the emergency department closer to the prevention of HAIs. The findings emphasize the pivotal function of nurses in preserving a secure healthcare environment. Sociodemographic factors along with age and medical revel in exert a top-notch effect on nurses' information and practices concerning HAIs. whilst enhancements in each know-

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how and practice levels are glaring, ongoing efforts are crucial to enhance contamination prevention measures. similarly, research is warranted to discover the effectiveness of interventions geared toward improving nurses' know-how and compliance, in the long run fostering more secure healthcare practices and stepped forward patient consequences.

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