


Factors Causing Delays in Sending RL-4B Reports on the SIRS Online Application at RSIA Artha Mahinrus Medan in 2024

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Article Info	ABSTRACT
Keywords: RL-4b, SIRS Online, pendekatan kualitatif, Laporan SIRS Online,	RL-4b is a standard report for outpatient morbidity data which is a recapitulation report of the number of new cases and the number of visits to the hospital outpatient unit for an annual period. RL-4b data is collected from January 1 to December 31 each year. The purpose of this study was to determine the factors causing delays in sending RL-4b reports on the SIRS Online Application at RSIA Artha Mahinrus. The type of research used is descriptive research with a qualitative approach, namely research whose data collection is carried out with the intention of describing or describing a condition objectively. The method of data collection carried out by the researcher is by direct observation to the research location and interviews with research subjects, interviews conducted in the form of a list of questions asked by the researcher to the research subjects. The subjects of this study were 4 people, consisting of 1 head of medical records and 3 medical records officers. RSIA Artha Mahinrus needs to provide funds so that it can send reporting officers to attend socialization or training to the Health Office regarding sending RL-4b reports on the SIRS Online Application. RSIA Artha Mahinrus also needs to make more detailed SOP for RL-4b reporting related to the steps for filling out the RL-4b form. RSIA Artha Mahinrus also needs to improve the network in RSIA Artha Mahinrus so that when you want to send the RL-4b report to the Health Office there are no obstacles..
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INTRODUCTION

Medical records are documents that contain patient identity data, examination results, treatments, procedures, and other services provided to the patient. Electronic medical records refer to records designed using an electronic system for the purpose of managing medical records. An electronic system refers to a series of electronic devices and procedures

that function to prepare, collect, process, analyze, store, display, disseminate, transmit, and/or generate electronic information (Ministry of Health of the Republic of Indonesia, 2022).

SIRS Online is a process of collecting, processing, and presenting hospital data across Indonesia. SIRS Online is divided into two types: internal and external reporting. External reports include: RL 1 (basic hospital data), RL 2 (personnel data), RL 3 (hospital service activity data), RL 4 (morbidity/mortality data), and RL 5 (monthly data) (Ministry of Health & RI, 2011).

RL 4 is further divided into RL-4a (inpatient morbidity and mortality data) and RL-4b (outpatient morbidity data). RL-4b is a standardized report on outpatient morbidity, summarizing the number of new cases and visits in the outpatient unit annually. Data is collected from January 1st to December 31st each year (Ministry of Health & RI, 2011).

Morbidity is the rate of illness in a population. According to the Central Statistics Agency (BPS), morbidity refers to the percentage of the population experiencing health complaints, which may include physical or mental disorders, accidents, or other issues that interfere with daily activities (Meitria Syahadatina Noor et al., 2023).

SIRS Online is an application developed by the Ministry of Health for submitting RL 1–RL 5 reports. The current version is SIRS Revision 6 version 2.0, an improvement upon version 1.0, incorporating input from each directorate and secretariat under the Directorate General of Health Services. This system aims to optimize data utilization and meet the increasing data demands now and in the future. The RL-4b report must be submitted monthly or quarterly as a benchmark for health services in an effort to improve hospital service quality (Ministry of Health & RI, 2011).

A study by Ardi Isnanto (2023) titled “Implementation of Mortality Report Analysis for Inpatients at Dr. M. Zein Painan Hospital” revealed issues such as insufficient staff resulting in multitasking, lack of training, absence of policy, inadequate facilities, and lack of monitoring and evaluation—all affecting output. Mortality reporting was incomplete, as staff prioritized reports directly related to patient services.

Another study by Gultom (2016) titled “Review of Factors Hindering Morbidity Reporting in the Medical Records Unit at Sinar Husni General Hospital Medan” found delays in morbidity reports caused by incomplete medical records, unprepared management for updating SOPs and technical guidelines, and lack of discipline among medical record staff in compiling morbidity reports.

RSIA Artha Mahinrus is a Type C private hospital that has been accredited. Based on the 2023 SIRS Online reporting achievement evaluation data as of March 13, 2024, from the North Sumatra Provincial Health Office, it was found that RSIA Artha Mahinrus had only submitted 25.71% of its reports via the SIRS Online Application. Preliminary surveys conducted by the researcher revealed issues in RL-4b reporting, such as incomplete RL-4b forms due to the complexity of the form, limited staff knowledge due to lack of training, absence of specific SOPs detailing reporting procedures, frequent network disruptions, and incomplete reporting as staff prioritize preparation for the Electronic Medical Record (EMR) transition.

METHODS

The type of research used in this study is descriptive research with a qualitative approach, which aims to objectively describe or portray a situation. This research was conducted to obtain information regarding the factors that cause delays in the submission of RL-4b reports through the SIRS Online Application at RSIA Artha Mahinrus Medan in 2024.

The subjects of this study consisted of four individuals: one head of the medical records department and three medical record officers. The object of the study was the RL-4b report data submitted via the SIRS Online Application.

The conclusion of this study is meant to answer the formulated research question: to identify the factors causing the delay in the submission of RL-4b reports through the SIRS Online Application. The data analysis in this research was conducted through interviews and observations, which were then processed descriptively to portray the contributing factors to the delays. The interview and observation results were transcribed and analyzed by grouping the responses according to the causes of the delays in RL-4b report submissions via the SIRS Online system at RSIA Artha Mahinrus.

RESULTS AND DISCUSSION

Results

In-depth interviews were conducted with informants who served as sources for this research. The number of informants in this study was four, consisting of one head of the medical records department and three medical record officers, with the following characteristics:

Table 1. Informant Characteristics

No	Nama	Pendidikan	Jabatan	Kode Informan
1	NR	D3 RMIK	Kepala Rekam Medis	Informan 1
2	FG	D4 MIK	Petugas Rekam Medis	Informan 2
3	SZ	D3 RMIK	Petugas Rekam Medis	Informan 3
4	TZ	D3 RMIK	Petugas Rekam Medis	Informan 4

In-Depth Interview Results: Factors Causing Delays in RL-4b Report Submission via the SIRS Online Application at RSIA Artha Mahinrus

Based on the interviews conducted by the researcher during the study at RSIA Artha Mahinrus, the following information was obtained regarding the factors contributing to delays in the submission of RL-4b reports via the SIRS Online application::

1. Man (Human Resource)

How many medical record officers are there at RSIA Artha Mahinrus, and is the number sufficient?

“Four, but it's not really sufficient because everyone multitasks—coding, assembling, and storing—all in one room with no specific roles.” (Informant 1)

“Four people, I think it's enough.” (Informant 2)

“There are four.” (Informant 3)

“Four medical record staff, yes, it's sufficient.” (Informant 4)

According to the interviews, the number of medical record officers is considered sufficient.

Who is responsible for the RL-4b report submission?

“Me, the head of medical records.” (Informant 1)

“The head of the medical records department.” (Informant 2)

“Kak Nurul, the head of the department.” (Informant 3)

“The head of the medical records department.” (Informant 4)

All informants confirmed that the RL-4b report is managed directly by the head of the medical records department.

Has any training been conducted on how to submit RL-4b reports via the SIRS Online application?

“No training, but we often join Zoom meetings.” (Informant 1)

“Never.” (Informant 2)

“Not really, because only Kak Nurul handles the reports, not us.” (Informant 3)

“No, there hasn’t been any training.” (Informant 4)

It was concluded that no formal training has been conducted on RL-4b report submission through the SIRS Online application.

Is the RL-4b data entry complete in the SIRS Online Application?

“There are still some parts unfilled. It’s hard to complete, so sometimes I forget.” (Informant 1)

“Some sections are still incomplete.” (Informant 2)

“As far as I know, some data is still incomplete.” (Informant 3)

“Yes, there are unfilled sections.” (Informant 4)

The responses indicate that RL-4b data entries are still often incomplete..

2. Method (Procedure/Guideline)

Are there regulations in place regarding the submission of RL-4b reports via the SIRS Online Application at RSIA Artha Mahinrus?

“Yes, there are regulations, but only for all types of reporting in general. There are no specific regulations for RL-4b submission, only the deadlines are mentioned. The report is prepared in the format provided by SIRS Online and sent to the Health Department online. That’s basically all we do monthly.” (Informant 1)

“Yes, but not for RL-4b specifically.” (Informant 2)

“Yes.” (Informant 3)

“I think there are, but I’m not sure.” (Informant 4)

The informants generally stated that although regulations for reporting exist, they do not detail the step-by-step procedures for RL-4b submission specifically.

If there are regulations, in what form are they?

“They are in the form of SOPs.” (Informant 1)

“SOPs.” (Informant 2)

“SOPs.” (Informant 3)

“Probably SOPs.” (Informant 4)

The regulations used are standard operating procedures (SOPs).

Have these SOPs been implemented effectively?

All informants confirmed that the SOPs are in use and are functioning properly.
Do these regulations help in carrying out RL-4b reporting via the SIRS Online Application?

“Yes, they help because we know the deadlines for sending the SIRS Online reports to the Health Department.” (Informant 1)

“Yes, they help.” (Informant 2)

“I think they are very helpful.” (Informant 3)

“Yes, they are helpful.” (Informant 4)

Have these SOPs been socialized to every department?

“Yes, they’ve been socialized to all departments.” (Informant 1)

“Yes.” (Informant 2)

“I just joined recently, so I haven’t seen any, but maybe they were shared before I came.” (Informant 3)

“I think so.” (Informant 4)

3. Material (Resources)

- a. Are there specific report formats used in processing RL-4b data?

“Yes, we have a specific format. Everything is already integrated into SIMRS. From inpatient services, pharmacy, SEP—it’s all there. I just need to check the data, so yes, we already have the format in place.” (Informant 1)

“Yes, there is.” (Informant 2)

Yes, it exists.” (Informant 4)

- b. Based on the interviews, the RL-4b report formats are available and already integrated into the hospital’s SIMRS system.

Where is the RL-4b report data stored?

“In SIMRS.” (Informant 1)

“In SIMRS.” (Informant 2)

“There’s no specific storage place—it’s in SIMRS.” (Informant 3)

“In the SIMRS application.” (Informant 4)

- c. All informants stated that RL-4b data is stored within the SIMRS application.
Is RL-4b data required during the hospital accreditation process?

“We haven’t undergone accreditation yet. We’re still preparing.” (Informant 1)

“This hospital has never gone through accreditation.” (Informant 2)

“Yes, it’s needed.” (Informant 3)

“We haven’t had accreditation yet.” (Informant 4)

Most informants stated that the hospital has not been accredited, so the staff are unsure whether RL-4b data is essential for accreditation purposes.

4. Machine (Technology/Tools)

- a. Is the Wi-Fi network sufficient?

“It’s sufficient.” (Informant 1)

“Yes, it is.” (Informant 2)

“There’s only one computer here, so it’s sufficient enough.” (Informant 3)

“Yes, it’s sufficient.” (Informant 4)

Although informants stated that the Wi-Fi network is sufficient, they also indicated that there are frequent disruptions during the submission of RL-4b reports to the Health Office.

- b. What do you do when there are network disruptions or system errors?
- “We report it to the Health Office contact person. We talk it through—usually there’s a Zoom meeting with all hospitals. If I’ve submitted it but it doesn’t show up on their end, they’ll ask for the SIMRS or SIRS Online password so they can access it on their side and check.” (Informant 1)
- “We report it to the Health Office contact.” (Informant 2)
- “We just report it to the IT department.” (Informant 3)
- “We inform the Health Office if there’s a network problem.” (Informant 4)
- The informants stated that when network problems occur during report submission, the issue is reported to the Health Office or IT department.
- c. Are the available computers sufficient?
- “Yes, they are sufficient.” (Informant 1)
- “Yes.” (Informant 2)
- “There’s only one computer, so yes, it’s enough.” (Informant 3)
- “Yes, sufficient.” (Informant 4)
- All informants agreed that the computer facilities are adequate for submitting RL-4b reports

5. Money (Funding)

- a. Is there specific funding allocated for the RL-4b reporting program via the SIRS Online Application at RSIA Artha Mahinrus?
- “No.” (Informant 1)
- “No.” (Informant 2)
- “I’m not really sure because I’m not directly in charge of reporting. You can ask Kak Nurul.” (Informant 3)
- “Still no.” (Informant 4)
- Based on the interviews, there is no specific funding provided for the RL-4b report submission program.
- b. Is there special funding allocated by the hospital to send reporting officers to seminars or training related to RL-4b reporting via the SIRS Online Application?
- “No, maybe just Zoom meetings.” (Informant 1)
- “No.” (Informant 2)
- “I don’t think so.” (Informant 3)
- “No.” (Informant 4)
- The informants confirmed that there is no special funding allocated for sending officers to seminars or training sessions on RL-4b reporting..

DISCUSSION

Factors Causing Delays in RL-4b Report Submission via the SIRS Online Application Based on the “Man” Aspect at RSIA Artha Mahinrus

The information obtained from interviews regarding the "man" aspect revealed that although the number of medical record officers at RSIA Artha Mahinrus is considered adequate, the management of RL-4b data is handled by only one person. Staff knowledge related to RL-4b report processing remains limited due to the absence of direct training,

which affects work performance. Until now, RL-4b reporting has been handled solely by the head of the medical records department.

This finding aligns with the study by Herawati (2021) at Bethesda Hospital in Yogyakarta, which stated that human resources are critical in implementing various activities and programs that aim to develop and maintain a productive workforce to enhance organizational effectiveness. According to Iman et al. (2022), sufficient human resources include the availability of staff and their competence in terms of knowledge, skills, and work attitudes, which are key strengths in achieving organizational goals.

Factors Based on the “Material” Aspect

From the "material" aspect, the interviews indicated that RSIA Artha Mahinrus already has adequate resources. The RL-4b formats are available within the SIMRS application, and data storage is also integrated within the system. However, since the hospital has not undergone accreditation, the staff are unsure whether RL-4b forms are required for that process.

Herawati (2021), in a study at Bethesda Hospital Yogyakarta, found that while diagnostic columns were complete, many diagnoses were written unclearly, making it difficult for coding officers to interpret. According to Hasibuan (2019), materials include raw materials (semi-finished or finished) used in operations to produce goods or services.

Factors Based on the “Machine” Aspect

From the machine perspective, the hospital is equipped with adequate computers and a network system. However, frequent internet disruptions pose a challenge during the transmission of RL-4b reports to the Health Office.

This supports Herawati's (2021) findings that in some hospitals, computerization is incomplete, and diagnoses are still manually recorded by nurses based on doctors' notes. Hasibuan (2019) describes machines as equipment, including technology, used in operations to support the production of goods or services.

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Factors Based on the “Money” Aspect

From the “money” aspect, the study found that the hospital leadership does not allocate specific funds for RL-4b reporting or for sending staff to participate in training or seminars related to the reporting process.

Herawati (2021) also emphasized that SIRS-related operations are often unsupported financially, as daily census activities are considered core responsibilities in inpatient units. According to Hasibuan (2019), money is an indispensable resource—it serves as capital for program execution, a means of exchange, and a measure of value, particularly in procuring tools and materials.

CONCLUSION

The delays in RL-4b report submission via the SIRS Online Application at RSIA Artha Mahinrus are influenced by several factors:

Man (Human Resource): The lack of direct training has resulted in limited staff knowledge, leading to suboptimal performance. RL-4b reporting is handled solely by the head of the medical records department. Method (Procedure): Although there is an existing SOP for reporting, it does not include specific procedures or detailed steps for submitting RL-4b reports through the SIRS Online Application. Machine (Technology): The hospital network frequently experiences disruptions, causing problems when the reporting staff attempt to transmit RL-4b data to the Health Office. Money (Funding): There is no allocated budget from hospital leadership for sending reporting staff to attend training or seminars, which contributes to delays in report submission..

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