

POSTER PRESENTATION

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Survey of infection control resources and services in outpatient settings in China

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Objectives

This study was conducted to assess the status of infection control resources and services in outpatient settings in China.

Methods

A questionnaire on the structure, organization, and resources for infection surveillance and control work was designed and sent to 420 hospitals distributed in 5 provinces in China. The questionnaire also included the jobs that have carried out in these hospitals. Epidata 3.1 and SPSS 17.0 were used for data entry and analyze.

Results

A total of 416 (99.0%) hospitals responded, including 115 (27.6%) tertiary hospitals, 131 (31.5%) second-class hospitals, 39 (9.4%) traditional Chinese Medicine hospitals, 38 (9.1%) women's and children's hospitals, 30 (7.2%) private hospitals, 50 (12.0%) community health service centers and 13 (3.2%) other type hospitals. 94.7% of the participating hospitals have set up an infection control team in outpatient settings, 94.5% of them had an surveillance and control program, but only 75.5% outpatient settings arranged an link nurse to do infection control job. In terms of hand hygiene, 372 (89.4%) hospitals had hand sinks and 343 (82.5%) provided alcohol based hand rub in every clinic rooms. Only 76 (18.3%) outpatient settings offered hand hygiene equipment for patients in the waiting room. For personal protective equipment, 290 (69.7%) hospitals provided gloves for health care workers (HCWs), and only 270 (64.9%) and 181 (43.5%) settings afforded surgical mask and respirator for health care workers respectively. 400 (96.2%) hospitals gave HCWs education or training on infection control. Observe hand hygiene compliance (348, 83.7%) and supervise disinfection of

health care surroundings (330, 79.3%) were the main infection control activity carried out in these settings, only a few settings did another infection work such as surveillance for surgical site infection (9.6%) or catheter related bloodstream infection (9.1%).

Conclusion

As a developing country, resources for infection prevention and control in outpatient settings were not enough in China. Only a few hospitals did health care associated infection surveillance and control work besides education. More needs to be done to improve the current situation of infection prevention and control in China.

Disclosure of interest

None declared.

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