HUBUNGAN PENERAPAN REKAM MEDIS ELEKTRONIK DENGAN MUTU PELAYANAN RAWAT INAP DI RSUD BAKTI PAJAJARAN

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Abstrak

Penerapan Rekam Medis Elektronik telah diatur dalam Permenkes No. 24 Tahun 2022 yang bertujuan untuk meningkatkan mutu pelayanan. Namun, berdasarkan studi pendahuluan ditemukan masih terdapat kendala dalam penerapan RME, seperti ketidakstabilan jaringan internet, kondisi perangkat komputer, dan indikator mutu yang masih di bawah standar minimum. Penelitian ini bertujuan untuk menganalisis hubungan antara penerapan Rekam Medis Elektronik dengan Mutu Pelayanan. Penelitian ini menggunakan pendekatan kuantitatif dengan desain *cross-sectional* yang dilaksanakan Juni 2026. Teknik pengambilan sampel penelitian menggunakan teknik *Probability Sampling,* terdiri dari 186 tenaga kesehatan. Analisis univariat menunjukkan pada indikator RME *PIECES (Performance, Information, Economy, Control, Efficiency, Service*) berada pada kategori tinggi, dan indikator Mutu Pelayanan (*Structure, Prosess, Outcome*) juga pada kategori tinggi. Analisis Bivariat diperoleh terdapat hubungan antara penerapan RME dengan Mutu Pelayanan yang ditunjukkan hasil uji *Chi-square* pada variabel *Performance (p-value* = 0,000) (PR=12,291; 95% CI=5,221-28,931), *Information* dengan *Structure* (*p-value* = 0,000) (PR=7,871; 95% CI=3,521-17,592), *Economy* dengan *Structure* (*p-value* = 0,000) (PR=5,029; 95% CI=2,293-11,026), *Control* dengan *Structure* (*p-value* = 0,000) (PR=8,215; 95% CI=4,001-16,868), *Efficiency* dengan *Prosess* (*p-value* = 0,000) (PR=18,333; 95% CI=7,777-43,217), dan *Service* dengan *Outcome* (*p-value* = 0,000) (PR=8,022; CI=3,701-17,387). Disarankan dapat mempertahankan dan meningkatkan konsistensi RME, melakukan evaluasi berkala pada sistem jaringan, serta memberikan pelatihan bagi pengguna.

Kata Kunci: Mutu Pelayanan, *PIECES*, Rekam Medis Elektronik, Rumah Sakit

THE RELATIONSHIP BETWEEN THE IMPLEMENTATION OF ELECTRONIC MEDICAL RECORDS AND THE QUALITY OF INPATIENT CARE AT BAKTI PAJAJARAN REGIONAL GENERAL HOSPITAL

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Abstract

Electronic Medical Record implementation is regulated under the Indonesian Minister of Health Regulation No. 24 of 2022. However, preliminary findings identified challenges, including unstable internet connectivity, inadequate computer hardware, and quality indicators below the minimum standard. This study aimed to analyse the relationship between EMR implementation and service quality. A quantitative cross-sectional study was conducted in June 2026 involving 186 selected using Probability Sampling. Univariate analysis showed that all EMR dimensions based on the PIECES framework (Performance, Information, Economy, Control, Efficiency, and Service) and service quality dimensions (Structure, Process, and Outcome) were categorised as high. Chi-square analysis showed significant relationships between Performance and Outcome (p-value = 0.000) (PR = 12.291; 95% CI = 5.221–28.931), Information and Structure (p-value = 0.000) (PR = 7.871; 95% CI = 3.521–17.592), Economy and Structure (p-value = 0.000) (PR = 5.029; 95% CI = 2.293–11.026), Control and Structure (p-value = 0.000) (PR = 8.215; 95% CI = 4.001–16.868), Efficiency and Process (p-value = 0.000) (PR = 18.333; 95% CI = 7.777–43.217), Service and Outcome (p-value = 0.000) (PR = 8.022; 95% CI = 3.701–17.387). Hospitals should maintain consistent EMR implementation, regularly evaluate network performance, and provide user training.

Keyword: *Quality of Care, PIECES, Electronic Health Records, Hospitals*