



RELATIONSHIP SUPERVISION TO HEAD OF THE ROOM WITH COMPLIANCE THE APPLICATION OF HAND HYGIENE NURSE

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ABSTRACT

Hand Hygiene is a term used for hand washing. In the year (2010), WHO initiated a global patient safety challenge with clean care is safe care, which is formulating an innovation in Hand Hygiene is a term used for hand washing. In the year (2010), WHO initiated a global patient safety challenge with clean care is safe care, which is formulating an innovation in the implementation of hand hygiene strategies, for health workers with My Five Moments for Hygiene, namely washing hands before touching patients, before performing clean procedures and sterile, after contact with the patient's body fluids, after contact or contact with the patient, after touching the environment around the patient. Nurse's compliance in doing hand hygiene was 48.3%. Meanwhile, in RSUD Sawahlunto obtained hand hygiene compliance data of 55% before taking action and 80.3% after taking action. The purpose of the study was to Relationship Head Room Supervision with Hand Hygiene Application Compliance in Nurses Implementing in Inpatient Room of Sawahlunto District Hospital 2018. This type of research is analytic descriptive design using crosssectional study approach. This research was conducted in August 2018 in the inpatient ward of the RSUD Sawahlunto, targets 43 people. Data collection techniques are primary data, cluster sampling technique sampling technique and data processing techniques with Chi-Square. From the results 0.012 (p value <0,05), There is a supervisory relationship between the head of the room and compliance with the application of hand hygiene is in the inpatient ward of the RSUD. Sawahlunto in 2018. More than half (62.8%) did not implement compliance with the application of hand hygiene, less than half (37.1%) of nurses said the supervision of the head of the room was not good. The conclusion of this study is that there is still a lack of compliance by implementing nurse in implementation five moment hand hygiene in RSUD Sawahlunto. Increase the knowledge of nurses on the application of hand hygiene in the inpatient room. It is hoped that it can add insight and better protect nurses from the risk of occupations exposed to disease.

Keywords: *Compliance, Hand Hygiene, Supervision*

INTRODUCTION

Hospitals that have professional staff and complete medical facilities are expected to be able to diagnose, treat, and treat people with infectious diseases, with a wide variety of pathogenic microbes, both in the form of bacteria, fungi, viruses, and protozoa. So, it can be said that a hospital can be a place that is prone to contamination by pathogenic microbes, with the risk of spreading / transmitting infectious diseases 1 (Darmadi, 2008).

Hospital-acquired infectious diseases some time ago were referred to as Nosocomial Infection (Hospital Acquired Infection), now it is changed to Healthcare-Associated Infections (HAIs) with a broader definition, namely the incidence of infection does not only originate from hospitals, but also from other health care facilities. Not limited to being infected while in the health service facility. Especially for infections that occur or are acquired at the hospital,



hereinafter referred to as hospital infections (Hospital Infection) 2 (Kemenkes RI, 2017).

HAIs are infections that occur in patients during treatment in hospitals and other health care facilities, have no infection before entering health care facilities and are not in the incubation period, got infected in the hospital but appearing after the patient is discharged, as well as infections due to work for hospital staff and health workers related to the process of health services in health service facilities. HAIs are one of the health problems in various countries in the world, including Indonesia 2 (Indonesian Ministry of Health, 2017).

Based on data from the World Health Organization (WHO, 2017) Worldwide, an average of 1 in 10 patients treated have HAIs. The prevalence survey conducted by WHO in 55 hospitals from 14 countries representing 4 WHO regions (Europe, Middle East, Southeast Asia and West Pacific) showed an average of 8.7% and Southeast Asia as much as 10.0% of hospital patients experiencing nosocomial infection 3,4 (Utama, 2006).

The high incidence of infection also occurs in Indonesia. This can be seen from the results of Basic Health Research 5 (RISKESDAS, 2013), the incidence of infection in hospitals is around 3 - 21% (average 9%) or more than 1.4 million hospitalized patients in hospitals worldwide. In Indonesia, nosocomial infections reached 15.74%, far above developed countries which range from 4.8 - 15.5% 6 (Firmansyah, 2007).

The incidence of infection in West Sumatra can be seen from the data from the West Sumatra Provincial Health Office in 2011, it was found that infectious diseases were still among the top 10 causes of illness and death. The data obtained at Dr. M. Djamil Hospital from January 2014 to

December 2014 showed the number of incidence rates was > 10% 7 (PPI RSUP DR.M.Djamil Padang). Meanwhile, in one of the hospitals in West Sumatra, namely Sawahlunto Regional Hospital, data was obtained from the Infection Control and Prevention Team, in 2017 the fourth quarter was 19.4%.

The occurrence of nosocomial infections is influenced by many factors, one of which is external factors, namely the non-compliance of nurses to take nursing actions, nurses not washing their hands properly before and after nursing actions 8 (Syaifudin, 2004).

Hand Hygiene is a term used to wash hands. In (2009), WHO triggered a global patient safety challenge with clean care is safe care, namely formulating innovative strategies for implementing hand hygiene for health workers with My Five Moments for Hygiene, which is washing hands before coming into contact with patients, before carrying out clean and sterile procedure, after contact with the patient's body fluids, after contact with the patient, after coming into contact with the patient's surroundings 8.9 (Pitlett D, Allegranzi B, Storr J. 2008).

One of the health workers who are most susceptible to infectious diseases is the nurse because they have the most interaction and contact with patients. Washing hands must be done properly before and after taking care measures even if wearing gloves or other protective equipment to remove or reduce microorganisms that are on the hands so that the spread of disease can be reduced and the environment is protected from infection. Washing hands must be done at a time when it is anticipated that germs will be transferred by hand, before taking any action that may cause contamination



and after taking actions that may occur contamination 10 (Tiejien, 2013).

Studies in the United States show that the compliance rate of nurses with hand hygiene is still around 50% and in Australia around 65%. Another study conducted by 11 Karaaslan et al (2014) at the Neonatal and Children's Intensive Care Unit at Marmara University Hospital, Istanbul, found that the compliance rate of nurses in performing hand hygiene was 43.2%, while the research conducted by 12 Pittet (2013) found that hand washing adherence rate at the University of Geneva Hospital was 48%. In Indonesia, the compliance rate is still very low. Judging from the research conducted 13 Damanik (2011), it was found that the compliance rate of nurses in performing hand hygiene was 48.3%. Meanwhile, in Sawahlunto Regional Hospital, data on hand hygiene compliance was obtained by 55% before taking action and 80.3% after taking action. From the data above, it shows that the level of compliance in the implementation of hand hygiene is still low in the Inpatient Room of the Sawahlunto Regional General Hospital.

From various studies and theoretical concepts, it was found that various factors affect the implementation of hand hygiene, including supervision, knowledge, education, leadership, facilities or infrastructure, motivation, experience and training (Kurniadi, 2013). Another study by 13,14 Kennedy et al (2007) stated that clinical supervision to ensure the quality of service will improve patient safety efforts.

The behavior of applying hand hygiene for nurses is one of the factors that has a big influence on the health of nurses in preventing HAIs. Nurses have a very big task towards the occurrence of HAIs because nurses interact directly with patients for 24 hours. To ensure the application of

hand hygiene to nurses procedure are followed, supervision is needed.

This study's goal is to see the role of head of the room supervision of nurses' compliance in implementing Hand Hygiene in each of their action.

MATERIAL AND METHOD

The type of research used is descriptive analytic with a cross sectional approach, which is a research to study the dynamics of the correlation between problems and effects, by approaching, observing or collecting data at once (points time approach) 15 (Notoatmodjo, 2012). The research used independent variables (supervision of the head of the room) with the dependent variable (compliance with the application of hand hygiene to the nurse executives).

This research was conducted in the Surgical Inpatient Room, Interne, Children, Lung, Cendrawasih / VIP and HCU Sawahlunto Regional Hospital, West Sumatra Province in 2018, in August 2018. The population in this study were all nurses in the inpatient room of Sawahlunto Hospital with the number of nurses are 76 people, with a total sample of 43 people who were taken by calculating the Slovin formula, with the sampling technique cluster sampling. Using measuring instruments, hand hygiene observation sheets and a questionnaire for the supervision of the head of the room. This research was conducted with an emphasis on research ethics which includes; informed consent, anonymity, and confidentiality. With primary and secondary data collection procedures, and the statistical test used is Chi-Square

RESULTS

The number of subjects studied were 43 people who were nurses in the inpatient room implementing hand hygiene and



assessing the role of supervision of the head nurses. of the room in applying the hand hygiene of

Table .1 Distribusion Frekuensi based on Respondents Hand Hygiene Application and Supervision of Head of Room in Inpatient Room at RSUD Sawahlunto

No	Variable	F	%
1.	Hand Hygiene Application		
	- Cannot be implemented	27	62,8
	- Implemented	16	37,2
2.	Supervision of Head of Room		
	- Not Good		
	- Enough	16	37,2
	- Good	18	41,9
		9	20,9

These results indicate that the compliance of nurses in the application of Hand Hygiene is more on the supervision of the head of the room, which is not good, compared to that who is obedient to the application of hand hygiene.

Table .2 Relationship of Compliance with Hand Hygiene Application with Supervision of Head of Room in Inpatient Room at RSUD Sawahlunto

Superv of Head of Room	Hand Hygiene Application				Total	%	P value
	Dilaksanakan		Tidak Dilaksanakan				
	F	%	F	%			
Not Good	3	18,8	13	81,3	16	100,0	0,012
Enough	6	33,3	12	66,7	18	100,0	
Good	7	77,8	2	22,2	9	100,0	



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h	16	2	27	62,8	43	100,0

DISCUSSION

Based on the results of the study, it was found that the greatest value was in the supervision of the head of the room, which was not good but it was not implemented in the application of hand hygiene, 13 (81.3%). The results of statistical tests using the chi square test showed that the value of $p = 0.012$ ($p < 0.05$) means that there is a relationship between the Supervision of the Head of the Room and the Compliance of Hand Hygiene Implementation for the Nurses in the Inpatient Room of the Sawahlunto Hospital.

This result is in line with Stevania 16's (2014) research which states that 65% of nurses comply with hand hygiene at Premier Hospital, East Jakarta. This means that there is a significant relationship between the supervision of the head of the room with compliance with the application of hand hygiene with p -value = 0.001.

Supervision is part of the directive and supervisory function in management. Supervision has an important role in the organization to improve performance. In line with what Ilyas, (2012) stated, developing countries, especially Indonesia, still need supervision to improve individual performance. It is possible that there is still low awareness of the functions and responsibilities of workers in Indonesia for their work.

According to the researcher's observations, it was found that some of the nurses often forgot to wash their hands before treating the patient. and some forget to wash their hands before contact with medical devices. Based on the researcher's analysis, it was found that the average nurse who did not comply with the application of hand hygiene was a nurse who

received bad supervision from the head of the room, namely 13 (81.3%). This can happen because the better the supervision of each head of the room, the better the application of hand hygiene for the nurse executives.

Based on the distribution of questionnaires, it was found that respondents aged < 31 years tended to be more obedient in the application of hand hygiene than respondents aged ≥ 31 years. Meanwhile, from gender, it was found that male nurses were more obedient in the application of hand hygiene than female nurses. Meanwhile, for the length of work, the nurse who worked < 3 years is more memorized and easy to remember about how to do five moments of hand hygiene compared to the work period of more than 3 years. This can happen because the nurses who have worked for 1 year are still fresh with new knowledge and new regulations compared to seniors who have been in the job for a long time.

CONCLUSION

It can be concluded from the results of the study that there needs to be intensive supervision by the head of the room when the nurse administers hand hygiene. So that the application of hand hygiene is a priority for nurses every time they take action.

REFERENCES

- Darmadi.2008. Infeksi Nosokomial Problematika dan Pengendaliannya. Jakarta: Salemba Medika
- Kementerian Kesehatan RepublikIndonesia(KemenkesRI).2017. Peraturan Menteri Kesehatan Republik Indonesia Nomor 27 Tahun 2017.Jakarta :Kementerian Kesehatan RI



- Kementerian Kesehatan Republik Indonesia (Kemenkes RI). 2017. Peraturan Menteri Kesehatan Republik Indonesia Nomor 27 Tahun 2017. Jakarta : Kementerian Kesehatan RI
- Laporan Riset Kesehatan Dasar (Riskesdas), 2013. Badan Litbangkes, Depkes RI. Jakarta
- Utama. 2006. Angka Kejadian Infeksi Nosokomial Di Dunia. Diakses Pada 24 April 2018
- Firmansyah. 2007. Infeksi Nosokomial. Diakses Pada 24 April 2018
- Pittet, D. 2013. Improving Adherence to Hand Hygiene. *Epidemiology, Infection Control and Hospital Practice* : A Multi Disciplinary Approach. *Infectious Disease*, 7(2) : 234-240.
- D, Pittet. 2008. My Five Moments for Hygiene. Diakses Pada 24 April 2018
- Karaaslan. 2014. Compliance Of Healthcare Workers With Hand Hygiene Practice in Neonatal and Pediatric Intensive Care Units : Overt Observation. *Interdisciplinary Perspective on Infectious Disease*.
- Kurniadi. 2013. Hubungan Pelaksanaan Fungsi Manajemen Kepala Ruangan dengan Motivasi Perawat Pelaksana Di Ruang Rawat Inap RSUP Undata Palu. Diakses Pada 24 April 2018
- Notoadmodjo, S. 2010. *Metodologi Penelitian Kesehatan*. Jakarta : Rineka Cipta.
- Ilyas, Y. 2012. *Kinerja, Teori, Penilaian dan Penelitian*. FKM. UI Depok Jakarta.