

Efektivitas Strategi Intervensi Terhadap Kepatuhan Hand Hygiene Perawat di Rumah Sakit di Asia Tenggara = The Effectiveness of Intervention Strategies towards Hand Hygiene Compliance of Nurses in Hospitals in Southeast Asia

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Abstrak

ABSTRAK

Hand hygiene merupakan salah satu bentuk pencegahan dan pengendalian infeksi yang dianggap efektif untuk melindungi pasien dan tenaga kesehatan dari penularan infeksi terkait pelayanan kesehatan (HAIs). Tenaga perawat sebagai tenaga kesehatan yang sering kontak langsung dengan pasien tentu memiliki peluang hand hygiene lebih banyak dibandingkan tenaga kesehatan lainnya. Namun, tingkat kepatuhan hand hygiene tenaga perawat di rumah sakit masih cenderung rendah. Banyak studi telah membahas strategi intervensi untuk meningkatkan kepatuhan hand hygiene pada perawat, tetapi studi dan bukti yang dilakukan di Asia Tenggara masih terbatas. Penelitian ini bertujuan untuk merangkum bukti dan informasi efektivitas strategi intervensi terhadap kepatuhan hand hygiene perawat di rumah sakit berdasarkan studi dari negara-negara di Asia Tenggara. Penelitian dilakukan dengan metode tinjauan literatur yang menggunakan data sekunder dari basis data PubMed, Cochrane, CINAHL, dan Google Scholar. Studi yang didapatkan untuk penelitian ini sejumlah 4 studi dari tiga negara berbeda, yakni Indonesia (n=2), Thailand (n=1), dan Vietnam (n=1). Hasil penelitian menunjukkan tingkat kepatuhan hand hygiene perawat di rumah sakit pada fase awal atau pra-intervensi masih rendah (< 50%), dengan faktor utama yang dilaporkan mempengaruhi ketidakpatuhan hand hygiene pada perawat yaitu kekeringan dan iritasi tangan setelah melakukan hand hygiene. Program edukasi menjadi bagian dari seluruh strategi intervensi pada setiap studi, menandakan program dapat diterapkan pada negara-negara di Asia Tenggara. Namun, strategi intervensi multifaceted improvement program menunjukkan dampak yang paling signifikan pada peningkatan kepatuhan hand hygiene perawat di rumah sakit (27% pra-intervensi dan 77% pasca-intervensi). Strategi intervensi multimodal tercatat paling efektif meningkatkan kepatuhan hand hygiene dan mampu memberikan dampak yang berkelanjutan, jika ditunjang dengan pemantauan dan intervensi berkala.

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ABSTRACT

Hand hygiene is a form of infection prevention and control that is considered effective in protecting patients and health care workers from transmission of health care-associated infections (HAIs). Nurses as health care workers who are often in direct contact with patients certainly have more hand hygiene opportunities than others. However, nurses hand hygiene compliance rates in hospitals tends to be low. Many studies have discussed intervention strategies to improve hand hygiene compliance among nurses, but studies and evidence carried out in Southeast Asian remain limited. This study aims to summarize the evidence and information on the effectiveness of interventions strategies towards hand hygiene compliance of nurses in hospitals based on studies from countries in Southeast Asia. The research was conducted using literature review method that used secondary data from the PubMed, Cochrane, CINAHL, and Google Scholar databases. The studies obtained for this study were 4 studies from three different countries, including

Indonesia (n=2), Thailand (n=1) and Vietnam (n=1). The results showed that the nurses hand hygiene compliance rates in hospitals at baseline or pre-intervention phase was low (< 50%), with the main factors reported to affect nurses non-compliance with hand hygiene were dryness and hand irritation after performing hand hygiene. The education program is part of the entire intervention strategy in each study, indicating the program can be applied to countries in Southeast Asia. However, the multifaceted improvement program showed the most significant impact on increasing hand hygiene compliance among nurses in hospital (27% pre-intervention and 77% post-intervention). The multimodal intervention strategy noted to be the most effective in increasing hand hygiene compliance and was able to have sustainable impact, if supported by periodic monitoring and intervention.<i/>