

## **POOR PRACTICE AND NON-ADHERENCE TO INFECTION PREVENTION AND CONTROL (IPC) IN BINDE HOSPITAL.**

### **INTRODUCTION**

Binde Hospital is a primary public health facility in Bunkpurugu Nakpanduri District, North East Region of Ghana. Founded as a mission facility by Father Bonnet in 1983, it became public in 2015. It offers 24-hour outpatient services, antenatal and postnatal care, ultrasounds, delivery, family planning, mental health services, theatre, anaesthesia, inpatient care, and TB and HIV/AIDS services. Managed by a medical officer, the hospital has over 140 staff and serves about 90 patients daily.

Binde Hospital faces several challenges, particularly poor practice and non-adherence to infection prevention and control (IPC) measures. IPC is crucial for quality services and safeguarding patient safety and healthcare workers. IPC activities aim to prevent healthcare-associated infections (HAIs).

### **Problem Statement**

IPC is a major issue at Binde Hospital, affecting patients, caregivers, family, the public, and healthcare workers. Challenges include:

- Lack of adequate hand hygiene facilities such as washing stations, disinfectants, and clean water.
- Inconsistent hand hygiene among healthcare workers, increasing infectious transmission risk.
- Improper use of Personal Protective Equipment (PPE), risking exposure for workers and patients.
- Insufficient cleaning of hospital environments, including patient rooms and high-touch surfaces.
- Inconsistent adherence to IPC policies, compromising patient safety.
- Ineffective supervision of IPC activities due to absence of proper IPC teams and management oversight.

### **Objective**

- Train and inform healthcare workers on the importance of IPC.
- Ensure effective logistics for practicing IPC.
- Provide leadership through regular monitoring of IPC adherence.

### **Implementation Plan**

- Education and training: Regular IPC training on hand hygiene, PPE use, and environmental cleaning.
- Monitoring and Feedback: Implement feedback systems for IPC practices, including audits.
- Leadership and accountability: Ensure accountability for IPC practices through regular rounds.
- Staff Engagement: Involve healthcare workers in IPC discussions and promote safety culture.
- Resource Allocation: Advocate for adequate resources to support IPC practices.

### **Impact in Nursing/Midwifery Practice**

These initiatives have significantly impacted nursing and midwifery practices at Binde Hospital.

- Healthcare workers are better equipped to implement IPC measures, enhancing healthcare quality.
- Addressing poor IPC practices has fostered a safe working environment, protecting against occupational infections.
- Good IPC measures have lowered healthcare costs related to HAIs.
- A safe and clean environment has improved job satisfaction for nurses and midwives.

### **Conclusion**

By tackling poor practices and non-adherence to IPC measures, Binde Hospital has lowered hospital-acquired infection risks and ensured safety for patients and healthcare workers. Successful implementation of these measures adopted a multidisciplinary approach and strong leadership.

