

**Analysis Of Time Analysis Of Outstanding Medical Records To Improve The
Quality Of Services At Dustira Hospital, Cimahi**

Imam Rosadi, Muhammad Iqbal Purnama

Akademi Perekam Medis dan Informatika Kesehatan (APIKES) Bandung, Indonesia

Imamrosadi1919@gmail.com, Iqbal.purnama40@gmail.com

Article Information

**Submitted: 15 Ok
2021**

**Accepted: 17 Ok
2021**

**Publish Online: 28
Ok 2021**

Abstract

The provision of medical record files depends on the availability of data, clear and accurate information. The speed of providing medical record files is one indicator of the quality of service in medical records. The purpose of the study was to determine the achievement of the Minimum Service Standards in the medical record unit in providing medical record files. The research method uses descriptive methods with a qualitative approach. Data collection was carried out for 5 days by recording the hours the patient registered in the outpatient registration section until the time the medical record file was found, located at the hospital. Dustira Cimahi. The result is as many as 2090 or 86,1% of medical record files with a provisioning time of ≤ 10 minutes, 340 or 13,9% of medical record files requiring a provisioning time of > 10 minutes. The conclusion is based on the provision of medical record files at the hospital. Dustira has met the minimum service standards with the set waiting time standards for outpatient services which is an average of <60 minutes, it is recommended to maintain and improve the quality of service.

Keywords: Provision; Medical Record Files; Time;

Introduction

A medical record is a record of who, what, why, when, and how the services provided to patients during the treatment period, which contain knowledge about patients and services obtained and contain sufficient information to identify patients, justify the diagnosis, and treatment. and record the results (Budi, 2011). Medical Records have the value of responsible information and each related unit needs to provide support to the medical record unit which should be done quickly.

Based on the Decree of the Minister of Health of the Republic of Indonesia no. 129/ Menkes/ SK/II/2008 concerning Minimum Service Standards that Minimum service standards that must be carried out in the medical record unit include the time for providing medical record documents for outpatient services that must be available in less than 10 minutes..

The speed in providing medical record files to the polyclinic in the service is one indicator of the quality of service in the medical record. The faster the medical record file arrives at the polyclinic, the faster the services provided to patients, so the waiting time for services is one indicator of patient satisfaction that will affect the quality of hospital services.

Medical record is a file that contains records and documents regarding patient identification, history taking, examination, diagnosis, treatment, action, and other services provided to a patient while being hospitalized which is carried out in outpatient units, including emergency and emergency units. inpatient. (Decree of the Director General of Medical Services, Ministry of Health, Republic of Indonesia Number 78 of 1991). According to Permenkes 269/2008 concerning medical records in article 1 paragraph 1, medical records are files that contain notes and documents about patient identity, examination, treatment, action, and other services that have been provided to patients

Minimum Service Standard

Minimum service standards are provisions regarding the type and quality of basic services which are mandatory regional affairs that every citizen has the right to obtain at a minimum. It is also a technical specification of the minimum service standards provided by public service agencies to the community. (KEPMENKES NO:129/MENKES/SK/II/2008).

Table 1 : Minimum Service Standards in the medical record unit are:

NO.	Kind Of Service	Indikator	Standar
1.	Medical Record	Completeness of filling in medical records 24 hours after completion of service	100 %
		Completeness of informed consent after getting clear information	100 %
		Time for providing outpatient medical record documents	< 10 minute
		Time for providing inpatient medical record documents	<15 minute

Service Waiting Time

Waiting time is the time it takes from the time the patient registers until he is served by a specialist. The purpose of waiting time for the availability of specialist outpatient services on weekdays in every hospital that is easily and quickly accessed by patients (DepKes RI, 2008). Based on the standard of providing medical record documents, outpatient services are a maximum of 10 minutes (DepKes RI, 2008).

Method

This research is a research that uses a descriptive method with a qualitative approach. The technique used to collect data is by recording in the expedition book starting from the time the patient registers at the outpatient registration section until the time the medical record file is found. the sample was taken for 5 days on April 13-17, 2020 as many as 2430 Medical Record files.

Research Result

Sampling was carried out for 5 days, starting from Monday to Friday aiming to get an overview of the time of providing outpatient medical record files that occurred for 5 days, research hours were taken at 9.30 to 12.00

Table 4 . Spread Time Files

Time	Monday	Tuesday	Wednes day	Thursd ay	Friday	Total	Persentase
<10minut e	545	391	342	432	380	2090	86,1 %
20-30	-	-	53	-	-	53	2,1 %
31-40	-	-	-	-	48	48	2 %
41-50	-	67	-	82	-	149	6,1 %
51-60	90	-	-	-	-	90	3,7 %
Total	635	458	395	514	428	2430	100 %

In table 4. Attached is data on a number of patients who registered at Dustira Hospital for 5 days, totaling 2430 patients. 86.1% of patients or 2090 patients received the provision of medical record files with a time of less than or equal to 10 minutes, while 13.9% of patients or 349 patients received the provision of medical record files of more than 10 minutes. According to Sugiarti & Andria (2015) based on the minimum service standards issued by the Ministry of Health (2007) it is stated that the provision of medical record documents is from the time the patient registers until the medical record document is provided, or can be used for services and the minimum standard is 10 minutes. Looking at the data obtained from the results of the study, 86.1% of patients received medical record files in accordance with minimum service standards, and 13.9% included in the slow category because the files were provided in more than 10 minutes.

The delay in providing files is influenced by several factors, namely: Medical record file storage errors, Unavailability of Tracer or cards to monitor the exit of medical record files from storage racks, and storage shelf capacity is too full so medical record files are difficult to find. Sudrajat & Sugiarti (2015) state that the factors that cause delays in providing medical record documents include: 1). The number of service providers is limited or still lacking; 2). Lack of storage rack facilities.

Conclusion

86.1% of patients or 2090 patients received the provision of medical record files with a time of less than or equal to 10 minutes, while 13.9% of patients or 349 patients received the provision of medical record files of more than 10 minutes. Provision of medical record files in hospitals. Dustira has met the minimum service standard with the standard waiting time for outpatient services, which is an average of < 60 minutes. The delay in providing files is influenced by several factors, namely: Medical record file storage errors, Unavailability of Tracer or cards to monitor the exit of medical record files from storage racks, and storage shelf capacity is too full so medical record files are difficult to find.

BIBLIOGRAPHY

- Andrian, F. D. & Sugiarti, I. (2015), Tinjauan Penyediaan Dokumen Rekam Medis Di RSUD Dr.Ssoekardjo Kota Taksimalaya, Jurnal, Poltekkes Kemenkes Taksimalaya.
- Budi, S. C. (2011). Manajemen unit kerja rekam medis. *Yogyakarta: Quantum Sinergis Media*
- Departemen Kesehatan Republik Indonesia. (2007), Pedoman Penyelenggaraan Pelayanan Rumah Sakit. Jakarta: Direktorat Jenderal Bina Pelayanan Medik
- Depkes RI. (2006). Pedoman Penyelenggaraan dan Prosedur Rekam Medis Rumah Sakit di Indonesia, Jakarta (2008). Standar Pelayanan Minimal Rumah Sakit, Jakarta
- Kemenkes RI Nomor 129/Menkes/SK/II/2008, Tentang Standar Pelayanan Rumah Sakit.
- KEPMENKES NO : 129/MENKES/SK/II/2008, Standar Pelayanan minimal
- SK. Dirjen Pelayanan Medik Depkes RI Nomor 78 Tahun 1991, Rekam medis
- Sudraja, I. & Sugiarti, I. (2015), Hubungan Kecepatan Penyediaan Dokumen Rekam Medis Rawat Jalan Dengan Tingkat Kepuasan Pasien, Jurnal, Dosen Program Studi D III Pikes Poltekkes Kemenkes Tasikmalaya.