

ABSTRAK

Latar Belakang: Pada era saat ini, masyarakat menginginkan pelayanan kesehatan yang aman, bermutu, memuaskan, serta dapat menjawab kebutuhan mereka. Oleh sebab itu upaya peningkatan mutu dengan cara akreditasi perlu diterapkan. Salah satu syarat penting yang harus dipersiapkan dalam akreditasi Puskesmas adalah dokumen. Akreditasi merupakan hal yang baru karena sebelumnya Puskesmas masih menggunakan standar ISO 9000 dalam penilaian mutu. Puskesmas Nanggulan Kulon Progo melakukan akreditasi dengan hasil Terakreditasi Dasar. Nilai akreditasi untuk BAB VIII masih rendah yaitu $\geq 20\%$. BAB VIII tersebut di dalamnya mencakup dokumen akreditasi rekam medis terkait kelengkapan dan kerahasiaan rekam medis.

Tujuan: Mengetahui persiapan dokumen akreditasi Puskesmas 2015 yang berfokus pada kelengkapan dan kerahasiaan rekam medis di Puskesmas Nanggulan Kulon Progo dari segi tenaga, metode, bahan, alat, dan biaya.

Metode: Jenis penelitian yang digunakan adalah penelitian deskriptif dengan pendekatan kualitatif dengan rancangan penelitian fenomenologi. Teknik pengumpulan data dalam penelitian ini yaitu wawancara, observasi dan studi dokumentasi.

Hasil: Persiapan dokumen akreditasi SK “tentang isi rekam medis”, SOP “penilaian kelengkapan dan ketepatan isi rekam medis, bukti pelaksanaan penilaian, hasil dan tindak lanjut penilaian”, dan SOP “kerahasiaan rekam medis” dari segi tenaga kurang siap karena kuantitas tenaga rekam medis yang ada belum sesuai dengan standar kebutuhan. Petugas yang lebih profesional atau berkompeten membantu tim kerja unit di dalam persiapan dokumen akreditasi berdasarkan *job description* petugas. Persiapan dokumen akreditasi SK “tentang isi rekam medis”, SOP “penilaian kelengkapan dan ketepatan isi rekam medis, bukti pelaksanaan penilaian, hasil dan tindak lanjut penilaian”, dan SOP “kerahasiaan rekam medis” dari segi metode kurang siap karena ada beberapa bagian format SK dan SOP yang tidak sesuai dengan pedoman penyusunan dokumen akreditasi. Dalam pembuatan dokumen tim mutu tidak memakai jadwal kegiatan untuk membuat dokumen akreditasi. Kaji banding mutu yang dilaksanakan belum sesuai dengan apa yang diharapkan. Persiapan dokumen akreditasi SK “tentang isi rekam medis”, SOP “penilaian kelengkapan dan ketepatan isi rekam medis, bukti pelaksanaan penilaian, hasil dan tindak lanjut penilaian”, dan SOP “kerahasiaan rekam medis” dari segi bahan sudah siap sebagai salah satu sarana untuk mencapai hasil yang lebih baik dalam pembuatan dokumen akreditasi. Bahan yang digunakan untuk mendukung persiapan dokumen akreditasi yaitu alat tulis kantor (ATK) seperti kertas, tinta komputer, penjepit kertas, steples, dan isi steples. Persiapan dokumen akreditasi SK “tentang isi rekam medis”, SOP “penilaian kelengkapan dan ketepatan isi rekam medis, bukti pelaksanaan penilaian, hasil dan tindak lanjut penilaian”, dan SOP “kerahasiaan rekam medis” dari segi alat sudah siap sebagai salah satu alat yang digunakan untuk menciptakan efisiensi kerja. Alat yang ditambahkan guna mendukung pembuatan dokumen akreditasi yaitu tiga laptop, dua printer, dan dua dekstop. Persiapan dokumen akreditasi SK “tentang isi rekam medis”, SOP “penilaian kelengkapan dan ketepatan isi rekam medis, bukti pelaksanaan penilaian, hasil dan tindak lanjut penilaian”, dan SOP “kerahasiaan rekam medis” dari segi biaya sudah siap sebagai biaya yang dibutuhkan guna menunjang tercapainya tujuan pembuatan dokumen akreditasi. Biaya diperlukan untuk

pembiayaan penambahan tenaga, bahan, alat, dan pelaksanaan pembuatan dokumen.

Kata Kunci: Dokumen Akreditasi, Akreditasi Puskesmas, Kelengkapan dan Kerahasiaan Rekam Medis.

ABSTRACT

Background: In this era, people want health care that is safe, quality, satisfying, and can respond to their needs. Therefore, quality improvement by means of accreditation needs to be applied. One important condition that must be prepared in accreditation Puskesmas is the document. Accreditation is a new thing because previous Puskesmas are still using the ISO 9000 standard in quality assessment. Puskesmas Nanggulan Kulon Progo accreditation with the results of Accredited Association. Value accreditation for Chapter VIII is still low at $\geq 20\%$. CHAPTER VIII in it include accreditation document medical records related to the completeness and confidentiality of medical records.

Objective: To know the preparation documents of Puskesmas Accreditation 2015 that focused on the completeness and confidentiality of medical records in the Puskesmas Nanggulan Kulon Progo in terms of manpower, methods, materials, tools, and costs.

Methods: This type of research is descriptive research with a qualitative approach to research design fenomenologi. Data collection techniques in this study were interviews, observation and documentation.

Results: Preparation of documents for accreditation SK "on the content of medical records," SOP "assessment of the completeness and accuracy of medical records, evidence of the implementation of the assessment, the results and the follow kanjut assessment", and SOP "the confidentiality of medical records" in terms of manpower less ready for quantity of medical records there is not in accordance with the standard requirements. Officers more professional or competent help the team work of the unit in the preparation of documents for accreditation by clerk job description. Preparation of documents for accreditation SK "on the content of medical records," SOP "assessment of the completeness and accuracy of medical records, evidence of the implementation of the assessment, the results and the follow kanjut assessment", and SOP "the confidentiality of medical records" in terms of methods are less prepared because there are some formatting SK and SOP are not in accordance with the guidelines for the preparation of documents for accreditation. In the manufacture of quality teams document does not wear a schedule of activities to keep their accreditation documents. Assess the quality of the appeal has not been implemented in accordance with what was expected. Preparation of documents for accreditation SK "on the content of medical records," SOP "assessment of the completeness and accuracy of medical records, evidence of the implementation of the assessment, the results and the follow kanjut assessment", and SOP "the confidentiality of medical records" in terms of material was prepared as one means to achieve better results in the creation of documents for accreditation. The materials used to support the preparation of accreditation documents namely stationery (ATK) such as paper, ink, computers, paper clips, staples, and the contents of staples. Preparation of documents for accreditation SK "on the content of medical records," SOP "assessment of the completeness and accuracy of medical records, evidence of the implementation of the assessment, the results and the follow kanjut assessment", and SOP "the confidentiality of medical records" in terms of the tools are ready as one of the tools used to create working efficiency. The tools are added to support document creation accreditation are three laptops, two printers, and two desktops. Preparation of documents for accreditation SK "on the content of medical records," SOP "assessment of the completeness and accuracy of medical records, evidence of

the implementation of the assessment, the results and the follow kanjut assessment", and SOP "the confidentiality of medical records" in terms of cost are ready as the costs required to support the achievement of accreditation document creation. The cost of financing required for the addition of personnel, materials, tools, and implementation of document creation.

Keywords: *Document Accreditation, Accreditation Puskesmas, Completeness and Confidentiality of Medical Records.*