



RESEARCH ARTICLE

Implementation of Hot-Fit Framework to Evaluate Electronic Medical Record System at Beriman Hospital, Balikpapan City

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ARTICLE INFO	ABSTRACT
Received: Sep 14, 2024	Background: Electronic Medical Records (EMR) are digital files containing patient data that improve communication between institutions through automation, and are evaluated using the HOT FIT method to identify system implementation issues. Objective: to analyzeImplementation of the Hot-Fit framework to evaluate the electronic medical record system at Beriman Regional Hospital, Balikpapan City. Method: The research was conducted in August-October 2024 inFaith Regional Hospital, Balikpapan. The number of samples was 107 people, namely electronic medical record users who work at Beriman Balikpapan Regional Hospital. Analysis using logistic regression. Results: The quality of electronic medical record (EMR) systems, information, and services directly affects user usage and satisfaction, and usage and satisfaction have an impact on the net benefits of EMR, while the environment affects the organizational structure, but the structure does not have a significant impact on net benefits, as found at RSUD Beriman Balikpapan. Conclusion: The quality of electronic medical record (EMR) systems, information, and services directly affects user usage and satisfaction, which in turn affects the net benefits of EMR, while the environment affects the organizational structure, but the structure does not have a significant effect on net benefits at RSUD Beriman Balikpapan.
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INTRODUCTION

The Indonesian government has set six pillars of health transformation, one of which is health digitalization, through Permenkes No. 24 of 2022, all health service facilities in Indonesia are required to implement electronic medical records (EMR) by the end of 2023. EMR is described as an electronic file containing patient data, examinations, treatments, actions and other services provided by medical record providers. EMR is one of the most promising health information technologies and is designed to improve communication within and between institutions through automation of data collection, use and storage.(1).

In an effort to improve the quality of service, hospitals need to be supported by adequate and optimal service systems, information and communication technology by organizing good medical records.(2).Implementation of medical records can improve the achievement of quality targets in the field of medical records, reduce delays in medical record files and shorten the service process so that it is time and energy efficient.(3).

Information system evaluation is a concrete effort to find out the actual state of an information system implementation. Evaluation in the implementation of a system needs to be done to be able to find problems that can be obstacles to the implementation of this system both from the user side and from the organization. There are several methods that can be used in evaluating the implementation of a system,

namely EUCS (End-User Computing Statistics), TAM (Technology Acceptance Model), DeLone and Mclean, TTF (TaskTechnology Fit) and HOT-Fit (Human Organization Technology and Net benefit)(4).

The HOT-FIT method was first developed by Yusof, et. all (2008)(5). This evaluation model clarifies the elements that exist in the system. The first is humans (users) who evaluate the information system from the perspective of system use, who the users are, training, experience, knowledge, expectations, and attitudes towards the system. The second is the organization, which evaluates the system from the organizational structure and organizational environment related to the plan, governance, control and supervision of the system, top management support, and costs and the third is technology where technology evaluates the perspective of the quality of the electronic medical record system, the quality of information and the quality of services provided.(6).

Based on the description of several system evaluation methods, the researcher uses the HOT-Fit method, the variables in the HOT-Fit method already include variables in other theories. HOT FIT is a technique that is commonly used to evaluate the implementation of existing systems in an institution.(6). Compared to other methods, HOT FIT is the most complete solution that best suits current difficulties or limitations.(7). HOT FIT not only focuses on the components of the system being evaluated itself, but also on additional supporting components that make this model suitable for use in research with the aim of producing comprehensive recommendations for application improvement and development.(8).

PARTICIPANTS AND METHODS

The population in this study is Users of electronic medical records working at Beriman Balikpapan Regional Hospital The population of users of electronic medical records at Beriman Regional Hospital consists of medical, nursing and midwifery personnel with a total population of 157 people.. The number of samples using the Slovin formula in this study was 107 people with the sampling method. disproportional stratified random sampling from the type of probability sampling. The research was conducted in August-October 2024 at the Beriman Regional Hospital in Balikpapan. This research was conducted directly on humans and has obtained research permit from the Ethics Committee with letter number: 1952/UN4.14.1/TP.01.02/2024 dated August 23, 2023.

FINDINGS

1. Respondent Characteristics

The number of respondents in this study was 107 respondents. The characteristics of the research respondents consisted of age, gender, length of service, profession, installation, and level of education. The largest number of research respondents were in the age range of 41-50 years (38.3%), the respondents with the largest gender were female (58.9%). The largest number of respondents with a work period range was in the work period range of 11-20 years (50.5%). The largest number of respondents' professions were doctors (30.8%). The largest number of respondents were in outpatient installations (61.7%) and had the highest level of education, namely undergraduate (S1) at 53.3%.

2. Univariate Analysis

Univariate analysis describing each variable studied, based on the research results, was obtained as in the following table.

Table 1. Frequency Distribution of Electronic Medical Record System Technology Research Variables

Variables	Amount	
Technology		
System Quality	n	%
Good	59	55.1
Not good	48	44.9

Variables	Amount	
Amount	107	100.0
Information Quality	n	%
Good	78	72.9
Not good	29	27.1
Amount	107	100.0
Quality of Service	n	%
Good	61	57.0
Not good	46	43.0
Amount	107	100.0

Table 1. above shows the research variables of electronic medical record system technology based on the system quality dimension, the most is good system quality (55.1%). The information quality dimension, the most is good information quality (72.9%). The service quality dimension, the most is good service quality (57.0%).

Table 2. Frequency Distribution of Electronic Medical Record User Research Variables

Variables	Amount	
Users		
System Usage	n	%
Good	60	56.1
Not good	47	43.9
Amount	107	100.0
User Satisfaction	n	%
Good	59	55.1
Not good	48	44.9
Amount	107	100.0

Table 2 above shows the research variables of electronic medical record users based on the dimensions of system use, the most is good system use (56.1%). Dimension of user satisfaction, the most is good user satisfaction (55.1%).

Table 3. Frequency Distribution of Organizational Research Variables

Variables	Amount	
Organization		
Structure	n	%
Good	76	71.0
Not good	31	29.0
Amount	107	100.0
Environment	n	%
Good	52	48.6
Not good	55	51.4
Amount	107	100.0

Table 3 above shows the research variables of the organization based on the structural dimension, the most is a good structure (71.0%). Environmental dimension, the most is a less good environment (51.4%).

Table 4. Frequency Distribution of Net Benefit Research Variables

Net Benefits	n	%
Good	54	50.5
Not good	53	49.5

Amount	107	100.0
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Table 4 above shows that in the net benefit research variable, the most frequent is good net benefit (50.5%).

1. Bivariate Analysis

The results of the study were conducted using bootstrapping tests to determine whether there is a direct or indirect influence between variables. Hypothesis testing in this study can be done by looking at the results of the p-values.

Table 5. Hypothesis Testing Results

No	Hypothesis	Influence of Variables	P value	Effect	Conclusion
1	H1	Quality of RME system and Use of RME system	0,000	Direct	Significant
2	H2	RME system quality and RME user satisfaction	0,000	Direct	Significant
3	H3	Quality of RME information and Use of RME systems	0,018	Direct	Significant
4	H4	RME information quality and RME user satisfaction	0,018	Direct	Significant
5	H5	RME service quality and Use of RME system	0,000	Direct	Significant
6	H6	RME service quality and RME user satisfaction	0,011	Direct	Significant
7	H7	Use of the RME system and RME user satisfaction	0,000	Direct	Significant
8	H8	RME user satisfaction and Use of the RME system	0,000	Direct	Significant
9	H9	Organizational structure environment	0.004	Direct	Significant
10	H10	Use of the RME system and Net benefit of the RME system	0,000	Direct	Significant
11	H11	RME user satisfaction and Net benefit of RME system	0,000	Direct	Significant
12	H12	Net benefit organizational structure of RME system	0.924	Indirect	Not Significant

From the results of hypothesis testing in Table 5, it can be seen that almost all hypotheses show a significant direct effect. The quality of the electronic medical record (RME) system, information and services has a direct and significant effect on both the use of the RME system and user satisfaction. This indicates that the quality of RME system components is instrumental in determining the effectiveness of use and the level of user satisfaction. In addition, the use of the RME system itself also has a direct effect on user satisfaction, indicating that the more frequently the system is used, the higher the user satisfaction.

On the other hand, hypotheses involving environment and organizational structure showed different results. Although environment has a direct and significant effect on organizational structure (H9), organizational structure does not have a significant effect on the net benefits of RME systems (H12), with a p-value of 0.924. This suggests that organizational structure does not play a direct role in increasing the net benefits generated by RME systems, although other factors such as system usage and user satisfaction have a strong impact on the net benefits of the system.

4. DISCUSSION

Hypothesis 1 (H1) states that the quality of electronic medical record system (RME) has a significant effect on the use of RME in RSUD Beriman Balikpapan, with p value = 0.000 (<0.05), so this hypothesis is accepted. RME is an application of information technology in health care that improves efficiency, accuracy, and quality of hospital services (9). In the context of HOT Fit, the quality of the EMR system greatly influences the level of use. The suitability between system quality, user capabilities, and organizational support can

improve the effectiveness and efficiency of EMR use, and ultimately have a positive impact on the quality of patient care. The use of Electronic Medical Records (EMR) is expected to improve and strengthen the benefits of medical records. The use of EMR is primarily for the benefit of patient services, including clinical (medical) and administrative services. Information generated from EMR is also useful for education, regulation preparation, research, community health management, policy support, and to support referral health services (10).

Hypothesis 2 (H2) states that the quality of electronic medical record (RME) system has a direct effect on user satisfaction at RSUD Beriman Balikpapan, with p value = 0.000 (<0.05), so this hypothesis is accepted. In HOT Fit theory, good RME system quality significantly increases user satisfaction, which reflects the effectiveness of the system in meeting users' needs and expectations. User satisfaction becomes the main indicator in assessing the success of information system implementation such as RME (11). Hypothesis 3 (H3) states that information quality of electronic medical record (RME) has a direct effect on the use of RME system at RSUD Beriman Balikpapan, with p value = 0.018 (<0.05), so this hypothesis is accepted. The results of the study by Pomarida, et al. (2024) showed that information quality has the greatest influence on RME user satisfaction with a regression coefficient value of 0.371(12). The results of Dewi's research (2017) showed that the average assessment result for the quality of medical record information was quite good.(13).

Information quality in the electronic medical record system (RME) has a direct and significant influence on system usage, in accordance with HOT Fit theory. Accurate, complete and relevant information encourages users to utilize RME effectively. The medical record information system is an important part of the hospital information system that provides information services for users, both medical and non-medical, to support decision making and meet health needs (14). Hypothesis 4 (H4) states that information quality of electronic medical record (RME) directly affects user satisfaction at RSUD Beriman Balikpapan, with p value = 0.018 (<0.05), thus this hypothesis is accepted. The results of Ayu's (2022) study show that there is an effect of information quality on user satisfaction with EMR(15).The results of this study are not in line with Dody and Zulaikha (2007) who stated that information quality has no significant relationship with user satisfaction in increasing work effectiveness in their research.(16).

In HOT Fit theory, accurate and reliable information quality increases user trust and satisfaction. Complete data provides a comprehensive picture of the patient, allowing users to make better decisions. Information that is relevant to users' needs also increases the sense of usefulness of the system. A medical record system is said to be of high quality if it provides complete clinical, medical and demographic data, thereby meeting users' needs and increasing their satisfaction (17). In HOT Fit theory, responsive and prompt technical support increases users' trust and their likelihood of continuing to use the system. Good service quality, including speed and accuracy of response, contributes to user satisfaction. The use of Electronic Medical Records (RME) is becoming increasingly important for Indonesian hospitals to improve the efficiency, accuracy and quality of health services, along with advances in information technology and the need for accessibility of medical information (Uslu & Stausberg, 2021).

Hypothesis 6 (H6) states that the service quality of electronic medical record (RME) directly affects user satisfaction at RSUD Beriman Balikpapan. According to HOT-Fit theory, user satisfaction can be improved by alignment between human, organizational, and technological factors. Regular use of RME makes users more familiar and comfortable, increasing satisfaction. Users feel more satisfied if the system helps make their work easier, such as patient data management and medical information access, and if the system is easy to use and responsive. Based on the results of research by Wahyudi & Wahab (2024), the use of EMR has a strong and influential relationship with user satisfaction. Satisfaction in using EMR increases because the system used can be optimized through direct interaction between the user and the computer. Health worker satisfaction will increase if electronic medical records are used properly and continuously (18).

Research hypothesis 7 (H7) states directly that the use of electronic medical record systems has a direct effect on user satisfaction with electronic medical record systems at Beriman Balikpapan Regional Hospital.

A significant relationship is also indicated by the significant value of p value = 0.000 because $0.000 < 0.05$ so that in this case research hypothesis 7 (H7) is accepted. This is in line with the results of research by Pauziah, Purbayanti (2023) which shows that there is a relationship between the use of electronic medical records and the satisfaction of health workers in the inpatient room of the Muhammadiyah Hospital in 2022 with the chi square statistical test obtained p -value = 0.018. Within the HOT Fit framework, users who are satisfied with the system tend to have a positive experience in using EMR. This experience includes ease of use, quality of information, and service support. When users feel that the system meets their expectations, they are more likely to use it consistently, user satisfaction increases motivation to use the system. Satisfied users are more likely to explore new features and use the system more actively, which in turn increases system adoption. User satisfaction is the feeling of pleasure or displeasure that arises after comparing their perceptions of their work.(12). User satisfaction in using electronic medical records is one indicator of success in implementing this information system.(19). User satisfaction is often used to measure the success of electronic medical record implementation.(20).

Research hypothesis 8 (H8) states directly that user satisfaction with the electronic medical record system has a direct effect on the use of the electronic medical record system at Beriman Balikpapan Regional Hospital. A significant relationship is also indicated by the significant value of p value = 0.000 because $0.000 < 0.05$ so that in this case research hypothesis 8 (H8) is accepted. In line with research conducted by Utami and Muhlizardi (2024) showing user satisfaction with the implementation of Electronic Medical Records (EMR) at PKU Muhammadiyah Karanganyar Hospital, users of electronic medical records feel satisfied (51.2%)(20).

The organizational environment is enhanced by financing, government policies, political interests, localization, competition, inter-organizational relationships, population, and external communications.(21). Research hypothesis 9 (H9) states directly that the environment has a direct effect on the organizational structure at RSUD Beriman Balikpapan. A significant relationship is also indicated by the significant value of p value = 0.004 because $0.004 < 0.05$ so that in this case research hypothesis 9 (H9) is accepted. The environment has a significant influence on the organizational structure within the HOT-Fit theoretical framework. The fit between external and internal environmental factors with the organizational structure, as well as human and technological factors, is very important to achieve organizational effectiveness and sustainability. Organizations that are responsive to environmental changes tend to be better able to adapt and innovate, resulting in a more optimal structure.

Research hypothesis 10 (H10) states directly that the use of the system has a direct effect on the net benefit of the electronic medical record system at RSUD Beriman Balikpapan (p value = 0.000) because $0.000 < 0.05$ so that in this case the research hypothesis 10 (H10) is accepted. In the HOT Fit framework, the more frequently the system is used, the more data and information is generated. Intensive use allows users to take full advantage of the system's features, which can improve the efficiency and effectiveness of the work process. Effective use of the system, for example, fast access to information, accurate patient data management, and collaboration between users will increase productivity and reduce errors. This has a direct impact on the benefits felt. High system use can reduce the time required to access information and process data, thereby increasing operational efficiency in health facilities. This can contribute to reducing costs and time spent on administrative tasks. With more accurate and easily accessible information, users can make better medical decisions, which in turn improves the quality of patient care. This is one of the main benefits expected from the use of EMR. The results of research conducted by Wirajaya and Nugraha (2022) stated that a good and quality system will provide very good benefits not only to system users but also to the overall running of the system in providing health services.(22).

Hypothesis 11 (H11) states that user satisfaction directly affects the net benefits of electronic medical record system (RME) at RSUD Beriman Balikpapan, with p value = 0.000 (< 0.05), so this hypothesis is accepted. In HOT Fit framework, user satisfaction increases if the system fits their needs, supported by adequate training and technical support. Satisfied users tend to be more efficient, reduce errors, and trust the system, which increases consistent use as well as the net benefits of RME. High satisfaction also drives

productivity and positive feedback for system improvements. The benefits felt in the sense that work is completed more quickly, performance increases, productivity increases, work is more effective, making work easier and overall beneficial, then people will be motivated to use the system so that they can improve their work performance.(23).

Research hypothesis 12 (H12) states that there is an indirect relationship between structure and net benefit of electronic medical record system at Beriman Balikpapan Hospital. Based on the statistical analysis conducted, it is known that the structure of system users on the net benefit of electronic medical record system is indicated by a significant value of $0.924 > 0.05$. So in this case, hypothesis 12 (H12) is rejected, there is no indirect influence of structure on net benefit of electronic medical record system at Beriman Balikpapan Hospital. The results of Supriyono's (2020) study showed a significant relationship indicated by a significant value <0.001 , suggesting that organizational, leadership and regulatory factors have a significant relationship with net benefit (24). In line with that, Mudiono (2018) stated that organizations have a positive influence on benefits, suggestions from organizations can significantly increase the benefits of the system (25).

Leadership, top management support and staff support are important parts in measuring the success of the system. In the context of Hot Fit theory, there is likely no direct influence on net benefits, often more influenced by human factors, such as user skills and attitudes towards technology, and the quality of the system itself. Although organizational structure is important, without good skills and technology support, the benefits of EMR may not be maximized. Net benefits are also influenced by external factors such as regulations, government policies and industry trends. Organizational structure may not be influential enough if external factors dominate in determining the results. Organizational structure is important in the overall context, there is no significant direct influence on the net benefits of the electronic medical record system if it is not supported by other factors, such as user skills and technology quality. The balance between these factors will further determine the effectiveness and benefits obtained from the use of EMR (26).

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ETHICS CODE: This study was conducted under ethical approval issued by the Faculty of Public Health with code number 1952/UN4.14.1/TP.01.02/2024, which ensures that all procedures and protocols comply with established ethical standards.

AUTHOR CONTRIBUTIONS: Agus Jiwani, Noer Bahry Noor, Irwandi: Study concept and design. Agus Jiwani: Collecting and processing research data. All authors: preparation of publication manuscript.

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REFERENCES

1. Lee, J., Kuo, Y. F., & Goodwin JS. The effect of electronic medical record adoption on outcomes in US hospitals. *BMC Health Services Research*, 13(1). <https://doi.org/10.1186/1472-6963-13-39>. 2013;
2. Hatta. Tujuan Kegunaan, Pengguna dan Fungsi Rekam Medis Kesehatan. Dalam: *Pedoman Manajemen Informasi Kesehatan*. Jakarta: Penerbit Universitas Indonesia. 2011;
3. Saputro AD. Peningkatan Mutu & Efisiensi Pelayanan Melalui Implementasi Rekam Medis Elektronik Di RS Bethesda Yogyakarta. *Seminar Nasional Rekam Medis & Informasi Kesehatan*, 54–58. 2020;
4. Indrayati, L., Bahry Noor, N., Rivai, F., & Muhammad Saleh L. Factors Affecting User Satisfaction and Benefits of SIMRS at the Regional General Hospital Beriman. *Turkish Journal of Computer and Mathematics Education*, 12(13), 1565–1572. 2021;

5. Yusof, M. M., Kuljis, J., Papazafeiropoulou, A., & Stergioulas LK. An evaluation framework for Health Information Systems: human, organization and technology-fit factors (HOT-fit). *International Journal of Medical Informatics*, 77(6), 386–398. <https://doi.org/10.1016/J.IJMEDINF.2007.08.011>. 2008;
6. Bayu, A., & Izzati S. Evaluasi Faktor-Faktor Kesuksesan Implementasi Sistem Informasi manajemen Rumah Sakit di PKU Muhammadiyah Sruweng dengan Menggunakan Metode. *Seminar Nasional Informatika Medis*, November, 78–86. 2013;
7. Rozanda NE. Perbandingan Metode Hot Fit dan Tam dalam Mengevaluasi Penerapan Sistem Informasi Manajemen Kepegawaian (SIMPEG) (Studi Kasus : Pengadilan Tata Usaha Negara Pekanbaru). 2017;
8. Djohan YD. Analisis Penerimaan Learning Management System Pada Kuliah. *itk. ac. id Menggunakan Pendekatan Technology Acceptance Model (TAM)* . (Doctoral Dissertation, Institut Teknologi Kalimantan). 2021;
9. Agustin D. Efektivitas Rekam Medis Elektronik (RME) Instalasi Rawat Jalan Di Rumah Sakit Umum Aliyah li Kota Kendari Tahun 2024. 2024;4(4):238–47.
10. Tuti SO, Freddy WW, Diana VDD. Faktor Faktor yang Mempengaruhi Kelengkapan Pengisian Rekam Medis Elektronik Instalasi Rawat Jalan RSUP Prof Dr. R. D. Kandou Manado. *J Kesehat Tambusai*. 2023;4(2):1210–23.
11. Wahyudi A, Wahab S. Pengaruh Penggunaan Rekam Medis Elektronik Terhadap Kepuasan Petugas Rekam Medis Di RS X. *PREPOTIF J Kesehat Masy*. 2024;8(2):2893–9.
12. Simbolon P, Ginting A, Boris J, Simbolon N. Kualitas Sistem Dan Informasi Dalam Penggunaan Rekam Medis Elektronik Rumah Sakit Santa Elisabeth. 2023;9(1):112–6.
13. Dewi CK. Penilaian Kualitas Informasi Dokumen Rekam Medis Rawat Jalan Information. 2017;5:2–4.
14. Hadiyanto M, Purnami CT, Mawarni A. Hubungan Kualitas Informasi Sistem Rekam Medis Rawat Jalan Elektronik Dengan Kepuasan Pengguna Di RSUD Dr. (H.C) Ir Soekarno. *J Kesehat Masy*. 2020;8(6):739–45.
15. Ayu. Pengaruh Kualitas Sistem Dan Informasi Terhadap Kepuasan Pengguna Rekam Medis Elektronik Di RSUD Kota Tangerang. <https://digilib.esaunggul.ac.id/pengaruh-kualitas-sistem-dan-informasi-terhadap-kepuasan-pengguna-rekam-medis-elektronik-di-rsud-kota-tangerang-23484.html>. 2022;
16. Astianurdin D. Pengaruh Sistem Informasi Manajemen Terhadap Efektifitas Kerja Pegawai Rekam Medik (Kajian Pada Rumah Sakit Umum Daerah Lasinrang Kabupaten Pinrang Tahun 2017). *J Ilm Kesehat Diagnosis*. 2017;11(4):456–460. 2017;
17. Andriani D. Analisis Kesuksesan Implementasi Rekam Medis Elektronik Di Rs Universitas Gadjah Mada. *J Sist Inf*. 2017;13(2):90. doi:10.21609/jsi.v13i2.544. 2017;
18. Simbolon P, Saragih P, Pardede IBY. Hubungan Penggunaan Rekam Medis Elektronik dengan Kepuasan Tenaga Kesehatan di Rumah Sakit Santa Elisabeth Medan. *Promot Prev*. 2023;6(4):558–63.
19. Rahmatulloh A. Hubungan penggunaan rekam medis elektronik dengan kepuasan tenaga kesehatan di unit rawat jalan Rumah Sakit Islam Jakarta Cempaka Putih. 2017;
20. Utami ACM. Analisis Tingkat Kepuasan Pengguna Terhadap Penerapan Rekam Medis Elektronik (RME) di RS PKU Muhammadiyah Karanganyar Adelia Cahya Utami Hasil survei pada tahun 2022 terhadap 737 rumah sakit menunjukkan bahwa hanya 203 rumah medis elektronik yang terint. 2024;1(3):17–27.
21. W.P. Hapsari et. all. Literature Review of Human, Organization, Technology (HOT) – Fit Evaluation Model,” in *Proceedings of the 6th International Seminar on Science Education (ISSE 2020)*, 2021. 2020;
22. Wirajaya N. Evaluasi Sistem Informasi Manajemen Rumah Sakit (SIMRS) dengan metode HOT-Fit di Rumah Sakit Daerah Mangusada. *Jurnal Manajemen Kesehatan*,. Vol.8, no.1. 124-136. 2022;

23. Setyowati, E. O. T., & Respati AD. Persepsi Kemudahan Penggunaan, Persepsi Manfaat, Computer Self Efficacy, Dan Kepuasan Pengguna Sistem Informasi Akuntansi. Jurnal Riset Akuntansi Dan Keuangan, 13(1), 63. <https://doi.org/10.21460/jrak.2017.131.281>. 2017;
24. Supriyono. Evaluasi Sistem Informasi Rumah Sakit Dengan Metode HOT Fit di Rumah Sakit Umum Daerah Raden Mahatter Jambi. 2016;
25. Mudiono. Analisis Penerapan Sistem Informasi Manajemen Rumah Sakit dengan Model Human Organization Technology (HOT)-Fit di RSUD Dr. H. Koesnadi Bondowoso. 2018;
26. Perdana MW, Herdiansyah MI, Mirza AH. Analisis Faktor-Faktor Keberhasilan Dan Implementasi Guru Pembelajar Online (Gpo) Pada Guru Smkn Di Kota Palembang Menggunakan Kerangka Kerja Hot-Fit Berbasis Smartpls. J Digit Teknol Inf. 2018;1(1):27.