

Factors Affecting the Performance of Medical Records Officials at Public Health Centers in Jayapura City

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ABSTRACT

Background: The quality of healthcare services in Public Health Centers is closely related to the performance of medical record staff, as medical record management is an essential process in patient care. However, in Jayapura City, this task is carried out by non-medical record healthcare personnel and non-healthcare personnel. This study aims to identify the factors that influence the performance of the medical record staff at the Public Health Centers in Jayapura City.

Methods: This study utilized an observational analytic design with a cross-sectional approach. The population included all medical record staff at the Public Health Centers in Jayapura City, and a total of 47 individuals were selected as the sample using the total sampling technique. Data analysis was conducted using the chi-square test and multiple logistic regression with $\alpha = 0.05$.

Result: The findings of the study revealed that educational level ($p = 0.044$), length of service ($p = 0.027$), knowledge ($p = 0.016$), workload ($p = 0.048$), and supervision ($p = 0.045$) significantly influenced the performance of medical record staff in Public Health Centers. On the other hand, age ($p = 0.259$) and gender ($p = 0.068$) did not significantly affect the performance of medical record staff in the Public Health Centers. The most dominant factor affecting the performance of medical record staff at the Public Health Centers in Jayapura City was workload ($p = 0.010$; OR = 79.081; 95% CI = 2.869 - 2180).

Conclusion: Educational level, length of service, knowledge, workload, and supervision are significantly influenced the performance of medical record staff at Public Health Centers in Jayapura City. Age and gender are not significantly influenced the performance of medical record staff at Public Health Centers in Jayapura City.

Keywords: Performance, Medical Record Officer, Public Health Center

INTRODUCTION

Health is an essential requirement for every individual, as it enables them to carry out their activities effectively¹. To address public health issues across Indonesia, the government has established hospitals, health centers, and health clinics². According to the Republic of Indonesia's Health Workers Law, health efforts should be carried out by competent health workers who continuously improve their expertise through education and training¹. Medical records play a crucial role in healthcare, containing important information about patients and their treatments².

The management of medical records is governed by regulations, which defines medical records as files containing patient identity, examination, treatment, and other services provided². Proper medical record management is vital to ensure accurate

documentation and information retrieval³. Research has shown that issues can arise when medical record officers lack accuracy in storing records and fail to utilize tracers effectively⁴ [4]. Furthermore, the level of education and training of medical record officers can affect the management of medical record documents⁵.

The performance of medical record officers in administering medical records is crucial and should align with their responsibilities⁶. Individual characteristics, including age, gender, and education, have been identified as factors influencing performance, along with organizational and psychological factors⁷. Ensuring the quality and quantity of work achievement is essential for medical record officers in fulfilling their responsibilities. The quality of health services provided at health centers, including the management of medical record files, is closely linked to the performance of officers⁸.

MATERIALS & METHODS

This study is an observational analytic study. According to Nazir (2003), an analytic study is conducted to test hypotheses and provide a deeper interpretation of relationships⁹. This study analyzes the influence of individual characteristics on the performance of medical record staff in the Public Health Centers. Based on its timing, this study is cross-sectional, which means that both the independent and dependent variables are measured simultaneously. This research was conducted at the Public Health Centers in Jayapura City in February 2023. The population of this study were all officers involved in administering medical records at 14 Community Health Centers in Jayapura City, namely 47 people. The sampling technique in this study is total sampling. So, the sample in this study were all medical record officers, totaling 47 people.

STATISTICAL ANALYSIS

Data analysis was done using chi-square and multiple logistic regression with significant level of 5%.

RESULT

1.1 Univariate analysis

Univariate analysis is a data processing process to see the frequency distribution of a variable based on observational data obtained in the field. Univariate analysis in this study was obtained from data on age, gender, education, years of service, knowledge, workload, supervision and performance of medical record officers. The distribution of the variables analyzed is as follows:

Table 3.1: The distribution of age, gender, education, years of service, knowledge, workload, supervision and performance of medical record officers at public health centers in Jayapura City.

Variables	n	%
Age		
≤ 30 years old	18	38.3
> 30 years old	29	61.7
Gender		
Male	20	42.6
Female	27	57.4
The level of education		
Low (≤ SHS)	21	44.7
High (> SHS)	26	55.3
Years of service		
≤ 3 years	22	46.8
> 3 years	25	55.2
Knowledge		
Lack	23	48.9
Good	24	51.1
Workload		
High	24	51.1
Low	23	48.9
Supervision		
lack	30	63.8
Good	17	36.2
Officer performance		
Lack	32	68.1
Good	15	31.9
TOTAL	47	100.0

Source: Primary data, 2023

Table 3.1 provide information about age, gender, education, years of service, knowledge, workload, supervision and performance of medical record officers at public health centers in Jayapura City. Most of the officers were > 30 years old (61.7%), women as many as 27 people (57.4%), 26 people (55.3%) have a higher education level above Senior High School or the

equivalent, 25 people (53.2%) have worked > 3 years, 24 people (51.1%) have good knowledge, have a high workload of 24 people (51.1%), lack of supervision from superiors at the Public Health Centers as many as 30 people (63.8%), and have less performance as many as 32 people (68.1%).

1.2 Bivariate analysis

Bivariate analysis in this study was conducted to determine the relationship between the dependent variable and the independent variable.

1.2.1. The effect of age on the performance of medical record officers

Table 3.2: The Effect of Age on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

Age	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
≤ 30 years old	10	55.6	8	44.4	18	100
> 30 years old	22	75.9	7	24.1	29	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.259$; $RP = 0.73$; $95\% CI (0.462 - 1.162)$

Source: Primary data, 2023

Table 3.2 shows the results of the analysis that out of 18 respondents aged ≤ 30 years, there were 10 people (55.6%) who had poor performance and 8 people (44.4%) who had good performance. Meanwhile, from 29 respondents aged > 30 years, there were 22 people (75.9%) who had poor performance and 7 people (24.1%) who had good performance. The results of the Chi Square test analysis showed that age did not significantly influence the performance of

medical record workers at the Public Health Centers in Jayapura City ($p = 0.259 > \alpha = 0.05$). When viewed from the value of the prevalence ratio, it is obtained $RP = 0.73 < 1$, this indicates that the age of the medical record officer is not a risk factor that can cause the medical record officer to perform less.

1.2.2. The effect of gender on the performance of medical record officers

Table 3.3: The Effect of Gender on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

Gender	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
Male	17	85.0	3	15.0	20	100
Female	15	55.6	12	44.4	27	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.068$; $RP = 1.53$; $95\% CI (1.042 - 2.247)$

Source: Primary data, 2023

Table 3.3 shows the results of the analysis that out of 20 male respondents, there were 17 people (85%) who had poor performance and 3 people (15%) who had good performance. Meanwhile, from 27 respondents who were female, there were 15 people (55.6%) who had poor performance and 12 people (44.4%) who had good performance. The results of the Chi Square test analysis showed that gender did not statistically have a significant effect on the performance of medical record workers at

the Public Health Centers in Jayapura City ($p = 0.068 > \alpha = 0.05$). However, when viewed from the value of the prevalence ratio, it is obtained that $RP = 1.53$ with a 95% CI which contains a value of 1, then this indicates that the sex of the medical record officer is not a risk factor for the poor performance of the officer.

1.2.3. The effect of the level of education on the performance of medical record officers

Table 3.4: The Effect the level of education on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

The level of education	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
Low (\leq SHS)	18	85.7	3	14.3	21	100
High ($>$ SHS)	14	53.8	12	46.2	26	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.044$; $RP = 1.59$; $95\% CI (1.071 - 2.366)$

Source: Primary data, 2023

Table 3.4 shows the results of the analysis that out of 21 respondents who had a low education level up to SMA/SMK/equivalent, there were 18 people (85.7%) who performed less and 3 people (14.3%) who performed well. Meanwhile, of the 26 respondents who had a higher education level above SMA/SMK/equivalent, there were 14 people (53.8%) who performed less and 12 people (46.2%) who performed well. The results of the Chi Square test analysis show that the level of education has a significant effect on the performance of medical record

officers at the Public Health Centers in Jayapura City ($p = 0.044 < \alpha = 0.05$). When viewed from the value of the prevalence ratio, it is obtained $RP = 1.59$, this shows that medical record officers with education levels up to SMA/SMK/equivalent have the opportunity to have less performance by 1.59 times greater than medical record officers with educational levels above SMA/SMK/equivalent.

1.2.4. The effect of the years of service on the performance of medical record officers

Table 3.5: The Effect the years of service on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

The years of service	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
≤ 3 years	19	86.4	3	13.6	22	100
> 3 years	13	52.0	12	48.0	25	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.027$; $RP = 1.66$; $95\% CI (1.100 - 2.507)$

Source: Primary data, 2023

Table 3.5 shows the results of the analysis that out of 22 respondents with a working period of ≤ 3 years, there were 19 people (86.4%) who had poor performance and 3 people (13.6%) who had good performance. While of the 26 respondents with > 3 years of service, there were 13 people (52%) who had poor performance and 12 people (48%) who had good performance. The results of the Chi Square test analysis show that tenure has a significant effect on the performance of

medical record officers at the Public Health Centers in Jayapura City ($p = 0.027 > \alpha = 0.05$). When viewed from the value of the prevalence ratio, it is obtained $RP = 1.66$, this shows that medical record officers with a working period of ≤ 3 years are likely to have less performance by 1.66 times greater than medical record officers with a working period of > 3 years.

1.2.5. The effect of knowledge on the performance of medical record officers

Table 3.6: The Effect knowledge on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

Knowledge	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
Lack	20	87.0	3	13.0	23	100
Good	12	50.0	12	50.0	24	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.016$; $RP = 1.74$; $95\% CI (1.131 - 2.674)$

Source: Primary data, 2023

Table 3.6 shows the results of the analysis that of the 23 respondents with insufficient knowledge, there were 20 people (87%) who had poor performance and 3 people (13%) who had good performance. Meanwhile, from 24 respondents with good knowledge, there were 12 people (50%) who had poor performance and 12 people (50%) who had good performance. The results of the Chi Square test analysis show that knowledge has a significant effect on the performance of medical record officers

at the Public Health Centers in Jayapura City ($p = 0.016 > \alpha = 0.05$). When viewed from the value of the prevalence ratio, it is obtained $RP = 1.74$, this shows that medical record officers with less knowledge are likely to have less performance by 1.74 times greater than medical record officers with good knowledge.

1.2.6. The effect of workload on the performance of medical record officers

Table 3.7: The Effect of workload on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

Workload	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
High	20	83.3	4	16.7	24	100
Low	12	52.2	11	47.8	23	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.048$; $RP = 1.60$; $95\% CI (1.039 - 2.456)$

Source: Primary data, 2023

Table 3.7 shows the results of the analysis that out of 24 respondents with high workload, there were 20 people (83.3%) who had poor performance and 4 people (16.7%) who had good performance. Meanwhile, from 23 respondents with low workload, there were 12 people (52.2%) who had poor performance and 11 people (47.8%) who had good performance. The results of the Chi Square test analysis show that workload has a significant effect on the performance of medical record staff at the

Public Health Centers in Jayapura City ($p = 0.048 > \alpha = 0.05$). When viewed from the value of the prevalence ratio, it is obtained $RP = 1.60$, this shows that medical record officers with a high workload are likely to have less performance by 1.6 times greater than medical record officers with a low workload.

1.2.7. The effect of supervision on the performance of medical record officers

Table 3.8: The Effect Supervision on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

Supervision	Officer Performance				Total	%
	Lack		Good			
	n	%	n	%		
Lack	24	80.0	6	20.0	30	100
Good	8	47.1	9	52.9	17	100
TOTAL	32	68.1	15	31.9	47	100

$p = 0.045$; $RP = 1.70$; $95\% CI (0.996 - 2.903)$

Source: Primary data, 2023

Table 3.8 shows the results of the analysis that of the 30 respondents who received less supervision by superiors at the Public Health Centers, there were 24 people (80%) who had poor performance and 6 people (20%) who had good performance. Meanwhile, of the 17 respondents who received good supervision by superiors at the Public Health Centers, there were 8

people (47.1%) who had poor performance and 9 people (52.9%) who had good performance. The results of the Chi Square test analysis show that supervision has a significant effect on the performance of medical record officers at the Public Health Centers in Jayapura City ($p = 0.045 > \alpha = 0.05$). When viewed from the value of the prevalence ratio, it is obtained $RP = 1.70$,

this shows that medical record officers who receive less supervision at the Public Health Centers have the opportunity to have less performance by 1.7 times greater than medical record officers who receive good supervision.

1.3 Multivariate analysis

Multivariate analysis was carried out to see the influence and magnitude of the influence of the independent variables simultaneously on the dependent variable. The analysis used is multiple logistic regression analysis.

Variables with the results of bivariate analysis that have statistical significance ($p < 0.25$) will be included in the multivariate model. The purpose of this analysis is to find out which independent variables jointly affect the dependent variable and to determine which factors are dominantly influencing the performance of medical record staff at the Public Health Centers in Jayapura City. The results of multiple logistic regression analysis can be seen in Table 3.9.

Table 3.9: Results of Multiple Logistic Regression Analysis with the Stepwise Forward LR Method between Independent Variables on the Performance of Medical Record Officers at Public Health Centers in Jayapura City in 2023

Variables	B	p	OR	95% CI	
Gender	2.928	.049	18.681	1.011	345.263
Years of service	2.907	.031	18.300	1.314	254.897
Knowledge	3.164	.036	23.663	1.222	458.211
Workload	4.370	.010	79.081	2.869	2.180E3
Supervision	2.500	.051	12.177	.992	149.552
Constant	-5.980	.012	.003		

Table 3.9 shows that the results of the analysis of the six variables tested together using the Stepwise Forward LR method multiple logistic regression test with $p < \alpha = 0.05$ obtained that the dominant factor influencing the performance of medical record staff at the Public Health Centers in Jayapura City is type gender, years of service, knowledge and workload. Meanwhile, the supervision variable, although not statistically significant, is still a risk factor for poor employee performance ($OR > 1$). When viewed from the magnitude of the Odds Ratio value, it shows that the most dominant factor influencing the performance of medical record officers at the Public Health Centers in Jayapura City is workload ($p = 0.010$; $OR = 79.081$; $95\% CI = 2.869 - 2180$).

DISCUSSION

1.1 The effect of age on the performance of medical record officers

Age is the span of time from birth to death¹⁰. The results of this study showed that the majority of respondents (61.7%) working as medical record staff at the Public Health Centers in Jayapura City were aged over 30 years. Among respondents

aged ≤ 30 years, a higher proportion had poor performance (55.6%) compared to those with good performance (44.4%). Similarly, among respondents aged over 30 years, a higher proportion had poor performance (75.9%) compared to those with good performance (24.1%).

The results of the chi-square test analysis showed that age did not have a significant effect on the performance of medical record staff at the Public Health Centers in Jayapura City ($p = 0.259$). These findings are consistent with the research conducted by Sukaesih (2008), which indicated that age was not significantly correlated with the performance of medical record staff ($p = 0.075$), meaning that the performance of medical record staff was not influenced by age differences¹¹. Another study conducted by Ramli et al. (2010) also found no relationship between age and individual performance. Therefore, even if someone is young, their individual performance may not necessarily be high, and vice versa¹². Similarly, in a study conducted by Beratha (2013) at the Community Health Center in Gianyar Regency, age was not significantly related to staff performance¹³. Age can affect the physical and psychological

strength of an individual, and at a certain age, an employee's potential for work may change. Senior employees tend to be satisfied with their work because they are more able to adapt to the environment based on their experience¹⁴. Some of the positive qualities of older employees resulting from their work include having specifications, experience, strong work ethics, and commitment to quality. However, older workers are also considered less flexible and resistant to new technology.

There is a belief that productivity declines with age. It is often assumed that a person's skills, certain speed, intelligence, energy, and coordination diminishes over time. This leads to work fatigue and a decrease in intellectual stimulation, which affects performance¹⁵. However, age also influences a person's motivation, workload, and responsibilities in both work and daily life. Employees aged ≤ 30 years generally have relatively less sense of responsibility compared to those aged over 30, even though they have sufficient physical conditions to carry out physical activities¹⁶.

1.2 The effect of gender on the performance of medical record officers

The results of this study showed that the majority of respondents (57.4%) working as medical record staff at the Public Health Centers in Jayapura City were female. Among male respondents, a higher proportion had poor performance (85%) compared to those with good performance (15%). Similarly, among female respondents, a higher proportion had poor performance (55.6%) compared to those with good performance (44.4%). The chi-square test analysis indicated that gender did not have a significant effect on the performance of medical record staff at the Public Health Centers in Jayapura City ($p = 0.068$).

Based on these results, this study is consistent with the findings of Sukaesih (2008), which stated that based on the Spearman's rank correlation test, gender did not have a significant relationship with the

performance of medical record staff ($p = 0.098$), indicating that the performance of medical record staff was not influenced by gender differences¹¹. Sudiar (2013) also stated that there was no relationship between gender and the performance of respondents, as both female and male respondents had similar performance¹⁷. Gender differences do not cause differences in one's performance, but various factors related to gender, such as differences in job assignments, salary, and others, can affect one's performance¹⁸.

Lasut et al. (2017) also stated that gender does not play a role in employee performance¹⁹. This means that there is similarity in terms of quality and quantity in performing and completing tasks for both males and females. There are several indicators to evaluate employee performance based on gender, whether they are the same or different. The role of gender through various systems is usually the same, which makes the roles of male and female employees similar based on their conditions. It is not uncommon to see tasks typically performed by males being carried out by females, and vice versa.

1.3 The effect of the level of education on the performance of medical record officers

The results of this study showed that the majority of respondents (55.3%) working as medical record staff at the Public Health Centers in Jayapura City had a high level of education. However, none of the respondents with a high level of education had a high-level medical record education. Among respondents with a low level of education, a higher proportion had poor performance (85.7%) compared to those with good performance (14.3%). On the other hand, among respondents with a high level of education, some had good performance (46.2%).

The chi-square test analysis indicated that the level of education had a significant effect on the performance of medical record staff at the Public Health Centers in Jayapura City ($p = 0.044$). Based on the

interpreted value of the prevalence ratio, medical record staff with a low level of education were 1.59 times more likely to have poor performance compared to those with a high level of education.

According to the studies conducted by Juliana et al. (2015) and Harahap (2019) cited in Kamelia (2022), there is a partial influence of education level on employee performance²⁰. Education is one of the factors that influence a person's perception because it enables them to more easily accept new technological ideas in line with the development of the times Education is the process of empowering individuals' potential and competence to become quality and useful human beings throughout their lives²¹.

As also mentioned by Lestari in Kamelia (2022), the level of education is an activity of individuals in developing their abilities, attitudes, and behaviors, both for future life through certain organizations or not organized²⁰. With the knowledge acquired through the educational journey taken so far, it can help in achieving organizational goals because education is all planned efforts to influence others, whether individuals, groups, or communities, so that they do what is expected by the education actor²².

1.4 The effect of the years of service on the performance of medical record officers

The length of service of employment in this study refers to the duration of working as medical record staff in the medical record department of the Public Health Centers. The results of this study showed that the majority of respondents (53.2%) working as medical record staff at the Public Health Centers in Jayapura City had work experience of > 3 years. Among respondents with a work experience of ≤ 3 years, a higher proportion had poor performance (86.4%) compared to those with good performance (13.6%). On the other hand, among respondents with a work experience of > 3 years, some had good performance (48%).

The chi-square test analysis indicated that work experience significantly influenced the performance of medical record staff at the Public Health Centers in Jayapura City ($p = 0.027$). Based on the interpreted value of the prevalence ratio, medical record staff with a work experience of ≤ 3 years were 1.66 times more likely to have poor performance compared to those with a work experience of > 3 years.

According to the study by Sriana et al. (2002) cited in Safrizal (2009), the length of work experience of a Public Health Centers employee affects their performance, which is related to their experience in carrying out their work²³. Sriana further mentioned that in the East Java Province, the majority of Public Health Centers employees work for about 6-10 years, and in the West Sumatra Province, employees generally have a work experience of 11-15 years. This aligns with the opinion of Gibson (1995) that length of work experience influences job performance²⁴.

Knowing a person's work experience is important as it can be an indicator of workers' tendencies. For example, when linked to work productivity, the longer a person works, the higher their performance tends to be because they gain more experience in completing assigned tasks²⁵ [25].

1.5 The effect of knowledge on the performance of medical record officers

The results of this study showed that the majority of respondents (51.1%) working as medical record staff at the Public Health Centers in Jayapura City had good knowledge. Among respondents with insufficient knowledge, a higher proportion had poor performance (87%) compared to those with good performance (13%). On the other hand, among respondents with good knowledge, the proportion of those with poor performance (50%) was the same as those with good performance (50%).

The chi-square test analysis indicated that knowledge significantly influenced the performance of medical record staff at the

Public Health Centers in Jayapura City ($p = 0.016$). Based on the interpreted value of the prevalence ratio, medical record staff with insufficient knowledge were 1.74 times more likely to have poor performance compared to those with good knowledge. This study is relevant to the research conducted by Sukaesih (2008), which showed that knowledge is the most dominant variable in its relationship with the performance of medical record staff. This means that the higher the knowledge of medical record staff about their job description, the greater the likelihood of achieving their work performance in medical record management¹¹. This is because organizational performance is determined, among other factors, by the performance of a group of individuals as organizational members who have a sense of responsibility and can be held accountable for their attitudes, behaviors, and all of their actions are influenced by knowledge, skills, abilities, and expectations²⁶. Knowledge and skills can be enhanced through regular training and technical guidance aimed at achieving success in work and overall performance²⁷. Furthermore, the study by Girsang (2005) stated that the knowledge of medical record staff at Adam Malik Hospital in Medan is the most dominant variable influencing patient waiting time, which is an indicator of the medical record unit's service²⁸. The knowledge of staff is an essential component in carrying out their work. The knowledge possessed by an individual is the initial trigger for behavior, including work behavior. The negative impact of insufficient knowledge on a staff member's tasks within an organization significantly affects their work outcomes, meaning that high knowledge can improve work performance. Good knowledge of a job will enable a person to master their field of work²⁹.

1.6 The effect of workload on the performance of medical record officers

The results of this study showed that the majority of respondents (51.1%) working as medical record staff at the Public Health Centers in Jayapura City had a high workload. Among respondents with a high workload, a higher proportion had poor performance (83.3%) compared to those with good performance (16.7%). On the other hand, among respondents with a low workload, a significant proportion had good performance (47.8%).

The chi-square test analysis indicated that the workload significantly influenced the performance of the medical record staff at the Public Health Centers in Jayapura City ($p = 0.048$). Based on the interpreted value of the prevalence ratio, medical record staff with a high workload were 1.6 times more likely to have poor performance compared to those with a low workload.

This finding is relevant to the research conducted by Mahruf (2019), which concluded that there is a significant and positive relationship between workload and employee performance³⁰. This means that when an employee receives a workload that exceeds their capacity, they will be physically, mentally and critically burdened. If the employee receives simultaneously and accumulates work demands that require speed, they will have reduced concentration in carrying out their tasks, which will affect their performance. Excessive workload will cause individuals to experience burnout, ultimately leading to a decline in performance. Additionally, employees who experience excessive workload will not be able to complete their tasks correctly and on time.

Theoretically, the results of this study are also consistent with Mudayana as cited in Santoso (2022), stating that workload emerges from the interaction between task demands, the work environment, co-workers, skills, behavior, and the worker's perceptions³¹. The relationship between workload and performance is related to the increased fatigue of employees in

completing tasks that exceed their physical and mental capabilities, leading to a decrease in work capacity and bodily resilience, which ultimately impacts employee performance³².

1.7 The effect of supervision on the performance of medical record officers

The results of this study showed that the majority of respondents (63.8%) working as medical record staff at the Public Health Centers in Jayapura City received inadequate supervision. Among respondents who received inadequate supervision in the Public Health Centers, a higher proportion had poor performance (80%) compared to those with good performance (20%). On the other hand, among respondents who received good supervision at the Public Health Centers, a significant proportion had good performance (52.9%).

The chi-square test analysis indicated that supervision significantly influenced the performance of medical record staff at the Public Health Centers in Jayapura City ($p = 0.045$). Based on the interpreted value of the prevalence ratio, medical record staff who received inadequate supervision at the Public Health Centers were 1.7 times more likely to have poor performance compared to those who received good supervision. The influence of supervision on employee performance is also supported by the research conducted by Suseno (2013), which showed that supervision is necessary to reduce errors and improve methods that are deemed less effective in order to achieve better performance³³. Therefore, there is a significant impact of supervision on employee performance, as supervision helps to control employee performance.

As stated by Kadarisman (2012), supervision is a managerial activity carried out by an organization to prevent deviations in job implementation³⁴. The occurrence of deviations or errors during work depends on the level of abilities and skills of the employees. Therefore, supervision is crucial to ensure that employee performance meets the standards. In fact, supervision is one of

the keys to achieving organizational performance. Organizational performance is unlikely to be achieved without supervision because humans (performers) inherently have a high self-interest. For example, if someone realizes that their performance is below standard, it is possible that an employee will lower the expected performance standards instead of making an effort to meet them³⁵.

Similarly, according to Mathis and Jackson (2006) as cited in Jufrizen (2016), supervision is the process of monitoring employee performance based on standards to measure performance, ensuring quality in performance appraisal, and providing information that can be used as feedback on achieved results communicated to employees³⁶. This explains that supervision can help organize work to be executed effectively. With supervision, deviations, waste, obstacles, errors, and failures by employees in achieving goals and performing tasks in the Public Health Centers can be prevented at the earliest possible stage.

1.8 The dominant factor that influences the performance of medical record officers

The most dominant factor influencing the performance of medical record staff at the Public Health Centers in Jayapura City in this study is workload ($p = 0.010$; OR = 79.081; 95% CI = 2.869 - 2180). The findings of this study are consistent with the research conducted by Howay (2019) at the Nuni Health Center in Manokwari Regency, which showed that workload is a dominant factor that can affect the performance of Public Health Centers staff¹⁴. The performance of medical record staff at the Public Health Centers in Jayapura City, which is influenced by workload, may be due to the additional responsibilities/coordination tasks outside the primary duties and functions of medical record staff. The majority of medical record staff in the Public Health Centers are also nurses, midwives, and public health workers because there are no personnel with medical

record education in the Public Health Centers in Jayapura City. Therefore, the staff also have to carry out other program activities that indirectly have a high risk and impact on their performance.

In general, the fewer or easier the workload given to an employee, the more productive and satisfying their work will be. However, giving a workload that is too light or easy will not help employees improve. On the other hand, a workload that is too heavy and excessive can cause stress and anxiety for employees, which ultimately leads to errors, accidents, conflicts, health problems, and overall poor performance, thus potentially affecting the functioning of the Public Health Centers services. Therefore, leaders must be able to assign workloads that are suitable for each employee's capabilities.

CONCLUSION

Educational level, length of service, knowledge, workload, and supervision all have a substantial impact on the performance of medical record workers at Public Health Centers in Jayapura City. The performance of medical record workers at Public Health Centers in Jayapura City is unaffected by age or gender.

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