

s_completion_at_Stella_Maris_Hospital_in_Makassar,_Indonesia.

pdf

by

FILE	S_COMPLETION_AT_STELLA_MARIS_HOSPITAL_IN_MAKASSAR,_INDONESIA.PDF (344.33K)	WORD COUNT	3000
TIME SUBMITTED	23-MAR-2020 02:15PM (UTC+0700)	CHARACTER COUNT	16195
SUBMISSION ID	1280250432		



Analysis of Standard Operational Procedures implementation on medical records completion at Stella Maris Hospital in Makassar, Indonesia[☆]



Fadila Rizki, Noor Bahry Noor, Adellia U.A. Mangilep, Irwandy*

Department of Hospital Management, Faculty of Public Health, Hasanuddin University, Indonesia

Received 29 May 2019; accepted 15 July 2019

KEYWORDS

Medical records;
Standard Operational Procedure (SOP);
Inpatient installation unit

Abstract

Objective: This study aimed to determine the description of the implementation of the Standard Operational Procedure (SOP) regarding the completeness of the medical records filling of inpatients installation unit at Stella Maris Hospital in Makassar.

Methods: The research method was a quantitative method, which was a descriptive observation. It was conducted by observing, distributing questionnaires and interviewing respondents. The sample consisted of 52 doctors who worked in Stella Hospital and were categorized by age, sex, education and the length of the working period.

Results: The results of the study showed that the perception of the respondents regarding the standard operating procedures provided and implemented had not been classified as decent. Respondents who had decent perceptions were only 9 respondents (17.3%) while those with poor perceptions were 43 respondents (82.7%).

Conclusion: The implementation of the Standard Operating Procedure (SOP) toward completing the filling of medical records at Stella Maris Hospital is still categorized as not yet maximally implemented.

© 2019 Elsevier España, S.L.U. All rights reserved.

Introduction

The demand for health services quality in a hospital nowadays is increasing due to the rise of community awareness on the quality of health services.^{1,2} Consequently, hospitals as health care providers have to improve their services from various aspects. The high and low quality of hospital

[☆] Peer-review under responsibility of the scientific committee of the International Conference on Women and Societal Perspective on Quality of Life (WOSQUAL-2019). Full-text and the content of it is under responsibility of authors of the article.

* Corresponding author.

E-mail address: wandy_email@yahoo.co.id (Irwandy).

health services, among communities, can be seen by the completeness level of medical record lists in a hospital.³ The medical records should be able to provide clear information about what, who, when, where and how health services have been done or will be taken.⁴ In addition, the clearance of represented information has impacts on the services, such as inhibiting the process of providing information, the difficulty of data processing, inhibiting administrative-related activities, and hampering communication among health employees.

The medical records have to fulfill its purpose as a communication tool among the medical employees to know about the patient information, as well as evidence of the type of the disease and treatment provided when the patient receives health services in the hospital.⁵ This refers to one of the obligations that must be fulfilled by the hospital that is implementing medical record completion.⁶

In general, the factors related to the completeness of medical records can be seen in terms of aspects of human resources and aspects of the implementation medical recording procedure. Based on the theory described in the previous discussion, the medical record belongs to the hospital must be maintained because it is very beneficial for the patient, for the doctor, for the health service employees and for the hospital itself.⁷ Therefore, the medical records are very important on completing of a patient's medical or non-medical records, as well as those who are responsible for completing medical records.

According to the Indonesian Ministry of Health Regulation No. 269/Menkes/Per/III/2008,⁸ the most important requirements of qualified medical records are related to the completion of medical record entries, accuracy, and deadline of completing medical records. However, there are cases that show the incompetence of completing the medical records. The incompleteness of filling in the medical record is due to several internal factors from the hospital, one of the factors is the implementation of Standard Operating Procedure (SOP), which has not been properly performed by health employees (doctors). Standard Operating Procedure (SOP) is a guideline or a reference for carrying out work tasks in accordance with the functions and tools of performance evaluation of government agencies based on technical, administrative and procedural indicators according to work procedures, work procedures, and work systems in the work unit concerned.^{9,10}

The research conducted by Djauhari (2016)¹¹ in Muhammadiyah Hospital Malang found the incompleteness of medical record with the percentage of 100% on 40 inpatient medical record documents, which the most percentage of it is from the doctor. The results of interviews and observations found that there were no policies, guidelines and Standard Operating Procedures (SOPs) for filling in medical records, awareness of doctors to fill in inpatient medical records were not in accordance with the standards. Next, the results of research conducted by Ramadhani et al. (2008)¹² indicated that the process of completing medical record documents was obtained with the results of IMR (Incomplete Medical Record) 8.83% and DMR (Delinquent Medical Record) 2.07% of the total 2901 patients who discharged from hospital in April. So, the factors that cause incompleteness of inpatient medical record documents are caused by aspects of human resources and aspects of implementation procedures.

Generally, the medical record at Stella Maris Hospital in Makassar should have been classified as good achievement and must be in accordance with the standards set by the Ministry of Health of the Republic of Indonesia in 2012. However, based on the results of preliminary observations and interviews with the management staff of medical records, the information gained indicated that there were still many incomplete medical record files on completing them. Thus, this study aims to examine the suitability of filling medical records with the Standard Operating Procedure (SOP) at the Stella Maris hospital inpatient installation. This refers to the doctor's perception of the Standard Operating Procedure (SOP) that have been implemented and available in the hospital.

Method

Location of research

This research was conducted in the Medical Record Installation and inpatient installation unit of Stella Maris Hospital, Makassar City, South Sulawesi Province and was held from April to May 2017.

Population and sample

The samples consisted of 52 doctors at the inpatient installation at Stella's Hospital. Then, samples were divided into several categories based on age, sex, work period and type of education. Sampling used in this study was a non-random method known as non-probability sampling by means of total sampling or exhaustive sampling.

Method of collecting data

The method of collecting data was quantitative research methods which were descriptive observation. It was conducted by doing observations, distributing questionnaires and interviewing the respondents.

Data analysis

The data analysis method used in this study is a univariate analysis which aimed to explain or describe the characteristics of the research variable. Univariate analysis was performed on variables from the results of the study by using frequency distribution tables to produce a percentage of the research.

Results

Characteristics of respondents

Based on Table 1, the characteristic of respondents in Stella Maris hospital in Makassar consists of respondents aged from 25 to 65 years old. The majority of respondents were aged 36–45 years old, which as many as 19 people (36.5%). While the least number of respondents were at the age of 56–65 years old (7.7%). Then, it was known that the

Table 1 Frequency distribution of respondents characteristics in inpatient installation unit at Stella Maris Hospital in 2017.

Characteristics of respondents	Frequency (n)	Percentage (%)
Age		
25-29	2	3.8
30-35	13	25
36-45	19	36.5
46-55	14	26.9
56-65	4	7.7
Total	52	100
Gender		
Men	27	51.9
Women	25	48.1
Total	52	100
Education		
General practice doctor	19	36.5
Specialist doctor	33	63.5
Total	52	100
The length of the work period		
1-10	43	82.7
11-20	5	9.6
21-30	3	5.8
31-40	1	1.9
Total	52	100

highest number of respondents was male with the number 27 people (51.9%), while the number of female respondents was 25 people (48.1%). Next, 33 of 52 respondents in the Stella Maris Hospital inpatient installation in Makassar are specialist doctors with a percentage of 63.5%. And, the rest of them were general practice doctors with a percentage of 36.5%. It can be seen also from table, the working period of respondents varied. The highest number of respondents was 1-10 years of work, which was as many as 43 people (82.7%). Contrastingly, only 1 respondent had a working period of 31-40 years (1.9%).

Univariate analysis

According to Table 2, it shows that most of the respondents fully agree with 3 of the 8 questions which have been asked about their perceptions of the standard operating procedures provided. This can be seen in the questions regarding implementing and conducting of Standard Operational Procedure (SOP), the availability of Standard Operational Procedure (SOP) for employees to complete the medical records and the level of employees understanding about Standard Operational Procedure (SOP) with the percentage of 100% accordingly. On the other hand, the result showed that most of the respondents claimed the hospital management staff did not give any sentence to the employees regarding the incompleteness on filling the medical records

(94.2%). Moreover, more than half respondents said that hospital did not provide the counseling about Standard Operational Procedure (SOP) of medical records completing and the authority of Standard Operational Procedure (SOP) on medical record problem-solving.

It can be referred from Table 3 that the perception of respondents regarding the existence of Standard Operational Procedure (SOP) provided and implemented by Stella Maris Hospital is unqualified yet. The overall percentage of the result indicated that only 9 of 52 respondents who had good perceptions about Standard Operational Procedure (SOP) from the hospital (17.3%), while 43 of respondents had deficient perceptions with the percentage of 82.7%.

Result of interviews

Based on interviews with informants, it is known that Stella Maris Hospital, Makassar had an SOP regarding completing the medical records. The following is the quotation from the interview:

"Yes, there are instructions and it has been run according to the SOP."

(S, 25 years)

As for the results of the in-depth interview findings, the informant explained that he agreed if penalties were imposed to discipline medical employees who did not complete the medical record file. As stated in the interview excerpt from the following informant:

"For me, if it is implemented, an oral warning as a penalty is enough, because there are too many files that have to be filled in and those contents are repeated which must be filled in, it is waste of time"

(S, 25 years)

In addition to the interviews, the researcher also recorded documentation studies on the SOP of medical records, the results of the documentation study found that there was SOP completeness of the medical records proof at Stella Maris Hospital, Makassar entitled "SPO Completing medical record files". The documents aimed as a reference in filling in record files of medical requirements on which information should be filled and the deadline of completing the medical records.

Discussion

Based on the results of the study, it was found that the perception of the respondents on Standard Operational Procedure (SOP) provided and implemented have been classified as deficient. Respondents who had good perceptions were only 9 respondents (17.3%) while those with bad perceptions were 43 respondents (82.7%).

From the results of the study it was discovered that out of 8 questions submitted to respondents in order to know the perception of respondents regarding the standard operational procedures provided and had already been implemented by respondents, as many as 52 respondents (100%) answered YES on questions about Standard Operational Procedure (SOP) that had been implemented and implemented, were there Standard Operational Procedure

Table 2 Distribution of respondent responses on Standard Operational Procedure (SOP) inquiries in inpatient installation unit of Stella Maris Hospital in Makassar 2017.

Inquiries	Respondent responses					
	Yes		No		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
SOP has been implemented and conducted	52	100	0	0	52	100
Is there an SOP regarding health workers who are responsible for completing the filling of medical records	52	100	0	0	52	100
Counseling of SOP on completing medical records filling	24	46.2	28	53.8	52	100
Understandable SOP in completing the medical records	52	100	0	0	52	100
Hospital management staff inform the doctors about the evaluation result after completing the medical records	5	9.6	47	90.4	52	100
Hospital management staff applies a particular sentence if the doctor does not complete the medical records	3	5.8	49	94.2	52	100
Is there an obstacle regarding completing the medical records	4	7.7	48	92.3	52	100
If there is an obstacle, is it reported to the in-charged parties?	16	30.8	36	69.2	52	100

Table 3 Overall frequency distribution on respondent perception of Standard Operational Procedure (SOP) medical records completing in inpatient installation unit at Stella Maris Hospital in Makassar 2017.

Perception regarding SOP	Frequency (<i>n</i>)	Percentage (%)
Decent	9	17.3
Deficient	43	82.7
Total	52	100

(SOP) concerning of health employees who are responsible for completing the RM, as well as the Standard Operational Procedure (SOP) on completing medical records is easy to understand, while the respondents who answered the most (No) were questioned about management applying penalties if the doctor did not complete the RM, 49 respondents (94.2%).

According to the results of interviews and document studies, it can be concluded that most of the informants said that the existing Standard Operational Procedure (SOP) was appropriate, but there were still some incomplete filling files. Therefore, additional Standard Operational Procedures (SOP) is needed related to the implementation of discipline to employees who did not complete the medical record in the specified time limit.

In addition, several informants stated that they agreed if penalties were imposed to discipline medical personnel who did not complete the medical record file. According to researchers, penalties should be implemented so that health employees can be more aware to complete the medical record. The penalties can be a warning in the kind of either orally or in writing to disburse health employees.

This result of the study is in line with the research conducted by Nangi (2012)¹³ in Muna District Hospital which states that the closeness test of the relationship between methods Standard Operational Procedure (SOP) for incomplete medical records obtained a Phi value (φ) of 0.4 so that

the relationship between methods (SOP) for incompleteness medical records have a sufficient relationship. Therefore, the implementation of the appropriate Standard Operational Procedure (SOP) method by the hospital can improve the performance of employees responsible for completing the patient's medical.

Conclusion

Overall, it can be concluded that the analysis of the perception of employees on Standard Operating Procedure (SOP) provided and implemented has not been classified as decent perception found in 9 respondents (17.3%) while those with deficient perceptions good as many as 43 respondents (82.7%). It is recommended to the Hospital Management to make penalties for health workers who disobey to the SOP regarding the completing the medical records, penalties can be in the form of reprimand (verbally), or in writing. Moreover, the hospital should set appropriate methods on SOP implementation to medical records practitioners, such as giving Standard Operating Procedure (SOP) counseling regularly and providing the authority as the guidance for Standard Operating Procedure (SOP) problem-solving.

Conflict of interest

The authors declare no conflict of interest.

References

1. Irwandy, Sjaaf AC. Using data envelopment analysis to improve the Hospitals Efficiency in Indonesia: the case of South Sulawesi Province. *Indian J Public Heal Res Dev.* 2017;8:214–9, 0.5958/0976-5506.2018.00997.X.
2. Jha AK, DesRoches CM, Campbell EG, Donelan K, Rao SR, Ferris TG, et al. Use of electronic health records in US hospitals. *N Engl J Med.* 2009;360:1628–38.

3. Lærum H, Ellingsen G, Faxvaag A. Doctors' use of electronic medical records systems in hospitals: cross sectional survey. *BMJ*. 2001;323:1344-8.
4. Pohan I. Jaminan mutu layanan kesehatan: dasar-dasar pengertian dan penerapan. Jakarta: EGG; 2007.
5. Hatta G. Pedoman manajemen informasi kesehatan di sarana pelayanan kesehatan. Universitas Indonesia Press; 2008.
6. Undang-Undang Nomor 44 Tahun 2009. Standar Rumah Sakit. 2009.
7. Haider SI. Validation standard operating procedures: a step by step guide for achieving compliance in the pharmaceutical, medical device and biotech industries. 2nd ed. CRC Press; 2006.
8. Peraturan Menteri Kesehatan Republik Indonesia Nomor 269 PERMENKES RI no 269/MENKES/PER/III/2008. REKAM MEDIS. s. f. Available from: <http://pelayanan.jakarta.go.id/download/regulasi/peraturan-meneteri-kesehatan-nomor-269-tentang-rekam-medis.pdf>.
9. Atmoko T. Standar Operasional Prosedur (SOP) dan Akuntabilitas Kinerja Instansi Pemerintah. Unpad Bandung. 2011.
10. World Health Organization. Standards and operational guidance for ethics review of health-related research with human participants. Geneva: World Health Organization; 2011.
11. Djauhari T, Harijanto T, Nurhaidah. Faktor-Faktor Penyebab Ketidaklengkapan Pengisian Rekam Medis Rawt Inap di Rumah Sakit Universitas Muhammadiyah Malang. *J Kedokt Brawijaya*. 2016:29.
12. Rahmadhani IS, Sugiarsi S, dan Pujihastuti A. Faktor Penyebab Ketidaklengkapan Dokumen Rekam Medis Pasien Rawat Inap dalam Batas Waktu Pelengkapan di Rumah Sakit Umum Daerah Dr Moewardi Surakarta. *Jurnal Kesehatan*. 2008;2:82-8.
13. Nangi MG, Fitriani. Determinan Ketidaklengkapan Pengisian Dokumentasi Rekam Medis di RSUD Kabupaten Muna. 2012, 10.7868/s0205961416040059.

ORIGINALITY REPORT

% **7**

SIMILARITY INDEX

% **4**

INTERNET SOURCES

% **1**

PUBLICATIONS

% **3**

STUDENT PAPERS

PRIMARY SOURCES

1	Submitted to iGroup Student Paper	% 2
2	repository.unpas.ac.id Internet Source	% 2
3	ejournal.uin-malang.ac.id Internet Source	% 1
4	wosqual2019.unhas.ac.id Internet Source	<% 1
5	www.termedia.pl Internet Source	<% 1
6	docplayer.info Internet Source	<% 1
7	Submitted to MCAST Student Paper	<% 1
8	Titin Aryani. "ANALISIS KUALITAS AIR MINUM DALAM KEMASAN (AMDK) DI YOGYAKARTA DITINJAU DARI PARAMETER FISIKA DAN KIMIA AIR", MEDIA ILMU KESEHATAN, 2019 Publication	<% 1

9 repository.unair.ac.id <% 1
Internet Source

10 eprints.ums.ac.id <% 1
Internet Source

11 Submitted to Universitas Airlangga <% 1
Student Paper

12 Titin Andri Wihastuti, Ida Rahmawati, Septi Dewi Rachmawati, Yulia Candra Lestari, Kumboyono Kumboyono. "Barriers of Nurse Collaboration for the Care of Acute Coronary Syndrome Patients in Emergency Departments: A Pilot Study", The Open Nursing Journal, 2019 <% 1
Publication

EXCLUDE QUOTES ON
EXCLUDE ON
BIBLIOGRAPHY

EXCLUDE MATCHES < 5
WORDS



Source details

Enfermeria Clinica

Scopus coverage years: from 2005 to Present

Publisher: Elsevier

ISSN: 1130-8621 E-ISSN: 1579-2013

Subject area: Nursing: Fundamentals and Skills Nursing: General Nursing Nursing: Research and Theory

CiteScore 2019

0.6

Add CiteScore to your site

SJR 2019

0.178

SNIP 2019

0.619

[View all documents >](#)

[Set document alert](#)

[Save to source list](#) [Journal Homepage](#)

[CiteScore](#) [CiteScore rank & trend](#) [Scopus content coverage](#)

Improved CiteScore methodology

CiteScore 2019 counts the citations received in 2016-2019 to articles, reviews, conference papers, book chapters and data papers published in 2016-2019, and divides this by the number of publications published in 2016-2019. [Learn more >](#)

CiteScore 2019

$$0.6 = \frac{221 \text{ Citations 2016 - 2019}}{360 \text{ Documents 2016 - 2019}}$$

Calculated on 06 May, 2020

CiteScoreTracker 2020

$$0.3 = \frac{241 \text{ Citations to date}}{726 \text{ Documents to date}}$$

Last updated on 09 August, 2020 • Updated monthly

CiteScore rank 2019

Category	Rank	Percentile
Nursing		
└ Fundamentals and Skills	#10/15	36th
Nursing		
└ General Nursing	#85/116	27th
Nursing		
└ Research and Theory	#10/12	20th

[View CiteScore methodology >](#) [CiteScore FAQ >](#)



About Scopus

[What is Scopus](#)
[Content coverage](#)
[Scopus blog](#)
[Scopus API](#)
[Privacy matters](#)

Language

[日本語に切り替える](#)
[切换到简体中文](#)
[切换到繁體中文](#)
[Русский язык](#)

Customer Service

[Help](#)
[Contact us](#)

ELSEVIER

[Terms and conditions ↗](#) [Privacy policy ↗](#)

Copyright © Elsevier B.V. ↗. All rights reserved. Scopus® is a registered trademark of Elsevier B.V.

We use cookies to help provide and enhance our service and tailor content. By continuing, you agree to the use of cookies.

 RELX

× ⓘ

Free English Writing Tool

Grammarly makes sure everything you type is effective and mistake-free. Try now

[DOWNLOAD](#) [Grammarly](#)

Enfermeria Clinica

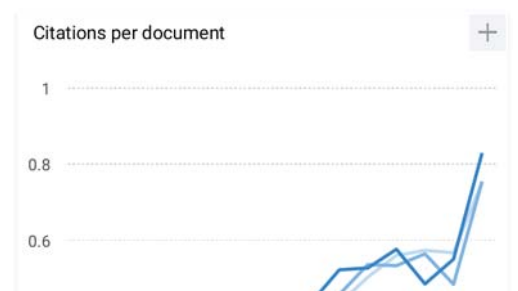
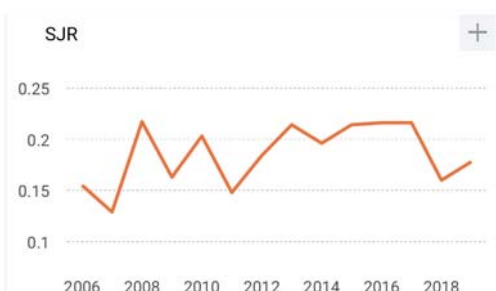
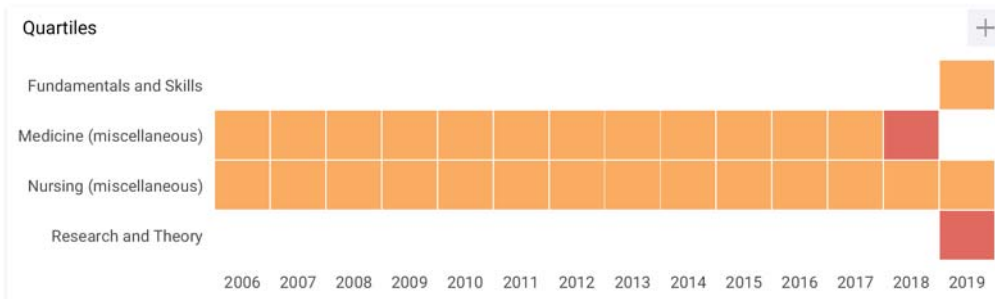
15

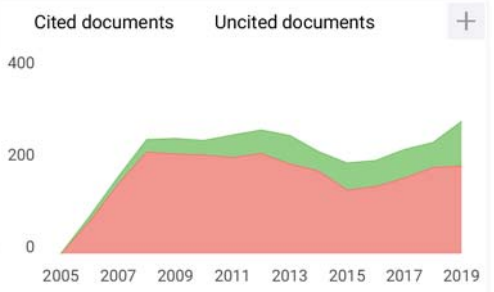
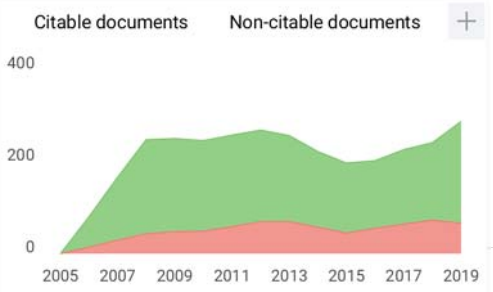
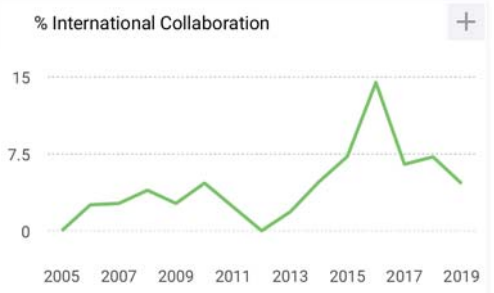
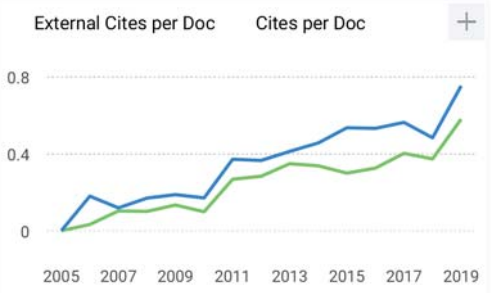
H Index

- Country** [Spain](#) -  [SJR Ranking of Spain](#)
- Subject Area and Category** [Nursing](#)
[Fundamentals and Skills](#)
[Nursing \(miscellaneous\)](#)
[Research and Theory](#)
- Publisher** [Ediciones Doyma, S.L.](#)
- Publication type** [Journals](#)
- ISSN** [11308621, 15792013](#)
- Coverage** [2005-2020](#)

Scope Enfermería Clínica is a peer-reviewed scientific journal that is a useful and necessary tool for nursing professionals from the different areas of nursing (healthcare, administration, education and research) as well as for healthcare professionals involved in caring for persons, families and the community. It is the only Spanish nursing journal that mainly publishes original research. The aim of the Journal is to promote increased knowledge through the publication of original research and other studies that may help nursing professionals improve their daily practice. This objective is pursued throughout the different sections that comprise the Journal: Original Articles and Short Original Articles, Special Articles, Patient Care and Letters to the Editor. There is also an Evidence-Based Nursing section that includes comments about original articles of special interest written by experts.

-  [Homepage](#)
- [How to publish in this journal](#)
- [Contact](#)
-  [Join the conversation about this journal](#)





reCAPTCHA vacy - Terms

Enfermeria Clínica

Q3 Fundamentals and Skills
best quartile

SJR 2019 0.18
powered by scimagojr.com

← Show this widget in your own website

Just copy the code below and paste within your html code:

```
<a href="https://www.scimagojr.com" data-bbox="245 565 375 575">
```

country Rank have the possibility to dialogue through comments linked to a forum in which general doubts about the processes of publication in the journals derived from the publication of papers are resolved. For topics on particular subjects that cannot be resolved through the usual channels with your editor.

Developed by:



Powered by:



Follow us on @ScimagoJR

Scimago Lab, Copyright 2007-2020. Data Source: Scopus®

