

Workload Review Of The Performance Of Filling Officers To Meet The Time Standards For Providing Outpatient Medical Record Files At Imelda Hospital Medan

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ARTICLE INFO

Keywords:
Workload
Provisioning Time,
Medical Record File

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ABSTRACT

Workload is the volume of work results or records of work results. If the number of workers is small, while the workload is increasing, it will result in low work productivity and will affect the quality of hospital services to patients. Indonesian workers. The type of research used is descriptive quantitative. The data collection method used was interview guide. This research was conducted at Imelda Indonesian Workers General Hospital from May to September 2021. The population in this study were all 19 medical record employees. The sample used in this study were some of the medical record employees, totaling 4 people. From the results of the study, it was found that the number of filling officers at the Imelda General Hospital of Indonesian Workers was 4 people with the workload of officer A in providing medical record files as many as 356 documents with an average time of provision of 14.8 minutes, officer B in providing medical record files as many as 421 documents with an average time of provision of 17.1 minutes, officer C in providing medical record files as many as 291 documents with an average supply time of 12.1 minutes and officer D in providing medical record files as many as 359 documents with an average time of provision of 14,9 minutes. The conclusion is that the workload of filling officers at Imelda general hospital for Indonesian workers has a very strong influence on the average time of providing outpatient medical record files. Based on this, it is suggested to the hospital to carry out a workload analysis to determine the number of staff needs, especially in filling, and to motivate filling officers to increase the speed of providing medical record files.

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INTRODUCTION

According to Law of the Republic of Indonesia No. 44 of 2009, a hospital is a health service institution for the community with its own characteristics that are influenced by the development of health science, technological advances, and socio-economic health of the community which must still be able to improve services that are more quality and affordable to the community in order to achieve the highest degree of health, is a health service institution that provides health services Plenary individuals who provide inpatient, outpatient, and emergency services. Health services in hospitals aim to improve the degree of public health. Health services in hospitals consist of several services. One of the health services is medical record services (Rustiyanto, 2010).

Every workplace, especially health care places must have a workforce according to the field. One of the workforce in health services is medical recorders and health information. Medical Recorder and Health Information is a person who has passed Medical Record and Health Information education in accordance with the provisions of laws and regulations (RI, M. K. 2013). Medical Recording and Health Information is a profession that focuses its activities on health service data and the management of health service information sources by describing the nature of data structures and translating them into various forms of information for the advancement of health and health services of individuals, patients, and society. One of the roles of medical

personnel is in the *filling* or storage of medical records.

Medical records according to Permenkes No. 269/MENKES/PER/III/2008 are files that contain records or documents about patient examinations, treatments, actions and other services provided to patients during treatment. Medical records consist of several service units. Medical record files have the value of Communication Use, which is a communication tool in providing patient care, treatment and services between doctors and other health workers who take part in providing patient care, services and treatment. Information use is as a reference in planning, treating and providing care to patients. Medical record files have administrative value, because the contents contain actions based on responsibility and authority as health workers in realizing health. While medical record files have legal value, because part of the contents contain legal guarantees with legal certainty. Medical record files have financial value, because part of the contents contains information and data that can be used as a basis for calculating the cost of patient health services. Medical record files have an interest in research, meaning that the contents of medical records are useful later for research. (Christy, 2020).

One part of the medical record service unit at the hospital is *filling*, where this section is tasked with taking and distributing medical record documents to health service units both outpatient, inpatient, and emergency.

The role of medical records in the *filling* section is needed for the smooth running of health services. *Filling* (storage) is one part of the medical record unit in charge of storing medical record documents, providing medical record documents, retaining medical record documents, and assisting in the destruction of medical record documents. *Filling* is responsible for the storage of medical record documents. The speed of providing medical record documents in the section (*filling*) affects the speed of service to patients. (Minister of Health of the Republic of Indonesia, 2008).

Good health service standards must also pay attention to the workload of health workers. Workload is the volume of work results or records of work results that can show the volume produced by a number of employees in a certain section (Rohendi, 2011). If the number of workers is small, while the workload is increasing, resulting in low work productivity and will affect the quality of hospital services to patients, vice versa if the number of officers is more than the workload, then there is also a lot of time left so that work becomes less effective (Ministry of Health RI, 2008).

Based on a preliminary survey, the average time for providing outpatient medical record documents at the Imelda Hospital is 13.5 minutes which is not in accordance with the standard time for providing medical record documents set by the Kepmenkes RI No.129 / Menkes / SK / II / 2008.

METHOD

The type of research used is qualitative descriptive research, which is a research method that utilizes qualitative data and is described as descriptive history. The population in this study was all 19 medical record employees. The sample used in this study was part of 4 medical record employees.

In this type of qualitative research, data processing does not have to be done after the data is collected or data processing is complete. In this case, temporary data collected, existing data can be processed and data analysis carried out simultaneously. At the time of data analysis, it can return to the field to find additional data deemed necessary and process it again. data processing in qualitative research is carried out by classifying or categorizing data based on several themes according to the focus of research. The data collected is carried out with the collecting stage which is collecting data derived from interviews. The instrument used to obtain the data is the interview

guideline. The data sources used are: Data taken directly from interviews with officers and observations made and Data taken are the results of outpatient recapitulation. The way data is collected is done by interviews. The data analysis used is descriptive by describing the conditions obtained, which are used for making conclusions based on the results of the field and related theories in the literature review.

RESULTS AND DISCUSSION

Workload review of the performance of filling officers to meet the time standards for providing outpatient medical record files

The workload of *filling officers* and waiting times for providing outpatient medical record files at Imelda public hospital Indonesian workers are presented in the following table:

Table 1. Workload of Filling Officer and Document Provision Time

Filing Officer	Workload	Average Document Provisioning Time
A	356 DOCUMENTS	14.8 MINUTES
B	421 DOKUMENTS	17,1 MINUTES
C	291 DOKUMENTS	12,1 MINUTES
D	359 DOKUMENTS	14,9 MINUTES

Syntax:

$$\text{Average file provisioning time} = \frac{\text{Number of workloads} \times \text{standard workloads}}{60 \text{ minutes}}$$

In table 1 above, it can be seen that of the 4 *filling* officers have different workloads, officer A with 356 documents within 14.8 minutes, officer B with 421 documents within 17.1 minutes, officer C with 291 documents within 12.1 minutes, and officer A with 359 documents within 14.9 minutes. So that the average time for providing outpatient medical record documents also varies. This can be seen from figure 4.3 below:

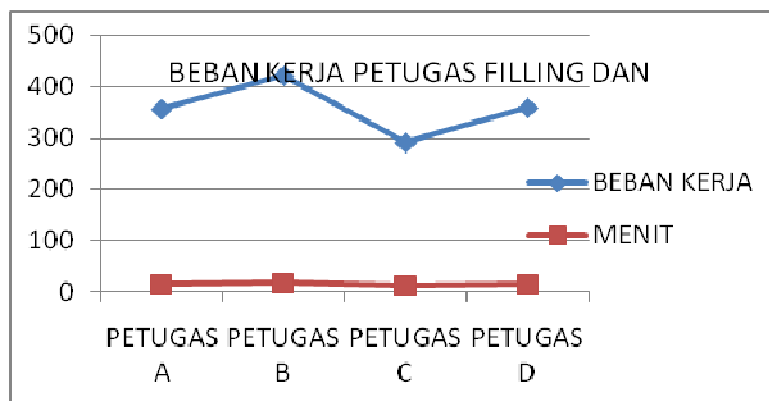


Figure 1. Graph of Workload and Time of Outpatient Document Provision at Imelda Hospital Indonesian

Workload of Filling Officer

Workload is a number of processes or activities that must be completed by a worker within a certain period of time. If a worker is able to complete and adjust to a number of assigned tasks, then it does not become a workload. However, if workers are not successful then these tasks and activities become a workload. Filling staff at Imelda public hospital Indonesian workers have a

high workload. In this study, the workload of *filling officers* was assessed by observing the number of outpatient medical record documents distributed during the observation time. In the picture below we can see that the workload of officer A is the provision of medical record files as many as 356 documents, officer B as many as 421 documents, officer C as many as 291 documents and officer D as many as 359 documents.

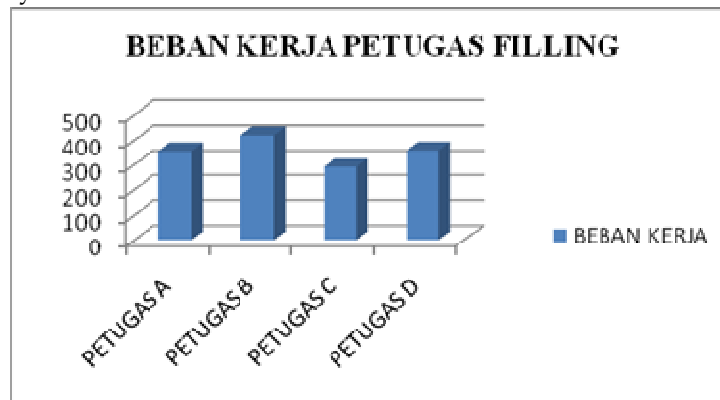


Figure 2. Workload Graph of Filling Staff at Imelda Hospital

Discussion

Workload is a number of processes or activities that must be completed by a worker within a certain period of time. If a worker is able to complete and adjust to a number of assigned tasks, then it does not become a workload. However, if workers are not successful then these tasks and activities become a workload.

Based on observations, the workload of *filling officers* at the Imelda general hospital for Indonesian workers is very high. The results of the analysis show that workload has a very strong effect on the average time of providing medical record files where each officer has a different workload and average time in providing outpatient medical record files. Based on the observations, officer A's workload in providing medical record files was 356 documents with an average provisioning time of 14.8 minutes, officer B's workload in providing medical record files was 421 documents with an average provisioning time of 17.1 minutes, officer C's workload in providing medical record files was 291 documents with an average provisioning time of 12.1 minutes and officer D's workload in providing medical record files was 359 documents with Average provisioning time 14.9 minutes.

Workload greatly affects officer performance. This is because, the workload of *filling officers* is high, causing the average time to provide medical record documents higher. Very high workloads can result in work fatigue and cause decreased work productivity. The activities carried out by filling officers to provide outpatient medical record documents include making tracers, taking medical record documents from the filling rack with medical record numbers contained in the tracer, placing tracers to the place where medical record documents are taken, writing data borrowing medical record documents into expedition books and distributing medical record documents to the intended polyclinic.

CONCLUSION

Based on the results of the study above, it can be concluded that the workload of *filling officers* at Imelda public hospital, Indonesian workers, has a very strong influence on the average time of providing outpatient medical record files. Based on the observations, officer A's workload in providing medical record files was 356 documents with an average provisioning time of 14.8 minutes, officer B's workload in providing medical record files was 421 documents with an

average provisioning time of 17.1 minutes, officer C's workload in providing medical record files was 291 documents with an average provisioning time of 12.1 minutes and officer D's workload in providing medical record files was 359 documents with Average provisioning time 14.9 minutes. So that if the workload of *filling* officers is high, it can cause the average time to provide medical record documents to be higher as well. And very high workloads can result in work fatigue so that high workloads can cause work productivity to decrease.

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