Evaluation Of Occupational Health And Safety Management System At General Hospital in Indonesia

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ABSTRACT
The Haji Hospital Medan’s implementation of SMK3 is not in accordance with the Standard Regulation of the Minister of Health of the Republic of Indonesia Number 66 of 2016, where the Haji Hospital Medan still has problems implementing the Occupational Health and Safety system, and does not yet have a supervisor to supervise so that OHS-Hospital reporting and recording go well. The researcher intends to examine the OHS-Hospital management system's inputs, processes, outputs, and outcomes at Haji Hospital Medan. The descriptive research approach was observational in nature, requiring field observations. In-depth interviews were used in qualitative research. The study's results showed that although the Haji Hospital Medan OHS-Hospital management system's input was good if there were clear SOPs and rules, the process of the OHS-Hospital management system at Haji Hospital Medan itself was not optimal because there were still a shortage of human resources in the OHS-Hospital field and a lack of concern for the OHS-Hospital program's employees. As a result, the OHS-Hospital program did not The OHS-Hospital management system at Medan Haji General Hospital has not produced the best results due to ineffective recording and reporting; as a result, many of the programs are not operating as they should. As a result, the OHS-Hospital management system at Medan Haji Hospital has become unsatisfactory. Conclusion The OHS-Hospital Management System at Haji Hospital Medan was still lacking and not fully running well. It was recommended to increase guidance and supervision so that health workers are willing to carry out the program in accordance with the SOP that has been set.

Keywords: Evaluation, Management, Occupational Health and Safety, Hospital

INTRODUCTION
Occupational Safety and Health has a philosophy as a basic form of effort to ensure the physical and non-physical well-being of employees as well as a culture towards a prosperous society. According to science, it is knowledge and application in a form of business to prevent accidents and illnesses caused by workers. Occupational health and safety cannot be separated from production processes, services and industry (1).

Accidents at work are mostly brought on by human factors, or risky behaviors, specifically unsafe behavior. Additionally, a little portion is brought on by harmful environmental circumstances. Therefore, efforts must be made to reduce the risk of danger so that everyone working in the hospital can do so in a safe and comfortable manner. To ensure the safety and health of medical staff, non-medical staff, and other visitors to the hospital, this requires the implementation of a hospital occupational health and safety management system (2).

The description of infection incidents above is only one of the various types of danger that can befall workers in hospitals. For example, the risk of low back pain due to incorrect body
position when lifting patients or other objects, the danger of exposure to radiation, toxic chemicals, biological hazards, extreme temperatures, noise, dust, stress, falls, trips, trips, punctures and so on. In 2006 there were more than 5 million people working in hospitals across America in various types of work in them. They were all exposed to various problems related to K3RS disturbances, one of which was violence. According to Bureau Labor Statistics (BLS) estimates, in 1999 there were 2637 cases of violence experienced by hospital workers (3).

A strong collective commitment, planning and organization to implement Occupational Safety and Health in the workplace is very necessary to increase workforce and productivity. Weak management systems and low levels of awareness of the importance of Occupational Safety and Health can have fatal consequences for workers and a company's production capacity (4).

Hospitals can be said to be terminals for all diseases, both communicable and non-communicable diseases. The workers on duty will often interact with patients so they are vulnerable to contracting the same disease. Hospital occupational safety and health is a new program for hospitals in Indonesia, there are only a few hospitals that have a K3-Hospital committee, and even then, they don't have a targeted program. Therefore, data on the number of disabilities, morbidity and work-related deaths in hospitals does not yet exist (5).

The K3RS system has been used at Medan Haji General Hospital in North Sumatra Province since the hospital's establishment in 2001; however, the K3RS section committee was only established in 2014 and only recently received hospital accreditation certification from the Hospital Accreditation Commission (KARS) with fully accredited status in 2017 and was accredited at Main Level in 2018. One of the accreditation certification studies is occupational health and safety (K3)(6).

Ideally, the K3RS Management System runs in accordance with the Regulation of the Minister of Health of the Republic of Indonesia Number 66 of 2016 concerning Occupational Safety and Health in Hospitals, however, based on the results of the initial survey in February 2020, researchers conducted interviews and collected data in the occupational health and safety section of RSUD Haji Medan and found several obstacles in implementing the occupational health and safety system, such as not having a supervisor to supervise that the reporting and recording in this K3RS section runs well from each unit, because of the double work which makes the members in this K3RS section less focused in that matter. Data on work accidents at the Haji Hospital in North Sumatra Province from the Occupational Accident and Safety unit reveals that in 2019, there were 1.6% cases of needlestick injuries, 1.6% of radiation exposure, 0.8% of burns, 1.3% of B3 exposure, 1.6% of electrocution, and 1.3% of slips. Most work accidents were caused by negligence and mistakes in work procedures. One example of the most dangerous occupational disease (PAK) that is commonly encountered is HIV/AIDS and hepatitis B. The medical and non-medical waste management system has also been managed well in accordance with existing procedures (7).

The author believes it is necessary to research efforts to prevent work accidents and illnesses (in this case, the implementation of the Hospital Occupational Safety and Health Management System) based on the findings of a survey that was conducted with the number of work accident risks resulting from work accidents. Researchers seek to investigate "Evaluation of the Occupational Safety and Health Management System at the Haji General Hospital in Medan" based on the aforementioned phenomenon.

METHODS

Types of Research

Research with a qualitative methodology and in-depth interviewing techniques is the method used. The information gathered for this study is not numerical, but rather is derived from interview transcripts, field notes, private papers, memos, and other legal documents. The research was conducted at RSU Haji Medan, North Sumatra Province on jl. Hajj Hospital no.27. This research
was carried out from March 2020 to June 2020

Research Informant

Key Informants are Deputy Director of RSU Haji Medan, Hospital Occupational Safety and Health Committee (K3RS) Section, Infection Prevention and Control Section (PPI), Additional Informants, Nursing services sector, medical services sector, Support services sector

Data Collection Method

Primary data was obtained from the results of in-depth interviews with competent representatives from each work unit and K3RS implementing unit. The primary data that will be explored is the implementation of the occupational health and safety management system at RSU Haji Medan.

Data Analysis

Through the stages of data reduction, presentation, and drawing conclusions, descriptive analysis is used to analyze data by grouping it into manageable units, synthesizing it, looking for and determining patterns, finding what is important and what has been learned, and deciding what can be told to others.

RESULTS & DISCUSSION

Qualitative Analysis

Characteristics of Informants

The key informants in this research were 3 people, namely the director of RSU Haji Medan (represented by deputy director II for medical services), the chairman of the hospital occupational safety and health committee (K3RS), and the chairman of infection prevention and control (PPI). Meanwhile, there were 3 additional informants, namely the nursing services section, the medical services sector and the support services sector.

Input to the occupational safety and health management system

The implementation of occupational safety and health has begun to become something that is felt to be important for both patients, patient families, visiting guests, or customers who come from internal stakeholders from other hospitals. Occupational safety and health management is starting to be developed in order to minimize the occurrence of work-related accidents and illnesses in hospitals.

Meanwhile, input itself is all the resources needed to carry out an activity or implement a program. Input can also be interpreted as all the potential entered into a process. Here input includes organizational structure, task descriptions and work programs.

Interviews conducted by researchers with the deputy director of RSU Haji Medan as triangulation also explained that they chose the K3RS committee based on the competency or certification they had, of course those who served on the K3RS committee had taken formal or non-formal education in the field of K3RS itself, they had to undergo training as one of the requirements and have a valid certificate. The K3RS committee chairman and his staff were appointed in accordance with the criteria established by the hospital director's own Decree, one of which was that they had completed formal and informal education in their field and had training certification in their field, K3RS itself. This was also stated by the chairman of the K3RS committee at RSU Haji Medan.

In this research, the job descriptions for each position in the K3RS committee have been included in the K3RS guidebook at Haji Medan Hospital and the job descriptions are clear and the perception is easy to understand, for example providing positions in accordance with expected standards, the relationship between duties and responsibilities is real described separately and
clearly known and shows the relationship between officials and other people and outside the organization, the standards of authority and achievements that must be achieved, have met the requirements within the organization. In this research it can be seen that everyone is well aware of the job descriptions that must be carried out for each position that has been entrusted and all those selected to be responsible have received K3RS training and socialization.

Based on research, all staff have gained knowledge about K3RS, and regular training and counseling has been carried out, especially for K3RS staff themselves, training is carried out every two years in order to renew the relevant certificates.

All informants knew about all the programs carried out by K3RS, however, during an in-depth interview with the K3RS chairman himself, it was discovered that the reporting was not going well. The problem is that each room tends to cover up incidents of work negligence that occur. As a result, the reported data cannot be used as the spearhead for the success of the K3RS program at the Medan Haji Hospital.

Process in the occupational safety and health management system

Based on the results of researchers in in-depth interviews by the K3RS committee, hospital workers have received work safety training/counseling, but K3RS training is still lacking/does not cover all workers at the Haji Medan RSU and the criteria for K3RS staff at the Medan Haji RSU have not yet been achieved according to Minister of Health regulations. Republic of Indonesia Number 66 of 2016 concerning Hospital Occupational Health and Safety. Minister of Manpower Regulation No.05: As of 05/May/1996 explains that training is an important tool in ensuring work competency needed to achieve occupational health and safety goals, this is in line with Sulfanah's research stating that the training dimension received a score of 74%, namely implementation of effective training in an K3 culture where the presentation of material is in accordance with the worker's job specialization.

The assumption that workers in hospitals are considered to know and be able to maintain their health and protect themselves and are deemed to find it easier to consult a doctor and obtain treatment facilities informally, makes the implementation of occupational safety and health in hospitals seem to be sidelined. Considering the large exposure in hospitals, hospitals as unique and complex workplaces really need to implement emergency response management to provide protection to employees and patients.

Based on the results of interviews with researchers, the human resources in the sanitation and B3 waste section are adequate and the work can be handled well, where they have 7 workers whose average education is high school. The management of medical waste and other B3 materials has referred to Ministerial Decree Number 1204/MENKES/SK/X/2004 concerning Hospital Environmental Health requirements. Where solid waste is divided into several parts, including infectious, syringe, and non-infectious and B3 waste is coated in yellow plastic with the logo writing infectious waste. Due to the location of the Medan Haji Hospital in the midst of the city and other communities, solid medical waste is also incinerated by a third party using an incinerator.

Output on the occupational health and safety management system

Based on the informant's statement, the collection, management of data documentation and reporting of K3 activities at RSU Haji Medan is not yet in accordance with it. It is hoped that the sanitation and B3 waste team will be more solid so that they can work together to reduce the number of work accidents in the sanitation and B3 waste section, and for K3RS so that Regulation of the Minister of Health of the Republic of Indonesia Number 66 of 2016. Recording and reporting of K3 activities at RSU Haji Medan is not carried out repeatedly every time because each room does not routinely provide reports on the number of work accident incidents and each room unit tends to hide these incidents, only a few rooms provide the remaining reporting was not
carried out. Therefore, it is difficult for the K3RS team to make evaluations because each hospital work unit does not routinely and periodically provide reports to the K3RS team.

Outcomes on the occupational health and safety management system

From the results of research conducted by researchers, it was found that the K3RS team was not satisfied with the results of the programs carried out so far, because there were many programs that were not running, one example was the recording and reporting of work accident numbers in each unit, even though in the past year the numbers of work accidents is minimal. If the K3RS at RSU Haji Medan runs well and is close to perfect, the number of work accidents or work risks or infections will be much smaller because the K3RS unit at RSU Haji Medan works together with sanitation and also PPI in handling risks and infectious incidents. There is great hope that in the future the K3RS program will become the main program at this hospital after the service program, because the service will be carried out well if the K3RS is close to perfect.

CONCLUSION

The K3RS team at Medan Haji Hospital is a K3RS organization, and the hospital director chooses the chairman of the K3RS committee directly, according to the necessary conditions and requirements. Job descriptions and job descriptions have been known and prepared clearly and have been included in the K3RS manual book at Haji Medan Hospital, and all K3RS teams are well aware of the job descriptions that must be carried out for each position that has been secured and they have previously received K3RS training and outreach. The K3RS program has been running well, but it is not yet optimal because it is related to the lack of human resources within the K3RS team itself.

The K3RS team at RSU Haji Medan have all received training or counseling on occupational safety and health at the hospital which is carried out routinely and periodically, both formally and non-formally. The K3RS training certificate is always renewed every two years to remember the validity period of the certificate itself. RSU Haji Medan has operational standards (SOP) that are not in compliance with Hospital Occupational Health and Safety Regulation Number 66 of 2016 of the Republic of Indonesia's Minister of Health. The K3RS team has also promoted occupational health and safety through counseling, certified education/training, information dissemination and communication through leaflets, brochures, banners, information mics and outreach held in group meetings. Even though RSU Haji Medan has a clear SOP in accordance with the minister's decision, in reality the program only runs for around 50% - 55% of the total.

Emergency response management at RSU Haji Medan has also been carried out in accordance with the Republic of Indonesia Minister of Health Decree No. 1087 of 2010 concerning Occupational Health and Safety Standards in Hospitals, although it is not yet fully implemented. According to the guidelines established by the automatic fire alarm system in compliance with... the hydrant is installed, is operational, and is regularly inspected Permanker No. 2 in 1982 and quite a number. Here the K3RS team also works closely with PPI to optimize everything. The management of solid and B3 waste also refers to the Decree of the Minister of Health of the Republic of Indonesia Number 1204/MENKES/SK/X/2004 concerning Hospital Environmental Health requirements. Although solid waste burning is still in collaboration with third parties because the Medan Haji Hospital does not yet have its own incinerator

The collection, management of data documentation and reporting of K3 activities at RSU Haji Medan is not yet in accordance with the requirements. It is hoped that the sanitation and B3 waste team will be more solid so that they can jointly reduce the number of work accidents in the sanitation and B3 waste section, and for K3RS to update the latest guidelines in accordance with
the Regulation of the Minister of Health of the Republic of Indonesia Number 66 of 2016. Recording and reporting of K3 activities at RSU Haji Medan is not carried out repeatedly every time because each room does not routinely report the number of work accident incidents and each room unit tends to hide these incidents.

The K3RS team is not satisfied with the results of the programs that have been implemented so far, because there are many programs that are not running, for example recording and reporting work accident numbers in each unit, so that the K3RS team finds it difficult to make evaluations because each hospital work unit does not routinely and periodically provide reporting to the K3RS team.

The annual program review at RSU Haji Medan has not yet been carried out in accordance with the Republic of Indonesia Minister of Health Decree No. 1087 of 2010, where the hospital management is in the preparation stage for the implementation of obtaining feedback and reporting from each work unit. This could be caused by the lack of commitment to work on this matter.

It is hoped that the results of this research can provide input and consideration for the hospital so that it can update or replace the guidelines for implementing K3RS activities in accordance with the Regulation of the Minister of Health of the Republic of Indonesia Number 66 of 2016 concerning Hospital Occupational Safety and Health and carry out all activities that have been programmed properly. Increasing guidance and supervision so that health workers are willing to carry out programs in accordance with the SOPs that have been determined, providing guidance for each work unit to record and report work accident numbers regularly so that the K3RS team can make a good final evaluation, increasing the number of human resources available quality in the field of K3RS so that the program can run well and correctly, providing strict and written sanctions if they violate existing regulations so that both visitors and health workers can change well. Hiperkes Clinic is given the opportunity to manage its own funds and optimize employee health services specifically for MCU Berkala and Special.

It is hoped that the K3RS team at RSU Haji Medan can always provide the best performance for Haji Hospital Medan, because K3RS is the spearhead of the hospital, where if K3RS runs well then, the services at the hospital will run well. It is hoped that the results of this research can provide a reference for developing further research. Qualitative research is research that requires broad insight to be able to obtain in-depth studies. For this reason, it is recommended that other researchers increase the number of references related to the object of analysis in order to achieve research depth. Future researchers can look for references to more previous research. Future researchers are also expected to be able to conduct research in different places, both socially, culturally, geographically and others.

REFERENCES

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