turnitin

by Dhemes Alin

Submission date: 14-Nov-2020 08:46PM (UTC+0700)
Submission ID: 1445901136
File name: Turnitin_1599746804_1818695749_ichsan.r.psik_ulm.ac.id.doc (163K)
Word count: 1974
Character count: 10848

Waiting Time with Patient Satisfaction in X Hospital

[1]Ichsan Rizany*, [1]Herry Setiawan, [2]Musafaah

[1]Nursing management Department, Nursing school, Lambung Mangkurat University, Banjarbaru city, Indonesia

[2]Health Policy Administration and Health Promotion Department, Program Study of Public Health, Lambung Mangkurat University, Banjarbaru city, Indonesia

*Email Correspondence: *ichsan.r.psik@ulm.ac.id*

Abstract

Outpatients often complain about hospital services, one of which is waiting time. High complaints have an impact on patient satisfaction. The purpose of this study was to determine the relationship between waiting time with patient satisfaction at X Hospital. This study used non-experimental with cross-sectional design. Samples were 93 patients taken at X hospital in Banjarbaru city. The instruments used were the patient satisfaction questionnaire and waiting time observation. Data were analyzed using the chi-square test. The results showed that 35 (37.6%) patients felt the standard waiting time according to SPM (60 minutes) and 55 (59.1%) patients were satisfied with the services provided. There was a significant relationship between waiting time and patient satisfaction (p-value = 0.021). The conclusion was a relationship between waiting time with patient satisfaction. Hospitals can implement online registration and manage the arrival of doctors in outpatient care so that waiting times and patient satisfaction according to minimum service standards

Keywords: *patient satisfaction; outpatient; waiting time*

INTRODUCTION

Good service to patients is the primary goal of the hospital. The quality of good hospital services is not only seen from the superiority of infrastructure, the availability of qualified equipment, and an excellent physical picture but the commitment and ability of officers to take actions following the profession (Supartiningsih, 2017). Patients, as internal customers, have expectations of the services provided to them (Suhonen et al., 2012). Patients will judge the service through patient satisfaction.

Patient satisfaction is the clarity between what is desired with the reality felt by the patient (Xesfingi & Vozikis, 2016). Patient satisfaction is also defined as the patient's emotional form after experiencing health services in the hospital (Marquis, BL & Huston, 2012). When the patient is not satisfaction with the services provided, the patient does not want to get these services anymore and will look for other services (Russell et al., 2015). The target of patient satisfaction at service is 90, following the Ministry of Health's Minimum Service Standards (Standar Pelayanan Minimal Rumah Sakit, 2008).

Patient satisfaction in different hospitals varies. 27.6% (117) patients felt dissatisfied with outpatient services in hospitals in Kuwait (Alhashem et al., 2011). Based on data, patient satisfaction in West China is lower than patient satisfaction in Central and East China (He et al., 2018). In Martapura Hospital, outpatient satisfaction was still below the SPM as 90 (Jannah et al., 2020). At the same time, patient satisfaction at Indramayu District hospital found that 76 patients (82.6%) expressed dissatisfaction (Laeliyah & Subekti, 2017). It shows that the indicator of satisfaction is still a hospital problem.

Many factors influence patient satisfaction. Patient satisfaction can be influenced by patient characteristics such as age, occupation, education, marital status (Abdilah, A.D., Ramdan, 2014; Kurniawan & Intiasari, 2012; Yoder-Wise, 2014). Other factors that can affect satisfaction are nursing scheduling, nursing services, doctor services, and facilities (Ammo et al., 2014). Patient satisfaction is also influenced by the patient's emotional level, service quality, and waiting time of service (Sumaedi et al., 2016).

Waiting time for patients on an outpatient is the time used by patients to get outpatient services from the registration point to the doctor's examination room (Torry et al., 2016). Long queues and long waiting times are

indicators of efficiency as dimensions of health service quality (Purwiyanti et al., 2019). The long waiting time causes discomfort to the patient. Long queues are also an indication that many patients are waiting for services (Nursanti et al., 2018).

The observations from the preliminary study found that many outpatients were waiting in front of the clinic. The poly room also saw many patients, which made the patient feel hot. Researchers also asked one patient that the patient had waited more than 60 minutes. Patients also occasionally ask the officers whether they have been called or not. Researchers are interested in exploring this phenomenon. The purpose of this study was to analyze the relationship between waiting time and outpatient satisfaction at hospital X.

METHOD

This study used a cross-sectional design. This research was conducted at hospital X in Banjarbaru city. The number of samples used was 93 patients. In this study, the inclusion criteria were adult patients, not more than 60 years old, willing to be respondents, able to read and write. None of the selected samples were excluded from the research data.

The instrument used in the study was made by the researcher. The satisfaction questionnaire is based on the management book (Hariyati, 2014; Marquis, BL & Huston, 2012; Nursalam, 2014), and the waiting time instrument refers to the minimum hospital service standard (Standar Pelayanan Minimal Rumah Sakit, 2008). The satisfaction instrument consists of 25 questions with a Likert scale (1-5). The waiting time instrument uses a check sheet observed directly by the team, calculated from the incoming patient to the patient meets the doctor. The validity test results on the satisfaction instrument obtained data r count> t table (0.407 - 0.868> 0.361) for all statements in the satisfaction questionnaire. Reliability test results using Cronbach's alpha for alpha = 0.976. These results indicate strong reliability.

The research process was carried out by waiting for the patient in the registration room. The team calculated the time, starting from the patient who took the registration room ticket until the doctor examined the patient. During this time, the researcher approached the patient to ask them to fill out a questionnaire.

Satisfaction was categorized into two, including satisfied and dissatisfied with the cut of point mean of 106.12. The waiting time is also categorized into 2, including standard and non-standard, based on the Minimum Service Standard of 60 minutes. This study was analyzed using the chi-square test.

This study has passed the ethical test on the Faculty of Medicine's ethical committee, the University of Lambung Mangkurat, with number ethical was 294 / KEPK-FK UNLAM / EC / VII / 2019. Researchers pay attention to aspects of autonomy by providing form inform concent to respondents. Researchers have also explained the purpose and benefits of this study.

RESULTS

Respondent characteristics were seen based on age, gender, education level, occupation. The patients' mean age was 39.34 years, with the youngest age being 18 years and the oldest being 60 years.

Table 1. Characteristics of respondents based of patients (n=93)

Variable	n	%	p
Sex			0,689
• Female	39	41.9	
• Male	54	58.1	
Education Level			0,388
• Not school	2	2.2	
• Elementary school	2	2.2	
• Middle school	9	9.7	
• High school	64	68.8	
• Bachelor	16	17.2	
Work			0,361
• Farmer	1	1.1	
• College student	7	7.5	
• Labor	12	12.9	
• Housewife	38	40.9	
• Police	4	4.3	
• Civil Servants	11	11.8	
• General employee	15	16.1	
• Teacher	3	3.2	
• Trader	2	2.2	

Table 1 showed that most female patients were 54 (58.1%). The highest level of education was SMA, with 64 people (68.8%). Most occupations were housewives as many as 38 people (40.9%). Table 2 showed that 55 people (59.1%) felt satisfied, and 35 patients (37.6%) felt that the patient's waiting time was standard.

Table 2. Description of Waiting Time and Patients Satisfaction (n= 93)

Variable	n	%
Satisfaction		
• Dissatisfaction	38	40.9
• Satisfaction	55	59.1
Waiting time		
• Standard	35	37.6
• Non-standard	58	62.4

Table 3 showed the results that there was a significant relationship between waiting time and outpatient satisfaction (p = 0.021). 31.2% (29) patients who felt unsatisfied felt the waiting time that was not standard for, and patients who were satisfied with the standard waiting time were 26 people (28%).

Table 3. Correlation of Waiting Time to Outpatients Satisfaction (n= 93)

Satisfaction	`Waiting time			*p*
	Standard	Non-standard	Total	
	n(%)	n(%)	n(%)	
Dissatisfaction	9 (9.7)	29 (31,2)	38 (40,9)	0.021*
Satisfaction	26 (28)	29 (31,2)	55 (59.1)	
Total	35 (37.6)	58 (62,4)	93 (100)	

**p-value <0,05*

DISCUSSIONS

The average age of the respondents was at a productive age. The age of 39 years was the peak age in carrying out the productivity of a job. At this age, health began to decline due to high activity (Taufikurrahman et al., 2020). The increasing age of a person showed maturity to think so that they were more likely to judge satisfaction wisely

(Kurniawan & Intiasari, 2012). Most respondents' education was High school. It was in line with other research that 53 (48.2%) patients were treated with high school education (Chairunnisa & Puspita, 2017). Indonesia required its people to go to high school, but there was no obligation for the community to continue to a higher level after high school. Besides that, the higher the patient's education, the higher the level of understanding (Alhashem et al., 2011). It also has an impact on the sensitivity of the services felt by patients. The number of respondents with undergraduate education was also not too large. However, the results of this study did not have a significant relationship between age and education to patient satisfaction.

The results of this study indicate that the occupation of most patients was housewives. This result was in line with other studies where 54 patients (49.1%) who seek treatment were dominated by housewives (Chairunnisa & Puspita, 2017). This result also showed that 59.1% of patients had worked. Patients who work and go to the hospital have high expectations for services (Ernawati et al., 2018). However, the results of this study did not show a relationship between work and patient satisfaction.

The results of this study showed that only 59.1% of the patients were satisfied. Based on research, it was stated that the patient satisfaction rate must be 90%, so the hospital service was arguably optimal (Jannah et al., 2020; Standar Pelayanan Minimal Rumah Sakit, 2008). Another study stated that 62.9% of outpatients were satisfied (Nofriadi et al., 2019). So the satisfaction in this study was also not optimal according to the hospital's expectations of service.

This study also showed that 62.4% of respondents felt that the waiting time was still not standardized. Based on the results of previous research, which stated that most of the waiting times for outpatients were in the long category with a mean of 70.18 minutes (Laeliyah & Subekti, 2017). Other research also stated that the waiting time was in the non-standard category exceeding 60 minutes, with the total average waiting time for internal medicine outpatient services was 157.13 minutes. Waiting times were not ideal due to doctors being late in arriving at the clinic (Torry et al., 2016). Based on observations, patients said they had received an initial examination from the nurse, but they were still waiting for doctors who had not come to the clinic. Ernawati also confirmed this result that 25% of patients were satisfied because of the ideal waiting time (less than 60 minutes) (Ernawati et al., 2018).

The results of this study also showed that there was a significant relationship between waiting time and outpatients satisfaction. This result was in line with another studies that outpatient satisfaction was influenced by long patient waiting times (He et al., 2018). Another study also proved that outpatient satisfaction was influenced by the waiting time of the patient ($p = 0.003$) (Sun et al., 2017). This data shows that 29 patients (31.2%) who had waited a long time were dissatisfied.

These results also showed that 29 patients (31.2%) who waited a long time still felt satisfied. Patient satisfaction was not only affected by the waiting time. Patient satisfaction was influenced by other factors such as infrastructure, the comfort of the waiting room (Kashinath et al., 2010), and cleanliness (Budijanto, 2007). In addition, outpatient satisfaction is influenced by professional skills, competencies, and health workers (Zhao et al., 2017). Therefore, patients who have waited a long time are still satisfied.

CONCLUSIONS

This study concludes that 55 people (59.1%) were satisfied, and 35 patients (37.6%) felt that the patient's waiting time was standard. The analysis showed a significant relationship between waiting time and outpatient satisfaction ($p = 0.021$). 31.2% patients (29 peoples) who felt unsatisfied felt the waiting time that was not standard for, and patients satisfied with the standard waiting time were 26 people (28%).

Recommendations were given to hospitals that service procedures could be improved so that waiting times could be ideal. Commitment from health workers such as doctors and nurses was also essential to ensure that outpatient services run on time so that patients did not wait long. It was hoped that patient satisfaction can be increased through proper service management.

ACKNOWLEDGMENTS

Acknowledgment were given to the enumerator team who helped in collecting data at the hospital. Acknowledgment were also given to Mrs. Lesti for her information and support in data collection in hospital X.

turnitin

ORIGINALITY REPORT

7%	2%	5%	3%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS

PRIMARY SOURCES

1	Mas'ulun Mas'ulun. "Analysis of Services on wait and Time Patient Satisfaction in Prof. dr. Soekandar Hospital", Journal for Quality in Public Health, 2019 Publication	2%
2	Submitted to Ghana Technology University College Student Paper	1%
3	Muslim Amin, Siti Zahora Nasharuddin. "Hospital service quality and its effects on patient satisfaction and behavioural intention", Clinical Governance: An International Journal, 2013 Publication	1%
4	Haerani, Haerati, Fina Magfira. "Comparison of Types of Inpatient Services for BPJS Patients and Non BPJS Patients with Patient Satisfaction Level", Comprehensive Health Care, 2018 Publication	1%
5	www.i-scholar.in Internet Source	1%

6	Submitted to University of Wales Swansea Student Paper	1%
7	Submitted to Universiti Teknologi Malaysia Student Paper	1%
8	www.tandfonline.com Internet Source	<1%
9	"Serviceology for Smart Service System", Springer Science and Business Media LLC, 2017 Publication	<1%

Exclude quotes	On	Exclude matches	Off
Exclude bibliography	On		