Nurse Performance in Infection Prevention and Control in Hospital Pamekasan

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Abstract: Infection Prevention and Control is very important to be implemented in hospital as indicator of quality service. It also protects patients, labours, visitors and family from infection transfer. Infection Prevention and Control in hospital has been poor implemented caused by human resources who did not obey hand hygiene standard and manual procedure, less universal precaution, and other important things about standard of Infection Prevention and Control. The objective of this study was to describe the nurses performance in Infection Prevention and Control in hospital. A descriptive with cross sectional was employed in this study. Sample comprised of 102 respondents with purposive sampling in Mohammad Noer Hospital Pamekasan and As Syifa Husada Hospital Pamekasan. Result showed about 42.15% of respondents were less in Infection Prevention and Control performance. The findings recommend the hospital management to held a basic Infection Prevention and Control for nurses.

1 BACKGROUND

Hospitals as health care facilities should have quality indicators; one of it is the percentage of nosocomial incidence (Depkes R.I, 2005). According to Ari (2003) Infection Prevention and Control Program (IPC) is important to be implemented in hospitals as a measure of service quality as well as to protect patients, officers, visitors and families from the risk of infection contracting.

According to the infection report of Haji General Hospital Surabaya from January to March 2015, a nosocomial infection rate for IDO (Infection Area of Operation) was 0.12%, UTI (Unitary Tract Infection) 0.50%, Phlebitis 3.95%, VAP (Ventilator Associated Pneumonia) 1.75 (Komite PPI RSU Haji 2015). While the result of nosocomial infection surveillance of Mohammad Noer General Hospital Pamekasan in 2016 found the level of nurse’s hand washing compliance was 62.9% and percentage of phlebitis incident was 7.5%, with standard incidence of nosocomial infection in hospital is ≤ 1.5% (Komite PPI RSMN, 2017). The implementation of prevention and control program of nosocomial infection in Mohhamad Noer General Hospital Pamekasan from year to year has not shown any change toward improvement. According to the IPC performance report (2016), the problem lies on human resources who do not comply with standard and hand washing procedure, the use of personal protective equipment (PPE), and also some things that are included in standard precautions.

Universal Precaution (UP) as a treatment to minimize the exposure of blood and body fluids from all patients, the primary purpose is to protect the nurses from disease transmission in healthcare facilities by emphasizing the importance of treating all patients as potentially infectious, so there should be adequate precautions to be taken. The basic principles of preventive action are proper hand washing, the application of aseptic antiseptics and the use of personal protective equipment in an attempt to prevent the transmission of microorganisms through blood and body fluids (Depkes, 2008).

The result of Mustariningrum research (2015) showed the result of the training is strong enough and has a significant effect, the work motivation of IPCLN (Infection Prevention and Control Link Nurse) has no significant on its performance, supervision is strongly related and influence significantly on IPCLN performance. At the same time, training, work motivation and supervision are strongly related and have a significant effect on
The role of hospital management is very important in supporting infection control programs. Hospital is responsible for the infection control committee in identifying the resources of the infection prevention program, providing staff education and training on infection control programs such as sterilization techniques, requiring staff (nurses, laboratories, janitors) to keep the hospital clean, conduct periodic evaluations of effectiveness and infection control measures. Facilitate and support infection control measure, and also participate in tracking of infection (WHO, 2005).

Data collection began with researcher submitting a research permit letter to the Director of Mohammad Noer and As Syifa General Hospital Pamekasan. The data collection stage can be carried out after research permit letter from Mohammad Noer and As Syifa general hospital Pamekasan has been released. The next step is to meet the head of the nursing department to explain about the informed consent and procedure of research to be performed, and then the researcher meets the chief of the room to explain the informed consent. Researcher conducted observations assisted by the research assistant to each nurse in accordance with the number of sample that has been determined.

The researcher conducted a univariate analysis after the data were collected. The aim of this analysis is to see the frequency distribution and proportion of data. Univariate analysis is used by researcher to see the frequency distribution of nurse performance implementation in infection prevention and control in hospital.

### RESULTS

Univariate analyzed data is frequency distribution of nurse performance in infection prevention and control at five moments hand hygiene action. The use of personal protective equipment, maintain sterile principles and manage medical waste. The results of this study are as follows:

Table 1 show that as many as 43 people (42.15%) of respondents were lacking in performance in IPC (infection prevention and control) at general hospital in Pamekasan.

<table>
<thead>
<tr>
<th>Nurse performance in IPC</th>
<th>Total</th>
<th>Percentage (%)</th>
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<tbody>
<tr>
<td>Good</td>
<td>59</td>
<td>42.15</td>
</tr>
<tr>
<td>Less</td>
<td>43</td>
<td>57.85</td>
</tr>
<tr>
<td>Total</td>
<td>102</td>
<td>100</td>
</tr>
</tbody>
</table>
4 DISCUSSION

As much as 42.15% of nurses at Mohammad Noer and As Syifa general hospital Pamekasan were lacking in IPC performance. The research results of Farhoudi (2016) the results obtained in implementation of the WHO hand hygiene program significantly improved hand hygiene compliance among nurses. There was a substantial increase in compliance observed with hand hygiene practices after completing the implementation of the hand hygiene improvement program (from 29.6% to 72.7%).

The results of Kartika’s study (2015) showed that most of surveillance components have not been properly implemented in accordance with the Surveillance Technical Directives of the Ministry of Health in 2010. This is due to the lack of management support for IPC support and facilities programs, the lack of socialization program to all surveillance implementers, and the absence of supervisory function on the implementation of nosocomial infection surveillance program.

This study shows that almost half the results of nurses are not fully optimal in IPC performance which includes five moments of hand hygiene, use of personal protective equipment, maintaining sterile principles, and managing medical waste. The nurses’ performance in IPC at Mohammad Noer and As Syifa general hospital in Pamekasan in 2018 is generally still lacking. This is because in the implementation of infection prevention there is a lack of nurse supervision function. Another factor is motivation and skill, where both are factors that can reflect the attitude and character of a person in carrying out the main duties and functions as a nurse, other factors that influence are supporting facilities and hand hygiene where an effort is needed to increase the availability of facilities that ease the nurse in implementing infection prevention and control. Based on that, infection prevention and control (IPC) is an important health care issue in order not to cause some problems, such as increasing morbidity and mortality rate, adding day care, increasing the cost of care and dissatisfaction both patient and family.

5 CONCLUSIONS

This study concluded that in general 43 respondents (42.15%) were lacking in IPC performance. Suggestions for hospitals are to conduct basic IPC training to improve knowledge, skill and attitude to support the success of IPC program in hospital.

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REFERENCES