



OPTIMIZATION OF THE IMPLEMENTATION OF OCCUPATIONAL HEALTH AND SAFETY (K3) STANDARDS

Mhd. Taupik Sofyan¹, Susilawati², Fitriani Pramita Gurning³

Department of Occupational Safety and Health, Faculty of Public Health, Universitas Islam Negeri Sumatera Utara, Jl. William Iskandar Ps. V, Medan Estate, District. Percut Sei Tuan, Deli Serdang, North Sumatra 20371 Indonesia

*mhdts Sofyan@gmail.com

ABSTRACT

Implementation of K3 standards is very important in every agency, especially at the lowest level of health facilities, namely community health centers. In accordance with Minister of Health Regulation No. 52 of 2018 concerning Occupational Safety and Health in Health Facilities, it is stated that every Health Fasyan is obliged to implement occupational safety and health efforts. The implementation of health center K3 is expected to reduce the number of accidents for workers. So that the safety and health of staff is guaranteed, services can be improved for patients at the health center. The Community Health Center Occupational Health and Safety Guidelines cover various aspects such as Occupational Health and Safety policies, risk management, planning, controlling and implementing K3. The implementation of K3 in community health centers is very influential in improving the quality of community health centers. Therefore, employees or people who work there must implement an K3 program. This research involved community health center officers in Pamatang Sidamanik, Simalungun Regency, North Sumatra Province. This research aims to find out how the Pamatang Sidamanik Community Health Center implements K3 standards. This research uses a quantitative methodology with a cross sectional design. The population in this study were community health center officers in Pamatang Sidamanik, totaling 40 respondents. From the total population obtained, the sample that the researcher took was the total of that population, because the researcher used a total sampling technique. Primary data collected directly by researchers through questionnaires from previous research. The Ministry of Health Regulatory Indicator is a questionnaire used by researchers. The results of the bivariate statistical test using Chi Square show that the average p-value is 0.000 (<0.05), so that Ho is rejected and Ha is accepted, this means that the implementation of K3 standards at the Pamatang Sidamanik health center is running optimally. The implementation of the K3 program in community health centers greatly influences both the quality and accreditation of community health centers. Researchers hope that the agencies studied will continue to evaluate the implementation of K3 and continue to run optimally. Suggestions for every health facility, especially the Pamatang Sidamanik health center, to increase the implementation of Occupational Safety and Health.

Keywords: community health center; health facilities; health standards; work safety

First Received

8 March 2024

Revised

15 April 2024

Accepted

29 April 2024

Final Proof Received

29 April 2024

Published

30 April 2024

How to cite (in APA style)

Sofyan, M. T., Susilawati, S., & Gurning, F. P. (2024). Optimization of the Implementation of Occupational Health and Safety (K3) Standards. *Indonesian Journal of Global Health Research*, 6(2), 1009-1020. <https://doi.org/10.37287/ijghr.v6i2.3022>.

INTRODUCTION

According to the Decree of the Minister of Health Number 128 of 2004, the duty of puskesmas is to provide services to the community. In accordance with Permenkes No. 52 of 2018 concerning Occupational Safety and Health in Fasyankes states that every Fasyankes is obliged to carry out occupational safety and health efforts. Article 9 of Law No. 52 of 2018 explains that the central and regional governments have the responsibility to improve facilities

both in hospitals and puskesmas as well as the quality of their employees. One of them is the problem of occupational health and safety quality for employees. Puskesmas is the implementing unit of the District or City Health Office responsible for improving health in the area (Mora et al., 2020). Health facilities are places where government, local government, and/or communities promote preventive, curative and rehabilitative health. World Health Organization (WHO) states that about 2.5% of global medical personnel are infected with HIV every year, and about 40% of people suffer from Hepatitis B and Hepatitis C. It is caused by blood at work, one of which is caused by used needles. Use contaminated (Jannah et al., 2020). Of the 39.47 million health workers worldwide, 66.7% are nurses (World Health Organization, 2019).

According to International Labour Organization (ILO), by 2022 more than 2.78 million people will die due to occupational illness or accidents (Mentari Ramadhania et al., 2021). As a result of non-fatal work accidents worldwide. The organization states that factors that influence high rates of workplace injuries include individuals, the work they do, and the environment in which they work. All forms of health efforts must be carried out by workplace managers, including preventing disease, improving health, treating disease, and restoring worker health (Makrini et al., 2022). To reduce the risk of endangering the health of health workers in puskesmas, all workplaces must carry out comprehensive occupational safety and health (K3) measures, especially workplaces with the smallest number of workers, at risk of health hazards, or vulnerable to disease (Ahmed, 2022). According to World Health Organization (WHO), every year about 2.5% of global medical personnel are infected with HIV, and about 40% are infected with Hepatitis B and Hepatitis C viruses. This occurs due to blood pierced in the workplace, one of which is through contaminated needles (Rizky et al., 2022). 66.7% of the 39.47 million global health workers are nurses (World Health Organization, 2019). The above problems are a major concern throughout the world, especially in developing countries where the management of safety and health standards (K3) applicable to health care facilities is inadequate (Rahardja, 2023). Workers who do not use personal protective equipment (PPE), including face shields, masks, gloves, goggles, head coverings, protective gowns or aprons, and protective shoes (Sholihah et al., 2021).

Workers' knowledge can be high or low. Low-level workers do not know about all the hazards that can occur while working, such as crushing, punctures, pinching, and impacts, among others (Nugroho et al., 2020). Then, according to article 7 of Law no. 52 of 2018, it is explained how to apply ergonomic principles, then periodic health checks for employees, clean living culture and processing of health facilities and infrastructure from the aspect of occupational health and safety so that they are always maintained. The potential for work accidents must also be reduced through various kinds of preventive measures carried out, in order to avoid work accidents that may occur. One of the accidents that occurred was that the nurse was pierced by a needle and waste disposal that had to comply with existing SOPs. Therefore, preventive measures must be taken, by washing hands before and after taking action or care for health workers, and wearing personal protective equipment while working.

Workers who lack knowledge are at higher risk of workplace accidents. Therefore, all employees must be thoroughly trained in occupational safety and health (Sutapa et al., 2020). Safety means reducing the rate of accidents, breakdowns and losses that occur in the workplace caused by humans in the workplace. Therefore, I as a researcher am interested in testing this research, aimed at optimizing the application of K3 standards at the Pamatang

Sidamanik Health Center because of these problems. So that it can be a guideline or benchmark for puskesmas in order to maximize occupational health and safety, both for employees and people in it.

METHOD

This study used a cross sectional design and quantitative approach. This research involved puskesmas officers in Pamatang Sidamanik, Simalungun Regency, North Sumatra Province. The population in this study was puskesmas officers in Pamatang Sidamanik who amounted to 40 respondents. Of the total population obtained, the sample that the researchers took was the number of the population, because the researchers used the total sampling technique. Primary data collected directly by researchers through questionnaires or questionnaires from previous studies. The researchers used the Ministry of Health's Regulatory Indicators as questionnaires. Code, correction, adjustment, and statistical processing will be carried out on the data that has been collected. Next, the data is analyzed descriptively to produce a summary. The chi-square test was used in this study.

RESULTS

Univariate Test Results

Table 1.
Characteristics of
Respondents

Variable	N	%
Gender		
Man	19	47,5
Woman	21	52,5
Age		
26-35 years	5	12,5
36-45 years	8	20,0
46-55 years	19	47,5
>55 years old	8	20,0
Education		
High School / Vocational School	2	5,0
D3/S1	38	95,0

From the results of the data on gender variables, the majority were women with a total of 21 people with a presentation of 52.5%, the highest age variable was 46-55 years. With a percentage of 47.5%. The highest educational variable is D3/S1 with 38 people with a percentage of 95%.

Table. 2 Standard Frequency Distribution K3

Variable	N	%
Attitude		
Bad	4	10,0%

Good	36	90,0%
Application of K3 Standard Puskesmas		
Not optimal	26	65,0%
Optimal	14	35,0%

Based on table 2 above, it was obtained that the K3 standard of Permenkes No. 52 of 2018 is mostly in the optimal category with a percentage of 90.0% and the K3 standard in Puskesmas is mostly in the non-optimal category with a percentage of 65.0%.

Bivariate Test Results

Table 3. Optimization of the Implementation of Occupational Health and Safety (K3) Standards in Puskesmas

K3 application behavior	K3 Standard		Pvalue
	Not Ootimal	Optimal	
Bad	0 (0%)	4 (100%)	0,011
Good	26 (72,2%)	10 (27,8%)	

DISCUSSION

Regulation of the Minister of Health of the Republic of Indonesia No. 52 of 2018 concerning Occupational Safety and Health in Health Service Facilities stipulates K3 policies for health facilities, planning and implementation, monitoring and performance appraisal, as well as performance review and improvement (Apriyati & Lative, 2020). The application of K3 in Health Facilities related to the paragraphs contained in this article has been and will be discussed by researchers in the discussion in this study. How can we see that researchers have asked questions through questionnaires that cannot be separated from the Minister of Health Regulation No. 52 of 2018 (Purvayudhaningsari et al., 2023). Identification of potential hazards and K3 risk management in Health Facilities:

Determining Potential Risks

Identification of hazardous chemicals: Separation, storage and use of chemicals must be carried out in accordance with safety guidelines (Saputri & Absori, 2022).

Application of Standard Precautions

Implement standard precautions(*standard precautions*) is an approach that involves common practices in infection control to protect health workers, patients, and the general public from potential exposure and spread of infectious diseases (Yurizki & Ikatrinasari, 2022).

Application of ergonomic principles

Application of ergonomic principles(*ergonomi*) In the workplace aims to create an environment that supports the health and comfort of workers, as well as increases efficiency in carrying out tasks. Ergonomics addresses the design of equipment, workstations, and work tasks that correspond to human physical and psychological characteristics (Dina & Ancient, 2022).

Periodic Health Check

Periodic health checks are a process carried out routinely to evaluate a person's health. This examination aims to detect diseases or health conditions early, provide preventive interventions, and monitor overall health development. Periodic health checks can be done by a doctor or other health professional (Wahrini & Peng, 2023). Periodic health screenings can be adjusted based on individual health risk factors, age, gender, and medical history. It is important to undergo periodic health checks regularly as an effort to prevent and detect disease early so that appropriate actions can be taken to maintain overall health (Princess et al., 2021).

Immunizing

Immunization is the act of giving vaccines to increase the body's immunity to certain diseases. Immunization is one of the most effective methods in preventing infectious diseases and has contributed greatly to improving health (Marriage and Peace, 2023).

Growing PHBS in the Workplace

By cultivating clean and healthy living behaviors in health facilities, it can not only improve the health and safety of patients and health workers, but also create an environment that supports productivity and well-being (Tasia & Jamaluddin, 2023).

Health Facility Management from the Point of View of Occupational Safety and Health

To create a safe and healthy workspace for medical personnel, patients and visitors, monitoring the infrastructure and facilities of Health Facilities in terms of Occupational Safety and Health (K3) is very important. The following are some aspects that need to be considered when managing Health Facility facilities and infrastructure from a K3 perspective (Efendy et al., 2022). Hazard identification and risk evaluation, preparation of occupational safety and health procedures, use of personal protective equipment (PPE), hazardous materials management, facility and equipment maintenance, ergonomics and workstation design, infection control, evacuation and emergency plans, work environment monitoring, stress management and employee welfare. Management of health facilities and infrastructure from the K3 aspect is an integral part of efforts to create a safe, healthy and sustainable work environment. Involving all staff in this effort will support the creation of a strong safety and health culture in healthcare facilities (Jenrivo et al., 2020).

Medical equipment management based on occupational safety and health principles

Routine inspection and maintenance, equipment record maintenance, equipment use training, equipment quality control and validation, waste equipment handling: warning signs and labels, use of personal protective equipment (PPE) (Mahfirah'eni & Suhardi, n.d.).

Preparedness for emergencies or disasters, including

Preparedness for emergencies or disasters, including fire, is a very important aspect for all health facilities. In the context of Health Facilities (Fasyankes), which include hospitals, clinics and other health centers, fire preparedness plays an important role in protecting patients, visitors and health staff (Pramono et al., 2020). Development of Fire Emergency Plans, Routine Training and Simulation, Fire Extinguisher Inspection, Patient Evacuation, Emergency Meeting and Communication, Evacuation Access Planning, Security System Maintenance, Community and Visitor Education, Cooperation with External Parties,

Preparedness Monitoring and Evaluation, Provision of Fire Extinguishers, Environmental Condition Monitoring. Fire preparedness in Health Facilities involves cross-disciplinary efforts and teamwork. All staff, including medical, administrative and security personnel, should be involved in these efforts to ensure the safety and health of the entire health facility community (Sholihah et al., 2021).

Control and disposal of hazardous and toxic materials and hazardous and toxic waste
Hazardous and toxic waste management (B3) and B3 in health facilities is essential to protect the environment, public health and health workers. This management shall comply with, comply with relevant laws and guidelines, and prioritize safety precautions (Rahardja, 2023).

1. Domestic waste management Efficient household waste management is essential to enforce hygiene, improve health, and ensure environmental sustainability.
2. Waste sorting Categorize waste into different fractions, including organic waste, paper/cardboard waste, plastic, metal, and glass waste. In addition, it is important to separate hazardous waste, such as batteries, incandescent lamps, and pharmaceuticals, to ensure proper separation from ordinary waste.
3. Waste Reduction Waste reduction is a waste management strategy that focuses on reducing the amount of waste generated in the first place.
4. Organic Compost Organic compost is a fertilizer made from organic matter that has undergone a decomposition process by microorganisms. This organic matter can come from food scraps, dry leaves, grass clippings, animal waste, and so on.
5. Hazardous Waste Management: Ensure that hazardous waste, such as batteries and hazardous cleaning products, is stored in specially designated containers and then transported to appropriate disposal facilities. Do not dispose of hazardous waste in regular trash cans.
6. Correct Waste Disposal Wastewater Management: Wastewater management is the process of converting wastewater into safe and environmentally friendly water before it is discharged back into nature.
7. Application of the 3R Principle (*Reduce, Reuse, Recycle*):
 - a. *Reduce*: Reduce excessive commodity acquisition and limit the use of single-use packaging.
 - b. *Reuse*: Utilize goods or packaging that is still functioning.
 - c. *Recycling*: Engaging in the practice of recycling materials capable of recycling, such as paper, plastic, and metal.

Domestic waste management

Domestic waste management is a process that involves the collection, treatment, transportation and disposal of waste generated by households or individuals. The goal is to minimize negative effects on human health and the environment (Tasia & Jamaluddin, 2023). From the explanation above, we can see how important it is to implement the program or 11 K3 indicators in puskesmas. Because it is not only related to the safety and health of staff or employees, but also with patients and families of visiting patients. This also has an impact on the surrounding community, if the waste is not disposed of or destroyed according to applicable regulations

CONCLUSION

The implementation of the K3 program in puskesmas greatly affects both the quality and accreditation of puskesmas. Especially 11 indicators that become a reference for the implementation of the puskesmas program. It is appropriate that puskesmas as the main facility for puskesmas also implements K3. Because it is not only related to puskesmas employees, but also affects people who seek treatment. So that the research conducted obtained good results, from the application of K3 at the Pamatang Sidamanik Health Center.

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