Implementation of the Accreditation Document Management System (SISMADAK) in Hospitals: Literature Review

Pelaksanaan Sistem Manajemen Dokumen Akreditasi (SISMADAK) di Rumah Sakit: Literature Review

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ABSTRACT

Background: Almost 80% of hospitals had problems preparing documents for accreditation. Objective: The purpose is to find out the implementation of the accreditation document management system (SISMADAK) in hospitals. Methods: This study employed a literature review conducted on national and international journals published online between 2016 - 2022 and found 11 journals for the literature review. Hospital accreditation document management system, accreditation, hospitals. Results: The implementation of SISMADAK at the hospital is carried out by collecting, processing, and storing data carried out by the SISMADAK admin officer, which must be filled in the daily quality indicator form and then documented so that reporting records will be stored automatically once reporting results are achieved during the implementation of the SISMADAK program. Human resources in fulfilling SISMADAK There are still many Sismadak admin officers who do not understand or forget how to operate the program. Conclusion: Hospitals should have a special officer who will input the Accreditation document data at SISMADAK.

ABSTRAK

INTRODUCTION

Every level of society is welcome to seek medical treatment at the hospital. Hospital services are a crucial component of a health system’s endeavor to provide health care. At this moment, hospitals as a system must deal with the globalization period. Hospitals will face significant quality competition due to initiatives associated to the service industry, where health services are included. As a result, hospitals will need to enhance their performance. The main goal of efforts to offer health services is quality, which can be seen from a number of perspectives, including those of patients, health professionals, and managers. Patients and society perceive good customer service as demonstrating empathy, respect, and responsiveness to their requirements. Services must also be courteous and tailored to the demands of the customer. The management contends that quality is a service that is delivered effectively and efficiently in order to accomplish organizational goals, and as such, quality must be preserved and enhanced.¹

The standard of patient treatment and patient satisfaction are positively impacted by hospital accreditation. The implementation of accrediting criteria promotes improvements to higher quality hospital services as well as enhanced cross-professional cooperation in patient care. Implementing hospital accrediting criteria provides advantages, including making hospitals more receptive to recommendations and complaints from patients and their families.² The hospital will also make an effort to respect patients’ rights and include them as partners in the healing process. The ideal course of treatment is discussed with patients and their families. The anticipated result is that hospitals that work to enhance patient safety and service quality would see a rise in public confidence.³

The information system in a health service is as a center for health-oriented development, as a center for community and family empowerment, as a basic health service center which is obliged to seek, provide and provide quality services. Fulfilling community needs for quality health services in order to achieve national health development goals.⁴ One of the reasons information systems take on a very large and influential role in health service organizations such as hospitals is because the increasing demand for health data is quite complex and with the use of appropriate information technology it will simplify the service process and minimize management expenditure costs.⁵

Nearly 80% of hospitals in the management of accreditation documents are still manual, so the search process is slow, and often the documents are lost or tucked away and even damaged due to time constraints in checking all hospital accreditation documents. In the management of hospital accreditation documents, officers are often transferred to other units, so that the collection of reports will be submitted to other
officers who cause problems. The Accreditation Document Management System Application (SISMADAK) is an application that can be used by hospitals as a tool in participating in the Accreditation program organized by the Hospital Accreditation Commission (KARS). This application is used in the collection, storage and search of evidence documents related to accreditation. The implementation of SISMADAK began at the end of 2018, namely collecting data, processing data, data information, analyzing and concluding data and conveying information stored in the hardware system. However, SISMADAK at the hospital has not run smoothly because only one person is inputting data in their respective units and even then there are frequent changes of people. The work units involved in the SISMADAK data reporting process are ER, Nursing, Laboratory, Nutrition, ICU, Operating Room, and Laundry. Using the literature review technique, this study aims to determine how the Accreditation Document Management System (SISMADAK) is being used in hospitals.

METHODS

A literature review is the style of study used here. A literature review is a critical analysis (building or dropping) of research being done on a particular subject or question in a field of science. The literature review contains a description of the theory of a research result, findings and also materials in

research activities. This practice begins with reading a variety of literary works, analyzing them, offering critiques, and writing evaluations of them. The method used is a systematic mapping study. A systematic literature research can be written following a predetermined process called a systematic mapping study. By using this strategy, the selection of the literary genre is not based on personal preferences or knowledge.

The literature review done for this study was only focused on the implementation of the accreditation document management system (SISMADAK) in the hospital. The literature used in this study is a journal from Google Scholar that uses the keywords "accreditation document management system," "SISMADAK," and "hospital." The journal used has a qualitative study design as well as a quantitative study design published in the 2016–2022 period. The collected journals are then filtered by viewing the whole text content. From the filtering results set, 11 corresponding articles consisting of 11 national journals were identified.

RESULTS AND DISCUSSION

The PIECES method's SISMADAK evaluation of user satisfaction (performance, information, economics, control, efficiency, and service), In this study, which employs quantitative descriptive research, a sample of 40 medical record officers at Bhayangkara Lumajang Hospital were used to compare user satisfaction with the information system,
followed by a descriptive evaluation. The results of a descriptive evaluation of SISMADAK using the PIECES method at Bhayangkara Lumajang Hospital showed that the percentage of satisfaction for the performance variable (performance) was 81% very good, the information variable (information) was 81% very good, the economic variable (economic) was 69% good, the control variable (control) was 76% very good, efficiency was rated as very good, and service was rated as very good. It is suggested that users of SISMADAK make plans for the needs of consumers of information that is not yet available; also, it is preferable to strengthen the confidentiality of data on SISMADAK. The study's finding is that SISMADAK can assist users with the KARS aspect of the hospital accreditation process.6

Almost 80% of hospitals do document management manually; as a result due to time constraints, the search procedure is slow, and documents are frequently misplaced, scattered, and damaged. Moreover, officers are frequently reassigned to the unit. As a result, it was difficult to gather the reports that other police had provided. By doing a thorough investigation through observation, in-depth interviews, and documentation, the qualitative method is being applied. Purposive sampling was used to determine informants, which resulted in 1 sismadak event operator and 7 sismadak admin officers as informants, limiting the researcher to only 8 informants.8

In November–December 2018, a survey of the occupational health and safety management system was conducted to support the accreditation of the RSIA-X hospital. This study used a qualitative descriptive method. Data was obtained by observation, interviews, and documentary studies 6 sources. The study found that 32% of the criteria were met, 39% were partially met, and 29% were not met. The rating factor that has the largest percentage is the security parameter, at 67%. The highest percentage of evaluation elements that are not met is in the employee training parameters, which is 67%. Hospitals should develop internal regulations related to facility management and safety and improve staff competency through training.9

Integrating SIMRS as a tool to measure management performance and increasing patient visits to hospitals through a management information system that is better than before requires the awareness of management information system implementers. This research is descriptive with a cross sectional. The research location is in the SIMRS Sukoharjo PKU Muhammadiyah Hospital. The results show that the display of the information system has subsystems from outpatient registration to filing, but the outpatient module should be evaluated in terms of a more specific response time. Data entry error updates track the editorial process with regards to officer identity, replacement date, and time. Data Required for Automatic SMIRS Sync Reporting with
SISMADAK Version 5.0.3, National Accreditation by the Patient Safety Improvement Team (PMKP) Complete, accurate, and consistent SIMRS data input requires automatic identification of data entry results according to work shifts without printing from the cash register. You can work with your system designer to add information from the patient registration module's SIMRS data type structure to the poly-edit menu unit. The economic aspect of SIMRS is exporting data to produce output data that can be used in the SISRUTE system, the INA CBGs. The addition of SIMRS data and/or changes in tariffs can be made by the financial manager in collaboration with the hospital IT team and data entry operators. In terms of security, operator control of the system is equipped with a SIMRS server and a BPJS-INA-CBGs server with data backup and unlimited bandwidth to overcome the possibility of system failure and the inability to send billing data to the BPJS server. Increase. The efficiency aspect of the data entry process by personnel from each unit must have SOPs for access rights, data manipulation, data development, and SOPs for each module. The avoidance of errors in filling the module can be seen from the outcomes of data integration in other areas of the module. One aspect of the service that uses SIMRS is that it automatically displays patient satisfaction ratings to be processed by the PMKP team without using other applications to present data to administrators. data development, and SOP for each module.

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Hospitals need to create documents containing patient data. Many documents go unreported even though they may be well documented, so you need a system to manage them. SISMADAK (Accreditation Document Management System) is an accreditation document management system using information technology (IT). SISMADAK is run by the person in charge (PIC). PIC uses SISMADAK to collect and report data on a daily basis. However, at Gambilan Hospital, Kediri, the data reported using SISMADAK is still less than optimal. This is caused by several factors. The purpose of this study is to determine the elements that affect PIC compliance at the Gambiran Hospital in Kediri.

This study used a cross-sectional design. The population is all PICs of RSUD Gambiran Kediri, with a maximum of 150 people.
Sampling was done by proportional random sampling. The sample size for this survey is 130 respondents. The independent variables in this study were knowledge, motivation, workload, and equipment. The dependent variable is compliance. Questionnaires and observations were used to collect data. Multiple linear regression used to analyze the data, with a sig. level of p = 0.05. The results that knowledge (p = 0.000), motivation (p = 0.000), and workload (p = 0.043) had an effect on PIC compliance for data reporting at SISMADAK, although there was no effect between institutional and individual compliance with PIC. Data are reported using SISMADAK with a p value of 0.902. The two concepts of motivation and knowledge are very different. PIC compliance workloads for data reporting using SISTADAK Therefore.

Health maintenance and improvement, disease prevention and treatment, and health restoration all need the use of medical services provided by hospitals. The manner in which medical services are delivered, the extent of their activities, and their intended use all influence the form and nature of those services. Every hospital must establish and develop a Hospital Management Information System in accordance with Regulation of the Minister of Health No. 82 of 2013 (SIMRS). SIMRS is a contract that deals with information gathering, information processing, information presentation, information analysis, information reasoning, and the provision of information required for hospital operations. The Cilandak Marine Corps Rumkital's use of SIMRS necessitates ongoing development of the hardware, software, and brainware. This study uses an exploratory qualitative methodology to gather data from observation, in-depth interviews, and literature reviews pertinent to the implementation of SIMRS. It also uses Soft System Methodology (SSM) analysis methodologies and Nvivo 12 software analysis tools to do so. The outcomes demonstrated that the Cilandak Sea Rumkital's adoption of SIMRS had a positive impact on the level of service. As a component of the health information system, SIMRS is a communication information technology system that integrates and processes the full flow of hospital service processes in the form of a network of coordination, reporting, and governance department. SIMRS implementation requires the use of brainware, hardware, and software. In the field of brainware, research gaps were found related to recruitment and turnover planning, training and further education, talent retention, as well as the completeness of work instructions and SOPs. Research gaps were found in hardware: procurement and removal as needed, routine maintenance and usage integrity, and troubleshooting procedures. Software is used to create customized and easy-to-use software, upgrade and update software, provide easy access and integration.

Basically, information systems and information technology (IS and IT) play an
important role in organizational development in various fields such as government, the private sector, industry, and health. IS/IT must add value to the organization. In addition to patient data collection, the use of eHealth in healthcare services is also connected to data standardization, monitoring of patient safety, and other elements that can support management and services. This study's goal was to examine how information systems are managed and used in Hospital X in Manado City. In-depth interviews with three informants were done as part of this qualitative study from September 2017 to January 2018 in X City, Manado. For the documentary Manado City, primary data sources were gathered through in-depth interviews and on-location observations. The results of the interviews are presented in the form of narration and validation data use triangulation method. The result is the management & development SIRS provide easy access to integrated hardware and systems. All data requests are centralized and forwarded to IT. Reporting and recording of system access are done on the same platform. A GWI for RS X Manado was established by one set of subjects who were being observed. The system is used for operational tasks, recording, and financial outlays. Reporting on finances is done either monthly or quarterly. As a result of supervision, the finances of Hospital X Manado belong to the shareholders. Audits are carried out 3–4 times a year. The results of this study suggest that the results of implementing the information system at Hospital X Manado in planning staff and medical equipment are fully computerized and well managed. It is recommended that hospitals maintain and increase institutional guarantees that support human resource recruitment, particularly for health workers with qualifications and competencies relevant to their field of work. This offer always provides the best service. Fast access to patient data retrieval through a computerized system with modern software that can cover all access and training in hospitals It is recommended that hospitals maintain and increase institutional guarantees that support human resource recruitment, particularly for health workers with qualifications and competencies relevant to their field of work. The best service is always offered by this deal. A computerized system with contemporary software that can handle all access and training in hospitals allows for quick patient data retrieval. It is advised that hospitals preserve and expand the institutional guarantees that support hiring human resources, especially for healthcare professionals with credentials and skills pertinent to their line of work. The best service is always offered by this deal. A computerized system with contemporary software that can handle all access and training in hospitals allows for quick patient data retrieval.11

Human resources are needed for the deployment of the Accreditation Document Management System (SISMADAK), as there are still many SISMADAK admin officers who
are unaware of how to use the program or have forgotten how to do so. Sismadak administration staff are inattentive and do not concentrate on entering data because there is no budget, although the facility accreditation report is finished. Sismadak cops face difficulties due to networks that are less reliable. The daily quality indicator form must be filled out and then recorded in order for reporting records to be automatically kept. This is how the sismadak program is implemented: data collected, processed, and stored by sismadak admin officers. The sismadak program has been implemented with good success in terms of reporting results.

The economic component of SIMRS generates output data that can be exported and used by the SISRUTE and INA-CBGs systems. There is a significant relationship between knowledge and motivation. As a component of the Health Information System, SIMRS is a communication information technology system that combines and processes the full flow of hospital service processes through a network of coordination, reporting, and administrative procedures. Software can also be improved with the research gap, namely the preparation of customized and user-friendly software, the upgrading and updating of software, easy access and integration, and the completeness of manuals.

CONCLUSION

The hospital is implementing the Accreditation Document Management System (SISMADAK) by gathering, processing, and storing data that must be filled out in the daily quality indicator form and then documented so that reporting records will be automatically stored. The program is already doing a good job of achieving reporting results during implementation. There are still a lot of sismadak admin officers that don't know how to run the sismadak program and lack the necessary human resources to do so. Due to a lack of funding, SISMADAK administrative staff members are inattentive and do not concentrate on entering accreditation reporting data. The required infrastructure is in place, but SISMADAK officers still face challenges due to the unstable internet network.

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