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REVIEW OF INACTIVE MEDICAL RECORD DESTRUCTION ACTIVITIES AT HERMINA HOSPITAL PALEMBANG YEAR **2021**

Terra Amalia, Ria Angraini

Piksi Ganesha Polytechnic Bandung E-mail: terra5626@gmail.com, riaangarini2609@gmail.com

ARTICLE INFO	ABSTRACT
Received: August, 26 th 2021 Revised: September, 14 th 2021 Approved: September, 16 th 2021	Various methods and systems used to improve the quality of the management and storage of medical record files, one of which is to reduce the volume of archives that have no use value, to reduce archive buildup and create better and more efficient storage space, making it easier for officers to carry out their duties search and expedite the patient's treatment process. This study uses a qualitative type of research, with a descriptive method. The data collection in this study used the interview and observation (checklist) method. The population in this study were officers of the medical record work unit at Hermina Hospital Palembang in 2021. Based on the research, it can be concluded that the retention of inactive medical record files in 2021 is being carried out by medical record officers and the destruction of inactive medical record files has not been carried out because constrained by the COVID- 19 pandemic, there are officers who carry out WFH (Work from Home) along with service hours. At the Hermina Hospital in Palembang, the standard operating procedure (SOP) regarding the destruction of inactive medical record files at the Hermina Palembang hospital already exists, but has not been implemented is 0.000 <0.05, it can be concluded that it is accepted, meaning that there is a difference in scores between before and after being treated with water
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INTRODUCTION

According to the Minister of Health No. 269/MENKES/PER/III/2008 medical records are those that contain records and documents regarding patient identity, examination, treatment, actions and other services that have been provided to patients (Kholili, 2011).

Apart from being a means of communication between service providers, medical record files also have many other benefits (Rokhim, 2020), as stated in the Minister of Health Regulation No. 269/MENKES/PER/III/2008 article 13, regarding the use of medical record files such as:

- a. Health maintenance and patient treatment
- b. Evidence in law enforcement
- c. Education and research needs
- d. Funding basis
- e. Health statistics

Based on Permenkes No. 269/MENKES/PER/III/2008 article 8 paragraph 1 which contains "Medical records of inpatients in hospitals are kept for at least 5 (five) years from the last date the patient was treated or discharged", paragraph 2 which contains " After the time limit of 5 (five) years as referred to in paragraph (1) is exceeded, the medical record can be destroyed, except for the summary of discharge and approval of medical action", paragraph 3 which contains "The summary of discharge and approval of medical action as referred to in paragraph (2) must kept for a period of 10 (ten) years from the date the summary of discharge as referred to in paragraphs (1) and (3) is carried out by officers appointed by the head of the service facility. health services", the hospital health service provider is obliged to periodically reduce and destroy medical record files for at least 5 years from the year the last time the patient was treated.

According to (Kamil, Putra, Erawantini, & Muna, 2020) states that medical record management education is related to medical record management, including assembling, coding, indexing, filling, and retention and destruction. Retention officers already have medical record education qualifications, so officers from medical records can direct and assist other officers if they are confused in carrying out medical record retention (Apriliani, Muflihatin, & Muna, 2020). This is in accordance with Masauty's 2018 research which states that the education aspect is an integral part in determining the best way to start the behavior change process, with education the wider the increase in knowledge, this will become the basis for officers to better understand their duties as responsibilities.

The USG (Urgency, Seriousness, Growth) method is a way to determine the priority order of problems by paying attention to the urgency, seriousness, and the possibility of the problem growing bigger. USG (Urgency, Seriousness, Growth) is one of the tools to arrange the priority order of problems to be solved. How to determine the level of urgency, seriousness, and development of the problem by giving a score of 1-5. According to Santoso (2017) states that the USG (Urgency, Seriousness, Growth) method

to prioritize problems is carried out by observation and interviews with officers. Problems that have the highest total score are priority problems.

Based on the preliminary survey that has been carried out, the destruction of medical record files at the Hermina Palembang Hospital in 2019 has been carried out. Destruction of medical record files has been carried out since 2015 in stages, starting from selecting files that have entered the eradication period, then directly destroying files that meet the criteria for destruction.

The purpose of this study was to determine the process of destroying inactive medical record files at the Hermina Palembang hospital in 2021, to determine the standard operating procedure for the destruction of medical record files at the Hermina Palembang hospital to determine the selection process for active to inactive files, to find out which inactive medical record files were still available useful.

RESEARCH METHOD

This research use descriptive qualitative methods. Qualitative research method is a research method based on the philosophy of postpositivism, used to examine the condition of natural objects, (as opposed to experiments) where the researcher is the key instrument, data collection techniques are carried out by triangulation (combined), data analysis is inductive/qualitative, and the results of qualitative research emphasize meaning rather than generalization (Sugiyono, 2019). This type of research uses a qualitative approach to determine the review of medical record file destruction activities at the Hermina Hospital Palembang in 2021.

The population of this study were 3 medical record officers in the filling unit of Hermina Palembang Hospital in 2021. The sample of this study was the head of medical records and 3 medical records officers in the filling unit of Hermina Palembang Hospital in 2021.

RESULT AND DISCUSSION

A. Research Results

1. The process of destroying inactive medical record files at Hermina Hospital, Palembang in 2021

Table 1 Destruction of Inactive Medical Record Files at Hermina Hospital

No.	Observation	Yes	No	Description
1.	Retention			Retention activities at Hermina
				Hospital Palembang are being
				implemented
2.	Extermination			The extermination activities at the
				Hermina Hospital in Palembang
				have not been carried out because
				they are constrained by the
				COVID-19 pandemic and the
				shortage of staff

Based on the results of observations and interviews conducted with medical record officers at the Hermina Palembang hospital that the retention of inactive medical record files in 2021 is being carried out by medical record officers and the destruction of inactive

Terra Amalia, Ria Angraini

medical record files has not been carried out because it is constrained by the COVID-19

Terra Amalia, Ria Angraini

pandemic Covid-19. This makes there are officers who carry out WFH (Work from Home) and are constrained by the shortage of medical record officers.

2. Standard Operational Procedure for Destruction of Medical Record Files at Hermina Hospital Palembang Table 2 Standard Operational Destruction Procedures

No.	Observation	Yes	No	Description
1.	SOP (Standard Operating Procedure) regarding destruction	✓		There is already a Standard Operating Procedure (SPO) which is still based on the regulations of the Hermina Palembang hospital and has followed the eradication policy based on Permenkes 269 article 8 of 2008.

Based on the results of observations and interviews conducted with medical record officers at the Hermina Palembang hospital that the standard operating procedure (SOP) regarding the destruction of inactive medical record files at the Hermina Palembang hospital already exists, but has not been implemented due to the covid-19 pandemic.

3. Medical Record File Selection Process Active to Inactive

Based on the results of observations and interviews conducted with medical record officers at the Hermina Hospital in Palembang, the selection process for medical record files from active to inactive is carried out by looking at the patient's last treatment, which is 5 years from the last date the patient was treated at the Hermina Hospital. Palembang.

The implementation of retention activities begins by sweeping the medical record files from the alphabet A to Z, this is done after hours of service at the Hermina Hospital in Palembang. Constraints in the process of selecting medical record files from active to inactive are:

- 1. By time because it coincides with the time of service hours.
- 2. It is difficult to know when the patient's last date of treatment was, so it had to be checked one by one.
- 3. Actually, it can be checked through computerized history when the last date for treatment was the data can be withdrawn, but at Hermina Hospital Palembang it was not biased because it did not have a good application.

4. Knowing Inactive Medical Record Files That Are Still Valuable

Based on the results of observations and interviews conducted with medical record officers at Hermina Hospital Palembang, in-active medical records that are still of value that are not destroyed are informed consent sheets or medical consent sheets, HIV case sheets and research and education sheets.

B. Discussion

1. The process of destroying inactive medical record files at Hermina Hospital, Palembang in 2021

According to the Ministry of Health of the Republic of Indonesia in 2006 concerning Guidelines for the Implementation and Procedures of Hospital Medical

Terra Amalia, Ria Angraini

Records in Indonesia Revision II, destruction is a process of physically destroying medical record archives whose functions and use values have ended. Total destruction must be carried out by burning, chopping or recycling, so that the contents and shape cannot be recognized.

Based on the results of observations and interviews conducted with medical record officers at the Hermina Palembang hospital, it can be concluded that the inactive medical record file retention activity in 2021 is being carried out by medical record officers and the destruction of inactive medical record files has not been carried out because it is constrained by the COVID-19 pandemic. -19 has made there are officers who carry out WFH (Work from Home), along with the time-of-service hours and are constrained by the shortage of medical record officers.

2. Standard Operational Procedure for Destruction of Medical Record Files at Hermina Hospital Palembang

Procedures are procedures, rules and guidelines in the implementation of a job. Procedure is the development of professional standardization and policies that have been previously established, whether in the form of laws, ministerial regulations, minimum service standards and others. Each hospital has a different procedure for storing medical record files tailored to the needs of their services.

Based on the results of observations and interviews conducted with medical record officers at the Hermina Palembang hospital, the standard operating procedure (SOP) regarding the destruction of inactive medical record files at the Hermina Palembang hospital already exists, but has not been implemented due to the Covid-19 pandemic.

3. Medical Record File Selection Process Active to Inactive

Inactive medical records, files that have been keep a minimum of 5 years in the medical record work unit at the hospital starting from the last date the patient was served at a health service facility or 5 years after death.

Based on the results of observations and interviews conducted with medical record officers at the Hermina Hospital in Palembang, the selection process for medical record files from active to inactive is carried out by looking at the patient's last treatment, which is 5 years from the last date the patient was treated at the Hermina Hospital. Palembang.

4. Knowing Inactive Medical Record Files That Are Still Valuable

Archival assessment is an activity to evaluate the use value of the information contained in the archive. The results of the archive assessment are that it will be known archives that have permanent use value that must be stored forever, and archives of temporary use value that can be destroyed immediately or at a later date (Suraja, 2006).

Based on the results of observations and interviews conducted with medical record officers at Hermina Hospital Palembang, in-active medical records that are still of value that are not destroyed are informed consent sheets or medical consent sheets, HIV case sheets and research and education sheets.

CONCLUSION

Based on the research, it can be concluded that the retention of inactive medical record files in 2021 is being carried out by medical record officers and the destruction of inactive medical record files has not been carried out because constrained by the COVID-19 pandemic, there are officers who carry out WFH (Work from Home) along with service hours. At the Hermina Hospital in Palembang, the standard operating procedure

(SOP) regarding the destruction of inactive medical record files at the Hermina Palembang hospital already exists, but has not been implemented.

At the Hermina Hospital in Palembang, the selection process for medical record files from active to inactive is done by looking at the patient's last treatment, which is 5 years from the last date the patient was treated at the Hermina Hospital Palembang. The implementation of retention activities begins by combing through the medical record files from the alphabet A to Z, this is done after hours of service at the Hermina Hospital in Palembang.

At the Hermina Hospital in Palembang, inactive medical records that are still of value that are not destroyed are informed consent sheets or medical consent sheets, HIV case sheets and research and education sheets. At the Hermina Hospital in Palembang, the file transfer from active to inactive has not been carried out and has not been destroyed due to the covid-19 pandemic so that some medical record officers at Hermina Hospital do WFH (Work from Home) and the officers are focused on carrying out patient service activities.

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