



IMPLEMENTATION OF MINISTER OF HEALTH REGULATION NO. 24 OF 2022 ON MENTAL HEALTH MEDICAL RECORDS AT MADANI HOSPITAL, PALU

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ABSTRACT

Medical records are a critical component in determining the quality of healthcare services provided by hospitals. Comprehensive and accurate medical records serve multiple purposes, including administrative, legal, financial, research, educational, and documentation needs. This study aims to evaluate the implementation of the Minister of Health Regulation No. 24 of 2022 concerning mental health medical records at Madani Hospital, Palu. Using a qualitative approach, data were collected through interviews with five informants, including the Head of the Medical Records Unit, and document analysis. The research was conducted between May 15 and July 2, 2024. The findings reveal that while Madani Hospital has implemented the regulation, challenges persist, particularly regarding incomplete patient records caused by non-compliance among healthcare workers and limited human resources in the medical records unit. Moreover, the hospital relies on a hybrid system combining manual and electronic records due to insufficient infrastructure and funding. These challenges impact the efficiency and accuracy of record management. This study recommends regular supervision and training for medical records staff to ensure timely and accurate documentation. Strengthening human resources and transitioning to a fully electronic system are essential for enhancing compliance with the regulation and improving overall service quality.

Keywords: Medical Records, Mental Health, Regulation Implementation.

INTRODUCTION

The rapid advancement of information technology has significantly influenced the modernization of human thought and behavior. Various forms of technology are swiftly adopted and integrated into daily life, demonstrating the growing necessity of technological systems in organizations, companies, and institutions. Among these applications, healthcare systems have seen profound changes, particularly in the implementation of information systems aimed at enhancing operational efficiency and decision-making processes.

In the healthcare sector, the integration of technology extends beyond administrative tasks. It contributes directly to patient care, enabling advancements such as medical diagnosis support, treatment planning, and data analysis. Hospitals, as key providers of healthcare services, face increasing demands

to offer high-quality, timely, and professional care to meet society's expectations. The cornerstone of these efforts lies in comprehensive and accurate medical records, which serve multiple purposes: they provide legal evidence, facilitate education and research, and act as a benchmark for service quality evaluation.

Madani Hospital, located in Palu, Indonesia, operates in a dynamic environment influenced by societal needs, technological developments, and legal frameworks. Among these frameworks is Minister of Health Regulation No. 24 of 2022, which emphasizes the management of medical records, particularly for mental health services. Mental health care poses unique challenges due to its recurring and long-term nature, necessitating meticulous documentation and compliance with established standards.



Despite the critical role of medical records, their management often faces challenges, such as non-compliance among healthcare workers, insufficient training, and limited resources. These issues are particularly pronounced in mental health services, where continuity of care depends heavily on accurate and accessible patient records.

This study investigates the implementation of Minister of Health Regulation No. 24 of 2022 at Madani Hospital. The regulation aims to standardize medical record practices and improve the quality of care, particularly for mental health patients. By analyzing the hospital's practices, challenges, and opportunities, this research provides insights into how medical record management can be optimized to align with national standards and improve service delivery.

Medical records are indispensable for healthcare institutions, but challenges in their implementation can hinder service quality. At Madani Hospital, compliance with the regulation has been inconsistent, with issues ranging from incomplete documentation to resource constraints. These challenges raise concerns about the hospital's ability to meet legal, administrative, and quality benchmarks, particularly for mental health services.

To assess the implementation of Minister of Health Regulation No. 24 of 2022 concerning mental health medical records at Madani Hospital.

To identify challenges faced in implementing the regulation, including issues of compliance, resource allocation, and technological infrastructure.

To provide recommendations for improving medical record practices in mental health services.

This research contributes to the broader discourse on healthcare management by highlighting the intersection of policy implementation and operational practices. By focusing on mental health services, the study addresses a critical yet often overlooked aspect of healthcare that requires tailored approaches. The findings aim to support policymakers, hospital administrators, and healthcare providers in enhancing compliance and service quality.

The study is limited to the implementation of Minister of Health Regulation No. 24 of 2022 at Madani Hospital, focusing on mental health services. It examines the hospital's practices, identifies gaps in compliance, and explores opportunities for improvement. Data collection involved interviews with key informants, including medical record staff and hospital administrators, as well as document analysis.

LITERATURE REVIEW

Medical Records: Definition and Importance

Medical records are systematic documentation of a patient's medical history and care. According to Fantri Pamungkas et al. (2015), medical records serve six primary purposes:

1. Administrative: Supporting operational management and decision-making.
2. Legal: Acting as evidence in legal disputes.
3. Financial: Documenting healthcare costs and billing.
4. Research: Providing data for medical studies.
5. Education: Offering resources for training healthcare professionals.
6. Documentation: Archiving information for accountability and reporting.



Comprehensive and accurate medical records ensure continuity of care, facilitate quality assurance, and strengthen legal and financial accountability (Haedar, 2018). They are particularly critical in mental health services, where treatment often requires long-term monitoring and collaboration across disciplines.

Medical Records in Mental Health Services

Mental health services face unique challenges in medical record management due to the nature of psychiatric illnesses, which often involve recurrent episodes and long-term care. Complete documentation is essential for:

1. Continuity of Care: Ensuring consistent treatment across multiple visits.
2. Interdisciplinary Collaboration: Supporting coordination among psychiatrists, psychologists, and other healthcare providers.
3. Patient Outcomes: Enabling evidence-based adjustments to treatment plans.

In a study by Sari and Masturoh (2017), incomplete medical records in outpatient services were linked to delays in treatment and miscommunication among providers. These issues underscore the importance of adhering to regulatory standards, such as those outlined in Minister of Health Regulation No. 24 of 2022.

Regulatory Frameworks in Medical Record Management

Regulatory compliance is a cornerstone of effective medical record management. Minister of Health Regulation No. 24 of 2022 provides guidelines for maintaining medical records, emphasizing:

1. Completeness: All relevant patient information must be documented.

2. Accuracy: Records should reflect the true state of patient health and treatment.
3. Timeliness: Documentation must be updated promptly to ensure relevance.
4. Confidentiality: Patient data must be protected from unauthorized access.

Compliance with these standards is particularly important in mental health services, where the sensitive nature of information demands strict confidentiality (Faida, 2016).

Challenges in Medical Record Implementation

Despite the regulatory framework, several challenges hinder effective medical record management:

1. Non-Compliance Among Healthcare Providers

Studies, such as those by Savitri Citra (2015), indicate that healthcare workers often fail to comply with documentation standards due to workload pressures, inadequate training, and lack of awareness about legal implications. This non-compliance compromises the quality and utility of medical records.

2. Resource Constraints

Hospitals frequently face resource limitations, including insufficient staffing and inadequate infrastructure. For instance, Giyana (2012) highlights the lack of trained personnel in medical record departments, which leads to inefficiencies and errors.

3. Hybrid Systems

Many hospitals operate hybrid systems, combining manual and electronic records. While this approach can be cost-effective, it often results in inconsistencies and redundancy. A study by Anggara et al. (2015) found that hybrid systems are



prone to mismanagement, particularly when transitioning to fully electronic systems.

Electronic Medical Records (EMR) in Mental Health

The shift from manual to electronic medical records (EMR) is a global trend aimed at improving efficiency and accuracy. EMRs offer several advantages:

1. **Accessibility:** Enabling real-time access to patient information.
2. **Integration:** Allowing seamless sharing of data across departments.
3. **Analysis:** Facilitating data-driven decision-making and research.

However, the adoption of EMRs in mental health services is often slower due to high implementation costs and the complexity of psychiatric documentation (Rudolf Sinaga & Nurhadi, 2016).

Theoretical Framework for Policy Implementation

This study adopts the policy implementation model by Mazmanian and Sabatier (1983), which identifies three key variables influencing policy success:

1. **Policy Characteristics:** Clear and consistent policy content reduces ambiguity and fosters compliance.
2. **Problem Characteristics:** Issues that are technically complex or socially sensitive require tailored solutions.
3. **Environmental Variables:** Factors such as socioeconomic conditions and technological advancements affect implementation feasibility.

The framework provides a structured approach to analyze the implementation of Minister of Health Regulation No. 24 of 2022 at Madani Hospital, focusing on how these variables interact in practice.

Empirical Studies on Medical Record Implementation

Previous studies provide insights into the practical challenges and successes of implementing medical record policies:

1. Rista (2017) examined inpatient medical record management at Madani Hospital, finding that while systems were operational, compliance with documentation standards remained inconsistent.
2. Pamungkas et al. (2015) identified gaps in training and resource allocation as critical barriers to effective medical record management.
3. Haedar (2018) emphasized the role of leadership and supervision in fostering a culture of compliance.

These findings highlight the need for continuous training, adequate resourcing, and leadership support to achieve effective implementation.

Research Gaps

While existing studies address various aspects of medical record management, few focus specifically on mental health services or the implementation of Minister of Health Regulation No. 24 of 2022. This study bridges these gaps by examining the practical challenges and opportunities at Madani Hospital.

METHOD

This study employs a qualitative research approach to explore the implementation of Minister of Health Regulation No. 24 of 2022 concerning mental health medical records at Madani Hospital, Palu. The qualitative approach is chosen to provide a comprehensive understanding of the processes, challenges, and contextual factors involved in medical record management.



The research adopts a descriptive qualitative design, focusing on generating in-depth insights rather than numerical data. This method is particularly suitable for examining complex issues like policy implementation, where understanding stakeholder perspectives and institutional practices is critical.

Data collection was carried out between May 15 and July 2, 2024. Two primary sources of data were utilized:

1. **Primary Data:** Information was gathered through semi-structured interviews with five informants, including:
 - a) The Head of the Medical Records Unit (key informant).
 - b) Healthcare professionals responsible for patient care and documentation.
 - c) Administrative staff involved in record-keeping.
2. **Secondary Data:** Documentation, such as hospital policies, medical record templates, and reports, was analyzed to supplement interview findings.

The interview questions focused on:

- a) Understanding the current medical record management practices.
- b) Identifying barriers to compliance with Minister of Health Regulation No. 24 of 2022.
- c) Exploring recommendations for improving record-keeping processes.

A purposive sampling method was used to select informants with direct involvement in or responsibility for medical record management. This ensured the relevance and reliability of the data collected.

Thematic analysis was employed to process and interpret the data. The steps included:

- a) **Data Familiarization:** Reading and re-reading interview transcripts and

documents to gain an overall understanding.

- b) **Coding:** Identifying key themes and patterns related to compliance, challenges, and opportunities.
- c) **Theme Development:** Grouping codes into broader themes, such as resource constraints, non-compliance, and hybrid system issues.
- d) **Interpretation:** Relating findings to the theoretical framework (Mazmanian and Sabatier, 1983) to assess the policy implementation process.

Ethical approval was obtained from the relevant institutional review board. All informants provided informed consent, and their confidentiality was maintained by anonymizing responses and securely storing data.

The study is limited to a single hospital, which may restrict the generalizability of the findings. However, the in-depth analysis provides valuable insights that can inform similar settings and broader policy discussions.

RESULT AND DISCUSSION

This section presents the findings from the qualitative analysis and discusses their implications. The results are organized into three main themes derived from the data: the current state of medical record implementation, challenges encountered, and opportunities for improvement. These themes are analyzed within the framework of Minister of Health Regulation No. 24 of 2022 and the policy implementation model by Mazmanian and Sabatier (1983).



Current Implementation of Medical Records

The study revealed that Madani Hospital has adopted several practices to align with the regulatory framework:

1. Compliance with Basic Standards

Madani Hospital has made efforts to implement the regulation by maintaining both manual and electronic records for mental health patients. The hospital uses centralized storage for inpatient and outpatient records, organized according to unique medical record numbers. Patient confidentiality is upheld through restricted access to records, with access granted only to authorized personnel using fingerprint verification systems.

2. Integration of Manual and Electronic Systems

Due to resource constraints, the hospital operates a hybrid system combining manual and electronic records. While electronic systems are used for specific tasks, such as appointment scheduling and basic patient information storage, detailed mental health records remain primarily manual.

3. Staff Training and Awareness

Regular training sessions have been conducted for staff to familiarize them with the documentation requirements outlined in the regulation. These sessions emphasize the importance of complete, accurate, and timely documentation.

Challenges in Implementation

Despite these efforts, several challenges hinder the full implementation of the regulation:

1. Incomplete Documentation

One of the primary issues identified is the incomplete documentation of patient records. Healthcare providers often fail to adhere to the standard 24-hour timeframe for updating patient records. This non-compliance is attributed to:

- a) High workloads among healthcare staff.
- b) Lack of awareness about the importance of timely documentation.
- c) Insufficient supervision by the medical records unit.

2. Resource Constraints

The hospital faces significant resource limitations, including:

- a) **Human Resources:** The medical records unit is understaffed, with only three personnel trained specifically in medical record management.
- b) **Infrastructure:** Limited physical space for centralized storage and outdated equipment for electronic systems hinder efficiency.
- c) **Financial Resources:** Budget constraints prevent the hospital from fully transitioning to an electronic medical record (EMR) system.

3. Hybrid System Inefficiencies

The reliance on a hybrid system creates redundancies and inconsistencies in record-keeping. For example, discrepancies between manual and electronic records often require additional time and effort to reconcile.

Opportunities for Improvement

The findings also highlight potential strategies to enhance medical record management at Madani Hospital:

1. Transition to Fully Electronic Systems

Transitioning to a fully electronic medical record system would address many of the identified challenges. Benefits include:



- a) Improved Accessibility: Real-time access to patient information for healthcare providers.
- b) Reduced Errors: Automated processes minimize human error in documentation.
- c) Enhanced Efficiency: Digital systems streamline record-keeping and retrieval.

However, this transition requires significant investment in infrastructure, training, and change management.

2. Strengthening Human Resources

Recruiting and training additional personnel for the medical records unit is crucial. Providing specialized education on mental health documentation standards can ensure greater compliance and accuracy.

3. Regular Supervision and Auditing

Implementing routine audits and supervision can help identify and address gaps in documentation practices. Feedback loops, where healthcare providers receive constructive feedback on their documentation, can foster accountability and improvement.

4. Policy Advocacy and Funding

Hospital management should advocate for increased funding to support infrastructure upgrades and capacity-building initiatives. Collaboration with government agencies and donors can help secure the necessary resources.

The findings from Madani Hospital align with broader trends observed in healthcare facilities managing mental health records. Similar challenges, such as resource constraints and hybrid system inefficiencies, have been documented in other studies (Anggara et al., 2015; Pamungkas et al., 2015).

Theoretical Insights

Using the Mazmanian and Sabatier framework:

1. Policy Characteristics: The clarity and specificity of Minister of Health Regulation No. 24 of 2022 provide a strong foundation for compliance. However, the lack of detailed implementation guidelines creates room for variability in practices.
2. Problem Characteristics: The complexity of mental health care documentation requires specialized training and tailored solutions, which are currently insufficient.
3. Environmental Variables: Socioeconomic factors, such as limited hospital budgets and the high cost of EMR systems, significantly affect implementation.

Practical Implications

The partial implementation of the regulation at Madani Hospital highlights the need for incremental improvements. Addressing human resource gaps and enhancing staff accountability are immediate priorities. In the long term, transitioning to a fully electronic system will be essential to achieve compliance and improve service delivery.

Comparison with Previous Studies

1. Rista (2017) found similar issues with incomplete documentation at Madani Hospital, emphasizing the need for systemic improvements.
2. Haedar (2018) identified leadership and supervision as critical factors in fostering compliance, underscoring the importance of strong management practices.



CONCLUSION

The implementation of Minister of Health Regulation No. 24 of 2022 on mental health medical records at Madani Hospital, Palu, has been partially achieved. The hospital has made efforts to comply with the regulation by adopting a hybrid system that combines manual and electronic records. Centralized storage and access controls have been established to maintain the confidentiality of patient data. However, several challenges remain.

One of the primary issues is incomplete documentation, often caused by non-compliance among healthcare staff and insufficient supervision. Resource limitations, including a lack of trained personnel, inadequate infrastructure, and budgetary constraints, further hinder the hospital's ability to fully adhere to the regulation. The reliance on a hybrid system has also resulted in inefficiencies and inconsistencies in record-keeping.

Despite these challenges, the hospital has opportunities to improve its practices. Addressing staff shortages, providing targeted training, and transitioning to a fully electronic medical record system can enhance compliance and efficiency. Regular supervision and audits can also help ensure the accuracy and completeness of medical records.

Overall, while progress has been made, Madani Hospital needs to address these challenges through strategic improvements to meet regulatory requirements and improve the quality of mental health services.

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