



Research Article

A STUDY TO EVALUATE HEALTH STATUS AMONG HOUSEKEEPING EXPOSED TO SELECTED OCCUPATIONAL HEALTH HAZARDS IN THE HOSPITAL ENVIRONMENT IN SRI MANAKULA VINAYAGAR MEDICAL COLLEGE AND HOSPITAL AT PUDUCHERRY

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ABSTRACT

In times past, employers were not concern with the health and safety of their employees at work. An employee was not provided with safety and health equipment and she/he risked getting hurt at work anytime she/he goes about his/her duties. Health hazards are usually caused by needle stick injuries, Nosocomial infection, allergic reaction. In order to evaluate health status of housekeepers working in Sri Manakula Vinayagar hospital Puducherry, the investigator had conducted the study. "To evaluate health status among housekeeping exposed to selected occupational health hazards in the hospital environment in sri manakula vinayagar medical college and hospital at puducherry". A descriptive research design was adopted for this study. A sample of 30 housekeepers was enrolled in this study. The result showed that 53.4% had moderate infection, 6.66% had severe infectio.

INTRODUCTION

"An infection acquired in hospital by a patient who was admitted for a reason other than that infection. An infection occurring in a patient in a hospital or other health care facility in whom the infection was not present or incubating at the time of admission. This includes infections acquired in the hospital but appearing after discharge, and also occupational infections among housekeeping." Protecting the workers against any health hazards arising out of work or conditions in which it is carried on. Contributing towards workers physical and mental adjustment. Contributing to the establishment and maintenance of the highest possible degree of physical and mental well being of the workers. The employer has responsibility to protect the employees from all health hazards that may pose threat to their safety and health (International Labour Organization 1959). Safety hazards are those aspects of the work environment that have the potential of immediate and sometimes violent harm to an employee; for example loss of hearing, eyesight or body parts, arts, sprains, brushes, bruises, broken bones, burns and electric shock.

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In India, it is mandatory under the factories Act of 1948 to appoint safety officers in factories with a workforce of one thousand (1,000). Government plays a significant part in health and safety because it legislates to improve health and safety factors.

NEED FOR THE STUDY

"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity".

-WHO

The National Institute for Occupational Safety and Health (NIOSH), completed a survey of 3687 hospitals to identify the types and frequencies of injuries and illnesses among hospital employees. This study found that among all the exposures typified, the most common types of injury were strains and sprains. These injuries are usually caused by improperly lifting objects, including patients, and slipping and falling on slippery floors, stairs, or ladders. Between 75% and 90% of the waste produced by healthcare providers is non-risk or general healthcare waste, comparable to domestic waste.

Table 1. Frequency and percentage distribution of selected demographic variables among housekeeping working in SMVMCH at Puducherry

DEMOGRAPHIC DATA	FREQUENCY	PERCENTAGE
(n= 30)		
1. Gender		
a) Male	4	13.3%
b) Female	26	86.6%
2. Age		
a) 30-44 years	9	30%
b) 45-60 years	15	50%
c) Above 60 years	6	20%
3. Educational attainment		
a) Illiterate		
b) High school	17	56.6%
c) Higher secondary	10	33.3%
d) Graduate.	3	10%
	0	0%
4. Food habits		
a) Both veg and non veg	30	100%
b) Veg.	0	0%
5. Number of children		
a) None	0	0%
b) 2 children	14	46.6%
c) More than 2 children	16	53.3%
6. Having bad habits		
a) Tobacco chewing	9	30%
b) Alcohol consuming	0	0%
c) Smoking	0	0%
d) None	21	70%
7. Frequency of respiratory infection		
a) Once in 3 months	7	23.3%
b) Once in 9 months.	12	40%
c) Once in 6 months	5	16.6%
d) Once in a year.	6	20%
8. Working area		
a) General ward	14	46.6%
b) OT	5	16.6%
c) Laboratory	3	10%
d) Surgical ward	8	26.6%
9. Duration of service		
a) < 5 years		
b) > 5 years	11	36.6%
c) Less than 2 years	17	56.6%
	2	6.66%
10. Daily hours of sleep		
a) < 8 hours	9	30%
b) > 8 hours	21	70%

Table 2. Frequency and percentage wise distribution to evaluate the percentage of infection among housekeepers working in SMVMCH at puducherry

Percentage of Infection Among Housekeepers	Score	Frequency	Percentage
Not infected	20%	12	40%
Moderately infected.	21 – 40%	16	53.4 %
Severely infected.	41-60%	2	6.66%

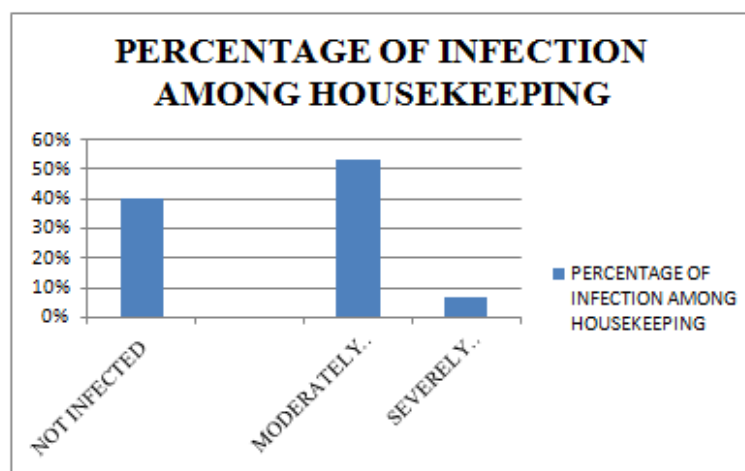


Table 3. Mean and standard deviation of occupational health hazards among housekeepers working in SMVMCH at Puducherry

SCORE	
Mean	25.9
Standard deviation	137.48

It comes mostly from the administrative and housekeeping functions of healthcare establishments and may also include waste generated during maintenance of healthcare premises. The remaining 10-25% of healthcare waste is regarded as hazardous and may create a variety of health risks. By the investigator personal experience, while working in Hospital seen.

OBJECTIVES OF THE STUDY

- To assess the occupational health hazards prevails in the environment of SMVMCH at puducherry.
- To evaluate the health status among housekeeping exposed to selected occupational health hazards in the hospital environment of SMVMCH at puducherry.
- To associate occupational health hazards in the selected demographic variables.

ASSUMPTION

- The study assumes that ,
- Housekeepers exposed to selected occupational health hazards will have some health problems while working in hospital environment.

Table 4. Association between selected demographic variables with percentage of infection among housekeepers working in SMVMCH at Puducherry

Demographic variables	(N=30)						X2	P value
	Mild infected		Moderately infected		Severely infected			
	n	%	n	%	n	%		
1.Gender								
•Male	2	6.66%	1	3.33%	1	3.33%	406.9	P<0.1180
•Female	6	20%	16	53.3%	4	13.3%	DF:1	***
2.Age								
•30-44 years	3	10%	4	13.3%	2	6.66%	6.32	P<0.0001
•45-60 years	2	6.66%	10	33.3%	3	10%	DF:0	***
•Above 60 years	4	13.3%	1	3.33%	1	3.33%		
3.Educational attainment.								
•Illiterate	2	6.66%	13	43.3%	2	6.66%	84.6	P< 0.0008
•High school	4	13.3%	5	16.6%	1	3.33	DF:-1	***
•Higher secondary	0	0%	3	10%	0	0%		
•Graduate	0	0%	0	0%	0	0%		
4.Marital status							13.9	P<0.0018
•Married	9	30%	17	56.6%	4	13.3%	DF:1	*
•Single	0	0%	0	0%	0	0%		
5.Number of children							29.6	
•None	0	0%	0	0%	0	0%	DF:0	P<0.0001
•2 children	4	13.3%	7	23.3%	3	10%		***
•More than 2 children	3	10%	10	33.3%	3	10%		
6.Bad habits								
•Tobacco chewing	1	3.33%	5	16.6%	3	10%	8.69	P<0.0001
•Alcohol consuming	0	0%	0	0%	0	0%	DF:-1	***
•Smoking	0	0%	0	0%	0	0%		
•None	3	10%	14	46.6%	4	13.3%		
7.BMI								
•Underweight	1	3.33%	4	13.3%	2	6.66%	11.33	0.0076
•Normal	3	10%	6	20%	3	10%	DF:-1	*
•Overweight	3	10%	2	6.66%	0	0%		
•Obese	2	6.66%	3	10%	1	3.33%		
8.Working area								
•General ward	3	10%	7	23.3%	4	13.3%	110.03	P<0.0001
•OT	1	3.33%	3	10%	1	3.33%	DF:-1	***
•Laboratory	0	0%	2	6.66%	1	3.33%		
•Other area	1	3.33%	5	16.6%	2	6.66%		
9.Duration of inservice								
•< 5 years	1	3.33%	8	26.6%	2	6.66%	26.8	P<0.0663
•> 5 years	4	13.3%	10	33.3%	3	10%	DF:0	***
•Less than 2 years	0	0%	1	3.33%	1	3.33%		
10.Daily hours of sleep								
•< 8 hours	3	10%	5	16.6%	1	3.33%	117.03	P<0.0126
•> 8 hours	3	10%	14	46.6%	4	13.3%	DF:1	***

*-P<0.05,significant and ** -P<0.01 & ***-P<0.001 , Highly significant.

LIMITATION

The study is limited to,

- Housekeepers who are working in SMVMCH.
- Data collection period for two days.
- Sample size consists of 30 housekeepers.

MATERIALS AND METHODS

The study was conducted in the Madagadipet area, Puducherry. The institute ethical board approved the study before actual data collection. The subject who fulfilled the inclusion criteria. The 30 subjects were selected by non probability purposive sampling technique. A quantitative descriptive research design was adopted for the study. All participated will during data collection. The tool consist of two sections, Section A is consist of demographic variables and section B consists of questionnaire to evaluate the health hazards among housekeeping.

DESCRIPTION OF THE TOOL

The tool consist of three sections , Section A is consist of demographic variables and section B consist of 30 questionnaire to evaluate health hazards among housekeeping working in Sri Manakula vinayagar hospital . 20 questionnaire which is awarded as score less than 20 % (Not infected), 21 – 40 % (moderately infected) and 41 – 60 % (severely infected) The housekeeping are instructed not to omit any of the questions. The questions were translated in two different languages (Tamil and English) and designed in a manner that they can be self-evaluated by them-self. Based on the total score in the 20 questions, the score interpretation was done.

DATA ANALYSIS

The data obtained are classified as three sections.

TABLE 1: Frequency and percentage distribution of selected demographic variables among housekeeping working in SMVMCH at Puducherry.

TABLE 2: Frequency and percentage wise distribution to evaluate the percentage of infection among housekeepers working in SMVMCH at puducherry. (N= 30).

TABLE 3: Mean, standard deviation and mean percentage of selected occupational health hazards among housekeeping working in SMVMCH at Puducherry.

TABLE 4: Associate occupational health hazards among housekeeping with their selected demographic variables. The demographic variables are categorized as No infected, Moderately infected and Severely infected, which is given as frequency and percentage distribution of the demographic variables. The degree of freedom is (n-1), which is given by the options minus one.

Conclusion

From the study it can be concluded that the occupational health hazards among house keepers 40% had no infected, 53.4% of the housekeepers were moderately infected and 6.66 % were severely infected.

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