

Analisis Faktor-Faktor Kendala Pelaksanaan Nilai guna DRM di Filing Inaktif Rawat Inap di RSUD Dr. M Ashari Pemalang Tahun 2015

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ABSTRAK

ANALISA FAKTOR FAKTOR KENDALA PELAKSANAAN NILAI GUNA DRM DI FILING INAKTIF RAWAT INAP RSUD DR. M. ASHARI PEMALANG TAHUN 2015

Berdasarkan survey awal peneliti melakukan observasi di RSUD dr. M Ashari Pemalang. Kendala tidak terlaksananya nilai guna adalah banyak lembar formulir yang kosong dan tidak diisi oleh dokter maupun perawat. Cara pengumpulan data dilakukan dengan observasi yaitu melakukan pengamatan langsung obyek yang diteliti. Selain itu juga dilakukan dengan cara wawancara dengan kepala unit rekam medis dan petugas filing. Di RSUD dr. M Ashari petugas filing telah melaksanakan tugasnya tetapi masih ada beberapa yang belum dilaksanakan salah satunya adalah ikut serta dalam pelaksanaan nilai guna. Pada RSUD dr. M Ashari tidak terdapat prosedur tetap (protap) maupun kebijakan yang mengatur tentang nilai guna DRM sehingga nilai guna tidak dilaksanakan, selain itu kelengkapan dokumen juga tidak diperhatikan menyebabkan banyak dokumen kosong. Hal tersebut menjadi kendala tidak dilaksanakannya nilai guna. Berdasarkan hasil analisis kuantitatif dan kualitatif pada 20 DRM yaitu 10 DRM tindakan dan 10 DRM nontindakan didapatkan analisis kuantitatif 10 diagnosa nontindakan 20% lengkap dan 80% tidak lengkap, 10 diagnosa dengan tindakan 40% lengkap dan 60% tidak lengkap. Analisis kualitatif 10 diagnosa nontindakan 20% konsisten dan 80% tidak konsisten, 10 diagnosa dengan tindakan 40% konsisten dan 60% tidak konsisten.

Kata Kunci : Dokumen Rekam Medis, Filing, Nilai Guna

**ANALYSIS OF THE FACTOR
FACTORS OBSTACLES TO THE IMPLEMENTATION OF THE VALUE OF
DRM IN THE FILINGS IN-PATIENTIN RSUD DR .M ASHRI PEMALANG
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ABSTRACT

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The medical record aims to support the achievement of the discipline administration in an effort to enhance the quality of health services in the hospital. To know the value of obstacles to the implementation of drm inaktif then done the quantitative analysis and qulitatif documents medical record in pieces. Observation based on the preliminary survey researchers conducted at RSUD dr. MAshari Pemalang Not carried out the value of obstacles to is the number of sheets of form that are empty or not filled doctor and nurse

The manner of data collection is done by observation of direct observation an object is to do the treatment .It is also done by means of an interview with a unit head medical record and the filing. In RSUD dr. M Ashari Pemalang officers filing has performed its task but there are still some who have not carried out one of them is to participate in the implementation of the value to In RSUDdr. MAshari there are no fixed procedure or policy governing about the value to drm so the value to not carried out, besides completeness documents also overlooked cause many documents empty. It became obstacles not unsettled value to Based on the analysis qualitative andqunitatitif on 20 DRMthat is 10 drm acti. n and 10 DRM non action was obtained 10 analysis qunitatitif diagnose non % the act of 20 complete and 80% not complete, with 10 dignosa the act of the 40% complete and 60 % not complete. Qualitative analysis 10 diagnose non action 20% consistent and 80 % not consistent, with 10 diagnose the action of 40 % consistent and 60 % not consistent. We can conclude that obstacles unrealized value to drm is drm incompleteness that is still very high .So that writer give advice should the hospital memperbaiki procedure and policies and provide explanations and direction to medical doctors and nurses that how important the completeness of charging documents medical record

Keyword : Medical Record Document, value , hospitalization