



Identification of Work Accidents at Nurse in General Hospital Langsa Area

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Abstract

The hospital as a service industry is an industry that has a variety of complex labor problems with various risks of occupational diseases and even work-related accidents according to the type of work, so hospitals are obliged to implement Hospital Occupational Health and Safety (K3RS) efforts. The purpose of this study was to identify the causes of work accidents at Langsa Hospital. This type of research is descriptive analytic with a qualitative approach. The informants in this study consisted of 5 people, namely 1 Hospital Director or deputy, 1 K3RS team leader, 1 head nurse and 2 nurses. The results showed that the K3 staff at the Langsa City Hospital had not all received special K3 training, the implementation of health promotion to nurses and K3 workers was not carried out comprehensively and continuously, nurses carried out their duties in accordance with the applicable Standard Operating Procedures (SPO), but not all nurses had discipline in carrying out their duties, nurses have attended training on the use of PPE, but not all nurses ensure that PPE functions properly and correctly. It is recommended that Langsa Hospital provide a special budget for the implementation of K3 in the hospital and facilitate all K3 personnel to have good competence and be firm, such as by giving sanctions to all nurses who do not carry out their duties and do not have a good work culture.

Introduction

Healthy conditions are the will of all parties not only by individuals but also by families, groups and even by society. There are many things that need to be done to achieve this healthy state. One of them that is considered to have an important role is to provide health services. At this time the development of technology and science, as well as people's lives, it appears that there are many forms and types of health services that can be provided and are located in every country (Toding, 2016).

Health facilities, including hospitals, health centers, health and community centers, clinics, clinical laboratories, and health laboratories, are workplaces that are full of potential health and safety hazards for workers. The risk of health problems and accidents becomes even greater considering that health facilities are labor-intensive workplaces. Various studies have shown that the prevalence of health problems that occur in health facilities is higher than other workplaces (Said, 2017)).

The hospital is a health service to provide services in the form of services, where there are outpatient service activities, inpatient services and emergency services. Potential hazards in hospitals can threaten life and life for workers in hospitals, patients and visitors in the hospital environment (Depkes, 2007). Based on the Law of the Republic of Indonesia Number 36 of

2009 concerning Health, article 165 states that the management of the workplace is obliged to carry out all forms of health efforts through prevention efforts by increasing treatment and recovery for workers.

Occupational health and safety is very important to protect workers, patients and visitors from occupational diseases and accidents (Fadhila et al., 2017). Work accidents can occur in the process of interaction when there is contact between humans and tools, materials, and the environment in which they are located. Accidents can also occur due to poor or dangerous conditions of tools or materials (Fitriana & Wahyuningsih, 2017). Work accidents not only cause loss of life and material losses for workers and employers, but can disrupt the overall production process and damage the environment, which in turn will have an impact on the wider community (Hudana, 2021).

Work accidents are generally caused by 2 main things, namely unsafe behavior (unsafe action) and unsafe conditions (unsafe conditions). Heinrich in Awaluddin (2019) estimates that 85% of work accidents occur are the contribution of unsafe work behavior, 80-85% of accidents are caused by negligence or human error (Riestiany et al., 2010).

The hospital as a service industry is an industry that has a variety of complex labor problems with various risks of occupational diseases and even work-related accidents according to the type of work, so hospitals are obliged to implement Hospital Occupational Health and Safety (K3RS) efforts. Hospitals have an obligation to make their workers healthy, one of which is through occupational health efforts in addition to occupational safety. Hospitals must ensure the health and safety of both patients, service providers or workers and the surrounding community from various potential hazards in the hospital. Therefore, hospitals are required to carry out occupational health and safety (K3) efforts that are carried out in an integrated and comprehensive manner so that the risk of occupational diseases (PAK) and work-related accidents (KAK) in hospitals can be avoided (Toding, 2016).

Hospital Occupational Health and Safety, hereinafter abbreviated as K3RS, are all activities to ensure and protect the safety and health of hospital human resources, patients, patient companions, visitors and the hospital environment through efforts to prevent work accidents and occupational diseases. The objective and target of the occupational safety and health management system is to create an occupational safety and health system in the workplace by involving elements of management, labor, conditions, and an integrated work environment in order to prevent and reduce accidents and occupational diseases and create a safe workplace, efficient, and productive (Faizah et al., 2013).

The Occupational Health and Safety Program which is written according to the Decree of the Minister of Health of the Republic of Indonesia Number 66 of 2016 is as follows: development of hospital OSH policies, culture of hospital OHS behavior, development of guidelines, technical instructions and standard operating procedures (SOP) for hospital OHS, monitoring and evaluation workplace environmental health, occupational health services, development of maintenance programs for solid, liquid and gaseous waste management, service management, hazardous toxic materials and dangerous goods, development of emergency response management, collection, processing, data documentation and reporting of OHS activities, and annual program reviews.

The OHS Management System in Indonesia is urgently needed and is starting to be implemented, although not as fast as developments in other countries. Indonesia's participation in the ASEAN Economic Community (AEC) will trigger and spur improvements and improvements, not only in forms of business or services but directly to the workforce to increase Human Resources (HR), especially in the application of Occupational Safety, Health (K3) (Said, 2017).

The implementation of Occupational Safety and Health (K3) is one form of effort to create a safe, healthy, free workplace from environmental pollution, so that it can reduce and or be free from work accidents and occupational diseases and can have an impact on increasing work efficiency and productivity. Work accidents not only cause loss of life and material losses for workers and employers, but can also disrupt the overall production process, damage the environment and can have an impact on the wider community (Salmawati, 2015).

SMK3 is something that cannot be separated from a system of protection for workers and for service work that can prevent and avoid the risk of moral and material losses, and loss of working hours, including the safety of human resources and the workplace environment. in improving the performance of the workforce. Hospitals as a service industry are included in this category. Therefore, hospitals are obliged to implement K3 (Fitriana & Wahyuningsih, 2017).

Through the implementation of SMK3, it is expected to increase the effectiveness of planned, measurable, structured and integrated occupational safety and health protection, which is expected to prevent and reduce work accidents and occupational diseases by involving elements of management and workers, as well as companies creating a safe workplace, comfort and efficiency to encourage productivity.

In an effort to improve the quality of hospital services, accreditation must be carried out periodically at least once every 3 (three) years. K3 is included as one of the service standards assessed in hospital accreditation, namely in Safety Facilitation Management (MFK), in addition to other service standards. In addition, in article 7 paragraph 1 of Law no. 44 of 2009 concerning Hospitals, that "Hospitals must meet the requirements of location, building, infrastructure, human resources, pharmacy, and equipment", in which the K3 element is a requirement in it (Indonesia, 2009).

Based on data from the International Labor Organization (ILO) in 2018, 2.78 million workers worldwide die every year due to accidents at work and occupational diseases. About 86.3% of the causes of death for workers are occupational diseases. While more than 13.7% occurred due to fatal work accidents.

The Langsa Regional General Hospital (RSUD) is the largest public hospital in Langsa City. Langsa Hospital is a Type B hospital that has a total of 1180 employees (Langsa Hospital Personnel, 2021). Langsa Hospital is one of the regional hospitals that has a large number of workers, both permanent and non-permanent medical personnel in charge of serving patients at Langsa Hospital.

A preliminary study conducted by researchers at Langsa Hospital as one of the largest regional hospitals has certainly implemented SMK3 to ensure the safety of its workers. SMK3 at Langsa Hospital has not been implemented properly, this can be seen from the data regarding existing work-related accident reports, in 2019 the total accidents that occurred were 4 (four) cases of health workers who were punctured by needles caused by the work culture of the officers. who are less thorough and in a hurry, while in 2020 the number of accidents increased, namely there were 6 (six) cases caused by 2 (two) cases caused by officers being hit by broken ampoules because officers were negligent in carrying out their duties and 4 (four) needles were pricked. cases because of the officer's rush work culture. Furthermore, until October 2021, information was obtained that there had been an increase in the number of work accidents, namely as many as 8 (eight) cases caused by needle sticks as many as 4 (four) cases as a result of the work culture of officers who were less thorough, exposed to 2 (two) ampoule fragments.) cases due to negligence of officers, splashed with blood due to the use of personal protective equipment (PPE), namely gloves that were torn in 1 (one) case and officers who slipped due to slippery floors in 1 (one) case. The work accident cases were found in the inpatient unit and the

emergency department. Based on the data on the work accident report, it can be seen that the implementation of K3 in Langsa Hospital has not been implemented properly.

Methods

This type of research uses descriptive qualitative research. Descriptive qualitative research in the form of research with a case study method or approach. This research focuses intensively on one particular object which is studied as a case. Case study data can be obtained from all parties concerned, in other words in this study collected from various sources. Descriptive qualitative research is used to describe, explain, or summarize various conditions, situations, phenomena, or various research variables according to events as they are which can be photographed, interviewed, observed, and which can be expressed through documentary materials.

Descriptive method is a method in examining the status of a group of people, an object, a set of conditions, a system of thought or a class of events in the present. The purpose of this descriptive research is to make a systematic, factual and accurate description, picture, or painting of the facts, characteristics and relationships between the investigated phenomena (Willis et al., 2016).

Determination of the subject in this study is based on a certain consideration made by the researcher himself, based on the characteristics or characteristics of the population that have been known previously (Kothari, 2004). Subjects were selected based on the case studied, namely Identification of Work Accidents in Nurses at Langsa General Hospital (RSUD).

Determination of data sources on interviewees is done purposively, that is, selected with certain considerations and goals (Sugiyono, 2014). The purpose of this purposive retrieval technique is that researchers take data sources from several people who are considered to have information that is relevant to the research focus.

The researcher concludes that the informant is a person who is used to provide information about the data desired by the researcher. The selection of samples as informants in this study was based on the principle of appropriateness. The suitability of the sample is selected based on the knowledge possessed related to the research topic.

Data analysis in this study used two qualitative approaches. According to Miles and Hubernas in Sugiyono, qualitative data were obtained from data reduction, display data and conclusion drawing/verification. Data reduction is the process of selecting, focusing on simplifying, abstracting and transforming rough data that emerges from written notes in the field. This process took place continuously during this research. After analyzing the data, then proceed with the validity of the qualitative data by means of triangulation. Triangulation in this study is to compare information from one informant to another so that the information obtained is correct. Then do the validity of the data.

Results and Discussion

Overview of Research Informants

The informants in this study were 5 people, 1 hospital director / deputy, namely informant 1, 1 K3RS team leader, namely informant 2, 1 head nurse, namely informant 3 and 2 nurses, namely informants 4 and 5. In the table below are described the characteristics of research informants, as follows

Table 1. Characteristics of Research Informants

No.	Informant	Gender	Age	Education	Work
1.	Informant 1	Man	54 Years	S2 Public Health	Deputy Director
2.	Informant 2	Man	35 Years	S2 Public Health	K3RS Team Leader

3.	Informant 3	Woman	48 Years	S1 Nursing	Head Nurse
4.	Informant 4	Woman	38 Years	DIII Nursing	Nurse
5.	Informant 5	Woman	47 Years	DIII Nursing	Nurse

Training on Work Accidents at Langsa Hospital

The question of whether the K3 personnel at the Langsa City Hospital have received special OSH training can be seen in the results of interviews with respondents who said:

Informant 1:

"...yes, there is ma'am, but not all K3 workers have received training, only a few people".

From the interview with the deputy director informant above, it was found that the answer to the K3RS team leader was similar. The results of the interview with the K3RS team leader can be seen in the results of the interview with the informant who said:

Informant 2:

"... If there is already K3 training, ma'am, but yes only partially, about 3 people who have training in the form of hyperkes".

The results of the interview obtained information that not all K3 personnel at Langsa City Hospital had received special K3 training, only a few people had attended the K3 special training.

Interviews with informants regarding the type of K3 training that has been given to K3 workers at Langsa City Hospital. The following is an excerpt of the results of interviews with informants obtained as follows:

Informant 1:

"...if there is already training for K3 personnel, hyperkes training is given, then there is also fire poison and fire simulation training, ma'am".

From the interview with the deputy director informant above, it was found that the answer to the K3RS team leader was similar. The results of the interview with the K3RS team leader can be seen in the results of the interview with the informant who said:

Informant 2:

"...Like I said earlier, ma'am, the training includes hyperkes, there are about 3 people participating, simulation of fire poison and fire training".

The results of the interview obtained information that the training that had been given to K3 personnel at the Langsa City Hospital had been in the form of hyperkes training, simulation of fire poison and fire.

Health Promotion Against Occupational Accidents at Langsa Hospital

In-depth interviews with informants regarding health promotion have been given to all nurses in Langsa City Hospital obtained as follows:

Informant 1:

"...the nurses were given, ma'am, in the form of giving posters, leaflets, counseling, ma'am". Also given to patients, such as those in the waiting room, they were also given counseling, ma'am".

From the interview with the deputy director informant above, there are also similarities with the answers of the K3RS team leader, the results of the interview with the K3RS team leader can be seen in the results of the interview with the informant who said:

Informant 2:

"...if you have health promotion, ma'am, it has been given, they even participated in conducting counseling". The K3 officers participated in conducting counseling. The counseling is in the form of posters, there are also leaflets, direct counseling is also available.

From the results of the interview, it was found that health promotion had been given to all nurses in Langsa City Hospital. Providing health promotion through media such as posters, leaflets and also counseling.

Interviews with informants regarding health promotion have been given to K3 workers at Langsa City Hospital, which can be seen in the results of interviews with respondents who said:

Informant 1:

"...yes, of course there is also ma'am, the same applies to health promotion in the form of posters, leaflets, and ma'am..."

Informant 2:

"...as I said earlier, ma'am, that the K3 officers have been given health promotions, they also participate in conducting counseling in the form of posters, there are also leaflets, direct counseling.

The results of the interview found that health promotion had been given to K3 workers at Langsa City Hospital. Providing health promotion through media such as posters, leaflets and also counseling.

In-depth interviews with informants regarding the budget for the implementation of K3 at the Langsa City Hospital are adequately available, obtained as follows:

Informant 1:

"...When we talk about the minimal budget, ma'am, the budget is only used for important things, because right now we are also being hit by the corona pandemic, so there are too many funds for that. So yes from me the answer is minimal."

Informant 2:

"...As for the budget for K3, maybe we have a few problems here, the budget we get is very minimal, maybe because we've been busy with the covid outbreak, so it's been directed to covid, maybe for K3 it's very minimal, I think "

The results of the interview found that the budget for the implementation of K3 at the Langsa City Hospital was inadequate, the available budget was very minimal due to other needs such as in the face of the covid-19 pandemic.

Culture Against Work Accidents at Langsa Hospital

Questions regarding all nurses carrying out their duties in accordance with the applicable Standard Operating Procedures (SPO) can be seen in the results of interviews with respondents who said:

Informant 3:

"...Alhamdulillah, all the nurses here carry out activities that are running well and in accordance with the established Standard Operating Procedures (SPO).

The results of the interview showed that all nurses at the Kola Langsa Hospital carried out their duties in accordance with the applicable Standard Operating Procedures (SPO).

Interviews with informants regarding all nurses having a disciplined attitude in carrying out their duties can be seen in the results of interviews with respondents who said:

Informant 3:

"... if there is discipline here, there are nurses who are disciplined in carrying out their duties and some are undisciplined too, for example their indiscipline in carrying out these actions, they also work sometimes while holding cellphones, playing cellphones, sometimes while talking too, that's indiscipline they are in carrying out their duties, if they are in a hurry, sometimes there are yes..., yes, there are nurses who are disciplined, there are also those who are not there, sometimes they have been reminded but sometimes they are repeated."

The results of the interview showed that not all nurses have a disciplined attitude in carrying out their duties, there are still nurses who play cellphones and talk in a hurry when carrying out their duties.

Personal Protective Equipment (PPE) Against Work Accidents at Langsa Hospital

Questions about the PPE used according to body size can be seen in the results of interviews with respondents who said:

Informant 4:

"...yes ma'am it's appropriate, the PPE we use is the right size, there is no narrowness or too small".

Informant 5:

"...according to ma'am, so far I have used PPE, the size is right, there is no narrowness, ma'am".

From the results of these interviews, it was found that the PPE used by nurses at Langsa Hospital was in accordance with their body size, there was no smallness/narrowness.

Interviews with informants regarding before use, whether it has been confirmed that PPE is functioning properly and correctly can be seen in the results of interviews with respondents who said:

Informant 4:

"...Yes, ma'am, there are inspections, especially on the handscoond, masks, because I'm afraid that the handcoon is already torn."

Informant 5:

"...not always checked, ma'am, sometimes they are checked, sometimes they are not checked, depending on the time, if you are in a hurry sometimes they are not checked".

The results of the interview showed that before use, not all nurses ensure that PPE functions properly and correctly, depending on the time and condition of the nurse when carrying out their duties.

Interviews with informants regarding if using 2 (two) or more PPE simultaneously, have you made sure that it does not reduce the effectiveness of each PPE can be seen in the results of interviews with respondents who said:

Informant 4:

"...yes, there is a reduction in its effectiveness, but we use it appropriately, it is comfortable to use, keeping it from being contaminated, especially during this pandemic period".

Informant 5:

"...no ma'am, but sometimes there are also, like the use of a faceshield, sometimes it's a bit foggy".

The results of the interview showed that if you use 2 (two) or more PPE at the same time, it is not certain that it does not reduce the effectiveness of each PPE, sometimes when using a foggy faceshield.

Interviews with informants regarding immediately reporting if they feel symptoms of pain or discomfort using PPE can be seen in the results of interviews with respondents who said:

Informant 4:

"... yes, ma'am, there is a report if you feel sick or uncomfortable when using PPE, we will report it to the head of the room, after that the head of the room will report to the PI (Infection Prevention) section".

Informant 5:

"...There have been reports, ma'am, that while working, wearing PPE is uncomfortable."

The results of the interview showed that nurses immediately reported if they felt symptoms of pain or discomfort in using PPE. reporting first to the head of the room, then the head of the room reports to the PI (Infection Prevention).

Questions about nurses having reported to the responsible party if special training in the use of PPE is needed, the results are as follows:

Informant 4:

"...if there is no report, ma'am, we have attended training on the use of PPE, it was trained by the team".

Informant 5:

"...We have participated in the training, ma'am, some have been trained, but have never reported it, because we have had training".

The results of the interview showed that nurses had never reported to the responsible party if special training on the use of PPE was needed, because they had attended training on the use of PPE.

Training on Work Accidents at Langsa Hospital

From the results of in-depth interviews with several informants regarding training on work accidents at Langsa Hospital, the informant stated that not all K3 personnel at Langsa City Hospital had received special OSH training, only a few people had attended the K3 special training. The informant also said that the training that had been given to K3 personnel at the Langsa City Hospital was in the form of hyperkes training, simulation of fire poison and fire.

Training is a part of education that involves the learning process to acquire and improve skills outside the education system that applies in a relatively short time, and with a method that prioritizes practice over theory, in this case what is meant by occupational safety and health training. The occurrence of work accidents is usually the result of negligence by the workforce or from the hospital. The training is intended so that the maintenance of work tools can be improved. One of the goals to be achieved is to reduce the incidence of work accidents, damage, and increase the maintenance of work tools (Zakaria et al., 2012).

Occupational safety and health training as training organized and directed to equip, improve, and develop the ability, productivity, and welfare of the workforce. The need for occupational

safety and health training from one hospital to another differs according to the nature of the hazard, the scale of activity and the conditions of the workers.

The training is intended to improve Knowledge, Skill, and Attitude (KSA) so that it must be designed according to or specifically with the needs of each worker. In accordance with the OSH philosophy of the IASP (International Association of Safety Professionals), workers must be trained in OSH. OSH understanding or culture does not come by itself, but must be formed through training and training construction. With the OHS training, health workers can understand and act on the importance of occupational safety and health, prevent work accidents and develop a hospital safety and health control program (Lugah et al., 2010).

Improving occupational health and safety for health workers requires training on occupational health and safety. For this reason, the hospital should provide training facilities for each of its workers. This is done to improve skills and also prevent an increase in the rate of work accidents due to the lack of work experience of the workforce. The main objective of occupational health and safety is to guarantee safe and healthy working conditions to every worker and to protect human resources (Alli, 2008).

Based on the results of the study, the researcher assumes that not all workers at Langsa Hospital have received special OSH training, only a few people have received the training. The training provided is also not fully adequate, this is related to the lack of budget in meeting the needs related to K3. There are no special funds that have been prioritized to develop and perfectly implement the OHS system at Langsa Hospital, this can certainly trigger an increase in the incidence of work accidents. The type of training that has been given to K3 workers at Langsa City Hospital is in the form of hyperkes training, simulation of fire and fire poisons.

Health Promotion against Occupational Accidents at Langsa Hospital

From the results of in-depth interviews with several informants regarding Health Promotion on occupational accidents at Langsa Hospital, the informant stated that health promotion had been given to all nurses in Langsa City Hospital. Providing health promotion through media such as posters, leaflets and also counseling. In addition, health promotion has also been given to K3 workers at Langsa City Hospital. Providing health promotion through the same media as posters, leaflets and also counseling.

The informant also provided information that the budget for the implementation of K3 at the Langsa City Hospital was inadequate, the available budget was very minimal due to other needs such as in the face of the COVID-19 pandemic.

The world health organization (World Health Organization) explains, health promotion in the workplace is a variety of policies and activities in the workplace designed to help workers (employees) and employers (employers) at all levels to improve and improve their health by involving the participation of workers, management and stakeholders.

Health promotion in the workplace as a health promotion effort that is carried out in the workplace, in addition to empowering people at work to recognize problems and their level of health, and be able to overcome, maintain, improve and protect their own health as well as maintain and improve a healthy workplace.

Promotion in the workplace should be carried out in a comprehensive manner, with existing participation and authority. Health promotion in the workplace should be developed by involving cooperation with various related sectors and involving several existing community organizations so that it is more stable and sustainable (Lee & Nakamura, 2021).

Occupational health and safety is one way to protect employees from the dangers of work accidents and occupational diseases while working. Employees' health can be disrupted due to work-related illnesses, as well as work accidents (Campo & Darragh, 2012). Work safety is

closely related to increasing production and productivity, with a high level of work safety, the potential for accidents that cause illness or disability and death can be reduced or minimized.

Safety promotions or K3 promotions are an effort made to encourage and strengthen workers' awareness and behavior about K3 so that they can protect workers, property, and the environment. The OSH program becomes effective if there is a change in the attitudes and behavior of workers (Loughlin & Barling, 2001).

Based on the results of the study, the researcher assumed that health promotion had been given to all nurses and all K3 workers at Langsa City Hospital. However, the implementation of health promotion is not comprehensive and sustainable, this can also happen related to the provision of an inadequate budget. So that health promotion seems to be carried out to fulfill priorities without looking at the quality of the health promotion provided. Health promotion in the workplace should be developed by involving cooperation with various related sectors so that the implementation of health promotion is more perfect and the incidence of work accidents can also be reduced.

Culture against Work Accidents at Langsa Hospital

From the results of in-depth interviews with informants regarding the culture of work accidents at Langsa Hospital, the informant stated that all nurses at Langsa City Hospital carried out their duties in accordance with the applicable Standard Operating Procedures (SPO). The informant also said that not all nurses have a disciplined attitude in carrying out their duties, there are still nurses who play on cellphones and talk in a hurry when carrying out their duties.

Culture is the whole system of ideas, actions and the results of human work in the context of community life that is made into human beings by means of learning. Work culture is a philosophy based on a view of life as values that become traits, habits and also drivers that are cultivated in a group and are reflected in attitudes into behaviors, ideals, opinions, views and actions that manifest as work.

Occupational safety is a thought and effort to ensure the integrity and perfection of human beings both physically and spiritually as well as their work and culture that is aimed at the welfare of humans in general and the workforce in particular. Scientifically, work safety is a science and its application which studies the procedures for dealing with work accidents in the workplace.

Culture is a pattern of human activity that is systematically passed down from generation to generation through various learning processes to create a certain way of life that is best suited to the environment. Work culture as a philosophy based on a view of life as values that become traits, habits, and driving forces, entrenched in the life of a community group or organization, then reflected from attitudes into behaviors, beliefs, ideals, opinions, and actions manifested as work.

Human resources (HR) are one of the assets and part of an organization, therefore these human resources need to be managed properly and correctly, if viewed from the nature of human resources, they are unique compared to other assets. This is because HR has feelings, thoughts, and behaviors, so that if managed properly they are able to actively contribute to the progress of the company, as expressed (Kerr & Slocum, 2005).

Based on the results of the study, the researcher assumed that the work culture carried out by nurses at Langsa Hospital was not good, this could be evidenced from interviews with informants who stated that not all nurses had a disciplined attitude in carrying out their duties, there were still nurses who played cellphones and spoke in a hurry. while carrying out his work. This can happen because there are no special sanctions given to nurses who are negligent in carrying out their duties, so that it can trigger work accidents for nurses. Whereas nurses should

provide the best service to all patients, so that patients can feel satisfied with the services provided and nurses are also protected from incidents of work accidents.

Culture against Work Accidents at Langsa Hospital

From the results of in-depth interviews with several informants regarding Personal Protective Equipment (PPE) against work accidents at the Langsa Hospital, the informant stated that the PPE used by nurses at Langsa Hospital was in accordance with his body size, not too small/narrow. Before use, not all nurses ensure that PPE is functioning properly and correctly, depending on the time and condition of the nurse when carrying out their duties.

The informant also said that if you use 2 (two) or more PPE at the same time, it has not been confirmed that it does not reduce the effectiveness of each PPE, sometimes when using a foggy faceshield. In addition, informants immediately reported if they felt symptoms of pain or discomfort in using PPE. Reporting first to the head of the room, then the head of the room reports to the PI (Infection Prevention). Informants have never reported to the responsible party if special training on the use of PPE is needed, because they have attended training on the use of PPE.

Personal Protective Equipment is a set of safety equipment used by workers to protect all or part of their bodies from the possibility of exposure to potential hazards of the work environment against accidents and occupational diseases. Personal Protective Equipment as a tool that has the ability to protect someone in the work that functions to isolate the workforce from hazards in the workplace. The protection of workers through technical efforts to secure the place, equipment and work environment is very important. However, sometimes the danger situation cannot be fully controlled, so personal protective equipment is used. Protective equipment must be comfortable to wear, do not interfere with work and provide effective protection.

According to the Regulation of the Minister of Manpower and Transmigration of the Republic of Indonesia Number Per.08/MEN/VII/2010 states that Personal Protective Equipment is a tool that has the ability to protect someone in work whose function is to isolate the workforce from hazards in the workplace. Employers are required to provide PPE for employees/workers free of charge and must be used in the workplace while working to avoid work accidents (Muema, 2017).

Personal Protective Equipment (PPE) is basically a very important tool, because it is the last resort in an effort to protect workers after engineering and administrative efforts by the company. This is intended to protect or reduce the level of work accidents that often occur (DeJoy, 1990).

The use of personal protective equipment is the use of a set of tools used by workers to protect part or all of their bodies from potential hazards or work accidents. PPE can not perfectly protect the body, but will be able to reduce the severity that may occur. The use of personal protective equipment to prevent work accidents is strongly influenced by the knowledge, attitudes and practices of workers in the use of personal protective equipment.

The purpose of using Personal Protective Equipment (PPE) is to protect the body from occupational hazards that can result in illness or work accidents, so the use of personal protective equipment plays an important role. A work atmosphere with workplace comfort and facility comfort (PPE conditions) will improve the work performance of each workforce, so it is hoped that every facility or work equipment that creates comfort in its use will be used by workers optimally.

Workers should have awareness of dangerous conditions so that the risk of work accidents can be minimized. Awareness of threatening hazards can be realized by complying with applicable procedures and regulations and working according to responsibility. Compliance with using

PPE has an important role in creating safety in the workplace and reducing the number of workplace accidents. Furthermore, obedient workers have the knowledge and awareness to protect themselves against occupational safety hazards because they understand the risks that are accepted if they behave obediently or do not comply with existing regulations. . Workers who wear PPE will always behave safely in carrying out their work, so as to reduce the number of work accidents.

Based on the results of the study, researchers assumed that the provision of PPE by Langsa Hospital was good, as evidenced by the results of interviews with nurses who said that PPE was provided according to the size and needs of nurses. In addition, nurses have also attended training on the use of PPE from the hospital. However, the use of PPE by nurses at Langsa Hospital is still not perfect, this is evidenced from the results of interviews with nurses who said that not all nurses ensure that PPE functions properly and correctly, this depends on the time and condition of nurses when carrying out their duties. Not only that, the use of 2 (two) or more PPE at the same time has not been confirmed to not reduce the effectiveness of each PPE. This is of course closely related to the incidence of work accidents. The use of PPE should be considered properly and ensured that it is effective in protecting nurses and preventing work accidents.

Conclusion

The K3 staff at the Langsa City Hospital have not all received special K3 training. This is related to the lack of budget in meeting the needs related to K3. There are no special funds that have been prioritized to develop and perfectly implement the OHS system at Langsa Hospital, this can certainly trigger an increase in the incidence of work accidents. The type of training that has been given to K3 workers at Langsa City Hospital is in the form of hyperkes training, simulation of fire and fire poisons. The implementation of health promotion for nurses and K3 workers is not carried out comprehensively and continuously. This can also occur related to the provision of an inadequate budget. So that health promotion seems to be carried out to fulfill priorities without looking at the quality of the health promotion provided. Nurses carry out their duties in accordance with the applicable Standard Operating Procedures (SPO), but not all nurses have a disciplined attitude in carrying out their duties. This can be proven from interviews with informants who stated that not all nurses have a disciplined attitude in carrying out their duties, there are still nurses who play cellphones and talk in a hurry when carrying out their work. This can happen because there are no special sanctions given to nurses who are negligent in carrying out their duties, so that it can trigger work accidents for nurses. All nurses have attended training on the use of PPE, but not all nurses ensure that PPE functions properly and correctly, depending on the time and condition of the nurse when carrying out their duties. Nurses report immediately if they feel symptoms of pain or discomfort in using PPE. Not only that, the use of 2 (two) or more PPE at the same time has not been confirmed to not reduce the effectiveness of each PPE. This is of course closely related to the incidence of work accidents. The use of PPE should be considered properly and ensured that it is effective in protecting nurses and preventing work accidents. The variable that greatly affects work accidents is work culture, not all nurses have a disciplined attitude in carrying out their duties, there are still nurses who play cellphones and talk too in a hurry when carrying out their work, so that it has an impact on other things such as the use of imperfect PPE.

References

- Alli, B. (2008). *Fundamental principles of occupational health and safety*. International Labour Organization.
- Arikhman, N. (2020). Analisis Penerapan Keselamatan Dan Kesehatan Kerja Pada Program Keselamatan Kerja Di Rumah Sakit Umum Daerah Sungai Dareh. *Jurnal Kesehatan Medika Sainatika*, 11(2), 237-246.

- Campo, M., & Darragh, A. R. (2012). Work-related musculoskeletal disorders are associated with impaired presenteeism in allied health care professionals. *Journal of Occupational and Environmental Medicine*, 64-70.
- DeJoy, D. M. (1990). Toward a comprehensive human factors model of workplace accident causation. *Professional safety*, 35(5), 11.
- Depkes. (2007). Kementerian Kesehatan Tahun 2007. Tentang Pedoman Manajemen Kesehatan Dan Keselamatan Kerja (K3) Di Rumah Sakit. 2007;
- Fadhila, N., Sudiro, S., & Denny, H. M. (2017). Analisis Upaya Manajemen Rumah Sakit Dalam Penerapan Budaya Kesehatan dan Keselamatan Kerja (K3) Pasca Akreditasi Pada Sebuah RSUD di Kabupaten Semarang. *Jurnal Manajemen Kesehatan Indonesia*, 5(1), 55-61.
- Faizah, D. R., Hartono, W., & Sugiyarto, S. (2013). Pengaruh Penerapan Sistem Manajemen Keselamatan Dan Kesehatan Kerja (SMK3) Terhadap Tingkatan Kecelakaan Kerja Konstruksi. *Matriks Teknik Sipil*, 1(4), 466.
- Fitriana, L., & Wahyuningsih, A. S. (2017). Penerapan Sistem Manajemen Keselamatan dan Kesehatan Kerja (SMK3) di PT. Ahmadaris. *HIGEIA (Journal of Public Health Research and Development)*, 1(1), 29-35.
- Fitriana, L., & Wahyuningsih, A. S. (2017). Penerapan Sistem Manajemen Keselamatan dan Kesehatan Kerja (SMK3) di PT. Ahmadaris. *HIGEIA (Journal of Public Health Research and Development)*, 1(1), 29-35.
- Hudana, A. (2021). *Analisis Penerapan Keselamatan Dan Kesehatan Kerja (K3) Pada Pt. Indojava Agrinusa Pekanbaru* (Doctoral Dissertation, Universitas Islam Negeri Sultan Syarif Kasim Riau).
- Imam. (2016). Ilmiah Bidang Kesehatan Menggunakan Metode Ilmiah. *Bandung: Citapustaka Media Perintis*, 117.
- Indonesia, P. R. (2009). Undang-Undang Republik Indonesia Nomor 36 Tahun 2009. *Jakarta: Author*.
- International Labour Organization (ILO) Tahun 2018. 2018.
- Kerr, J., & Slocum Jr, J. W. (2005). Managing corporate culture through reward systems. *Academy of Management Perspectives*, 19(4), 130-138.
- Kothari, C. R. (2004). *Research methodology: Methods and techniques*. New Age International.
- Lee, A., & Nakamura, K. (2021). Engaging diverse community groups to promote population health through healthy city approach: Analysis of successful cases in western pacific region. *International journal of environmental research and public health*, 18(12), 6617.
- Loughlin, C., & Barling, J. (2001). Young workers' work values, attitudes, and behaviours. *Journal of occupational and organizational Psychology*, 74(4), 543-558.
- Lugah, V., Ganesh, B., Darus, A., Retneswari, M., Rosnawati, M. R., & Sujatha, D. (2010). Training of occupational safety and health: knowledge among healthcare professionals in Malaysia. *Singapore medical journal*, 51(7), 586-591.
- Moleong, L. J. (2018). Metodologi Penelitian Kualitatif Remaja Rosdakarya. *Inter Komunika, Stikom InterStudi*

- Muema, L. M. (2017). *Evaluation of personal protective equipment utilization among construction workers in Mombasa County, Kenya* (Doctoral dissertation, COHES, JKUAT).
- Riestiany, R., Dhewi, R. M., & Mangkuprawira, S. (2010). Analisis Pengaruh Efektivitas Penerapan Sistem Manajemen Keselamatan dan Kesehatan Kerja (SMK3) Terhadap Produktivitas Kerja Karyawan (Studi Kasus Plant 11 PT Indocement Tunggal Prakarsa, Tbk Citeureup). *Jurnal Manajemen dan Organisasi*, 1(2), 80-95.
- Said S. (2017). Hubungan Pengetahuan dan Sikap Terhadap Penerapan Sistem Manajemen keselamatan dan Kesehatan Kerja Rumah Sakit (SMK3RS) di RUSD Taman Husada Bontang Kalimantan Tahun 2017. 53(9):1689–99.
- Salmawati, L. (2015). Hubungan Penerapan Sistem Manajemen Keselamatan dan Kesehatan Kerja dengan Motivasi Kerja dan Stres Kerja pada Perawat di RSUD Anutapura Palu. *Jurnal Manajemen Pelayanan Kesehatan*, 18(1).
- Simanjuntak, M. (2016). Tinjauan faktor–faktor yang mempengaruhi waktu tunggu Pelayanan Rekam Medis Di Pendaftaran Rawat Jalan Di RSUD. Dr. RM Djoelham Binjai Tahun 2015. *Jurnal Ilmiah Perekam dan Informasi Kesehatan Imelda*, 1(1), 22-29.
- Sugiyono. (2014). *Metode Penelitian*. Bandung: Alfabeta.
- Susila, S. (2015). Metodologi penelitian cross sectional kedokteran dan kesehatan. *Bosscript, Klaten*.
- Toding, R. (2016). Analisis Penerapan Sistem manajemen kesehatan dan keselamatan kerja (SMK3) di RSIA Kasih Ibu Manado. *PHARMACON*, 5(1).
- Willis, D. G., Sullivan-Bolyai, S., Knafl, K., & Cohen, M. Z. (2016). Distinguishing features and similarities between descriptive phenomenological and qualitative description research. *Western journal of nursing research*, 38(9), 1185-1204.
- Zakaria, N. H., Mansor, N., & Abdullah, Z. (2012). Workplace accident in Malaysia: most common causes and solutions. *Business and Management Review*, 2(5), 75-88.