A Study of Records Management Practice at Health Facilities in Upper Denkyira West District of Ghana

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Abstract
It is essential that information is captured, managed and preserved in an organised system that maintains its integrity and authenticity. This study examined records management practice at health facilities in Upper Denkyira West District of Ghana. The study used the mixed research method. That is, both quantitative and qualitative methods were used for the study. The main research instruments used in the study were questionnaire and observation. Stratified random sampling was used to select 40 health staff and purposive sampling technique was used to select 20 staff at the records management unit and the total sample size was 60. The study revealed that improper records management significantly affected responsive, effective and quality health care services. Fifty percent of the respondents said that improper record management practice delays time, 25% said it affects quality of medical treatment, 8.3% said improper record keeping leads to divulging of confidential medical report. All respondents agreed that proper records management leads to easy retrieval and minimise patients’ waiting time at the hospital and promote continuity and quality health care delivery. The study recommended introduction of electronic records management practice and the need for engagement of professionally and competently qualified health information personnel and biostatisticians for all health facilities.

Keywords: Recording keeping, records management, health facility, health information,

1.0 Introduction
Record management practice has always been an organisation’s fundamental assets. Lacking it, the modern organisation basically could not operate very effectively and efficiently. More and more, records management practice is being seen as a critical business practice which facilitates organisations to establish and validate their business dealings and connected actions. Every institution is caught up in the making of records in its processes. Therefore, records management practice is one of the by products of institutional processes. Collectively with the usually known organisational, past and archival purpose, organisations keep records to realise lawful needs for their operations and protect the rights of stakeholders.

All countries have records laws that institute the call for effective records management, provide for the authority to dispose of records, and set up a structure for records management in the state. Even though not all records are uniformly essential, they are all records that must be authentically managed in accordance with state law. The prime undertaking of records management is to assist workforce administer the records very well. That involves helping employees to be acquainted with how to systematize materials so that those who require them not only the employees can locate them and to identify which records are of the essence and helpful to use.

Document management, which has gained trustworthiness as the dependable way of managing records and documents within organisations worldwide, has suffered a growing challenge in Ghana and many developing countries due to the nonexistence of effectual systems for managing data by both government and private institutions. Although International Standard for the management of business records (ISO 15489) stresses the need for superior records management as an efficient means for countries and organisations to fulfil their obligations and meet expectations of their stakeholders, this prerequisite has suffered a major hostile response in Ghana.

Poor records management has created severe impediments in numerous aspects of both public and private sectors. This has unhelpfully affected rapid payments and service practices, revamping of government functions and organisational structures, fortifying of financial management and the national legal and regulatory structure. In the absence of a custom of records management, monitoring and evaluation, quality control, and authentication cannot proceed as an impeccable record offers the foundation for all these, which also stimulate the rule of law and accountability. This has resulted in the loss of very important information at both the organisational and national levels, negatively affecting the national collective memory which is crucial in ensuring sustainable economic development.

Health facilities deal with the life and health of their patients. Quality medical care relies on well-trained doctors and nurses and on high-quality facilities and equipment. Quality medical care also relies on good record keeping. Without accurate, comprehensive up-to-date and accessible patient case notes, medical personnel may not offer the best treatment or may in fact misdiagnose a condition, which can have serious
consequences. Associated records, such as X-rays, specimens, drug records and patient registers, must also be well cared for if the patient is to be protected. Good records care also ensures the hospital’s administration runs smoothly: unneeded records are transferred or destroyed regularly; keeping storage areas clear and accessible; and key records can be found quickly, saving time and resources. Records also provide evidence of the hospital’s accountability for its actions and they form a key source of data for medical research, statistical reports and health information systems.

Patients’ records are needed every day to record information about the patients’ personal particulars, prescriptions and diagnosis for future reference to follow-up patients. The information recorded is ultimately used to substantiate the patients’ health record during present and future consultations. The places at which the records are retrieved and served for this purpose determine the patient waiting time for the services.

Proper filing of patient’s medical records facilitates effortless retrieval and ensures reduction patient’s waiting time at the hospital and ensures continuity of care. It is therefore, very important, that medical records are always kept in the interest of both the clinician and the patient. The medical folder must always be in the safekeeping of the health facility whiles the patient enjoys the right of information. Studies in other developing countries have observed their record keeping systems to be inadequate with about half (52.2%) of the records retrievable within one hour (Aziz & Rao, 2002), and a number the records were badly designed and there is use of multiple patient health records by patients (Kerry, 2006).

1.1 The Statement of Problem

An effective management of hospital records is a critical factor in providing capacity for hospitals’ efficiency, accountability, transparency, information security and indeed good governance. Currently, findings indicate that in Ghana, there are inadequate records management practice in most institutions including the health sector simply because many existing record keeping systems of some hospitals were found not designed to collect information on some diseases (Danquah, appah, Djan, Ofori, Essegbey & Opoku, 1997).

As a result, health workers more often than not end up not rendering certain services because the health history of the patient is not contained in medical files. This is owing to the fact that, if the health personnel continue treating patients exclusive of sufficient information about the patients’ health conditions the individuals could end up rendering poor health care that may be unsafe to patients’ health. For this reason this study examines records management practice at health facilities in Upper Denkyira West District of Ghana to contribute towards bridging the research gap identified in the study of records management practice in health facilities with a view to suggesting effective and efficient ways of meeting this challenge as few research has been done.

1.2 Objectives of the Study

The main objective of the study is to examine records management practice at health facilities in Upper Denkyira West District of Ghana.

The specific objectives are to:

1. To ascertain the importance of records management practice to health staff in the district.
2. To identify the state of records management practice at health facilities in district.
3. To assess how record management affects the quality of health service delivery at the various health facilities.
4. To assess the availability of capacity for electronic records management in terms of human resources in the various health.
5. To offer recommendations from the findings of the study.

1.3 Research Questions

1. What are the importance of records management practice to health staff in the district?
2. What is the state of records management practice at health facilities in the district?
3. How does record management affect the quality of health service delivery at the various health facilities?
4. Is there the availability of capacity for electronic records management in terms of human resources at the various health facilities in the district?

1.4 Significance of the Study

This research will assist the Ministry of Health and its facilities in revealing, identifying and recommending the required modern record management practice system which will enable the health facilities to render quality health care service. The findings and recommendations of this study may be used by health facilities to advance the health services to implementing an effective records management practice.
1.5 Scope and Limitation of the Study
The research was limited to five public health facilities in the Upper Denkyira West District and the study only focused on records management practice of pertaining to the various selected health facilities and further considers measures to consolidate efficient and reliable record management practice.

2.0 Literature review
2.1 What is record Management Practice?
The International Organisation for Standardization describes a record as “information created, received and maintained as evidence by an organization or person in the transaction of business, or in the pursuance of legal obligations, regardless of media. Such evidence comprises things such as tax returns, educational certification, birth certificates among others. Records management is thus, “the professional practice or discipline of controlling and governing what are considered to be the most important records of an organisation from the time such records are conceived through to their eventual disposal”. This work includes identifying, classifying, prioritizing, storing, securing, archiving, preserving, retrieving, tracking and destroying of records” (ARMA, 2013).

Kennedy and Schauder (1998:8) define records management as “an organisational function of managing records to meet operational business needs, accountability requirements and community expectations”. According Kemoni and Ngulube (2008:297), records management is defined as the unit of the organisation assigned with the function of managing records in order to ensure that the organisation is able to comply with business operational needs, meet community needs and properly account to the citizens.

On the other hand, Place and Hyslop (1982:4) view records management as a “process of controlling organisational information from creation through to its final disposition”. The driving force of all the above definitions is that records management operate records from formation to discarding. The records should still be fashioned to sustain and fully record all business, legal, fiscal, social and historical requirements.

Records management refers to the management or control of records in different formats, which are hard-copy files, correspondence, disks, maps, memoranda, microfilm, papers, photographs, recordings, reports and tapes. This ensures that records are easily accessible, retrievable and properly classified. Webster, Hare and Julie (1999:285) cite the definition of records management from Ricks and Gow (1988:20) as “the systematic control of recorded information from creation to final disposal”.

Records management is the systematic control of an organisation's records, throughout their life cycle, in order to meet operational business needs, statutory and fiscal requirements, and community expectations. Effective management of corporate information allows fast, accurate and reliable access to records, ensuring the timely destruction of redundant information and the identification and protection of vital and historically important records (National Archives of Scotland).

2.2 Importance of Record Management Practice
Information is every organisation's most fundamental and necessary advantage, and in familiar with any other business asset, recorded information demands effective management. Records management ensures information can be accessed easily, can be destroyed routinely when no longer needed, and enables organisations not only to function on a day to day basis, but also to fulfil legal and financial requirements. The safeguarding of the records of government for instance ensures it can be held accountable for its actions, that society can trace the evolution of policy in historical terms, and allows access to an important resource for future decision making.

Organisations are also producing increasingly large amounts of information and consequently greater volumes of records, in both paper and electronic form. It is essential that information is captured, managed and preserved in an organised system that maintains its integrity and authenticity. Records management facilitates control over the volume of records produced through the use of disposal schedules, which detail the time period for which different types of record should be retained by an organisation (The National Archives of Scotland).

In effect, medical record of a patient is the clinical representation of the patient that is created over a stage of moment by various clinicians with the consent, trust, privacy and confidence of the patient. It enables continuity of care and again, overtime, it becomes a comprehensive, clinical database from which various and salient clinical information is gathered through research. Moreover medical records serve many functions but their primary purpose is to support patient care (Edwin, 2008), and in almost all public health facilities in Ghana, they are kept in folders. Structuring the record can bring direct benefits to patients by improving patient outcomes and doctors’ performance. On the side of patients, the records function as medical identification (Verhey, 2003).

Bhana (2008:7) states that record keeping is an enabler since, without it, things like auditing and financial management will not be possible. Records can be used to support business activities, decision-making and accountability. Proper records management assists the organisation in preserving well-organised records in their business. This is due to the fact that well-organised records:
enable an organisation to find the right information easily and comprehensively;
• enable the organisation to perform its functions successfully and efficiently and in an accountable manner;
• support the business, legal and accountability requirements of the organisation;
• ensure the conduct of business in an orderly, efficient and accountable manner;
• ensure the consistent delivery of services;
• provide continuity in service delivery when staff leave;
• support and document policy formation and administrative decision-making;
• provide continuity in the event of a disaster;
• protect the interests of the organisation and the rights of employees, clients and present and future stakeholders;
• support and document the organisation’s activities, development and achievements;
• provide evidence of business in the context of cultural activity and contribute to the cultural identity and collective memory of the nation (National Archives and Records Service of South Africa 2007:1).

2.3 The principles of good records management
The guiding principle of records management is to guarantee that information is available when and where it is required, in an ordered and well-organized manner, and in a well maintained environment. According to The National Archives of Scotland, organisations must ensure that their records are:
Authentic-It must be probable to establish that records are what they claim to be and who produced them, by keeping a record of their management in the course of time. Where information is soon added to an existing document within a record, the added information must be signed and dated. With electronic records, changes and additions must be specific through audit trails.
Accurate -Records must accurately reflect the transactions that they document.
Accessible - Records must be readily available when needed.
Complete - Records must be sufficient in content, context and structure to reconstruct the relevant activities and transactions that they document.
Comprehensive - Records must document the complete range of an organisation's business.
Compliant -Records must comply with any record keeping requirements resulting from legislation, audit rules and other relevant regulations.
Effective - Records must be maintained for specific purposes and the information contained in them must meet those purposes. Records will be identified and linked to the business process to which they are related.
Secure -Records must be securely maintained to prevent unauthorised access, alteration, damage or removal. They must be stored in a secure environment, the degree of security reflecting the sensitivity and importance of the contents. Where records are migrated across changes in technology, the evidence preserved must remain authentic and accurate.

2.4 Protective measures for patients’ records privacy
Patient privacy is protected in the Ghana Health Service Patients Charter points 7 and 8, as stated below:
The patient has the right to privacy during consultation, examination and treatment. In cases where it is necessary to use the patient or his/her case notes for teaching and conferences, the consent of the patient must be sought.
The patient is entitled to confidentiality of information obtained about him or her and such information shall not be disclosed to a third party without his/her consent or the person entitled to act on his/her behalf except where such information is required by law or is in the public interest.
As a Charter with rights backed by the Constitution of the Republic of Ghana and other International Human Rights Instruments that Ghana has ratified, the Charter obligates the Ghana Health Service to ensure that practitioners respect the rights enumerated in the Charter. Failure to respect the Charter can be interpreted as a failure in our duty of care. This is buttressed by the fact that article 18(2) of the Constitution provides that ’No person shall be subjected to interference with the privacy of his home, property, correspondence or communication except in accordance with the law.’
Again, article 21(f) of the Constitution of the Republic of Ghana guarantees the right to information within the confines of the law. The GHS Patients’ Charter also guarantees the right to full disclosure stating that “The patient is entitled to full information on his/her condition and management and the possible risks involved except in emergency situations when the patient is unable to make a decision and the need for treatment is urgent.”

2.5 Application of Information Technology in record management
The introduction of IT resources, such as computer-based records, clinical information systems and telemmedicine
can help to improve the quality of public service. It can also minimise costs and ensure easy access to health care services (Davidson 2000:196 citing the US Office of Technology Assessment 1995). It is only a small number of organisations that changed to a completely paperless business by reengineering their business processes through the implementation of electronic business operation. This is done by imaging and cataloguing all paper records and managing them using a corporate database. Paperless dealing is about removing paper-based practice and introducing an electronic business practice environment which is effective and efficient.

However, several confrontations may be encountered in introducing the new technology. The introduction of the new technology might create some instruction challenges. Workers might be terrified of the innovative changes and this should be taken into contemplation for the reason that, typically, learning the latest operational ways can be hard-hitting. Staff should be trained on how to use the system and how they are going to benefit from the new system (Johnson and Bowen 2005: 135-136). Benfell (2002:94) explained some of the IT challenges that should be prevented in electronic records management, such as unintentional destruction/alteration by users or administrators, unauthorised retrieval and saving in other personal repositories like PC hardware or e-mails. IT is a good tool that can be utilised in smoothening access to records and information.

3.0 Methodology
The study used the mixed research method. That is, both quantitative and qualitative methods were used for the study. The mixed method improved the quality of the research by minimising biases.

3.1 Research Population
The study population was the staff at the various records management units and all the health professionals at the five selected public health facilities in the district.

3.2 Sample Size
The sample was drawn from both the records management unit and health staff in the five selected public health facilities that administer the records and use records for statistics every day. Four respondents from each records management unit and 8 health staff each from the five health facilities. The sample size was 60.

3.3 Sampling Technique
The study used both probability and non probability sampling methods for the study. Stratified random sampling was used to select 40 health staff and purposive sampling technique was used to select 20 staff at the records management unit. Purposive sampling assists to identify and involve key participants out of the entire population who have better knowledge, understanding and information about the subject being studied.

3.4 Research Instrument
The main research instruments used in the study were questionnaire and observation.

4.0 Results and Discussion
4.1 Socio-demographic Characteristics of the Respondents
The socio-demographic characteristics of the respondents in this study are presented in this section. Table 1 depicts the gender distribution of the respondents. More than half of the respondents were females (70%). Even though the proportion of female to male respondents is 60 percent to 40 percent, one expects this disparity to even be wider at hospital because it is perceived that health sector is dominated by females.

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>18</td>
<td>30</td>
</tr>
<tr>
<td>Female</td>
<td>42</td>
<td>70</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.1.1 Age of respondents
Table 2 reveals that most (75%) of the respondents are between the ages of 21 and 40 which is the youthful age in the life of humankind. The lower percentage (25%) of respondents is above age 40. These facilities are blessed with youthful health staff.
Table 2: Age of Respondents

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>21-30</td>
<td>30</td>
<td>50</td>
</tr>
<tr>
<td>31-40</td>
<td>15</td>
<td>25</td>
</tr>
<tr>
<td>41-50</td>
<td>10</td>
<td>16.7</td>
</tr>
<tr>
<td>51-60</td>
<td>5</td>
<td>8.3</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.1.2 Educational Level of Respondents

As indicated in Table 3, out of the total of 60 who responded to the questionnaire, 43.3% had certificate, 26.7% had Diploma, 20% had Bachelor’s degree education and 10% of the respondents had other professional qualifications.

Table 3: Educational Level of Respondents

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certificate</td>
<td>26</td>
<td>43.3</td>
</tr>
<tr>
<td>Diploma</td>
<td>16</td>
<td>26.7</td>
</tr>
<tr>
<td>1st Degree</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td>Others</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.1.3 Marital Status of Respondents

As indicated in Table 4, out of the total of 60 who responded to the questionnaire, 40 percent of the respondents are single, 53 percent is married and 4% percent divorced.

Table 4: Marital Status of Respondents

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>24</td>
<td>40</td>
</tr>
<tr>
<td>Married</td>
<td>32</td>
<td>53</td>
</tr>
<tr>
<td>divorced</td>
<td>4</td>
<td>6.7</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.2 Importance of Record Management Practice

This item aimed at establishing the importance of record management among the respondents in the selected facilities. The question involved a general rating of the importance of record management. Health records provide numerous functions but their most important rationale is to carry patient care and treatment. From Table 5, hundred percent of the respondents said health management practice is very important if quality health care is to be offered in the country.

Table 5: Importance of record management

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very essential</td>
<td>60</td>
<td>100</td>
</tr>
<tr>
<td>Essential</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Not essential</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.2.1 State of Records Management Practice

This item aimed at establishing the current state of records management practice in their health facilities. The question involved a general rating of the state of records and the causes of the current state whether Excellent, good, Average or poor.

As shown in Table 6, out of all 60 respondents, 10% responded that the state of records management in their institutions was very good, 66% stated that it was an average, 23.3% stated poor and none of the respondents rated their records management practice as excellent.
Table 6: State of record keeping

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Good</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Average</td>
<td>40</td>
<td>66.7</td>
</tr>
<tr>
<td>Poor</td>
<td>14</td>
<td>23.3</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.2.2 Causes of the current state of record management practice

Respondents were also requested to give their opinion about the cause of each state of records keeping after they had chosen excellent, good, average and poor. The sum up of the most stated causes are protracted retrievals, lack of qualified staff in record keeping, poor record management practice, loss of folders, lack of records space, less suitably designated staff, lack of capacity building. The leading problem is the lack of sufficient professional staff to manage health records. In a largely situations, the running of this key role is left completely in the hands of non professionals who lack indispensable training and orientation in records management practice.

4.2.3 Record management practice

Respondents were also requested to give sate how records are kept in terms of manually keeping, electronic or both in their various health facilities. From Table 7, health and medical records are mostly kept manually with inadequate storage space and manpower to ensure good record management practice. Out of the hundred respondents, 86% stated manually kept papers and 13.3% said both.

Table 7: Record management practice

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manually only</td>
<td>52</td>
<td>86.7</td>
</tr>
<tr>
<td>Electronic only</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Both</td>
<td>8</td>
<td>13.3</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.2.4 Effect of improper record management

The researcher also wanted to respondents’ opinion on effect of improper record management on health services delivery. From Table 8, out of all 60 respondents, 30 (50%) said it delays time, 15 (25%) said it affect quality medical treatment, 5 (8.3) said improper record keeping leads to divulging of confidential medical report and 10 (16.7%) stated other effects.

Table 8: State of improper record management practice

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time wasting</td>
<td>30</td>
<td>50</td>
</tr>
<tr>
<td>Affect medical treatment</td>
<td>15</td>
<td>25</td>
</tr>
<tr>
<td>Divulging of confidential report</td>
<td>5</td>
<td>8.3</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>16.7</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.2.5 Effect of proper management practice

All the respondents, 100% stated that proper records management leads to easy retrieval and minimise patients’ waiting time at the hospital and promote continuity and quality health care delivery.

4.4.6 Cases of missing and double issuing of patients’ folders

Attendance to health facilities progresses with time, the degree of health and medical records becomes an immense test to health. The researcher asked the respondents on frequency rate at which folders get missing at the from their various health facilities. From Table 9, respondents were requested to rate the frequency at which folders get missing ranging from ‘regularly to never’. Out of all respondents, 58 (96.1%) stated ‘seldom’ and 2 representing 3.3% said ‘often.’
Table 9: Frequency rate for folders missing and double issuing of folders

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regularly</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Often</td>
<td>2</td>
<td>3.3</td>
</tr>
<tr>
<td>Seldom</td>
<td>58</td>
<td>96.7</td>
</tr>
<tr>
<td>Never</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.4.7 Records management capacity training to records management staff

Providing capacity building and training to records management staff is very significant in ensuring proper records management practice. Respondents were also asked if records management training, skills and capacity building are offered to records management staff at their various health facilities. Table 10 shows that 15% respondents stated that formal records management training was offered to records management staff in their in health facilities and 85% stated that no formal records management training was offered to records management staff in their institutions.

Table 10: Records management capacity training to staff

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>51</td>
<td>85</td>
</tr>
<tr>
<td>No</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

4.4.8 Management support for administration of record management

The running of health and medical records always cause gargantuan test to most health institutions in Ghana particularly in the public health facilities in spite of its’ prospects to assist appreciably to quality health care delivery. The research also wanted to establish the extent of management support for records running in the various health facilities. Table 11 indicates that from all respondents, 57 (95%) stated that management seriously support for records administration in their various health facilities and 5% said management does not.

Table 11: Management support

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>57</td>
<td>95</td>
</tr>
<tr>
<td>Female</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

The entire respondents stated that the Ministry of Health is upgrading the District Health Information Management System (DHIMS II). DHIMS II provides terrific prospect to tackle the persistent hindrances of the health system by improving ease of access judicious and comprehensive data on health service delivery and other health indicators to promote reliable assessment building at all levels of the healthcare delivery system.

4.4.9 The use of electronic records management

Respondents asked whether electronic record keeping and management practice must be implemented now to help foster and facilitate quality health care delivery services in their various health facilities. From Table 12, all the respondents, 100 % totally agreed and called on the authorities to shift from manual record keeping to electronic record keeping.

Table 12: Application of electronic record keeping

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>60</td>
<td>100</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey, 2013

5.0 Conclusion

To conclude, health facilities have not engaged records management practice critically enough even though patients’ records are needed for effective decision making and providing quality health care. Patients’ health records are mainly kept manually with insufficient storage space and personnel to guarantee good record management practice.
Recommendations

- ICT or electronic records management practice is needed and the need to move away from the usual manual record management practice to ensure easy and fast access to storage, retrieval and security of patients’ records.
- To advance records management practice, there is the need for engagement of professionally and competently qualified health information personnel and biostatisticians as for all health facilities.
- The health facilities should provide their records management staff with training, courses and workshops to cover the capacity of professional management of digital or electronic records.
- The privacy and confidentiality of patients’ health records must be fully promoted respected by all.
- The right of patient to full information on his or her condition and management be ensured as the constitution of Ghana guarantees Patients’ right to full disclosure of their records.

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