

Occupational Health and Safety (OSH) Implementation Study at Inpatient Room at Tidore Islands City's Regional Public Hospital (RPH)

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Abstract: *The hospital is also required to implement and develop an OSH program at the Hospital. By implementing OSH at the hospital, it will create a safe, healthy and productive workplace for hospital human resources, safe and healthy for patients, visitors, the community and the environment around the hospital so that the hospital service process runs smoothly. The purpose of this study was to determine the description of Occupational Health and Safety Implementation Study at Inpatient Room at Tidore Islands City's Regional Public Hospital (RPH). This research is descriptive research, where this research tries to describe and interpret objects according to the facts. The population were all nurses who work at the inpatient room at Tidore Islands City's Regional Public Hospital. The inpatient room consists of a surgical room, a women's room, a joint class 3 room, a operating room, a emergency room and an ICU room. The samples were 30 respondents. The collected data was then processed and analyzed using a statistical program. The results shows that the majority of occupational health at Tidore Islands City's Regional Public Hospital room are in a less category, the majority of the implementation of occupational safety by the OSH team at Tidore Islands City's Regional Public Hospital room was categorized good, and the OSH team's coaching and supervision system, hospital officials and health offices at the Tidore island City's Regional Public Hospital room were classified as lacking, because nurses did not receive coaching and supervision from OSH Team. In conclusion, the implementation of OSH at hospital has not been maximized, so that, it must be evaluated Immediately. Recommendation 1. Hospital management needs to make improvements to the implementation of OSH at Tidore island City's Regional Public Hospital 2. Hospital management needs to improve the monitoring of OSH implementation at Tidore island City's Regional Public Hospital*

Keywords: Occupational Health and Safety, Inpatient Room, Hospital

1. Introduction

Hospitals are health care institutions for the community that are influenced by the development of health sciences, technological advances, and socio-economic life of the people. The hospital must also be able to improve services that are more excellent and affordable for the community to realize the highest degree of health. In addition to, the hospital is demanded to be able to provide quality services and treatment for the community, the Hospital is also required to implement and develop an OSH program at the Hospital. By implementing OSH at hospital, it will create a safe, healthy and productive workplace for hospital human resources, safe and healthy for patients, visitors, the community and the environment around the hospital so that, the hospital service process runs smoothly (UU RI No 44, 2009).

The growth in the number of specialists in OHS has resulted in an emphasis on policy and practice away from more scholastic concerns previously addressed by academics in the disciplines of psychology and sociology (Zanko, 2012).

Occupational accidents can be caused by various activities in the hospital. The report of the Occupational Safety and Health Administration (OSHA) in 2013 showed that the incidence of workplace accidents in hospital were 2 times greater than in other industries. Data from the Occupational Safety and Health Administration (OSHA) in 2013, the causes of injuries to health workers included fatigue due to movement related to the handling of patients (48%), sprains or falls (25%), contact with dangerous devices (13%), acts of violence from patients (9%), exposure to hazardous substances (4%), and other causes (1%) (Demak, 2015).

Research conducted in 2009 on 655 nurses in the Philippines stated that 32% of nurses reported injuries 1 to 2 times a year, 6% were injured while working at least 3 times a year. 41% of nurses reported that the disease was getting worse due to his work as a nurse and 31% had to get permission more than 2 days a year due to illness / injury due to his work. 78% of nurses also complained of low back pain. The work of bending and lifting of patients are the most at risk of causing low back pain. Bent posture has 14 times risk to low back pain compared to non-bending work postures (Castro et.al, 2009).

In Indonesia, one of the researched in 2007 recorded that number of needle stick injury accident reached 38% -73% of total health workers (Dewi, 2015).

According to law Number 36 of 2009 concerning Health, specifically article 165 states that workplace managers are obliged to carry out all forms of health efforts through efforts to prevent, improve, treat and restore workers. Therefore, the manager of workplace at the Hospital has an obligation to make healthy for the labor. Hospital must guarantee health and safety both for patients, service providers or workers and the surrounding community from various potential hazards at the Hospital. Therefore, the Hospital is required to carry out Occupational Health and Safety (OSH) efforts carried out in an integrated and comprehensive so that, the risk of Occupational Disease and Occupational Accident at the Hospital can be avoided.

Nurses are one of the health workers who work in hospital that serve and care for patients, especially at the inpatient room. In serving, nurses have a high risk of being exposed to work-related illness, due to an unhealthy, insecure and

uncomfortable hospital environment. As a result, nurses health status has declined, such as physical, mental and social health. For this reason, the implementation of OSH in hospital must be carried out to improve and maintain the physical, mental and social health status of nurses.

2. Research Method

The population was all nurses who work at the inpatient room at Tidore island City’s Regional Public Hospital. The inpatient room consists of a surgical room, a women’s room, a class 3 room, a operating room, a emergency room and an ICU room. The samples were 30 respondents. The collected data was then processed and analyzed using a statistical program.

3. Results

3.1 Occupational Health

Table 1: Occupational Health in Women’s Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	1	20	Less
4	4	80	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 1 shows that occupational health at the women’s care room is categorized less (20%) and very lack (80%).

Table 2: Occupational Health in Surgical Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	5	100	Less
4	0	0	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 2 shows that Occupational health in the Surgical treatment room is categorized less (100%).

Table 3: Occupational Health in the ICU

No	Frequency		Category
	n	%	
1	0	0	Good
2	1	20	Sufficient
3	4	80	Less
4	0	0	Very lack
total	5	100%	

Source: Primary data, 2018

Based on Table 3 shows that Occupational Health in the intensive care room is categorized less (80%).

Table 4: Occupational Health in Joint Class III Room

No	Frequency		Category
	n	%	
1	5	100	Good
2	0	0	Sufficient
3	0	0	Less
4	0	0	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 4 shows that Occupational Health in joint Class III is categorized good (100%).

Table 5: Occupational Health in the Operating Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	2	40	Less
4	3	60	Very lack
total	5	100%	

Source: Primary data, 2018

Based on Table 5 shows that the Occupational health in the VIP Room is categorized less (40%) and very lack (60%).

Table 6: Occupational Health in the Emergency Room

No	Frequency		Category
	n	%	
1	1	20	Good
2	1	20	Sufficient
3	2	40	Less
4	1	20	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 6 shows that Occupational Health in the Emergency Room is categorized less (40%)

3. 2 Occupational Safety

Table 7: Occupational Safety in the Women’s Room

No	Frequency		Category
	n	%	
1	5	100	Good
2	0	0	Sufficient
3	0	0	Less
4	0	0	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on table 7 shows that Occupational Safety in the women’s care room is categorized good (100%)

Table 8: Occupational Safety in the Surgery Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	5	100	Less
4	0	0	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 8 shows that Occupational Safety in Surgery room is categorized less (100%).

Table 9: Occupational Safety in the ICU

No	Frequency		Category
	n	%	
1	3	60	Good
2	1	20	Sufficient
3	1	20	Less
4	0	0	Very lack
total	5	100%	

Source: Primary data, 2018

Based on Table 9 shows that Occupational Safety in the intensive care unit room is categorized good (60%).

Table 10: Work Safety in Joint Class III Room

No	Frequency		Category
	n	%	
1	5	100	Good
2	0	0	Sufficient
3	0	0	Less
4	0	0	Very lack
total	5	100%	

Source: Primary data, 2018

Based on Table 10 shows that Work Safety in joint Class III room is categorized good (100%).

Table 11: Occupational Safety in the Operating Room

No	Frequency		Category
	N	%	
1	5	100	Good
2	0	0	Sufficient
3	0	0	Less
4	0	0	Very lack
total	5	100%	

Source: Primary data, 2018

Based on table 11, it is interpreted that Occupational safety in the Men's Nursing Room at Tidore Islands City's Regional Public Hospital is categorized good (100%)

Table 12: Work Safety in the Emergency Room

No	Frequency		Category
	n	%	
1	4	80	Good
2	0	0	Sufficient
3	0	0	Less
4	1	20	Very lack
total	5	100%	

Source: Primary data, 2018

Based on table 12 it shows that occupational safety in the emergency room at Tidore Islands's Regional Public Hospital is categorized good (80%) and very lack (20%).

3.3 Coaching and Supervision

Table 13: Occupational Work Coaching and Supervision in the Women's Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	5	100	Less
4	0	0	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on table 13 it shows that Occupational work Coaching and Supervision related to OSH in the women's care room at Tidore Islands City's Regional Public Hospital is categorized less (100%).

Table 14: Occupational Work Coaching and Supervision in the Surgical Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	0	0	Less
4	5	100	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 14 shows that Occupational work Coaching and Supervision in Surgery treatment room at Tidore Islands City's Regional Public Hospital is categorized less (100%).

Table 15: Occupational Work Coaching and Supervision in the ICU Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	0	0	Less
4	5	100	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on Table 15 shows that Occupational work Coaching and Supervision in the intensive care unit room at the City of Tidore Islands's Regional Public Hospital is categorized very lack (100%).

Table 16: Occupational Work Coaching and Supervision in Joint Class III Room

No	Frequency		Category
	n	%	
1	0	0	Good
2	0	0	Sufficient
3	0	0	Less
4	5	100	Very lack
total	5	100%	

Source: Primary data, 2018

Based on Table 16 shows that Occupational work Coaching and Supervision in joint-Class III room at Tidore Islands City's Regional Public Hospital is categorized less (100%).

Table 17: Occupational Work Coaching and Supervision in the Operating Room

No	Frequency		Category
	n	%	
1	4	80	Good
2	0	0	Sufficient
3	0	0	Less
4	1	20	Very lack
total	5	100%	

Source: Primary data, 2018

Based on table 17, it shows that Occupational work Coaching and Supervision in the operating room at the Tidore Islands City Hospital related to the health and safety are categorized good (80%) and less (20%).

Table 18: Occupational Work Coaching and Supervision in the Emergency Room

No	Frequency		Category
	n	%	
1	1	20	Good
2	0	0	Sufficient
3	1	20	less
4	3	60	Very lack
Total	5	100%	

Source: Primary data, 2018

Based on table 18 shows that Occupational work Coaching and Supervision in the emergency room at Tidore Islands City's Regional Public Hospital related to the health and safety are categorized Good (20%), less (20%) and very lack (60%).

4. Discussion

4.1 Occupational Health

In this research the samples were all nurses who work in women's care, surgery, ICU, joint class III, operating, and emergency room. The results of the study for occupational health implementation variables showed that the highest number of women's care rooms were less (80%), surgical room were less (100%), ICU room were less (80%), operating room were less (60%) and IGD were less (40%). While in joint Class III room, occupational health were 100% good. Based on these results, it were shown that the most rooms at Tidore Islands City's Regional Public Hospital were in less categories.

The problem found at the Tidore Island's Regional Public Hospital was that the hospital did not carry out periodic health checks for nurses at least within 1 year. The hospital does not carry out specific health checks on nurses who have diseases that require more than 2 weeks of care and for nurses who are over 40 years old (> 40 years), the hospital has not carried out counseling on the risks and special hazards in the workplace as a whole / every room, the hospital does not carry out health work socialisation regularly and continuously as needed in order to create a OSH culture, the hospital did not provide additional food with adequate nutrition for nurses who were on night service, nurses do not get routine immunizations as needed, the hospital does not hold sports, health and recreation exercise for nurses, the hospital did not provide basic

treatment for free to all nurses. On the other hand, the hospital has carried out health checks on new employees.

According to Ibrahim et al (2017) the Hospital provides treatment and rehabilitation to sick employees and the OSH at hospital also cooperates cross-sectorally with the Hospital Patient Safety Committee in handling patient safety. Occupational health and safety aims to protect workers for their safety in order to increase national productivity. Ensuring all workers in the workplace use and maintain production source safely and efficiently.

According to Caesario (2015) also revealed that in carrying out occupational safety and health programs must include medical check-ups conducted twice a year, training programs and prevention of the use of chemicals that aim at preventive efforts from chemical exposure to workers.

4.2 Occupational Safety

The results showed that the women's care room was 100% in good category, the operating room was 100% good, the ICU was 40% good, the class III room was 100% good, operating room is 100% good, and emergency room (IGD) is 80% in good category in term of occupational safety implementation. This shows that most of the rooms at Tidore Islands City's Regional Public Hospital are in good category in term of occupational safety implementation. Tidore Islands's Regional Public Hospital applies work safety standard such as, making direction signs and safety signs and provide fire extinguishers, fire alarms, evacuation routes, and emergency stairs in every corner or strategic place in the hospital.

The Tidore Islands City's Regional Public Hospital provides personal protective equipment (PPE) according to the needs of nurses such as disposable handsoon, masks and other personal protective equipment, all work equipment available in City of Tidore's island Regional Public Hospital room is in good condition and feasible to use.

Tidore Islands City's Regional Public Hospital also has an SOP for work safety equipment, hospital always provides training in how to use safety equipment and PPE, the hospital conducted a socialization of work safety for nurses, the hospital has carried out hospital occupational health and safety training (OSH in hospital) to OSH officers in the Tidore Islands City, The hospital has carried out OSH certification to OSH officers at hospital, the hospital involved nurses in planning the procurement of facilities, work safety equipment and infrastructure. The hospital has a SOP for reporting, near miss and accident. The hospital also provides facilities and infrastructure to prevent emergency events along with the SOP for its prevention such as earthquakes, fires and other disasters, and the hospital has carried out socialization of emergency response measures.

This is in line with the research conducted by Ibrahim et al (2017) stating that the Makassar Haji General Hospital has a program to handle emergency response events and the Hospital has determined procedures for emergency response.

By Conducting, evaluating, developing and implementing effective remedial action plans, it will improve medical emergency preparedness and response (Jefferelli S.B, 2012).

The hospital also provides supporting facilities and infrastructure such as APAR (Light Fire Extinguisher), alarms, evacuation routes, exit lights, communication devices and gathering places. The OSH at hospital officer checks periodically for evacuation signs, APAR, alarms every six months. The Hospital also held socialization and simulations regarding emergency response but still lacked and needed to be done routinely. In addition, OSH in hospital officers conduct a visit to each room to conduct medical equipment checks, each equipment has an SOP, guidelines for use and maintenance management.

Occupational Health and safety programs cannot work alone without a good corporate management system (Caesario, 2015).

There are several ways that can be done, such as implement an occupational safety and health program by disseminating information to workers about safety carried out by safety officers and Occupational Safety and Health Advisory Committee (OSHAC), disseminate information to nurses about APAR, socialize the use of PPE to employees into a work culture, conduct training for employees as an effort to socialize OSH understanding about, basic life assistance to non-medical employees, hospital nosocomial control, fire prevention along with its practice and prevention.

4.3 Coaching and Supervision

The results of the study for occupational health variables in term of coaching and supervision showed that the majority of women's care rooms were less (100%), surgical rooms were less (100%), ICU room were less 100%, joint class III rooms were less (100%), and IGD were less (60%). While the operating room is 80% good. This shows that most rooms do not receive coaching and supervision from the OSH Team. This is due to lack of coaching and internal supervision by the Director of the hospital and the OSH Team in every room at the Tidore Islands City's Regional Public Hospital and lack of external supervision by the health office.

According to Ibrahim et al (2017), the OSH team should conduct coaching and supervision of reports in the event of a work accident, the OSH teams have a special reporting format related to the incidence of work accidents.

In the Decree of the Minister of Health Number: 1087 / MENKES / VIII / 2010 concerning Hospital occupational safety and health standards explained that the Hospital must conduct socialization and counseling, have a communication system internally and externally, and carry out evaluations. Therefore, The Tidore Islands City's Regional Public Hospital must pay attention to the occupational health and safety of health and non-health workers. Where the hospital must continuously conduct coaching and supervision of health and non-health personnel.

Research by Salawati et al (2014) also revealed that to reduce work-related accidents and work-related illnesses, the hospital must monitor and evaluate nurses continuously. Training for Occupational Health and Safety (OSH) must be provided periodically and continuously for nurses to improve nurse's performance, knowledge and attitudes.

5. Conclusions

Based on the results obtained, it can be concluded that the majority of occupational health in Tidore Islands City's Regional Public Hospital room are in a less category, the majority of the implementation of occupational safety by the OSH team at Tidore Island City's Regional Public Hospital room was categorized good, and the OSH team's coaching and supervision system, hospital officials and health offices at Tidore island City's Regional Public Hospital room were classified less, because nurses did not receive coaching and supervision from OSH Team

6. Recommendation

- 1) Hospital management needs to make improvements to the implementation of OSH at Tidore island City's Regional Public Hospital
- 2) Hospital management needs to improve the monitoring of OSH implementation at Tidore island City's Regional Public Hospital

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