

The Role of Decision-making by the Head Room against the Compliance of Nurses in the Implementation of Hand Hygiene

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ABSTRACT

Background: The facts there are still have nurses who are not obedient in the performance of hand hygiene. The role performed by the head room is expected to motivate and improve compliance hand hygiene in the implementing by the nurse so the quality and the indicators of the quality of the hospital can be increased. **Objective:** explain the influence of the Role of decision-making the head room against the Compliance of nurses in the performance Hand Hygiene. Research used descriptive analytic with Cross Sectional. **Method:** The data analysis used chi-square. **Results:** The results showed that there was a meaningful relationship between the role of the decision-making of the head room against the compliance of nurses in the implementation hand hygiene,, negotiators roles 0,001 ($P < 0.05$), resource allocator roles 0.009 ($P < 0.05$), and disturbance handler roles is 0.001 ($P < 0.05$). **Conclusion:** the role of decision-making of the head room is one of the factors that influence compliance hand hygiene in the nurses' implementation, with the role of head room made nurses increase the compliance. Thus the indicator to the quality of patient safety in the hospital can be achieved.

Keywords: Hand hygiene, Nurses Compliance, The Role of decision-making.

INTRODUCTION

One of the goals of patient safety is to low the risk of infection with hand hygiene. Appropriate hand washing procedure is desirable to prevent the occurrence of Health-care Associated Infections (HAIs). The application of the appropriate hand hygiene procedure by health workers is currently still low. In General, the level of fulfillment of hand hygiene in accordance the procedure by health workers is under 50% (Septiani, 2016). The head room as the Manager must be able to carry out its role in the management of nursing. The role and functions of the head of the room is very important in performing the organizational setting in a ward of a hospital. The role and function of head room, such as; identify problems, plan work function, planning, organizing and controlling the overall conduct of the organization. While own manager which means someone whose primary responsibility is to conduct the management process in an organization has the role of interpersonal roles, the roles of giver, role information and decision making.

Compliance, as the end of the destination itself, on a health program (Patient Safety) is a behavior that can be observed and thus can be directly measured which is expected to be

owned by all the implementing authority nurse in running the job who commissioned to provide nursing services directly to clients (Niven, 2012). The implementation of a good role by a Manager is known as one of the factors that affect to increase in compliance of nurses. This research aims to study the influence of the decision-making role of the head room against the compliance of nurses implementing of the provision of hand hygiene in the hospitalization room.

METHOD

This research used descriptive analytic design research with cross sectional approach. This research population is the managing nurses who were on inpatient room, diploma nursing and ners about 229 with sample amount 146 in accordance with criteria of inclusion that is at least 1 year working period. Sampling used technique of Purposive Sample. Independent variable is the decision-making role of head room and the dependent variable is the compliance of nurses implementing the provision of hand hygiene.

The data is drawn from this research used questionnaire instruments took during two weeks in five working days. The process of research is since the preparation until the end lasted 4 months (April-July 2017). Research instrument was a questionnaire which consists of three parts, namely, the role of nurses data for decision making head room 16 questions (Likert scale), and 10 questions nursing knowledge (scale Guttman). The instruments developed by the researcher based on the associated theory.

Instrument test conducted on nurses in the room of inpatient another hospital not be research respondents (n = 30). The hospital chosen is expected to have the same characteristics of the respondents of the study. Processing and analysis of data used for univariate frequency distributions, while analysis bivariate used statistical test of chi square.

RESULTS AND DISCUSSION

Characteristics of respondents can be shown in table 1 shows that 146 respondent's diploma nursing about 126 respondents (86.3%), female 78.1% and 21.9% male. The mean age average of the respondents is about 33.66 – with an average year long work about 9.05 years.

Table 1 Characteristic distribution respondents in Dr. Soedarso hospital at 2017 n=146

No.	Characteristic	Mean	SD	n	%
1	Age	33,66	7,307		
2	Work period	9,05	6,712		
3	Sex				
	male			32	21,9
	female			114	78,1
4	Education				
	Diploma			126	86,3
	Ners			20	13,7

Table 2 shown the proportion of the distribution respondents associated the decision-making role of the head room against the compliance of implementing nurse. The proportion of respondents associated the decision-making role of the head room that suits the role about

114 respondents (78.1%), while the proportion of nurses who dutifully toward the implementation of hand hygiene about 68 respondents (46.6%). On the decision-making role of variable sub head room related entrepreneur implemented in accordance with the role as much as 74.7%, Negotiator of the head room that matches with the role as much as 56.2%, while for the resource allocator head room in accordance with the role as much as 47.3% and associated disturbance handler of the head room that fits to the role as much as 64.4%. The results of the analysis of the dependent variables (compliance with hand hygiene in implementing nurse there are 4 sub related compliance, variable stage availability while the nurse dutifully as much as 50%, at this stage of the process of identifying the way ward nurses as much as 50%, and at this stage of the wayward nurses of internalization as much as 54.8%. While for a good knowledge nurses who dutifully about 98.6%.

Table 2 Distribution variable the role of decision-making head of the room and variable compliance nurse implementing in handle of hand hygiene at Dr. Soedarso hospital Pontianak 2017, n= 146

No	Variable	Frequency	Percentage
1	The role of decision making accordance		
	With role	114	78.1
	Less than role	32	21.9
	Sub variable of the role of decision making		
	a. Entrepreneur role		
	With role	109	74.7
	Less than role	37	25.7
	With role	82	56.2
	Less than role	64	43.8
	b. Negotiator Allocator		
	With role	69	47.3
	Less than role	77	52.7
	c. Disturbance Handler		
	With role	94	64.4
	Less than role	52	35.6
2	Nurse compliance		
	Obey	68	46.6
	Less	78	53.4
	Sub variable of nurse compliance of hand hygiene		
	a. Compliance		
	Obey	73	50
	Less	73	50
	b. Identification		
	Obey	73	50
	Less	73	50
	c. Internalization		
	Obey	80	54.8
	Less	66	45.2
	d. Nurse education		
	Obey	144	98.6
	Less	2	1.4

Table 3 shows the analysis of the influence of the decision-making role of head nurse in compliance with implementation of hand hygiene in the inpatient hospital Pontianak in 2017. The proportion of the decision-making role of the head room that less accordance about 90.6%, 29 nurses less obediently in the performance of hand hygiene. While 57% of the 65 respondents felt the decision-making role of the head room fit in improving compliance in the implementation of hand hygiene in the room. The analysis further concluded that there was a meaningful relationship between the decision-making role of head nurse's compliance with implementing the provision of hand hygiene ($p= 0.000 < 0.05$). Based on the results of the analysis obtained values $OR = 12.823$, which emphasizes the role of the head decision-making appropriate chance to 12.8 times more wayward nurses make in the performance of hand hygiene compared the role of decision making the head of a less appropriate rooms (95% CI: 3,692-44,541).

Table 3 Analyze the role influence of decision making the head room to compliance of the nurse in handle of hand hygiene at Dr. Soedarso hospital Pontianak 2017, n= 146

Variable	Nurse compliance				f	OR (95%CI)	P value
	Obey		Less				
	n	%	n	%			
Independent variable							
The of decision making							
Less	65	57	49	43	114	12,823	0,001
Appropriate	3	9.4	29	90.6	32	(3,692-44,541)	
a. Entrepreneur							
Appropriate	63	43.2	46	31.5	109	8,765	0,001
Less	5	3.42	32	21.9	37	(3,172-24,217)	
b. Negotiator							
Appropriate	54	37	28	19.2	82	6,888	0,001
Less	14	9.6	50	34.2	64	(3,260-14,553)	
c. Resource Allocator							
Appropriate	40	27.4	29	19.8	69	2,414	0,009
Less	28	19.2	49	33.6	77	(1,240-4,700)	
d. Disturbance Handler							
Appropriate	55	37.7	39	26.7	94	4,231	0,001
Less	13	8.9	39	26.7	52	(1,999-8,956)	

The role and functions of the head room determines the standard of success that poured in the form of targets, work procedures and the appearance of the staff that will be compared with results that have been achieved or able of being worked by staff (Marquis & Huston, 2010). The results of the research on knowledge obtained of the nurses in inpatient Hospital Dr. Soedarso Pontianak just 2 people nurses who have low knowledge; this indicates that most nurses know the correct implementation of the hand an appropriate standard of hygiene.

Parhinhingsih research results (2008) in Septiani, DA. (2016) also suggests that there are other factors that can affect the behavior of the application of hand hygiene, among others, education, interests, jobs, information, culture, age and experience. In theory it is said

that the higher the level of knowledge of nurses about hand hygiene is expected to have the appropriate behavior when applying the principle of hand hygiene. This indicates that respondents only knew but could not be applied (Septiani, 2016). According Bloom's theory in Notoatmodjo (2010) States that the domain of knowledge starting from the idea to the domain of the application. Domain know just know about the principle – the principle of hand hygiene but not yet stemmed the behavior when in the field. Bloom also explained that the behavior is not only influenced by knowledge alone, but can be influenced by the supporting factors (availability of facilities of hand hygiene) and the driving factor (fixed hand hygiene procedures) (Notoatmojo, 2010)

It is concerned the decision-making role of the head room, as well as the Role of the head room in order to improve compliance with hand hygiene in the implementation of nurse is very necessary, as for how that can be done to a head room role oversight and decision-making as well as the routine construction, consistently and continuously so that compliance with the nurses in the implementation of hand hygiene can continue to increase the quality of service and the quality would be good. The head room is a great role model for his subordinates, then it should also commence compliance from head room that can always be an example to all the nurses there were coated in order to improve the quality of service. For example in innovation head room can perform the role of negotiator in increased compliance of nurses in the provision of infrastructure so that compliance of nurses is increasing.

CONCLUSION

The results of statistical tests in this study prove that there is influence the decision-making role of the head room against the compliance of nurses in the performance of hand hygiene. From these results the management hospitals can perform evaluation related roles that have been run to enhance compliance of nurses who are currently still less considered, such as enacting reward and punishment, motivation, conduct in-house training and implement climate work culture which can improve compliance with nurses.

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