

基层医疗机构医务人员医院感染防控知识和行为调查

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摘要: **目的** 了解基层医疗机构医务人员医院感染防控知识和行为现状, 为提高基层医疗机构感染防控水平提供依据。**方法** 选择南京市浦口区基层医疗机构全部医务人员为调查对象, 自行设计问卷收集调查对象基本信息、医院感染防控知识知晓和行为持有情况, 并进行描述性分析。**结果** 调查402人。其中男性116人, 占28.86%; 女性286人, 占71.14%。年龄以≥41岁为主, 187人占46.52%。学历以本科及以上为主, 200人占49.75%。中级及以上职称168人, 占41.79%。工龄>10年236人, 占58.71%。基层医疗机构医务人员医院感染防控知识知晓率为56.22%; 其中“新型冠状病毒肺炎疫情防控”知晓率最高, 为89.55%; “医院感染防控重点环节”知晓率最低, 为39.55%。医院感染防控行为持有率为84.08%; 其中“良好执行多重耐药菌患者的接触传播隔离防控措施”“良好执行重点科室、重点环节医院感染防控措施”行为持有率较低, 分别为71.14%和64.68%。**结论** 浦口区基层医疗机构医务人员医院感染防控知识水平较低, 多重耐药菌管理及医院感染防控重点环节方面的行为水平较低。

关键词: 医院感染; 医务人员; 基层医疗机构; 知识; 行为

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Knowledge and practice of nosocomial infection control among medical professionals in grassroots healthcare institutions

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Abstract: Objective To investigate the current status of knowledge and practice pertaining to nosocomial infection control among medical professionals in grassroots healthcare institutions, so as to provide the evidence of improving the level of infection control in grassroots healthcare institutions. **Methods** All medical professionals working in grassroots healthcare institutions in Pukou District, Nanjing City, were enrolled. The participants' demographic features and knowledge and practice of nosocomial infection control were collected using self-designed questionnaires and descriptively analyzed. **Results** A total of 402 participants were enrolled, included 116 men (28.86%) and 286 women (71.14%). The respondents were predominantly at ages of 41 years and older (187 subjects, 46.52%), with bachelor and above as the predominant educational level (200 subjects, 49.75%) and intermediate title and above as the predominant professional title (168 subjects, 41.79%), and there were 236 participants (58.71%) with the length of service for more than 10 years. The awareness rate of nosocomial infection control knowledge was 56.22% among medical professionals working in grassroots healthcare institutions, with the highest awareness for COVID-19 prevention and control (89.55%) and the lowest awareness for the key aspects in nosocomial infection control (39.55%). The formation rate of implementing nosocomial infection control practices was 84.08%, with a low rate for “Implement satisfactorily the isolation interventions for patients with multidrug resistant bacteria” (71.14%) and “Implement satisfactorily the control measures for nosoco-

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mial infections in key departments and key aspects" (64.68%). **Conclusions** Low levels are seen in the awareness of nosocomial infection control, behaviors of multidrug resistance management and key aspects in nosocomial infection control among medical professionals in grassroots healthcare institutions in Pukou District.

Keywords: nosocomial infection; medical professional; grassroots healthcare institution; knowledge; practice

医院感染管理是医疗质量与医疗管理的重要内容,也是现代医院管理的难点和挑战^[1-2]。基层医疗机构感染防控问题较多,对医院管理关注度不足^[3],医务人员感染防控处于较低水平^[4]。国家卫生健康委办公厅《关于进一步加强医疗机构感染预防与控制工作的通知》强调践行“人人都是感控实践者”的理念^[5],对基层医疗机构医务人员开展医院感染防控水平调查十分必要。充分运用知识、态度、行为转化规律,可使医院感染防控工作达到预期效果,降低医院感染率^[6]。本研究调查南京市浦口区基层医疗机构医务人员医院感染防控知识和行为,为提高基层医疗机构感染防控水平提供依据。

1 对象与方法

1.1 对象 于2020年9月采用普查方法,选择浦口区7家社区卫生服务中心和56家卫生服务站全部医务人员为调查对象。本研究通过江苏省人民医院浦口分院伦理委员会审查,调查对象均知情同意且自愿参与调查。

1.2 方法 参考相关文献和医院感染管理标准^[7-10],自行设计调查问卷,经预调查修改完善,Cronbach's α 为0.765, KMO 值为0.786。由经过统一培训的调查人员采用问卷星开展线上调查。调查内容:(1)一般资料,包括性别、年龄、专业、岗位、学历、职称和工龄。(2)医院感染防控知识,包括8个方面,70题,每题1分,满分70分;得分 ≥ 42 分为知识知晓,知晓率(%)=(知晓人数/调查人数) $\times 100\%$ 。(3)医院感染防控行为,共16题,包括“总是”“经常”“偶尔”“从不”4个选项,其中1题为反向赋分;满分64分,得分 ≥ 48 分为行为持有,行为持有率(%)=(行为持有人数/调查人数) $\times 100\%$ 。

1.3 统计分析 采用Excel 2007软件建立数据库,采用SPSS 20.0软件统计分析。定性资料采用相对数描述,组间比较采用 χ^2 检验。检验水准 $\alpha=0.05$ 。

2 结果

2.1 一般情况 调查402人,其中男性116人,占28.86%;女性286人,占71.14%。年龄以 ≥ 41 岁为主,187人占46.52%。专业主要为临床专业和护理专业,分别为144人和116人,占35.82%和

28.86%。岗位以社区卫生服务中心临床医技科室为主,209人占51.99%。学历以本科及以上为主,200人占49.75%。中级及以上职称168人,占41.79%。工龄 >10 年236人,占58.71%。

2.2 基层医疗机构医务人员医院感染防控知识知晓情况 知晓医院感染防控知识226人,知晓率为56.22%。“新型冠状病毒肺炎疫情防控”知晓率最高,为89.55%;其次为“标准预防与职业防护”和“手卫生”,知晓率分别为78.11%和76.62%;“医院感染定义与总论”知晓率为64.68%;“医疗废物管理”知晓率为53.98%;“消毒与隔离”知晓率为46.02%;“多重耐药菌防控”知晓率为41.54%;“医院感染防控重点环节”知晓率最低,为39.55%。

2.3 基层医疗机构医务人员医院感染防控行为持有情况 持有医院感染防控行为338人,行为持有率为84.08%。“处理药物前洗手或手消毒”“开启小包装的消毒剂时注明开启日期和失效日期”“每日做好环境清洁与消毒”“及时将使用完的锐器丢弃至锐器盒”“呼吸道传染病流行期间能按照要求进行职业防护”“分类放置生活垃圾与医疗垃圾”的行为持有率较高,为98.01%~99.75%。“皮肤消毒后不用未消毒的手指再次接触穿刺部”“接受过多重耐药菌防控知识的培训”“皮肤消毒后待消毒剂完全干后才进行注射”“诊疗环境每日开窗通风2次”“一次性外科口罩4小时更换一次”“发生医院感染时做好感染病例登记”“接触患者污染部位后进行手卫生再接触清洁部位”“使用医疗设备(如超声诊断仪、除颤仪、心电图机等)后立即对直接接触患者的表面清洁消毒”行为持有率为81.84%~94.53%。“良好执行多重耐药菌患者的接触传播隔离防控措施”“良好执行重点科室、重点环节医院感染防控措施”行为持有率均较低,分别为71.14%和64.68%。

2.4 基层医疗机构医务人员医院感染防控知识和行为比较 女性医院感染防控知识知晓率高于男性($P<0.05$)。不同年龄、专业、岗位、学历和职称的基层医疗机构医务人员医院感染防控知识知晓率比较,差异均有统计学意义($P<0.05$)。不同性别、年龄、专业、岗位、学历、职称和工龄的基层医疗机构医务人员医院感染防控行为持有率比较,差异均无统计学意义($P>0.05$)。见表1。

表1 基层医疗机构医务人员医院感染防控知识和行为比较

Table 1 Comparison of knowledge and practice of nosocomial infection control among medical professionals in grassroots healthcare institutions

项目 Item	调查人数 Respondents	知识 Knowledge 知晓人数 Cases 知晓率 Rate/%	行为 Practice 持有人数 Cases 持有率 Rate/%	项目 Item	调查人数 Respondents	知识 Knowledge 知晓人数 Cases 知晓率 Rate/%	行为 Practice 持有人数 Cases 持有率 Rate/%
性别 Gender				卫生服务站 Health service stations	96	38 39.58	77 80.21
男 Male	116	56 48.28	95 81.90	其他 Others	25	17 68.00	22 88.00
女 Female	286	170 59.44	243 84.97	χ^2 值		23.862	3.513
χ^2 值		4.179	0.580	P 值		<0.001	0.476
P 值		0.041	0.446	学历 Educational level			
年龄/Age/Year				本科及以上 Bachelor degree or above	200	131 65.50	166 83.00
<31	130	74 56.92	112 86.15	大专 College degree	136	77 56.62	116 85.29
31~	85	55 64.71	72 84.71	中专及以下 Technical secondary school and below	66	16 24.24	54 81.82
41~	131	80 61.07	111 84.73	χ^2 值		34.303	0.490
≥ 51	56	17 30.36	43 76.79	P 值		<0.001	0.783
χ^2 值		18.983	2.710	职称 Professional title			
P 值		<0.001	0.438	高级 Senior	51	40 78.43	44 86.27
专业 Profession				中级 Intermediate	117	71 60.68	95 81.20
临床 Clinical specialty	144	88 61.11	125 86.81	初级 Primary	154	73 47.40	131 85.06
护理 Nursing	116	82 70.69	97 83.62	未评级 None	80	42 52.50	68 85.00
公共卫生 Public health	24	11 45.83	22 91.67	χ^2 值		16.484	1.072
医技 Medical technicians	59	25 42.37	47 79.66	P 值		<0.001	0.784
村医 Village doctors	59	20 33.90	47 79.66	工龄/年 Length of service/Year			
χ^2 值		28.859	3.571	≤ 5	107	62 57.94	93 86.92
P 值		<0.001	0.467	>5~	59	37 62.71	52 88.14
岗位 Post				>10~	30	19 63.33	25 83.33
院领导 Hospital leaders	11	10 90.91	11 100.00	>15~	36	22 61.11	30 83.33
临床医技科室 Clinical and technical departments	209	117 55.98	177 84.69	>20~	77	45 58.44	60 77.92
医务科、护理部和院感科 Medical, nursing, and infection management departments	61	44 72.13	51 83.61	>25~	60	30 50.00	49 81.67
				>30	33	11 33.33	29 87.88
				χ^2 值		10.226	4.193
				P 值		0.115	0.651

3 讨论

浦口区基层医疗机构医务人员医院感染防控知识知晓率为 56.22%，行为持有率为 84.08%。“新型冠状病毒肺炎疫情防控”知识知晓率在所有考核项目中

最高，为 89.55%，提示基层医疗机构医务人员新型冠状病毒肺炎疫情防控认知较好。考虑在疫情防控期间国家及地方出台多项指南，基层医疗机构组织培训较多，各级卫生行政部门和医共体单位专项检查频繁，医务人员重视疫情防控工作，知晓水平较高^[11-12]。

基层医疗机构医务人员手卫生知晓率和行为持有率均较高,提示医务人员手卫生执行情况较好。手卫生作为预防医院感染最简单、经济和重要的方式之一^[13],是医疗机构工作人员需要掌握的基础内容。医疗废物管理行为持有率均较高,表明浦口区重视医疗废物管理与处置,同时医疗废物信息化建设也促进医务人员认知提高及正确处置医疗废物。

基层医疗机构医务人员在医院感染防控重点环节和多重耐药菌防控方面的知识知晓率和行为持有率均较低,与刘卫平等^[4]调查结果一致。医院感染防控重点环节和多重耐药菌防控是医院感染防控的重点和难点,也是基层医疗机构医院感染防控管理的薄弱环节。随着医疗改革的深入和医疗服务共同体的发展,双向转诊增加,社区医院多重耐药菌病例增多,应加强各级医疗机构对相关知识的学习,做好部门协同防控,减少多重耐药菌医院感染风险。

年龄 31~<41 岁和工龄>10~15 年的医务人员医院感染防控知识知晓率较高。考虑这类医务人员有一定工作经验,知识更新快,对医院感染防控知识掌握较好。不同岗位医务人员中,院领导医院感染防控知识知晓率较高,表明院领导重视医院感染工作,相关知识学习情况较好,有利于医院感染防控工作的发展。护理人员医院感染防控知识知晓率较高,与既往研究结果^[14]一致。护理人员参与业务学习,操作考核较多,质量控制检查中会涉及医院感染方面问题,可能是其知晓率高的原因。学历越高,医院感染防控知晓率越高,与学历高的人员普遍学习能力较强有关。高级职称人员医院感染防控知识知晓率较高,与其工作经验丰富,较多机会参与知识学习和研究^[15]有关。

综上所述,浦口区基层医疗机构医务人员医院感染防控知识水平较低,多重耐药菌管理及医院感染防控重点环节方面的行为水平较低。年龄较大、学历较低、初级及以下职称的医务人员医院感染防控能力有待加强。应针对薄弱环节加大培训力度,针对重点人群完善培训计划,做好相应考核,加大质控督查力度,全面提高基层医务人员整体医院感染防控水平。

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