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Relationship between Implementation and Performance of Integrated Information System with Service Efficiency in Improving Service Quality in Radiology Installation of Bogor City Regional General Hospital

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Abstract *Radiology services are a crucial component of the healthcare system that requires efficiency in its processes. Resource limitations and increasing demand for services underscore the importance of improving efficiency. To enhance service quality and operational efficiency, the implementation of an integrated information system has become a key focus for hospital management. Improving service quality and operational efficiency through the application of an integrated information system is also dependent on the reliability and performance of the system itself. This study aims to examine the relationship between the implementation and performance of an integrated information system with service efficiency in enhancing service quality in the radiology department of RSUD Kota Bogor. The research uses a quantitative approach with two independent variables: the implementation of the integrated information system and the reliability and quality of the integrated information system. The dependent variable is the quality of radiology services, and the intervening variable is radiology service efficiency. Data collection methods include observations, questionnaires, and documentation studies. The sample consists of 30 employees working in the radiology department of RSUD Kota Bogor and 30 patients receiving services in the radiology department. Data processing and presentation were conducted using path analysis with Structural Equation Modeling (SEM-PLS) using SmartPLS software. The results of the data analysis indicate that: (1) The implementation of the integrated information system does not have a significant relationship with radiology service efficiency; However, the reliability and performance of the system do have a strong relationship with radiology service efficiency. (2) The implementation and performance of the integrated information system do not have a significant relationship with service quality in the radiology department. (3) Radiology service efficiency has a significant relationship with service quality in the radiology department. (4) Radiology service efficiency, as a mediator, is not strong enough to enhance the relationship between the implementation and performance of the integrated information system and service quality in the radiology department. This study is expected to provide a comprehensive overview of the relationship between the implementation and performance of an integrated information system with service efficiency in enhancing service quality in the radiology department. The findings may serve as input for the management of RSUD Kota Bogor in optimizing the use of an integrated information system to improve radiology service efficiency, which is expected to impact the quality of services in the radiology department.*

Keywords *: Reliability, Performance, Service Efficiency*

1. INTRODUCTION

The hospital has provided and offered several forms of services. medical as form Supporter from service quality to public, Wrong Oneamong them is service radiology. Service radiology is service support medical Which aiming give results diagnosis. Radiology in its operation utilise radiation ionizer in matter This X-ray, Which has It is known that apart from its benefits, the negative effects or impacts of X-rays also need to be understood. attention. So that in utilization X-ray his can notice rulessafety patient. Service radiology as part Which integrated from serviceoverall health is part of and a mandate of the Basic Law 1945 where health is a fundamental right of every citizen and the mandate of the Law – Invite Number 23 Year 1992 about health. Departure from matter the as well as more and moreincreasing public need for health services, then services radiology Already as it should be give service Which

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quality.

Radiology services are an integral part of the health care system. which plays an important role in the diagnosis and treatment of diseases. RSUD Kota Bogor as one of the hospitals government in the region provide radiology services for the community. Radiology installation of Bogor City Hospital own Facilities include: 2 mobile X-Ray devices in the conventional radiology room, 1 mobile deviceX-Ray in the ICU room and 1 mobile X-Ray device in the NICU room, Fluoroscopy device, Panoramic and Cephalometric, Dental instruments (intra oral/periapical), Ultrasonography (USG), as well as a number of equipment advanced like MRI 3 Tesla, CT Scan 128 Slice, tool C-Arm in the operating room, and 2 C-Arm ESWL devices, as well as 2 Cathlab devices. For the process processing of radiological images using the Computer Radiography (CR) system Which integrated with System Information Management House Sick (SIMRS).

Improving service quality and operational efficiency by implementing Integrated information systems are also inseparable from the importance of reliability and performance. the system itself. The reliability and performance of this integrated information system has a very important role in determining how effective the system can be. improve the efficiency of radiology services. Reliability and performance of information systems integrated in direct affect the efficiency of radiology services in matter staff productivity, they can complete more tasks in less time shorter without being disturbed by technical problems. With a reliable system and quality, use of resources (such as time, labor, and equipment) as well can optimized. For example, time Which saved from delay system can used For serve more Lots patient. System Which often experience failure or Which difficult used Also will cause improvement cost operational, either in the form of repair costs, additional training, or loss of productivity. Reliable and quality systems help reduce costs. This, so that the service can walk more efficient in a way financial.

2. LITERATURE REVIEW

Theory Management

In the Big Indonesian Dictionary (KBBI), the meaning of management is use source Power effective For reach target. Term other from management is management, arrangement, control, or supervision. It can also be interpreted that management is the people who are responsible answer on organization business.

According to Ricky W. Griffin (2016), management is a series activities (including planning and decision making, organizing, direction, and control) directed at organizational

resources (human, financial, physical, and information) with the aim of achieving goals organization effectively and efficiently. Meanwhile, according to M. Anang Firmansyah and Budi W. Mahardhika (2018) in his book states that there is a number of basic elements of management that form management activities, namely: element man *(man),* material *(materials),* machine *(machine),* order Work *(method),*money and *market* .

Management House Sick

According to Suyono (2019), hospital management is a process Which involving planning, organizing, leadership, And control source Power man, finance, physique, And information For achieve the goal of the hospital in a way effective, efficient, And sustainable, with persistence pay attention to aspects of Information and Communication Technology (ICT), *big data* , and *artificial intelligence* (AI) in hospital management. Hospital management This illness is necessary so that the hospital can provide health services. Which quality, safe, effective, as well as efficient so that can give benefitin a way direct to public. The existence of management House Sick Which effectivebecome a commitment to provide good service care. This is at a time For ensure that every individual can to obtain protection, service health, as well as treatment Which as should be, in line with Which poured out in UUD 1945.

Draft System Information, Efficiency Service, And Quality Service House Sick

System in formation (*information system*) is combination from component-interrelated components, such as hardware, software, data, network communication, And source Power man, Which Work The same For gather, process, keep, And distribute information insupport taking decision, coordination, And control in A organization (Laudon & Laudon, 2020).

System Information Integrated

System information Which integrated is Wrong One draftkey from system information management. Various system can each other related to each other, this flow of information is very useful when a file is also needed by another system or the output of a system is an input for other systems. Integrated information system is a platform that combines data sources, applications, and different technologies into one integrated environment for management data Which efficient, analysis, And taking decision (Nickerson, R. C. 2019). System integrated merge component sub- subsystems into one system and guarantee the functions of the subsystems the as One unity system. In understanding other, system information integrated is system information Which involving various functional units within the company and the company's relationship with party outside like customer And supplier.

Quality Service

Service quality is an important concept in marketing services. Service quality can be

defined as a comprehensive assessment of excellence of a service (Zeithaml et al., 2018). Service quality can alsodefined as the level of expected excellence and control over level superiority the For fulfil desire customer in a way consistent (Lovelock & Wirtz, 2021).

3. RESEARCH METHODS

Type Study

Study This use type approach quantitative. According to Sugiyono(2020:16) method study quantitative can interpreted as method study Whichbased on on philosophy positivism, used For researching on population orsample certain, collection data use instrument study, analysis datanature quantitative/statistical, with objective For test hypothesis Which has set. According to Sinambela (2020) quantitative research is type study Which use numbers in processing data For produce information Whichstructured. Characteristics study quantitative aiming For get data Whichdescribe characteristics object, incident, or situation (Now & Bougie, 2016:43).

Quantitative data refers to concrete data in the form of numbers that have been... tested use data statistics Which produce A conclusion And to obtain signification connection between variable. Strategy Which used in This research is an associative strategy. Associative strategy is a research strategy which aims to determine the influence between two or more variables (Sugiyono, 2017), then in this research a theory can be built that can function For explain, predict And control a symptom. Furthermore, technique analysis Which used is technique analysis track (*path analysis*), with collectiondata done through instrument study, with method spread questionnaire.

Method Data analysis

According to Now And Bougie (2016), analysis data is process inspection datathat have been collected to find patterns and relationships that can provide outlook Which more deep about phenomenon Which currently researched. Emphasize onthe use of statistical techniques to test hypotheses and find relationships between variable. Study This use method analysis quantitative Which stated withprovide score weights based on the Likert scale. The data obtained will be presented in form table For make it easier in analyze And understand data so that the data presented is more systematic. In this study, the processing and Data presentation using path analysis *with* Structural *Equation Modeling* (SEM-PLS) use SmartPLS.

Path analysis is used to see the direct and indirect influence. indirectly between variables. Researchers used path analysis in this study because path analysis allows researchers to test theoretical propositions regarding cause and effect relationship. Analyze that done by

using correlation and regression so that it can be known to arrive at the final dependent variable, it must be through direct or intervening pathways. The model is depicted in the form circle And arrow, Where child arrow single show as reason because of on each variable in a model as variable depends(giver) response) currently Which other as reason. (Riduwan And Kuncoro, 2016: 115)

Place And Time Study

1. Place

   Location on study This done in

   Place Study : Radiology Installation of Bogor City Hospital

   Address : Jl. DR. Sumeru No. 120 Kel. The Great Wall Subdistrict Bogor West City Bogor Java West 16112

   No. Phone : (0251) 8312292 Fax (0251) 8371001

   Email : rsudkotaboggmnor@yahoo.co.id

2. Time Study

Table 1

Timetable Completion Thesis

JADWAL PENELITIAN									
No	Kegiatan	Maret	April	Mei	Juni	Juli	Agust	Sept	Okt
1	Persiapan (proposal)								
2	Studi Pustaka								
3	Pembuatan Proposal								
4	Seminar Proposal								
5	Penyelesaian Bab I								
6	Penyelesaian Bab II								
7	Penyelesaian Bab III								
8	Penyelesaian Bab IV								
9	Penyelesaian Bab V								
10	Daftar Pustaka dan Lampiran								
11	Ujian Tesis								

Source : Processed By Writer

4. RESEARCH RESULTS AND DISCUSSION

Results Analysis Data

In this study, hypothesis testing uses *Structural techniques.Equation Modeling* (SEM) based on *Partial Least Square* (PLS) with programSmartPLS version 4.1.0.8. Following is output chart from calculation PLS- SEM algorithm **:**

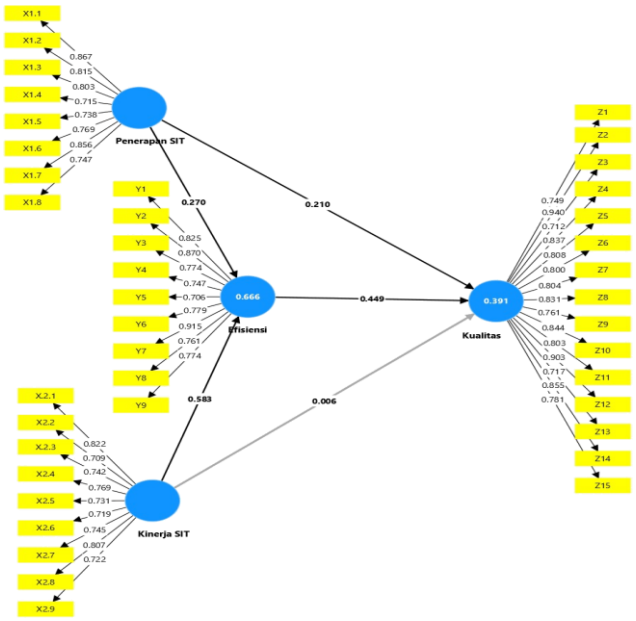

Figure 1

Output Chart Algorithm PLS SEM

Source : Data processed with SmartPLS 4, 2024

Figure 1 explains *the model output* based on the method analysis. PLS-SEM algorithm calculations, which will then be used as base For analyze model PLS SEM following :

Analysis *Outer Model*

Criteria testing in *outer model* that is :

Validity Convergent

To test convergent validity used *loading value factor* , an indicator is declared valid when it has a *loading value factor* > 0.7 (Ghozali, 2016). The following are the *loading factor values* of each indicator on variables study :

Table 2

Test Validity Convergent

Variables	**Indicator**	**Loading Factor**	**Information**
System Implementation Information Integrated (X 1)	X 1.1	0.867	Valid
	X 1.2	0.815	Valid
	X 1.3	0.803	Valid
	X 1.4	0.715	Valid
	X 1.5	0.738	Valid

	X 1.6	0.769	Valid
	X 1.7	0.856	Valid
	X 1.8	0.747	Valid
Reliability and System Performance Information Integrated (X 2)	X 2.1	0.822	Valid
	X 2.2	0.709	Valid
	X 2.3	0.742	Valid
	X 2.4	0.769	Valid
	X 2.5	0.731	Valid
	X 2.6	0.719	Valid
	X 2.7	0.745	Valid
	X 2.8	0.807	Valid
	X 2.9	0.722	Valid
Efficiency Service Radiology (Y)	Y 1	0.825	Valid
	Y 2	0.870	Valid
	Y 3	0.774	Valid
	Y 4	0.747	Valid
	Y 5	0.706	Valid
	Y 6	0.779	Valid
	Y 7	0.915	Valid
	Y 8	0.761	Valid
	Y 9	0.774	Valid
Quality of Servicein Installation Radiology (Z)	Z 1	0.749	Valid
	Z 2	0.940	Valid
	Z 3	0.712	Valid
	Z 4	0.837	Valid
	Z 5	0.808	Valid
	Z 6	0.800	Valid
	Z 7	0.804	Valid
	Z 8	0.831	Valid
	Z 9	0.761	Valid
	Z 10	0.844	Valid
	Z 11	0.803	Valid
	Z 12	0.903	Valid
	Z 13	0.717	Valid
	Z 14	0.855	Valid
	Z 15	0.781	Valid

Source : Data processed with SmartPLS 4, 2024

On table 2 show that all indicator has meets the requirements of convergent validity, namely with *loading value factor* > 0.7 so that all indicator stated valid. Statement validThis is also confirmed by the fulfillment of the *Average Variance test. Extracted* (AVE), where the AVE value must be above 0.50 (Ghozali, 2016). This value reveals that at least the latent factors are capable of explain every indicator as big as half from variance.

Table 3

Test Validity Converge with AVE

	AVE	**Information**
Implementation SIT	0.625	Valid
Performance SIT	0.566	Valid
Efficiency Service	0.635	Valid
Quality Service	0.659	Valid

Source : Data processed with SmartPLS 4, 2024

Table 3 shows that all indicators in each variable has exceed limit provision 0.5 so that stated fulfil provision validity convergent.

Validity Discriminant

The discriminant validity test can be assessed based on the *cross value. loading* measurement with its construct. It is said to be valid if a indicator have coefficient correlation Which more big with each the construction compared to with mark coefficient other correlations (Hair et al., 2017). The following is *the output* of *cross loading* calculation algorithm PLS SEM

Table 4

Loading Cross (*Cross Loading*)

	lementationSIT	**SIT Performance**	**Efficiency Service**	**QualityService**
X 1.1	0.867	0.648	0.668	0.456
X 1.2	0.815	0.587	0.457	0.433
X 1.3	0.803	0.645	0.681	0.471
X 1.4	0.715	0.559	0.496	0.306
X 1.5	0.738	0.647	0.654	0.560
X 1.6	0.769	0.629	0.490	0.559
X 1.7	0.856	0.756	0.628	0.278
X 1.8	0.747	0.566	0.510	0.294
X 2.1	0.748	0.822	0.605	0.367

X 2.2	0.651	0.709	0.511	0.233
X 2.3	0.508	0.742	0.723	0.479
X 2.4	0.682	0.769	0.520	0.416
X 2.5	0.472	0.731	0.526	0.377
X 2.6	0.692	0.719	0.583	0.316
X 2.7	0.636	0.745	0.592	0.416
X 2.8	0.536	0.807	0.707	0.508
X 2.9	0.558	0.722	0.577	0.420
Y 1	0.562	0.527	0.825	0.370
Y 2	0.529	0.646	0.870	0.372
Y 3	0.630	0.651	0.774	0.284
Y 4	0.665	0.650	0.747	0.421
Y 5	0.644	0.586	0.706	0.483
Y 6	0.636	0.626	0.779	0.544
Y 7	0.580	0.685	0.915	0.533
Y 8	0.504	0.701	0.761	0.683
Y 9	0.531	0.614	0.774	0.561
Z 1	0.361	0.443	0.458	0.749
Z 2	0.391	0.397	0.451	0.940
Z 3	0.637	0.635	0.727	0.712
Z 4	0.420	0.454	0.487	0.837
Z 5	0.419	0.469	0.409	0.808
Z 6	0.426	0.330	0.339	0.800
Z 7	0.584	0.494	0.654	0.804
Z 8	0.338	0.247	0.307	0.831
Z 9	0.426	0.413	0.462	0.761
Z 10	0.327	0.394	0.405	0.844
Z 11	0.143	0.229	0.322	0.803
Z 12	0.465	0.471	0.496	0.903
Z 13	0.500	0.516	0.599	0.717
Z 14	0.360	0.287	0.396	0.855
Z 15	0.407	0.291	0.403	0.781

Source : Data processed with SmartPLS 4, 2024

Based on table 4 above, it can be seen that the *cross loading value*shows that there is good discriminant validity due to the value the correlation of the indicator to its construct is higher than the value correlation of indicators with other constructs. Thus, the construct latent predicts indicators on their blocks better than with indicators in other blocks, then the model is

said to be valid.

Test Reliability

Test reliability done For see level consistency indicator as instrument study, measured with *Cronbach's Alpha*(CA) And *Composite Reliability* (CR). Following This is results testing *Cronbach's Alpha* (CA) And *Composite Reliability* (CR) from SmartPLS 4.1.0.8 :

Table 5 Test Reliability

	Cronbach's alpha	**Composite Reliability(CR)**	**Information**
Implementation SIT	0.914	0.930	Reliable
Performance SIT	0.904	0.921	Reliable
Efficiency Service	0.927	0.940	Reliable
Quality Service	0.963	0.967	Reliable

Source : Data processed with SmartPLS 4, 2024

Based on the results in table 5 above, it can be seen that *Cronbach's Alpha* value and *Composite Reliability* Already fulfil condition with mark Which more big from 0.70 although mark 0.60 Stillcan accepted (Hair et et al., 2017), so that all indicator in everyconstruct stated reliable.

Analysis *Inner Model*

Analysis of *the inner model* or structural model can be done by some tests following :

Path Coefficient (*Path Coefficient*)

Coefficient track or *path coefficient* is size Which shows the strength and direction of the relationship between two latent variables with values ranging between -1 to +1 (Hair, 2017). The following is path coefficient value between two variables based on calculation results PLS-SEM algorithm :

Table 6 Coefficient Path *Coefficient*)

Connection Variables	**Coefficient Track**
Implementation SIT → Efficiency Service	0.270
Implementation SIT → Quality Service	0.210
Performance SIT → Efficiency Service	0.583
Performance SIT → Quality Service	0.006
Efficiency Service → Quality Service	0.449

Source : Data processed with SmartPLS 4, 2024

Based on data from table 6, can known that variable implementation SIT own

connection Which positive with variableefficiency service with coefficient 0.270. This can interpreted improvement One unit on variable implementation SIT only increasethe value of the service efficiency variable is 27%, assuming the variable others remain constant, so that connection between variable This considered weak to moderate. The SIT implementation variable also has a relationship positive with variable quality service, with coefficient 0.210. The relationship is weaker compared to the implementation relationship. SIT with efficiency service. Every improvement One unit on implementation SIT only increase quality service as big as 21%. Although direction connection positive, However relatively small.

The SIT performance variable has a positive relationship with the variablesservice efficiency, with a coefficient of 0.583, can be interpreted as that improvement One unit on variable performance SIT will increase mark variable efficiency service as big as 58.3%. This is connection Which Enough strong, show that variable performanceSIT has an important role in the variable of service efficiency.However, for the relationship between SIT performance variables and quality variables service has a very small relationship with a coefficient of 0.006, This positive relationship is very weak, almost approaching zero, which means improvement in SIT performance does not have a significant relationship with quality service.

Then for the relationship between the service efficiency variables with variable quality service own connection positive Which Enoughstrong with a coefficient of 0.449 which means a one unit increase in service efficiency will increase the service quality value by 44.9%. This relationship is quite strong and significant, indicating that improvement on efficiency service will impact big on quality service.

Mark R *Square* (R^2)

R *Square* is also called the coefficient of determination and is used to assess the predictive ability of the model built, the R *Square value*Which more big show that model own strength predictionwhich is better. The value classification is 0.75 and above indicating strong model in explaining the dependent variable, 0.50 – 0.74 indicates a moderate model, and 0.25 - 0.49 indicates a weak model (Hair et al., 2016). The following R *Square values* are produced from calculation algorithm PLS- SEM :

Table 7

Coefficient Determination (*R Square*)

	R-Square	**justed R-Square**
Efficiency Service (Y)	0.666	0.641
Quality Service (Z)	0.391	0.321

Source : Data processed with SmartPLS 4, 2024

Based on the R *Square results* shown in table 7, R value *Square* as big as 0.666 indicates a model that currently, in explain variable dependent. This means as big as 66.6% Variancefrom dimensions variable implementation And performance system information integratedhave a fairly good ability in predicting or explainingfactors that are related to service efficiency, the rest is explained by other variables outside the model. While the R value *Square* For quality service only worth 0.391, Which indicates that the model is weak in explaining the variables dependent. This means that only about 39.1% of the variance of the variable dimension implementation and performance of integrated information systems in predictingor explain factors Which have connection with service quality, the rest is mostly explained by other variables in outside model.

Mark f *Square* (f ^{2})

Evaluation f *Square* For evaluate contribution specific from variable exogenous to endogenous variables. The categorization of f *Square values* consists of from 0.35 strong effect, 0.15 medium effect, and 0.02 weak effect (Hair et al., 2016). The following is the f *Square value* from the results of the algorithm calculation. PLS SEM :

Table 8 Evaluation f *Square*

Connection Variables	**f *Square***	**Information**
Implementation SIT → Efficiency Service	0.078	Effect currently
Implementation SIT → Quality Service	0.024	Effect currently
Performance SIT → Efficiency Service	0.365	Effect strong
Performance SIT → Quality Service	0.000	No There is effect
Efficiency Service → Quality Service	0.110	Effect currently

Source : Data processed with SmartPLS 4, 2024

Based on results f value *Square* in table 8, known The implementation of SIT has a moderate effect on service efficiency and on quality service. For variable performance SIT give effect Whichquite strong on service efficiency, but does not provide an effecton the quality of service. Then, from the efficiency of service deliveryeffect currently on quality service.

Analysis of the Relationship between Implementation and Performance of Integrated Information Systems withEfficiency Service Radiology

Based on the results of the tests and analysis that have been carried out, it shows that that implementation system information integrated No have connection Which significant with efficiency service radiology. Coefficient track (*Path Coefficient*) show connection Which positive but weak, implementation system information integrated only capable increase

efficiency service as big as 27%, And based on the t-statistic and p-value, this hypothesis is rejected. This means that the application of the system information integrated No give contribution significant in increase efficiency of radiology services. Then, between the performance of the integrated information system with the efficiency of radiology services, the results of the analysis actually show that the performance system information integrated own connection positive And strong with efficiency radiology services based on sufficient *path coefficient values* big. The performance of the integrated information system can improve service efficiency radiology by 58.3%. The t-statistic and p-value also strengthen the hypothesis This is accepted, indicating that the efficiency of radiology services is greatly influenced by how the information system works optimally. Furthermore, from the R *Square value* show that variable efficiency service radiology can explained by implementation and performance integrated information system of 66.6% (medium model), shows that this model has quite good predictive ability for explains the efficiency of radiology services. From the results of the f *Square assessment* , the application of system information integrated give effect currently, temporary performance system integrated information falls into the category of strong effects in relation to efficiency service radiology. Can taken conclusion that implementation system integrated information does not have a significant relationship with efficiency service radiology, will but reliability And performance from system the precisely have a relationship with efficiency service radiology in City Hospital Bogor.

Analysis of the Relationship between Implementation and Performance of Integrated Information Systems with Quality Service in Installation Radiology HOSPITAL City Bogor

Based on the results of the tests and analysis that have been carried out, it shows that that implementation system information integrated Also No have connection significant with quality service in installation radiology. Coefficient track (*Path Coefficient*) shows a positive but weak relationship, the application of the system integrated information only increases by 21% towards improving the quality services in the radiology installation and based on the t-statistic and p-value, this hypothesis Also rejected. It means, implementation system information integrated No direct increase quality service in installation radiology in a way significant. And For performance relationship integrated information system with quality services in installation radiology, the result show that No There is connection Which significant between secondthe variable. In fact, the path coefficient *shows* the value that very small almost approaching zero, which means the relationship is very weak. interpreted that improving the performance of integrated information systems does not necessarily mean immediately

followed by an increase in the quality of service in the radiology installation. T-statistics and p-value makes this hypothesis rejected. In addition, based on the R *Square value* which the resulting quality of service in radiology installations can only be explained by variables implementation and performance of integrated information systems by 39.1%, which indicates that there are other variables that have not been included in the model that may be more relate with quality service in installation radiology. Results from evaluation f *Square*shows that the implementation of an integrated information system only provides a positive effect currently, even performance from system the No give effect whatever on qualityservices in radiology installations. It can be concluded that the implementation and performance system information integrated No have connection Which significant with qualityservice in installation radiology HOSPITAL City Bogor.

Analysis of the Relationship between Radiology Service Efficiency and Service Quality in Installation Radiology HOSPITAL City Bogor.

Based on the results of the tests and analysis that have been carried out, it shows that that the efficiency of radiology services has a positive and fairly strong relationship with quality service in installation radiology. Mark coefficient track (*Path Coefficient*) show that efficiency service radiology can increase quality service in installation radiology as big as 44.9%. T-statistic And p-value shows a significant relationship so that this hypothesis is accepted. This means that the efficiency of service Radiology has a strong contribution to improving the quality of services in radiology installation. Meanwhile, from the results of the f *Square assessment* show relationship efficiency of radiology services with quality of service in radiology installations including in category effect currently. Can taken conclusion that efficiency service Radiology has a significant relationship with the quality of services in the installation radiology HOSPITAL City Bogor.

Analysis of the Relationship between Implementation and Performance of Integrated Information Systems with Quality Service in Installation Radiology through Efficiency Service

Based on the results of the tests and analysis that have been carried out, it shows that that implementation system information integrated No have connection in a way significant with quality service installation radiology through efficiency service radiology, thus Also with performance from system information integrated No has a significant relationship with the quality of service in radiology installations through the efficiency of radiology services. This is based on the t-statistic value and p-value from each connection the. Can taken conclusion that the efficiency of radiology services as a mediator is not strong enough to strengthen

connection implementation And performance system information integrated with quality service ininstallation radiology hospital City Bogor.

5. CLOSING

Conclusion

Based on the results of research on the relationship between implementation and performance integrated information system with service efficiency in improving quality service in installation radiology HOSPITAL City Bogor, can concluded as following :

1. Implementation system information integrated No have connection Which significantwith service efficiency, but the performance of the integrated information system optimal has a strong relationship in increasing service efficiency radiology in HOSPITAL City Bogor. Implementation system information integrated Nohave connection Which significant with efficiency service radiology, due to the continued use of film in the radiology installation of Bogor City HospitalUntil now. The transition from physical films to digital systems has not been fully implemented.smooth. This is caused by technical constraints or old habits that Not yet fully replaced by system digital. Purchase film radiology includingfinancing operational Which Enough tall.
2. Implementation And performance system information integrated No in a way significant contribute to improving the quality of services in the radiology installation of the Regional Public Hospital Bogor City. Although the implementation of an integrated information system has a relationship Which nature weak, performance system No show impact whatever on qualityservice. Matter This show that just a technology factor No Enough For improve the quality of service. Therefore, in addition to improving the implementation and performance of integrated information systems, further exploration is needed regarding other variables that may be more dominant in improving the quality of service inInstallation Radiology HOSPITAL City Bogor.
3. Efficiency service radiology is factor Which very important in determine quality service in Installation Radiology HOSPITAL City Bogor. Increase efficiency, like through optimization of use source Power, acceleration of service time, and reduction of operational costs, directly will contribute to improving the quality of service perceived by patients. By Because That, focus in an effort improvement efficiency in service Radiology can be one of the main strategies to improve the quality of services in installation radiology HOSPITAL Bogor City.
4. Implementation of an integrated information system in the Radiology Installation of Bogor

City Hospital No have connection Which significant with quality service through efficiency service. Matter Which The same applicable For performance system information integrated, Which Also No show connection Which significant with quality radiology services through service efficiency. This means that the efficiency of radiology servicesas a mediator is not strong enough to strengthen the relationship between the implementation of And performance system information integrated with quality service. With thus,further evaluation is needed to understand other factors that mayincrease quality service in installation radiology Bogor City Regional Hospital.

Suggestion

Based on findings in study This, there is a number of suggestion Which can be given to HOSPITAL City Bogor specifically installation radiology, among them :

1. Bogor City Hospital should consider reducing or even remove use of film radiology And switch fully to system digital(PACS - *Picture Archiving and Communication System*). Digitalization This will save time And cost in process archiving, distribution, And taking picture results radiology, Which on Finally can improve efficiency service.
2. Remember performance system information integrated proven own influence significant to service efficiency, important for RSUD Bogor City for improve technical aspects such as access speed, system stability, and ease of use. This customization will make staff more productive and help reduce time service for patient.
3. Routine do evaluation to implementation and performance system information integrated will help hospitals in identifying barriers or problem Which appear as well as evaluate its effectiveness in increase efficiency. From the results of the evaluation, Bogor City Regional Hospital can adapt strategy implementation in accordance with need service.

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