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The Journal of Community Health Management

Journal homepage: <https://www.jchm.in/>



Short Communication

MRO role in organization and management of MRD

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ARTICLE INFO

Article history:

Received 14-10-2023

Accepted 11-11-2023

Available online 09-01-2024

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1. Introduction

Management is or technique by means of which the purposes and objectives of some particular human group are determined, clarified and effectuated managements or method of providing leadership in group action. management creators organization.

When these statements are applied to the medical record department, they mean that the medical record officer must create or structure or organization with in his department in accord with the policies laid down by his superiors. He must also provide the necessary leadership for his personnel. It is his responsibility to direct and unify their work so that the execution of the functions of the department will become a co-operative project. Good management and good leadership are synonymous.

The medical record officer may be said to be the second level of management as he is generally only responsible to the administrator. Some of his responsibilities in carrying out his managerial duties are:¹

1. To make all assignments of responsibility within this department clear and definite
2. To delegate necessary authority. Authority is the power to command or act and flows downward.

Responsibility or accountability for the performance of an act or job always flows upward. The worker derives his authority from his superior and is responsible to his superior for the proper execution of any assignment which many be made

3. To determine that no individual has too many persons reporting to him
4. To determine that no individual has too many or too varied tasks to perform

Lillian Gilbreth, the nationally known management authority, stresses the fact that, the most important question in management is why? She states that "while the questioning approach pursues the how what, when, where and who it must also stop frequently and ask why?. It must ask 'is this really necessary?' for this is the key question which, by throwing light on deep and underlying reasons for action, will often decide whether a method is to be accepted or rejected. And it is a question which involves those human values individual differences and universal likenesses with which all management are vitally, concern".

The responsibility of the medical record officer as on executive is to plan, organize, and control the activities of his department. Too much detail is undesirable because it prevents him from seeing and executing the broader aspects his work. The result of good management is a co-operative and responsive organization where each worker

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has the authority commensurate with his ability, knows his job and what is required of him.² Know to whom to report and when and if a supervisor does not have too many workers reporting to him. Thus as decision making is inseparable related to management we find it is one of the most important functions of the administrative medical record officer.

2. Chart of Organization

A chart of organization may be considered a picture of the organization. It shows at a glance the functions performed in the department and the relationship of each to the others. It shows who is to do the work that is to be done and who directs and supervises those doing the work.

A chart of organization does not, by itself, insure good organization, and neither does it insure good management, but it helps to visualize the entire structure to determine whether the organization has been logically carried out. It crystallizes thinking and brings our important details which might otherwise have been overlooked. It also helps to discover hidden weaknesses, such as confused lines of authority and responsibility duplication of function in efficient allocation of personnel too great a span of control and back of intermediate supervisory levels.

A chart of organization is an administrative but not an end in itself. The first task in the preparation of a chart of organization is to list the main functions of the department; under these main functions are placed those subordinate to the main ones, and each minor function is then placed under the subordinate function to which it is related. A chart may be based entirely on the job titles of the personnel performing the function or the two may be combined on one chart. A chart showing job titles would start with the chief medical record officer, and work down to the medical record officer, and work down to the medical record technicians, and on down to file clerks messengers reception clerks, and any others that may be employed in the medical record department.

A chart of organization should be titled and dated, if comments are necessary for clarification they should be appended. When completed, it should be kept where every one in the department may see it. The Chart of organization thus indicates to the personnel their relative place in the departmental organization and their chances for advancement.

3. Job Analysis

In order to have good personnel relations within a department, the department head must have a complete knowledge of all jobs within the department. Therefore a study of the jobs is necessary to the overall efficient functioning.

A job analysis is a description of the content and modifying factors of a job. Lillian Gilbreth, quoted previously, states that "job analysis is a tool of management which is most effective if it outlines what is to be done, who is to do it and why both the job and method are necessary". She also states that "methods work simply does not have a foundation on which to stand, or build when no decision has been made as to what the objectives are, exactly what the job is and what type of person is to be assigned".

In its simplest form, a job analysis is a ranking and description of the various jobs within a department. If it is concerned with the requirements of each particular job and generally includes the abilities and qualities that a worker should possess to perform the duties of the job in question, the method of performance, and the working conditions if unusual. A job analysis will assist in pointing out the elements unnecessary for successful operation of that job and, in addition, will show how the necessary elements may be more successfully managed. A job is generally thought of as the operation, or series of operations performed by one person. In analyzing the job, therefore each operation must be broken down and studied individually and in relation to other operations.

The job analysis and study notes possible the determination of the job description. A job description is that part of the job analysis which provides the specifications required of the worker based on opinion supported by fact, and required for ideal job performance.

4. Methods Improvement

Methods improvement has very aptly been defined as "organized common sense" and also "finding or better way to do a job". The techniques are actually fact finding and the organization of the data may bring out problems not previously known to exist.

There are several phases of a methods improvement program. The simplest, quickest flow of work must first be established, then the job must be analyzed and simplified if possible, and lastly new procedures must be established and written and put into force applying the new simplified procedures.

4.1. Work flow

Adequate distribution of work and complete utilization of the skills of all workers are essential to good management and should be properly studied. Before initializing such a study, the employees should be informed about it. Humans resist change, but most employees appreciate smoothly flowing methods and will readily accept the new idea if it can be shown that they, individually, will benefit from the change.

It should be brought to their attention that the completed flow chart will point out whether the work is moving along smoothly from one operation to another to the advantage of

the job and the worker, or whether a more efficient method should be worked out. In the medical record department, many streams of work flow in many directions. Some, such as the completion of birth certificates, reach the final stage quickly, while others, such as the completion of the medical record, go from desk to desk and doctor to doctor before they finally reach the file. A study of the flow of the medical record within the department as well as within the hospital may suggest that some step may be combined with another for more rapid completion of the job. It may reveal the fact that defects in the flow of work in the department result from the back of standard methods in moving the work from one desk to another

4.2. *Work simplification*

Simplicity has been defined as the point between too and too little. Efforts to make the organization of a department seem important by adding unnecessary functions and developing complex relationships between the functions make for confusion. By simplifying procedures additional, time may be devoted, to the major functions of the department thus producing a more efficient over all organization. Not only should superfluous work be eliminated, but useful work should be examined to determine whether, or not it contains in necessary details.

A work simplifications program is intended to eliminate waste of time and energy on the part of the workers and also to eliminate works of materials and equipment. Five steps should be observed in a work simplification programme:

1. Choose a job that needs improving
2. Obtain the facts about the job
3. Challenge the facts obtained
 - (a) Are all procedures necessary?
 - (b) Where the job should be done?
 - (c) Who should do the job?
 - (d) How should the job be done?
4. Develop the easiest method
5. Install the improved method

4.3. *Procedure manual*

After the work flow has been definitely established procedures simplified as much as possible for efficient operation, and clearly determined procedures and standards of performance decided upon, a procedure manual should be compiled. A procedure manual is a guide for the performance of specific jobs within the department. Each individual worker should have a copy of the procedure to be followed in the performance of his own particular job and any other jobs.

A procedure manual is valuable as a statement of policies; as a guide to established methods performing a job; as an outline of the procedures rules; and regulations for the job;

as an aid in training new personnel for the job; as a means of self evaluation for the worker; and as an aid in achieving uniformity in operations, its chief use is to instruct.

In compiling a procedure manual for the medical record department, the policies of the hospital that are to guide this department must first be ascertained and put into writing. A policy is a carefully formulated guide to action. It should therefore be specific, clear, comprehensive, practical and above all, flexible.

4.4. *Budgets*

Budgets are formal program based on past experience adjusted to predict future operations and aimed at achieving desired results. Thus forecasting is an important phase of budgeting. Because the medical record office is responsible for providing adequate and efficient medical record services. He should be accepted a part of the management team and charged with the budget covering the case of his department. Each administrative medical record officer must accept the development of the budget for his department as part of the management function.

5. **Location of the Department**

While architectural plans of hospitals vary greatly because of their age size and type, planners generally concede that great effort should be made to place medical record department where it will be convenient for the greatest number of physicians. The efficiency of the department depends upon the close and continued co-operation of the physicians. Being a nerve center which radiates to all parts of the hospital, the medical record department generally should be located in the administrative section. While an excellent location in near the doctor's entrance, in the small hospital, if generally makes no difference in the large hospital.

At the same time, consideration should be given to the amount of work and the variety of functions to be performed, as well as to the number of persons necessary to carry on the work, since that will to a certain extent determine the floor space necessary. Whether centralized or de centralized arrangement of filing is to be used must also be determined. If there is an out patient department, the first is preferable.

5.1. *Colour in the department*

The scientific selection and harmonious blending of colors has long been recognized for its decorative and therapeutic value in hospitals, in areas. Where patients are treated and where visitors are frequent. The use of colour in the medical record department has not been emphasized until recently.

5.2. Lighting

Lighting becomes a very important factor many department where there is continuous close work. The care must be exercised in the offices. So that adequate lighting will be provided for each work area.

5.3. Layout

Space requirements and the arrangement of the equipment, such as desks, files etc., within the space allocated to the department are of major significance. Adequate space should be provided and that space properly utilized, since too much or especially too litter space brings about inefficiencies. The floor space is determined by the number of desks, files, and other equipment necessary, the number of workers governs the equipment required, and the number of patients discharged and the amount of research being done by the medical staff determines the number of workers needed.

A table should be provided in a special room for the use of doctors completing medical records and for those doing research. It should be large enough to accommodate two or more physicians comfortably with an allowance for the records with which they will be working. The lighting at his table should be adequate. If provision is made so that they may relax while working, it will serve to encourage them to do their work monthly. The table should be located at the end or side of the room so that the regular in-and-out traffic of the workers will not disturb them.

6. Personnel and Equipment

The number of workers govern the amount and kind of equipment in the department. The number of workers will vary with the functions table formed. The basic equipment and supplies needed in a small medical record department are as follows. One desk and desk chair per worker, the former equipped with a protective top, one bate-model type writer, type writer desk, and posture, chair per typist, a work table with ample working area for physicians and interns; vertical files for patients. Index, files for disease, operation, and physicians indexes, which may be of visible or visible or vertical style and in either case all drawers or trays should be ball-bearing, file drawers for incomplete records of interns and doctors a sufficient number of desk phones adequately placed to care for the incoming and outgoing caller of the department; a desk calendar for each desk; a numbering machine, the number of movements to depend upon the number of cards, folders, etc., given the same number rubber stamps and rubber stamp pads as needed, staplers, paper punches, desk sporges; ball point pens in adequate quantify so that a sufficient supply is always available for the doctors; rubbers or pencil sharpener, and a letter opener.

In addition the latest issues and editions of the following should be available in every medical record department

International classification of Diseases, 2 vol. (world Health organization) Manual for medical Record officers, Medical Terminology made easy, Standard Nomenclature of Diseases and operations.

6.1. File room

There should be rooms in medical Record Department even in small hospitals, to allocate sufficient space for the filling of all medical records in the medical record department itself. Even in a new hospital is being built and it would be possible to allow sufficient space in the medical record department proper, greater efficiency of all the workers will be attained if the filing area adjoins or is below the section used for work and study.

Sufficient space being allowed for expansion; ball-bearing

6.2. Quality of forms

Cards and all permanent record forms should be of good quality and possess the properties that make them resistant to frequent handling, adaptable to in & erasure, and keep them from becoming brittle with age. Bond paper is generally used for the forms in the medical records, and it is advisable (7) use. A good quality. Size 8 $\frac{1}{2}$ 11 inches is recommended because it is easily assembled when the record is being prepared for final filing. In selecting the quality of paper it must be kept in mind that the weight of the paper is not on I indication of its quality.

7. Conclusion

Efficient organization and management of the medical record department are important factors. The hospital exists for the benefit of the patient, and its medical department is responsible for the completeness, accuracy, safe keeping, and availability of the medical record at all times. It can discharge these responsibilities only when it is properly organized and well managed-Good organization and management are facilitated by a chart of organization, proper analysis of each job, a study of the work flow, with simplification when necessary, adoption of necessary internal controls, and adequate written procedures for each individual job and for the medical record department as a whole.

The medical record officer must not only Grate and supervise the organization, but he must also provide the leadership necessary so that all functions will be properly executed. Co-operative and responsive personnel are not important for efficient management.

8. Source of Funding

None.

9. Conflict of Interest

None.

Author biography

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Cite this article: Roy EJ. MRO role in organization and management of MRD. *J Community Health Manag* 2023;10(4):166-170.