

**PARTICIPATORY INFECTION CONTROL SYSTEM  
DEVELOPMENT OF  
DOK KHAMTAI HOSPITAL, PHAYAO PROVINCE, THAILAND**



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for the Degree of Master of Public Health in Health system Development**

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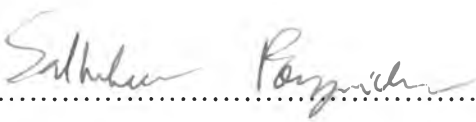
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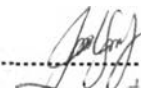
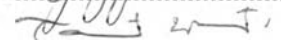
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This study was a participatory action research aiming to develop an effectiveness Infection Control (IC) in Dokkhamtai Hospital, Phayao province in northern Thailand. The population are 85 staff members of the hospital. The participatory process involved assessment and analysis of existing problem, prioritization and planning of IC problems, participatory implementation of solutions, and evaluation of the programme. Important goals were a standard decontamination and sterilization system, knowledge and awareness in IC, efficient infection surveillance system and information, public relation system for IC, waste management system, clean environment, and capable IC committee. As for participation in evaluation, Infection Control ward Nurses (ICWNs) and their Chiefs participated in directing and controlling at service delivery point level. While ICN and assistant participated in follow up and supervision.

The results showed that all of the staff, i.e., Infection Control Nurse (ICN) and ICN assistants medical and non-medical staff, as well as the IC committee were able to apply participatory process in both technical and administrative IC related problems. They first worked on allocation of responsibility of IC work, monthly meeting, collaboration in assessment, directing, control and supervision, restructuring of the organization, improvement of medical equipment transportation. Together, they decided a surveillance system to monitor infections in all in-patient occupational-related accidents, Central Supply's sterilization system and transportation of sterilized equipment, extra isolation room. They also encourage staff to use protective barriers and to do annual physical check-up, and finally have a campaign on waste management. A training program on common communicable diseases and IC was offered. After training, the knowledge outcome of medical staff rose from 18.3% to 24.1 % ( $P < .05$ ) and non-medical staff rose from 16.7% to 21.6% ( $P < .05$ ).

The study found that hospital staff at all levels, be it medical or non-medical, are able to participate in problem identification and solution finding, therefore, any action planning that require their participation should be problem-oriented through participatory process, meeting, publication, and continuation of their education.

Field of study Health Systems Development Student's signature   
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## ABBREVIATIONS

IC	=	Infection Control
ICN	=	Infection Control Nurse
ICWN	=	Infection Control Ward Nurse
Med	=	Medical staff
Non – med	=	Non-medical staff
Admin	=	Administrative committee
PAR	=	Participatory Action Research
FGD	=	Focus Group Discussion
TB	=	Pulmonary Tuberculosis
OPD	=	Out - Patient Department
ER	=	Emergency Room
LR	=	Labour Room
OR	=	Operation Room
Lab	=	Laboratory Room
JICA	=	Japan International Cooperation Agency
IV fluid	=	Intra veinous fluid