



FACTORS CAUSING DELAY IN RETURN OF MEDICAL RECORD FILES OF INPATIENTS

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ABSTRACT

The purpose of the study was to determine the factors causing the delay in returning inpatient medical record files. This study used a qualitative approach with observation and interview methods. The factors causing the delay were human resource factors, lack of compliance and discipline of doctors and nurses in filling out medical records, uncertainty of doctor's visiting hours and DPJP not being a permanent doctor. Infrastructure factors, namely medical record forms are not always available in the inpatient room. The method factor is that there is no written SOP for filling out medical records. The policy factor is that there is no reward and punishment for filling out inpatient medical records.

Keywords: delay; inpatient medical records; return of medical record files

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INTRODUCTION

According to the Regulation of the Minister of Health of the Republic of Indonesia No. 4 of 2018, a hospital is a health service center that provides comprehensive individual health services, including the availability of outpatient, inpatient and emergency services (IGD), as well as preventive, curative and rehabilitative services supported by the participation of doctors, nurses and other medical personnel. Based on the Regulation of the Minister of Health of the Republic of Indonesia No. 24 of 2022 concerning medical records, every health service is required to have medical records. Medical records are files containing notes and documents about the patient's identity, examination results, treatment given, actions and other services provided to patients through health service facilities.

Hospital medical records have quite an important function, one of which is as a basis for calculating costs. If medical records are incomplete, the hospital may lose information about the patient's history, in addition, medical records can be evidence as legal protection for patients, doctors and other health workers. Therefore, hospitals must manage medical records properly and correctly (Wijaya & Dewi, 2017). Based on research conducted by Lieskyantika & Purwanti (2018) at RS Level II. Dr. Soedjono Magelang showed that the factors causing the delay in returning inpatient medical record files were the lack of accuracy and compliance of health workers in filling in the completeness of the medical record files, there were no special officers to monitor the return of inpatient medical record files and socialization efforts had not been carried out optimally by ward nurses. Another study conducted by Lubis (2007) RSU IPI Medan, the factors causing the delay in returning inpatient medical record files were doctors and nurses who were late in filling out the medical record files.

Based on the initial survey, it was found that there was still inaccuracy in the timeliness of returning inpatient medical record files at Ibnu Sina Padang Panjang Hospital in April-September 2022. The researcher conducted interviews with the Head of the Inpatient Room and the Head of the Medical Records Unit. The head of the inpatient room stated that there was still a delay in returning medical record files because the doctor had not finished filling out the medical record files. From the Head of the Medical Records Unit, it was found that 1294 medical record files were returned, 410 or 32% of medical record files were returned not on time and 884 or 68% of medical record files were returned on time. The highest delay occurred in the Siti Aisyah ward, namely 167 or 40.73% and the lowest delay occurred in the Safa Marwa ward, namely 85 or 20.73%. Based on the background description above, the researcher is interested in conducting a study entitled "Factors Causing Delays in Returning Medical Record Files at the Ibnu Sina Padang Panjang Islamic Hospital in 2023".

METHOD

This study applies a qualitative design, the type of research uses a descriptive approach that aims to determine the factors causing delays in returning inpatient medical record files at Ibnu Sina Hospital, Padang Panjang in 2023. According to (Anggito, Albi & Setiawan, 2018) descriptive qualitative research means that researchers must describe an object or phenomenon that will be written in a narrative text.

RESULT

Human Resources Factors

Lack of compliance and discipline of doctors and nurses in filling out medical records completely within 1x24 hours

Based on observations and in-depth interviews conducted with doctors regarding compliance in filling out complete medical records within 1x24 hours.

"In terms of compliance and discipline in filling out medical records, most doctors are already compliant, to achieve 1x24 hours, there are still some who have not." (doctor, 28 years old)

"Already compliant, but there are some doctors who are not yet because of the many patients." (Nurse Siti Mukmin, 27 years old)

"The doctor complies with filling in the complete and appropriate status on time (the initial filling in of the medical assessment is filled in by the doctor within 1 x 24 hours)." (Nurse Siti Aisyah, 33 years old)

Based on the results of observations and in-depth interviews related to nurse discipline in filling out medical records within 1x24 hours.

"For nurse discipline, there are some incomplete medical records, for the future they are complete. The filling of the medical records is around 90-100% complete". (Head of Medical Records, 31 years old)

"Nurses are obedient and disciplined, but sometimes when there are many patients, medical records cannot be completed on that shift, but for the next shift, they are transferred to be completed." (Head of Safa Marwa Room, 31 years old)

"Disciplined nurses fill in the status completely and on time within 1 x 24 hours". (Head of Inpatient Room Siti Aisyah, 39 years old)

"For nurses in the Siti Mukmin room, they are disciplined in filling out medical records within 1x24 hours" (Head of the Siti Mukmin Room, 37 years old)

DPJP is a non-permanent doctor

Based on the results of interviews conducted regarding permanent and non-permanent doctors.

"For temporary doctors, usually if there are many patients, they are stacked and filled tomorrow, if there are few patients, the doctor is willing to fill them now. Permanent doctors are usually obedient in filling them". (Head of Room Siti Mukmin, 37 years old).

"There are some doctors who sometimes have difficulty visiting the hospital because of outside doctors." (Nurse Safa Marwa, 34 years old)

Uncertainty about doctor's visiting hours

Based on the results of interviews conducted with the Head of the Inpatient Room, Siti Aisyah and the Head of Medical Records.

"For doctors who are not yet disciplined in filling out medical records due to the uncertainty of the doctor's visiting hours, doctors are unable to come especially on weekends". (Head of Inpatient Room Siti Aisyah, 39 years old).

"The problem now is the discipline of doctors, currently around 80% of the filling in of medical records carried out by doctors, there are still many that are incomplete, because the doctor's visit schedule is uncertain." (Head of Medical Records, 31 years old)

Infrastructure Factors

Based on the interview results regarding the availability of medical record forms.

Forms are always available. (doctor, 28 years old)

Sometimes it is incomplete. The reason is from RM the status is out of stock. (Nurse Safa Marwa, 34 years old)

Always available and always there whenever needed. (Nurse Siti Mukmin, 27 years old)

Many forms are incomplete. (Nurse Siti Aisyah, 33 years old)

Yes, there must be a recheck before going home, and the required forms are always there, but sometimes they are lacking. (Head of Medical Records, 31 years old)

Available, but sometimes there are delays from the medical records room so sometimes we are still waiting (Head of the Safa Marwa Room, 31 years old)

Sometimes it's complete, sometimes some things are missing. (Head of the Siti Mukmin Room, 37 years old)

There were some forms missing at the end of the month because the stock of medical records ran out. (Head of Inpatient Room Siti Aisyah, 39 years old)

Method Factor

Completeness of filling in medical records is very important in order to produce quality medical records and have the value of medical record use as according to Widjaya (2014),

including as a means of communication, quality evaluation, payment and legal protection. Incomplete medical records will affect the information conveyed, payment for health services that have been provided and cannot be used as evidence of legal protection if needed at any time. The results of observations and in-depth interviews conducted with DPJP, nurses, heads of medical records and heads of inpatient rooms related to knowledge regarding SOPs for filling out medical records.

"Yes, I know the SOP for filling in Medical Records. Such as filling in the initial assessment 1x24 hours after the patient enters either from the polyclinic or the ER, CPPT must be filled in once a day by the relevant DPJP". (doctor, 28 years old)

"We know the SOP for filling out medical records well, but unfortunately there is no written SOP yet." (Nurse Safa Marwa, 34 years old)

"It's also not clear, because we only know that these nurses work, finish filling and then report it." (Nurse Siti Mukmin, 27 years old)

"For our part as nurses, of course we know the SOP from start to finish about filling out the form." (Nurse Siti Aisyah, 33 years old)

"Yes, there is an SOP. It is socialized verbally without being written down." (Head of Medical Records, 31 years old)

"SOP or procedures already exist and are very clear and should be carried out according to procedure." (Head of Room Safa Marwa, 31 years old)

"I know. But it hasn't been implemented well" (Head of Room Siti Mukmin, 37 years old)

"Yes, the SOP for filling out medical records is done first, an assessment for inpatient assessment which is filled in 1x24 hours when the patient is being treated". (Head of Inpatient Room Siti Aisyah, 39 years old)

DISCUSSION

Human Resources Factors

Lack of compliance and discipline of doctors and nurses in filling out medical records completely within 1x24 hours

Doctors and nurses are the human resources with the largest proportion of other health workers, of course, they have the responsibility to provide optimal and quality services to patients continuously. Therefore, the compliance of doctors and nurses in filling out medical records needs to be considered to improve the quality of service. Based on the research results, the cause of the delay in returning inpatient medical record files is caused by doctors and nurses. Doctors who are not disciplined and less careful in filling out the resume of medical record files so that the medical record files are late and must wait to be completed first. For nurses, they are disciplined in filling out medical records, but sometimes they are not disciplined because there are many patients and the files are not immediately returned by nurses to the medical record room due to the workload of nurses in the inpatient room. The similarity of research by Lubis (2017), Rohman (2017), Al Aufa (2018), Lily Widjaja (2018), and Amalia et al. (2020) is that they all state that doctors and nurses are still not disciplined in filling out and signing medical record files, resulting in delays in returning medical record documents.

DPJP is a non-permanent doctor

From the results of interviews conducted with the Head of the Siti Mukmin Room and nurse Safa Marwa, it shows that permanent and non-permanent doctors also affect the delay factor in returning inpatient medical record files, because permanent doctors are obedient in filling out medical records. Unlike non-permanent doctors, filling out medical records is done if there are few patients, when there are many patients the doctor will fill it out the next day and another reason is that non-permanent doctors whose presence is only occasionally in the hospital so to complete the filling of medical records is done when the doctor makes the next visit. This condition results in the delay in filling out some medical records. This is what causes the medical records to not be filled in and the doctor has continued his journey because many patients have been waiting at other health facilities. This study is in line with Abdul Haqqi (2020) who stated that the delay in returning inpatient medical record files was due to busy doctors and most of the doctors in the hospital were not home doctors or non-permanent doctors in the hospital. The results of another study by Erlindai (2019) stated that DPJP doctors were generally visiting doctors so that sometimes they did not make daily visits.

Uncertainty about doctor's visiting hours

The factor that delays the return of inpatient medical records is the uncertainty of the doctor's visiting hours. This is because most doctor visits are only conducted during the opening and closing hours of the polyclinic. The doctor in charge of the patient (DPJP) is sometimes unable to come, especially on weekends. One of the problems that affects the length of time to return medical records is the uncertainty of the doctor's visiting hours to the hospital. The doctor in charge of the patient (DPJP) sometimes also makes visits before or after the schedule at the hospital polyclinic and sometimes the doctor makes visits during the night hours. The uncertainty of the doctor's visiting hours makes nurses have less time to prepare the necessary medical records. This is supported by Mirfat et al., (2017) who found that the uncertain doctor's visiting hours make the return of medical records late so that the medical records department has to wait for the doctor to fill out the medical record documents completely and have been signed by the doctor.

Infrastructure Factors

In organizing medical records at Ibnu Sina Padang Panjang Islamic Hospital, standard forms are used to document medical actions and services provided to patients. Medical record files are confidential documents, so each sheet of medical record form must be protected by being put in a folder or folder. The medical record files belong to the health service facility and must be stored in the hospital. Facilities and infrastructure are needed to support operational activities such as the availability of forms in the medical records section. From the results of observations and interviews that have been conducted regarding the availability of forms in the medical records section, medical record forms are always available in the medical records room, but the forms are not always available in the inpatient room. Due to the uncertainty of time in the distribution of sending and picking up forms in the medical records room, this is an obstacle in the distribution of inpatient medical record forms. This study is in line with Annisa (2017) the obstacle in the distribution of inpatient medical records is the uncertain timeline for returning inpatient obstetric medical record documents at RSUI Bnyu Bening Boyolai. Another study conducted by Septian & Rizky (2022) at Bukit Asam Medika Hospital, Tanjung Enim, the distribution of medical record documents was fast because the location of the inpatient building was close to the registration area.

Method Factor

From the results of interviews conducted at the Ibnu Sina Padang Panjang Islamic Hospital regarding the SOP for filling in medical records, some know how to fill in medical records

properly, but some do not understand how to fill in inpatient medical records. After conducting observations, it turns out that the SOP for filling in medical records does not yet exist in the inpatient room, this is what causes delays in returning inpatient medical records. As for the procedure for checking the completeness of medical records at the Ibnu Sina Padang Panjang Islamic Hospital, the head of medical records conducts a closed review, meaning conducting an analysis after the medical records are returned to the medical records room, while the head of the inpatient room conducts a prior examination of the medical records, if there are any incomplete ones, then inform them to complete the filling of the medical records, after which they are returned to the medical records room. The medical record notes that are most often incompletely filled in by doctors and nurses are signatures, no names, discharge resumes and medical resumes. From the results of observations conducted on nurses, heads of medical records and heads of rooms, it was found that the return of medical record documents was still not in accordance with the SOP, because the medical records of inpatients who had been discharged should have been returned to the medical records section within 1x24 hours, while at the Ibnu Sina Padang Panjang Islamic Hospital it was more than 1x24 hours. This is because there is no written SOP on filling out medical records. This statement is in line with the research results of Christy & Waruwu (2021) and Mia Eka Rosa (2019) that there is no SOP for returning inpatient medical record files after the patient goes home within 1x24 hours. There are no written regulations or (SOP) for returning inpatient medical record files, thus affecting the inaccuracy of the timeliness of the return of medical record files.

Policy Factors

In Law of the Republic of Indonesia No. 29 of 2004 it is explained that sanctions will be given if medical records are not completed. However, during an interview at the Ibnu Sina Padang Panjang Islamic Hospital, the head of medical records said that there had been no reward or punishment given to doctors and nurses regarding incomplete medical record files, but the head of medical records would return them to the treatment room or the doctor concerned to be completed. The goal is that incomplete medical record files can be completed so as to produce medical data that is useful and effective. The results of Faizah & Nina's (2022) study show that there is no policy regarding the provision of rewards and punishments to health workers (doctors and nurses) related to the completeness of the contents and the timeliness of returning medical record files for inpatients. This study is in line with Dewi, et al. (2022) for the provision of rewards in the process of returning medical record files for inpatients at Mawar Hospital. Based on this study, there were no rewards given to doctors and nurses who were disciplined in returning inpatient medical record files (on time and filling them out completely).

CONCLUSION

Based on the results of the study of Factors Causing Delays in Returning Inpatient Medical Record Files at the Ibnu Sina Padang Panjang Islamic Hospital. Human resources (HR) at Ibnu Sina Padang Panjang Islamic Hospital, namely knowledge about medical records is quite good, there is still a lack of compliance and discipline of doctors and nurses in filling out medical records completely within 1x24 hours, DPJP is mostly not fixed and the uncertainty of doctor's visiting hours. Facilities and infrastructure at Ibnu Sina Padang Panjang Islamic Hospital, such as the availability of medical record forms, are always available in the medical record room, but these forms are not always available in the inpatient room. Method, there is no written SOP at Ibnu Sina Hospital, Padang Panjang. Policy, the policy issued at Ibnu Sina Padang Panjang Islamic Hospital does not yet provide rewards and punishments for not filling out the complete inpatient medical record files.

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