REVIEW OF THE IMPLEMENTATION OF OUTPATIENT REGISTRATION SERVICES AT KATOBENGKE HEALTH CENTER

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A B S T R A C T

Registration is a service process carried out by the Health Center to obtain the identity of patients who come. This study aims to evaluate the implementation of outpatient registration at the Katobengke Health Center in 2024. Based on initial observations, there are several obstacles in the registration system. One problem that often arises is the loss of network connection, which forces officers to record data manually when patients seek treatment. In addition, patients often do not bring important documents such as Identity Cards (KTP), Family Cards (KK), and Treatment Cards, which also hinder the registration process. In this study, the population studied consisted of 3 registration officers. The method used is a descriptive approach with a qualitative approach, and data were collected through interviews and observations. The population that became the focus was 3 officers who worked in the outpatient registration section. The results of the study showed that in terms of human resources, the number of medical record officers in the registration unit was still relatively lacking, because there was only one officer who had a D3 medical record education background, while one other officer had a different background or S1 public health. In terms of methods , there was no SOP for using the E-Puskesmas Application so that the old registration flow was still used. In terms of materials , the internet network connection and server were sometimes problematic so that it could hinder service time when registering patients. In terms of machines, the number of computers and printers was currently sufficient in the medical record and registration units, in addition, the condition of the computers and printers was good and could be used and there were no problems during use. In terms of money , the budget for the needs of medical recorders and registration officers was already available. It is recommended that a Wi-Fi network be added and the E-Puskesmas application server be re-evaluated.

INTRODUCTION

According to (Permenkes RI Nomor 43 Tahun, 2019) , the Community Health Center is a health service facility that is responsible for implementing public and individual health efforts at the first level. Its main focus is on health promotion and disease prevention, with the aim of achieving an optimal level of public health in its work area. In carrying out its function as an organizer of individual health efforts at the initial level, the Community Health Center has the authority to manage patient medical records.

As the frontline health center in health services and as the gatekeeper in the formal health system and referral screening, the health center is expected to provide quality services in accordance with the established service standards and competencies. To support this goal, one of the policies and strategies promoted by the Ministry of Health is to improve equal access and quality of health services, especially in Community Health Centers, through the implementation of accreditation policies. (Wahyuni et al., 2022) .

A Community Health Center is a health service institution that carries out public health efforts as well as individual health efforts at the first level. The main focus of the Health Center is on promotive and preventive efforts, with the aim of achieving an optimal level of public health in its working area. It is expected that strengthening basic health services in the Health Center can be implemented comprehensively, covering various aspects of the services needed. (M.Muzuh et al., 2023) .

Medical records according to (Permenkes RI No. 24 Tahun, 2022) Medical record documents contain information about patient identity, examination results, treatment, actions, and other services that have been provided to the patient. The main purpose of medical records is to support orderly administration in an effort to improve the quality of health services, which can be achieved through the implementation of effective medical records in every health facility. The information contained in

the medical record file serves as a basis for creating a good information system, which in turn can improve the quality of existing services. (Widayanti et al., 2023) . Medical record services must meet the specified service time standards. However, in practice, there are often various factors that cause delays in the service process in the outpatient registration section (Andi Ritonga et al., 2023) .

Medical record services must meet the average service time standards. However, in reality there are still often factors and delays that often occur in services at outpatient registration locations (Sabela Hasibuan, 2020) .

Based on previous research conducted by (Aringgi Al Pasya Darwis, 2022) , Review of the Implementation of Registration Services for Outpatients at the Ciputat Timur Health Center, South Tangerang. The problems found were disconnected internet connections, patients rarely brought identity cards, and lack of officers. Previous research conducted by (Elliyanti & Septri Badoriasari, 2022) , The results showed that the outpatient registration service system at Ernaldi Bahar Hospital, South Sumatra Province, is still not optimal. This is due to several obstacles that arise during the registration process, such as disruption to the internet network and difficulty in finding outpatient medical record files. The tracer printing machine often jams, so officers must wait for the SJP/SEP first before the medical record files can be searched or taken to be submitted to the outpatient polyclinic.

In the initial observation conducted on March 25, 2024 at the Outpatient Registration Place (TPPRJ) of the Katobengke Health Center, it was seen that this Health Center had implemented the E-Puskesmas system, which is a web-based service system that regulates the workflow in the Medical Records unit and is responsible for collecting patient data. The registration process begins at the counter, where new and old patients who wish to undergo outpatient treatment will be registered. After that, they will be directed to the Outpatient Registration Place (TPPRJ)

Based on the results of interviews with officers at the Outpatient Registration Unit, it was revealed that the service system used was E-Puskesmas. However, this system faces several constraints, such as frequent network connection drops. This requires officers to manually record data when patients arrive, which causes them to have to repeat the work to register patients. In addition, many patients do not bring important documents, such as Identity Cards (KTP), Family Cards (KK), and Medical Cards, which makes it difficult for officers to find data and register. This situation is further exacerbated by the limited number of officers in the Outpatient Registration Service and in the Medical Records storage area. Based on this problem, the researcher is interested in conducting a study entitled "Review of the Implementation of Outpatient Registration Services at the Katobengke Health Center in 2024."

METHODOLOGY

This study uses a qualitative approach with a phenomenological method. This method focuses on a deep understanding of individual experiences, by looking at and listening to their explanations and perspectives more closely and in detail. In this study, the main objective is to explore and understand the experiences experienced by respondents, namely descriptive design.

This research will be conducted at Katobengke Health Center, Baubau City, this research will take place from April - June 2024. The subjects in this study were 3 registration officers. Data processing in this study was from the results of interviews, observation checklists and documentation studies.

RESULTS AND DISCUSSION
Implementation of Outpatient Registration Services Reviewed from *Human* Factors

At the Katobengke Health Center, the total number of medical record officers is 6 people, namely 3 people with a D3 medical record education background, 1 person with a Bachelor's degree in nursing, 1 person with a Bachelor's degree in Public Health and 1 person with a D3 in midwifery.

Table 1. Results of Observations of Human Factors

Indicator	Observation Results
Number of Medical Recording HR	The number of medical record officers is 6 people, 3 medical recorders, 1 midwifery graduate, 1 Bachelor of Public Health graduate and 1 Bachelor of Public Health graduate.
Level of adequacy of medical record human resources	Currently, the number of medical record officers, namely intern medical record staff, is sufficient, but what is still lacking is the lack of medical record officers with civil servant status.
Obstacles when performing services	The problem experienced was that the quality of the internet network was inadequate.

Source: Researcher's Primary Data, 2024

Based on the results of the observation table above, the total number of medical record officers at the Katobengke Health Center is 6 people, with 3 medical recorders and 3 other people who are graduates of the medical recorder program. The current number of needs needed for medical record human resources is that medical record officers with civil servant status are still needed at the Katobengke Health Center. Apart from that, the obstacles they face when providing services are inadequate internet network connections.

Based on the results of the research that has been conducted, it is not in accordance with the theory According to (Rika et al., 2021) , in his research at Adnaan WD Regional Hospital, the lack of health workers can result in delays in services. To overcome this problem and meet the needs of human resources, both medical and non-medical personnel involved in outpatient services, a recruitment process needs to be carried out. This study is in line with the findings of Salsiani Sinta & Sulistiawan (2022) at Buton Regency Hospital, which emphasizes that "man" or humans are the main resource in an organization. In the context of management, the human factor is the most important element. Humans not only set goals, but are also responsible for carrying out the process to achieve those goals. This is in line with the research results (Salsiani Sinta & Sulistiawan, 2022) Officers who do not have an educational background in medical records and have not received specific training in this field can have a negative impact on the quality of service, thereby hampering the patient acceptance process.

This is in line with research (Riza Suci Ernaman Putri et al., 2022) that the educational qualifications of officers who do not have a medical records education background must often be included in medical records science training.

Implementation of Outpatient Registration Services Reviewed from *Methods* Factors

At Katobengke Health Center, the current type of registration is semi-electronic, where the registration process officers register new patients and old patients manually and electronically. The steps are that the patient takes the intended queue number after which he will be called by the registration officer according to his serial number, and will be interviewed whether this patient is an old patient or a new patient, if the type of patient is known, the registration officer will carry out the registration process according to the manual registration service flow, after the manual process has been completed, it will be re-registered using the E-Puskesmas application if it has been done, it will be delivered according to the intended polyclinic .

Table 2. Observation Results For *The Methods* Factor

Indicator	Observation Results
SOP SPM	Already available and implemented
Patient Registration SOP	It already exists, it already exists and it has been implemented.
SOP for Using the E-Puskesmas Application	Not yet, currently officers are still using the old registration service flow, for use of the e-health center application it will be carried out if the manual registration process has been carried out.
Obstacles experienced and how to anticipate them	The obstacles experienced in the use of the e-health center application are poor network, servers that often have problems, to anticipate this, officers will write in a manual book that has been prepared after which officers will input patients when the service process is complete.

Source: Researcher's Primary Data, 2024

Based on the above observations, currently the Katobengke Health Center has implemented minimum service standards, but currently only the Patient Registration SOP is available, the SOP for using the E-Health Center application has not been created and implemented at all, in addition to the

obstacles in the process they have problems, namely network connections and servers that often have problems.

To ensure smooth work, a procedural guideline is needed that regulates the implementation of activities, namely the Standard Operating Procedure (SOP). This SOP functions to control the work so that it can run well and according to expectations (Salsiani Sinta & Sulistiawan, 2022) . Standard Operating Procedure (SOP) is a guideline or reference for carrying out work tasks in accordance with the functions and performance evaluation tools of government agencies, based on technical, administrative, and procedural indicators that are relevant to the work procedures, procedures, and systems in the related work unit. (Hanafi & Misnaimah, 2019) .

This is in line with research conducted by (Aringgi Al Pasya Darwis, 2022) at Ciputat Timur Health Center, South Tangerang, where outpatient registration officers have carried out their duties in accordance with the established patient service flow. However, they do not have detailed Standard Operating Procedures (SOPs), including procedures for the registration flow, manual patient registration, and patient registration through the SIMPUS system. As a result, in carrying out daily services, they only rely on the existing patient service flow without clear procedural guidelines.

Implementation of Outpatient Registration Services Reviewed from *Material Factors* (Materials).

The implementation of outpatient registration services in terms of material factors is currently inadequate, because there are various obstacles faced during the patient registration process. This shows that the existing facilities and infrastructure do not fully support the smooth running of the registration process , namely in the form of poor internet network connections and problematic E-Puskesmas application servers so that they will interfere when the registration process is in progress.

Table 3. Results *of Material* Factor Observations (Materials)

Indicator	Observation Results
Good internet network quality	The WiFi network connection often experiences disruptions, and the e-puskemas application server sometimes experiences disruptions.
Number of Wifi owned	The number of Wi-Fi units available at TPPRJ is only 1 unit.

Source: Researcher's Primary Data, 2024

Based on the observation results above, the quality of the internet network is inadequate and the server sometimes experiences problems, in addition, the number of Wi-Fi units available is only 1 unit at TPPRJ. These obstacles make it difficult for registration officers during the patient registration service process.

According to (Aringgi Al Pasya Darwis, 2022) . There is a proposal for the procurement of Wi-Fi and other facilities that can support the implementation of the Health Center Management Information System (SIMPUS).

Based on the results of the research that has been carried out, it is not in accordance with the theory that According to (Salsiani Sinta & Sulistiawan, 2022) Materials consist of semi-finished materials and finished materials. In the business world, to achieve optimal results, in addition to requiring experts, the use of materials is also an important factor. This is because humans and materials are interrelated; without materials, the desired results will not be achieved. This research is also not in accordance with (Aringgi Al Pasya Darwis, 2022) There is a proposal for the procurement of Wi-Fi and other facilities that can support the implementation of the Health Center Management Information System (SIMPUS).

Implementation of Outpatient Registration Services Reviewed from *Machine* Factors

The implementation of outpatient registration services is reviewed from the *Machine factor* , namely, computers and *printers* are currently sufficient to support the registration process

Table 4. Machine Factor Observation Results

Indicator	Observation Results
Number of computers and printers	In the registration room, there are 2 computer units and 3 *printer* units available.
Computers and *printers* can be used	At this time the computer and *printer* can be used, no problems have been found with the computer and *printer*.

Source: Researcher's Primary Data, 2024

Based on the observation results above, currently in the registration and medical record unit the number of computers and printers is sufficient, namely 2 computers and 3 *printers* , in addition to the computers and *printers* can be run without any problems on both units. The absence of a queue machine in the outpatient reception area does not affect the waiting time for patient services.

Based on the results of the research that has been conducted, it can be concluded that the machine aspect is in accordance with the existing theory, where facilities and infrastructure function as facilities that support and accelerate activities to achieve goals. In the outpatient installation, the facilities and infrastructure available include registration counters, computers, waiting chairs, basic examination tools, stationery, and internet networks used for the Hospital Management Information System (SIMRS) in each hospital according to (Kurniawati & Kusumawardhani, 2023) .

This research is also in line with (Salsiani Sinta & Sulistiawan, 2022) . Machines are used to simplify and increase profits, and create efficiency in work, facilities include all things that can help and facilitate the operations of a business. This includes both physical goods and financial resources that support effective and efficient communication. Thus, means are needed to support communication so that all processes run smoothly, which are resources or tools that help someone in carrying out work within an organization.

Implementation of Outpatient Registration Services Reviewed from the Money *Factor*

The implementation of outpatient registration services is reviewed from the *money factor.* Currently, the budget for the medical records and registration unit is available and in relation to this, the budget will be submitted. 1 year before the budget is issued.

Table 5. Results of Money Factor Observations

Indicator	Observation Results
Budget	The budget is already available, in addition to that, the budget is first issued and will be submitted after that, 1 year later, the budget will be issued.

Source: *Researcher's Primary Data, 2024*

Based on the observation results above, the budget is currently available to meet all the needs required by medical recorders and registration officers, in addition to the budget release process which must first be submitted 1 year before the budget is released.

machine aspect is in accordance with the theory that *money,* in this case the source of funding, is an important element in achieving goals because everything must be calculated rationally (Saputro et al., 2022) .

CONCLUSION

Implementation patient registration for outpatient care at Health Center Katobengke is done semi-electronically where after manual registration has been completed, it will then be re-registered through the E-Puskesmas application. The waiting time is spent by patients while waiting in the registration service for care the road at Katobengke Health Center, namely for new patient registration, the total time obtained was 14 minutes 47 seconds and for patient registration the total time obtained was 11 minutes 05 seconds. The elements that affect the duration of the waiting time in the outpatient registration process are in the *man aspect* : currently medical record officers still need additional officers in the patient registration unit. Although there are registration officers who do not have a D3 medical record background, but have participated in training related to medical records, in the materials aspect: registration officers are constrained by an unstable internet network connection and the E-Puskesmas application server which often experiences disruptions. in the method aspect, namely, the SOP for waiting time and the SOP for using the E-Puskesmas application do not yet exist.

ACKNOWLEDGMENT

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