



## **THE EVALUATION OF MEDICAL RECORD FILES PROVISION AND DISTRIBUTION IN POLYCLINICS OF YOGYAKARTA REGION PUBLIC HOSPITAL**

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### **ABSTRACT**

Yogyakarta Region Public Hospital (RSUD Yogyakarta) is a B type Education Hospital with strategic location in the middle of Yogyakarta city. The results of the survey of Public satisfaction index in 2015 with responsive service category reached 72.01% with the conclusion of service quality B with good service unit performance. However, there were still complains existed whether the internal or external especially about long-awaited medical record. The objectives of this research were to analyze the process of providing and distributing medical record files of Yogyakarta Region Public Hospital policlinics, and analyze any possible factors related to the inaccurate timing of provision and distribution of medical record files in policlinics of RSUD Yogyakarta. This research applied mix method namely quantitative and qualitative. The population of polyclinic patients in 2015 was 108.451, sampling technique object by using purposive sampling gained 399 medical record files, while subject samplings were 2 registration staff, 2 filling staff, 1 tracer staff, 2 distribution staff, 2 verification staff, and 3 policlinic nurses. Data collection techniques were observation, interview, and documentation study. Quantitative data were analyzed descriptively, while qualitative data were analyzed using coding. The on time percentage of the provision and distribution of medical record files in accordance with the regulation of Health Minister (Permenkes) number 129 year 2008 was 13 medical record files or 3%, while the on time number of the provision and distribution of medical record files in accordance with hospital SPO was 106 medical record files or 27 %. The average time needed to the provision and distribution of medical record files was about 41 minutes 43 seconds. The punctuality of officers returning medical record files will help the punctuality in the provision and distribution of medical record files. Composing SPO in distribution is the main improvement effort as reference for the distribution of medical records file at RSUD Kota Yogyakarta.

**Key Words:** evaluation, provision, distribution, medical record

## INTRODUCTION

The health service institutions must always give the service to all people so that the optimal health degree can be achieved. This case encourages the improvement of health service in many institutions which is supported by several related factors, for instance by providing medical records in every health service facility. In health service area, the most important thing is to provide health services by giving information to hospitals, medical staff, and patients in order to meet the needs of hospital management especially related to obtain the data. The health service is one of people primer needs to achieve the optimal health.

Based on the regulation of Health Minister (*Permenkes*) number 269/menkes/Per/III/2008 about the medical record files, medical record file is a file that contains notes and documents such as patient identity, examination results, treatments that have been given, and other actions and services that have been given to the patient. The medical record unit is responsible for managing, collecting the data, processing, and presenting the patients' data into useful health information for decision making. In addition, health services have an administrative obligation to create, store and maintain medical records . The issue of medical records aims to obtain data from patients related to medical history, past and present illness, and also treatment that has been given to patients as an effort to improve health services. The information related to identity, diagnosis, history of the disease, history of the examination, and the patient's medical history must be kept confidential by the doctor, dentist, certain health staff, management officers, and leaders of health service facilities.

Based on *permenkes* number 129/Menkes/SK/II/2008 about minimum hospital service standards, the provision of standard medical record files in the provision of medical record files is  $\leq 10$  minutes, so in the provision of medical record files starting from the registration of the patient until the medical record provided / discovered by the officer is  $\geq 10$  minutes. According to Health Ministry Regulation (*Permenkes*) number 129 / Menkes / SK / II / 2008 on Minimum Hospital Service Standards, including promotive, preventive hospital is a health facility that organizes individual health services, including promotive preventive, curative, and rehabilitative services which mainly provides inpatient, outpatient, and emergency care services. The Hospital Minimum Service Standards is the provision of the service type and the basic quality services that become the compulsory matter of the area which must be acquired by all people minimally. Furthermore, it is also a specification about the minimum service benchmarks provided by public service agencies to the public.

A fast and accurate service in providing and distributing medical records can provide convenience to doctors in providing further services and provide satisfaction to patients because the examination will be done quickly without too much waiting for the arrival of medical records. Surely, the quick and accurate provision and distribution of medical records is not separated from the cooperation between various units in the hospital; because of the lack of optimization in the cooperation between units in the hospital, the provision and distribution of

medical record files will not go smoothly. In addition, SIM (management information system) also has an important influence in order to optimize the service, in which the management information system is a collection of subsystems that are mutually integrated and collaborate to assist management to solve problems and provide a good quality of information to management by processing the data with computer so that it gives added values and is useful for user, or by processing the data with computers so that it produces added values

The implementation of medical records is still not perfect, medical records are still considered not too important by some health service whereas the quality of medical records is a reflection of good or bad health services. Medical record is one of the data that can be used to prove malpractice case in court. The medical records are also one of the documentations of the patient's condition, and the contents of the medical record are considered confidential. Therefore, they must be kept confidential by every health worker. The delays in medical records cause the delays of taking care of the patients in the clinic. Consequently, doctors cannot immediately document the services already provided, and doctors cannot see what treatments have been done to the patients, so that it can lead to undesired effect.

The research study aimed at analyzing the process of medical record files provision and distribution in the polyclinics of Yogyakarta public hospital and analyzing any factors that cause the delays of medical record files provision and distribution to the polyclinics of the public hospital of Yogyakarta.

## **RESEARCH METHOD**

This research study used mix method namely quantitative and qualitative method. The quantitative method in this study were used to measure the average time required for the provision and distribution of medical record files, and to know the percentage of punctuality in the provision and distribution of medical record files up to the polyclinic of Yogyakarta Region Public Hospital. Meanwhile, the qualitative method in this research used interview and observation technique on medical record officer (*filing*), registration staff, verification staff, distribution staff, and polyclinic nurses of Yogyakarta Region Public Hospital. Therefore, qualitative method used in this research was applied to know any factors causing the tardiness on provision and distribution of medical record files arrived at the polyclinic in terms of input, process, and output factors.

The design of this study used a cross-sectional approach, a study where the cause or risk variables and the effects or cases occurring on the research object were measured or collected simultaneously at the same time. The number of medical records in outpatient Yogyakarta Region Public Hospital in 2015 was 108,451 with 300 medical record files per day as the average number.

## **RESULT OF THE RESEARCH STUDY**

Based on quantitative and qualitative data of the research that had been done, the following results were obtained:

Table 1 Respondent Profile

Respondent	Number	Percentage
<b>Sex</b>		
- Male		
- Female	7	58%
<b>Education</b>		
- SMA	5	42%
- D3	7	58%
- S1	4	33%
<b>Age</b>		
- 20- 30 years	1	8%
- 31-40 years	6	50%
- > 40 years	1	8%
	5	42%

Table 2 The Percentage of Punctuality on Provision and Distribution of Medical Record Files in Accordance with *Permenkes* Number 129 Year 2008.

Date	polyclinics	In accordance with <i>Permenkes</i>		Total	
			On Time		Overdue
02.07.2016	poly Neurology	F	2	67	69
		%	2.90%	97.10%	100.00%
14.09.2016	Poly Neurology	F	2	58	60
		%	3.30%	96.70%	100.00%
Total of poly Neurology		F	4	125	129
		%	3.10%	96.90%	100.00%
03.08.2016	Poly Cardiology	F	0	62	62
		%	0%	100.00%	100.00%
04.08.2016	Poly Surgery	F	3	36	39
		%	7.70%	92.30%	100.00%

Date	polyclinics	In accordance with <i>Permenkes</i>		Total	
			On Time		Overdue
07.08.2016	Poly Psychology	F	0	7	7
		%	0%	100.00%	100.00%
26.08.2016	Poly Psychology	F	2	14	16
		%	12.50%	87.50%	100.00%
The Total of Poly Psychology		F	2	21	23
		%	8.70%	91.30%	100.00%
09.08.2016	Poly Ophthalmic	F	0	17	17
		%	0%	100.00%	100.00%
06.09.2016	Poly Ophthalmic	F	0	37	37
		%	0%	100.00%	100.00%
The Total of Poly Ophthalmic		F	0	54	54
		%	0.00%	100.00%	100.00%
10.08.2016	Poly Otolaryngology	F	0	10	10
		%	0%	100.00%	100.00%
02.09.2016	Poly Otolaryngology	F	1	7	8
		%	12.50%	87.50%	100.00%
The Total of Poly Otolaryngology		F	1	17	18
		%	5.60%	94.40%	100.00%
22.08.2016	Poly Obsgyn	F	3	18	21
		%	14.30%	85.70%	100.00%
23.08.2016	Poly Paediatric	F	0	10	10

Date	polyclinics	In accordance with <i>Permenkes</i>		Total	
			On Time		Overdue
		%	0%	100.00%	100.00%
25.08.2016	Poly Dentistry	F	1	26	27
		%	3.70%	96.30%	100.00%
07.09.2016	Poly Dermatology	F	1	15	16
		%	6.20%	93.80%	100.00%
<b>Total</b>		<b>F</b>	<b>15</b>	<b>384</b>	<b>399</b>
		<b>%</b>	<b>3.80%</b>	<b>96.20%</b>	<b>100.00%</b>

The time required in the distribution was started from the medical record files that had been found to be distributed to the intended polyclinic. The on time medical record files in accordance with the *Permenkes* number 129 year 2008 were 15 medical records or 3.80% of the 399 medical record files, while the overdue medical record files were 384 record files or 96.20% of 399 medical record files. The total medical record files of 10 polyclinics which issued the files on time were 15 files. Meanwhile, the on time medical record files in accordance with the hospital SPO listed as follows:

Table 3 The Percentage of Punctuality on The Provision and Distribution of Medical Record Files in Accordance with SPO of Yogyakarta Region Public Hospital

Date	Polyclinics	In Accordance with <i>Permenkes</i>		Total	
			On Time		Overdue
		%			
02.07.2016	Poly Neurology	F	11	58	69
		%	15.90%	84.10%	100.00%
14.09.2016	Poly Neurology	F	12	48	60
		%	20.00%	80.00%	100.00%
The Total Poly Neurology		F	23	106	129
		%	17.80%	82.20%	100.00%

Date	Polyclinics	In Accordance with <i>Permenkes</i>		Total	
			On Time		Overdue
03.08.2016	Poly Internist	F	12	50	62
		%	19.40%	80.60%	100.00%
04.08.2016	Poly surgery	F	13	26	39
		%	33.30%	66.70%	100.00%
07.08.2016	Poly psychology	F	2	5	7
		%	28.60%	71.40%	100.00%
26.08.2016	Poly psychology	F	7	9	16
		%	43.80%	56.20%	100.00%
The Total of Poly psychology		F	9	14	23
		%	39.10%	60.90%	100.00%
09.08.2016	Poly Ophthalmic	F	4	13	17
		%	23.50%	76.50%	100.00%
06.09.2016	Poly Ophthalmic	F	9	28	37
		%	24.30%	75.70%	100.00%
The Total of Poly Ophthalmic		F	13	41	54
		%	24.10%	75.90%	100.00%
10.08.2016	Poly Otolaryngology	F	4	6	10
		%	40.00%	60.00%	100.00%
02.09.2016	Poly Otolaryngology	F	4	4	8
		%	50.00%	50.00%	100.00%
The Total Poly Otolaryngology		F	8	10	18

Date	Polyclinics	In Accordance with <i>Permenkes</i>		Total	
			On Time	Overdue	
		%	44.40%	55.60%	100.00%
22.08.2016	Poly Obsgyn	F	9	12	21
		%	42.90%	57.10%	100.00%
23.08.2016	Poly Paediatric	F	3	7	10
		%	30.00%	70.00%	100.00%
25.08.2016	Poly Dentistry	F	7	20	27
		%	25.90%	74.10%	100.00%
07.09.2016	Poly Dermatology	F	5	11	16
		%	31.20%	68.80%	100.00%
<b>Total</b>		<b>F</b>	<b>102</b>	<b>297</b>	<b>399</b>
		<b>%</b>	<b>25.60%</b>	<b>74.40%</b>	<b>100.00%</b>

While the SPO at Yogyakarta Region Public Hospital for the provision time still used *Permenkes* no 129 year 2008, The distribution of the Yogyakarta Region Public Hospital medical record files used its own evaluation standard which was  $\leq 15$  minutes, so the total number of references made by the Yogyakarta Region Public Hospital in the provision and distribution of medical record files was  $\leq 25$  minutes.

According to the SPO from the installation section, the on-time Medical Record Files of Yogyakarta Region Public Hospital were 102 record files or 25.60%, while the overdue medical record files were 297 medical record files or 74.40% of 399 files. The total on-time medical record files of 10 Polyclinics in accordance with the SPO Yogyakarta Region Public Hospital were 102 files to the polyclinics.

Table 4 The Comparison Of 10 Polyclinics Regarding the On Time Medical Record Files and Overdue Medical Record Files in Accordance with *Permenkes* Number 129 Year 2008.



<b>Polyclinics</b>	<b>On Time</b>	<b>Overdue</b>	<b>Total</b>
<b>Poly Neurology</b>	4 (3.10 %)	125 (96.90%)	129
<b>Poly Internist</b>	0 ( 0%)	62 (100%)	62
<b>Poly surgery</b>	3(7.70 %)	36 (92.30 %)	39
<b>Poly psychology</b>	2 (8.70 %)	21 (91. 30%)	23
<b>Poly Ophthalmic</b>	0 (0%)	54 (100%)	54
<b>Poly</b>	1 ( 5.60 %)	17 ( 94.40 %)	18
<b>Otolaryngology</b>			
<b>Poly Obsgyn</b>	3 (14.30%)	18 ( 85.70%)	21
<b>Poly Paediatric</b>	0 (0%)	10 (100%)	10
<b>Poly Dentistry</b>	1 (3.70%)	26 (96.30%)	27
<b>Poly Dermatology</b>	1 (6.20%)	15 (93.80%)	16

From 10 polyclinics in Yogyakarta Region Public Hospital, there were 3 polyclinics which had the most percentage of overdue medical record files, those were Poly Internist, Poly Ophthalmic, and Poly Paediatric. The overdue percentage was 100%, while the most on time polyclinic was poly obsgyn with 14.30%.

Table 5 The Comparison of 10 Polyclinics Regarding the Number of On Time and Overdue Medical Record Files to Polyclinic in Accordance with SPO of Yogyakarta Region Public Hospital

<b>Polyclinics</b>	<b>On Time</b>	<b>Overdue</b>	<b>Total</b>
<b>Poly Neurology</b>	23 (17.80%)	106 (82.20%)	129
<b>Poly Internist</b>	12 (19.40)	50 ( 80.60%)	62
<b>Poly surgery</b>	13 (33.30%)	26 ( 66.70%)	39
<b>Poly psychology</b>	9 (39.10%)	14 ( 60.90%)	23
<b>Poly Ophthalmic</b>	13 (24.10 %)	41 ( 75.90%)	54
<b>Poly</b>	8 ( 44.40 %)	10 ( 55.60%)	18
<b>Otolaryngology</b>			
<b>Poly Obsgyn</b>	9 ( 42.9%)	12 ( 57.10%)	21
<b>Poly Paediatric</b>	3 ( 30%)	7 ( 70%)	10
<b>Poly Dentistry</b>	7( 25.90%)	20 ( 74.10 %)	27
<b>Poly</b>	5 (31.20%)	11 ( 68.80%)	16
<b>Dermatology</b>			

From 10 polyclinics in Yogyakarta Region Public Hospital, the polyclinic which had the most percentage of overdue medical record files was polyclinics Neurology, it was found 82.2%, while the most on time polyclinics issuing medical record files was Poly Otolaryngology; the on time percentage was 44.40 %.

## DISCUSSION

In this study, there were 12 respondents who participated in the evaluation of medical record files provision and distribution in polyclinics of Yogyakarta Region Public Hospital in which the education background of each respondent was different; there were D3-medical record-graduated respondents and Senior High school-graduated respondents. Each respondent had ever joined training about medical record or SIM (System of Management Information) held by the hospital management. This training was in accordance with the Policy of Health Minister (*Kepmenkes*) number 377/menkes/SK/III/2007 about professional standard of medical record and health information, that there are two competency categories which must be acquired by medical record and health information staff. The categories are the basic competency and supporting competency which both of them must be mastered by medical record and health information staff to do their job in health service.

The importance of training for staff who worked in the hospital had also been closely monitored by Nancy in 2014 where the staff were given an adequate medical and nursing interpersonal education by applying a high-compliance simulation team to change attitudes / behavior of team members involving prior evaluations and after activities. Participants consisted of 18 teams of nurses, 20 teams of anesthesia nurses, and 28 physicians who found that these high compliance simulation sessions affected a significant improvement in terms of better attitudes and behaviors.

## CONCLUSION

Based on the research study, it can be concluded that the average time on provision and distribution of medical records files in Polyclinics of Yogyakarta Region Public Hospital was 41 minutes 43 seconds. The fastest time of provision and distribution of medical record files was 5 minutes, while the slowest time for the same case was 2 hours 33 minutes. This case, therefore, was not in accordance with the regulation of Health Minister which determines that the provision and the distribution of health record files is  $\leq 10$  for outpatients.

Factors which affected the provision and distribution of medical record files were the machine, people, method, and environment.

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