SUMMARY

Influence of Obligation and Voluntary Factors on Compliance in Filling Out Medical Records in dr. M. Soewandhie Hospital Surabaya (Study Based on Milgram and Niven Theory)

The landscape of health service in Indonesia changed when National Social Coverage System Act (Undang-Undang Sistem Jaminan Sosial Nasional) took into effect in January 1st, 2014, ushering in the era of National Health Coverage (Jaminan Keseharan Nasional). dr. M. Soewandhie Hospital has been having an obstruction in making complete medical records and this was a trouble not only because complete medical records is important in the era of JKN, but also because it is a necessary tool used in monitoring and evaluation. For instance, in February 2014 amongst the treatment rooms, only one room (ICU room) had no inpatient medical records incompleteness. The rest of them (Tulip and Safir, Bugenvil, Teratai, Anggek, Seruni, Nifas, Neonatus, NICU, and ICCU) had incompleteness. The incompleteness was because (1) medical resume was unfilled (29%), (2) new patient admission form had no doctor 's signature (15,2%), (3) responsible doctor form (lembar Dokter Penanggung Jawab Pelayanan) was unfilled (11,3%), (4) final diagnosis was unfilled (11,2%), (5) informed consent was unfilled (8%), and (6) nursery care (asuhan keperawatan) was unfilled (6%). Note that the doctor accounted for the first five of those items while the paramedic accounted only for the last item.

Explanation for the lack of compliancecan be possibly found by analyzing the factors stated in Milgram's theory and Niven's theory. Based on the two theories, two kinds of factors were concocted, namely obligation factors and voluntary factors. The obligation factors consisted of status of the hospital; status of the hospital chairperson and the monitoring and evaluation director; legitimacy of the hospital chairperson and the monitoring and evaluation director; responsibility of doctors; support among doctors; and closeness of the hospital chairperson and the monitoring and evaluation director. The voluntary factors consisted of understanding of instruction, quality of interaction, assurance, attitude, personality, and social isolation. Besides, there are also other influencing factors, namely: law penalty and Hospital Management Information System.

The study aimed to (1) analyze the compliance in filling out the medical records in inpatient unit in dr. M. Soewandhie Hospital, (2) analyze the obligation factors of compliance based on Milgram's theory in the completeness of the filling out of medical records in inpatient unit in dr. M. Soewandhie Hospital, (3) analyze the voluntary factors of compliance based on Niven's theory in the completeness of the filling out of medical records in inpatient unit in dr. M. Soewandhie Hospital, (4) analyze the influence of doctor's compliance according to obligation factors and voluntary factors on the completeness of the filling out of medical records in inpatient unit in dr. M. Soewandhie Hospital, and (5) compose a recommendation in increasing doctor's compliance in the completeness of the filling out of medical records in inpatient unit in RSUD dr. M. Soewandhie.

The study used observational study using questionnaires to collect data from doctors in inpatient unit. Secondary data, medical records and recapitulation data of the completeness of the filling out of medical records, was also used. The research design was descriptive observational method, chosen according to the aim to compose a recommendation in increasing the compliance in completing the filling out of medical records. This was a cross-sectional research with a sample of 35 specialist doctors. The study was conducted in inpatient unit of dr. M. Soewandhie Hospital during January and February 2015.

The research's findings were as follows. The majority of the obligation factors (i.e. status of the hospital, status of the hospital chairperson and the monitoring and evaluation director, legitimacy of the hospital chairperson and the monitoring and evaluation sub-division chiefs, responsibility of doctors, support among doctors, and closeness of the hospital chairperson and the monitoring and evaluation director) scored high according to doctors in dr. M. Soewandhie Hospital. The same condition was also found in the voluntary factors (i.e. understanding of instruction, quality of interaction, assurance, attitude, personality, and social isolation) with the majority of them scores high according to doctors in dr. M. Soewandhie Hospital. All medical records that should be filled out were found to be incomplete. Hence, it could be inferred that the doctors aren't compliant in filling out the medical records. Subvariables that influenced doctor's compliance in filling out medical records, according to influence test on obligation factors, were legitimacy of the hospital chairperson and the monitoring and evaluation director and responsibility of doctors. On the influence test on voluntary factors, subvariable that influenced doctor's compliance in filling out medical records was understanding of instruction. Considering the above findings, the study recommended the followings: (1) using doctors' performance in filling out medical records as one of the measures of overall work performance; (2) analyzing each doctor's work strain in order to identify doctors with too much work strain; (3) increasing the capacity of the Medical Records Committee (Panitia Rekam Medis) and optimizing its functions; (4) evaluating and publicizing the content of Medical Records Guidebook (Buku Pedoman Pengisian Rekam Medis) continually; (5) evaluating the forms of medical record periodically; (6) involving Medical Committee (Komite Medik) and representations from Functional Medical Staff (Staf Medis Fungsional) in arranging and evaluating medical records and (7) procuring Medical Records Guidebook for all doctors and all rooms.

ABSTRACT

Influence of Obligation and Voluntary Factors on Compliance in Filling Out Medical Records in dr. M. Soewandhie Hospital Surabaya (Study Based on Milgram and Niven Theory)

The implementation of National Social Security Reform Act (SJSN) urged dr. M. Soewandhie Hospital to fix its medical records system. In February 2014, amongst the treatment rooms, only one room had complete inpatient medical records. Explanation for this could be possibly found in the theories by Milgram and by Niven. The factors in Milgram's theory (i.e. status of the hospital, status of the Hospital chairperson and the monitoring and evaluation sub-division chiefs, legitimacy of the hospital chairperson and the monitoring and evaluation subdivision chiefs, responsibility of doctors, among doctors, and closeness of the hospital chairperson and the monitoring and evaluation director) are related to obligation whereas in Niven's, the factors (i.e. understanding of instruction, quality of interaction, assurance, attitude, personality, and social isolation) are related to voluntary. The purpose of the study was to compose a recommendation in increasing doctors' compliance in filling out medical records. The study used observational study using questionnaires. Secondary data, medical records and recapitulation data of the completeness of the filling out of medical records, was also used. The research design was descriptive observational method. This was a cross-sectional research with sample of 35 specialist doctors. The study was conducted in inpatient unit of the hospital during January and February 2015.

The findings were as follows. The majority of both the obligation factors and the voluntary factors scored high according to the doctors. Most of the medical records that should be filled out were found incomplete, signaling that the doctors weren'tcompliant in filling out the medical records. Influence test on obligation factors shown that legitimacy of the hospital chairperson and the monitoring and evaluation director and responsibility of doctors were significant subvariables in influencing compliance while influence test on voluntary factors shown that understanding of instruction was significant. The study suggests using medical records performance as measure for work performance, identifying doctors with too much work strain, optimizing Medical Records Committee (Panitia Rekam Medis), conducting evaluation and publication on Medical Records Guidebook (Buku Pedoman Pengisian Rekam Medis), evaluating forms in medical record periodically, involving Functional Medical Staff (Staf Medis Fungsional) and Medical Committee (Komite Medik) in composing medical records, and procuring Medical Records Guidebook for every doctor and in every room.

Keyword: Obligation, Voluntary, Hospital medical record, Doctor