Analysis of the Causes of Delays in Returning Inpatient Medical Record Files at The Hospital: Literature Review (Analisis Penyebab Keterlambatan Pengembalian Berkas Rekam Medis Rawat Inap di Rumah Sakit: Literature Review).

Ervina Rachmawati, S.ST., MPH. (As Chief Conselour)

Alfiah Rizkanitami Muntu

Study Program of Medical Record Majoring of Health

ABSTRACT

The quality or quality of medical records is one of several parameters in assessing the quality of health services in hospitals. One of the important indicators of medical record quality is the timeliness of returning medical record files which refers to the minimum service standard (SPM) guidelines. There are several previous studies showing a high percentage of delays in returning inpatient medical record files. The purpose of this study was to determine the cause of the delay in returning inpatient medical record files based on the 5M theory. This research method is a literature review using articles published in 2010-2020 and the database is sourced from (Google Scholar and Garuda Portal). There are 23 articles that have been filtered through inclusion and exclusion criteria. The results of this study indicate that the man factor is the main factor causing delays in returning inpatient medical record files, namely (86%); knowledge of medical record officers is still lacking (26%); there is no special officer in returning medical record files (17%); the high workload of nurses and doctors (8.6%), the method factor is (69%); SOP socialization has not been carried out maximally (48%); there is no SOP for returning inpatient medical record files (8.6%), the materials factor is (69%); incomplete filling in the medical record file (61%); machine factor, namely (17%); the distance of returning medical record files from the nurse installation to the medical record installation is quite far (8.6%); Computers that are used together with others so that the return of medical record files is hampered (4.3%), the money factor is (9%); officers who return medical record files on time will be given a reward and vice versa will be given a sanction (4.3%). Based on the results of the study, it is necessary to increase the knowledge of officers by conducting training related to medical record activities, maximizing the overall socialization of the medical record file return soup and also monitoring the evaluation of the process of returning inpatient medical records.

Keywords: delay, return, inpatient medical records.