

Factors Affecting Waiting Time for Outpatient Medical Record Documents in General Hospital Dr. H. Moch. Ansari Saleh Banjarmasin-419-423 *by*

Submission date: 20-Apr-2023 04:07PM (UTC+0700)

Submission ID: 2070171091

File name: neral_Hospital_Dr._H._Moch._Ansari_Saleh_Banjarmasin-419-423.pdf (377.48K)

Word count: 2712

Character count: 15351

Factors Affecting Waiting Time for Outpatient Medical Record Documents in General Hospital Dr. H. Moch. Ansari Saleh Banjarmasin

Febriyanti¹, Achmad Rofi'i², Bahrul Ilmi³, Husaini⁴, Meitria Syahadatina Noor²

¹Master of Public Health Science, Faculty of Medicine, ²Faculty of Medicine, Lambung Mangkurat University; ³Polytechnic of Health, Ministry of Health Republic of Indonesia, Banjarmasin, Indonesia;

⁴Public Health Study Program, Faculty of Medicine, Lambung Mangkurat University

ABSTRACT

Waiting time for medical record documents should be less than or equal to 10 minutes. The evaluation result of providing medical record documents waiting time in The General Hospital Dr. H. Moch. Ansari Saleh \leq 31 minutes. This study analyzed the influence factors of storage, management, and procedure of medical records, perceptions of the suitability of human resources for waiting time, and material resources. The research method was analytical descriptive with cross-sectional approach. The sample size is two samples, namely 399 BPJS (health insurance) patient documents and 12 samples of medical record staff. Bivariate analysis using the Multiple Logistic Regression test and Odds Ratio. The waiting time required from outpatient patients is registered until the objective document is available \leq 41 minutes. So that it can be concluded that the waiting time for medical record documents is relatively long. From the factors that influence the results obtained by the medical record document storage p-value=0.289>0.25;OR=2.648; management of medical records p-value=0.289>0.25;OR=2.086; the procedure for retrieving medical record p-value=0.289>0.25;OR=2.648; transportation of medical records p-value=0.289>0.25;OR=2.648; perception of human resource suitability p-value=0.289>0.25;OR=3.315; material resources p-value=0.289>0.25;OR=2.648. From each variable that there is no influence of factors that influence the waiting time of outpatient medical record documents in the general hospital Dr. dr. Moch Ansari Saleh Banjarmasin.

Keywords: medical record, waiting time, influence factors

INTRODUCTION

Medical records affect the quality of health services received by patients. Medical records can also be used as educational materials, research, and quality assessment. Medical records that are maintained carefully are very important for the health care system and patients.¹

In order for medical records to be used perfectly, a hospital must carry out medical records including

registration, storage, and processing of medical record data. Registration of patients at the hospital has several parts including outpatient registration, inpatient registration, and registration of emergency patients. At the time, the arrival of the patient is enrolled in a hospital consisting of old patient registration and new patient registration.² Providing services to good medical records reflected in fast, friendly and comfortable services. Minimum service standards are provisions regarding the type and quality of basic services which are the minimum technical specifications in the distribution of medical record services. Minimum service standards (SPM) for medical records include completing filling in medical records 24 hours after completion of service, completeness of informed consent after obtaining clear information, when providing medical records documents for outpatient/inpatient services.¹

Corresponding Author:

Febriyanti
Master of Public Health Science, Faculty of Medicine,
Lambung Mangkurat University,
Jalan A. Yani, Km.36, Banjarbaru,
Kalimantan Selatan, Indonesia,
Email:

Provision of medical record documents is said to be fast if the time used for medical record distribution is less than or equal to 10 minutes.² As a comparison data between minimum service standards and Director's Decree on Medical Record service policies. The service quality indicators in the medical record unit have 3 quality indicators that are problematic, one of them is the difference in the provision of medical record documents between the results of monitoring and evaluation of medical records with the Ministry of Health in 2008 and the Director's Decree on hospital service policies. medical record documents according to SPM \leq 10 minutes and Policy Decree \leq 20 minutes. While the results of ¹ the monitoring and evaluation of the time of providing **medical record documents in General Hospital Dr. H. Moch. Ansari Saleh** \leq 31 minutes. From the results of document survey data belonging to 8 people studied with the guidance of the head of the medical record unit, data obtained on waiting time in providing medical record documents at the latest \leq 37 minutes.

The waiting time for outpatient medical record documents is long enough to be 37 minutes. The period affected many factors, namely the storage of medical record documents, medical record management, types of medical record services, procedures for retrieving medical records, transporting medical records and human resources to waiting times, as well as facilities for waiting time.

Based on the description above, researchers are interested in conducting research for the waiting time of outpatient medical record documents in outpatient services based on SPM providing medical record documents can affect patient waiting time and is one of the important things to determine quality hospital services and patient and family dissatisfaction in service.

MATERIALS AND METHOD

The research method used is Analytical Observation or Analytical Descriptive with Cross-sectional approach. The sample size in this study were two samples, namely 399 BPJS (health insurance) patients and 3 samples of medical record workers on the grounds that there were several related questions regarding medical record documents for patients who could not obtain information from patients. Analysis of data used Univariate Analysis with the aim to determine the frequency distribution and presentation of independent variables, Bivariate

Analysis to determine the factors that influence waiting time by using Odd Ratio and Multivariate Analysis using the Multiple Logistic Regression tests.

FINDINGS AND DISCUSSION

¹ **Waiting Time for Medical Record Documents for Outpatients in General Hospital Dr. H. Moch Ansari Saleh of Banjarmasin** the average time required is 4 minutes from BPJS counter to numbering section, 8 minutes for medical record finding, 11 minutes to find and sending, 16 minutes for medical records sent and arrived at the destination polyclinic as well as the overall procedure and medical record flow for 41 minutes.

The results of univariate analysis show that waiting time medical record documents that are the subjects of the study are 399 medical record documents with raw road patients with categories \leq 20 minutes as many as 18 medical record documents or 4.5% and 381 medical record documents of ⁵ 95.5% of categories that are not suitable for waiting **time for outpatient medical record documents**.

¹ **The factor that influences the waiting time of outpatient medical record documents in General Hospital Dr. dr. H. Moch Ansari Saleh, Banjarmasin city,** which is a place for storing **medical record documents** that are **the subject of research** is outpatient medical record staff, amounting to 12 medical record staff with the appropriate category 58.3% and 41.7% inappropriate categories. The management of medical records that are the subject of research is the outpatient medical record staff, amounting to 12 medical records with categories of 50% and 50% according to inappropriate categories. The procedure for retrieving medical record documents that are the subject of research is outpatient medical record staff totaling 12 medical record staff with the appropriate category of 58.3% and 41.7% inappropriate categories. Distribution of medical record documents that are the subject of research is outpatient medical record staff, amounting to 12 medical records staff with the appropriate category 58.3% and 41.7% inappropriate categories. The effect of conformity perceptions of human resources includes the number of personnel, competencies, and medical record workloads that are the subjects of the study are outpatient medical record staff, amounting to 12 medical record staff with the corresponding categories of 66.7% and 33.3% categories that are not corresponding. Material resources, namely

the facilities and infrastructure of medical records that are the subject of research are outpatient medical record staff totaling 12 medical record staff with the appropriate category of 58.3% and 41.7% inappropriate categories.

Table 1: Results of Bivariate Analysis of Variables

Independent Variables	P value
medical record document storage place	0.289
management of medical records starting from patients registering, numbering, searching, inputting in a hospital information system, medical record delivery to destination polyclinic	0.289
procedures for medical record document collection	0.289
transportation of medical record documents	0.289
conformity perception of human resources includes the number of personnel, competence, and workload	0.289
material resources, namely facilities and infrastructure	0.289

Based on the results of the bivariate analysis Table 1 shows that all independent variables produce p-value > 0.25 seen from the results in the Omnibus Tests of Model Coefficients column which shows all independent variables have no effect on the dependent variable (document waiting time). However, all fixed variables were analyzed multivariate because they were considered important with the waiting time of medical record documents.

Furthermore, multivariate analysis of the six independent variables was carried out with the waiting time of the medical record documentation. From the results of the analysis, there are 6 variables that have a value of > 0.05, namely the storage of medical record documents, management of medical records starting from patients registering, numbering, searching, inputting in management information system, sending medical record to the destination clinic, procedure retrieval of medical record documents, transportation of medical record documents, conformity perceptions of human resources include the number of personnel, competencies, and workloads, material resources namely facilities and infrastructure. Of all the fixed variables it has a p-value > 0.05 so that it cannot proceed to the next multivariate analysis.

From the independent variables, there are no influence on the waiting time of medical record documents, there are other factors that affect the place of registration of medical records of outpatients, patients not carrying KIB, requirements for patients who incomplete, old patient claimed to be a new patient, information system and utility (printer) error. Lack of communication

between patients and officers so patients did not carry complete registration requirements, Patients were wrong in the registration counter, new patients did not fill out the registration form for new patients.

The results of the study are in accordance with the observations of the storage of medical record documents using Roll O'Pack cabinets or moving cabinets that provide shifting, the arrangement of the filing space can save more space because there is no need to provide cabinets between one another as in other models. Related to the use of this cupboard, it can use a place or area that holds the medical record file in the filing room as a whole to be larger.⁴

In addition to the six independent variables in the concept of multicollinearity is a situation where there are two variables that mutually correlate. The existence of a relationship between independent variables is something that cannot be avoided and is indeed needed so that the regression obtained is valid.³ Multicollinearity test was conducted to see whether there was a correlation between the perfect relationship between the independent variables. The test aims to find out whether the regression model is found to have a correlation or relationship between independent variables. A good regression model does not occur correlation or relationship between independent variables. If the independent variables are correlated or related, then these variables are not orthogonal, orthogonal are independent variables whose correlation value between each independent variable is zero.

On the independent variable, the classical assumption of multiple regression models was carried out with Multicollinearity Test.

Table 2: Multicollinearity Test Result

Model	Collinearity Statistics	
	Tolerance	VIF
Storage place for medical record documents	0.021	47.271
Management of medical records Starting from Patients Registering, Numbering, Finding, Inputting on Hospital Information System, Medical Record Delivery to the Polyclinic	0.016	64.100
Procedures for retrieving medical record documents	0.038	26.276
Transportation of medical record documents	0.042	23.711
Suitability perceptions of human resources include the amount of energy, competence, and workload	0.047	21.079
Material resources, namely facilities and infrastructure	0.034	29.754

Based on the results of the SPSS output, it can be seen that the tolerance value of all independent variables is smaller than 0.10 and the value of VIF for all independent variables is greater than 10.00. So, it can be concluded that all the variables from the SPSS output value occur multicollinearity. The presence of multicollinearity can be seen in the correlation between predictors that are too high (above 0.8 or 0.9) indicating that the data is infected with multicollinearity.⁴

The implementation of medical record activities needs to be supported by the existence of Material Resources including facilities and infrastructure. The hospital information system is the most important part of hospital management to support better quality of service, while the administration of medical records must be regulated and managed in such a way that all patient data contained in the medical record can be kept confidential. Therefore, every leader of health service facilities must pay attention to the administration of medical records, because indirectly they must be able to account for all loss, damage, forgery and use by bodies or entities that are not entitled to medical records.⁶

Facilities and equipment are all things that support the ease of execution of tasks and management of medical records. Appropriate storage equipment for medical records, good lighting and temperature regulation, maintenance of space and attention of officers to safety factors that greatly help maintenance, encourage work enthusiasm and increase productivity of officers. In a row of medical record folders stored must be given out instructions to speed up the storage work and find medical records. The medical record file should be given a cover for protection and maintain the contents of the medical record so that each sheet is not torn or torn, because it is often taken or back and forth. The cover or protective folder is equipped with a clamp (fastener) to combine the sheet on the cover.⁷

CONCLUSION

The service time for providing medical record documents takes an average of 0 hours 51 minutes. So that it can be concluded that the waiting time for medical record documents is quite long. From the research factors that influence the waiting time of outpatient medical record documents in The General Hospital Dr. H. Moch Ansari Saleh Banjarmasin namely there is no influence of medical record document storage places on the waiting time of medical record documents, management of medical records starting from patients registering, numbering, distributing and finding, inputting in hospital information system, medical record delivery to the polyclinic, procedures, transportation, perception of source suitability human power includes the amount of energy, competence, and workload on the waiting time of medical record documents, material resources, namely facilities and infrastructure to the waiting time of medical record documents.

Ethical Clearance: This study approved ethical clearance from the Committee of Public Health Research Ethics of Medical Faculty, Lambung Mangkurat University, Indonesia. We followed guideline from Committee of Public Health Research Ethics of Medical Faculty, Lambung Mangkurat University, Indonesia for ethical clearance and informed consent. The informed consent included the research title, purpose, participants' right, confidentiality, and signature.

Source of Funding: This study was done by self-funding from the authors.

Conflict of Interest: The authors declare that they have no conflict interests.

REFERENCES

1. Sadi MI. Health Ethics and Law. Prenadamedia Group. Jakarta. 2015.
2. Ministry of Health, Republic of Indonesia. Law of Ministry of Health No.269/Menkes/PER/III/2008 of Medical Record. Jakarta. 2008.
3. Widhiarso W. Make peace with Multicollinearity in Regression. Thesis. Faculty of Psychology, Gadjah Mada University. Yogyakarta. 2011.
4. Ministry of Health, Republic of Indonesia. Instructions for Hospital Medical Recordings. Jakarta. 1991.
5. Widhiarso W. Visual Learning: Correlation and Regression. Thesis. Faculty of Psychology, Gadjah Mada University. Yogyakarta. 2010.
6. Ratman D. Legal Aspects of Consent Consent and Medical Records in Therapeutic Transactions. Keni Media Publisher. Bandung. 2013.
7. Ministry of Health, Republic of Indonesia. Guidelines for Managing Hospital Medical Records in Indonesia Revision I. General Director of Medical Services. Jakarta. 1997.

Factors Affecting Waiting Time for Outpatient Medical Record Documents in General Hospital Dr. H. Moch. Ansari Saleh Banjarmasin-419-423

ORIGINALITY REPORT

15%

SIMILARITY INDEX

8%

INTERNET SOURCES

8%

PUBLICATIONS

11%

STUDENT PAPERS

PRIMARY SOURCES

1	doc-pak.undip.ac.id Internet Source	4%
2	www.ijfmt.com Internet Source	4%
3	Submitted to School of Business and Management ITB Student Paper	4%
4	R Aprilia, M Y Wardhana, A Baihaqi, A Nugroho. "Analysis of distribution risk in Arabica coffee supply chain during pandemic in Aceh Tengah District", IOP Conference Series: Earth and Environmental Science, 2022 Publication	2%
5	Nurma Khoirunnisa, Zaenal Sugiyanto. "Review of the Implementation of Minimum Service Standards (SPM) Provision of Outpatient Medical Record Documents for Dr. Panti Wilasa Hospital Cipto Semarang",	2%

Proceeding International Conference on Medical Record, 2021

Publication

Exclude quotes On

Exclude matches < 2%

Exclude bibliography On