

precautions, dusting and segregation of hospital wastes, sterilization and disinfection and area of infection and disease. A study done by Centre for Occupational and Environmental Research, New Delhi (1999) revealed that 5% health workers unaware of infection control techniques and 85% of employees did not go for medical check up<sup>26</sup>. Another study revealed that knowledge of universal precautions among the supportive staff is average and practices were 49.4%<sup>27</sup>.

After giving structured teaching programme regarding infection control, in the present study it was found that ward attendants of experimental group had excellent mean percentage knowledge score in all above areas i.e. excellent knowledge in the areas of infection and disease (81.6%), universal precautions (83.1%), dusting and segregation of hospital wastes (91.6%). Structured teaching program was highly effective in improving the knowledge, skills and attitudes of a group of in patients with diabetes mellitus and the mean post-test knowledge score of experimental group was 83.6 as compared to control group with 51.6<sup>28</sup>.

There was **no** statistically significant effect of variables- age, sex, work experience, area of work, in service education and family income at  $p > 0.05$  level on the knowledge score regarding infection control among ward attendants of both experimental and control groups except academic qualification. It was found that 10+2 pass ward attendants had high pre-test knowledge score than matriculate attendants

In one of the studies it was reported that graduate multipurpose health workers (MPHW) had significantly higher post-test knowledge score as compared to those with 8<sup>th</sup> pass qualification<sup>29</sup>. Similarly another study reported that knowledge score of the ward attendants increased with higher academic qualification as the 10+2 pass ward attendants had higher mean knowledge score than matriculate ward attendants<sup>22</sup>.

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