

Analisis Kepatuhan Implementasi Regulasi Hand Hygiene Di Rs Paru Dr. M. Goenawan Partowidigdo Cisarua Bogor Berdasarkan WHO Multimodal Hand Hygiene Improvement Strategy = Compliance Analysis Of Hand Hygiene Regulation Implementation At Dr. M. Goenawan Partowidigdo Pulmonary Hospital Cisarua Bogor Based On WHO Multimodal Hand Hygiene Improvement Strategy

Mila Fitriana, author

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Abstrak

Program Pencegahan dan Pengendalian Infeksi RS merupakan upaya menurunkan risiko HAIs, termasuk kepatuhan hand hygiene. WHO mengeluarkan Multimodal Hand Hygiene Improvement Strategy sebagai salah satu strategi untuk mengatasi rendahnya kepatuhan hand hygiene Rumah Sakit Paru Dr. M. Goenawan Partowidigdo (RSPG) memiliki regulasi hand hygiene yang mengacu pada kebijakan yang berlaku, namun kepatuhan hand hygiene tidak mencapai target selama tiga tahun. Penelitian ini bertujuan menganalisis kepatuhan implementasi regulasi hand hygiene di RSPG berdasarkan WHO Multimodal Hand Hygiene Improvement Strategy, menggunakan pendekatan kualitatif deskriptif analitik dengan metode studi kasus. Analisis kepatuhan implementasi regulasi hand hygiene dilakukan dengan mengembangkan teori George Edward III yang dikolaborasikan dengan teori kepatuhan Weaver dan WHO Multimodal Hand Hygiene Improvement Strategy. Penilaian WHO Multimodal Hand Hygiene Improvement Strategy dilakukan dengan skoring Hand Hygiene Self-Assessment Framework (HHSAF). Hasil penelitian menunjukkan persentase skor HHSAF terendah pada variabel struktur birokrasi, namun variabel yang paling berperan adalah variabel sumber daya, yaitu sumber daya manusia, terkait isu keaktifan dan perilaku. Isu keaktifan dan perilaku diperoleh dari wawancara mendalam pengembangan dari pertanyaan terstruktur pada HHSAF. Hand hygiene level RSPG berada pada level intermediate. Peneliti merekomendasikan enforcement perilaku dengan appreciative inquiry disamping reward and punishment sebagai upaya meningkatkan kepatuhan implementasi regulasi hand hygiene di RSPG.

.....The Hospital Infection Prevention and Control Program is an effort to reduce the risk of HAIs, including hand hygiene compliance. WHO issued the Multimodal Hand Hygiene Improvement Strategy as one of the strategies to overcome low hand hygiene compliance. Dr. M. Goenawan Partowidigdo Pulmonary Hospital (RSPG) has hand hygiene regulations that refer to applicable policies, but hand hygiene compliance has not reached the target for three years. This study aims to analyze compliance with the implementation of hand hygiene regulations in RSPG based on the WHO Multimodal Hand Hygiene Improvement Strategy, using an analytical descriptive qualitative approach with a case study method. The researcher analyzed the compliance of hand hygiene regulation implementation by developing George Edward III's theory collaborated with WHO Multimodal Hand Hygiene Improvement Strategy. The WHO Multimodal Hand Hygiene Improvement Strategy assessment was conducted by scoring the Hand Hygiene Self-Assessment Framework (HHSAF). The results showed the lowest percentage of HHSAF scores on the bureaucratic structure variable, but the most instrumental variable was the resource variable, namely human resources, related to activeness and behavioral issues. The issues of activeness and behavior were obtained from in-depth interviews developed from structured questions on the HHSAF. Hand hygiene level of RSPG is at

intermediate level. Researchers recommend behavioral enforcement with appreciative inquiry in addition to reward and punishment as an effort to improve compliance with the implementation of hand hygiene regulations in RSPG.