

Analysis of Factors Causing Incomplete Entry and Exit Summary Inpatient at RS X, Kharishma Dyah Febriyani, NIM.G41181258, 2022, Health Information Management, Health, State Polytechnic Jember, Ervina Rachmawati, S.ST., M.P.H (Advisor 1)

Kharishma Dyah Febriyani
*Study Program of Health Information Management
Department of Health*

ABSTRACT

The entry and exit summary form contain patient identification information, how to receive the patient through, how to enter, sent by, and includes a summary of data when the patient is discharged. Based on the results of a preliminary study at Hospital X, found that 20.30% incompleteness in filling out the entry and exit summary forms. The purpose of this study was to analyze factors causing the incompleteness of filling out the entry and exit summaries. This type of research is qualitative, the research subjects are 4 inpatient admissions and 4 MDiC. Data collection uses in-depth interviews, observation, and documentation. The results of the study on individual factors, namely the age of admission and MDiC are included in the productive and adult age categories, having a long working period, the level of education does not match the qualifications, and lack of knowledge related to the completeness of filling in the entry and exit summaries. Psychological factors, namely admission and MDiC have a good perception, attitudes that are less related to the completeness of filling out the entry and exit summaries, no training has been held for filling in medical records, and the absence of a reward and punishment system. Organizational factors, namely the existence of SPO for filling in medical records, the implementation of socialization, as well as the implementation of monitoring and evaluation that is not optimal. The conclusion from the study of the factors causing incomplete entry and exit summaries are education that does not match qualifications, knowledge and attitude are still lacking, training is not carried out, there is no reward/punishment system, socialization, monitoring and evaluation are not optimal so it is advisable to place officers according to with their qualifications, provide training, provide reward/punishment to admissions and MDiC, conduct socialization periodically, evenly and further improve the implementation of monitoring and evaluation of admissions and MDiC performance.

Keywords: *Incompleteness, inpatient, Summary of entry and exit*