



ANALYSIS OF INDIVIDUAL FACTORS ON THE USEFULNESS OF TRUSTED INFORMATION SYSTEMS AT X PRIMARY CLINIC

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ABSTRACT

Implementing SIM in Clinics as one of the FKTPs is very useful in providing health services. This study aims to analyze individual factors regarding perceived benefits through the intervening variable perceived ease of use of information technology at private clinics in Jember district. This quantitative research is analytical research with an observational approach. The population of this study was 46 employees at two private clinics who had SIMRS usernames. The sampling technique uses the total sampling method. Research data was obtained from the results of filling out questionnaires by respondents. Data analysis using the SmartPLS application with the Partial Least Square technique. The results show that Individual factors have a strong contribution to perceived ease of use and perceived usefulness. Individual factors have a positive effect on perceived ease of use with a path coefficient value of 0.427, a T-statistic value of 3.498. Individual factors have a positive effect on perceived usefulness with a path coefficient value of 0.077. The path coefficient value of 0.844 shows that there is a strong and positive influence between perceived convenience on perceived usefulness with a high T-statistic value (11.177). Individual factors influence perceived usefulness through the intervening variable perceived ease of use.

Keywords: individual factors; perceived usefulness; SIMRS

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INTRODUCTION

Indonesia is a developing country with a dense population every year. The density of the population will certainly lead to an increase in morbidity and mortality, including increased health services at First Level Health Facilities (FKTP). As time progresses with ongoing changes in globalization, first level health facilities have become one of the elements required to improve a service system that has good quality. (Sutabri, 2016). According to the Government Regulation of the Republic of Indonesia Number 47 of 2016 which relates to health facilities, namely to achieve a good level of public health, health service facilities are needed that can provide affordable health services for all levels of society in the context of improving health, maintaining health, treating diseases, and Health recovery (Reni Nurhidayah, 2020). Pratama clinic is one of the health service agencies in Indonesia which has an equivalent position to the community health center as a first level health facility. Pratama clinic as a health service agency certainly has strategic policy formulation in the internal part, especially organization, management and human resources (HR) and must be able to effectively make decisions to improve the quality of health services to the wider community in order to become a responsive organization. , innovative, effective, efficient. Increasing this vision requires an information management strategy in primary clinic

services(Igiany, 2019). Pratama clinic is one of the health service facilities needed for everyone, especially in sub-district areas.

The quality of information management is an important factor for the success of health service agencies, therefore information technology has an important role in health services today. Information systems have three important roles in supporting health service processes, including supporting health service processes and operations, supporting staff and management decision making and supporting various strategies for competitive advantage. The management information system for health services used in Pratama clinics must provide operational convenience and must be able to overcome obstacles to patient service(Puspitasari, SM, & Wahyudi, 2017) Pratama clinics that have information systems must provide timely access to information, and will definitely be under pressure to be able to improve medical services, reduce medical errors, and at the same time must be able to monitor service activities and control operational costs.(Dipura, SK, & Ramadin, 2018). Therefore, clinics must have a Management Information System that can integrate and which can share real time, precise and accurate information. This management information system cannot run automatically if it is not supported by a software system or enterprise system that is embedded in the clinic's server. Management information systems can be characterized by their function through information and the type of services offered(M. & Herlambang, 2012). An information system is a system whose internal function is limited to processing information by carrying out 6 types of operations, including capturing, transmitting, storing, retrieving, manipulating and displaying information.(Utama, A., Wibowo, A., & Nurhadi, 2014)

Along with developments in information technology, clinics also need to modernize services to improve quality and competitiveness without reducing the social mission. In this context, management information systems have an important role in ensuring fast and accurate quality of health services. A management information system is a system that supports management decision making in formulating strategies to achieve the goals of providing health services(Palupi, 2015). The use of modern information technology provides a great opportunity to reduce clinical errors such as medication errors, diagnostic errors, to support professional health services such as time availability, patient update information, to increase treatment efficiency such as patient waiting times, and to improve the quality of patient service. To increase or reduce the uncertainty of information users is the main function of information. Information gaps are inaccurate and slow down the rate of information. So, it will slow down decision making. Information is data that is processed into a form that is more useful and more meaningful for those who receive it. The quality of information depends on three very dominant things, namely relevance, timeliness and accuracy of information(Oktaviani, N., & Widiarta, 2019).

Jember Regency is one of the districts in East Java province. In 2020, there were 70 clinics spread across Jember Regency(BPS, 2020).In 2022, there will be 68 clinics spread across all sub-districts in Jember Regency.In 2023, the number of clinics in Jember Regency will increase to 92 clinics, both inpatient and outpatient clinics (Dinkes, 2023). Minister of Health Regulation number 24 of 2022 concerning Medical Records requires that all health facilities must provide Electronic Medical Records (RME) no later than 31 December 2023. Based on this, the Ministry of Health has developed SIMKLINIK GOS which has been adapted to the needs of clinics and independent practice places for health workers . Based on these regulations, the clinicin Jember Regency are slowly starting to implement management information systems, especially clinics that collaborate with BPJS Health. In its

implementation, there are inhibiting factors including a lack of human resources, insufficient funds for procurement, no SOPs (Standard Operating Procedures) and management information system programs that are not in accordance with user needs.(Aji, 2019).

At the beginning of 2024, there are 69 clinics out of the total number of clinics that have implemented a management information system, meaning that more than 50% of clinics in Jember Regency have implemented a management information system (Jember Health Office, 2024). Clinic X is a clinic in Jember Regency and is relatively new in implementing management information systems. The management information system program at Clinic X Medical records are written manually by doctors, nurses, midwives and pharmacists. From the data contained in the patient's medical record, information about the patient's health is obtained. Information is data that is processed into a form that is more useful and more meaningful for those who receive it. The quality of information depends on 3The most dominant things are relevance, timeliness and accuracy of information(Kadir, 2003). Results of a preliminary study conducted with Wawanway, the management of Clinic Since June 2021, Clinic X has started using a computerized SIM with the help of a computerized vendor by the IT team. During the first 3 months of implementing the management information system, the IT and management departments carry out evaluations once a month and once every 3 months in the first year of application or only if there are problems. This is carried out as a process of monitoring the user's ability and compliance in entering data and patient examination results into the management information system as well as evaluating the suitability of the existing menu to the needs of each unit.

Data for the July–August 2022 period regarding the implementation of the management information system found various problems encountered, including 52 delays in the patient data input process and 15 data input errors. Errors arise from discrepancies between the data contained in the patient's manual medical record and the data that has been input into the management information system. The expected value of information errors should be zero or no errors at all. These errors make information inaccurate and slow down the rate of information. Inaccurate information gaps slow down the rate of information which results in delays in decision making. The success or failure of implementing information technology in an organization is influenced by the user's perspective on the technology. According to Jogiyanto (2007) acceptance of technology by individual users cannot be separated from the users' beliefs in the technology. Beliefs represent cognitive structures that individuals develop after collecting, processing, and synthesizing information about information technology, and incorporate individual judgments of various outcomes related to their use of technology. Beliefs have been shown to have a significant impact on individual behavior. Thus, the process of forming trust is interesting for further research (Bimaniar, 2018).

The success and failure of organizations in implementing information systems is due to differences in user perspectives, namely investment will be valuable if it is used by its users to contribute to the operational and strategic goals of the organization (Agarwal and Karahanna, 2000). Research on the determinants of individual *acceptance* and the use of information systems in organizations has been widely carried out. According to Asmara (2018), states that if viewed from a psychological process, a person's *beliefs* about information systems related to *usefulness* and *ease of use* are influenced by three dominant sources of influence, namely *individual factors*, *institutional influences*, and *social influences* . According to Elwis et al (2003), several factors influence the use of information systems, namely individual factors, institutional factors, and social factors. Respondents' perception of the usefulness of using

SIM-RSU Kaliwates Jember is influenced by institutional factors, but not by social factors and individual factors.

Investments in information technology are worthwhile if the technology is used by users to contribute to the organization's operational and strategic goals. Clinical Management Information Systems have an important role in supporting health service activities and managerial decision making in hospitals. Based on the description above, it shows that SIMRS is needed to support health service activities and plays an important role in producing information used by hospital managerial parties for decision making. The success of SIMRS implementation is very important, especially in the trust in the use of information systems by users. The aim of this research is that the researcher wants to know the influence of individual factors on the perception of ease and usefulness, so the title of this research is "Analysis of the Influence of Individual Factors on the Perception of the Convenience and Usefulness of the X Clinic Information System in Jember Regency".

METHOD

This research is an analytical research with an observational approach with cross-sectional data collection. The research was conducted at two private clinics, namely the Restu Ibu Clinic and the Harapan Mulya Clinic in June-August 2023. The population in this study were officers at two private clinics, namely the Restu Ibu Clinic and the Harapan Mulya Clinic who had usernames at SIMRS. as many as 46 people consisting of doctors, nurses, midwives, pharmacies, laboratories, administration (registration and medical records). The sampling technique used the total sampling method because according to 11 the population was less than 100, so the entire population was used as the research sample (Setiadi, 2013). Data collection uses direct interview techniques with respondents. The research instrument is a questionnaire that has been modified from previous research questionnaires. The questionnaire has been tested for validity and reliability and the results are valid and reliable.

Table 1.

Validity Test Results of individual factors, perceived usefulness, perceived convenience

No	rtable	rcount
1.	0.553	0.700
2.	0.553	0.589
3.	0.553	0.680
4.	0.553	0.582
5.	0.553	0.700
6.	0.553	0.800
7.	0.553	0.700
8.	0.553	0.631
9.	0.553	0.919
10.	0.553	0.776
11.	0.553	0.631
12.	0.553	0.631

The results of the reliability test on this research questionnaire showed a value of $0.954 > 0.632$. This shows that the research questionnaire used is reliable. The data obtained was then processed computerized using the help of the SmartPLS application in a hypothesis testing model using the Partial Least Square technique using SmartPLS software to test how much influence the two independent variables have on the dependent variable seen from the Inner and Outer model values. (Sunyoto, 2012). That Ethical permission for this research was obtained from the research ethics committee of the Faculty of Dentistry, Jember University with certificate number 2043/UN25.8/KEPK/DL/2023.

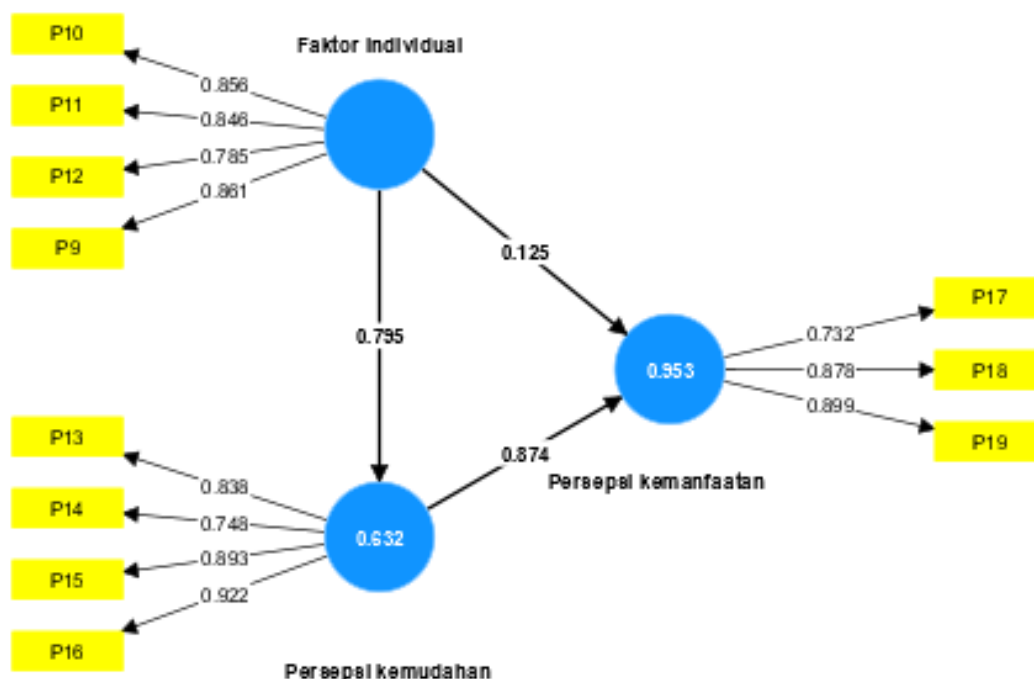
RESULTS

Table 1.
Characteristics of Respondents

Category	f	%
Gender		
Man	16	34.8
Woman	30	65.2
Age		
21-30 years old	32	69.6
31-40 years old	14	30.4
Education		
SMA/SMK	4	8.7
D3	24	52
D4/S1	18	39.3
Profession		
Doctor	3	6.5
Nurse	13	28.3
Midwife	7	15.3
Pharmacy	9	19.5
Laboratory	5	10.9
Administration	9	19.5

The characteristics of respondents in this study include gender, age, education and profession. Respondent characteristics were analyzed descriptively to provide an explanation of the description of each component. The following is a table of characteristics of the 46 research respondents. Based on table 1, it shows that the majority of respondents or employees at clinic X are 30 women or 65.2%. Meanwhile, a small portion were men, totaling 16 people or 34.8%. Midwives, nurses and several staff are dominated by women. Work culture can be divided into masculine and feminine dimensions (Anisa, R., Ramani, A., & Prasetyowati, 2015). Masculine-oriented work culture, men at work have strength, creativity and a sense of responsibility. In a feminist work culture, a working woman has roles such as teaching, caring for patients, and helping others (Gibson, 2012). Based on table 1, it shows that some of the respondents aged 21–30 years were 32 people or 69.6%. Meanwhile, the small number aged 31–40 years were 14 people or 30.4%. Most of the respondents' education was D3, namely 24 people or 52%. Meanwhile, there were 18 people with D4/S1 education or 39.3%. 4 people had high school education or 8.7%. The profession of respondents in both clinics was 3 doctors, 6.5%. 13 people in the nursing profession or 28.3%, 7 people in the midwife profession or 15.3%, 9 people in the pharmacy profession or 19.5%. The laboratory section is 5 people or 10.9% and the administrative staff is 9 people or 19.5%.

The following image shows the results of the Outer Model:



Picture1.Outer Model

Table 2.
List of External Loadings

	Individual Factors	Perceived ease of use	Perceived usefulness
p10	0.856		
p11	0.846		
p12	0.785		
p13			0.838
p14			0.748
Pg15			0.893
p16			0.922
Pg17		0.732	
P.18		0.878	
p19		0.899	
p9	0.861		
p10	0.856		
p11	0.846		
p12	0.785		
p13			0.838
p14			0.748
Pg15			0.893
p16			0.922
Pg17		0.732	

Table 2 shows the Outer Loading List, it can be seen that individual factors (P10, P11, P12, P9) have a high loading level on each research variable. Individual factors have loading levels between 0.785 to 0.861. This shows that individual factors have a strong contribution to perceived ease of use and perceived usefulness. The results of the analysis provide a very important picture regarding the contribution of each indicator to the construct being measured.

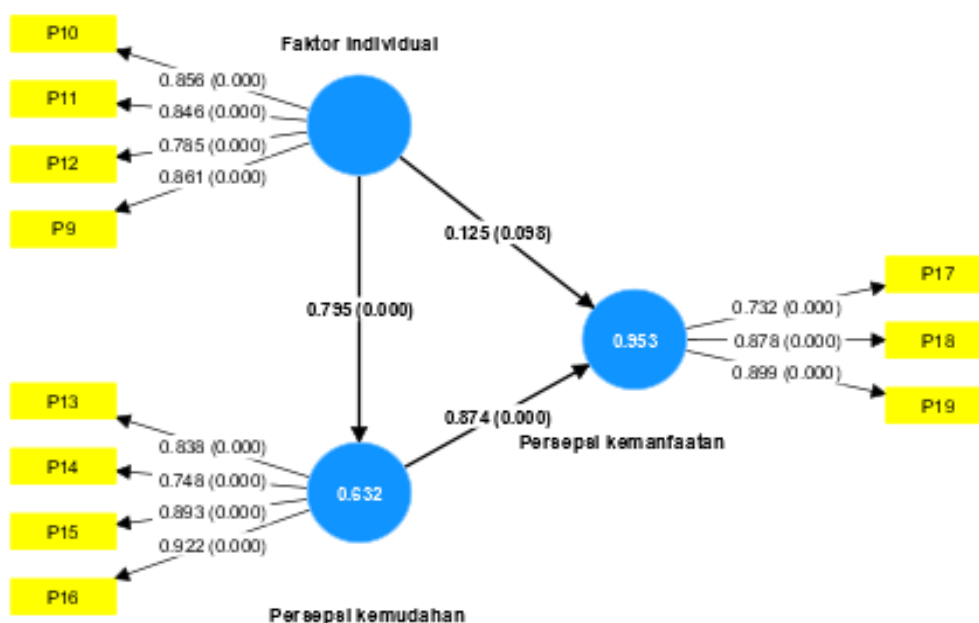
Variables representing individual factors play a strong role in influencing user perceptions of the convenience and benefits of the information system under study. Perceived usefulness also has a high loading, with indicators P13, P14, P15, and P16 having loadings between 0.748 and 0.922. This shows that perceived usefulness is significantly influenced by the factors represented by these indicators, this is in accordance with the conceptual assumption that perceived usefulness plays an important role in user acceptance of information systems. The perceived ease of use variable also has a significant loading, with indicators P17, P18, and P19 having loadings between 0.732 to 0.899. These results mean that perceived ease of use has a strong influence on user acceptance of information system use in accordance with the hypothesis. The following is a picture of the SEM-PLS output regarding construct reliability and validity:

Table 3.
Reliability and Validity Table

	Cronbach's Alpha	Reliability composition (rho_a)	of Combined reliability (rho_c)	Average variance extracted (AVE)
Individual Factors	0.860	0.881	0.904	0.702
Perceived ease	0.873	0.881	0.914	0.727
Perceived usefulness	0.788	0.805	0.877	0.705

Table 3 shows the SEM-PLS output results regarding reliability and construct validity, concluded that individual factors, perceived ease of use, and perceived usefulness have a high level of reliability. Cronbach's alpha, Composite reliability (rho_a), and Composite reliability (rho_c) all show sufficient values, namely above 0.7, which means the level of consistency and reliability of the research instrument is good. These results provide confidence that the indicators used to measure the construct are related consistently. Average Variance Extracted (AVE), which is an indicator of construct validity, also shows a sufficient value, namely above 0.5, which shows that the construct being measured has a strong relationship with the indicators. This illustrates that individual factors, perceived ease of use, and perceived usefulness are valid constructs in the context of this research. Thus, the results of this analysis strengthen confidence in the conceptual model used in this research.

The following is an overview of the Inner Model:



Picture2.Inner Model

R-Square coefficient of determination

The R2 value is used to measure the level of variation in changes in the independent variable towards the dependent variable. The higher the R2 value, the better the prediction model of the proposed research model. The following is a description of the R2 value based on the following research:

Table 4.
R-Square output

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics (O/STDEV)	P value
Perceived usefulness	0.953	0.957	0.013	72,800	0,000
Perceived ease of use	0.632	0.658	0.073	8,680	0,000

The results of the research show that the value of perceived ease of the dependent variable R2 (Original Sample) is > 0.632, meaning that the variation in changes in the dependent variable that can be explained by the independent variable is > 63.2%, while the rest is explained by other variables. beyond the proposed model. Perception of the usefulness of the dependent variable R2 (Original Sample) > 0.953, meaning that the variation in changes in the dependent variable that can be explained by the independent variable is > 95.3%, while the remainder is explained by other variables outside the proposed model. The results of the R-Square analysis show that the model has good ability to explain variations in perceived usefulness and perceived ease of use of SIMRS in private clinics. Most of the variation in perceived usefulness (approximately 95.3%) and perceived ease of use (approximately 63.2%) can be explained by the factors included in the model, including individual factors and perceived ease of use.

Path Coefficient

The path coefficient shows how big the relationship or influence of the latent construct is carried out using the bootstrapping procedure. Hypothesis testing is carried out by looking at the partial test results of each variable. To see whether or not there is an influence of exogenous variables on endogenous variables, you can see the T-statistic value which is compared with the T-table value. The output line coefficients are as follows:

Table 5.
Output Path Coefficient

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics (O/STDEV)	P value
Individual Factors -> Perceived usefulness	0.125	0.115	0.075	1,653	0.098
Individual Factors -> Perceived ease of use	0.795	0.810	0.045	17,608	0,000
Perceived ease of use -> perceived usefulness	0.874	0.883	0.065	13,484	0,000

The results of data analysis based on table 5, the path coefficient highlights the significant influence of individual factors on perceived ease of use (0.795) and perceived usefulness (0.125). This shows that factors such as the level of technological understanding and comfort in using technology have a significant influence on the perception of users in private clinics regarding the ease and benefits of using management information systems. Apart from that, perceived ease of use also has a significant influence on perceived usefulness (0.874) which shows the importance of perceived ease of use in forming perceptions of usefulness of use.management information system.

Table 6.
Indirect Effect Output

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics (O/STDEV)	P value
Individual Factors -> Perceived usefulness	0.695	0.716	0.076	9,117	0,000

The research results show that the T-statistic value is greater than the T-table so that the results of each influence in the model are significant. So the path coefficient value shows that it can be used as a reference for the level of significance in hypothesis testing. The path coefficient score or Inner Model indicated by the T-statistic value must be above 1.96 for a two-sided hypothesis and 1.64 for a one-sided hypothesis for hypothesis testing at 5% alpha and 80% power (Hair et al., 2017). Analysis of the indirect influence of individual factors has an indirect influence on perceived usefulness through perceived ease of use (0.695). This shows that users' understanding and comfort in using management information systems also indirectly contribute to perceived benefits.

DISCUSSION

Management Information Systems (MIS) have an important role in supporting health service activities and managerial decision making (Romadhon, 2020a). This study aims to analyze individual factors regarding perceived usefulness through the intervening variable perceived ease of management information system at clinic X in Jember Regency. Data analysis in this research uses the PLS application. The PLS application can analyze constructs formed with reflective and formative indicators. The purpose of PLS is to help researchers for prediction purposes (Notoatmodjo, 2012). There are two model evaluations in PLS, namely the measurement model (Outer Model), namely the model that measures indicators and their variables, and the structural model (Inner Model), namely the model that measures one variable with another variable. Individual factors have a strong contribution to perceived ease of use and perceived usefulness. The results of the analysis provide a very important picture regarding the contribution of each indicator to the construct being measured. Variables representing individual factors play a strong role in influencing user perceptions of the convenience and benefits of the information system under study (Agarwal, R., & Karahanna, 2000).

The structural model (Inner Model) is a model that measures one variable with another variable. The Inner Model is able to analyze a conceptual model that integrates a case study of the management information system at clinic A management information system is an information technology system that supports the process of managing and administering information. Individual factors, including the level of technological understanding, user skills, and level of comfort in using technology, were identified as factors that influence the perceived ease and perceived usefulness of management information systems (Romadhon, 2020b). Individuals work because they are motivated by their desire to fulfill satisfaction. Individuals are the only resources that have reason, feelings, skills, knowledge and creativity (Henny, 2023). This individual factor is one of the things that will impact or influence the application of SIMRS. It can be concluded that, the more positive individual factors such as *user* experience and knowledge, the higher the perceived ease of use of the SIMRS information system at Clinic X.

As a result, individual factors such as user experience or knowledge about the benefits of information technology do not have a significant influence in shaping the perception of the benefits of using management information systems in clinic is significant. So the path

coefficient value shows that it can be used as a reference for the level of significance in hypothesis testing. This shows the user's understanding and comfort in using information management system also indirectly contribute to perceived benefits. This research can provide a more in-depth view of how SIMRS in private clinics can be optimized through increasing perceived ease of use and benefits of using the technology. Increased user understanding and comfort may be necessary to increase implementation acceptance and effectiveness management information system at clinic X, thereby providing greater benefits for managing information and health services at the location.

Individuals who do not understand the benefits of information systems for work or daily life may consider it less important (Maksum, 2017). Another factor that affects *user* perception is fear or discomfort with the new system. Fear and discomfort cause *users* to worry that they cannot master or will be able to complicate work. Based on information from clinic staff, not all staff or employees understand the functions and urgency related to the existence of a management information system, meaning that not all staff are able to apply it because they think the existence of this SIM is complicated and hampers work. Based on this, clinic staff cannot feel the benefits and convenience of implementing a management information system at Clinic X. Lack of awareness of system or technology changes and generation gaps in the acceptance of new systems or technologies (Riani, 2020). The importance of providing adequate education, training, and support to SIMRS employees or *users* in increasing understanding of the benefits of information systems. These steps are expected to overcome the insignificant influence of individual factors on the benefits of using information systems in private clinics (Kurniawan, 2020).

The results of this analysis are influenced by several things, one of which is a lack of education or training regarding information systems. Individuals who do not understand the benefits of information systems for work or daily life may consider them less important (Maksum, 2017). Another factor that influences user perception is fear or discomfort towards the new system. Fear and discomfort cause users to worry that they will not be able to master it or that it will make the job difficult (Puspitasari, SM, & Wahyudi, 2017). Based on information from clinic staff, not all staff or employees understand the function and urgency of having a SIM, meaning that not all staff are able to apply it because they think the existence of this management information system is complicated and hinders work. Based on this, the clinic staff cannot experience the benefits and convenience of implementing the management information system at clinic (Riani, 2020). The importance of providing adequate education, training and support to employees or users of management information systems in increasing understanding of the benefits of information systems. These steps are expected to overcome the insignificant influence of individual factors on the benefits of using information systems in private clinics (Kristanto, 2008).

CONCLUSION

Individual factors, which include user understanding and comfort, have a strong influence on perceived ease of use and perceived usefulness influence the acceptance and utilization of management information systems (S. Herlambang, 2016). Efforts to increase the level of technological understanding and increase comfort in using management information systems in the X clinic environment can strengthen perceptions of usefulness and ease of use, thereby facilitating more effective application of information technology (Puspitasari, SM, & Wahyudi, 2017). Therefore, it is recommended that private clinics prioritize training and education for users regarding management information systems to improve the implementation process and benefits of health information technology. Clinic X should

facilitate a training program on the use of information technology for operational employees (users). Clinic X must carry out regular evaluations of the technology systems used. This includes identifying areas of the management information system unit that need to be improved or updated. When there are system updates or upgrades, ensure that users are informed and given training if necessary (Hade, S., Djalla, A., & Rusman, 2019).

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