

Evaluation of Patient Medical Record System Management Based on the Public Health Number 269 Of 2008 at Puskesmas Talise

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ABSTRACT

Efforts to achieve a fair and correct medical record management system, containing notes and documents about patient identity, medical examinations, medication, actions, and other services. The type of research used is descriptive with a qualitative approach, using data collection techniques, observation, interviews and documentation, informants' determination using purposive sampling totaling six people, namely, the Head of Talise Health Center 1 person, three medical record officers, and two patients. The results showed that the Standard Operational Procedure (SPO) policy was still in the process of changing the SOP for the medical records section. Human Resources still needed to increase the number of employees with special competence, expertise, and skills in the medical record section. Has not been recorded in the organizational structure. It is recommended that Talise Puskesmas use the Health Metrics Network Evaluation Framework, which is very good in evaluating the medical record system in the Operational Service Standards (SPO), HR, and Organization policies section of these medical records so that it can increase the quality of Puskesmas services and can develop further.

Keywords - Evaluation, SPO Policy, Organization in a medical record system

INTRODUCTION

Health is one of the basic needs of every human being; without health, humans will not do activities as they should (1). To improve or manage public health, the government has established hospitals, Puskesmas, or health clinics that serve public health problems scattered throughout Indonesia. According to law no. 44 of 2009, health service institutions that provide complete and competent individual health services that provide inpatient, outpatient, and emergency services must be able to provide curative and preventive health services and provide outpatient and inpatient services. According to the Ministry of Health Number: 377 / Menkes / SK / III / 2007 concerning the Professional Standards for Medical Recorders and Health Information, one of the seven competencies of a medical recorder is the management of the health information / medical record management work unit, namely a medical writer capable of managing work units related to planning, organizing,

structuring and controlling the health information management work unit (MIK) / medical records (RM) in health service installations (2).

In Indonesia, the legal basis for the use of medical records in a health care institution is protected by Law no. 11 of 2008 concerning Information Permenkes No. 269 of 2008 concerning Medical Records and Kepmenkes No. 55 of 2013 concerning the Implementation of Medical Recorder Jobs. This legal basis can be used as a regular basis for records (2).

According to WHO (World Health Organization), Medical Records monitor medical records, namely to ensure that the medical records will be moved each time from storage for any purpose, indicating where the medical records have been sent—also called outside in many countries. Tracer or outside allows medical records to be traced when not in storage (3).

Puskesmas is one of the strategic health service facilities supporting the realization of changes in public health status towards increasing optimal health status. To achieve an optimal health degree, it is necessary to develop a primary health service system that can meet the community's needs, including by increasing the quality of medical recording activities (4).

The medical record is an assessment of the quality of health services. Medical history is a file containing notes and documents regarding the patient's identity, examination, treatment, actions, and services provided by health workers to patients. Recording medical records can describe the quality of health services provided to patients and contribute essential things in health law, education, research, and accreditation at Puskesmas. Medical records contain confidential information and must be kept confidential. This is following Article 12 of the Regulation of the Minister of Health of the Republic of Indonesia Number 269 of 2008 concerning Medical Records, which explains that the contents of the medical record belong to the patient, while the medical record files (physically) belong to the Puskesmas or health institutions. This medical record is bound to the doctor's job secret, regulated in a Government Regulation (5).

Based on the results of observations made by researchers at Talise Public Health Center, it shows that there are obstacles or obstacles with the management of the patient's medical record system that is not following Permenkes number 269 of 2008 because the health personnel in charge of the medical record cannot be able to work optimally due to the absence of a flow of receipt of examination results medical patients who are not following the Standard Operational Service (SPO) for health services following the provisions of the applicable organization at Talise Health Center.

Also, the condition of the number of health workers who were placed in the medical record section in terms of numbers and competence of expertise and skills had not been able to show optimal performance, so that researchers were interested and took the research title Evaluation of patient medical record system management based on Permenkes number 269 of 2008 at Talise Health Center.

METHODOLOGY

The type of research used is descriptive with a qualitative approach, which is a study that emphasizes the in-depth understanding of a problem and aims to understand social phenomena from the participant's point of views such as behavior, perception, motivation, action, and others in a holistic and using description in the form of words and language, in a direct natural context and by making use of various natural methods (6).

RESULTS AND DISCUSSION

Standard Operating Procedure (SPO) Policy

The term Standard Procedure Policy (SPO) is used in law number 4 of 2004 concerning medical practice and law number 44 of 2009 concerning hospitals, the policies that underlie the SPO are then followed by policies and regulations/decisions of the related policies containing documents as a reference for SOP preparation, can be in the form of a book, laws, and regulations (7). the procedure steps are the main parts that describe the activities to complete the work process (8).

Based on the results of direct interviews of researchers regarding the SPO Standards for the medical record section according to an informant named Reska Pasule:

"He said that the SOP had been carried out, but for the time being, the SPO section has been changed again, so by making changes to the medical record section so that it can be carried out properly in the medical record section. As the head of medical records, he must be able to master in the field of medic records" (RP, June 25, 2020).

Human Resources (HR)

Human resources are the primary and strategic factors for successfully developing and human resource development in the health sector. It is a strategic component of health development to accelerate the distribution of health services and achieve health goals and the achievement of health development goals (9).

"People all work in this section, they have won a decree issued by the Puskesmas, not just the ones in the sky, it takes a fair amount of time to study here, starting from looking for books, register to bioanalysis, everything is guided and still early learning together too Touring to be safe in the service of human resources for medical records is that there are three people, each of whom has D3 medical record education, one person all of whom have met their qualifications. Human resources have an essential role in every organizational activity" (RP June 25, 2020).

Organizational structure

Organizational structure is an arrangement and relationship between each part and position in an organization in carrying out an operational activity to achieve its goals; the organizational structure clearly describes the separation of work activities between one another (10).

"What is an obstacle to the Organizational Structure Section of this puskesmas is that there has not been an organizational structure in the patient's medical record system so that

the medical record officer conducts deliberations with the medical record staff" (J, June 26, 2020).

Interview with informants regarding officers' obstacles when serving medical records, only the medical record book tucked into our block.

Based on the results of research interviews conducted at Talise Public Health Center, it turns out that the most common obstacle is the delay of counter service officers.

Patient Medical Record Service Flow

Medical record services are a collection of information on identity, examination results, and records of all health service role activities for patients from the time the study results were obtained that the medical records at the Puskesmas indicate the results of these medical records (11).

According to the interview results, the recording department was still manual or written in the album book and partly through the computer, especially the afternoon health service.

"The recording of the touring uses three different albums, and some are general (for those who don't have BPJS), non-PBI (Askes, Jamsostek, and Mandiri), and PBI (Jamkesmas and Jamkesda)" (J, June 30, 2020).

"If the recording is manual and some are digital, if the digital one is the recording done in the evening service, the patient registration is done digitally on a computer, then stay in the prin and no longer record on the album because the files are already stored on the computer server and if Make a monthly report, just take it in the PRIN on a computer, why is it done on a computer because there are not many patients like morning patients" (J, June 30, 2020).

"The patient registers and takes the queue number at the counter and waits for the queue number, then after calling the queue number, if the patient is new, the patient fills in the new patient registration form that has been provided, then the registration officer inputs the patient's identity, makes a medical card to be given to New patients must be brought if the patient is re-treated and prepares a new patient's medical record file, in contrast to the old patient the procedure is not as complicated as the old patient because the old patient is registered in the patient database, while new patients must register first at the counter and waiting for the officer to input the patient's identity" (J, June 30, 2020).

Patient Service Procedures, researchers interviewed Reska papule informants from the interview results regarding patient service procedures in the medical record section that had been carried out correctly.

"Polyclinic officers record in the polyclinic patient register book, among other things: date of visit, patient name, medical record number, type of visit, action/service provided, the examining doctor records the history of the disease, examination results, diagnosis, and the disease in the medical record. Polyclinic officers (nurses/midwives) make daily reports of patients. After the provision of health services at the polyclinic is completed, the polyclinic officers send all patient Medical Records files and the patient's daily, Medical Records no later than 1 hour before the end of working hours. The Medical Record Officer checks the

completeness of filling in the Medical Record and for those that are incomplete, the completeness is immediately sought" (RP, June 30, 2020).

"If the flow of medical records is currently running, because there are new rules in the management of medical records, so a lot has to be changed and starting from numbering and registering new patients both in the region and outside the hammer city area" (M, 27, June 2020).

Evaluate the management of the patient's medical record system

To distinguish the patient medical record system service assessment, whether it has gone according to plan, the patient's medical record system's management is maximal as expected. Evaluation is needed to determine the quality of health services provided by health workers, at the Puskesmas and to find out the extent of the development of health services provided to patients, whether they have increased or decreased (12).

"Here we are evaluating the medical record system so that it can be well directed and not easily scattered everywhere the medical record is" (RP, June 26, 2020).

"After every day, our waiter evaluates how many visits each day and performs manual analysis on the album, so that if a patient comes back and forgets the treatment card, we can see it on the album" (RM, June 27, 2020).

Based on the results of research interviews, the evaluation of patients' medical records at Talise Public Health Center is right in digital terms, where all patient data is stored neatly and regularly based on the Puskesmas work area, and can also facilitate the search for Medical Records numbers for patients who forget to bring their medical card at the time. Come for treatment.

Working hours at Talise Health Center

Government agencies first carry out services in their respective environments at the central and regional levels. In these service work units, it will be evaluated to determine each service's nature (13). The working day provisions for civil servants are regulated in article 3 point 11 of government regulation number 53 of 2010 concerning civil servants' discipline, which obliges civil servants to come to work and comply with work conditions.

"Our working hours at Talise puskesmas are at least 8 hours of work, this is the morning apple at 7:45 am then we continue to work according to our respective duties and work hours go home if Monday-Friday we return at noon but if the day is Saturday at 11: 45 have come home from work means working hours at the Talise puskesmas are five hours of work while at the puskesmas" (RM, June 25, 2020).

"The hours come in the morning because the appleapi is usually done at 07.30 and 08.00 we have opened the whole service, starting from the counters and roaring health policymakers here" (RP, June 30, 2020).

"Well, the minimum working hours are 8 hours, because we go back at 14.00 while we close the service at 12.00. If many patients usually pass until 12.00" (M, June 25, 2020).

Patient Satisfaction Services at Counters

To find out about patient satisfaction services at the counter, patients are expected to feel satisfaction. Patients are defined as customer responses to dissatisfaction between

previous interests of the actual performance after experiencing service to their satisfaction. If the arrangement meets expectations, the patient will feel satisfied. Vice versa, if the commission does not meet expectations, the patient will not feel happy with the service.

"If I feel good at serving me, dorang Rama, kind and patient too when dealing with a patient who wants to be served quickly, even though it has to be in line with the queue when the queue comes first then waiting to be called, I salute the person who can bear anger because people are aware. Maybe people have to serve patients patiently to avoid talking if the counter is not good to serve patients" (SW, June 25, 2020).

"If I am satisfied with the counter people, I am with me, and I often play around so that people don't get tense if there are lots of noodles, especially if I am an old patient, I have memorized my face until my book number too, hehe, good. Serve me, and I am happy to come for treatment here" (RD, June 25, 2020).

"I am delighted with the counter people, both the noodles and the people who come for treatment, especially if the counters are usually closed, there are still people who come to ask for help, they are still being served noodles" (RD June 25, 2020).

"If I don't see a problem with the people in the sky, because I also came at 9 or 10 so I don't know what the problem is, usually the long queue number is called, that's also because someone is serving the first queue. There is a problem; I usually forget that the medical card, forget the noodles, are they old, heheheh" (RD, June 25, 2020).

Based on the research interview results, the ticket window clerk had worked as much as possible so that all patients were served according to the number and fast.

Policy (SPO)

Policies and procedures must be in the place that reflects the medical record unit's management and become a reference for medical record staff in charge of the medical records department. The procedures are as follows: 1) Its implementation needs to be real, not just written. 2) Evaluation must be carried out continuously to run better, not only a mere existence. 3) There is an annual evaluation of the destruction of medical records so that improvement efforts can run well.

Human Resources (HR)

Medical record officers are a significant aspect of medical record services at Puskesmas. The medical record officer has a significant duty and responsibility in maintaining a medical record's integrity. Medical records officers are expected to know the ins and outs of medical records widely and deeply. From the results of the interview, it is known that human resources in the medical records section are still lacking because only one officer has a medical record education background. There is five personnel available in the registration and medical records section, and only one person has a medical record education background. Besides that, they have an education in midwifery and SKM. Based on the number of employees at Talise Public Health Center, it is sufficient for the needs. At the same time, in terms of quality and skills, there is still a need for an additional workforce with a medical record education background so that they can work according to their

expertise or improve the development of insights and skills by involving employees. That is in education and training related to management in the medical record system.

Organizational structure

There is no organizational structure in the medical records unit. To solve the problem, you must conduct a discussion with the medical record staff. However, it is hoped that the medical records department at the Talise Health Center must make the organizational structure at the Talise Health Center to be better for the Puskesmas.

CONCLUSION

This study concludes that the Standard Operating Procedure (SPO) policy, the part of managing the patient's medical record system at Talise Public Health Center, is still in the process of changing the SPO in the medical records section. Human resources. The number of employees in the medical record division at Talise Public Health Center is adequate for medical services. However, there is still a need to add personnel and improve the medical record section's quality of health service performance. The patient medical record management system's organizational structure has not yet been formed. An organizational structure related to medical records to Talise Health Center's organizational structure has not been created.

SUGGESTION

Recommendations to the Talise Puskesmas, especially in the medical record section, further develop and advance the Puskesmas in providing the best service to patients.

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