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**ABSTRAK**

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**Evaluasi Sistem Pengolah Data Mortalitas Pasien Rawat Inap Berbasis Komputer Di RSUD Dr. Moewardi**

**xv+198 hal+12 Tabel+3 Gambar+24 lampiran**

Sistem pengolah data mortalitas pasien rawat inap terdapat hambatan pada kinerja computer dengan hasil beberapa menu belum dijalankan, *fitur* belum sesuai harapan pengguna, data terlambat, sulit mengakses laporan mortalitas, belum ada basis data dokter, dan sertifikat kematian tidak tercetak. Tujuan penelitian, mengevaluasi system pengolah data mortalitas berbasis komputer, berdasarkan metode *Health Metrics Networks* yang dianjurkan oleh WHO untuk sebuah rumah sakit publik. Evaluasi meliputi analisis sumber daya, indikator, sumber data, manajemen data, produk data, serta penyebaran dan penggunaan informasi untuk menilai kondisi system pengolah data mortalitas sesuai kebutuhan yang dipersyaratkan.

Penelitian ini non eksperimen dengan metode kualitatif. Metode pengumpulan data yang digunakan observasi system pengolah data mortalitas dan wawancara mendalam. Informan utama yaitu petugas pelaksana system sebanyak 6 informan. Informan triangulasi yaitu pihak manajemen pendukung system pengolah data mortalitas sebanyak 2 informan. Analisis isi digunakan untuk mendapat gambaran system pengolah data mortalitas berdasarkan pendekatan evaluasi *HMN* yang terdiri dari sumber daya, indikator, sumber data, manajemen data, produk data, serta penyebaran dan penggunaan informasi.

Hasil pada komponen sumberdaya tidak semua personil berpendidikan system informasi atau rekam medis, belum pernah ada pelatihan dan seminar system pengolah data mortalitas, belum ada deskripsi tugas tertulis system pengolah data mortalitas, pelaksana rangkap tugas dengan pelayanan data morbiditas, belum adanya ruang dan computer khusus system pengolah data mortalitas, belum adanya peraturan tertulis system pengolah data mortalitas. Komponen indicator belum ada basis data dokter, tindakan, dan penyebab kematian, serta sertifikat kematian tidak tercetak. Komponen sumber data tidak sesuai antara data mortalitas manual yang ada di register pasien rawat inap dengan data di komputer. Komponen manajemen data analisis data hanya dilakukan oleh coordinator system pengolah data mortalitas. Komponen produk data dirasa data masih belum lengkap. Penyebaran dan penggunaan pengiriman masih via email belum berbasis web dan belum terintegrasi.

Saran pada komponen sumberdaya penambahan personil berpendidikan system informasi atau rekam medis, pelatihan dan seminar system pengolah data mortalitas, pembuatan deskripsi tugas tertulis system pengolah data mortalitas, pengadaan ruang dan computer khusus system pengolah data mortalitas, komponen indicator sebaiknya ditambahkan basis data dokter, tindakan, dan penyebab kematian. Komponen sumber data sebaiknya data di computer disesuaikan dengan data di register rawat inap. Komponen manajemen data sebaiknya analisis data dilakukan semua system pengolah data mortalitas. Komponen produk data sebaiknya petugas teliti melengkapi data pada sistem. Penyebaran dan penggunaan sebaiknya dirancang system pengolah data mortalitas berbasis web dan terintegrasi ke pihak eksternal DKK dan Dispendukcapil.

Kata kunci : Sistem Pengolah Data Mortalitas, Komponen HMN,  
Kepustakaan : 76 (2003-2015)

**ABSTRACT**

**Devi Pramita Sari**

**Evaluation of Data Processor System of Mortality for Patients at Inpatient Unit based on Computer at Dr. Moewardi Public Hospital**  
**xv + 198 pages + 12 tables + 3 figures + 24 appendices**

A data processor system of mortality for patients at inpatient unit had some barriers in terms of the performance of a computer. Some menus did not work, features were not in accordance with users' expectation, data were late, a mortality report was difficult to be accessed, database of physician was unavailable, and death certificate was unprinted. This study aimed at evaluating the data processor system of mortality based on computer using a method of Health Metrics Networks (HMN) recommended by WHO for a public hospital. Evaluation consisted of analyses of resources, indicators, sources of data, data management, product of data, and distribution and use of information to assess condition of the system in accordance with required necessity.

This was a non-experiment study using a qualitative method. Data were collected by observing and conducting in-depth interview. Main informants consisted of six data managers. Informants for triangulation purpose consisted of two management staffs who supported the system. Data were analysed using content analysis to describe the system based on HMN evaluation approach.

The results of this research showed that in the component of resources, not all officers had an educational background of information system or medical record. Training and seminar were unavailable. The data managers had another main task, namely providing morbidity data. A specific room and computers to process mortality data were unavailable. A regulation to implement the system was unavailable. In the component of indicators, database of physicians, treatment, and cause of deaths was unavailable and death certificate was unprinted. In the component of sources, manual mortality data in a document of patient registration at the inpatient unit were not in accordance with data available in a computer. In data management, data analysis was only performed by a coordinator of the system. In the component of product, data were incomplete. Distribution and delivery data used email and had not been based on web and had not been integrated.

To improve resources, number of staffs with educational background of information system and medical record needs to be added. Training and seminar need to be conducted. Job description of the system needs to be issued. A specific room and a computer need to be provided. To improve the component of indicators, database of physicians, treatment, and cause of deaths needs to be added. To improve the component of data source, data in a computer need to be adjusted with data in a registration document. To improve data management, data analysis needs to use the system. To improve the component of data product, an officer needs to complete data on the system. Distribution and use of information need to be arranged a system based on web that is integrated with other sectors like District Health Office and Citizen Office.

Keywords : Data Processor System of Mortality, HMN components  
Bibliography: 76 (2003-2015)