



Health Care Workers' Perception On The Current And Additional Safety Measures To Be Provided In Enugu State University Teaching Hospital, G.R.A. Enugu, Nigeria

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ABSTRACT

To assess Health Care Workers' perception on the current and additional safety measures to be provided at the Enugu State University Teaching Hospital Enugu Nigeria. A total of 350 health care workers of the Enugu State University Teaching Hospital (ESUTH) were used for the cross sectional study which took place between February and August 2019. Basic information like age, sex and duration of work in the hospital were taken. Finally their level of perception on the current and additional safety measures to be provided in the hospital was assessed. The greatest number of respondents fell within the age group of 26-35years (40.9%) and the gender distribution showed that 54.6% were female workers. A great proportion of the respondents indicated that occupational health and environmental safety. 69.7% believe the management does not constantly review they have worked in the hospital between 1 -5years (31.1%). 97.2(48.9+48.3)% agree that monitoring, inspection and evaluation of safety practices are in place. 46.3% believe that there is good housekeeping. 72.3% do not believe that the management creates the environment for staff to freely report on health and safety policies. 85.8(26.2+62.6)% are satisfied with what the management is doing currently to improve occupational health and safety. On the additional measures to be taken, 55% believe the management should constantly review health and safety practices. 13% believe that the management should engage safety experts. 12% believe the management should improve health hazard allowance. 2% believe there should be improvement in waste management, use of funds allocated and provision of protective gadgets. Overall, 62.2% of respondents believe that the hospital is doing well in the area of occupational health and safety but there is still room for improvement. This is the main reason a good proportion of prospective health care workers like doctors (especially specialist doctors) and nurses are eager to take up employment in the Enugu State University Teaching Hospital because they perceive it is a safe place to work in.

Keywords: Health Care Workers, Safety Measures, Enugu State University Teaching Hospital.

INTRODUCTION

A health care facility is a workplace as well as a place for receiving and giving care. A Hospital is among the highly important and sensitive work environments since the performance of employees in its workplace are associated with the lives of thousands of people. Some studies have reported lack of safety in hospitals¹. The hazards and incidents in this environment include: fire outbreak, electrical shock and burning due to it, burn injuries because of spill of acid on hands, skin or respiratory allergy to various chemicals used in hospitals, oxygen cylinder explosion as a result of overfilling, falling down and fractures of limbs or death of employees after falling from height, falling of patients out of their beds, burning in the operation room because of cautery device, busting of unprotected fluorescent light bulbs, and other frequent minor and major events². Rosen et al. noted that establishing a strong safety culture is

critical to improvement of safety and reduction of adverse events³. Human resource is the most important asset for organizational development, as it uses other resources and gets best return out of them⁴. Creating a safe working environment is rationally acceptable and neglecting safety in the workplace can cause a lot of damage and injury to the workforce. Increased injuries caused by the absence of or inadequate safety in the workplace will not only lead to the financial losses, but also to the loss of valuable human resources of the organization. It is, therefore, necessary that much more attention be paid to safety and occupational health than before⁵. The safety climate in hospitals is perceived as effective when some issues such as medication errors, nurse back injuries, urinary tract infections, patient satisfaction, patients' perception of the responsiveness of nurses, and nurse satisfaction are taken care of⁶. This suggests that employees' intrinsic motivation is important to promote some of their safety behaviours⁷. A research work by Soltan et al, confirmed the relationship between safe working environment and affective commitment of the staff. In this study, a positive correlation was found between these two variables⁸. A report by Ghasri et al, proposed the relationship between the organizational commitment and the workplace safety⁹. Abdullah et al, conducted a study on the employees' perceptions on occupational health and safety (OHS) management in public hospitals in Malaysia and found that employees will persist to continuously improve safety when they know that the management is openly more supportive of safety activities¹⁰.

MATERIALS AND METHOD

A total of 350 health care workers comprising of 50 workers selected from each of the following seven departments in the teaching hospital; clinical medicine, surgery, nursing, medical laboratory, works, pharmacy and physiotherapy were used for the study. After obtaining an ethical clearance from the hospital ethical committee and an additional permission from the heads of departments of each of the departments mentioned, a pretested self-administered questionnaire was used to collect information from each of the respondents. The questionnaires were prepared by referring to the recommended safety practices within the hospital and made in such a way that it would be very simple to understand. It was written in English language and divided into three sections. The first section collected demographic data from the respondents excluding their names; the second section assessed their perception of the adequacy of the current safety measures available to them in the hospital while the third section dwelt on what they feel should be the further safety measures that should be provided for them by the hospital authorities. The data was analyzed using the statistical package for social sciences (SPSS) version 11 and the results were displayed in the form of tables and graphs.

RESULTS

Table 1: Socio demographic Characteristics of Respondents

Variable	Frequency	Percentage
Age		
Below 25	39	11.1
26 - 35yrs	143	40.9
36 - 45yrs	115	32.9
46 - 55yrs	42	12.0
Above 56yrs	11	3.1
Total	350	100.0
Gender		
Male	159	45.4
Female	191	54.6
Total	350	100.0
How long have you been employed		
Below 6 months	34	9.7
6 months to 1 year	58	16.6
1 - 5 years	123	35.1
5 - 10years	101	28.9
Above 10 years	34	9.7
Total	350	100.0

Age group with the highest frequency is 26-35 years (40.9%). 54.6% were females and the greatest number of respondents (35.1%). have worked for 1 to 5years.

Table 2: Workers' views on the current level of safety practices in the hospital

Variables	Frequency(f)	Percent (%)
Do you agree that there is good monitoring, supervision and evaluation of safety practices?		
Strongly agree	170	48.9
Agree	168	48.3
Disagree	5	1.4
Strongly disagree	5	1.4
Total	348	100.0
What are the things you think the management does to improve occupational health and environmental safety		
A)Engagement of safety experts to redesign occupational health and environmental safety		
Yes	70	20.0
No	280	80.0
B)Constantly reviewing health and safety policies		
Yes	106	30.3
No	244	69.7
C)Improving on good housekeeping and sanitation		
Yes	162	46.3
No	188	53.7
D)Does the management create the environment for staff to freely report on occupational health and environmental safety		
Yes	97	27.7
No	253	72.3
E)Supervision and safety management		
Yes	97	27.7
No	253	72.3
What is your level of satisfaction towards managements' efforts to improve occupational health and safety		
Very satisfied	82	23.6
Satisfied	216	62.2
Unsatisfied	49	14.1
Total	347	100.0

48.9% and 48.3% respectively agree and strongly agree that monitoring evaluation and inspection of safety practices are necessary for effective occupational health and environmental safety. 46.3% believe that improving on good housekeeping and sanitations is one of the things that management does to improve on occupational health and environmental safety in the hospital. 72.3% does not believe that the management creates the environment for staff to freely report on occupational health and environmental safety. 69.7% believe the management does not constantly review health and safety policies. 23.6% are very satisfied, 62.2% are satisfied and 14.1% are unsatisfied with what the management is doing currently to improve occupational health and safety.

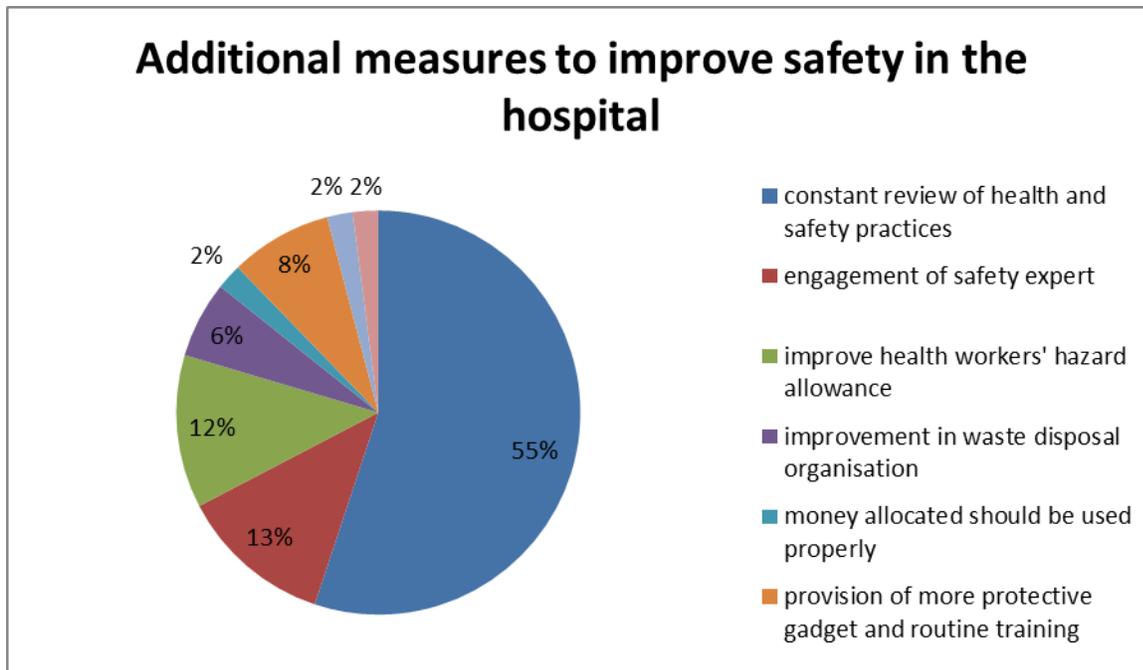


Figure 2: Additional measures to improve safety in the hospital

55% believe the management should constantly review health and safety practices. 13% believe that the management should engage safety experts. 12% believe the management should improve health hazard allowance.

DISCUSSION

The socio-demographic data that were assessed (Table 1) include age, sex and duration of work in the hospital. Out of the total number (350) the sex distribution was male; 45.4% : female; 54.6%. The greatest number of respondents had been working in the hospital for 1 to 5years due to the fact that the hospital had just been in existence for 10years and it has been building up its workforce gradually. The study also showed that 48.9% strongly agree while 48.3% agree that good monitoring, supervision and evaluation of safety measures is in place which is in agreement with the assertion of Rosen et al. who noted that establishing a strong safety culture is critical to improvement of safety and reduction of adverse events³. Again most of the respondents do not hold the view that the management is doing enough in terms of engagement of security expert, constantly reviewing health and safety policy, improvement on housekeeping and encouraging the staff to report on health and safety matters (Table2). The workers would like the hospital authorities not only to improve on these areas but also to provide motivational

incentives like improvement in their occupational hazard allowance and provision of personal protective equipments (Fig 1) which would be in concurrence with the study which suggests that employees' intrinsic motivation is important to promote some of their safety behaviours⁷. Overall, this study showed that 62.2% of health workers were satisfied with the managements' efforts on safety management in the hospital (Table 2) this is in tandem with the study by Abdullah et al, on the employees' perceptions on occupational health and safety (OHS) management in public hospitals in Malaysia which indicated that employees will persist to continuously improve safety when they know that the management is openly more supportive of safety activities¹⁰.

CONCLUSION

This study which was conducted in a relatively 'young' tertiary health institution has been necessitated by the need to assess the view of the health workers on the occupational health and safety measures which are being put in place by the hospital management in order to know the areas that need improvement. The findings show that the workers are not happy with the efforts of the hospital authorities regarding engagement of health and security experts (external consultants), constantly reviewing health and safety policy, improvement on housekeeping and encouraging the staff to report on health and safety matters. These are matters which the hospital authorities may be handling but the workers do not seem to know. This necessitates a constant interaction between the authorities and the workforce so as to bridge that gap in communication. The satisfaction of the greater percentage (62.2%) of the workforce on the management's efforts is worthy of commendation as this would lead to the attraction of good quality professionals into the hospital.

REFERENCES

1. Birkmeyer NJO, Finks JF, Greenberg CK, McVeigh A, English WJ, Carlin A et al. (2013). Safety culture and complications after bariatric surgery. *Annals of surgery*, 257(2):2605.
2. Khodabakhsh-nejad V. (2004) Safety status of hospitals of Guilan University of Medical Sciences. MS Thesis. Tehran University of Medical Sciences;
3. Rosen A, Singer S, Hartmann C, Shokeen P, Zhao S, Falwell A, et al. 2008. Is There a Relationship between Hospital Safety Culture and Safety Outcomes in VA Hospitals? *Academy Health*.
4. World Health Organization (WHO). 2006. Health workers. Geneva (CH): http://www.who.int/occupational_health/topics/hcworkers/en/.
5. Cynthia Myers. 2015. Electrical cord hazards in the workplace, <https://work.chron.com/electrical-cord-hazard-workplace>.
6. Neal A, Griffin MA, Hart PM. 2000. The impact of organizational climate on safety climate and individual behaviour. *Safety Science*, 34(1):99-109.
7. Butt H, Khan F, Rasli A, Iqbal M. 2012. Impact of work and physical environment on hospital nurses commitment. *International Journal of Economics and Research*, 3:33-43.
8. Soltan Hosseini M, Naderian M, Homaie R, Mousavai Z. 2009. The quality of work life and organizational commitment in staff of department of physical education of Isfahan. *Sport Management*, 2(1):167-81.
9. Ghasri M, Abdolalipour G, Ghobadi A. 2001. Quality of working life on organizational commitment of staff of police science academy. *Police Management Studies* 2011, 6(2):177-93
10. Abdullah NAC, Spickett JT, Rumchev KB, Dhaliwal SS. 2009. Assessing Employees Perception on Health and Safety Management in Public Hospitals. *International Review of Business Research Papers*, 5(4):54-72.