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Judgment of the Awareness' Towards Work-related Injury among Endodontic Staff at Selected Dental Clinics, Saudi Arabia

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Abstract: <u>Background</u>: Regardless of the distinction on safety measures in health care facilities, the alternatives of organizations have measured the degree to which safety is a premeditated precedence and culture sustains patient safety. In retort to the Institute of Medicine's report and to an organizational commitment to patient guard was held an effective evaluation of safety standandrs indicators. <u>Objective</u>: To appraise the level of awareness' towards work-related injury among endodontic staff at Selected Dental Clinics, Saudi Arabia. <u>Method</u>: A cross-sectional survey was conducted at dental Clinics, Saudi Arabia. A 32 items self-administered questionnaire was provided to 100 endodontic staff in the research setting based on To evaluate the level of awareness' towards work-related injury among endodontic staff at Selected Dental Clinics, Saudi Arabia. <u>Results</u>: This study showed that awareness towards the aspects of work related injury among some dental staff working at the dental clinics of the selected setting was variable. The majority (86.0%) of the dental staff had a high level of awareness towards "HCWs with non intact skin should not be involved in direct patient care until the condition resolves". Followed by (82.0%) at the item of "Isolation is necessary for patients with blood-borne infections". Conversely (62.0%) of the dental staff had a low level of awareness towards work-related injury was in item "Universal precautions are not necessary in situations that might lead to contact with saliva". <u>Conclusions</u>: The current study results revealed that there was a high level of work related injury within the study setting.

Keywords: Judgment, Work - Related Injury; Awareness; & Endodontic

1. Introduction

Ever more, healthcare facilities are fetching considerate of the insinuation of transforming organizational background in order to expand the standardized criteria & indicators of patient safety. On the increase attention on safety traditions has been associated by the need for appraisal evaluation criteria paying awareness on the cultural essentials of continuing safety development efforts. Job-related safety culture appraisal could be applied as a instrument for enhancing patient safety. This could also exemplify the characteristics of culture appraisal tackles currently obtainable and discusses their existing and possible utilization, including brief utilization that contain assume as appraisal tools. (Jawaid, et al., 2009).

Work-related elements include explicit suggestion for utilize of personnel protective equipments (PPE) when create contact with blood and body fluids hold blood is expected Health care staff is at risk of acquiring . (Haddad, et al., 2002).

Contamination from side to side proficient experience to infectious syndrome. Entire precautions were primarily developed in 1987 by the Centers for Disease Control and Prevention in the United States and in 1989 by the Bureau of Communicable Disease Epidemiology in Canada. The minority studies have reported on surgeons'

adherence towards universal precautions and reported be deficient in of adequate practices in relation to fulfillment towards the personnel protective equipments (PPE). (Norden, C, Rockwell K, Hruska, T, 2008).

Health hazards are predictable to manipulate explicit risk for all the health care providers. All the health care personnel in particular the dental staff who is working in surgical units and Operation Theater are more required to have a cause of a better understanding in adherence with PPE usage which is noteworthy as it provides an assessment of the efficacy of accessible preventative strategies. This could then assist to recognize the precautionary variables which are likely to improve the compliance and decrease the risk of infection transmission. Then, it is possible to integrate these anticipatory approaches into the strategies of health care surroundings. (Wilczyn, et al., (2005).

Policies of safety measures of work related universal precaution is the only approach so that all these infections could be prevented. Inadequate experience of surgeons in performing invasive procedures, they are at particular risk of exposure to blood-borne pathogens (Chopra, et al., 2008). Surgeons' should have reasonable knowledge and performance in relation to adherence to personnel protective equipments. Moreover, dedicated training must be conducted before a surgeons caring for any patient procedure particularly the ones concerning sharp devices. Physicians' compliance towards the personnel protective equipments has been reported to be with little level. (Elliott et al., (2005).

Taneja, (2010), reported that, risks caused by non adherence to universal precautions by the health care providers, statistics reported by the Central Register of Occupational Diseases in Poland indicates that among 314 new cases of occupational diseases in HCWs in 2004-2006,

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HBV and HCV represented 42.6% for 2004, 32.5% for the year 2006 of all cases.9 Despite the substantial reduction in HBV infection since vaccination was introduced in 1989, the incidence of HCV hepatitis in Poland is still on the increase in this occupational group.

Policies of work related injury augment consciousness education has not been well-known among health care workers especially the category of surgeons, particularly in developing countries. To the maximum of our understanding, the attentiveness of dental staff in relation to knowledge and awareness about policies work related injury. Consequently, conducted this study to judge their level of awareness of dental staff toward work related injury at the selected dental clinics-Saudi Arabia.

2. Participants and Methods

This study was applied in the selected setting, and ethical approval was granted by the selected dental clinics. The number of sample size was 100 dental staff was recruited for the study. The participants were selected from the clinics. After signing an informed written consent form, the questionnaire was given to each contributor.

Previous to administration of the questionnaire, the purpose of the study was explained to each respondent and confidentiality of the information guaranteed. Sorra, (2013), reported that, the current r study was carried out by one of the authors who were appropriately trained in administering the informed consent and the self-report questionnaire to the participants. In this cross-sectional study, a structured questionnaire prepared by the authors, was given to the participants.

A self-administered structured questionnaire about knowledge and awareness work related injury was devised and tested. It included a full range of response options, designed to identify the practitioner's level of to assess their level of attentiveness towards policies among dental staff in the selected setting. Prior to distribution of the questionnaire, a pilot study was done on a selective group of health care workers who were asked to fill out the questionnaire and return it back with their remarks and criticism. Minor changes were then made to the final tool.

The introduction part of the questionnaire consisted of demographic information such as occupation, age, gender, and the marital status. The second part of the questionnaire comprised of questions regarding their level of attentiveness towards universal precautions. This part also assessed the level of awareness of the dental staff toward work related injury within the study setting. It obtained within approximately 20 minutes to complete each appraisal. The level of awareness of the dental staff toward work related injury within the study setting by examining questions about: use of protective equipments' such as gloves and gown, mask and protective goggles. A score of "1" was assigned for a correct answer and "0" for an incorrect answer. A health care worker who obtained a total score of "5" was considered "very attentive;" "4 or 3" "somewhat attentive;"

and "1 or 0" "not attentive." The data were coded and analyzed by SPSS® for Windows® ver. 12.0. Strict confidentiality was maintained. All the data were stored in computers at a secured location, with access provided only to the researchers involved in the study. The $\chi 2$ test was used to test association between categorical variables. A p value <0.05 (two-tailed) was considered statistically significant differences.

3. Results

Level of Awareness' towards Work-Related Injury among Dental staff at Dental Clinics of Selected Setting

- 1		T					
	Items of	Very		Somewhat		Not	
	Occupational		wledgeable	knov	vledgeable	Kno	wledgeable
	Injury	No	%	No	%	No	%
	Universal	86	86.0%	4	4%	10	10.0 %
	precautions are						
	applied to patients						
	with HIV and						
	viral hepatitis	Sec. 1					
	only"						
H	"Isolation is	79	79 %	5	5.0%	16	16.0 %
	necessary for		20%				
	patients with		100				
	blood-borne						
	infections"						
	Used needles can	76	76.0%	14	14.0%	10	10.0%
	be recapped after						
	giving an	- 4		1			
	injection"						
	For	82	82.0%	12	12.0%	11	11.0%
	decontamination						
	of devices (with						
	only contact with		700				
	skin) washing	- 7	×35				
1	with usual		SO:				
4	detergent is	10					
	enough"						
	Universal	67	67.0%	13	13.0%	20	20.0%
	precautions are	16	0.7				
	not necessary in		7				
	situations that						
	might lead to	200					
	contact with						
	saliva"						
	"HCWs with non	72	72.0 %	15	15.0%	13	13.0%
	intact skin should						
	not be involved in						
	direct patient care						
	until the condition						
	resolves "						
	Blood spills	81	81.0%	13	13.0%	12	12.0%
	should be cleaned						
	up promptly with						
	sodium						
	hypochlorite"						

This study showed that awareness towards the aspects of work related injury among some dental staff working at the dental clinics of the selected setting was variable. The majority (86.0%) of the dental staff had a high level of awareness towards "HCWs with non intact skin should not be involved in direct patient care until the condition resolves". Followed by (82.0%) at the item of "Isolation is

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necessary for patients with blood-borne infections". Conversely (62.0%) of the dental staff had a low level of awareness towards work-related injury was in item "Universal precautions are not necessary in situations that might lead to contact with saliva".

4. Discussion

The total the selected health care workers fully completed the questionnaire, giving a response rate of 100%. This study showed that awareness towards the aspects of work related injury among some dental staff working at the dental clinics of the selected setting was variable. The majority (86.0%) of the dental staff had a high level of awareness towards "HCWs with non intact skin should not be involved in direct patient care until the condition resolves". Followed by (82.0%) at the item of "Isolation is necessary for patients with blood-borne infections". Conversely (62.0%) of the dental staff had a low level of awareness towards work-related injury was in item "Universal precautions are not necessary in situations that might lead to contact with saliva"

It is crucial that health care providers have high-quality understanding about the risk of blood-borne pathogens at work place and about the preventive measures for reducing risk. In this study, the majorities of the respondents were very knowledgeable of the harmful effects of bloodborne pathogens and identified HIV as a potential harm followed by hepatitis and bacterial infections. In this study, health care workers employed in the health sector for longer periods were more aware of universal precautions compared with those who served for shorter periods. Training and education have been found to be of paramount importance to developing awareness among health care workers, as well as improving adherence to high-quality clinical practice.29,30 The greater awareness of the policies of work related injury among health care workers employed for a longer period at the dental clinics of the selected setting may reflect their participation in a greater number of training and educational sessions on universal precautions which not only encouraged safer work practices but also improved concordance with policies and procedures work related injury.

Personnel Protective barriers reduce the risk of exposure of the health care worker's skin or mucous membranes to potentially infectious materials. Protective barriers reduce the risk of exposure to blood and other body fluids to which universal precautions apply. Examples of protective barriers include gloves, gowns, masks, and protective eyewear. Just over one half of the respondents indicated that they were with protective equipment most times. Additionally, more staff was provided with protective equipment than medical technologists and medical doctors. Interestingly, more respondents who were aware of universal precautions reported being provided with protective equipment more often than those who were somewhat or not aware. This study results congruent with the research data carried out by Kuo, et al., (2010), who reported that less than two-thirds of health care workers claimed that they always used personal protective equipment such as aprons, gowns and gloves, during surgeries and while conducting deliveries. According to Jawaid, et al, among medical doctors working in a tertiary care hospital in Pakistan, compliance for hand washing was 86%, for wearing gloves was 69%, masks 46%, eye goggles 32% and for using gowns/plastic aprons was 68%. However, there is sometimes a high rate of non-compliance among health care workers and this may be due to a lack of understanding among health care workers of how to properly use protective barriers. Furthermore, non-compliance among medical doctors and nurses are associated with insufficient knowledge, workload, forgetfulness, workplace safety and the insight that colleagues also failed to track.

The current research data revealed that there was high level of attentiveness towards policies work related injury within the study setting. These findings suggest that training of health care workers to maintain and enhance their knowledge about bloodborne pathogens and universal precautions could improve their use of universal precautions. Regular training should include the universal precautions, initial biohazard handling, safety policies, safety activities, safety equipment and materials, continuing monitoring and prospective spotlight of medical personnel. This study results is consistent with the study results carried out by Rapiti, et al., (2005), who studied the dental staff adherence toward job related injury.

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