THE EFFECT OF HUMAN RESOURCES DEVELOPMENT ON THE QUALITY OFINPATIENT MEDICAL RECORDSATSALEWANGANGHOSPITAL MAROS REGENCY

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ABSTRACT

Quality medical record is one of the indicators in assessing the quality of health services in a hospital. This study aims to conduct in-depth research on the effect of the development of human resources (health workers) on the quality of the inpatient medical records at Salewangang Hospital Maros. This research was an analytical observational study with a cross-sectional study design. Sampling was conducted by non-probability sampling technique, while the sample size was determined using the Slovin's formula. From the total population, a sample of 170 respondents consisting of doctors and nurses was obtained. In addition, there were 170 inpatient medical records as samples. The results of the analysis showed that there was no relationship between the knowledge and motivation of health workers and the quality of the medical records which included the completeness, the accuracy and the punctuality of returning medical records. Furthermore, there was no relationship between the work discipline of health workers (doctors) with the quality of the medical records which included the completeness, accuracy and punctuality of returning medical records. There was also no relationship between the work discipline of the health workers (nurses) with the completeness and the punctuality of returning the medical records. Last but not least, there was a relationship between the work discipline of the health workers (nurses) and the accuracy of the medical records. As a recommendation, the hospital should conduct regular socialization on the importance of the completeness and the accuracy in filling out the medical records files to improve the discipline of the health workers, especially the nurses.

Keywords: HR, Medical Record Quality, Inpatient

INTRODUCTION

One of the important points which should always be improved in a hospital is the quality of health services [1-4]. The quality of the health services refers to the improvement of supporting services such as the implementation of the medical records which is included in one of the indicators of hospital services quality [5-8]. The Regulation of the Minister of Health of the Republic of Indonesia [9]declares that the requirements for the quality medical records are related to the completeness of the contents of the medical records, the accuracy, the punctuality, and the fulfillment of legal aspects.

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Based on data recapitulation analysis of the completeness and the punctuality of returning the medical records in the medical records installation of Salewangang Hospital Maros for the last three months (October, November, December) 2018,it was known that from 14 inpatient rooms at Salewangang Hospital, the highest percentage of completeness of the medical records content of each inpatient room was 9% and the highest percentage of the punctuality of returning the medical records to the medical records installation was 6%. Referring to the Decree of the Minister of Health of the Republic of Indonesia No.129/MENKES/SK/II/2008, these percentages were still very far from the target of the completeness and the punctuality of returning the medical records (100%) as a standard for the medical records completeness of the hospitals after the completion of services.

The impact of the incompleteness, the inaccuracy and the unpunctuality in returning the medical records is a significant problem. These issues can affect the quality of health services in many hospitals since the medical records are usually the only records that can provide detailed information about things that have happened when the patients are hospitalized[10].In addition, the inaccurate medical records certainly affect the past and present medical history (disease) and the treatment that has been given as an effort to improve the health services [11].

Besides supporting the hospitals to have a good administration in order to improve health services, the completeness of the medical records file is very important for the patients as a control in receiving sustainable health services [12].Furthermore, the punctuality of returning medical records is also a factor that can support the implementation of good and quality medical records. The unpunctuality of returning the medical records from the inpatient room to the medical records installation can delay the patient data processing which will automatically delay the reports[13].

There are several factors that influence the completeness of the patient's medical records at a hospital in Indonesia. Based on the human resource factor, the officers or the health workers generally have a low level of knowledge and low motivation in filling out the medical records (Wirajaya [14]and Helda Budiyanti.Nyoman, Anita Damayanti [15]). The indiscipline of the health workers in filling out the medical records can result in the incomplete medical records[16].

Human resources are the important factors related to the service quality and the patients' satisfaction [17]. One of the mechanisms in realizing the professional human resources is through training and development. HR is gaining an increasingly important role in realizing competitive organizations in the era of ongoing and future globalization. An organization will fail to realize its existence without the human resources who have high competence in the field of work and responsibilities [18].

Based on the aforementioned background, the researchers were interested in finding out the Effect of Human Resource Development on the Quality of Inpatient Medical Records at Salewangang Hospital Maros Regency.

MATERIALS AND METHOD

This research was ananalytical observational study with a cross-sectional study design.It was conducted at the Salewangang Hospital Maros in February to March 2020.The population in this study included all 345 health workers (Doctors, Nurses, Midwives, Medical Recorders, and Nutritionists) who served as parties who filled out the medical records at the Salewangang Hospital Maros.Sampling was done by non-probability sampling technique using quota sampling, while the sample size was determined using the Slovin's formula. From the total population, a sample of 170 health workers was obtained consisting of 23 doctors and 147 nurses.In addition, there were 170 inpatient medical records as samples in this study.

Data collection was carried out through questionnaires and interviews. The research data consisted of primary and secondary data.The primary data were obtained through interviews with doctors and nurses using a list of available questions (questionnaires), while the secondary data were obtained from the analysis of the completeness, the accuracy and the punctuality of returning the medical records. The data were analyzed using univariate, bivariate, and multivariate analyzes.

RESULTS

a.   **The Characteristics of Respondents**

Table1. Distribution of the Characteristics of Health Workers

Characteristics	Frequency (N=170)	Percentage (%)
Sex		
Male	11	6.5
Female	159	73.9
Age (year)		
24-27	13	7.64
28-31	52	30.58
32-35	42	4.7
36-39	29	17.05
40-43	23	13.52
44-57	8	4.7
48-51	1	0.58
52-55	3	1.7
Level of Education		
D-3 (Diploma 3)	75	44.1
S-1 (Bachelor degree)	45	26.5
S-1 Ners (Bachelor of Nursing)	27	15.9
S-2 (Master degree)	21	12.4
S-3 (Doctoral degree)	2	1.2

Based on Table 1, it is known that there are 11 male respondents (6.5%) and 159 female respondents (73.9%).In terms of age, there were 13 respondents (7.64%) aged between 24-27 years, 52 respondents (30.58%) aged between 28-31 years, 4 respondents (17.4%) aged between 46-51 years, 42 respondents (24,7%) aged 32-35 years, 29 respondents (17.05%) aged 36-39 years, 23 respondents (13.52%) aged 40-43 years, 8 respondents (4.7%) aged 44- 47 years, 1 respondents (0.58%) aged 48-51 years, and 3 respondents (1.7%) aged 52-55 years. For the characteristics of the education level, there were 75 respondents (44.1%) with D-3 education level, 45 respondents (26.5%) with S-1 education level, 27 respondents (15.9%) with S-1 Ners education level, 21 respondents (12.4%) with S-2 education level, and 2 respondents (1.2%) with S3 education level.

b. **The relationship between the doctors' knowledge and the completeness, the accuracy, and the punctuality of returning the medical records**

Table 2. The Relationship between the Doctors' Knowledge and the Completeness of the Medical Records

Knowledge	The Completeness of the Medical Records				Total		P
	Complete		Incomplete				
	N	%	n	%	N	%	
Sufficient	3	42.9	4	57.1	7	100.0	
Insufficient	5	31.2	11	68.8	16	100.0	0.657
Total	8	34.8	15	65.2	23	100.0	

Table 2 shows the doctors' knowledge and the completeness of the medical records. From the respondents with sufficient knowledge, there were more of them who filled the medical records incompletely (4 respondents or 57.1%) than those who filled the medical records completely (3 people or 42.9%). In addition, from the respondents with

insufficient knowledge, there were 11 respondents (68.78%) who filled the medical records incompletely and 5 respondents (31.2%) who filled the medical records completely. The fisher's exact statistical test obtained p = 0.657(p > 0.05). Therefore, Ho was accepted, which means that there was no relationship between the doctor's knowledge and the completeness of inpatient medical records at Salewangang Hospital Maros.

Table3. The Relationship between the Doctors' Knowledge and the Accuracy of the Medical Records

Knowledge	The Accuracy of the Medical Records				Total		P
	Accurate		Not Accurate				
	n	%	N	%	N	%	
Sufficient	2	28.6	5	31.2	7	30.5	
Insufficient	5	71.4	11	68.8	16	69.5	1.000
Total	7	30.4	16	69.6	23	100.0	

Table 3 shows the doctors' knowledge and the accuracy of the medical records. From the total respondents who had sufficient knowledge, there were more of them who filled the medical records inaccurately (5 respondents or 31.2%) than those who filled the medical records accurately (2 respondents or 28.6%). Furthermore, from the total respondents who had insufficient knowledge, there were 11 respondents (68.8%) who filled out the medical records inaccurately, and 5 respondents (71.4%) who filled out the medical records accurately. The fisher's exact statistical test obtained p = 1.000 (p> 0.05). Therefore, Ho was accepted. It means that there was no relationship between the doctor's knowledge and the accuracy of the inpatient medical records at Salewangang Hospital Maros.

In terms of the relationship between the doctors' knowledge and the punctuality of returning medical records, all respondents did not return the medical records on time. There were 7 respondents who had sufficient knowledge, and 16 respondents who had insufficient knowledge. Statistical test results could not be measured since all respondents did not return the medical records on time.

c. **The relationship between the doctors' motivation and the completeness, the accuracy and the punctuality of returning the medical records**

Table 4. The Relationship between the Doctors' Motivations and the Completeness of the Medical Records

Motivation	The Completeness of the Medical Records				Total		P
	Complete		Incomplete				
	N	%	N	%	N	%	
Sufficient	4	33.3	8	66.7	12	100.0	
Insufficient	4	36.4	7	63.6	11	100.0	1.000
Total	8	34.8	15	65.2	23	100.0	

Table 4 shows the doctors' motivation and the completeness of the medical records. From the total respondents who had sufficient motivation, there were more of them who filled out the medical records incompletely (8 respondents or 66.7%) than those who filled out the medical records completely (4 respondents or 33.3%). Moreover, from the total respondents who had insufficient motivation, there were more of them who filled out the medical records incompletely (7 respondents or 63.6%) than those who filled out the medical records completely (4 respondents or 36.4%). The fisher's exact statistical test obtained p = 1.000 (p> 0.05). Therefore, Ho was accepted. It means that there was no relationship between the doctors' motivation and the completeness of the inpatient medical records at Salewangang Hospital Maros.

Table 5. The Relationship between the Doctors' Motivation and the Accuracy of the Medical Records

| Motivation | The Accuracy | Total | P |
| | | | |

	of the Medical Records						
	Accurate		Not Accurate				
	N	%	N	%	N	%	
Sufficient	5	41.7	7	58.3	12	100.0	
Insufficient	2	18.2	9	81.8	11	100.0	0.371
Total	7	30.4	16	69.6	23	100.0	

Table 5 shows the doctors' motivation and the accuracy of the medical records. From the total respondents who had sufficient motivation, there were more of them who filled the medical records inaccurately (7 respondents or 58.3%) than those who filled the medical records accurately (5 respondents or 41.7%). Furthermore, from the total respondents who had insufficient motivation, there were 9 respondents (81.8%) who filled out the medical records inaccurately and 2 respondents (18.2%) who filled out the medical records accurately. The fisher's exact statistical test obtained p = 0.371 (p> 0.05). Therefore, Ho was accepted, which means that there was no relationship between the motivation and the accuracy of the inpatient medical records at Salewangang Hospital Maros

Additionally, in terms of the doctors' motivation and the punctuality of returning the medical records, all respondents did not return the medical records on time. There were 12 respondents who had sufficient motivation and 11 respondents who had insufficient motivation. Statistical test results could not be measured because all respondents did not return the medical records on time.

d. **The relationship between the doctors' discipline and the completeness, the accuracy, and the punctuality of returning the medical records**

**Table 6. The Relationship between the Doctors' Disciplines
and the Completeness of the Medical Records**

Work Discipline	The Completeness of the Medical Records				Total		P
	Complete		Incomplete				
	N	%	N	%	N	%	
Sufficient	6	42.9	8	57,1	14	100.0	
Insufficient	2	22.2	7	77,8	9	100.0	0.400
Total	8	43.5	15	56,5	23	100.0	

Table 6 shows the doctors' discipline and the completeness of the medical records. From the total respondents who had sufficient work discipline, there were more of them who filled the medical records completely (6 people or 42.9%) than those who filled the medical records incompletely (8 people or 57.1%). In addition, from the total respondents who had insufficient work discipline, there were 2 respondents (22.2%) who filled out the medical records completely and 7 respondents (77.8%) who filled out the medical records incompletely. The fisher's exact statistical test obtained p = 0.400 (p> 0.05). Therefore, Ho was accepted, which means that there was no relationship between the discipline and the accuracy of the inpatient medical records at Salewangang Hospital Maros

**Table 7. The Relationship between the Doctors' Discipline
and the Accuracy of the Medical Records**

Work Discipline	The Accuracy of the Medical Records				Total		P
	Accurate		Not Accurate				
	N	%	N	%	N	%	
Sufficient	4	28.6	10	71.4	14	100.0	
Insufficient	3	33.3	6	66.7	9	100.0	1.000
Total	7	30.4	16	69.6	23	100.0	

Table 7 shows the doctors' discipline and the accuracy of the medical records. It indicates that from the total respondents who had sufficient work discipline, there were more of them who filled the medical records inaccurately (10 people or 71.4%) than those who filled the medical records accurately (4 people or 28.6%).Furthermore, from the total respondents who had insufficient work discipline, 6 respondents (66.7%) filled the medical records inaccurately and 3 respondents (33.3%) filled the medical records accurately. The fisher's exact statistical test obtained p = 1.000 (p > 0.05). Therefore, Ho was accepted. It indicates that there was no relationship between the work discipline and the accuracy of the inpatient medical records at Salewangang Hospital Maros

Meanwhile, in terms of the doctors' discipline and the punctuality in returning the medical records, 14 respondents had sufficient work discipline and 9 respondents had insufficient work discipline. Statistical test results could not be measured since all respondents did not return the medical records on time.

e. **The relationship between the nurses' knowledge and the completeness, the accuracy and the punctuality of returning medical records**

**Table8. The Relationship between the Nurses' Knowledge
and the Completeness of the Medical Records**

Knowledge	The Completeness of the Medical Records				Total		P
	Complete		Incomplete				
	N	%	N	%	N	%	
Sufficient	36	50.7	35	49.3	71	100.0	
Insufficient	32	42.1	44	57.9	76	100.0	0.324
Total	68	46.3	79	53.7	147	100.0	

Table 8 shows the nurses' knowledge and the completeness of the medical records. From the total respondents who had sufficient knowledge, more of them filled out the medical records completely (36 respondents or 50.7%) than those who filled the medical records incompletely (35 respondents or 49.3%). Besides, from the total respondents who had insufficient knowledge, 44 respondents (57.9%) filled out the medical records incompletely and 32 respondents (42.1%) filled out the medical records completely. The fisher's exact statistical test obtained p = 0.324 (p > 0.05). Therefore, Ho was accepted. It means that there was no relationship between the knowledge and the completeness of inpatient medical records at Salewangang Hospital Maros

**Table 9. The Relationship between the Nurses' Knowledge
and the Accuracy of the Medical Records**

Knowledge	The Accuracy of the Medical Records				Total		P
	Accurate		Not Accurate				
	N	%	N	%	N	%	
Sufficient	31	43.7	40	56.3	71	100.0	
Insufficient	23	30.3	53	69.7	76	100.0	0.123
Total	54	36.7	93	63.3	147	100.0	

Table 9 shows the nurses' knowledge and the accuracy of the medical records. It shows that, from the total respondents who had sufficient knowledge, there were more of them who filled the medical records inaccurately (40 respondents or 56.3%) than those who filled the medical records accurately (31 respondents or 43.7%).Furthermore, from the respondents with insufficient knowledge, 53 respondents (69.7%) filled the medical records inaccurately and 23 respondents (30.3%) filled the medical records accurately. The fisher's exact statistical test obtained p = 0.123 (p > 0.05). Therefore, Ho was accepted, which means that there was no relationship between the knowledge and the accuracy of the inpatient medical records at Salewangang Hospital Maros

Meanwhile, in terms of the nurses' knowledge and the punctuality of returning the medical records, all respondents did not return the medical records on time. There were 71 respondents who had sufficient knowledge and 76

respondents who had insufficient knowledge. The results of statistical tests could not be measured because all respondents did not return the medical records on time.

f.   The relationship between the nurses' motivation and the completeness, the accuracy, and the punctuality of returning the medical records

Tabel 10. The Relationship between the Nurses' Motivation and the Completeness of the Medical Records

Motivation	The Completeness of the Medical Records				Total		P
	Complete		Incomplete				
	n	%	n	%	n	%	
Sufficient	30	47.6	33	52.4	63	100.0	
Insufficient	38	45.2	46	54.8	84	100.0	0.867
Total	68	46.3	79	53.7	147	100.0	

Table 10 shows the nurses' motivation and the completeness of the medical records. From the total respondents who had sufficient motivation, there were more of them who filled the medical records incompletely (39 respondents or 61.9%) than those who filled the medical records completely (24 respondents or 38.1%). Additionally, from the respondents who had insufficient motivation, 54 people (64.3%) filled the medical records incompletely and 30 people (35.7%) filled the medical records completely. The fisher's exact statistical test obtained p = 0.863 (p > 0.05). Therefore, Ho was accepted, which means that there was no relationship between the motivation and the accuracy of the inpatient medical records at Salewangang Hospital Maros

Table 11. The Relationship between the Nurses' Motivation and the Accuracy of the Medical Records

Motivation	The Accuracy of the Medical Records				Total		P
	Accurate		Not Accurate				
	N	%	N	%	n	%	
Sufficient	24	38.1	39	61.9	63	100.0	
Insufficient	30	35.7	54	64.3	84	100.0	0.863
Total	54	36.7	93	63.3	147	100.0	

Table 11 shows the nurses' motivation and the accuracy of the medical records. It shows that from the total respondents who had sufficient motivation, more of them filled in the medical records inaccurately (39 respondents or 61.9%) than those who filled in the medical records accurately (24 respondents or 38.1%). In addition, from the total respondents who had insufficient motivation, 54 respondents (64.3%) filled in the medical records inaccurately and 30 respondents (35.7%) filled in the medical records accurately. The fisher's exact statistical test obtained p = 0.863 (p > 0.05). Therefore, Ho was accepted. It means that there was no relationship between the motivation and the accuracy of the inpatient medical records at Salewangang Hospital Maros.

In terms of the nurses' motivation and the punctuality of returning the medical records,all respondents did not return the medical records on time. There were 63 respondents who had sufficient motivation and 84 respondents who had insufficient motivation. Statistical test results could not be measured because all respondents did not return the medical records on time.

g.   The relationship between the nurses' work discipline and the completeness, the accuracy, and the punctuality of returning the medical records

Table 12. The Relationship between the Nurses' Work Discipline and the Completeness of the Medical Records

Work Discipline	The Completeness of the Medical Records				Total		P
	Complete		Incomplete				
	n	%	N	%	n	%	
Sufficient	37	54.4	31	45.6	68	100.0	
Insufficient	31	39.2	48	60.8	79	100.0	0.071
Total	68	46.3	79	53.7	147	100.0	

Table 12 shows the nurses' work discipline and the completeness of the medical records, in which from the total respondents who had sufficient work discipline, there were more of them who filled in the medical records incompletely (31 respondents or 45.6%) than those who filled in the medical records completely (37 respondents or 54.4%). From the total respondents who had insufficient work discipline, 48 respondents (60.8%) filled in the medical records incompletely and 31 respondents (39.2%) filled in the medical records completely. The fisher's exact statistical test obtained p = 0.071 (p > 0.05). Therefore, Ho was accepted, meaning that there was no relationship between the work discipline and the completeness of the inpatient medical records at the Salewangang Hospital Maros

Table 13. The Relationship between the Nurses' Work Discipline and the Accuracy of the Medical Records

Work Discipline	The Accuracy of the Medical Records				Total		P
	Accurate		Not Accurate				
	n	%	N	%	n	%	
Sufficient	31	45.6	37	54.4	68	100.0	
Insufficient	23	29.1	56	70.9	79	100.0	0.042
Total	54	36.7	93	63.3	147	100.0	

Table 12 shows the nurses' work discipline and the accuracy of the medical records, which shows that from the total respondents who had sufficient work discipline, there were more of them who filled in the medical records inaccurately (37 people or 54.4%) than those who filled the medical records accurately (31 respondents or 45.6%). Additionally, from the total respondents who had insufficient work discipline, 56 respondents (70.9%) filled in the medical records inaccurately and 23 respondents (29.1%) filled in the medical records accurately. The fisher's exact statistical testobtained p = 0.042 (p < 0.05). Therefore, Ho was rejected, which means that there was a relationship between the work discipline and the accuracy of the inpatient medical records at the Salewangang Hospital Maros

Meanwhile, in terms of the nurses' work discipline and the punctuality of returning the medical records, all respondents did not return the medical records on time. In addition, 68 respondents had sufficient work discipline and 79 respondents had insufficient work discipline. Statistical test results couldnot be measured since all respondents did not return the medical records on time.

DISCUSSION

a.   The effect of the health workers' knowledge on the quality of the inpatient medical records at Salewangang Hospital Maros

Knowledge is the result of knowing that occurs after people have sensed a certain object. Sensing or cognitive is significant in shaping one's attitude (overt behavior). Knowledge or cognitive determines a person's behavior [19].The results of the research conducted at Salewangang Hospital Maros Regency showed that there was no relationship between doctors' knowledge and the completeness and accuracy of medical records, in which the fisher's exact statistical test obtained p = 0.0657 (p > 0.05) for completeness and p = 1.000 (p > 0.05) for accuracy of the medical records. Moreover, for the relationship between nurses' knowledge and the completeness and accuracy of the medical records, the fisher's exact statistical test obtained a value of p = 0.324 (p > 0.05) for the completeness and a value of p

= 0.123 (p > 0.05) for the accuracy of the medical record. Last but not least, in the context of the relationship between doctors' and nurses' knowledge and the punctuality of returning the medical records, the statistical test results could not be measured since all respondents did not return the medical records on time.

The results of this study are in line with a research conducted by Anna Anita Paulus, Yudhy Dharmawan, and Farid Agushybana [20]which affirmed that there was no relationship between knowledge and the completeness of the medical records (p value of doctor = 0.098, p value of nurse = 0.478). Knowledge of the health workers on the aspects of the medical records influences the entry and exit summary sheets, or the completeness is the responsibility of the health workers. Knowledge has a close relationship with education by which it is expected that someone with higher education also have broader knowledge. However,it needs to be emphasized that a person with low education does not mean that he/she absolutely has low knowledge. The increased knowledge is not absolutely obtained in formal education, but it can also be obtained in non-formal education [21].

b.   The effect of the health workers' motivation on the quality of the inpatient medical records at Salewangang Hospital Maros

Motivation is a potential power that exists in a human being. It can be self-developed or developed by a number of outside forces which basically revolve around monetary and non-monetary rewards that can affect performance results positively or negatively. It depends on the situation and conditions faced by the person concerned[22].The results of this research found that there was no relationship between the doctors' motivation and the completeness and the accuracy of the medical records with the fisher's exact statistical test which obtained p = 1.000 (p > 0.05) for the completeness and p = 0.371 (p > 0.05) for the accuracy of the medical records. Besides, in terms of the relationship between the nurses' motivation and the completeness and the accuracy of the medical records, the fisher's exact statistical test obtained p = 0.867 (p > 0.05) for the completeness and p = 0.863 (p > 0.05) for the accuracy of the medical records. In the context of the relationship between the doctors' and the nurses' motivation and the punctuality of returning the medical records, the results of statistical tests could not be measured for all respondents did not return the medical records on time.
The results of this research are also in line with a research conducted by Anna Anita Paulus, Yudhy Dharmawan, and Farid Agushybana [20]which discovered that there was no relationship between the motivation and the completeness of the medical records (p value of the doctor = 0.051, p value of the nurse = 0.895). In this research, the motivation of the health workers was still relatively low, especially the nurse. It occurred at Salewangang Hospital Maros, where the health workers had low motivation. It could be related to sex, age, and years of service.

According to Gray cited in Winardi [22],the performance of the workers is the result of many factors, some of which are not known by the manager and not consciously understood by the workers themselves. However, there is an agreement on views of the two most important variables in explaining the workers' performance, namely the workers' motivation and capability.

c.The effect of the health workers' discipline on the quality of the inpatient medical records at Salewangang Hospital Maros

The results of this research indicated that there was no relationship between the doctor's discipline and the completeness and the accuracy of the medical records, with the fisher's exact statistical test which obtained p = 0.400 (p > 0.05 for the completeness and p = 1,000 (p > 0.05) for the accuracy of the medical records. Furthermore, there was no relationship between the nurses' work discipline and the completeness of the medical records, where the fisher's exact statistical test obtained p = 0.071 (p> 0.05). Additionally, there was a relationship between the nurses' work discipline and the accuracy of the medical records, where the fisher's exact statistical test obtained p = 0.042 (p <0.05). In the context of the relationship between the doctors' and the nurses' discipline and the accuracy of returning medical records, the statistical test results could not be measured since all respondents did not return the medical records on time.

A research conducted by Sayyidah Mirfat, Nurwulan Andadari, and Yetty Nusaria Nawa Indah [16]confirmed that the main factor causing delay in returning the inpatient medical records is the human resource (HR) factor, including the indiscipline of the Medical Doctor in Charge (MDiC) in filling out the medical records, especially medical resumes.

Moreover, a research conducted by Erlindai [23]showed that a factor causing delay in returning the inpatient medical records is that the doctors lack of discipline and responsibility in filling in the data of the medical records, especially the medical resumes. Doctors always delay filling them out if there are only a few files, so the files will be completed when they have piled on their desks.

According to the Standard Operating Procedure policy established in the Salewangang Hospital Maros, the inpatient medical records shall be returned by the nurses from each inpatient room to the medical records installation after the patient left. The inpatient medical records must return to the medical records installation no later than 1x24 hours after the patient is discharged from the hospital, and every medical record returned must be checked for its completeness.

For the last point, filling in the medical records is the responsibility of every caregiver professional, each conducting an examination and planning treatment and actions for the patient. In addition, good discipline in returning the medical records documents will make it easier for the doctors when they need these documents at any time [16].

CONCLUSION AND RECOMMENDATIONS

Based on the results of this research on the effect of human resource development on the quality of the inpatient medical records at Salewangang Hospital Maros, it can be concluded that there is no relationship between the knowledge and the motivation of the health workers with the quality of the medical records which includes the completeness, the accuracy and the punctuality of returning the medical records. Furthermore, there is no relationship between the work discipline of the health workers (doctors) with the quality of the medical records which includes the completeness, the accuracy and the punctuality of returning the medical records. There is also no relationship between the work discipline of the health workers (nurses) with the completeness and the punctuality of returning the medical records. Last but not least, there is a relationship between the work discipline of the health workers (nurses) with the accuracy of the medical records. As a recommendation, the hospital should conduct regular socialization on the importance of the completeness and the accuracy in filling out the medical records to improve the discipline of the health workers, especially the nurses.

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