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Research Article

THE IMPORTANCE OF APPLYING SECURITY AND SAFETY STANDARDS IN HEALTH FACILITIES

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region mobile No: 966556274953, E--mail: YHALFAHMI@MOH.gov.sa¹¹**Abstract:**

The aim of the study is to know the security and safety standards in health facilities, and the importance of applying security and safety standards in health facilities in order to obtain a quality certificate as it is very important, as security and safety standards are considered part of the quality standards and it is important to apply them in order to accredit the health facility, this questionnaire was distributed to social networking groups WhatsApp, where 750 answers were obtained from those (the targets of the research questionnaire are male and female health practitioners in Mecca, aged 25-60 years.), out of a total of 700 questionnaires.

Keywords: security, safety, standards, health facilities

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INTRODUCTION:

The importance of health and human safety is one of the basics of health care, the normal life of the individual and society, and the prevention of occupational diseases. From it emerge the basics of health care, which it considers to be the first line of its importance, because of the concern it means for human health and safety, to provide adequate means of life and to protect the elements of production (human beings, such as signs and machines) from damage. And material loss, as the risks to which humans are exposed have increased significantly with the complexity of the life we live, and it is one of the places where risks intensify, as the conditions therein differ fundamentally from the normal lifestyle in terms of temperature, humidity, purity or pollution of the surrounding air, and the nature of the operations that take place. Every day, many materials with unusual properties are circulated, some of which are toxic, some are suffocating, and some are incendiary and caustic. The security management program aims to protect employees, patients, visitors, contractors, volunteers, and private individuals from exposure to harm. A risk assessment is conducted to determine the elements of the plan, including all elements of external sites. Security is freedom from or resistance against potential harm (or any unwanted, coercive change) from external forces. The beneficiaries of security may be people, social groups, objects and institutions, ecosystems, and any other entity or phenomenon that may be vulnerable to any change occurring in any environment. Safety is an expression that indicates that a person is in a safe state and away from any form of risks, threats, or harm, whether on the physical, psychological, financial, economic, or political levels ⁽¹⁾⁽²⁾⁽³⁾. Safety in a practical context refers to occupational safety, which are the conditions and controls that ensure the safety of workers in their workplaces. Policy of security Manager and the on-duty safety and security officer at the tour day: 1- Teamwork and all resources should be enhanced to the greatest extent possible. 2- All entrances and exits to the center must be controlled. 3- The occurrence of safety incidents and risks should be reduced or prevented. 4- Proper identification should be provided for all employees, visitors and contractors. 5- Special procedures must be followed to control sensitive areas. 6- An on-the-job induction program and continuous education should be conducted for all employees. 7- Monitor and evaluate safety incidents to identify appropriate opportunities to develop the care provided. 8- Carrying out the annual evaluation of the security and safety plan and the performance and effectiveness goals. 9- The annual evaluation of the safety program includes a review of the following points: 9.1: The

desired purpose in accordance with national accreditation standards for health facilities. 9.2: Conduct an evaluation to compare expectations and results from the program, in order to determine the extent to which the goals and objectives have been achieved and the overall effectiveness of the program by determining the degree of expectations achieved. 9.3: Additional policies will be specified in each appendix to this program. ⁽⁴⁾

2-MATERIAL AND METHODS:

This study started in (the holy city of Mecca in Saudi Arabia), began writing the research and then recording the questionnaire in April 2023, and the study ended with data collection in September 2023. The researcher used the descriptive analytical approach that uses a quantitative or qualitative description of the social phenomenon (The importance of applying security and safety standards in health facilities), this kind of study is characterized by analysis, reason, objectivity, and reality, as it is concerned with individuals and societies, as it studies the variables and their effects on the health of the individual, society, and consumer, the spread of diseases and their relationship to demographic variables such as age, gender, nationality, and marital status. Status, occupation ⁽⁵⁾, And use the Excel 2010 Office suite histogram to arrange the results using: Frequency tables Percentages ⁽⁶⁾. A questionnaire is a remarkable and helpful tool for collecting a huge amount of data, however, researchers were not able to personally interview participants on the online survey, due to social distancing regulations at the time to prevent infection between participants and researchers and vice versa (not coronavirus participation completely disappearing from society). He only answered the questionnaire electronically, because the questionnaire consisted of twelve questions, all of which were closed He only answered the questionnaire electronically, the online approach has also been used to generate valid samples in similar studies in Saudi Arabia and elsewhere ⁽⁷⁾

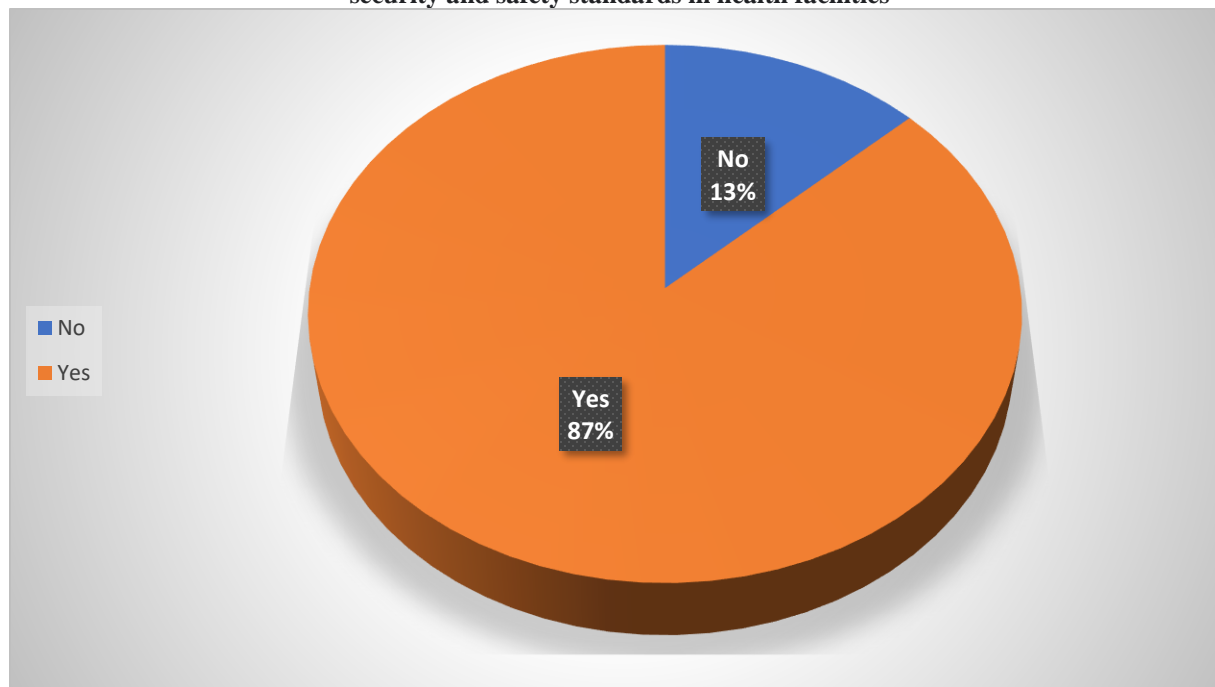
3- RESULTS:

The percentage of health practitioners who agreed to participate in the research questionnaire was 98.3%, while those who refused was 1.7%. The age percentage of male and female participants was as follows: 25-34 years old: 77.9%, 35-44 years old: 15.6%, 45-54 years old: 5%, and 55-60 years old: 1.5%. As for the gender of the participants, the percentage of males was 77%, while the percentage of female participants was 23%. As for the nationality of the participants, they were 99.2% Saudis, and 0.8% were non-Saudis. As for the professions of the participants, 68.4% of them were administrators, while

31.6% were technicians. As for their responses to the research questionnaire questions, they were as follows: The first question is: Do you have a written plan for the evacuation of employees in health facilities? The percentage of those who answered yes was 82% and the percentage of those who answered no was 18%. The second question is: Do you have a written plan for the evacuation of employees in health facilities in the event of a fire, God forbid? Yes 82% and no 18%. The third question: Do you have a written plan for security and safety standards in health facilities that is already implemented? Yes 80.3% and no 19.7%. The fourth question: Do you conduct inspection tours to implement security and safety standards in health facilities? Yes 88.5% and No 11.5%. The fifth question: Do you record cases of serious events that occur to you in health facilities? The percentage of those who said yes was 88.1% and

no was 13.9%. The sixth question: Are all security and safety standards applied in health facilities? Yes 86.9%, no 13.1%. The seventh question: Have there been cases of attacks by citizens on you? Yes 24.2%, and no 75.8%. The eighth question: Have any cases of serious incidents (security and safety) been recorded in health facilities? Yes 33.3% and No 66.7%. The ninth question: Do you adhere to the official security and safety uniforms in health facilities? Yes 91.7% and no 8.3%. The tenth question: Do you adhere to the security and safety identification card in health facilities? Yes 92.5%, no 7.5%. The eleventh question: have you ever accompanied an inspection committee from the Ministry to inspect the facility for its health? Yes, 65.3%, and No, 34.7%. As for the last question: Do you have enough security and safety employees in health facilities? 73.6% answered yes and 26.4% answered no.(figure No.1).

Figure N0.1: Opinions and trends of health practitioners and practices about the importance of applying security and safety standards in health facilities



4-DISCUSSION:

The current study finds that, from the opinions and trends of health practitioners and practices regarding the importance of applying security and safety standards in health facilities, we find that the majority of them believe in applying security and safety standards in health facilities at a rate of 86.9%, and this is because employees suffer harassment from employees, especially those who are psychologically disturbed.

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