

ANALYSIS OF THE REGULATION OF THE MINISTER OF HEALTH REGULATION NUMBER 24 OF 2022 CONCERNING MEDICAL RECORDS IN TERMS OF CONVENTIONAL MEDICAL RECORD MANAGEMENT

Ni Ketut Juniati, Sagung Putri M.E Purwani, Linawati

Master of Health Law Study Program Udayana University Postgraduate Program

Lecturer at Faculty of Health Law, Udayana University

Email: jun060626@gmail.com, sagung_putri@unud.ac.id, linawati@unud.ac.id

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ABSTRACT

On August 31 2022, the Minister of Health of the Republic of Indonesia stipulated Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 concerning Medical Records. This regulation revokes the Regulation of the Minister of Health of the Republic of Indonesia Number 269/MENKES/PER/III/2008 of 2008 concerning Medical Records. Several things are the basis for the revocation of the Minister of Health Regulation, including: Regulation of the Minister of Health of the Republic of Indonesia Number 269/MENKES/PER/III/2008 of 2008 is no longer in accordance with developments in science and technology, health service needs, and the legal needs of the community; the development of digital technology in society has resulted in the digital transformation of health services; Managing electronic medical records must prioritize the principles of security and confidentiality of data and information. In essence, Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 seeks to provide a legal basis or legality for the administration of electronic medical records. In general, there are three new things regulated in the Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022, namely the electronic medical record system, activities for administering electronic medical records, security and protection of electronic medical record data. However, conventional medical records are still used in maintaining medical records in all health facilities. Conventional medical records are still stored because it is not yet time for them to be destroyed and there are several medical record forms that cannot yet be electronicized because they still require the signature of the patient and doctor, there is no legal certainty regarding the form of an electronic signature. The type of research used in this research is normative juridical research, namely a process for finding legal rules, legal principles and legal doctrines to answer the legal issues being faced. To find solutions to legal problems in this research.

INTRODUCTION

Health is part of basic human needs (Uralovich et al., 2023). Because without health it is difficult for a person to carry out daily activities and meet other needs in this life (Uralovich, 2023). Health itself is inseparable from the efforts of health services and health service facilities (Muntasir et al., 2023).

Health service efforts can be interpreted as a series of activities carried out in an

integrated, integrated and sustainable manner, which aims to, among others, maintain and improve the degree of public health. This can be implemented in the form of disease prevention, health improvement, disease treatment, and health restoration (preventive, promotive, curative and rehabilitative) (Haerani et al., 2023). To support these health efforts, it is necessary to provide health resources, where the two main components are health workers (including but not limited to doctors and dentists) and health service facilities.

Medical records are not just records and documentation. Medical record is a data file that contains the identity of the patient, all actions taken (from the beginning) against the patient in the context of providing health services (Haerani, 2023). The recording and documentation must be listed chronologically, systematically and accurately, so that it will provide an overview of information on the course of a person's illness, investigative actions that have been taken against him, management plan information, records of clinical observations and treatment results, approval / rejection of an action, discharge summary, and names and signatures of health workers who provide health services.

All of this must also be in line with the principle of continuity of care (D'Angelo et al., 2015). Thus, a good medical record will reflect a good and responsible medical practice and also show that health workers have good performance and discipline (Galetsi et al., 2023).

Regarding medical records themselves, they have been regulated in several laws, namely Law Number 29 of 2004 concerning Medical Practice, Law Number 44 of 2009 concerning Hospitals and Permenkes Number 269 / MENKES / PER / III / 2008 concerning Medical Records, as an implementation of Article 47 paragraph (3) of Law Number 29 of 2004 concerning Medical Practice. In the two regulations mentioned above, it is mentioned about the obligation of a doctor and dentist to make complete, clear and accurate medical records. Even in the Minister of Health also mentioned the importance of affixing the identity of the name, time and signature.

Then in Law Number 44 of 2009 concerning Hospitals also mentioned about medical records (Sudra et al., 2023). In this Law, hospitals are required to maintain medical records, as a form of reflecting responsible health services (Cerchione et al., 2023).

Medical records as a document file have two forms / types, namely conventional medical records and electronic medical records (Ndzimakhwe et al., 2023). Conventional medical records, as mentioned earlier, are writings / records / documentation that chronologically and systematically describe and explain the medical history of a person's disease (Falcetta et al., 2023).

There is clearly a difference between conventional medical records and electronic medical records, so the evidentiary strength of the two will be different (Cerchione, 2023). In Permenkes Number 269 / MENKES / PER / III / 2008 concerning Medical Records, it has been mentioned about the existence of two types of medical records, namely conventional medical records and electronic medical records. However, regarding this electronic medical record, it is not regulated completely and in detail (Rai, 2023). In Article 2 paragraph (2) of Permenkes Number 269 / MENKES / PER / III / 2008 concerning Medical Records, it is stated that the implementation of medical records using electronic information technology will be further regulated in a separate regulation.

However, during the enactment of the Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 concerning Medical Records (Basani, 2023). This

regulation repeals the Regulation of the Minister of Health of the Republic of Indonesia Number 269/MENKES/PER/III/2008 Year 2008 concerning Medical Records. However, in the Minister of Health Regulation Number 24 of 2022, there are no articles regulating the transfer of conventional medical records to electronic medical records. Where we know all health facilities still use conventional medical records because the readiness of each health facility to go to electronic medical records varies (Alzghaibi et al., 2023).

Based on the description above, it is important to conduct further research related to the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records, in the Implementation of Conventional Medical Records.

Problem Statement

From the background description above, the following problems can be formulated:

1. How was the management of conventional medical records when Minister of Health Regulation Number 269 of 2008 was revoked?
2. Is there a legal vacuum in Minister of Health Regulation Number 24 of 2022?

Research Objectives

General Purpose

The purpose of the study "Analysis of the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records, in the Management of Conventional Medical Records" is to identify and analyze how the implementation of conventional medical records when PMK 269 of 2008 was revoked.

Special Purpose

1. To analyze conventional medical records in the Minister of Health Regulation Number 24 of 2022.
2. To analyze whether there is a legal vacuum in the Minister of Health Regulation Number 24 of 2022 concerning Medical Records.

Research Benefits

Research is carried out in order to provide the widest possible benefits for health facilities and the community. Below are the benefits to be achieved, namely:

Theoretical benefits

This research can add to the scientific treasures related to regulations found so that it can be used as a reference in future research with different research substances.

Practical benefits

This research can be used as a reference by all health facilities and medical personnel in managing medical records in their respective health facilities. So that all health facilities that still use conventional medical records can get legal protection in the event of a conventional medical record dispute.

RESEARCH METHODS

The type of research used in this study is normative juridical research, which is a process to find a rule of law, legal principles, and legal doctrines to answer the legal issues faced. To find solutions to legal problems in this study.

Types of Approaches

The approaches that are in accordance with this study are the statutory approach and the conceptual approach, in this case, especially regarding the problem of legal vacuum in the

transition of conventional medical records to electronic medical records. Analysis of legal materials uses qualitative analysis, namely discussing legal materials that have been obtained by referring to existing theoretical foundations

Data Sources

The following are some sources of data/legal materials that can be used for research regarding the Analysis of Regulations of the Minister of Health Number 24 of 2022 concerning Medical Records:

1. Minister of Health Regulation Number 269/Menkes/Per/III/2008 concerning Medical Records. Establish administrative and technical standards for the implementation of medical records in health care facilities. Provide guidelines regarding recording, storing, retrieving, and returning medical records.
2. Law Number 44 of 2009 concerning Hospitals: Establishes the obligation of hospitals to maintain patient medical records. Describe procedures for collecting, storing, and managing medical records in hospitals.
3. Minister of Health Regulation Number 24/Menkes/Per/III/2022 concerning Medical Records. Establish administrative and technical standards for the implementation of electronic medical records.

Data Collection Techniques

To conduct research on the Analysis of the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records, in the Management of Conventional Medical Records, data collection techniques that can be used:

1. Interview: This data collection technique is carried out by interviewing health facilities, especially personnel working in the medical record unit. Interviews can be conducted face-to-face or over the phone.
2. Document Study: This data collection technique is carried out by studying documents related to medical record management. Documents that can be studied include related policies and regulations

Data Analysis Techniques.

Data analysis is carried out in a qualitative descriptive way. Qualitative descriptive analysis is to describe data systematically in the form of sentences that are regular, coherent, logical, non-overlapping and selective so as to facilitate data interpretation and understanding of analysis results. These results are carried out comparatively by comparing one legal source with another legal source to analyze the truth test from data sources which will later use grammatical and systematic interpretation methods to find the meaning of laws and regulations and link between articles or laws. So as to get research results that are able to answer this research problem.

Theoretical Foundations and Principles

Theoretical Foundations

The theoretical basis of research on the Analysis of the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records, in the Management of Conventional Medical Records, includes:

1. Health Law

Health law is a branch of law that regulates various aspects related to health, including health protection for the public and health workers. Research can refer to various laws and

regulations related to health law, such as the Health Law, the Health Workers Law, and the Minister of Health Regulation on Health Service Standards.

2. Medical Ethics

Medical ethics is important in research on legal protection of health workers because it involves moral and professional principles that must be held by health workers in carrying out their duties. Research can refer to medical codes of ethics, such as the Indonesian Code of Medical Ethics or the Code of Nursing Ethics.

By considering these various theoretical foundations, the research on the Analysis of the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records, in the Management of Conventional Medical Records can be used as a basis for policy and practice improvements in the future.

Foundation

Research principles are principles used as guidelines in conducting research. Here are some research principles that can be used :

1. Principle of Openness: Research must be conducted openly and transparently so as to allow other researchers to repeat or re-examine the results of the study.
2. Principle of Consistency: Research must be consistent in data collection and data analysis so that the results obtained are reliable.
3. Principle of Validity: Research must ensure that the data obtained are valid and accurate so that the results obtained can be trusted.
4. Principle of Objectivity: Research must be carried out objectively without any bias or personal interest that can affect the results of the research.
5. Ethical Principles: Research must pay attention to the principles of research ethics, such as respecting the privacy and security rights of research subjects, not plagiarism, and obtaining consent from research subjects.

RESULTS AND DISCUSSION

Legal Vacuum Conditions of the Minister of Health Regulation Number 24 of 2022 in terms of conventional medical record management (Tioline, 2023).

In Permenkes No. 269/Menkes/Per/III/2008 concerning Medical Records in Chapter I Article 1, what is meant by medical records is a file containing records and documentation about the patient's identity, examination, treatment, actions and other services that have been provided to patients. In a simple sense, medical records are only records and documents that contain the condition of the patient, but if studied more deeply, medical records have a more complex meaning not only ordinary records, because in these records have been reflected in information about a patient which will be used as a basis in determining further actions in the course of services and other medical actions given to a patient who comes to the hospital. Medical records have a very broad understanding not only recording activities but have an understanding as a system for organizing an installation / activity unit (Cerchione, 2023). While recording activities themselves are only one form of activity listed in the job description on the installation / medical record unit. The process of implementing medical records begins when the patient is admitted to the hospital, followed by recording the patient's medical record data by the doctor or dentist or other health worker who provides direct health services to patients. As long as the patient receives

medical services at the hospital and continues with the management of medical record files which includes the storage and removal of files from storage to serve requests / loans because patients come for treatment, treatment, or for other purposes. Medical records are made by health care institutions so that physical files become the property of the institution (Zaghloul et al., 2023). In other words, health care institutions have media used for documentation (paper, computer, tape, etc.). While the content or information contained in the medical record file belongs to the patient. Information about the patient's identity, diagnosis, disease history, examination history, and medical history must be kept confidential by doctors, dentists, certain health workers, processing officers and leaders of health care facilities.

There is clearly a difference between conventional medical records and electronic medical records, so the evidentiary strength of the two will be different (Cerchione, 2023). In Permenkes Number 269 / MENKES / PER / III / 2008 concerning Medical Records, it has been mentioned about the existence of two types of medical records, namely conventional medical records and electronic medical records. However, regarding this electronic medical record, it is not regulated completely and in detail. In Article 2 of Permenkes Number 269 / MENKES / PER / III / 2008 concerning Medical Records, it has stipulated (1) Medical records must be made in writing, complete and clear or electronically.

(2) The implementation of medical records using electronic information technology is further regulated with separate regulations.

However, during the enactment of the Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 concerning Medical Records. This regulation repeals the Regulation of the Minister of Health of the Republic of Indonesia Number 269/MENKES/PER/III/2008 Year 2008 concerning Medical Records. However, in the Minister of Health Regulation Number 24 of 2022, there are no articles regulating the transfer of conventional medical records to electronic medical records. Where we know that all health facilities still use conventional medical records because the readiness of each health facility to go to electronic medical records varies.

Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 imposes an obligation on all health service facilities (including independent practices organized by health workers and medical personnel) to maintain electronic medical records in accordance with the regulation, no later than December 31, 2023. The Minister of Health through the Director General of Health Services of the Ministry of Health may impose administrative sanctions (written reprimands and/or recommendations for revocation or revocation of accreditation status) on health service facilities that commit violations.

Legal obligations, which are strengthened by legal sanctions, aim to realize legal certainty. However, this legal certainty should also consider legal expediency. This is due to the geographical conditions of the country of Indonesia which is very broad, varied and plural. Therefore, the Ministry of Health must consider the situation and condition of health workers and medical personnel on duty in remote parts of Indonesia, with limited infrastructure facilities (especially internet and computer networks).

The Ministry of Health must provide optimal assistance and proportional facilitation for health workers and medical personnel on duty in health care facilities located in remote parts of the country. The goal is that the law does not only provide legal certainty, but also

provides legal benefits, namely equitable distribution of quality health services to remote parts of the country.

CONCLUSION

Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 regulates electronic medical record electronic systems, electronic medical record implementation activities, security and protection of electronic medical record data. However, there are several legal vacancies in the implementation of Minister of Health Regulation Number 24 of 2022 that there has not been a regulation governing the transfer of conventional medical records to electronic medical records. The legal vacuum of switching conventional medical records to electronic medical records results in unclarity in conventional medical record management so that conventional medical record management is carried out in accordance with the rules of their respective health facilities, such as when transitioning there are those who scan medical records and some do not, in borrowing, storing and so on, this has an impact on the security and confidentiality of conventional medical record management.

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