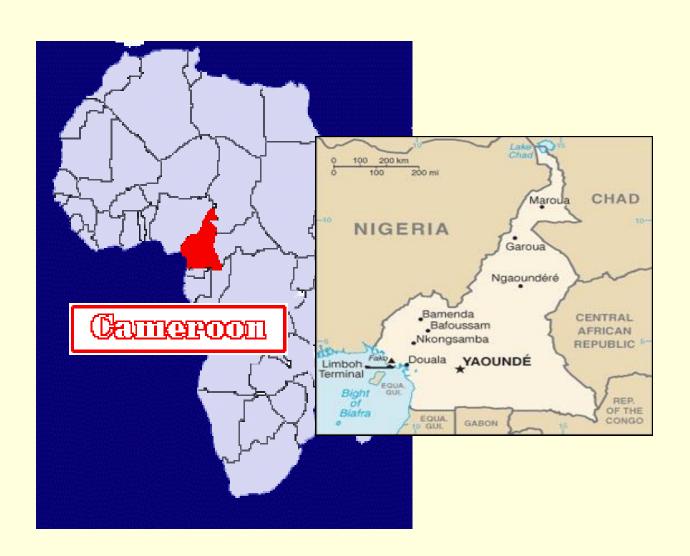
## Introduction

- Of 12 billion injections given annually, about 50% are considered unsafe (WHO, 2003).
- With the increasing HIV/AIDS burden in Sub Saharan Africa, promotion of safe injection practices has become more urgent.
- Some infections like HIV, HBV, bacterial and parasitic infections have been attributed to unsafe injection practices.

# **Background of CBCHS**

- A network of six hospitals, 29 health centers, over 50 PHCs, a Training School and a Central Pharmacy in Cameroon, W. Africa
- Staff over 2,500
- Employs over 150 staff yearly and trains about the same number.



## The Problem

Although the frequency of needle stick injuries in the CBCHS was uncertain due to a poor reporting system, results of a 2011 survey identified unsafe injection practices, prompting us to implement an injection safety/Infection Prevention Campaign.



# Integrating an Injection Safety/Infection Prevention Curriculum into the Curricula in the Cameroon Baptist Convention Health Services (CBCHS) Private Training School for Health Personnel



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# **2011 Survey Results**

#### **Unsafe injection practices:**

- Application of pressure on a bleeding site using a used swab
- Routine recapping of needles
- Multiple use of syringes for more than one injection
- Use of poorly adapted heplocks for drug administration
- Poorly labelled drugs
- Poor storage of vaccines/drugs
- Prolonged storage of diluted drugs/vaccines
- Use of expired drugs
- Poor distribution of sharps containers
- Overfilling sharps containers
- Poor handling/disposal of injection waste
- Lack of functional incinerators



#### Causes of unsafe injection practices:

- Ignorance
- Limited or irregular supply of injection materials and supplies
- Negligence

# **Objectives**

- 1. To create awareness and educate staff/students of the hazards of unsafe injections.
- 2. To reduce unsafe injection practices in the CBCHS.

# **Methods and Materials**

- Infection prevention curriculum was revised to include a module on injection safety in all training programs
- Educational seminars were held at five main hospitals and health centres
- Kept records of all training sessions conducted and staff attendance.
- Reminded staff in all staff meeting on unsafe injection practices in the CBCHS
- Observed practices in the ward and compared with baseline.
- Conducted unannounced checks to evaluate injection practices in the wards
- CBCHS partnered with CHICA-EO



# Results

• Injection safety material for improved collection of sharps and incineration of used needles was developed using local resources and technology:





- Since July 2011, over 500 nurses and other health care workers have been trained/sensitized on unsafe injection and infection prevention practices
- Over five seminars were conducted in the different health facilities
- Infection prevention is consistently taught in all courses
- Injection safety/infection prevention awareness has been created across the entire CBCHS
- Partnership with CHICA-EO resulted in donations of needles, syringes and gloves as well as training resources



## Conclusion

There has been an increase in injection safety/infection prevention awareness across the entire CBCHS.