

ABSTRAK

Latar Belakang: Rumah Sakit Umum Daerah (RSUD) Dr. Soedirman Kebumen tengah melakukan proses implementasi rekam medis elektronik (RME) secara menyeluruh sebagai bagian dari upaya meningkatkan efisiensi dan kualitas pelayanan kesehatan. Implementasi ini sejalan dengan Peraturan Menteri Kesehatan Republik Indonesia Nomor 24 Tahun 2022 tentang Rekam Medis, yang mewajibkan seluruh Fasilitas Pelayanan Kesehatan untuk menyelenggarakan RME. Implementasi RME di RSUD Dr. Soedirman Kebumen bersamaan dengan peralihan sistem informasi manajemen rumah sakit (SIMRS) lama ke SIMRS baru. Salah satu tantangan yang muncul adalah bagaimana dapat memigrasikan data dari SIMRS lama ke SIMRS baru dan membuat pengguna dapat cepat beradaptasi dengan sistem RME yang baru diimplementasikan.

Tujuan: Penelitian ini bertujuan untuk mengevaluasi proses migrasi data dan implementasi rekam medis elektronik dengan metode HOT-Fit di RSUD Dr. Soedirman Kebumen.

Metode: Jenis Penelitian yang digunakan adalah kualitatif dengan pendekatan studi kasus untuk mengetahui tantangan dan hambatan proses migrasi data dan implementasi rekam medis elektronik. Wawancara mendalam dilakukan kepada 9 orang informan penelitian yang terdiri atas kepala instalasi rekam medis, perekam medis, kepala SIMRS/IT, teknisi IT, dokter, bidan, kepala instalasi laboratorium, petugas rehabilitasi medis, dan ahli gizi.

Hasil: Berdasarkan penelitian diketahui hasil evaluasi migrasi dan implementasi rekam medis elektronik dilihat dari segi human, organization, technology, dan benefit. Dari Segi human, terdapat perlunya adaptasi, bertambahnya beban kerja, otodidak(belajar sendiri, kemudahan penggunaan, adanya masalah fisik, adanya pelatihan, kurangnya SDM yang memenuhi kebutuhan, adanya studi banding serta kepuasan pengguna. Dari segi organization, terdapat komunikasi eksternal, komunikasi internal, alasan pemilihan SIMRS baru, adanya koordinasi antarunit dan antar pengguna rme, migrasi data, pengembangan, rekomendasi dari informan, serta belum ada SOP terbaru. Dari segi technology terdapat accuracy (ada ketidakakurasian data pada perhitungan Z-score), sistem khanza lebih lengkap (completeness), kendala dalam keandalan, kendala dalam keterbacaan(legibility), laporan belum tersedia, adanya kendala teknis, adanya dukungan teknis, interoperability sudah baik, user Interface dinilai kurang baik, serta keamanan (security) belum baik. Sedangkan dari segi benefit terdapat pengaruh pada efisiensi dan waktu penyelesaian (Turnaround Time) dan terintegrasi dengan Satu Sehat.

Kesimpulan: Migrasi data dari SIMRS lama ke SIMRS baru di RSUD Kebumen telah dilakukan, tetapi tidak semua data berhasil dimigrasikan karena perbedaan metadata. Selain itu terdapat tantangan dan hambatan dalam implementasi SIMRS Khanza mencakup aspek: Human (perlu adaptasi, beban kerja bertambah, pembelajaran mandiri, kesulitan penggunaan, masalah fisik, kekurangan SDM, dan kepuasan pengguna), Organization (masalah komunikasi dengan vendor, migrasi data, dan ketiadaan SOP terbaru), Technology (akurasi Z-score, keandalan sistem, keterbacaan, kendala teknis, antarmuka pengguna, dan ketiadaan laporan), serta Benefit (pengaruh pada efisiensi dan waktu penyelesaian).

Kata kunci: *Evaluasi, RME, HOT-Fit*

ABSTRACT

Background: Dr. Soedirman Regional General Hospital (RSUD) Kebumen is currently implementing an electronic medical record (EMR) as part of an effort to improve the efficiency and quality of health services. This implementation is in line with the Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 concerning Medical Records, which requires all Health Service Facilities to organize EMR. The implementation of EMR at Dr. Soedirman Regional General Hospital Kebumen coincides with the transition from the old hospital management information system (SIMRS) to the new SIMRS. One of the challenges that arises is how to migrate data from the old SIMRS to the new SIMRS and allow users to quickly adapt to the newly implemented EMR system.

Purpose: This study aims to evaluate the data migration process and implementation of electronic medical records using the HOT-Fit method at Dr. Soedirman Hospital, Kebumen.

Method: The type of research used is qualitative with a case study approach to determine the challenges and obstacles of the data migration process and the implementation of electronic medical records. In-depth interviews were conducted with 9 research informants consisting of the head of the medical record installation, medical recorder, head of SIMRS/IT, IT technician, doctor, midwife, head of laboratory installation, medical rehabilitation officer, and nutritionist.

Results: Based on the research, it is known that the results of the evaluation of migration and implementation of electronic medical records are seen from the human, organizational, technological, and benefit aspects. From the human aspect, there is a need for adaptation, increased workload, self-taught (self-study, ease of use, physical problems, training, lack of human resources that meet the needs, comparative studies and user satisfaction. From the organizational aspect, there is external communication, internal communication, reasons for choosing a new SIMRS, coordination between units and between rme users, data migration, development, recommendations from informants, and there is no new SOP. From the technological aspect, there is accuracy (there is inaccuracy of data in the Z-score calculation), the khanza system is more complete (completeness), constraints in reliability, constraints in readability, reports are not yet available, there are technical constraints, there is technical support, interoperability is good, the user interface is considered less good, and security is not good. While from the benefit aspect, there is an influence on efficiency and turnaround time and it is integrated with Satu Sehat.

Conclusion: Data migration from the old SIMRS to the new SIMRS at RSUD Kebumen has been carried out, but not all data was successfully migrated due to differences in metadata. In addition, there are challenges and obstacles in the implementation of SIMRS Khanza including aspects: Human (need to adapt, increased workload, independent learning, difficulty of use, physical problems, lack of human resources, and user satisfaction), Organization (communication problems with vendors, data migration, and lack of the latest SOP), Technology (Z-score accuracy, system reliability, readability, technical constraints, user interface, and lack of reports), and Benefit (impact on efficiency and completion time).

Keywords: *Evaluation, EMR, HOT-Fit*