



Analysis of Service Quality in Pharmaceutical Installations on Outpatient Patient Satisfaction

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Abstract

Direct and accountable services provided to patients in regards to pharmaceutical preparations, with the end goal of enhancing patients' health and well-being. This research aimed to determine how satisfied outpatients were with the Pharmacy Installation at Kabanjahe Regional General Hospital. Studies are quantitative, and they use a cross-sectional approach. In the period of November 2018 - January 2019, the sample size was 13,359 outpatients from the Pharmacy Installation at the Kabanjahe District General Hospital. With the use of proportionate sampling methods, we were able to collect data from 87 individuals. Multiple Logistic Regression Test ($p = 0.05$) analysis of data gathered through questionnaire-based interviews and observations. Multiple logistic regression analyses reveal that the variables "reliability" ($p = 0.023$), "worry" ($p = 0.032$), and "direct evidence" ($p = 0.016$) all have a significant impact on patient satisfaction. The Outpatient Pharmacy at Kabanjahe Regional General Hospital found that the variable "Concern" had the largest effect on patient satisfaction (Exp value (B) of 146,434). This research concludes that there is a clear correlation between patient satisfaction and factors like dependability and care. In order to boost patient satisfaction, it is suggested that the administration at Kabanjahe Regional General Hospital implement punishments for personnel who have been subpar in their service delivery.

Introduction

A community's health endeavor is any coordinated and long-term push to maintain and improve people's health. Government and non-government organizations both have a role in these efforts, which run the gamut from illness prevention and promotion through treatment and rehabilitation. Principles of integration and sustainability guide the implementation of these activities. According to Hospitals Law No. 44 of 2009, a "patient" is defined as "any person who seeks medical advice or help for the purpose of obtaining essential healthcare services in a hospital environment," whether that be by direct or indirect methods. In- and out-patient care, as well as 24-hour emergency services, are just some of the many medical options available at hospitals.

When discussing international competition, hospital services have a prominent position. Services in the medical, paramedical, and health-care support fields fall under this category.

This problem is widespread in the pharmaceutical sector, including its medical support services (Saputra, 2018). Customers are more likely to be pleased when they get excellent service. It's possible that customers' levels of satisfaction with a company's products have a substantial impact on their opinions of those products. The hospital places a premium on measuring the efficacy of its services and learning from the feedback of its patients and visitors. In order to provide services that may achieve maximum levels of client satisfaction, it is important to have this as a benchmark for improvement. Pharmaceutical service is defined by Permenkes No. 72 of 2016 as a service directly and responsibly rendered to patients in regard to pharmaceutical preparations, with the ultimate goal of achieving decisive results that improve the quality of patients' lives.

Hospital pharmacy services are an important part of the healthcare delivery system because they put the health of patients first by making pharmaceuticals, medical supplies, and equipment easily accessible and affordable. Included in these offerings is the provision of clinical pharmacy services to people of varying socioeconomic backgrounds. A new patient-centered paradigm embodying the principles of pharmaceutical care is required to meet the rising expectations of patients and society for improved pharmaceutical services. The old approach focused mostly on medications.

There is an ongoing attempt to improve the efficiency of health services, especially hospital services, in response to the rising expectations of the general population. With any luck, this tweak will boost their efficacy and efficiency, resulting to happier patients, loved ones, and neighbors. To succeed in the face of fierce global competition, businesses must focus on providing excellent customer service. Rundengan (2012) investigated the factors that contributed to patient satisfaction at the pharmacy at Noongan Hospital and found that pharmacy employees, drug services, and support services all had a significant role. In the long run, this connection improves patients' overall pleasure.

Tiana (2013) observed that providing high-quality services has a good effect on patient satisfaction and motivates people to return to RSUD Abdul Wahab Sjahranie Samarinda for future healthcare needs. The hospital's first priority is earning the patients' confidence in the quality of care they will get.

Publicly funded and operated by the Karo Regional Government, the Kabanjahe Regional General Hospital serves the surrounding communities. According to the Hospital Classification Certificate mandated by Decree of the Minister of Health of the Republic of Indonesia No. HK.02.03/I/2000/2014 dated August 12, 2014, the facility has been legally designated as a General Hospital of Class C. The pharmaceutical facility at Kabanjahe Regional General Hospital (RSUD) is only one of several departments of the hospital that are devoted to providing medical treatment.

Kabanjahe Hospital's Pharmacy (IFRS) is conveniently located next to the clinic. A certified pharmacist manages the pharmacy with the help of 12 pharmacy technicians and an honorary pharmacist. In compliance with IFRS (International Financial Reporting Standards), the Hospital Pharmacy Installation dispenses prescribed drugs to outpatients. There are a number of critical steps involved in providing prescription services, including as receiving and reviewing prescriptions, preparing drugs, giving them to patients, and keeping detailed records and paperwork. The submitted statement does not comply with the service standards specified in Permenkes No. 56 of 2014, which requires Type C Hospitals to employ no less than eight pharmacists.

Kabanjahe Regional General Hospital's Pharmacy Installation reports that in 2016, the hospital served 42,250 outpatients. There was a significant increase in the number of outpatient patients in 2017, with an additional 48,325 people visiting the pharmacy for medical attention.

Based on interviews with a small subset of ambulatory patients waiting for prescription fulfillment, the researcher found that these patients were dissatisfied with the lengthy wait time to get their medications and the poor presentation of drug-related information. The dataset included information on 13,359 outpatient general patients during the months of November 2018 through January 2019. The number of patients fluctuated from month to month throughout this time period.

Hospital pharmacies are required to meet certain standards set out by the Ministry of Health of the Republic of Indonesia (2008). The Minimum Service Standards (MSS) for the pharmaceutical industry include a wide range of important metrics. Drug service waiting times should be no more than 30 minutes, and combination medicine service waiting times should be no more than 60 minutes. In addition, the SPM calls for a complete lack of medication administration errors, a minimum of 90% customer satisfaction, and a formulary adherence rate of 100% in prescription writing.

Quality is defined as "the extent to which something meets expected criteria" (Azwar, 1996). Quality in hospital pharmacy care is defined by the Pharmacy Service Standards in Hospitals as providing services at a degree of excellence that results in patient satisfaction that is consistent with the general public's level of satisfaction. In addition, it stresses the need of providing services in compliance with the pharmaceutical industry's code of ethics (Prasetya, 2009). Patient satisfaction, often known as customer satisfaction, is the degree to which a product's actual or perceived performance fulfills the expectations of its users. Dissatisfaction among buyers happens when a product's performance falls short of their expectations. To satisfy customers, a company must provide results that are at least as good as those predicted, as stated by Kothler (2003). As stated above, patient happiness is an anticipated outcome of providing high-quality services, and it is this satisfaction that has a major bearing on whether or not a patient would return to the same healthcare provider in the future. Ensuring patient satisfaction may help spread the word about the hospital since it improves both the patient and the hospital's standing in the community.

Empirical data collected through observations and interviews with a sample of 10 outpatients at the pharmacy facility within the Kabanjahe Regional General Hospital indicated that 70% of the participants expressed concerns over extended waiting durations, inadequate availability of pharmaceutical supplies, high costs associated with medications, and suboptimal conditions within the waiting areas.

Methods

The research was conducted using a descriptive research design with a cross sectional survey method. Descriptive research method is a research method that is carried out with the main objective to make an objective picture or description of a situation. A cross-sectional survey is a study to study the dynamics between risk factors and effects, by way of approach, observation or data collection at one time (point time approach) (Notoatmodjo, 2005). The population is all subjects or all objects with certain characteristics to be studied and not only the subjects or objects studied, but all the characteristics or properties of a particular subject or object. The population in this study were all outpatients at the Pharmacy Installation at the Kabanjahe Regional General Hospital. The outpatient population in November 2018 - January 2019 was 13,359 patients. The sample in this study were outpatients at the pharmacy installation at the Kabanjahe Regional General Hospital who met the inclusion criteria then it is estimated that the number of respondents who will be studied is as many as 87 outpatients at RSUD Kabanjahe. In accordance with the research objectives, the sampling technique used was purposive sampling, namely a sampling technique by selecting samples from among the populations according to what the researcher wanted (objectives/problems in the study), so that these samples could represent previously known population characteristics.

Results and Discussion

Univariate analysis

Patient Characteristics Based on Age

In the table below it can be seen that the age of the most respondents ranged from 40-50 years, namely as many as 27 people (31.0%) and aged 29-39 years as many as 26 people (29.9%) and the lowest age was 61 years and over as many as 7 people (8.0%).

Table 1. Frequency Distribution of Patient Characteristics by Age

No.	Age	Frequency (f)	Percentage (%)
1	>61	7	8,0
2	51-61	15	17,2
3	40-50	27	31,0
4	29-39	26	29,9
5	18-28	12	13,8
	Total	87	100

Characteristics of Patients by Sex

Based on table 4.2. below it is known that the highest number of respondents are the female gender as many as 46 (52.9%) people while the rest of the male gender as many as 41 (47.1%) people.

Table 2. Frequency distribution of patient characteristics by sex

No	Gender	Frequency (f)	Percentage (%)
1	Man	41	47,1
2	Woman	46	52,9
	Total	87	100,0

Patient characteristics by education

Based on table 4.3. Below the highest number of patients are graduates of high school education as many as 30 people (34.5%) and the least is Not in School as many as 7 people (8.0%).

Table 3. frequency distribution of patient characteristics by education

No.	Education	Frequency (f)	Percentage (%)
1	No School	7	8,0
2	Elementary School	15	17,2
3	Junior School	22	25,3
4	High School	30	34,5
5	College	13	14,9
	Total	87	100

Characteristics of patients by occupation

Based on table 4.4. below that the most jobs are self-employed as many as 28 people (32.2%) and the least are civil servant jobs as many as 9 people (10.3%)

Table 4. frequency distribution of patient characteristics by occupation

No.	Work	Frequency (f)	Percentage (%)
1	Not Working	25	28,7
2	Self employed	28	32,2
3	Farmer	25	28,7
4	Civil Servant	9	10,3

	Total	87	100
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Table 5. Frequency Distribution Table of Reliability Category in Kabanjahe Regional General Hospital Pharmacy

No.	Reliability	Total (n)	Percentage (%)
1	Bad	49	56,3
2	Good	38	43,7
	Total	87	100,0

Based on the table above, it is explained that based on the results of patient answers about reliability, most of them are categorized as bad as many as 49 people (56.3%) and good 38 people (43.7%).

Table 6. Frequency Distribution of Response Categories in Kabanjahe Regional General Hospital Pharmacy

No.	Responsiveness	Total (n)	Percentage (%)
1	Bad	45	51,7
2	Good	42	48,3
	Total	87	100,0

Based on the table above, it is explained that based on the results of patient answers about reliability, most of them are categorized as bad as many as 45 people (51.7%) and good 42 people (48.3%).

Table 7. Frequency Distribution Table of Certainty Category in Kabanjahe Regional General Hospital Pharmacy

No.	Certainty	Total (n)	Percentage (%)
1	Bad	32	36,8
2	Good	55	63,2
	Total	87	100,0

Based on the table above, it is explained that based on the results of patient answers about certainty, most of them are categorized as bad as many as 32 people (36.8%) and good 55 people (63.2%).

Table 8. Frequency Distribution of Concern Categories in Kabanjahe Regional General Hospital Pharmacy

No.	Concern	Total (n)	Percentage (%)
1	Bad	43	49,4
2	Good	44	50,6
	Total	87	100,0

Based on the table above, it is explained that based on the results of answers about care, most of them are categorized as bad as many as 43 people (49.4%) and good 44 people (50.6%).

Table 9. Frequency Distribution of Direct Evidence Categories in Regional General Hospital Pharmacies

No.	Direct Evidence	Total (n)	Percentage (%)
1	Bad	49	56,3
2	Good	38	43,7
	Total	87	100,0

Based on the table above, it is explained that based on the results of answers about direct evidence, most of them are categorized as bad as many as 49 people (56.3%) and good 38 people (43.7%).

Table 10. Frequency Distribution Table of Satisfaction Categories in Kabanjahe Regional General Hospital Pharmacy

No.	Satisfaction	Total (n)	Percentage (%)
1	Not Satisfied	52	59,8
2	Satisfied	35	40,2
	Total	87	100,0

Based on the table above, it is explained that based on the results of respondents' answers, most of them were categorized as dissatisfied as many as 52 people (59.8%) and good 38 people (40.2%).

Bivariate Analysis

Bivariate analysis aims to determine whether there is a relationship between quality of service (reliability, responsiveness, certainty, care, and direct evidence) and patient satisfaction at the outpatient pharmacy of Kabanjahe General Hospital. This bivariate analysis test was carried out using the *chi square* test displayed in a cross-tab *table* with results like the table below.

Relationship of Reliability with Patient Satisfaction

Table 11. Cross-Tabulation between Reliability and Patient Satisfaction in Outpatient Pharmacy at Kabanjahe Regional General Hospital

No.	Reliability	Patient Satisfaction				Total		<i>p value</i>
		Not Satisfied		Satisfied				
		n	%	n	%	N	%	
1	Bad	44	50,6	5	5,7	49	56,3	0,000
2	Good	8	9,2	30	34,5	38	43,7	
	Sum	52	59.8	35	40.2	87	100	

The table above explains that based on the results of cross-tabulation can be seen from 87 respondents (100%), who assessed the reliability service dimension of "Not Good", namely as many as 49 people (56.3%), of whom as many as 44 people (50.6%) "Dissatisfied" and 5 people (5.7%) "Satisfied" with service. Meanwhile, those who assessed the dimension of service reliability "Good" were 38 people (43.7%) of whom 8 respondents (9.2%) were "Dissatisfied" and 30 respondents (34.5%) were "Satisfied" with service.

Based on the results of the *chi-square* test of the respondent's reliability service dimension, a *p* value of 0.000 and therefore a *p* value ($0.000 < 0.05$), so that there is a relationship between the respondent's service reliability dimension and patient satisfaction at the Kabanjahe regional public hospital pharmacy.

Relationship between Responsiveness and Patient Satisfaction

Table 12. Cross-Tabulation Table between Responsiveness and Patient Satisfaction in Outpatient Pharmacy at Kabanjahe Regional General Hospital

No.	Ketanggapan	Patient Satisfaction				Total		<i>p value</i>
		Not Satisfied		Satisfied				
		n	%	n	%	N	%	
1	Bad	42	48.3	3	3.4	45	51.7	0.000

2	Good	10	11,5	32	36,8	42	48,3	
	Sum	52	59,8	35	40,2	87	100	

From the cross-tabulation findings above, we may infer that 45 (51.7%) of the 87 respondents (100%), who rated the service dimension as "Not Good," were "Dissatisfied" with the service, while just 3 (3.4% of the sample) were "Satisfied" with the service. There were 42 individuals who gave a "Good" rating for responsiveness in the service they received (48.3%), with 10 people giving a "Dissatisfied" rating and 32 people giving a "Satisfied" rating.

The chi-square test of the respondent's responsiveness service dimension yielded a p value of 0.000, suggesting a significant correlation between the respondent's score on this scale and patients' overall satisfaction with the pharmacy services they received at the Kabanjahe regional public hospital.

Relationship of Certainty with Patient Satisfaction

Table 12. Cross-Tabulation Table between Certainty and Patient Satisfaction in Outpatient Pharmacy at Kabanjahe Regional General Hospital

No.	Certainty	Patient Satisfaction				Total		<i>p value</i>
		Not Satisfied		Satisfied				
		n	%	n	%	N	%	
1	Bad	22	25,3	10	11,5	32	36,8	0,258
2	Good	30	34,5	25	28,7	55	63,2	
	Sum	52	59.8	35	40.2	87	100	

The provided table presents the findings of cross-tabulation analysis, which examines the assessment of service certainty dimension among 87 respondents (100%). The results indicate that 32 individuals (36.8%) rated the service as "Not Good". Among these respondents, 22 individuals (25.3%) expressed dissatisfaction, while 10 individuals (11.5%) reported being satisfied with the service. In the context of service evaluation, it was observed that a total of 55 individuals (representing 63.2% of the sample) rated the certainty dimension as "Good". Among these respondents, 30 individuals (34.5%) expressed dissatisfaction with the service, while 25 individuals (28.7%) reported being happy with the service.

The chi-square test was conducted to examine the association between the respondent certainty service dimension and patient satisfaction at the Kabanjahe regional general hospital pharmacy. The obtained p value was 0.258, indicating that the relationship between these variables was not statistically significant ($p > 0.05$). Therefore, it can be concluded that there was no significant association between the respondent certainty service dimension and patient satisfaction at the mentioned pharmacy.

Relationship of Caring with Patient Satisfaction

Table 13. Cross-Tabulation Table between Concern and Patient Satisfaction in Outpatient Pharmacy at Kabanjahe Regional General Hospital

No.	Concern	Patient Satisfaction				Total		<i>p value</i>
		Not Satisfied		Satisfied				
		n	%	n	%	N	%	
1	Bad	42	48,3	1	1,1	43	49,4	0,000
2	Good	10	11,5	34	39,1	44	50,6	
	Sum	52	59.8	35	40.2	87	100	

Based on the cross-tabulation findings, Table 13 shows that of the 87 respondents (100%), 43 (49.5%) rated the service dimension of "Not Good" care, with 42 (48.5%) rating themselves as "Dissatisfied" and 1 (1.1%) rating themselves as "Satisfied." In contrast, 44 persons (50.6%) evaluated the "Good" level of caring service, with 10 respondents (11.5%) expressing "Dissatisfaction" and 34 expressing "Satisfaction."

In the case of the Kabanjahe regional public hospital pharmacy, the chi-square test of the respondent's caring service dimension yielded a p value of 0.000, indicating a relationship between the respondent's caring service dimension and patient satisfaction.

Relationship of Direct Evidence to Patient Satisfaction

Table 14. Cross-Tabulation Table between Direct Evidence and Patient Satisfaction in Outpatient Pharmacy at Kabanjahe Regional General Hospital

No.	Direct Evidence	Patient Satisfaction				Total		<i>p value</i>
		Not Satisfied		Satisfied				
		n	%	N	%	N	%	
1	Bad	46	52,9	3	3,4	49	56,3	0,000
2	Good	6	6,9	32	36,8	38	43,7	
	Sum	52	59.8	35	40.2	87	100	

The provided table presents the findings of a cross-tabulation analysis, indicating that out of a total of 87 respondents (100%), 49 individuals (56.3%) evaluated the dimensions of direct evidence services as "Not Good." Among these respondents, 46 individuals (52.9%) expressed their dissatisfaction with the service, while 3 individuals (3.4%) reported being satisfied with it. In contrast, the evaluation of the quality of direct evidence service revealed that a majority of participants, namely 38 individuals (43.7%), rated it as "Good." However, a small proportion of respondents, including 6 individuals (6.9%), expressed dissatisfaction with the service, while 32 respondents (36.8%) reported being satisfied with it.

The chi-square test yielded a p-value of 0.000 for the service reliability dimension of the respondents. The obtained p-value ($0.000 < 0.05$) indicates a significant relationship between the direct evidence service dimension of the respondents and patient satisfaction in the pharmacy at Kabanjahe General Hospital.

Multivariate Analysis

The present research used multivariate analysis via the utilization of multiple logistic regression tests. This statistical technique is utilized to examine the impact of many independent factors on categorical dependent variables that possess a dichotomous or binary nature. The logistic regression prediction model incorporates variables that have a p-value of less than 0.25 in the bivariate analysis. Based on the bivariate analysis conducted using the chi-square test, it has been determined that several independent variables, namely reliability, responsiveness, caring, and tangible, exhibit a p-value of less than 0.25. Consequently, these variables are considered potential candidates for inclusion in the modeling process. Conversely, the variable of certainty exhibits a p-value exceeding 0.25, rendering it unsuitable for inclusion in the modeling process.

Table 15. The Effect of Service Quality (Reliability, Caring, and Real) on Patient Satisfaction in Outpatient Pharmacy at Kabanjahe Regional General Hospital

No.	Independent Variables	B	P value	Exp (B)
1	Reliability	3,572	0,023	35,580
2	Concern	4,987	0,032	146,434

3	Direct Evidence	3,818	0,016	45,530
	<i>Constant</i>	-7,500	0,001	0,001

The presented table displays the outcomes of multivariate analyses conducted through multiple logistic tests. The findings indicate that the variable with the greatest influence on patient satisfaction in pharmaceutical services is concern (empathy), as evidenced by a statistically significant p-value of 0.032, which is less than the predetermined significance level of 0.05. Furthermore, the exponential value (B) of 146.434 suggests that patients influenced by the dimension of caring services (empathy) have a 146.4 times higher likelihood of experiencing satisfaction compared to patients unaffected by the caring service dimension (empathy).

Interpretation of Logistic Regression Analysis Model Summary

Table 16. Analysis Results of Logistic Regression Test Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	17,379a	0,683	0,922

For example, the Pseudo R Square value explains the ability of the independent variable (Reliability, Caring, Direct Evidence) in explaining the dependent variable (Patient Satisfaction) using the values of Cox & Snell R Square and Nagelkerke R Square, as shown in the table above. Nagelkerke's R-squared = 0.922, and Cox and Snell's R-squared = 0.683, indicating that the independent variable (reliability, responsiveness, care, and direct evidence) is capable of explaining the dependent variable (Patient Satisfaction) to a degree of 92.2 percent, with 100 percent minus 92.2 percent = 7.8 percent remaining unexplained.

$$F(z) = \frac{1}{1 + e^{(a + \beta_1 X_1 + \beta_2 X_2 + \dots + \beta_3 X_3)}}$$

$$F(z) = \frac{1}{1 + e^{(3,572 + 4,987 + 3,818)}}$$

$$= 0,922$$

Information:

F(z) : Probability

a : Konstanta (*intersep*)

$\beta_1, \beta_2, \dots, \beta$: Regression coefficient of predictor variable (*slope*)

X₁, X₂, . . . X_n : The predictor variable whose effect will be studied

e : Error rate

The magnitude of the probability or possibility of patient satisfaction influenced by variables of reliability, responsiveness, care, and direct evidence is 92.2% and there are 7.8% of other factors outside the variables that were not studied in this study.

The Effect of Reliability on Patient Satisfaction at the Outpatient Pharmacy Installation of Kabanjahe Hospital

Providers' dependability, precision, and uniformity in delivering services constitute reliability. For goods and services to be considered reliable, they must inspire confidence and be traceable. When a product or service is accurate, it performs as described. For health care to be consistently consistent, it must always provide as promised. Timeliness of service, registration

processing, and examination/treatment start times, as well as the congruence between patient expectations and actual experience, all go into the evaluation of a hospital's efficiency.

From the data collected, we can conclude that 87 participants (100.0%) assessed the service dependability aspects as "Not Good," 56.3% were "Not Satisfied," and 5.7% were "Satisfied." While 38 individuals (43.7%) rated the dependability of the service as "Good," just 8 people (9.2%) were dissatisfied with it, while 30 people (34.5%) were happy with it.

A sig-p value of 0.023 0.05 for the reliability variable indicates that the reliability dimension significantly affects pharmacy patient satisfaction at Kabanjahe General Hospital. High reliability influences patient satisfaction as much as 35.580 times as much as poor reliability, according to the Odds Ratio values of the dependability variable. Subtract 3.572 from 35.580 to get value B. Since dependability has a positive B value, it contributes to higher levels of patient satisfaction.

Ability to provide as promised (in terms of time, consistency, speed, and quality of service) is another aspect of reliability. A company's service credibility may rise or fall based on how well it delivers on its commitments. Another indicator of a company's competence is its track record of delivering as promised. To put it another way, dependability is a quality that indicates the likelihood that a product will perform as expected over a certain time frame and in a given set of environmental circumstances (Nasyrah & Darwis, 2017).

By contrasting the actual care with the care the patient had anticipated, we may gauge the quality of the service. A service is considered high-quality if it lives up to, or exceeds, its customers' expectations. Dissatisfaction, frequently expressed via complaints, demonstrations, and fury, is the result when services fall short of patients' expectations. If a patient is unhappy with the care they get at one hospital, they are more likely to switch to another (Winarno, 2015).

The correlation between service quality and patient satisfaction at Ampana Hospital in Tojo District, Indonesia: a study by Siti Nurhaida for the UNA-UNA"

Researchers have found evidence that certain pharmaceutical officers are still negligent in their jobs; these officers were either hard to see or didn't put their best foot forward while interacting with patients. Patients at Kabanjahe General Hospital are likewise unhappy with the trustworthiness of the pharmacy personnel.

The Effect of Responsiveness on Patient Satisfaction in the Outpatient Pharmacy Installation at the Kabanjahe Regional General Hospital

Responsiveness refers to the degree of attentiveness and promptness shown by workers in their interactions with consumers, including their attentiveness in attending to customer needs, efficiency in processing transactions, and effectiveness in addressing customer or patient grievances (Nasyrah & Darwis, 2017).

The findings indicated that of the 87 participants (100%) included in the study, 45 individuals (51.7%) expressed a rating of "Not Good" for the responsiveness aspects. Of these respondents, 42 individuals (48.3%) reported being "Not Satisfied" with the service, while 3 individuals (3.4%) indicated being "Satisfied". A total of 42 individuals (48.3%) evaluated the responsiveness service component as "Good." Among these respondents, 10 individuals (11.5%) expressed their dissatisfaction with the service, while 32 individuals (36.8%) reported being satisfied with it. The variable of responsiveness has a sig-p value of 0.050, which is less than the conventional threshold of 0.05. This indicates that the dimension of responsiveness does not have a statistically significant impact on patient satisfaction within the context of the pharmacy at the Kabanjahe General Hospital.

Responsiveness is a policy that aims to facilitate and expedite the provision of services to clients. The prompt execution of effective resolutions to failures in a professional way within

the service industry may significantly contribute to the overall impression of service quality. This kind of concern may be executed either by acquiring knowledge or explanations, or by engaging in behaviors that are viewed as advantageous by consumers (Nasyrah & Darwis, 2017).

The patient's opinion of the health services received serves as an indicator of the quality of such services, and this perspective plays a significant role in shaping the overall image of the healthcare system. The concept of image may be divided into two primary components, namely functional and emotive. The functional component pertains to observable attributes that can be readily quantified, while the emotional component is linked to the psychological aspect including emotions and attitudes towards an organization.

Kotler (2003) posited that post-purchase behavior, specifically repurchasing interest, is influenced by the amount of pleasure or dissatisfaction experienced by consumers after acquiring a product. This implies that future customers might be affected by the presence of discontent with the product.

According to Melinda, the crucial factors contributing to the success of health services include the promptness of service, amicability, efficacy of interventions, and provision of comfort to patients and other visitors. The active support and unwavering dedication of officers play a pivotal role in propelling the development of the puskesmas. According to Noor, the emphasis in assessing the quality of health services is mostly on the qualities of responsiveness shown by healthcare professionals.

According to the findings of researchers, it has been shown that there exists a subset of pharmaceutical professionals that exhibit a diminished level of responsiveness when it comes to delivering services to patients. In instances when patients express concerns or have inquiries about the medication, the personnel does not promptly address these issues.

The Effect of Certainty on Patient Satisfaction in the Outpatient Pharmacy Installation at the Kabanjahe Regional General Hospital

The level of happiness that patients have with the treatments they get in hospitals depends greatly on the quality of the services they receive. By providing care that is in line with established standards, hospitals may ensure that their patients get the kind of attention they need and want, thereby earning the respect of those patients. According to Winarno (2015), a service is of high quality if it satisfies the hopes, dreams, and requirements of its users.

Out of a total of 87 respondents (100%), 32 (36.6%) assessed at least one aspect of the assurance service as "Not Good," while another 25.3% were "Not Satisfied" and just 11.5% were "Satisfied." In contrast, 63.2% of respondents rated the certainty of the service as "Good," with 25 (28.7%) reporting satisfaction and 30 (34.5%) expressing dissatisfaction.

There is no statistically significant relationship between the certainty variable and patient satisfaction in the pharmacy at the Kabanjahe regional general hospital ($\text{sig-p} = 0.249 > 0.05$). Guaranteeing excellent job and winning over patients' faith and confidence is the staff's competence, friendliness, and capacity to do duties on the go. Knowledge is indicative of trustworthiness; friendliness and politeness of demeanor are indications of focus.

In order to provide assurance, staff members must be competent in a number of areas, such as product and service knowledge, customer service expertise, information dissemination, information security, and customer confidence in the company. There are other dimensions at play in this guarantee (Nasyrah & Darwis, 2017).

Evaluation of police officers' expertise, skill, politeness, and trustworthiness in providing service assurances that make people feel safe and secure.

The study by Dwidayani Wira, titled "The Relationship Between Perceived Responsiveness and Perceived Empathy with Patient Satisfaction at Wangaya Hospital Denpasar," looked at the correlation between these two factors and patient happiness. The findings demonstrated a correlation between guarantee and patient satisfaction at Wangaya Hospital in Denpasar ($p = 0.033$; Wira et al., 2014).

Research by Siti Nurhaida titled "The Relationship between Quality of Service and Inpatient Satisfaction at Ampana Hospital, Tojo District UNA-UNA". Researchers have shown that some patients are unsatisfied with the level of assurance they get from their interactions with police and pharmacists since neither displays a firm commitment to either group.

The Effect of Concern for Patient Satisfaction in the Outpatient Pharmacy Installation at the Kabanjahe Regional General Hospital

The findings of the study, which had 87 participants (100%), indicate that 43 individuals (49.4%) rated the dimension of caring service as "Not Good". Among these respondents, 42 individuals (48.3%) expressed their dissatisfaction with the service, while 1 person (1.1%) reported being satisfied. Among the individuals who evaluated the extent of caring service, a majority of 44 individuals (50.6%) rated it as "Good". However, a subset of 10 respondents (11.5%) expressed their dissatisfaction by rating it as "Not Satisfied", while 34 respondents (39.1%) reported being "Satisfied" with the service.

The variable of caring demonstrates a statistically significant effect on patient satisfaction in the pharmacy setting at Kabanjahe General Hospital, as shown by a sig-p value of 0.032, which is less than the conventional threshold of 0.05. The obtained odds ratio for the variable of caring, which is 146.434, indicates that a higher level of worry significantly impacts patient satisfaction to a magnitude that is 146.434 times more than the impact of a lower level of concern. The value of B is determined by taking the natural logarithm of 146.434, resulting in a value of around 4.987. Due to the positive B value, the act of caring has a positive impact on patient satisfaction.

This study aligns with the findings of Yuniarti (2015), who established a correlation between the quality of hospital services in terms of empathy and the satisfaction level of BPJS patients, with a statistically significant p-value of 0.000 ($p < 0.05$). The findings presented in this study align with the research conducted by Ulinuha (2014), whereby a p-value of 0.003 was determined via the use of the chi-square test at a confidence level of 95%. This implies that the p-value is less than the predetermined significance level of α (5%). The p-value indicates the extent to which physicians and nurses are capable of delivering personalized services, offering aid and specialized attention to patients, as well as the patient's responsibility for their own comfort and safety. Additionally, it reflects the willingness of doctors and nurses to assist patients. Healthcare providers strive to provide high-quality care to patients, which encompasses several aspects such as developing effective communication connections and comprehending client demands. These efforts are shown via the provision of attentive and responsive services to each individual patient.

The concept of empathy encompasses several dimensions, including as communication, relationships, and the ability to attentively and comprehensively grasp customer demands. When customers perceive that corporate personnel possess the ability to empathize with them, they are more likely to exhibit a reduced level of hesitation in regards to their continued consumption of the services offered by the organization. The indicators utilized to assess the quality of service for the Empathy variable encompass four statements pertaining to empathy. These statements include the provision of individualized attention to each patient, addressing the needs and preferences of patients, offering services to all patients without discrimination, and ensuring the availability of health services around the clock. In relation to this variable, a majority of respondents (61.62%) expressed a level of satisfaction classified as "quite satisfied"

with regards to giving special attention to each patient. Additionally, 49.49% of respondents reported being satisfied with the provision of care that addresses the needs and desires of patients. Furthermore, a majority of respondents (61.61%) indicated a level of satisfaction classified as "quite satisfied" with the provision of services to all patients without any form of selectivity. Lastly, 59.59% of respondents expressed a level of satisfaction classified as "quite satisfied" due to the availability of 24-hour health services.

Based on the researchers' findings, it is evident that not all pharmacists exhibit care or empathy, since empathy is not universally inherent in individuals. The officer's display of empathy towards the patient is likely to foster a sense of trust and confidence in the healthcare services being provided. If the level of empathy shown by the officer towards the patient is high, it has the potential to foster feelings of comfort and trust in relation to the services being rendered. The provision of satisfactory services to patients is essential in establishing a sense of comfort and trust among them. This, in turn, contributes to the overall satisfaction experienced by patients.

The Effect of Direct Evidence on Patient Satisfaction at the Outpatient Pharmacy Installation at the Kabanjahe Regional General Hospital

From the data collected, we can conclude that out of a total of 87 respondents (100%), 49 (56.3% of the sample) rated the quality of the direct evidence service as "Not Good," while another 52.9% (46 of the sample) were "Not Satisfied" and 3.4% (3 of the sample) were "Satisfied" with the service. While 38 persons (43.7%) found the direct evidence service to be "Good," 6 respondents (6.9%) were "Not Satisfied" and 32 respondents (36.8%) were "Satisfied."

A sig-p value of 0.010 0.05 for the direct evidence variable indicates that the direct evidence dimension significantly affects pharmacy patient satisfaction at Kabanjahe General Hospital. The direct evidence variable's OR of 45.530 indicates that it may affect patient satisfaction 45.530-fold more when it is high than when it is low. Value B = 3.818 times the natural logarithm of 45.530. Since B is greater than zero, we may conclude that providing patients with direct proof tends to increase their satisfaction.

Because of this, it's important that healthcare providers meet the needs of their communities and individuals in a way that is both ethical and safe, while still making the most of the resources available to them within the constraints of government and society.

The study by Dwidayani Wira, titled "The Relationship Between Perceived Responsiveness and Perceived Empathy with Patient Satisfaction at Wangaya Hospital Denpasar," looked at the correlation between these two factors and patient happiness. The research by Wira et al. (2014) at Wangaya Hospital in Denpasar found a correlation between objective evidence and patient satisfaction.

Direct evidence of services that are directly visible to patients, such as the physical appearance of pharmacy staff and the way officers communicate with patients, is still lacking, according to Siti Nurhaida's research on "The Relation between Quality of Service and Inpatient Satisfaction at Ampana Hospital, Tojo District UNA-UNA." Poor communication between officers and patients results in people only speaking up when they have questions and officers failing to provide enough context for important decisions (such whether to take medicine or perform an operation). Since direct evidence is a service that is visible to patients, researchers believe it has a large impact on patients' overall happiness with their hospital experience.

Conclusion

Conclusion of the research; (1) There is an influence between reliability and patient satisfaction in the outpatient pharmacy at the Kabanjahe Regional General Hospital. This shows that high reliability will increase patient satisfaction, and vice versa if the reliability of pharmacists is

low it will reduce patient satisfaction; (2) There is no effect of responsiveness on patient satisfaction in the Outpatient Pharmacy of the Kabanjahe Regional General Hospital. This shows that responsiveness does not significantly affect patient satisfaction; (3) There is no effect of certainty on patient satisfaction in the Outpatient Pharmacy of the Kabanjahe Regional General Hospital. This shows that the condition of certainty does not significantly affect patient satisfaction; (4) There is an influence between caring for patient satisfaction in the outpatient pharmacy at the Kabanjahe Regional General Hospital. This shows that high patient care will increase patient satisfaction, and vice versa if the care given by pharmacists is low, it will reduce patient satisfaction; (5) There is an influence between direct evidence on patient satisfaction in the outpatient pharmacy at the Kabanjahe Regional General Hospital. This shows that high direct evidence will increase patient satisfaction, and vice versa if direct evidence in the pharmaceutical environment is low, it will reduce patient satisfaction; (6) The factor that has the most influence on satisfaction is concern where high concern has more influence on patient satisfaction.

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