

An Overview of The Understanding and Attitudes of Food Handlers' Hygiene and Sanitation in The Nutrition Installation of RSUD Dr. Pirngadi Medan

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Abstract

The provision of hygienic and healthy food is the basic principle hospital food services are provided for patients who are very vulnerable to transmission of pathogenic germs. This analysis aims to illustrate the knowledge and attitudes of food handlers' hygiene and sanitation at the Nutrition Installation of RSUD DR. Pirngadi Medan. This study used a cross-sectional approach to 20 food handlers on the morning shift at the nutrition installation at RSUD Dr. Pirngadi Medan. The result showed that the knowledge of food handlers at the Regional General Hospital Dr. Pirngadi Medan is included in the good category 75% and 85% bad category hygiene behavior. Results of data analysis obtained that there is no relationship between knowledge and hygiene and sanitation attitudes of food handlers. Based on the results of research that has been conducted at RSUD Dr. Pirngadi Medan still lacks awareness in the attitude of implementing hygiene and sanitation, such as often removing the mask when handling food due to the lack of a body to sweat quickly.

Keywords: knowledge, attitude, food sanitation hygiene, food handler

Introduction

One of the nutrition services in the hospital is the provision of appropriate food for patients to support the patient's recovery process in the shortest possible time. The basic principle of providing food in hospitals is the provision of hygienic and healthy food because hospital food services are provided for patients who are very vulnerable to transmission of pathogenic germs (Saputra at al., 2015).

Food handlers include all people who are related or in direct contact with the food that will be served. Food handlers are all people involved in food processing activities starting from the stage of preparation, processing and distribution (Rahmah & Kamal, 2022).

The factor of the lack of knowledge of food handler employees about the importance of hygiene and sanitation practices can also affect the success of hygiene practices. Therefore, employees handling food must fully understand the nature of the food being handled, especially if the food is in a high-risk category, such as meat, dairy, fish, etc. Food handlers who do not manage food properly can cause negative effects such as infection and positioning due to chemicals, microorganisms, plants, or animals, and can also cause

allergies (Tiny Kurnianih & Adhila Fayasari, 2020).

Sanitary procedures are clean behaviors to prevent contamination of the food being handled. Important procedures for food processing workers are washing hands, using masks, maintaining personal hygiene and health and wearing personal protective equipment. The behavior of hospital food handlers either directly or indirectly can affect the quality of food served to patients (Indriyani., 2019).

Based on the study on the background, the researchers examined the relationship between knowledge hygiene and sanitation attitudes of food handlers at the Nutrition Installation of RSUD Dr. Pirngadi Medan.

Methods

This study uses a type of cross sectional approach. The method used in this research is observation and conducted interviews using questionnaires to respondents. The population in this study are all food handlers at the nutrition installation unit of RSUD Dr. Pirngadi Medan, totaling 30 people. The research sample is 20 people. The criteria for sampling are the food handlers of the morning shift

workers at the nutrition installation. The technique used in analyzing the data obtained in this study used the Chi-square test method with the help of the SPSS for version 21 program, the significance of $\alpha = 0.05$.

Results

Table 1. Characteristics of Respondents

Characteristics of Respondents	of	F	%
Age			
27 – 33		8	40.0
34 – 40		4	20.0
41 – 47		2	10.0
48 – 54		6	30.0
Gender			
Man		6	30.0
Woman		14	70.0
Level of Education			
SMP		3	15.0
SMA		11	55.0
D3, D4, S1, S2		6	30.0
Length of Work			
< 10 years		8	40.0
> 10 years		12	60.0

Table 2. Relationship Between Knowledge And Attitudes of Food Handlers

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)	Point Probability
Pearson Chi-Square	,556 ^a	1	0,456	1,000	0,632	
Continuity Correction ^b	,000	1	1,000			
Likelihood Ratio	,947	1	0,331	1,000	0,632	
Fisher's Exact Test				1,000	0,632	
Linear-by-Linear Association	,528 ^c	1	0,468	1,000	0,632	0,632
N of Valid Cases	20					

a. 3 cells (75,0%) have expected count less than 5. The minimum expected count is ,40.

b. Computed only for a 2x2 table

c. The standardized statistic is ,726.

Discussion

The data in Table 1 outlines the demographic characteristics of the respondents. It reveals that the majority of food handlers surveyed fell within the age range of 27-33 years, constituting 40.0% of the 20 respondents, while the lowest percentage was in the age group of 41-47 years, making up only 10.0%. The correlation between age and work productivity, as indicated by Kumbadewi et al. (2021), suggests that older individuals tend to exhibit better behavior, potentially impacting work productivity positively. Additionally, the gender distribution among the respondents displays that a significant proportion, specifically 70.0%, were female. Furthermore, the educational background of the respondents indicates that more than half (55.0%) had completed high school. Regarding work experience, the majority (60.0%) of food handlers had over 10 years of experience, aligning with prior research by Adiati and Musitika (2013), emphasizing the positive impact of work experience on work productivity.

As for the assessment of knowledge using a

questionnaire, the research conducted by Indriany (2019) illustrated that a significant portion (60.9%) of food handlers at RSUD Dr. Seoselo Slawi demonstrated good knowledge, emphasizing that education level doesn't necessarily correlate with better knowledge in sanitary hygiene. These findings collectively underscore the complexity of factors influencing work productivity and knowledge among food handlers, suggesting that variables such as age, gender, education, and work experience all play distinct roles in shaping work productivity and knowledge levels within this context.

The Chi-square test results derived from the table above indicate a non-significant association between the knowledge and attitudes of food handlers (p -value = 0.456, $\text{sig} > 0.05$), thereby leading to the acceptance of the null hypothesis (H_0) and the rejection of the alternative hypothesis (H_a). This implies that there is no apparent correlation between the level of knowledge and the hygiene and sanitation attitudes adopted by food handlers. These findings corroborate with the research conducted by Robi Andika and Mayumi Nitami (2017),



which emphasizes the absence of a significant relationship between the level of knowledge regarding personal hygiene among food handlers (p -value = 0.429, $\text{sig} > 0.05$). It suggests that lower knowledge does not necessarily lead to poor personal hygiene practices compared to those with higher knowledge levels (Andika & Nitami, 2017).

Furthermore, the study highlights the absence of a direct influence of food handlers' knowledge on the implementation of sanitation and hygiene practices, indicating the presence of various other influential factors, such as work experience. According to Berutu (2021), work experience, often associated with age, suggests that older food handlers with more extensive work experience tend to exhibit better knowledge and consequently implement improved hygiene and sanitation practices. Additionally, observations conducted at the Nutrition Installation at Dr. Pirngadi Hospital in Medan unveiled key factors influencing food handler hygiene and sanitation practices, notably non-compliance with using personal protective equipment (PPE) during food distribution. The reasons for non-compliance with PPE, such as masks and gloves, were not solely attributed to a lack of knowledge but were also linked to environmental factors. For instance, the observations identified poor air circulation in the food distribution area, complicating the use of masks, and practical challenges experienced when using gloves during food packaging, potentially leading to spills due to slippery surfaces. These complexities underscore the multifaceted nature of factors influencing food handler practices beyond mere knowledge, revealing the pivotal role of diverse elements in shaping their behavior in food hygiene and sanitation.

Conclusion

In conclusion, the research conducted at RSUD Dr. Pirngadi Medan highlights a lack of awareness and implementation of hygiene and sanitation practices among food handlers, particularly observed through the habit of removing masks due to discomfort from rapid sweating. Recommendations include improving air circulation to reduce discomfort and strict supervision to ensure consistent use of personal protective equipment and adherence to hygiene standards. These measures aim to foster a stronger culture of compliance and awareness, ultimately enhancing safety standards in

food handling processes at the hospital.

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