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Tuberculosis infection control practices in PHC facilities in three districts of South Africa

CITATION

Engelbrecht MC & Janse van Rensburg AP. 2013. Tuberculosis infection control practices in PHC facilities in three districts of South Africa. *Southern Africa Journal of Epidemiology and Infection*, 28(4): 221-226.

ABSTRACT

South Africa has one of the highest incidence of tuberculosis in the world, which can partly be attributed to poor infection control in public healthcare (PHC) facilities. The aim of the study was to explore the extent of tuberculosis and infection control training, as well as facility-level managerial, administrative, environmental and personal protection, infection control measures, at PHC facilities. Cross-sectional surveys were conducted at 127 PHC facilities across three districts of South Africa. Data collection was achieved through interviews with tuberculosis nurses, observations of infection control practices and a review of the clinic records. Univariate analysis was performed using SPSS® version 17. Limited implementation of World Health Organization infection control measures was identified. In terms of facility controls, 43.3% of the clinics did not have an infection control committee and 40.9% did not have a clinic specific infection control plan. In terms of administrative controls, 94.5% of clinics did not have the tuberculosis signs and symptoms screening tool, 48.8% did not separate coughing patients from other patients, and only 35.4% provided coughing patients with masks or tissues. In terms of environmental controls, only 18.9% of the clinics had an open window register. In terms of personal protection, there was a dire shortage of N95 respirators. In addition, only a third of the professional nurses and one in 10 community health workers had received training on infection control practices. Tuberculosis infection control training for PHC clinic staff, as well as the appropriate implementation of simple and inexpensive infection control measures, is required.