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Research Article

Factors Affecting User Satisfaction and Benefits of SIMRS at the Regional General Hospital Beriman

Lis Indrayati, Irwandy, Noer Bahry Noor, Fridawaty Rivai, Lalu Muhammad Saleh, Ansariadi

Master of Hospital Management Study Program, Faculty of Public Health, Hasanuddin University, Indonesia, email:
lisindrayatibalikpapan@gmail.com

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Abstract: The application of the Hospital Management Information System (SIMRS) is very important to achieve quality health services. This study aims to determine the factors that affect the acceptance of SIMRS implementation. The research was conducted using the Human, Organization, Technology - Fit (HOT-Fit) method. This research is a quantitative study using an analytic survey design with a cross sectional study approach. The research was conducted at Regional General Hospital (RSUD) Beriman Balikpapan from March to April 2021 with 145 respondents who were SIMRS users. Data analysis was performed using path analysis. The results showed that the system quality variable had no effect on user satisfaction with a significance value of 0.844 (p> 0.05). There is a variable effect of information quality on user satisfaction with a significance value of 0.000 (p <0.05). There is a variable effect of service quality on user satisfaction with a significance value of 0.000 (p <0.05). There is an effect of user satisfaction on benefits with a significance value of 0.033 (p <0.05). This study shows that there is an effect of information quality and service quality on user satisfaction, while system quality has no significant effect on user satisfaction. For this reason, recommendations are needed to make system improvements, especially related to existing functions in the system, improvements to data accuracy and compatibility between system functions and the needs of system users.

Keywords: user satisfaction, benefits, SIMRS

1. Introduction

The existence of Information Technology (IT) is an important and needed asset for hospitals. One of the uses of information technology in hospitals is the Hospital Management Information System (SIMRS). SIMRS is a very important factor in the success of hospitals in achieving their goals because SIMRS can provide opportunities to gain competitive advantage and offer equipment to increase health service productivity and provide added value in the future (Milla, 2018).

Hospital Management Information System (SIMRS) is a communication information technology system that processes and integrates the entire flow of hospital service processes in the form of a network of coordination, reporting and administrative procedures to obtain precise and accurate information, and is part of the Health Information System. Article 2 of the Minister of Health Regulation No. 82 of 2013 explains that the SIMRS arrangement aims to improve efficiency, effectiveness, professionalism, performance, as well as access and hospital services. Article 3 states that every hospital is obliged to organize SIMRS. Implementation of SIMRS can use applications with open source code provided by the Ministry of Health or use applications made by hospitals.

Hospital management information system is a system capable of integrating and communicating the flow of information both inside and outside the hospital. This information system includes: electronic medical record system, laboratory information system, radiology information system (medical imaging), pharmacy information system, and nursing information system. This system also has two main functions, namely for the purposes of patient data management and processing. From the management side, this system has a role in managing financial, material and technical data, personnel systems, payments (bills) to patients, and strategic planning. From the patient side, it functions to manage incoming and outgoing patient data and manage patient medical data which includes treatment, diagnosis, and therapy (Diantono & Winarno, 2018; Riska et al., 2018). Hospital Information System can also be defined as an integrated information system that supports various information requirements of clinical services and hospital management (Kuo et al., 2018). Information systems are widely used in a variety of health care settings and have improved the quality, efficiency, and effectiveness of healthcare services and overall patient satisfaction (Rangraz Jeddi et al., 2020; Motevali Haghighi & Torabi, 2018). Information management through SIMRS is one of the keys to success in achieving the hospital's vision and mission. The presence of SIMRS is considered a key resource that has strategic value to be able to manage information effectively and efficiently for the achievement of hospital goals (Milla, 2018)

Evaluation is a real effort to find out the actual condition of an information system implementation. With this evaluation, the achievements of the implementation of an information system can be known and further actions can be planned to improve the performance of its implementation (Murnita et al., 2016). Evaluation of an information system is a real effort to find out the actual condition of an information system implementation. Information system evaluation is an activity to measure or explore all attributes of the system (in planning, development, implementation or operation). MIS evaluation is defining how well MIS can operate in organizations that implement it to improve future performance. The evaluation to be carried out is related to the acceptance of the system by end users (Diantono & Winarno, 2018). There are several model developments used as methods to measure or evaluate the application of information systems used by an organization or public agency such as: Theory of Reasoned Action (TRA), Theory of Planned Behavior (TPB), Technology of Acceptance Model (TAM), Task Technology Fit (TTF), End User Computing Satisfaction (EUCS), Delone and McLean, Unified Theory of Acceptance and Use of Technology (UTAUT), Performance, Information, Economics, Controls, Efficiency and Service (PIECES), Human, Organization and Technology- Fit (HOT-Fit) (Fauzan & Noviandi, 2020).

HOT Fit is one of the theoretical framework models used to evaluate information systems in the health care sector. This model was proposed by Yusof et al., (2008), the rationale for this model comes from the DeLone McLean information system success model. The HOT-Fit method has several variables, namely: human, organization, technology and net benefit (Mudiono, 2018; Soraya et al., 2019; Wahyuni et al., 2019). The main focus of research is directed at the relationship between the human (human) aspect as a user consisting of user satisfaction, technology (technology) aspect consisting of system quality, information quality, and service quality, organizational aspects consisting of structure and environment as well as on net benefits generated by the management information system.

Based on the results of research using the HOT-Fit Method on the data obtained from RSUD Dr. Samratulangi Tondano, Minahasa Regency, North Sulawesi, it can be concluded that the variables that influence the success of SIMRS implementation are technology, human and organization variables that have a positive impact and provide net benefits to the use of the system. Most users of hospital information systems only focus on functions for registration and administration rather than clinical functions. The availability of IT units and IT personnel affects the use of hospital information systems (Rumambi et al., 2020).

Based on other research conducted at a Private Hospital for Type C Surgery in Jogjakarta, it is known that the factors that positively affect the use of SIMRS are user satisfaction, organizational support, quality of information, and the direct benefits that can be felt. The use of SIMRS can provide benefits for user performance and patient care. SIMRS implementation is mainly determined by the human and organizational elements. The technology category is influenced by the human aspect of the system adoption process. Human and organizational factors can play a role as a driver or a barrier in the implementation of SIMRS. Information quality is a factor that influences user satisfaction. SIMRS users state that the information obtained is quite clear, makes it easier to confirm with other units and can be used to view patient status (Sari et al., 2016).

Beriman Hospital Balikpapan as one of the Regional General Hospitals in Balikpapan which has implemented SIMRS since the establishment of the Hospital in 2015, but so far, no evaluation has been carried out. This study was conducted to determine the effect of system quality, information quality and service quality on user satisfaction, the effect of service quality on the structure, the influence of the structure on the environment, the influence of the structure on the benefits, the influence of the environment on the benefits and the effect of user satisfaction on the benefits of the Hospital Management Information System in Indonesia. Faith Hospital Balikpapan.

2. Methods

This research is a quantitative study using an analytical survey design and a cross sectional study approach. This research is a correlation study by connecting two or more variables in the HOT-Fit theory. HOT Fit is one of the theoretical framework models used to evaluate information systems in the health care sector. The variables studied were technological factors (system quality, information quality and service quality), human factors (user satisfaction), organizational factors (structure and environment) and benefits. The research was conducted in March – April 2021.

The population used in this study were all employees of the RSUD Beriman Balikpapan who used the SIM application in the unit/installation with a population of 228 people. The sample is part of the SIMRS users in the unit/installation, with a sampling technique from the population using the Slovin formula with a total sample of 145 respondents with the following calculations:

$$n = \frac{N}{1 + N\,(e)^{2}}$$

$$n = \frac{228}{1 + 228\,(0{,}05)^{2}} = 145$$

Where n is the number of samples, N is the number of population and e is the error tolerance limit (5%). The sampling method is Proportional Stratified Random Sampling because the population has a different distribution in each hospital unit and the sample stratification is based on SIMRS users, so that all units can be represented. Samples were taken from each unit/installation with the following formula:

$$ni = \frac{Ni.n}{N}$$

Where ni is the number of samples by stratum, Ni is the number of populations by stratum, N is the total number of populations and n is the total number of samples.

Researchers used questionnaires in the data collection process, the questionnaire used a Likert scale format using a score range of 1-4, namely: "Strongly Disagree", "Disagree", "Agree", "Strongly Agree". Questionnaires were distributed to outpatients, inpatients, emergency departments, ICUs, laboratories, radiology, pharmacy, PDE and cashiers. Various data collected are then processed and analyzed. Data analysis was carried out using path analysis.

3. Results and Discussion

Analysis of basic characteristics was carried out on each research respondent which was grouped based on age background, gender, years of service, and education level. The results of the analysis of the characteristics of the respondents are presented in Table 1.

Based on table 1, it shows that respondents at the Beriman Hospital Balikpapan with male sex of 28.3% and female of 71.7%. Based on age, the largest age group is 30-39 years by 56.6% and the age group >50 years is the least respondent by 2.8%. The highest level of education is D3 at 69% and the least is S2 at 1.4%. Judging from the period of service, the range of working period of 1-3 years is 18.6% and 4-6 years is 81.4%. The period of work is the length of work and is closely related to the experience that has been gained while carrying out the task. The period of work is usually associated with the time to start work where work experience also determines a person's performance. The longer a person works, the better their skills will be, because they can adapt to their work environment (Murnita et al., 2016).

Table 1. Frequency Distribution of Respondents' Characteristics at the Beriman Hospital Balikpapan

Characteristics of Respondents	n	%
gender		
man	41	28.3
woman	104	71.7
age		
20-29 years old	45	31.0
30-39 years old	82	56.6
40-49 years old	14	9.7
> 50 years old	4	2.8
Education Level		
High School/Vocational School	14	9.7
D3	100	69.0
S1	23	15.9
profession	6	4.1
S2	2	1.4
Working Period		
1-3 years old	27	18.6

4-6 years old		118	81.4
	Total	145	100

Source: Primary Data, 2021

The frequency distribution of respondents based on research variables is presented in Table 2. It is known that the variables with the highest good categories are the Environment variable (95.2%), the Net Benefit variable (91%), and the structural variable (81.4%). The highest unfavorable category is in the variables of service quality (33.8%), information quality (29.7%) and user satisfaction (26.9%).

Table 2. Frequency Distribution of Research Variables at Beriman Balikpapan Hospital

No	Research Variables	n	%
1	System Quality		
	Less Good	35	24.1
	good	110	75.9
2	Quality of Information		
	Less Good	43	29.7
	good	102	70.3
3	Quality of Service		
	Less Good	49	33.8
	good	96	66.2
4	User satisfaction		
	Less Good	39	26.9
	good	106	73.1
5	structure		
	Less Good	27	18.6
	good	118	81.4
6	milieu		
	Less Good	7	4.8
	good	138	95.2
7	Net Benefit		
	Less Good	13	9.0
	good	132	91.0
Total		145	100

Source: Primary Data,2021

Path Analysis results are in Table 3. There is no effect of system quality on user satisfaction with a significance value of 0.844 (p>0.05). There is an effect of information quality on user satisfaction with a significance value of 0.000 (p <0.05). There is an effect of service quality on user satisfaction with a significance value of 0.000 (p <0.05). There is an effect of service quality on the structure with a significance value of 0.000 (p<0.05). There is an effect of structure on the environment with a significance value of 0.000 (p<0.05) There is an effect of user satisfaction on benefits with a significance value of 0.033 (p<0.05). There is an effect of structure on benefits with a significance value of 0.014 (p<0.05). There is an environmental influence on benefits with a significance value of 0.000 (p<0.05).

Table 3. Variable Relationship research in RSUD Beriman Balikpapan

No.	Variable	Estimate	S. E	C. R	p value
1.	System Quality -> User Satisfaction	0.012	0.027	0.197	0.844
2.	Quality of Information -> User Satisfaction	0.503	0.036	8.523	0.000
3.	Quality of Service -> User satisfaction	0.494	0.05	8.373	0.000
4.	Quality of Service ->	0.558	0.103	8.062	0.000

	Structure				
5.	Structure -> milieu	0.689	0.033	11.398	0.000
6.	User Satisfaction -> Benefits	-0.144	0.143	-2.126	0.033
7.	Structure -> Benefits	0.216	0.104	2.466	0.014
8.	Milieu -> Benefits	0.448	0.187	5.243	0.000

The results showed that in RSUD Beriman the description of the highest respondent's answers related to the system quality variable was in the good category as well as the system user variable. The results showed that there was no effect of system quality on user satisfaction, this could be because there were some respondents who considered the quality of the system to be good but felt dissatisfied as system users and vice versa. analysis per question found some who argue that they are not satisfied with the system as a whole and are not satisfied with the existing functions in the system. The direction of the influence is positive, this indicates that the better the quality of the system, the better the user satisfaction and vice versa.

The results of this study are contrary to previous studies which show that the suitability of the system quality has an influence on the level of user or human satisfaction. (Monika & Gaol, 2017). Sari et al (2016) which states that if the quality of the system is not good, such as disruptive technical difficulties, inadequate system infrastructure and the system is prone to errors, it can reduce the level of user satisfaction.

The description of the highest respondents' answers related to the information quality variable is in the good category as well as the user satisfaction variable. The results showed that there was an influence of information quality on user satisfaction, with the direction of this positive influence indicating that the better the quality of the information, the better the user satisfaction. These results indicate conformity with previous research which states that the quality of information has an influence on the level of user satisfaction (Monika & Gaol, 2017).

Putra & Alfian's (2016) research also proves that the quality of information has a positive effect on end-user satisfaction. The more complete, accurate, and relevant information is available, the higher the level of user satisfaction with the information system as a whole.

The description of the highest respondents' answers related to the service quality variable is in the good category as well as the user satisfaction variable. The results of this study indicate that there is an influence of service quality on user satisfaction with the direction of this positive influence indicating that the better the service quality, the better the user satisfaction. These results show conformity with previous research which states that service quality has an influence on the level of user satisfaction (Rumambi et al., 2020).

Research by Yessy et al (2016) which states that the higher the service quality, the higher the user satisfaction. This indicates that the better quality of information system services will affect the increase in user satisfaction. If users of information systems feel that the quality of service provided by the application program provider is good, then users will tend to feel satisfied using the system.

The description of the highest respondents' answers related to the service quality variable is in the Good category as well as the structure variable. The results of the study indicate that there is an influence of service quality on the structure in this case regarding the organization with the direction of this positive influence indicating that the better the service quality, the better the structural variables related to the organization. This is in accordance with previous research (Yusof & Yusuff, 2011) which states that there is a significant relationship between service quality and the organization and has an impact on performance within the organization.

The description of the highest respondents' answers related to structure variables is in the Good category as well as environmental variables. The results of the study indicate that there is an influence of structure on the environment with the direction of this positive influence indicating that the better the structure, the better the environment. This is in accordance with previous studies which state that organizational structure has an influence on the organizational environment (Sari et al., 2016). Study by Yuliasari (2014) in Soraya et al., (2019) also stated that the better the organizational structure, the more positive the environmental conditions of the organization will be (Soraya et al., 2019). Delone and McLean have tested empirically that the performance of the organizational structure in implementing the information system has a positive influence on the environment of an organization for example on organizational management. So that an organization must continue to try to evaluate the existing organizational structure to be able to continue to improve the success of the system (DeLone & McLean, 2003).

The description of the highest respondents' answers related to the user satisfaction variable is in the good category as well as the net benefits variable. The results of the study indicate that there is an influence of user satisfaction on net benefits with the direction of this negative influence indicating that the better the user satisfaction the less good the net benefits and vice versa, this is because from the side of user satisfaction found dissatisfaction from the system as a whole and to the functions in the In the system, for example, there are still system functions that cannot be used optimally, not directly integrated, such as the overall hospital management information system with the laboratory information system. This result is contrary to previous research which states that the level of user satisfaction has an influence on Net Benefit where the higher the value of the influence on the net benefit, the higher the value of system utilization (Sari et al., 2016). Diantono's research (2018) which shows the results that there is a unidirectional (positive) relationship between user satisfaction with *net benefit*. (Diantono & Winarno, 2018). According to Prasetyowati &, Kushartanti (2018) Satisfaction is the response and feedback that the user gives after using the information system. In the information system success model from Delone & McLean (2003) the benefits depend on the use and satisfaction dimensions that depend on information quality, system quality and service quality. The benefits of SIMRS that are felt by users are that it makes it easier to check prescriptions, more complete patient information with a clear identity, easily accessible examination results, easier disease coding and the existence of a warning system in several modules that help the user's work. In general, SIMRS helps shorten working time, makes checking easier, facilitates the exchange of information and makes it easier to review existing information. The use of SIMRS is perceived to have an impact on services, namely helping to increase patient service response time, facilitating patient monitoring and reducing the risk of mistaken identity and misreading (Sari et al., 2016).

The description of the highest respondents' answers related to the structure variable is in the Good category as well as the net benefits variable. The results of the study indicate that there is an influence of structure on net benefits with the direction of this positive influence indicating that the better the structure the better the net benefits. These results are in line with several previous studies which state that organizational structure affects net benefits or system utilization (Sari et al., 2016). Research by Betri, (2017) also explained that encouragement from the organization can only significantly motivate users to use the system. After the user is motivated to use the system, then it will only be able to increase the perception of usefulness (net benefit).

The description of the highest respondents' answers related to environmental variables is in the good category as well as the net benefits variable. The results of the study indicate that there is an environmental influence on net benefits with this positive direction indicating that the better the environment, the better the net benefits. These results show conformity with previous research which states that the organizational environment has an influence on Net Benefit where the higher the value of the influence on net benefits, the higher the value of system utilization (Prabaningrum & Dewi, 2016).

4. Conclusion

The factors that influence the use of hospital management information systems in RSUD Beriman Balikpapan are system quality, information quality, service quality, user satisfaction, structure, environment and net benefits. Information quality and service quality have an influence on user satisfaction, while the quality of the system has no effect on user satisfaction. Service quality has an influence on the structure. The structure has an influence on the environment. Structure and environment have an influence on net benefits. In addition, there is an effect of user satisfaction on net benefits at the Beriman Hospital, Balikpapan. This study recommends RSUD Beriman to make system improvements, especially related to the functions that exist in the system, improvements to the accuracy of the data and the compatibility between system functions and the needs of system users. It is necessary to conduct a survey to each unit/installation of system users regarding what data and information needs are needed to be considered by the Hospital to add these features into the hospital information system. In addition, hospitals need to conduct in-house training for system users so that they understand how to use the system if improvements or enhancements have been made to features in the system.

References

1. Betri, T. J. (2017). Perancangan Arsitektur Aplikasi Learning Management System Di Universitas Slamet Riyadi. *Indonesian Journal of Applied Informatics.*, *2*(1), 1–16.
2. DeLone, W. H., & McLean, E. R. (2003). The DeLone and McLean model of information systems success: A ten-year update. *Journal of Management Information Systems*, *19*(4), 9–30. https://doi.org/10.1080/07421222.2003.11045748
3. Diantono, P., & Winarno, W. W. (2018). *Evaluasi Penerapan SIMRS Menggunakan Metode Hot-Fit Di RSUD Dr . Soedirman Kebumen*. *2*(1), 46–56.

4. Fauzan, A., & Noviandi, N. (2020). Evaluation of Optima Regional Health Information System with HOT-Fit on Technology Aspects Approach in Johar Baru Health Center Jakarta. *Journal of Intelligent Computing & Health Informatics*, *1*(1), 1–7. https://doi.org/10.26714/jichi.v1i1.5397
5. Peraturan menteri kesehatan RI nomor 82 tentang sistem manajeman rumah sakit, 1 (2013).
6. Kuo, K. M., Liu, C. F., Talley, P. C., & Pan, S. Y. (2018). Strategic improvement for quality and satisfaction of hospital information systems. *Journal of Healthcare Engineering*, *2018*. https://doi.org/10.1155/2018/3689618
7. Manuhara Putra, W., & Alfian, M. (2016). Pengujian Kesuksesan Implementasi Sistem Informasi Akuntansi Lembaga Keuangan Mikro: Modified Delone Mcleon Model. *Jurnal Akuntansi Dan Investasi*, *17*(1), 53–65. https://doi.org/10.18196/jai.2016.0044.53-65
8. Mellikeche, S., Boussekey, O., Martin, G., Campoy, E., Lajonchère, J. P., & Degoulet, P. (2018). Evaluation of the unified model of information systems continuance (UMISC) in two hospital environments. *International Journal of Medical Informatics*, *117*, 66–81. https://doi.org/10.1016/j.ijmedinf.2018.06.001
9. Milla, I. (2018). Audit Sistem Informasi Manajemen Rumah Sakit Menggunakan Framework Cobit Dan It Balanced Scorecard (Studi Kasus RSUD Balung). In *Universitas jember*.
10. Monika, R., & Gaol, F. L. (2017). Measuring the Success of E-Cargo Implementation at One of Indonesian Airlines using DeLone and McLean Model. *IOP Conference Series: Materials Science and Engineering*, *215*(1). https://doi.org/10.1088/1757-899X/215/1/012037
11. Motevali Haghighi, S., & Torabi, S. A. (2018). A novel mixed sustainability-resilience framework for evaluating hospital information systems. *International Journal of Medical Informatics*, *118*(July), 16–28. https://doi.org/10.1016/j.ijmedinf.2018.07.003
12. Mudiono, D. (2018). Analisis Penerapan Sistem Informasi Manajemen Rumah Sakit dengan Model Human Organization Technology (HOT)-Fit di RSU Dr. H. Koesnadi Bondowoso. In *Tesis*. Universitas Jember.
13. Prabaningrum, U., & Dewi, A. O. (2016). Evaluasi Jaringan Informasi Kearsipan Statis di Badan Arsip dan Perpustakaan Provinsi Jawa Tengah Tahun 2016. *Jurnal Ilmu Perpustakaan*, *5*(2), 170-180.
14. Murnita, R., Sediyono, E., & Purnami, C. T. (2016). Evaluasi Kinerja Sistem Informasi Manajemen Farmasi Di RS Roemani Muhammadiyah Dengan Metode Hot Fit Model. *Jurnal Manajemen Kesehatan Indonesia*, *4*(1), 11–19. https://doi.org/10.14710/jmki.4.1.2016.11-19
15. Prabaningrum, U., & Dewi, A. O. P. (2016). *Evaluasi Jaringan Informasi Kearsipan Statis di Badan Arsip dan Perpustakaan Provinsi Jawa Tengah Tahun 2016*.
16. Prasetyowati, A., Kushartanti, R. (2018). Pengaruh Faktor HOT (Human, Organisasi, Dan Teknologi) Terhadap Kepuasan Pengguna Sistem Informasi Primary Care Di Wilayah Kota Semarang. *Jurnal Manajemen Informasi Kesehatan Indonesia.*, *6*(1), 63–67.
17. Prasetyowati, A., & Kushartanti, R. (2018). Pengaruh Faktor Hot (Human, Organisasi, Dan Teknologi) Terhadap Kepuasan Pengguna Sistem Informasi Primary Care Di Wilayah Kota Semarang. *Jurnal Manajemen Informasi Kesehatan Indonesia*, *6*(1), 63. https://doi.org/10.33560/.v6i1.188
18. Rangraz Jeddi, F., Nabovati, E., Bigham, R., & Khajouei, R. (2020). Usability evaluation of a comprehensive national health information system: relationship of quality components to users' characteristics. *International Journal of Medical Informatics*, *133*, 104026. https://doi.org/10.1016/j.ijmedinf.2019.104026
19. Riska, S., Daerina, F., Mursityo, Y. T., & Rokhmawati, R. I. (2018). *Evaluasi Peranan Persepsi Kegunaan dan Sikap Terhadap Penerimaan Sistem Informasi Manajemen Rumah Sakit (SIMRS) di Rumah Sakit Daerah Kalisat*. *2*(11), 5950–5959.
20. Rumambi, F. R., Robo, S., & Amalia, C. (2020). Identifikasi Dampak Penggunaan Sistem Informasi Rumah Sakit (SIRS) Terhadap Pelayanan Kesehatan Menggunakan Hot-Fit Model 2006. *Jurnal Media Informatika Budidarma*, *4*(1), 216. https://doi.org/10.30865/mib.v4i1.1973
21. Sari, M. M., Sanjaya, G. Y., & Meliala, A. (2016). Evaluasi sistem informasi manajemen rumah sakit (SIMRS) dengan kerangka HOT - FIT. *Seminar Nasional Teknologi Informasi Inonesia*, *1*(1), 204–207.
22. Soraya, I., Adawiyah, W. R., & Sutrisna, E. (2019). Pengujian Model Hot Fit Pada Sistem Informasi Manajemen Obat Di Instalasi Farmasi Rsgmp Unsoed Purwokerto. *Jurnal Ekonomi, Bisnis, Dan Akuntansi*, *21*(1), 1–16. https://doi.org/10.32424/jeba.v21i1.1261
23. Wahyuni, T., Parasetorini, A., Rekam, P., Kesehatan, I., Administrasi, P., & Sakit, R. (2019). *Metode Hot Fit untuk Mengukur Tingkat Kesiapan SIM RS dalam Mendukung Implementasi E-Health*. *7*(1), 71–75.
24. Yessy, I.P., Hermanto, Handajani, L. (2016). Analisis Determinan Implementasi Sistem Akuntansi Instansi Berbasis Aktrual. *Jurnal InFestasi*, *12*(2), 173–184.
25. Yusof, M. M., & Yusuff, A. Y. A. (2013). Evaluating E-government system effectiveness using an integrated socio-technical and fit approach. *Information Technology Journal*, *12*(5), 894–906. https://doi.org/10.3923/itj.2013.894.906