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ANALYSIS OF PATIENT SATISFACTION ON THE QUALITY OF PHARMACEUTICAL SERVICE AT THE PHARMACEUTICAL INSTALLATION

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ABSTRACT

Consumer satisfaction with services can be measured by making comparisons between what is expected by consumers on the desired quality of a service based on the reality received or felt by consumers. Pharmaceutical services are supporting services and, at the same time, one of the main centers, providing more than 90% of health services in hospitals. Objective: The purpose of this study was to describe the level of patient satisfaction and expectations and to determine the overall level of visitor satisfaction with the services of the Muhammadiyah Hospital Pharmacy Installation Siti Khodijah Gurah Kediri. Method: This type of research is a quantitative descriptive study conducted on a set of objects with the aim of knowing the level of patient satisfaction and expectations of the services of the Muhammadiyah Siti Khodijah Gurah Hospital Pharmacy Installation, Kediri. The analysis of the collected data is then made in the form of tabulations and analyzed using the percentage formula. Analysis of satisfaction level scores in this study used the Likert scale answer format, which allows patients to answer at various levels (1-4) where each answer is given a weighted value with the following conditions: score 4 if the answer is "very satisfied", score 3 if the answer is "satisfied", score 2 if the answer is "not satisfied", and score 1 if the answer is "very dissatisfied". Results: The results of measuring the level of outpatient satisfaction with service quality at the Pharmacy Installation at Siti Khodijah Gurah Kediri Hospital use five dimensions of servqual (service quality) assessment, among others, reliability, responsiveness, assurance, empathy, and tangibles (physical facilities), resulting in a negative gap value in each dimension, which means that the quality of service provided by the Pharmacy Installation at Siti Khodijah Gurah Kediri Hospital has not met patient expectations. The results of the Customer Satisfaction Index average for each dimension, namely 74.89%, are included in the satisfied category. Conclusions: The results of measuring the level of satisfaction of outpatients with the quality of service at the Pharmacy Installation at Siti Khodijah Gurah Kediri Hospital using five assessment dimensions produce a negative gap value in each dimension, which means that the quality of service provided is not in accordance with patient expectations and, based on the Customer Satisfaction Index method, is included in the satisfied category.

Keywords: csi; gap; pharmaceutical installation; the level of satisfaction

INTRODUCTION

Patient satisfaction is an important issue for healthcare providers. Health service providers work and compete competitively to fulfill customer satisfaction. Patient satisfaction is basically about satisfying patient expectations and understanding their needs (Raheem, 2014). Service is an action that can also be said to be an action, also known as treatment, to meet needs and desires. Consumer satisfaction with services can be measured by making comparisons between what is expected by consumers about the quality of a desired service and the reality received or felt by consumers (Pratiwi D, 2013).

Pharmaceutical services, as an element of the main services in hospitals, are an inseparable part of the service system in hospitals that is oriented towards patient care and the provision of quality medicines, including affordable clinical pharmacy services for all levels of society (DEPKES RI, 2009). Activities at the hospital pharmacy installation consist of pharmaceutical services, which include planning, storage of pharmaceutical supplies, drug dispensing based on prescriptions for outpatients, quality control, control of the distribution of general and specialist services, direct services to patients, and clinical services, which are a comprehensive hospital program as a whole (Siregar & Amalia, 2003). Quality pharmaceutical installation services are health services that can provide satisfaction for each use of services in accordance with the code of ethics and service standards that have been set, and it is hoped that the patient's recovery rate will reach 25% obtained from good service and comfort, while the figure of 75% is obtained from drugs used by patients (Bogadenta A, 2012).

The Hospital Pharmacy Installation (IFRS) is one of the many sections or divisions of a hospital that has a very large influence on the professional development of the hospital as well as on the economy and the total operating costs of the hospital due to the interrelationships and interdependence of other services. in IFRS. Pharmacy services are supporting services and, at the same time, one of the main centers, reminding us that more than 90% of health services in hospitals use pharmaceutical supplies (medicines, chemicals, radiological materials, consumable medical devices, medical devices, and medical gases). and 50% of all hospital revenue comes from managing pharmaceutical supplies. The extent of the role of pharmaceutical installations in the smooth running of health services and as the largest source of income in hospitals means that the strategy for developing hospital pharmacy installations needs to be carried out in the face of competition with other hospitals (Siagian, 2003).The purpose of this study was to describe the level of patient satisfaction and expectations and to determine the overall level of visitor satisfaction with the services of the Muhammadiyah Siti Khodijah Gurah Kediri Hospital Pharmacy Installation.

METHOD

This type of research is a quantitative descriptive study conducted on a set of objects with the aim of knowing the level of patient satisfaction and expectations of service and patient satisfaction based on the CSI (Customer Satisfaction Index) at the pharmacy installation of Muhammadiyah Siti Khodijah Gurah Hospital, Kediri. The population in this study were outpatients or families of patients who had received services from IFRS Muhammadiyah Siti Khodijah Gurah Kediri. In this study, the samples were patients or families of outpatients with inclusion criteria, namely, being aged 18 years and over, having received pharmaceutical services, being able to communicate, and being willing to fill out questionnaires. The number of samples is determined from the total population based on the Slovin formula. The sampling procedure uses the non-probability method formula with the purposive sampling technique. The sample size in this study was 100 outpatients.

Research path, giving questionnaires to outpatients to determine the level of satisfaction and expectations regarding pharmaceutical installation services. The analysis of the collected data is then made in the form of tabulations and analyzed using the percentage formula. Analysis of satisfaction level scores in this study used a Likert scale answer format, which allows patients to answer at various levels (1-4), where each answer is given a weighted value with the following conditions: score 4 if the answer is "very satisfied", score 3 if the answer is "satisfied", score 2 if

the answer is "not satisfied", and score 1 if the answer is "very dissatisfied". Likert scale questionnaires and data processing were carried out using statistical applications to see visitor satisfaction based on gap values and CSI values with categories 0%–34.99% (not satisfied), 35%–50.99% (unsatisfied), 51%–65.99% (enough satisfied), 66%–80.99% (satisfied) and 81%–100% (very satisfied).

RESULTS AND DISCUSSION

The validity test in this study was carried out on the five dimensions of service quality consisting of tangibles, reliability, responsiveness, assurance, and empathy. The results of the validity test of the questionnaire measuring instrument conducted on 30 outpatients at IFRS Muhammadiyah Siti Khodijah Gurah Kediri showed that 30 (thirty) statement items in the questionnaire measuring instrument were declared valid. This is evidenced by the fact that all question items r count is greater than r table.

Reliability test using Cronbach's alpha analysis using SPSS software. Reliability test to find out whether the data from each of the questions asked can be trusted or not. The questionnaire is said to be reliable if the Cronbach's alpha value is > 0.6 (Sunyoto, 2013). The results of the reliability test found that all outpatient satisfaction and expectations questionnaires were reliable. where Cronbach's alpha value is > 0.6. The higher the value of the Cronbach's alpha coefficient (close to 1.00), the higher the level of reliability.

Table 1.
Respondent Demographic

Jenis Data	*Data Demografi*	f (%)
Gender	Male	65 (65%)
	Female	35 (35%)
Age	18-25	15 (15%)
	26-33	11 (11%)
	34-41	25 (25%)
	42-49	17 (17%)
	50-57	13 (13%)
	58-65	11 (11%)
	66-73	4 (4%)
	74-80	4 (4%)
Education	Elementary school	20 (20%)
	Junior high school	39 (39%)
	Senior High School	34 (34%)
	Bachelor	8 (8%)
Work	Entrepreneur	28 (28%)
	Private sector employee	26 (29%)
	Government employees	6 (6%)
	Farmer	21 (21%)
	Housewife	10 (10%)
	Student	9 (9%)

The most respondents were men, 65 respondents (65%), while women were 35 people (35%). Gender is related to different life roles and behaviors between men and women in society. In

maintaining their health, women usually take more care than men. Differences in sick behavior are also influenced by gender; women are more likely to medicate and care for themselves than men (Notoatmodjo, 2012).

Table 2.
Reality and Expectations

Tangibles	Reality	Expectations	Average Gap
Item 1	3,25	3,48	
Item 2	3,52	3,68	
Item 3	3,33	3,7	
Item 4	3,41	3,74	-0,16
Item 5	3,7	3,62	
Item 6	3,74	3,7	
Average	3,49	3,65	
Reliability	Reality	Expectations	Average Gap
Item 1	3,58	3,7	
Item 2	3,49	3,76	
Item 3	3,55	3,71	
Item 4	3,69	3,75	-0,17
Item 5	3,62	3,77	
Item 6	3,45	3,7	
Average	3,56	3,73	
Responsiveness	Reality	Expectations	Average Gap
Item 1	3,29	3,87	
Item 2	3,38	3,8	
Item 3	3,63	3,83	
Item 4	3,55	3,81	-0,34
Item 5	3,56	3,84	
Item 6	3,54	3,76	
Average	3,49	3,82	
Assurance	Reality	Expectations	Average Gap
Item 1	3,35	3,75	
Item 2	3,72	3,8	
Item 3	3,71	3,81	
Item 4	3,61	3,77	-0,19
Item 5	3,57	3,76	
Item 6	3,4	3,61	
Average	3,56	3,75	
Empathy	Reality	Expectations	Average Gap
Item 1	3,63	3,74	
Item 2	3,61	3,81	
Item 3	3,55	3,8	-0,14
Item 4	3,61	3,78	
Item 5	3,69	3,77	
Item 6	3,66	3,7	

Average	3,63	3,77

Table 3 shows the results of customer satisfaction using the Servqual method. It is known that the value of the five service dimensions is as follows: tangibles, realibility, responsiveness, assurance, and empathy. The gap value in table 1 of the service dimension with the largest gap value felt by outpatients is responsiveness (-0.34).

The expected and reality values obtained from the calculation of the score are calculated with the questionnaire items that have been filled out by the respondents. This shows that the expectations that patients still have for the reality they receive are still high. Each item filled in by the respondent gives a value ranging from 1 to 4, then each item will be counted and each will be categorized into levels of expectation and reality. The gap value of each item is obtained from the results of reducing the average reality to the average expectation. Positive results indicate a good satisfaction index, while negative values mean less satisfaction. The average result of each gap will be ranked from the most positive to the most negative.

A gap analysis was performed to determine whether there was a significant difference between the perceived score and the patient's expected score. The difference is calculated from the questionnaire scores on each dimension. The results of measuring the gap in service quality felt and expected by outpatients at the pharmacy installation of Siti Khodijah Gurah Kediri Muhammadiyah Hospital showed a negative gap in the five dimensions of service. This result shows that outpatients are not satisfied with the pharmaceutical services provided. Ideally, the value of the gap between what is felt and what is expected is zero. The greater the negative value of a gap in a service dimension, the greater the priority for service improvement in that service dimension. Alternative strategies that can be implemented to increase patient satisfaction in IFRS include improving the quality of pharmaceutical services, improving the quality of human resources, and completing IFRS facilities and infrastructure. The results of this satisfaction level analysis are the same as the research conducted by Husna (2011): the satisfaction level of IFRS X Samarinda outpatients obtained a negative gap on the five dimensions of tangible, reliability, responsiveness, assurance, and empathy, which indicates patient expectations are higher than the expected performance. given IFRS X Samarinda, so that patient satisfaction has not been achieved. Research on other customer satisfaction supports, such as "Customer Satisfaction, Perceived Service Quality, and the Mediating Role of Perceived Value" by Malik, shows that negative gap results indicate that customers have high expectations of the service they receive. This can help the company better satisfy customers, which will improve service quality (Malik SU, 2012).

Patients will feel satisfied if there is an equation between their expectations and the reality of the health services obtained. The satisfaction of users of health services has a close relationship with the results of health services, both medically and non-medically, such as adherence to treatment, understanding of medical information, and continuity of care (Kotler, 2007).The results of the analysis of the reality gap compared to the expectations of the analysis were carried out to find out whether there is a gap between the patient's expectation value and the reality value received by the patient on the quality of service. The method used is to calculate the average of the expected value and the actual value derived from the questionnaire assessment. The gap value is obtained from the difference between the actual value and the expected value (Mas'ud, 2009).

(Tangibles)

The results of the tangible dimension questionnaire show a gap value of -0.16, which means that the satisfaction value is still lacking from the patient's point of view of the service. Each item in this dimension includes the appearance of staff at the pharmacy installation, service support (tidiness and cleanliness of staff), and equipment (completeness of drugs and equipment cleanliness). The results of the answer scores for each statement item can be seen in Table 2. This indicates that the patient's expectations for the tangible dimension of IFRS Muhammadiyah Siti Khodijah Gurah Kediri have not been fulfilled. The gap occurs because patients complain that there are not many drug supplies in the pharmaceutical installation; patients complain about drug shortages for certain drugs; and patients also complain about the limited seats in the waiting room, even though an adequate, comfortable, and supportive room for pharmaceutical services in the hospital is a standard that must be met (Hartono, 2011). The capacity of patients in the waiting room is small, resulting in patients not being comfortable waiting for the drug; moreover, the drug delivery counters for outpatients become one, resulting in long queues. Based on an analysis of expectations and reality, the hospital should have adequate drug supplies and facilities. According to Syamsu & Farida (2015), the availability of facilities that support and suit consumer needs and a comfortable and clean environment make consumers feel comfortable so that they can feel satisfied with the service received.

(Reliability)

Based on the results of the questionnaire, the average value of the gap in the reliability dimension is -0.17, which indicates that outpatients are still dissatisfied with services in that dimension. Based on items on the reliability dimension, including drug service speed, cashier's accuracy, service procedures, service hours, and information provided by IFRS employees, The highest value of this dimensional gap occurs because of patient complaints about the speed of drug administration. Patients complain that concoction and non-concoction medicine services are slow, especially if there are incomplete medicines at the installation, so patients have to go home first and take them again in the afternoon or the next day. This is due to the inadequate number of officers. only has 2 pharmacists and 9 assistant pharmacists, so the pharmacy service takes a long time. The current number of workers is smaller than the number needed to carry out the increased workload due to the increase in hospital pharmacy services; this can lead to work stress, which can lead to fatigue among pharmacists and possibly trigger conflict. Hariyono's research (2012) showed that there was a significant relationship between workload and work fatigue; there was a significant relationship between work stress and work fatigue; and there was a significant relationship between conflict and work fatigue (Hariyono W, 2012). The results of research conducted by Septiyana (2017) show that in order to develop the pharmacy installation of dr. Harjono Ponorogo, one of the strategies that can be implemented is to improve the quality and quantity of human resources. It is hoped that the addition of pharmacy staff will accelerate pharmaceutical services so that patients will not leave the pharmacy installation to redeem drugs, and that services can also be provided optimally (Septiyana, 2017).

(Responsiveness)

Based on the research results, the average gap value of the responsiveness dimension is -0.34, which means that the patient is not satisfied. The highest rating that is the main focus of the responsiveness dimension for management is on the statement attribute, namely that pharmacy staff respond well to patient or patient family complaints. Patients consider it important that officers

respond well to complaints. This is due to a lack of human resources, resulting in officers being overwhelmed when handling patient complaints. This dissatisfaction occurs due to the patient's enthusiasm for drug information. The implementation of the officer's commitment to patient service can also be used as a solution at this hospital with the issuance of the policy. Customer expectations from this dimension are service speed, staff attitude when serving, and sincerity in answering customer questions. This form of concern can be carried out either through obtaining information or explanations or through actions that customers can feel the benefits of (Assegaff, 2009). According to Ihsan (2014), responsiveness is defined as the ability of the pharmacy to help customers and provide fast and precise services.

(Assurance)

The gap value is found in the assurance dimension at -0.19, with a performance value of 3.56 and an expectation value of 3.75. The assurance dimension needs attention because the patient's expectations for this dimension are very high. Statement items The officer has the knowledge to answer my questions about the drug. The officer provides information if it is later found that there is an error regarding the prescribing, which has a very high expectation value, namely 3.81. High expectations compared to performance create a meaningful gap in which respondents are not satisfied with the performance provided. According to research by Nisa et al (2021), pharmacists who have good knowledge and skills at work are considered important and very important by respondents.

(Emphatic)

Based on the results of the study, the empathy dimension has a gap with a value of -0.14. This means that the patient still feels dissatisfied in terms of empathy. This gap occurs because there is a social gap between pharmacy installation staff and patients. Information states that some patients will be served first based on kinship, so patients demand that officers at the pharmacy installation provide the same service. The empathy dimension is giving personal attention to customers through ease of communication and efforts to understand their needs and wants. Every human being has the same rights and dignity. The relationship between patients and hospital staff must be open so that there is psychological satisfaction that can be felt by patients. The empathy dimension is easy to create if every company employee understands customer needs. Empathy for customers is the feeling, understanding, and acceptance of employees towards consumers and the ability to feel the services provided (Arwani, 2012). The results of research by Umar (2020) show that pharmacists are required to always help and communicate well with patients so that there are no errors or mistakes in drug services.

Table 3.
Custumer Satisfaction Index Average of Each Dimension

Dimension	percentage
Tangibles	73,10%
Reliability	74,64%
Responsiveness	76,36%
Assurance	75,04%
Empathy	75,33%
Average	74,89%

Customer Satisfaction Index

The Customer Satisfaction Index (CSI) is used to determine the overall level of visitor satisfaction by taking into account the importance of the attributes of pharmaceutical services in pharmaceutical installations. On the tangible dimension (physical facilities), it has a CSI value of 73.10%. The reliability dimension has a CSI value of 74.64%. The responsiveness dimension has a CSI value of 76.36%. The assurance dimension (guarantee) obtained a CSI value of 75.04%. The empathy dimension (caring) has a CSI value of 75.33%. Based on Table 3, the average customer satisfaction index for each dimension is 74.89%. Included in the satisfied category According to Widodo (2018), a CSI value of 66%–89.99% is a satisfied category.

CONCLUSION

The results of measuring the level of outpatient satisfaction with service quality at the Pharmacy Installation at Siti Khodijah Gurah Kediri Hospital using five dimensions of service quality assessment, among them reliability, responsiveness, assurance, empathy, and tangibles (physical facilities), produce negative gap values in each dimension, which means that the quality of service provided by the Pharmacy Installation at Siti Khodijah Gurah Kediri Hospital is not in line with patient expectations and, based on the Customer Satisfaction Index method, it is included in the satisfied category. Customer satisfaction can be created by improving service quality. IFRS must pay attention to the quality of service provided to customers so that patient needs can be met according to their expectations.

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