NORMATIVE LAW REVIEW: PMIK WORKLOAD CHALLENGES IN FACING THE RME ERA

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Abstract.

In carrying out the process of processing health data and information, Medical Recorder and Health Information (PMIK) personnel are needed who have the ability to provide services to patients. The emergence of the Minister of Health Regulation Number 24 of 2022 concerning electronic medical records requires every health care facility to run electronic medical records, this makes the workload owned by PMIK reduced. So it is necessary to analyze the challenges of PMIK workload in facing the RME era. The method used is qualitative with a normative law study approach. The approach used for data collection is based on documentation studies through regulations, journals, and news. The tool used for data collection is a notebook. Data processing techniques using secondary data. In carrying out their duties, many Medical Recorders and Health Information (PMIK) still do not understand the use of existing systems properly, this causes delays in the processing of medical data. The abilities possessed by PMIK personnel in the RME era greatly affect the patient data processing process so that it is necessary to conduct training and skill development related to the correct use of the RME system in order to reduce the workload faced by officers.

Keywords: medical records, workload, electronic medical records.

1. INTRODUCTION

Indonesia is in the industrial era 4.0 which is an era of information technology revolution. This is evidenced by the emergence of various technological innovations that have changed significantly (Hendarsyah, 2019). This requires every health service to improve services by utilizing technological developments that are currently developing to be more competitive in facing the of era digitalization. Based on Permenkes Number 24 of 2022 concerning Electronic Medical Records is one of the technological developments currently used in health care facilities. Electronic Medical Records are a collection of lifelong patient medical records using a computer network that can help improve services and shorten the time in providing medical action to patients.

In the implementation of the Minister of Health Regulation Number 24 of 2022 as the basis for implementing Electronic Medical Records in the context of workload is crucial, because in its implementation this regulation must be able to provide clear guidelines and effective implementation to reduce the workload of PMIK officers (Setyaningsih, 2022). Because basically the implementation of Electronic Medical

Records (RME) in practice will reduce the need for Human Resources (HR), this is because the workload of officers becomes lighter (Nursetiawati and Gunawan, 2021). Statistics show that with clear guidelines, workload can be reduced by up to 20% (Widodo, 2021). Therefore, every health care facility needs to evaluate workforce needs planning in accordance with Permenkes RI No. 33 of 2015 concerning guidelines for preparing Health Human Resources planning to describe the real needs of officers in accordance with the required workload.

Based on the results of document review related to the challenges and workload needs of PMIK in the RME era, several problems were found ranging from: Comparative Analysis of the Workload of Medical Record Officers Using the NASA-TLX Method Before and After the Implementation of Electronic Medical Records at Kanjuruhan Hospital (Doctoral dissertation, **STIKES** Panti Waluya Malang), Empowerment of medical record officers on planning the needs of medical record personnel and health information at the Jabung health center, Malang district. Journal of Berkemajuan Community Service, there are still obstacles that hinder the acceptance of rme users (Muna, I., & Sanjaya, G. Y. (2023) Journal of Health Service Management (The Indonesian

Journal of Health Service Management), the ability of Human Resources in implementing electronic medical records (Setiawan, C. T. Et al (2023) Tambusai Health Journal). to the comparison of RME and Conventional workloads (Widiyanto, W. W. (2022)Journal of Health Information Management and Administration (JMIAK).

Based on the existing problems, it is necessary to further analyze the readiness of health workers in facing the Electronic Medical Record era which will affect the workload and competency development that must be possessed by PMIK.

2. THEORETICAL REVIEW

In the era of digital transformation of health services, the implementation of Electronic Medical Records is mandatory for all health service facilities, based on Minister of Health Regulation No. 24 of 2022 requires every health service facility to be able to adapt and be able to master technology that supports patient data management to become more efficient. The aim is that the use of Electronic Medical Records is expected to be able to improve the quality of service and also be able to help speed up the processing of patient data, thereby easing the workload faced by health workers.

Medical Records and Health Information Officers (PMIK) have an important role in Electronic Medical Records. Based on Minister of Health Regulation no. 55 of 2013, PMIK is

required to have adequate competencies, which include professionalism, ethics and skills in managing health data. In research conducted by Uswatun et al. (2024) shows that there are still many PMIKs who have not fully mastered the competencies they have to support the smooth processing of patient medical data. This makes the process of processing patient data slower, causing the workload faced by PMIK to increase.

It is hoped that the existence of regulations regarding Electronic Medical Records will reduce PMIK's workload. Based on research conducted by Bunga et al. (2022) found that PMIK's lack of understanding in the use of Electronic Medical Records can cause delays in processing patient data. Therefore, organizational support needed, such as continuous training, which important in improving competencies. Appropriate training helps PMIK understand how to use Electronic Medical Records properly so minimize errors in processing patient data and be faster.

The successful implementation of Electronic Medical Records is highly dependent on regulations, norms and supportive organizational culture (Scott, 1987). This means that in this case the existing regulations must be able to provide clear regulations, as well as training support provided to PMIK so that the tasks they have can be carried out optimally. Thus, increasing competence and effective organizational support is expected to be able to overcome existing challenges, help improve service quality, and simplify patient data processing.

3. METHOD

This research method is qualitative research with a normative law study approach where data collection techniques are taken through secondary data. This research was conducted in September-October based on documentation studies. The population in this study were all documents, journals, news, articles and regulations related to PMIK workload challenges in the RME era with the main focus on Minister of Health Regulation Number 55 of 2013 and Permenkes Number 24 of 2022. The subjects in this study are laws and regulations. The variables in this study are the workload challenges faced and the development and training provided to officers. The tool used in this research is a notebook that is used to store the results of the data that has been obtained. The research was conducted to determine the workload challenges of PMIK in the RME era.

4. DISCUSSION

1. Competence of PMIK in the Era of Electronic Medical Records Based on Minister of Health Regulation Number 55 of 2013



Figure 1 Results of Competency

Analysis

Based on Minister of Health Regulation Number 55 of 2013, the competency area owned by PMIK consists of 7 competencies, namely Sublime Professionalism, Ethics and Legal, Introspection and Self-Effective Development, Communication, Health Data and Information Management, Clinical Information Skills, Disease Codification and Other Health Problems, and Clinical Procedures, Health Statistics Applications, Basic Epidemiology, and Biomedicine, Management of Medical Records and Health Information Services.

Based on research conducted by (Uswatun et al., 2024) and research conducted by (Erika et al., 2023) related to the Competence of Medical Recorders and Health Information (PMIK), most officers are still unable to master the competencies they have to the fullest. In the RMIK Service Management area, the percentage result is obtained (73.3%) this figure shows the largest percentage result among other competency areas. This shows that the overall competence possessed by PMIK is not optimal. In doing their work, PMIK needs the ability to master the competency areas they have to help facilitate them in completing their work so that it will not affect the workload they have. This competency measures the extent of the ability possessed by PMIK in providing services to patients and the extent to which officers are able to implement existing systems properly so that they can compete with the competencies they have in the current of digitalization. **PMIK** era competencies are based on Minister of Health Regulation Number 55 of 2013 where in carrying out their duties officers must be able to carry out the 7 competencies they have based on predetermined standards.

2. PMIK workload in health facilities in the RME era based on Minister of Health Regulation Number 24 Year 2022

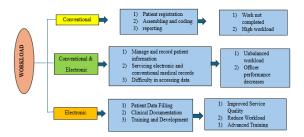


Figure 2 Results of Workload Analysis

Based on the research obtained results related to differences workload faced by PMIK, Minister of Health Regulation 24 of 2022 has regulated the use of RME which will help ease the workload of PMIK but in its implementation officers still often

experience difficulties in using existing data processing systems.

3. Identify challenges faced by PMIK based on workload and competencies in the era of electronic medical records

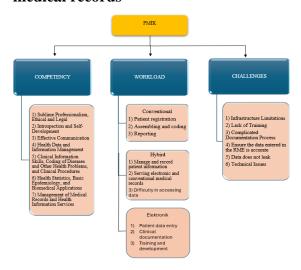


Figure 3 PMIK Challenge Analysis
Results

The results showed that an understanding of the competence of PMIK in carrying out RME is needed so that in its implementation RME is able to reduce the workload faced by PMIK in providing services to patients so that service quality improves.

(Rita & Siswati), (Forentina et al., 2024), and research conducted by (Yuana et al., 2024) explain the workload faced by PMIK. In its implementation, conventional medical records and electronic medical records are able to provide their own benefits

for officers in processing patient data. With the existence of electronic medical records, the workload faced by officers becomes lighter. However, basically the amount of workload faced by officers is indirectly influenced by the competence they have. The ability to process patient data will be easier to do if officers have good competence. This is supported by the emergence of technological developments related to electronic medical records which are regulated in Minister of Health Regulation Number 24 of 2022 to facilitate officers in completing their work. Based on research conducted by (Bunga et al., 2022) there are several challenges faced by **PMIK** in completing their duties. The lack of ability possessed by officers is the biggest challenge faced in the current era of digitalization so that the workload faced by PMIK increases. Therefore, requires officers' it awareness to continue to develop their competencies because this will affect the quality of themselves.

Based on the documentation study conducted, it shows that the competencies and challenges possessed by a PMIK can have a significant influence on the workload they face. It is necessary to understand the existing regulations so that they can perform

their duties based on SOPs that are in accordance with the workload they face. Awareness related the competency development they have helps determine the smoothness in carrying out the data processing process properly. In running RME, it requires the officer's ability to operate a computerized system or what is known computer self-efficacy (CSE). According to Badura (1982) in an article written by (Davis, 1989), selfefficacy is defined as an assessment of how well a person can perform the actions needed to face prospective situations or as a proximal determinant of behavior. Thus, this has an influence on the challenges faced by officers in the current era of digitalization to support their success in providing services in the era of electronic medical records.

Organizational support also affects the workload and challenges faced by officers in providing optimal service to patients. Through targeted trainings, usage simulations, continuous assistance by a team of experts and ensuring that each individual has the opportunity to run RME in order to better understand the various systems used will have an impact on the understanding of officers in providing services and processing patient data. In addition, according to Institutional Theory introduced by Scott (1987) in the article (De Benedictis et al., 2020), it is stated that organizations are built from three important elements, namely cultural-cognitive, regulatory and normative, which together with other resources provide stability and meaning for social life. Based on this theory, in the process of running RME, each health care facility needs to provide regulations, norms and organizational culture to help direct officers regarding the use of existing systems so that the existence of RME helps improve the quality of services in health care facilities.

5. CONCLUSIONS AND ADVICE

In running electronic medical records, officers still often face challenges, one of which is related to the lack of competence they have which is the key to success in providing services lightening the workload they face. Apart from the competencies that must be by **PMIK** related possessed to understanding the use of computerized systems which are a challenge in the process of processing patient data also determines the quality of service provided. It takes awareness of officers related to selfdevelopment of the competencies they have

to be the main factor that supports the service process carried out, able to compete well, and can complete their duties optimally.

Through targeted trainings, simulation of use, continuous assistance by a team of experts and ensuring that each individual has the opportunity to run RME in order to better understand the various systems used will have an impact on the understanding of officers in providing services and processing patient data. In addition, hospitals as health care facilities need regulatory pillars, normative pillars, and cultural pillars to support officer services to direct officers to make changes to support the smooth implementation of RME in the current digitalization era.

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