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Analysis Factor Reason Incident Missile File Record Medical In Room Hospital Filing Dr. Soeratno Gemolong

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ABSTRACT: In health services in hospitals, medical record file missfiles often occur, thus making health services note optimal. The patient's personal data and medical data are in the medical records files, if the medical records file is not immediately found due to a missfile incident, the officer cannot take medical action immediately. The The purpose of this research is to analyze the factors that cause missfiles in the filing room of RSUD dr. Soeratno Gemolong. In this research, the type of research used by researchers is a qualitative research with a descriptive approaches. The study population was all medical records units officers, totaling 19 officers consisting of the head of medical records, Assembling, Indexing Coding, Analyzing Reporting, and Filing at RSUD dr. Soeratno Gemolong. The sample in this study were medical record unit officers in the Filing section, totaling 5 officers at Dr. Soeratno Gemolong Hospital. The sampling technique is purposive sampling technique. Data collection instruments through interviews. Data analysis in this study was carried out using descriptive analysis. Based on the results of research at dr. Soeratno Gemolong found that there were 19.13% missfiles, namely 88 documents, while 80.86% did not missfile, namely 372 documents out of 460 documents entered in one month. Factors causing Missfile: knowledge, work experience, negligence of officers, work discipline.

Keywords: Hospital, Medical records, Missfile

INTRODUCTION

House Sick is giver service in the Health sector. Available at the hospital inpatient, outpatient and emergency care. In order to provide good service, home Sick must own record medical Which Good (Amjad 2020; Nagasawa 2020; WHO 2020).

Medical records in hospitals can be organized well if the data processing officer can carry out data recording tasks well(Kline et al., 2023). Filing is part record medical in department Health has accredited And has a function as a place to store and arrange document in a way system Based on systematic procedures so that if at any time When the data is needed, it can be obtained directly precise and fast (Brat et al. 2020; Laugesen et al. 2021; Zhuang et al. 2020).

Medical records are very important so for the storage uses the system, if not put to good use will a problem arises can affect accuracy and speed of document availability medical records(Thayer et al., 2021; Yadlapati et al., 2023). Problems that can occur in parts record medical ie missfile. Record medical Can in say is lost If on moment files That needed No is at on rack Which should (Horgan et al. 2019). Should happen incident missfile as big as 0 % (Arini, Rakhmawati, and Wulandari 2022; Osundina and Azeez 2020; Taiwo et al. 2022). But on in fact Still Lots facility health Which experience misfile.

Results studies introduction in Hospital Dr. Soeratno Gemolong, that system Which used For storage is system Decentralization, numbering use Units numbering system (UNS), whereas For The filing system used is SNF (Straight Numerical Filing). Based on interview with the recording officer at RSUD dr. Soeratno Gemolong, that it has been identified exists problem Which found that is happen missfile not enough more 3 time per Sunday. Amount power Work filing Which provision of health services provided to patient. Because incident misfile slow down proper medical action done quick.

Based on phenomeme on, researcher take title about "Analysis Factor Reason Incident Missfile File Record Medical In Room Filing Hospital Dr. Soeratno Gemolong." Researcher hope late study This underwriter answer record medical in part filing capable understand reason happen misfile And prevent it from happening misfile.

METHOD

On study This type study Which used by researcher is study qualitative approach descriptive. Study This held in HOSPITAL Dr. Soeratno(Backhaus et al., 2021; Moleong, 2017). Population research, namely all medical records unit officers Which amount 19 officer consists from head RM, Assembling, Indexing Coding, Analysis Reporting, And Filing in HOSPITAL Dr. Soeratno Gemolong. The research sample was unit officers medical records of 5 officers at RSUD Dr. Soeratno Gemolong. Technique taking sample that is technique purposive sampling. The data collection instrument is through interviews. Analysis data in study This done with use analysis descriptive. Analysis data Which used that is analysis descriptive, is technique describe each units variable study. Data The collected data will be processed for analysis factor reason happen missfile in room filing HOSPITAL Dr. Soeratno Gemolong.

RESULT AND DISCUSSION

Results study related factor reason missfile is as following:

Knowledge :

Table 1. Results of Knowledge of Incident Missfile

Variable	Category				Total	
	Missfile		No Missfile			
		%	N	%	N	%
Knowledge						
	88	19,13	372	80,86	460	100

Based on table in on variable knowledge to incident missfile obtained as much 88 (19.13%) document missfile while the ones that don't missfile are the same 372 (80.86%) documents.

Experience

Table 2. Results of Experience To

Variable	Category				Total	
	Missfile		No *Missfile*			
	N	%	N	%	N	%
Experience						
	88	19.13%	372	80.86	460	100

Based on the table above, the experience variable of missfile events obtained as many as 88 (19.13%) document missfile whereas Which No missfile like 372 (80.86%) document.

Negligence

Table 3. Negligence Against Events Missfile

Variable	Category				Total	
	Missfile		No *Missfile*			
	N	%	N	%	N	%
Experience						
	88	19.13%	372	80.86	460	100

Based on table on variable negligence of missfile events obtained as many as 88 (19.13%) document missfile whereas Which No missfile like 372 (80.86%) document.

Discipline

Table 4. Discipline To Incident Missfile

Variable	Category				Total	
	Missfile		No *Missfile*			
	N	%	N	%	N	%
Experience						
	88	19.13%	372	80.86	460	100

Based on the table above, the discipline variable to incident missfile obtained as much 88 (19.13%) document missfile whereas Which No missfile like 372 (80.86%) document.

Knowledge

Based on research in variables knowledge in categorize not enough adequate for 3 (19.13%) respondents, whereas Which own knowledge adequate for 2 (80.86%) respondents. From to 5 respondents background behind SE, S.PSI, and A.Md.PK education. 2 respondents have a level of knowledge adequate in managing medical records in room filing because officer the Have attended training and seminars more than 5 times, while 3 respondents Already own knowledge to processing record medical in room filing(Pou et al., 2023).

According to research (Abelha et al. 2020; Budiharso and Tarman 2020), the level of knowledge of officers seen from background behind education final, Because the more tall Education the more understand method For avoid misfile.

Results study (Abelha et al. 2020; Muzuh and Harlisa 2021). Results for officer Which knowledgeable Good as many as 2 people 67%, while for officer Which knowledgeable bad as much 1 person 33%.

Experience

Results interview from 5 respondent, from 1 respondents know system management room filing Because Already worked for more than 10 years at RSUD dr. Soeratno Gemolong part units record medical And Lots follow seminar nor training. 3 officer with educational level is not a graduate record previously worked in non-medical fields health, One respondents say that previously Once Work in Field Marketing for 9 years.

Negligence Officer

Based on results study variable negligence, negligent of 4 (80.86%) respondent, whereas Which No negligent as big as 1 (19.13%) respondents. System Which used in part filling in units record medical HOSPITAL Dr. Soeratno Gemolong that is Straight Numerical Filling (SNF), Which keep every medical record files in order of number. Based on interview from Wrong One respondents Still feel difficult When must use alignment SNFs through number front, middle, back. According to Djohar (2018) [9] officers must concentration When you have to pay attention every number For avoid mistake.

Based on the results of observations by researchers in RSUD dr. Soeratno Gemolong tracer and code color in room filing Not yet done. Matter This in accordance with research (Katmini 2020; Muzuh and Harlisa 2021) role tracer in filing is very important for prevent the return of recorded documents media Which No saved to place beginning.

Figure 1. Medical Record Document No In accordance with the Order Number

Discipline

Based on results study variable discipline Work Which No discipline as big as 4 (80.86%) respondent, whereas Which discipline as big as 1 (19.13%) respondents. Based on results observation medical record researchers who have been processed the data No direct sorted And returned to the filing room instead record medical Which seen lying down in floor, No enter to in sub rack storage, there are also medical records placed in a box stored on a shelf porch wait time free For returned to room filing. Lateness return file record medical to place storage Which should can cause missfile because the medical record file is not there on the place. Matter This in accordance with study (Sari et al., 2023), that activity in accordance with SOUP in House Sick, record medical must in return maximum 2x24 O'clock. 5 respondents officer HOSPITAL Dr. Soeratno Gemolong say that No do checking on rack record medical.

Results That Also showed namely No done scanning or monitoring data patient in a way periodically. Sweeping no done Because limitations time And power medical, Which possible happen case Wrong place which can slow down data, which also slows down service patient. officer record medical must do inspection daily routine For repair or verify misplaced patient records so returned to that location Correct.

Figure 2. Medical Record Document Stacked In room Record Medical

CONCLUSION

Based on the results of research at RSUD dr. Soeratno Gemolong found exists missfile as big as 19.13% ie 8 document whereas Which No missfile amounting to 80.86%, namely 372 documents from 460 document enter in One month.

Knowledge Work Which own Insufficient knowledge of 3 officers, whereas Which own knowledge adequate 2 officer. In variable This the majority of medical records unit officers have not Once follow seminar nor training about system management medical records so they don't understand knowledge base RM.

In the unit officer experience variable record medical Work more from 2 year And experience Work previously in the field non-health.

Negligence Work Which negligent 4 officer whereas Which No negligent 1 officer. In this variable the medical records officer negligent deep keep or return file rec medical caused system alignment SNFs Which need concentration tall as well as use of tracers and cover color coding Which No accomplished until requires more concentration so that it doesn't an error occurred.

Discipline Work Which No discipline 4 officer whereas Which discipline 1 officer. In this variable the officers in the unit record medical No discipline Because postpone return file record medical on storage And No done checking periodically.

In overcome knowledge And experience Work officer Which Not yet equally, so head of medical records can plan socialization And training related to medical record management activities especially in the storage section in the room filing HOSPITAL Dr. Soeratno Gemolong(Betadur et al., 2023; Chen et al., 2021; DeLisle et al., 2013; Patel, 2018; Taye et al., 2023)

Alas good If done planning for making tracers, books expedition And color as code so that make it easier officer find file.

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