

Critical Review of the Level of Perspectives' Towards Work Risks among Health Care Providers

Assistant Prof. Manal Amer¹, Dr. Ahmed Fahad Jayar², Dr. Mohammed Saud Aljohani³

¹Cairo University, Al-Farabi College Jeddah, Saudi Arabia

²General Practitioner, Almadina Almonwarra, Saudi Arabia

³Dental Resident, Almadina Almonwarra, Saudi Arabia

Abstract: *Background: The distinction on patient protection in health care arena, few organizations has evaluated the extent to which safety is a strategic precedence or their culture chains patient protection. Patient safety, we conducted an efficient assessment of safety. Objective: To provide Critical Review of the Level of Perspectives' Towards Work Risks among Health Care Providers, Saudi Arabia. Method: A cross-sectional survey was conducted at selected setting, Saudi Arabia. Self-administered questionnaire was provided to 100 health Care Providers, Saudi Arabia. in the research setting based on their area of their specialties to assess the level of perspectives' towards Work Risks among Health Care Providers, Saudi Arabia. Results: This study showed that Perspectives' towards Work Risks among some health Care Providers, Saudi Arabia. The majority (46.3%) of the health Care Providers, Saudi Arabia. had a high level of perspectives' towards Work Risks in relation to Work Risks "in relation to only contact with skin) washing with usual detergent is enough". Furthermore, (46.3%) of the health Care Providers, Saudi Arabia. had a high level of perspectives' towards Work Risks Blood spills should be cleaned up at the appointed time with sodium hypochlorite" On the other hand Concerning the Intermittent Level of Perspectives' Intermittent Level of (19.3%) of the health Care Providers. While, the lowest level of Perspectives' towards Work Risks in relation to Blood spills should be cleaned up at the appointed time with sodium hypochlorite "Although, concerning the Intermittent Level of Perspectives' the highest level was towards Work Risks in relation to Entire precautions are not necessary in situations that might lead to contact with saliva"" was showed higher rate (8.4%). Conclusions: The current study results revealed that there were high levels of Perspectives' among Health Care Providers, Saudi Arabia.*

Keywords: Critical Review - Work Risks; Perspectives& Health Care Providers

1.Introduction

Increasingly, healthcare organizations are becoming aware of the significance of transforming organizational culture in order to improve patient safety. Growing interest in safety culture has been accompanied by the need for assessment tools focused on the cultural aspects of patient safety development efforts. Safety culture assessment could be utilized as a tool for improving patient safety. It could also describe the characteristics of culture appraisal tools presently available and discusses their current and potential uses, including brief examples from healthcare organizations that have undertaken such assessments. (Olivw, 2013).

Occupational and environmental health has greatly expanded with increased emphasis on health promotion and health protection services. Many factors have influenced the evolution of occupational health practice. Among them are the changing population and workforce, the introduction of new chemicals and work processes into the work environment, increased work demands, technological advances and regulatory mandates, increased focus on illness/injury prevention, and a rise in health care costs and workers' compensation claims. (Frenky, et al., (2007).

Kuo .et al., (2006), mentioned that timely reporting of occupational exposures to an employee health service is required to ensure appropriate counseling, facilitate prophylaxis or early treatment, and establish legal prerequisites for workers' compensation. Failure to report exposures precludes interventions that could benefit the injured party, placing health care workers at unnecessary

risk. Information is limited regarding the prevalence of needle stick injuries, the circumstances surrounding them, and the barriers to reporting them. We conducted this study to investigate the prevalence and context of needle stick injuries and behavior associated with the reporting of injuries among a large number of surgeons in training.

Tribulations 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 2005, HBV and HCV represented 49.5% of all cases. 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. (Rgpeti, et al., 2005).

Health Care Providers should have a high level of Perspectives' about Work Risks enhance consciousness education has not been prominent among health care workers, particularly in developing countries. To the greatest of our understanding, the attentiveness of health Care Providers, Saudi Arabia, in relation to knowledge and Perspectives' about policies of safety measures within the work setting. Consequently, conducted this study to assess the level of Perspectives' ' towards Work Risks among health Care Providers, Saudi Arabia.

2. Participants and Methods

This study was conducted in August, 2016 at selected setting the study was granted ethical approval by the Administrators Committee.

The research 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 administered to the participants. Self-administered structured questionnaire about Perspectives' towards Work Risks among Health Care Providers, Saudi Arabia. Was devised de novo and tested. It included a full range of response options, designed to identify the practitioner's level of to assess their level Perspectives' towards Work Risks among health Care Providers, Saudi Arabia, within 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.

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 Perspectives' towards Work Risks among medical staff. This part also assessed Perspectives' towards occupational injury. It took approximately 15 minutes to complete each appraisal.

The level of Perspectives' towards Work Risks among Health Care Providers, Saudi Arabia by examining questions. 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 aware;" "4 or 3" "somewhat aware;" and "1 or 0" "not aware." 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 χ^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 Perspectives' Towards Work Risks among Health Care Providers

Items of Occupational Injury	High Level of Perspectives'		Intermittent Level of Perspectives'		Low Level of Perspectives'	
	No	%	No	%	No	%
Work Risks " in relation to infectious diseases	60	46.3%	12	8.1%	38	18.4%
"Isolation is necessary for patients with blood-borne infectious diseases "	50	37.3%	6	5.3%	43	22.1%
Utilizing Personal Protective Equipment's	61	39.2%	16	6.5%	31	15.3%
Work Risks " in relation to only contact with skin) washing with usual detergent is enough"	66	43.1%	6	5.1%	29	8.4%
Entire precautions are not necessary in situations that might lead to contact with saliva"	52	40.3%	11	6.5%	33	12.4%
"Health care workers with non-intact skin should not be involved in direct patient care until the condition resolves "	50	36.5%	42	19.3%	8	9.2%
Blood spills should be cleaned up at the appointed time with sodium hypochlorite"	43	36.5%	13	3%	33	18.5%

This study showed that Perspectives' towards Work Risks among some health Care Providers, Saudi Arabia. The majority (46.3%) of the health Care Providers, Saudi Arabia. had a high level of perspectives' towards Work Risks in relation to Work Risks " in relation to only contact with skin) washing with usual detergent is enough". Furthermore, (46.3%) of the health Care Providers, Saudi Arabia had a high level of perspectives' towards Work Risks Blood spills should be cleaned up at the appointed time with sodium hypochlorite" On the other hand (19.3%) of the health Care Providers, Saudi Arabia. had a lowest level of Perspectives' towards Work Risks in relation to Blood spills should be cleaned up at the appointed time

with sodium hypochlorite "Although, concerning the Intermittent Level of Perspectives' the highest level was Perspectives' towards Work Risks in relation to Entire precautions are not necessary in situations that might lead to contact with saliva"" was showed lowest rate (8.4%) towards Work Risks in relation to work risks " in relation to only contact with skin) washing with usual detergent is enough"

4. Discussion

This study showed that Perspectives' towards Work Risks among some health Care Providers, Saudi Arabia. The

majority (46.3%) of the health Care Providers, Saudi Arabia, had a high level of perspectives' towards Work Risks in relation to Work Risks "in relation to only contact with skin) washing with usual detergent is enough". Furthermore, (46.3%) of the health Care Providers, Saudi Arabia, had a high level of perspectives' towards Work Risks Blood spills should be cleaned up at the appointed time with sodium hypochlorite" On the other hand Concerning the Intermittent Level of Perspectives' Intermittent Level of (19.3%) of the health Care Providers. While, the lowest level of Perspectives' towards Work Risks in relation to Blood spills should be cleaned up at the appointed time with sodium hypochlorite "Although, concerning the Intermittent Level of Perspectives' the highest level was towards Work Risks in relation to Entire precautions are not necessary in situations that might lead to contact with saliva"" was showed higher rate (8.4%)

A further study reported by *Guo, Shiao, Chuang, (2003)*, involving 550 medical students and residents during the 1989–1990 training year likewise reported a high prevalence of needle stick injuries (71%), and a higher frequency of injury (by a factor of 6) among surgical residents than among medical residents. In these two studies, rates of reporting needle stick injuries ranged from 9 to 19%, and a more recent survey of all types of providers from an Iowa medical organization found that 34% had reported their exposure to an employee health service. On the other hand, the study carried by *Regina (2002)*, showed that only 49% of surgical residents report such injuries extends previous observations that underreporting may result in a substantial underestimation of the magnitude of the problem.

Concerning the Intermittent Level of Perspectives' the highest level was Perspectives' towards Work Risks in relation to Entire precautions are not necessary in situations that might lead to contact with saliva"" was showed lowest rate (8.4%) towards Work Risks in relation to work risks "in relation to only contact with skin) washing with usual detergent is enough".

It is very important that health care workers have good 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 Perspectives' among health care workers, as well as improving adherence to high-quality clinical practice. This research findings is congruent with the findings of the study carried out by (*Rapiti, et al., 2005*), who found that he greater Perspectives' of universal precautions among health care workers employed for a longer period 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.

Personnel protective equipment's reduce the risk of exposure of the health care provider'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 provided with protective equipment most times. Furthermore, more nurses were 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 *Pournaras, et al, 2004*, 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 79%, masks 65%, eye goggles 25% and for using gowns/plastic aprons was 95%.³⁵ 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.

The Current research showed that there was high level of Perspectives' ' towards Work Risks among health Care providers within the study setting. These findings suggest that training of health care workers to maintain and enhance their knowledge about occupational safety, blood borne pathogens and universal precautions could improve their use of universal precautions. Regular training should include the universal precautions, initial biohazard handling, safety policies, safety behavior, safety equipment's, continuing monitoring and maintain continuous quality improvement concerning the practice of occupational safety.

Acknowledgements

Appreciation is hereby extended to all the participants.

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