

ABSTRACT

The availability of Water, Sanitation, and Hygiene (WASH) services in healthcare facilities is increasing in line with the acceleration of national priority health programs such as postnatal maternal and child care quality, antimicrobial resistance control, and the expansion of the UHC program, as well as the role of WASH in preventing infection and improving the quality of health services. Only 30% of Indonesian health care facilities that meets water and sanitation service standards are managed safely. The purpose of this research was to evaluate WASH facilities in Indonesian hospitals adopting the WASH-FIT approach and to investigate their relationship with patient satisfaction and maternal mortality due to infection. This study is a follow-up analysis of the 2019 Health Facilities Research (Rifaskes) in Indonesian hospitals using a cross-sectional design. WASH service facilities are quantified using service availability as a proxy indicator of WASH indicators according to WASH-FIT for each indicator contained in the Rifaskes data. Water services, sanitation, waste management, hand hygiene, environmental hygiene, and management are the six indicators examined. The Stata program was used to analyze the data. According to the findings, the majority of hospitals in Indonesia had sufficient water service facilities, sanitation, hand hygiene, and management, and adequate waste management. Except for waste management services, the level of WASH services in hospitals on territories is good. WASH service facilities are more frequently found in government and public hospitals than in private and specialized hospitals. The D pratama, D/IV, and C/III Hospital still have sanitation service facilities, waste management services, hand hygiene services, environmental cleaning services, and poor category management services. There is a relationship between the category of sufficient sanitation management services; hand hygiene services, environmental hygiene, and management are in the fair and good categories; and there is no relationship between WASH services and patient satisfaction.

Keywords: hygiene, patient satisfaction, sanitation, sepsis, WASH-FIT

INTISARI

Penyediaan layanan *Water, Sanitation, and Hygiene* (WASH) di fasilitas pelayanan kesehatan makin meningkat seiring dengan percepatan program prioritas kesehatan nasional seperti kualitas perawatan ibu dan anak pascakelahiran, pengendalian resistansi antimikroba, dan perluasan program UHC serta peran WASH dalam pencegahan infeksi dan peningkatan kualitas pelayanan kesehatan. Di Indonesia, hanya 30 persen fasilitas pelayanan kesehatan yang memenuhi tingkat layanan air dan sanitasi yang dikelola dengan aman. Tujuan penelitian adalah melakukan evaluasi fasilitas WASH pada rumah sakit di Indonesia berdasarkan pendekatan WASH-FIT dan menganalisis keterkaitannya dengan kepuasan pasien dan angka kematian ibu bersalin akibat infeksi. Penelitian ini merupakan analisis lanjutan dari Riset Fasilitas Kesehatan (Rifaskes) tahun 2019 pada rumah sakit di Indonesia dengan desain potong lintang. Fasilitas layanan WASH diukur berdasarkan ketersediaan layanan pada masing-masing indikator yang terdapat pada data Rifaskes sebagai indikator *proxy* dari indikator WASH menurut WASH-FIT. Enam indikator yang dinilai yaitu layanan air, sanitasi, pengelolaan limbah, kebersihan tangan, kebersihan lingkungan, dan manajemen. Data dianalisis dengan program Stata. Hasil penelitian menunjukkan bahwa rumah sakit di Indonesia paling banyak memiliki fasilitas layanan air, sanitasi, kebersihan tangan, dan manajemen dengan kategori baik, serta pengelolaan limbah dengan kategori cukup. Status layanan WASH di rumah sakit berdasarkan wilayah kepulauan menunjukkan bahwa sebagian besar rumah sakit tergolong dalam kategori baik, kecuali untuk layanan pengelolaan limbah. Fasilitas layanan WASH kategori baik di rumah sakit pemerintah dan rumah sakit umum lebih banyak proporsinya daripada rumah sakit swasta dan rumah sakit khusus. Masih ditemukan fasilitas layanan sanitasi, layanan pengelolaan limbah, layanan kebersihan tangan, layanan kebersihan lingkungan, dan layanan manajemen kategori buruk di rumah sakit tipe D pratama, D/IV, dan C/III. Terdapat hubungan antara layanan pengelolaan sanitasi kategori cukup; layanan kebersihan tangan, kebersihan lingkungan, dan manajemen kategori cukup dan baik dengan angka kematian ibu bersalin akibat sepsis, serta tidak terdapat hubungan antara layanan WASH dengan kepuasan pasien.

Kata kunci: *hygiene*, kepuasan pasien, *sanitation*, sepsis, WASH-FIT