

PERSIAPAN DOKUMEN AKREDITASI PUSKESMAS TERKAIT KRITERIA 8.4.3 “SISTEM PENYIMPANAN DAN PEMROSESAN REKAM MEDIS” di PUSKESMAS GAMPING I SLEMAN

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INTISARI

Latar Belakang: Puskesmas wajib terakreditasi setiap tiga tahun sekali. Hal ini menunjukkan perlu adanya upaya evaluasi terhadap kegiatan persiapan akreditasi yang telah dilakukan agar lebih siap menghadapi penilaian akreditasi berikutnya. Salah satu syarat penting yang harus dipersiapkan dalam akreditasi puskesmas adalah dokumen. Puskesmas Gamping 1 masih belum memiliki kebijakan terkait sistem penyimpanan rekam medis. Oleh karena itu peneliti tertarik mengambil persiapan dokumen terkait sistem penyimpanan dan pemrosesan rekam medis di Puskesmas Gamping I Sleman.

Tujuan Penelitian: Mengetahui persiapan dokumen akreditasi puskesmas terkait kriteria 8.4.3 “Sistem penyimpanan dan pemrosesan rekam medis” di Puskesmas Gamping I Sleman.

Metode Penelitian: Penelitian ini menggunakan jenis penelitian deskriptif dengan pendekatan kualitatif dan menggunakan rancangan penelitian fenomenologi.

Hasil Penelitian: Puskesmas Gamping I Sleman sudah memiliki kebijakan/SOP terkait sistem penyimpanan dan pemrosesan rekam medis yaitu menggunakan SK payung. SK dan SOP tersebut di antaranya SK Pelayanan Klinis dengan nomor dokumen 188/062/2018, SK Penunjang Pelayanan Klinis dengan nomor dokumen 188/063/2018, dan SOP Penyimpanan dengan nomor dokumen SOP-PDF-008. Hanya saja untuk pendokumentasian belum dicantumkan di dalam SK. Untuk format SOP penyimpanan masih ada beberapa item yang belum ditambahkan yaitu bagan alir dan dokumen terkait.

Kesimpulan: Persiapan dokumen akreditasi puskesmas terkait kriteria 8.4.3 “Sistem penyimpanan dan pemrosesan rekam medis” di Puskesmas Gamping I Sleman sudah siap hanya saja masih terdapat kekurangan.

Kata Kunci: Persiapan Akreditasi, Dokumen Akreditasi, Akreditasi Puskesmas, Penyimpanan Rekam Medis.

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**PREPARATION OF DOCUMENTS ACCREDITATION RELATED
CRITERIA 8.4.3 " STORAGE SYSTEM AND PROCESSING OF
MEDICAL RECORD" at PUBLIC HEALTH CENTER GAMPING I
SLEMAN**

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ABSTRACT

Background: Public health care must be accredited every three years. This shows that there is a need to evaluate the preparatory accreditation activities that have been carried out to be better prepared for the next accreditation assessment. One of the important conditions that must be prepared in the accreditation of the puskesmas is the document. Public Health Center Gamping I still does not have a policy regarding medical record storage systems. Therefore, researchers are interested in taking document preparations related to medical record storage and processing systems at Public Health Center Gamping I Sleman.

Objective: To know the preparation of Public Health Center accreditation documents related to criteria 8.4.3 "Storage systems and medical record processing" at Public Health Center Gamping I Sleman.

Method: This research use descriptive research with qualitative approach and using a phenomenological research design.

Result: Public Health Center Gamping I Sleman has a standart operating procedure related to the storage system and medical record processing that uses umbrella policy. The policy and SOP include the Clinical Service policy with document number 188/062/2018, Clinical Service Supporting policy with document number 188/063/2018, and Storage SOP with document number SOP-PDF-008. It's just that the documentation has not been included in the policy. For the SOP storage format there are still some items that have not been added, that is flow chart and related documents.

Conclusion: Preparation of Public Health Center accreditation documents related to criterion 8.4.3 "Storage system and medical record processing" in the Gamping I Health Center Sleman Sleman is ready but there are still deficiencies.

Keyword: Accreditation Preparation, Accreditation Documents, Public Health Center Accreditation, Medical Record Storage.

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