

## Role of Service Personnel Nurse in Implementation of Electronic Medical Records to Improve Inpatient Services at Adventist Hospital Bandung

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**Abstract:** *Electronic Medical Record (EMR) is a technology-based information system created to improve health services, where this system helps medical personnel in providing services faster and more accurately, but in its implementation, the technology system takes time to adapt, therefore it is important for hospitals to continue to evaluate how the process of using EMR in the service delivery process. This study aims to determine the benefits, obstacles, and strategies used to optimize the implementation of EMR in the Inpatient Installation of Advent Hospital Bandung. This study uses a qualitative method to analyze phenomena related to the implementation of EMR in the Inpatient Installation of Advent Hospital Bandung, data collection was carried out by interviewing 9 informants who then processed the interview data and presented in narrative form. From this study it was found that EMR speeds up the work of nurses and is more accurate, but in its implementation informants complained about too many EMR features and nursing care with the same nursing diagnosis repeated on each shift so that a lot of time was wasted. In addition, technical problems such as wifi and electricity also often interfere with the work of nurses. From the interview with the informants, it was stated that the strategy to optimize the implementation of EMR in the Inpatient Installation of Adventist Hospital Bandung includes management, staff training, and technology infrastructure, in addition, nurse compliance is also considered to be an important key in optimizing the implementation of EMR. EMR can help nurses work better but still needs to develop simpler features that cover all the important aspects needed, as well as a mature strategy in optimizing the use of EMR in the Inpatient Installation of Adventist Hospital Bandung.*

**Keywords:** *Role of Nurses, Inpatient Services, EMR*

### 1. INTRODUCTION

According to WHO (2020), the house Sick is part important from system social and health services that provide service comprehensive, including effort curative and preventive. In addition to playing a role in treatment and prevention disease, home pain also works as center training power health and research medical, supported by units such as laboratory, pharmacy, and room operations. Based on Law No. 44 of 2009, the house Sick is institution service health individuals who provide service take care hospitalization, care road, and emergency emergency. Bandung Adventist Hospital, hospital Sick private type B with KARS Paripurna accreditation, has two buildings main namely Cihampelas Building and Cipaganti Building. The services covering administration, installation emergency emergency, pharmacy, hemodialysis, physiotherapy, and services take care stay consisting of of 13 units, including ICU, NICU-PICU, and ICCU, which serve various need patient.

Service health in scope care, especially take care stay connected with, laboratory, radiology, physiotherapy, nutrition, and administration as well as service other No off from use technology. Service complex health need media for make it easier fast and accurate data

collection and transfer (Juwita, 2021). Purpose of service health is For reach degrees health a satisfying society hope , and give accessibility , quality and safety in service (Kholik et al., 2022).

As the number increases facility service health like House sick , need will system efficient information becomes very important . The previous manual system used now not enough effective , risky data loss , and require room storage big . With progress technology , home Sick now need digital systems such as Electronic Medical Record (EMR) which can increase quality and efficiency service , both between power health and also between supporting units . EMR functions as a digital database for keep information health patient in a way complete and sustainable . Based on Minister of Health Regulation No. 24 of 2022, in December 2023 all House Sick expected using EMR. Adventist Hospital follows provision This For still compete . The benefits of EMR include improvement quality service , efficiency cost and time , maintaining confidentiality and integrity of data, as well as make it easier data integration for support health programs government and strengthen system health national data- based .

Human Resources ( HR ) is a approach strategic in manage power work in a company . HR aims to For increase efficiency and effectiveness organization with method optimize potential employees and ensure that company own power sufficient and quality work For reach objective business (Sundari, 2023). Home HR Sick like doctor , nurse , pharmacist , officer laboratories , administration and others also play a role role important in EMR implementation . Adequate training and good understanding about The benefits of EMR are very important For overcome challenge in its implementation . In addition , EMR adoption also requires change in habit work and culture at home hospital and clinic . Therefore that , all element must ready and willing For start step change and adaptation with speed required . Implementation of EMR at home sick also need support from management House sick and staff medical For ensure effective and efficient use of EMR (Pangarso et al., 2023).

The implementation of EMR at Bandung Adventist Hospital has effective since June 2023. However , in the evaluation December 2023, level completeness EMR filling by nurses in the department take care stay Still reach 50% of the target of 100%. Obstacles main in implementation This is understanding that has not been comprehensive regarding EMR because of the format that is often change and resistance from power service difficulties adapt with technology new , especially for those who are more aged . The IT team is responsible answer on data security and support technical moment happen problem network or electricity .

Although EMR allows data access via device computer in digital format, investigation more carry on required For overcome existing obstacles and can reach 100% target in 24 hours.

## **2. LITERATURE REVIEW**

Management is the science and art of governing utilization source Power in a way efficient For reach objective certain . According to Hasibuan et al., (2022), management covers process settings with focus on source Power humans and other relevant elements . Henry Fayol also described management as a process of planning , organizing , directing , coordinating and controlling For reach objective organization in a way effective . In addition , George R. Terry emphasized that management is business achievement objective through the efforts of others, through a series actions involving planning , organizing , motivating , and controlling .

From various view said , can understood that management is multi- functional discipline with objective For utilise source Power optimally . The experts agreed that , regardless from difference focus they , the essence from management is use source Power in a way effective and efficient For reach desired result . This is important in context health , where good management impact straight to quality services provided to patient .

Record Medical Record plays a role important in the world of health as notes history health patients , including results examination , diagnosis, and treatment . Doctors and medical personnel medical use record medical For understand condition health patient and monitor development maintenance they . According to Prihasti (2023), record medical become an indispensable guide in the process of taking decision care and evaluation health patient in a way comprehensive . With complete notes , record medical also provides information useful historical For maintenance continued in the future .

With existence progress technology , record medical now develop become digital form called Electronic Medical Record (EMR). EMR makes it easier power medical and staff administration in access and manage patient data in a way electronics .Intansari et al., (2023) state that EMR replaces system paper in digital format, so allow greater access to patient data fast and efficient . Different with record medical conventional which requires room storage large , EMR takes advantage of device soft computer that saves place and reduce risk data loss .

Besides making it easier data storage and access , EMR supports service better health good . Service health covers various effort made by energy medical For prevention , diagnosis, treatment , and maintenance health society . According to Sondakh et al., (2022), service health is services provided by the institution medical , including various action from prevention until recovery health individual or population . With EMR assistance , institutions medical can

manage patient data in a way effective and improve coordination inter-unit for guard quality more service Good .

### **3. METHOD**

Study This use approach qualitative For to study activity source Power man in implementation power services at Bandung Adventist Hospital. According to Sugiyono (2016), approach qualitative generate descriptive data in the form of words from people and observed behavior , without through procedure statistics . Approach This aiming For understand and interpret meaning from events and interactions subject in situation certain , according to perspective researcher (Saputra et al., 2023). Subject study This covers management service nursing , manpower service mature like nurse guarantor answer shift, nurse implementer , and head room , with criteria has work on top One years at Bandung Adventist Hospital.

Data collection was carried out through three technique main : observation , interview in-depth , and study documentation ( Sugiyono , 2016). Accuracy and completeness notes the field is very important in data collection in research qualitative . This process aiming For get relevant and accurate data about condition service take care stay at Bandung Adventist Hospital, so can used For more analysis in-depth . Research This utilizing the Miles and Huberman (2014) analysis model which includes three stages : data reduction , data presentation , and data extraction conclusion or verification . Data reduction helps to summarize information important and find pattern , while data presentation allows better understanding clear through visualization like matrix or chart .

After the data is summarized and presented , the next stage is withdrawal conclusion and verification done For conclude results analysis in a way gradual and confirming findings with party related . Withdrawal conclusion done in a way dynamic , start from conclusion temporary until verification with consideration addition and repetition review field . Research This was held at the Bandung Adventist Hospital, at Jl. Cihampelas No.161, Bandung. The location was chosen Because proximity researcher with environment said , so that make it easier data access and enable results study give contribution direct for improvement service take care stay at home Sick This .

#### **4. RESULTS**

Bandung Adventist Hospital is facility modern health that provides service medical comprehensive , including maintenance general , surgical , and services emergency , and take care hospitalization and care road . Supported by power medical professionals and equipment latest , home This hospital also has a rehabilitation program as well as service support like laboratory and radiology . With approach humanist , Bandung Adventist Hospital is committed For give experience comfortable and quality care for patient with vision mission as following :

##### **Vision:**

Become Channel of Divine Love in Service Man Towards Complete Health .

##### **Mission:**

Based on God's Love, Bandung Adventist Hospital :

1. Developing spiritual, characterful and professional human resources .
2. Give Health Services Based Scientific , Quality and Safe.
3. Use System Appropriate Health Information and Technology .
4. Implementing and Promoting HEALTHY LIFESTYLE AT

##### **Structure Bandung Adventist Hospital Organization**

Structure organization nursing at Bandung Adventist Hospital is designed For support service health quality . Led by a Director who manages Operational , Deputy Director Nursing supervise service nursing in a way Overall . Field Service Nursing I includes the rooms like Roswell Pavilion , Clinical Instructor, and Bougainvillea I & II which focus on care take care stay , training clinical , as well as guard standard quality . Field Service Nursing II includes room like Orchids and Acacia, with service special For Mother pregnant and postpartum giving birth , and support management patients and scheduling power health . This structure supports efficient , safe and quality - oriented service tall .

##### **Data Collection Results**

###### **Observation**

The implementation of Electronic Medical Record (EMR) at Bandung Adventist Hospital has done in a way comprehensive throughout departments , including take care road , care hospitalization , and emergency unit emergency , with objective For increase efficiency and safety patient data management . A well - designed interface allows access fast for staff medical and administrative , so that support taking decision clinical as well as reduce error writing and reading Frequently Used Recipes occurs in manual systems , which in turn increase safety patients . In addition , EMR allows monitoring health patient in real-time, so that doctors and nurses can respond change condition patient with fast . Although challenge like resistance from

part staff to technology new and limitations infrastructure , feed come back show that part big user feel EMR improves efficiency work and improve comfort patient , who feels more safe with health data those who are stored well and easily accessed moment needed .

**Interview**

Interview done to nine informant from various position management and service nursing at Bandung Adventist Hospital for explore quality service . Informant includes two representatives management nursing , two heads room , three nurse guarantor answer shift, and two nurses implementer , who provides perspective about benefits , challenges , and optimization strategies EMR implementation . With 13 questions structured , researcher collect data about policies , procedures measurement quality , and challenges operational For get outlook about practice nursing and efforts necessary improvements in increase quality service .

**Data Analysis Results**

From the results interview against 9 informants , it was found results related a number of benefits , constraints , and strategies in EMR implementation presented in table below this:

Table 1. Results of data analysis

No	Benefit	Constraint	Strategy
1	BPJS/Insurance claims are faster	Stagnant	Periodic digital quality audits
2	Easy access anywhere	Workload outside task nurse	Punishment system
3	Faster information and communication	Regulations that have not been standardized	Reward giving
4	Speed up service	network / wifi No stable	Repair network wifi
5	Efficient and Effective	Lack of senior human resources (>40 years ) awake technology	Data security with different ID and PW systems in accordance authority
6	The writing is clear and easy to read	Lack of training and information	Evaluation by the underwriter answer
7	Save paper time and costs	Spike patient in a way suddenly	Use precise and practical features
8		Too many features many and repeated	
9		Data not available stored in a way automatic	

Source: Data processed by researchers, 2024

There are 7 benefits mentioned by the informants, ranging from the advantages of using EMR to ease of access, efficiency and effectiveness of EMR, while for the obstacles found 9 obstacles related to the system and HR itself, for the strategy the informants agreed that to optimize the use of EMR, cooperation is needed from the hospital management to evaluate and improve the EMR system to make it easier to use.

## **5. DISCUSSION**

### **Benefits of Implementing EMR in Inpatient Installations**

The implementation of EMR in the Inpatient Installation of Bandung Adventist Hospital provides... benefit significant , especially in efficiency compared to manual system . Informant A1 emphasized importance EMR data completeness for speed up BPJS claims , while EMR allows access quickly by doctors , nurses and BPJS administrators , increasing communication and decision making decision . Informant B1 explained that doctor can direct see results laboratory , which accelerates services , and B2 and C1 highlight efficiency access information that improves coordination team medical . With remove difficult handwriting read , EMR not only increase efficiency and reduce errors , but also speeds up the claims process and improves quality service health . Some study latest support findings about benefit EMR implementation at home sick . Research byIkawati (2024) show that EMR implementation in significant increase efficiency operational House Sick with speed up the retrieval process decision clinical . In addition , research byPratiwi et al., (2024) highlight how EMR enables access more information fast for power health , so that repair coordination care and reduce time Wait patient .

research byNugroho & Pramudita (2024) disclose that EMR does not only increase speed in the claim process insurance but also reduces error frequent documentation happen with manual system . As well as research by Albagmi (2021), which states that The use of EMR reduces error documentation . This finding is in line with results an interview that shows that EMR makes information more easy accessed and read . In addition , studies byMuhlizardy et al., (2024) state that the use of EMR can increase satisfaction patients and staff health , blessings convenience communication and transparency offered by the system .(Setyadi & Nadjib, 2023) state that satisfaction patient experience improvement after House Sick using EMR in service .

Although Lots study support benefit implementation of EMR, there is also research the latest showing potential problems and challenges faced . For example , research byKhairunnisa & Ardan (2024) find that even though EMR improves access information , lots power health experience excess burden Work consequence complexity the new system . This causes stress

and decline satisfaction work , which in the end can impact negative on quality service patients . In addition , studies by Belrado & Wahab (2024) disclose that EMR implementation often faces resistance from power medically accustomed with manual system , which hinders adoption this technology . This study notes that without adequate training and support , expected efficiency from EMR no always achieved , can cause error documentation even more big Again result error in actions and therapies to patient

### **Constraints in Implementation of EMR**

The implementation of Electronic Medical Record (EMR) at Bandung Adventist Hospital faces... constraint related understanding nurses and problems technical . There are still many Nurses , especially senior ones, have difficulty use EMR features , which hamper the care process and increase burden Work consequence data entry that is not efficient . Workload nurse increase consequence data- consuming charging time moment filling many features and nursing care with the same treatment diagnosis repeated done in every shift where should moment There is problem new emerging , new Then fill in nursing care with a new nursing diagnosis . This results in EMR data documentation is missing . Internal regulations are not firm and training and information that is considered not enough adequate also reduces compliance in data entry . In addition , the problem technical like slow internet connection cause data loss . Repair policies and training required so that all EMR features can applied in a way consistent and effective . Related burden work , between management and nursing executor own corner different view . According to management burden Work nurse increased by task nurse not yet focused, because Still do task giver other care and senior nurses who have not awake technology . According to nurse executor that burden Work increase consequence EMR features too many and nursing with the same diagnosis repeated on every shift.

Various study latest show importance understanding and training in EMR implementation at home sick , which is in line with findings at Bandung Adventist Hospital. A study by Laila et al., (2024) find that lack of training sustainability and understanding about EMR features can result in resistance from staff medical , which leads to the use of suboptimal system . Another study by Tulu Rismawan et al., (2024) and highlight importance firm policy in EMR data entry for increase compliance and efficiency , similar with challenges faced at home Sick In addition , an article by Almarzouqi et al., (2022) take notes that problem technical , such as internet connection is not stable , become factor inhibitor significant in effectiveness use of EMR in various institution health . This study confirms that good infrastructure , including reliable network is very crucial For success EMR implementation . With Thus , these



studies support need will better information and training , clear policies , and adequate infrastructure For increase EMR implementation and quality service health in a way overall .

A number of study show conflicting results with findings at Bandung Adventist Hospital related EMR implementation . Study Janssen et al., (2021) show that with proper training and involvement staff since beginning implementation , the use of EMR can walk smooth and improve efficiency without add burden Work significant . This study found that with existence support structured management and training , staff feel more believe self in use system , which leads to an increase satisfaction Work .

In addition , research by Ciptaningtyas et al., (2024) show that although There is challenge beginning in understanding technology , nurses who get support social from colleagues and superiors tend more fast adapt and integrate EMR in practice everyday . These results are contradictory with view that senior nurses experience more difficulties large , indicating that factor support structured and training can overcome obstacle generation .

Another study by Cahyawan & Mahyuni (2022) also found that quality good IT infrastructure does not always become factor main in success implementation of EMR, but rather interaction social and collaboration between team more medical influential . This study concludes that environment supportive work can reduce impact negative from problem existing technical , departing behind with findings at Adventist Hospital that emphasize the problem Network and electricity as inhibitor main . These findings indicate that factors social and managerial can play more roles big than expected in EMR implementation .

### **Strategy or Way to Optimizing Implementation of EMR**

Optimization strategy The implementation of EMR at Bandung Adventist Hospital includes evaluation periodic For ensure data quality , with monthly audits For repair sustainable . Real-time access allows monitoring document patients who improve efficiency , while policy firm to data duplication and expectations system incentive based on future performance aiming increase motivation staff . Data security is maintained via individual ID and password, and repairs infrastructure as well as simplification system will support greater use of EMR effective . This approach aims to increase efficiency service health and quality documentation medical .

Study latest show various aspects that are in line with results study about EMR implementation . A study by Rusdiana et al., (2024) emphasize that success EMR implementation at home illness is greatly influenced by support management , training staff , and infrastructure adequate technology . Furthermore , research by Jedwab et al., (2022) to line under the importance of periodic audits For guard EMR data quality , with find that routine

audits can identify errors and improve compliance staff in data entry . Impact positive from application of EMR to efficiency service is also visible in study Wardani et al., (2024), which shows that EMR accelerates communication between departments and simplify the administrative process , in line with hope nurse will more system efficient . Other things delivered Intansari et al., (2023) that the use of EMR will the more effective if the HR using the EMR believes that EMR can help improvement performance nurse . Research Yoga et al., (2021) confirm that For implementing EMR optimally Hospitals must ensure HR readiness with do evaluation and training periodically .

Issue data security becomes attention important in use of EMR, such as expressed in studies Laila et al., (2024), which emphasizes the need system strict access and training user about security information For protect patient data . In addition , research Kurnia & Gunawan, (2023) show that system incentive based on performance can increase motivation staff health in using EMR, with existence *rewards* and *punishments* that are capable push compliance and quality documentation . A study byPratiwi et al., (2024) explore perception nurse against EMR, found that nurse want more system *user-friendly* with integration good features for make it easier access and documentation of patient data . In Overall , these studies provide deep insight about challenges and solutions in implementation of EMR, as well as highlight importance management , audit, data security , and motivation staff For reach successful implementation .

A number of study latest show challenges that are not in line with a strategy for optimize EMR implementation . Research byAlzghaibi (2023) identify that although management try implementing EMR, often happen resistance from staff who feel not ready or not enough trained , so that the existing training strategy become No effective . In addition , studies byAlshehri & Alanazi (2023) show that Lots nurse complain about burden addition from the further documentation process complicated , contradictory with hope that EMR will make it easier work they .

Research byWijayanti et al., (2022) more carry on highlight that Although regular audits and evaluations are often recommended , they are not all House Sick carry out this practice well . As a result , compliance in EMR data entry remains low , and audit strategies that are not consistent make repair data quality is difficult achieved . On the other hand ,Fa et al., (2024) emphasize that although effort For increase data security is done , many institution Still experience violation security , so the proposed strategy For increase data security yet fully effective .

## 6. CONCLUSION

From the results study This found conclusion as following :

### 1. Benefits of EMR Implementation

Implementation of EMR in One year at Bandung Adventist Hospital improves efficiency and accuracy compared to manual system . EMR ensures completeness of data for BPJS claims , speed up access information for team medical , and reduce error documentation .

### 2. EMR Implementation Barriers

Barriers to EMR implementation include understanding lack of nurses , especially among seniors , as well as burden increased work Because the amount features . The lack of training and information as well as regulations that are not firm reduce compliance Data entry . Problem technical like slow internet connection also causes data loss .

### 3. Optimization Strategy Implementation of EMR

Strategy for optimizing EMR includes evaluation periodic and monthly audits . EMR accessibility allows real-time monitoring , and policies firm about data duplication and incentive based on performance can increase motivation staff . Repair infrastructure and data security are also important For speed up documentation and communication between department .

In implementing EMR, the benefits obtained are very significant. compared to with application of manual medical records though There is the obstacles faced However There are strategies that support services can increased , effective and efficient and achieved excellent service in use technology .

## LIMITATIONS

Study This own a number of limitations , including focusing on Bandung Adventist Hospital which may No represent conditions at home Sick others , so that results obtained Possible No can generalized . In addition , the limitations in amount samples and diversity position power nurses involved in studies can influence depth information collected . Limitations time in implementation interviews and observations can also be reduce completeness of the data produced . In addition , resistance to change technology among nurse can influence results implementation of EMR, which is not fully can measured in study This .

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