



Service culture assessment focusing on the use value of medical records and health information in hajj general hospital Makassar city Indonesia

Muhammad Thabran Talib

Panakkukang College of Health Sciences Makassar City, South Sulawesi, Indonesia

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ABSTRACT

Health workers as one of the main components in providing health services to the community have a very important role because they are directly related to the quality of service. The purpose of this study was to determine the results of a service culture assessment that focuses on the use value of Medical Records and Health Information. The method used in this study was quantitative analysis, this study used a cross-sectional approach, from January to March 2022, with the inclusion criteria being Professional Caring Providers, a sample of 132 respondents consisting of 42 doctors and 90 nurses. The results of the study show that 84.54% of the caregivers have successfully implemented a culture of service. In the discussion, the new Professional Caring Provider implements a service culture that focuses on the use value of patient medical records, namely the lowest value is 15 and is not optimal. The non-optimal patient-focused service culture may be due to the fact that professional care givers have not received training, patients have waited a long time for service delivery, professional collaboration has not existed and the need to improve communication. Skills. A patient-focused service culture can work well if Caregiving Professionals are able to build trust from their patients with effective communication, empathy, and caring. Suggestion, it is necessary to increase socialization related to the implementation of instilling value for medical records to all parties involved in the patient information service process.

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**) corresponding author*

Muhammad Thabran Talib

Panakkukang College of Health Sciences
Makassar City, Jl. Adiyaksa No.5, Masale,
Kec. Panakkukang, Kota Makassar, Sulawesi
Selatan 90222

Email: thabrantalib7@gmail.com
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ABSTRAK

Tenaga Kesehatan sebagai salah satu komponen utama dalam memberikan pelayanan kesehatan kepada masyarakat memiliki peran yang sangat penting karena berhubungan langsung dengan mutu pelayanan. Tujuan penelitian ini untuk mengetahui hasil penilaian budaya pelayanan yang menitikberatkan pada nilai guna Rekam Medis dan Informasi Kesehatan. Metode yang digunakan dalam penelitian ini adalah dengan analisis kuantitatif, penelitian ini menggunakan pendekatan cross-sectional, dari bulan Januari sampai Maret 2022, dengan kriteria inklusi adalah Professional Caring Provider, sampel sebanyak 132 responden yang terdiri dari 42 dokter dan 90 perawat. Hasil penelitian menunjukkan bahwa budaya pelayanan telah berhasil dilaksanakan oleh 84,54% Tenaga Pengasuh. Dalam pembahasannya, Professional Caring Provider yang baru menerapkan budaya pelayanan yang menitikberatkan pada nilai guna rekam medis pasien yaitu nilai terendah adalah 15 dan belum optimal. Budaya layanan yang berfokus pada pasien yang tidak optimal mungkin disebabkan oleh fakta bahwa pemberi perawatan profesional belum mendapatkan pelatihan, pasien telah menunggu lama untuk pemberian layanan, kolaborasi profesional belum terjalin dan kebutuhan untuk

meningkatkan komunikasi keterampilan. Budaya pelayanan yang berfokus pada pasien dapat bekerja dengan baik jika Caregiving Professionals mampu membangun kepercayaan dari pasiennya dengan komunikasi, empati, dan kepedulian yang efektif. Saran, Perlu peningkatan sosialisasi terkait pelaksanaan penanaman nilai guna rekam medis kepada semua pihak yang terlibat dalam proses pelayanan informasi pasien.

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INTRODUCTION

Today's public services by government and private officials still encounter many weaknesses so that they have not been able to meet the quality expected by the community. This is indicated by the existence of various public complaints conveyed through the mass media, which can lead to an unfavorable image of the apparatus. Given that its main function is to serve the community, the apparatus needs to continue to strive to improve the quality of service. Public service is an activity or series of activities in the context of fulfilling service needs in accordance with statutory regulations for every citizen and resident for goods, services and/or administrative services provided by the administrator (UU 25/2009, Public Service).

Service standard is a benchmark that is used as a guideline for service delivery and a reference for assessing service quality as an obligation and promise of administrators to the community in the framework of quality, fast, easy, affordable and measurable services. Improving health services is aimed at increasing awareness, convenience and the ability to live healthy for every citizen in order to achieve optimal health status as one of the elements of general welfare as mandated in the preamble of the 1945 Constitution of the Republic of Indonesia. Health workers as one of the main components of providing health services to the community have a very important role because they are directly related to the quality of service. The implementation of health efforts must be carried out by doctors and dentists who have high ethics and morals, justice and authority which must be continuously improved. One of the main elements in an excellent health care system is the availability of medical services by doctors and dentists with quality that is maintained in accordance with the mandate of Law Number 29 of 2004 concerning Medical Practice.

In carrying out medical practice, every doctor and dentist must refer to the applicable standards, guidelines and procedures so that the public gets medical services in a professional and safe manner (Suhartatik et al., 2022). According to Geertz, culture is human knowledge which is believed to be true by those concerned and which is shrouded and envelops human feelings and emotions and becomes a source for the evaluation system of something good and bad, something valuable or not, something clean or dirty, and so on. This can happen because culture is shrouded in moral values, the source of which is the outlook on life and the ethos or ethical system that every human being has (Elly et al., 2022). When sociologists talk about culture, what is referred to by the concept are norms, values, beliefs or expressive symbols. Norms are the way humans behave in society, values are what they hold firmly, beliefs are how they think about how the universe works, expressive symbols are representations of those norms, values and beliefs. Currently this understanding of culture is also added

to practice. Culture, nowadays, is used to describe patterns of behavior, which are not necessarily connected with certain values or beliefs (Elly et al., 2022).

Functions of Medical Records Medical records are very important in addition to diagnosis and treatment as well as for evaluating health services, increasing work efficiency through reducing mortality and motility as well as more perfect patient care. The medical record must contain complete information about the process of medical services in the past, present and expected to occur in the future. Ownership (Hatta & Gamela, 2010). The use value of medical records can be seen from various aspects of medical record services so that they can become health information in patient care.

This will be the Service Culture Assessment which focuses on Medical Records and Health Information with the following description. 1) Medical, Medical records have medical value because these records are used as the basis for planning treatment and care to be given. 2) Administration, Medical records have an administrative meaning because their contents involve actions based on authority and responsibility for health workers. 3) Legal, Medical records have legal value because their contents concern the issue of guaranteeing legal certainty on the basis of justice in an effort to uphold the law and evidence to uphold justice. 4) Financial, medical records can be material for determining the payment of health care costs. 5) Research. Medical records have research value because they contain data or information as an aspect of research and development of science in the health sector. 6) Education, Medical records have educational value because they involve information data about chronological developments, medical services to patients that can be studied. 7) Documentation. Medical records have documentation value because they are sources that are used as material for accountability and reports, which is an acronym named Malfred (Hario, 2018).

So this medical record has the meaning as a written statement or record regarding identity, anamnesis, physical examination, laboratory examination, radiology, diagnosis, all services and medical actions provided to patients both outpatient, inpatient, and emergency services provided. to the patient. For this reason, medical records have a broader meaning besides recording activities but also the medical record management system. Medical record management is a process that begins when a patient enters treatment at a health care facility. Medical data during medical services is aimed at handling medical record files including management and storage (Peraturan Menteri kesehatan, 2008).

The purpose of this study is to find out the results of a service culture assessment that focuses on the use value of Medical Records and Health Information which includes the use value of Medical, Administration, Legal, Financial, Research, Education and Documentation with services

carried out by Professional Caring Providers at Regional General Hospitals Makassar Hajj.

METHODS

The type of research used is the Quantitative Analysis method. This study uses a cross-sectional approach with an evaluation of the success of a design that is general in nature at a time and is not followed continuously over a certain period of time. The study was conducted from January to March 2022, with inclusion criteria being Professional Caring Providers (PPA) doctors and nurses who provide direct care services to patients and are willing to become respondents by signing informed consent and filling out questionnaires according to their opinion. The questionnaire given consisted of 24 variable statements which were divided into two Janis, namely the variable about MALFRED's culture and the variable about Medical Record Services and Health Information. With a sample of 132 respondents consisting of 42 doctors and 90 nurses. The questionnaire uses a Likert scale with responses from 1 to 4, namely Very Good Culture (4), Good Culture (3), Poor Culture (2), Very Poor Culture (1). The results of the scores on these scores are described by the percentage that, Very Good Culture 75.00% -100%, Good Culture 50.00% -74.99%, Poor Culture 25.00% -49.99%, Very Poor Culture 0% -24.99%.

RESULT AND DISCUSSION

The results of the 132 respondents have filled out the research instrument properly, so the distribution based on these characteristics can be described as follows:

Table 1. Characteristics of Respondents at the Makassar Hajj Regional General Hospital, 2022

Characteristics	Total	
	Total	%
Gender		
Female	81	61.36
Male	51	38.64
Age		
≤ 30 Years	25	18.94
30 – 40 Years	75	56.82
≥ 40 Years	32	24.24
Work experience		
≤ 5 Years	15	11.36
5 – 10 Years	44	33.33
≥ 10 Years	73	55.31
Profession		
Nurses	90	68.19
Doctor	42	31.81

Source: Primary data processed

Table 2. Medical Culture of Medical Record Services at the Haj Makassar Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Treatment Services	59	73	0	0	1,584
Care Services	66	64	2	0	
Supporting Services	92	40	0	0	
Total	217	177	2	0	
Total score	868	531	4	0	1,403

Source: Primary data processed

Medical Culture Presentation : Total score / Total highest score x 100%
 : 1,403 / 1,584 x 100% = 88.51%

obtained from 132 respondents, the total percentage rating was 88.51%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has an assessment result that the Medical Culture is Very Good as much as 88.51%.

The research results obtained by researchers on the medical culture assessment of Medical Record services were

Table 3. Culture of Administration of Medical Record Services at the Haj Makassar Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Data regularity	48	81	2	1	2,112
Information Accuracy	36	93	2	1	
Authority	61	68	3	0	
Implementation	49	80	2	1	
Total	194	322	9	3	
Total Score	776	966	18	3	1,763

Source: Primary data processed

Administration Culture Presentation : Total score / Total highest score x 100%
 : 1,763 / 2,112 x 100% = 83.47%

The research results obtained by researchers on the medical culture assessment of Medical Record services were obtained from 132 respondents, the total percentage rating was 83.47%. This means that the Service Culture Assessment

which focuses on Medical Records and Health Information in Hospitals has an assessment result that Administration Culture is Very Good as much as 83.47%

Table 4. Legal Culture of Medical Record Services at the Makassar Hajj Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Law enforcement	38	92	1	1	1,584
Guarantee of Justice	71	58	2	1	
Proof of Service	90	40	1	1	
Total	199	190	4	3	
Total score	798	570	8	3	1,379

Source: Primary data processed

Percentage of Legal Culture : Total score / Total highest score x 100%

$$: 1,379 / 1,584 \times 100\% = 87.06\%$$

The research results obtained by researchers on the medical culture assessment of Medical Record services were

obtained from 132 respondents, the total percentage rating was 87.06%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has an assessment result that the Legal Culture is Very Good as much as 87.06%

Table 5. Financial Culture of Medical Record Services at the Makassar Hajj Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Finance	66	65	1	0	1,584
Payment	70	60	2	0	
Fees/Services	80	50	2	0	
Total	216	175	5	0	
Total Score	864	525	10	0	1,399

Source: Primary data processed

Percentage of Financial Culture: Total score / Total highest score x 100%

$$: 1,399 / 1,584 \times 100\% = 88.32\%$$

The research results obtained by researchers on the medical culture assessment of Medical Record services

obtained from 132 respondents obtained a total percentage assessment of 88.32%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has an assessment result that the Financial Culture is Very Good as much as 88.32%

Table 6. Culture of Research on Medical Record Services at the Makassar Hajj Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Study	30	98	2	2	1,584
Science	33	95	2	2	
Research Problem Solutions	27	101	2	2	
Total	90	294	6	6	
Total Score	360	882	12	6	1,260

Source: Primary data processed

Research Culture Presentation: Total score / Total highest score x 100%

$$: 1,260 / 1,584 \times 100\% = 79.54\%$$

The research results obtained by researchers on the medical culture assessment of Medical Record services were

obtained from 132 respondents, the total percentage rating was 79.54%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has an assessment result that the Research Culture is Very Good as much as 79.54%.

Table 7. Educational Culture of Medical Record Services at the Makassar Hajj Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Teaching	44	82	3	3	1,584
Professional Learning	32	95	2	3	
Science Development	34	89	5	4	
Total	110	266	10	10	
Total Score	440	798	20	10	1,268

Source: Primary data processed

Percentage of Educational Culture : Total score / Total highest score x 100%
 : 1,268 / 1,584 x 100% = 80.05%

The research results obtained by researchers on the medical culture assessment of Medical Record services were

obtained from 132 respondents, the total percentage rating was 80.05%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has an assessment that the Education Culture is Very Good as much as 88.05%.

Table 8. Cultural Assessment of Medical Record Service Documentation at the Makassar Hajj Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Filing	55	70	5	2	1,584
Accountability	63	64	3	2	
Follow-up	85	40	4	3	
Total	203	174	12	7	
Total Score	812	522	24	7	1,365

Source: Primary data processed

Percentage of Documentation Culture : Total score / Total highest score x 100%
 : 1,365 / 1,584 x 100% = 86.17%

The research results obtained by researchers on the medical culture assessment of Medical Record services were

obtained from 132 respondents, the total percentage rating was 86.17%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has an assessment result that Documentation Culture is Very Good as much as 86.17%.

Table 9. Assessment of Medical Record Services at the Haj Makassar Regional General Hospital, 2022

Criteria	Medical Record Service Culture				Highest Score
	Very Good	Good	Less	Very Less	
Rekam Medis (RM)	53	75	3	1	1,056
Informasi Kesehatan (IK)	51	75	5	1	
Jumlah	104	150	8	2	
Jumlah Skore	416	450	8	2	876

Source: Primary data processed

RMIK Service Culture Percentage : Total score / Total highest score x 100%
 : 876 / 1,056 x 100% = 82.95%

The research results obtained by researchers on the medical culture assessment of Medical Record services were obtained from 132 respondents, the total percentage rating was 82.95%. This means that the Service Culture Assessment which focuses on Medical Records and Health Information in Hospitals has the result that the RMIK Service Culture is Very Good as much as 82.95%

MALFRED Culture Percentage Service : Total score / Total highest score x 100%
 : 10,713 / 12,672 x 100% = 84.54%

The research results obtained by researchers on the service culture assessment that focuses on medical records and health information at the Haji Regional General Hospital in Makassar City, the percentage assessment is 84.54%. This means that the service culture has been successfully implemented by 84.54% of Professional Caring Providers. This is an assessment by calculating the overall answers of respondents on each variable. This means that there is a success in the Service Culture assessment which focuses on Medical Records and Health Information in Hospitals with the Very Good category of 84.54%.

Table 10. Cultural Assessment of Medical Record Services at the Haj Makassar Regional General Hospital, 2022

Service Culture	Nilai	Nilai Tertinggi
Medical (M)	1,403	1,584
Administration (A)	1,763	2,112
Legal (L)	1,379	1,584
Financial (F)	1,399	1,584
Research (R)	1,260	1,584
Education (E)	1,268	1,584
Documentation (D)	1,365	1,584
Medical Record Service	876	1,056
Total	10,713	12,672

Source: Primary data processed

DISCUSSION

Research conducted on Medical, Administrative, Legal, Financial, Research, Education, Documentation cultural assessment focuses on the use value of Medical Record and Health Information services, has carried out activities in accordance with Health Information Management guidelines in Health service facilities (Hario et al., 2018). Primary users of individual health records: 1) Service providers (Providers) included in the primary group are those who provide direct services to patients, they consist of individuals or individual

health service providers which include doctors, nurses/nurses, other supporting health professionals and clinician. This group enters information into the health record directly. The existence of a health record will avoid the forgetfulness of health workers when handling large numbers of patients: 2) consumers who are included in the primary group are patients and their families who also need information on their own health records for various purposes (Talib, 2021).

For this reason, it is necessary to consider the urgency of the needs, aims and objectives of patient health information services. Secondary Use, 1) service managers and patient support are parties who use health records directly. This group uses health record data to assess the performance of health facilities, improve service processes, infrastructure and utilization of services provided; 2) The replacement party for treatment costs, this group will examine the extent to which the diagnosis is related to the cost of treatment. Sometimes the insurer requires data about certain information, the patient's health record along with the bill. It is not justified for the hospital to take a working diagnosis from the treatment room as a final diagnosis and forward it to the insurance company; 3) other secondary users are patient offices, lawyers, researchers or clinic investigators, health journalists, policy makers, government and private institutions which are stakeholders authorized by the state. Health and clinical service researchers use aggregate patient data, impacts and benefits and look for methods of improving services for the future (Hario, 2018).

Medical Culture, Administration, Legal, Financial, Research, Education and Documentation

Cultural manifestations: 1) Complex ideas, ideas, values and norms (value systems or culture); 2) Complex activity pattern of human behavior in society (social system). Universal cultural elements: 1) Social systems and organizations; 2) Knowledge system; 3) Language; 4) Technology systems and equipment. Culture, it seems that this is familiar to us, especially when it is related to our country, Indonesia, which has many cultures in every tribe and region. Then thoughts arise in our minds to study that culture, but maybe even among us when we want to learn something, we definitely want to know exactly what we are going to learn in order to understand it better (Elly, 2012). The type of method used is believed to have an impact on the completeness of medical record documentation in Ethiopia. Completeness is relatively higher in paper-based documentation. Currently, in addition to improving the quality of health services through the provision of appropriate information, medical records have become part of legal documents for the protection of patient safety (Adisu et al., 2020).

In hospitals, a well-organized filing system is essential for effective patient record keeping and retrieval. Health facilities must decide and choose the recording method that best serves the needs and demands of patient care to improve continuity of care and delivery of health services without delay in services. Victorian Hospital used shelving and filing cabinets. This was shown by 64% of respondents who mentioned the use of shelves, while 36% stated that there were both shelves and filing cabinets. The filing system used in folder storage depends on the existing medical record management system. For example, globally, many countries have realized the advantages of adopting a Health Information System which increases the use of Electronic Medical Records (EMR) (Huffman, 1994).

Health Information Medical Record Services

The results of the study also inform that there are still Care Provider Professionals who have just implemented a service culture that focuses on the use value of patient medical records, namely the lowest score is 15 and is not optimal. The non-optimal culture of patient-focused service may be due to the fact that care giving professionals have not received training, patients are waiting for a long time to provide services, professional collaboration has not yet been established and the need to improve communication skills. A patient-focused service culture can work well if the Care Provider is able to build trust from their patients with effective communication, empathy and care. Effective communication is an essential key in health services so that service quality is optimal (Addisu et al., 2020). According to WHO, medical records are important legal documents. In every country, medical records are essential for current and future patient care, for patient and hospital protection. Contrary to the reasons above, medical records must be properly managed so that they are available whenever needed.

Medical records are legal documents that should be treated properly and used by hospitals for continuity of patient care. Therefore, when a patient visits a hospital, there is an explicit contract between the hospital and the patient which requires care of the service and chronological records of care and treatment. Medical records are always considered as the property of the hospital which is kept for the benefit and continuity of patient care (Huffman, 1994).

Globally, more than 50% of electronic medical record projects fail before reaching the target (Djuariah et al., 2022), while many health facilities have tried to implement them with very low success rates. Medical record keeping is an integral part of good professional practice in providing quality health care. Regardless of the form of record (paper or electronic) maintaining good quality clinical records aids in better communication among professionals and also for continuity of care. Although there is great variability in clinical record formats among different health care professionals, hospitals, or countries medical records should be seen as a learning tool with its importance (Addisu et al., 2020).

The Service Culture Assessment focuses on Medical Records and Health Information

This will also help to ensure that every healthcare professional will have the information, reduce time lost through repeated tests, and prevent inappropriate diagnosis and treatment. In addition, medical records help to; helps target diagnosis and treatment without unnecessary repetition, improves time management, shares relevant information, assists in continuity of care, coordination of care, informed decision-making, provision of informative evidence in court, increases availability of data for risk assessment and causal and causal analysis audits (Addisu et al., 2020). Medical records are available in paper or electronic format. Some hospitals use both formats while others still use one of the two. The current trend shows that many countries are starting to realize the importance of incorporating Information Technology systems into the old system. Information Technology Systems have potential benefits such as improving the quality of care, improving communication among health professionals, and facilitating the accessibility and availability of medical information and data quality (Huffman, 1994).

Culture is often contrasted with something that is natural, something that we are acquired. Culture refers to the language, beliefs, norms, values, behavior and material objects passed down from one generation to the next. So in general, there are material cultural products (buildings, machines, etc.) and non-material (ways of thinking or norms, values, assumptions about the world and ways of acting, patterns of behavior). 1) Non-material products are symbolic products; the language that allows us to move beyond our own experience, shape our past and future (beyond our present), accumulate experience and give purpose to our activities and Values, norms, customs. 2) Material product, the core of material culture is technology. Technology establishes a framework for the non-material culture of a community. Changes on the material side can change the way of thinking, the way of relating, the internet changes the non-material side of culture. Social and cultural sciences are the total of human thoughts, works and works which are not rooted in their instincts and which can be sparked by humans after the learning process. Culture is the whole system of ideas, actions and results of human work in the context of community life which is made the property of humans by learning. Cultural manifestations are 1) Complex ideas, notions, values and norms (value systems or culture); 2) Complex activity pattern of human behavior in society (social system); and 3) Objects (systems of tools and technology).

Universal cultural elements; 1) Religious systems and religious ceremonies; 2) Social systems and organizations; 3) Knowledge system; 4) Language; 5) Art; 6) Livelihood system; 7) Technology systems and equipment. Culture, it seems that this is familiar to us, especially when it is related to our country, Indonesia, which has many cultures in every tribe and region. Then thoughts arise in our minds to study that culture, but maybe even among us when we want to learn something, we definitely want to know exactly what we are going to learn in order to understand it better. Back again about culture, what is culture, where did it come from, and why did the term get so famous.

Therefore, this paper will explain the definition and function of culture. Functions and Nature of Culture. In summary Soekanto (1990), suggests the use of culture for humans, namely to protect themselves against nature, regulate human relations and as a vessel for all human feelings. Soekanto further explained the essence of culture, namely: 1) Culture is realized and channeled from human behavior; 2) Culture existed prior to the birth of humans; although this is not always the case, because it is possible that culture was born from today's humans which can be witnessed or experienced by humans who were born before that culture existed; 3) Culture is needed by humans; 4) Culture includes rules that contain obligations, actions that are accepted or rejected, actions that are prohibited or permitted; and 5) Culture is not static, but dynamic, as humans and society that give birth to culture are also dynamic (Syahrir, 2018).

Culture and its functions, we hope to understand more. That it is necessary to understand that the concept of culture is not a single meaning concept, but rather a multi-meaning concept. The thing that needs to be considered is that culture cannot be separated from humans and society, because in itself culture is all the work, taste, creativity, and initiative of society, which includes rules that contain obligations, actions that are accepted or rejected, actions that are prohibited or permitted. And because of that, why can culture be used as an assessment of society and how society lives.

CONCLUSIONS AND SUGGESTIONS

Cultural Assessment of Medical, Administrative, Legal, Financial, Research, Education, Documentation on Services that focus on the Use Value of Medical Records and Health Information applied at the Haji Makassar Regional General Hospital, almost all of the Professional Caregivers have carried out when providing services to patients according to with the applicable provisions so that the culture of value for medical records is carried out properly. Understand their responsibility to guarantee. The implementation of cultivating the use value is fully implemented so that written evidence of the use of information by other parties is not yet strong in terms of the legal aspect of medical records. Hospitals are advised to improve and implement a culture of medical, administrative, legal, financial, research, education, documentation of service values for medical records and health information in a complete and comprehensive manner in the workspace of the patient care unit. It is necessary to increase socialization regarding the implementation of cultivating the use value of medical records to all parties involved in the patient information service process.

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