THE RELATIONSHIP BETWEEN LONG WAITING TIME ON PATIENT SATISFACTION OUT PAGE IN INSTALLATION POLYCLINIC OUTCOMING AT NADHLATUL ULAMA TUBAN HOSPITAL

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ABSTRACT

Patient satisfaction is the level of one's feelings after comparing the perceived performance with expectations, so the level of satisfaction is a function of the difference between perceived performance and expectations. Patients are people who consult health issues to obtain the necessary health services, both directly and indirectly to the doctor. Satisfaction can be interpreted if it is in line with expectations and reality, service during the process of enjoying services, employee behavior, physical atmosphere and physical conditions, and promotion is not in accordance with reality. This study uses an observational analytic design with a cross sectional approach. The research sample of 60 internal medicine polyclinic patients at Nahdlatul Ulama Hospital Tuban was selected by accidental sampling. research instruments, patient satisfaction questionnaire. The results showed that there was a relationship between Waiting Time and Patient Satisfaction in the Internal Medicine Polyclinic in Outpatient Installation, this was evidenced by the Spearman Rho test obtained p = 0.00 (α <0.05). It is expected that the results of this study can be used as information for the hospital management, that waiting time is also included that affects satisfaction.

Keywords : Waiting Times, Patient Satisfaction, Service

INTRODUCTION

Patient satisfaction is the level of one's feelings after comparing perceived performance with expectations, so the level of satisfaction is a function of the difference between perceived performance and expectations. If the performance is below expectations, the patient will be disappointed and dissatisfied, whereas if the performance matches expectations, the patient will feel satisfied. In providing health services, the hospital must be more careful, because if the patient often feels dissatisfied, it will result in the loss of many customers or patients. And the level of patient satisfaction is highly dependent on the quality of services provided (Supranto, 2011). Based on the Achievement of National Quality Indicators at the Tuban Nahdlatul Ulama Hospital 2019, patient satisfaction has an annual target of 80%.

Patient satisfaction standards in Health Services are set nationally by the Ministry of Health. According to the Regulation of the Ministry of Health of the Republic of Indonesia in 2016
concerning Minimum Service Standards for patient satisfaction, which is above 95% (Ministry of Health, 2016). If a health service is found with a patient satisfaction level below 95%, it is considered that the health services provided do not meet the minimum standards or are of low quality.

Based on the achievement of the National Quality Indicator of Patient and Family Satisfaction at the Regional General Hospital of dr. R. Koesma Tuban in 2019 the Patient Satisfaction has a target of 90% per year, and the achievement of satisfaction is 78%, from this data there is a gap in target expectations with the achievement difference of 12%.

Based on the Achievement of the National Quality Indicators of the Tuban Nahdlatul Ulama Hospital, Patient Satisfaction has an annual target of 80%, and the achievement of satisfaction is 76%, from this data there is a gap in target expectations with a difference of 4% in achievement. Based on an initial survey conducted by researchers on March 13, 2020, it was obtained from 10 patients in the Outpatient Installation, that there were 6 patients of whom were dissatisfied due to the long waiting time. And 4 other patients were satisfied. Researchers get the data from the hospital to be studied. The Hospital said the event of waiting time that was more than normal occurred because of the large number of visits that occurred at the hospital that month. At the Tuban Nahdlatul Ulama Hospital, registration at the Internal Medicine Polyclinic at the Outpatient Installation using an online system. Meanwhile, patients do not always come according to the serial number they get. Internal Medicine Polyclinic opens at 14.00 (2 pm), while registration can start at 00.00 (12 pm).

The relationship between waiting time and patient satisfaction is very real, if the waiting time is too long, it will conclude a sense of dissatisfaction with the patient, while the waiting time is short or appropriate, the customer will feel satisfied so that satisfied patients will take longer and give good comments about the health service.

Outpatient facilities and facilities will have an impact on the quality of service to the community, adequate facilities and easy access and complete hospital facilities will have an influence on patient/customer satisfaction of health service users.

Expectations of the fulfillment of the patient's needs above they will be satisfied with the hospital or health center, but health workers often do not realize that the service to the patient's needs is already a dimension of service quality. The dimensions of service quality are physical evidence from the Public health center (Tangible). Reliability and accuracy in providing services to patients (Reliability), quality of service that is responsive and immediate (Responsibility), quality of service that is responsive and immediate (Responsiveness), services in instilling trust and confidence in patients
assurance), service with communication good and personal attention and understanding of patient needs (Empaty). Recovery from the patient in addition to the medication he is taking, very influential from health services in the form of friendliness and a sense of empathy for patients. They want to be served without discriminating against class, ethnicity and religion (Efendy, 2010).

Based on the problems above, patient satisfaction is still not according to the expectations of the target set. The length of the waiting time greatly affects patient satisfaction. Patients who feel dissatisfied because they wait too long will have an impact on the number of patient visits and decreased patient satisfaction. Patient satisfaction takes advantage of timeliness not only from the officer but from the patient it is also important so that it is not late when leaving for a check, so that other patients do not complain about satisfaction in service. In dealing with patient complaints, Schanaars (2011) put forward the theory of important aspects in handling complaints, namely: Empathy for angry customers, speed in handling complaints, fairness or justice in solving complaints, and convenience for customers to contact the company.

**RESULTS**

<table>
<thead>
<tr>
<th>No.</th>
<th>Age</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>18-24</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>25-34</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>35-49</td>
<td>30</td>
<td>50%</td>
</tr>
<tr>
<td>4.</td>
<td>50-65</td>
<td>30</td>
<td>50%</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 1 above, a small proportion of respondents are 47 years old (25%).

**RESEARCH METHODS**

The design of this study used observational analytic with a cross sectional study approach (cross-sectional study), namely the study only observed and measured variables at one time. The word one time does not mean that all subjects are observed exactly at the same time, but it means that each subject is only observed once and the measurement of subject variables is carried out at the time of the examination. Observational analytical research is research that seeks to find relationships between variables, in this study an analysis of the data that has been collected (Sastroasmoro and Ismael, 2010). So this study was intended to see the relationship between waiting time and patient satisfaction at the Internal Medicine Polyclinic at the Outpatient Installation at Nahdlatul Ulama Hospital, Tuban.

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Table 2 Distribution of Respondents based on Gender

<table>
<thead>
<tr>
<th>No.</th>
<th>Gender</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Man</td>
<td>28</td>
<td>47%</td>
</tr>
<tr>
<td>2.</td>
<td>Woman</td>
<td>32</td>
<td>53%</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 2 above, it shows that more than half of the respondents are female, amounting to 32 respondents (53%).

Table 3 Distribution of Respondents Based on Recent Education

<table>
<thead>
<tr>
<th>No.</th>
<th>Last education</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Primary School</td>
<td>21</td>
<td>35%</td>
</tr>
<tr>
<td>2.</td>
<td>Junior High School</td>
<td>11</td>
<td>18.3%</td>
</tr>
<tr>
<td>3.</td>
<td>Senior High School</td>
<td>28</td>
<td>46.7%</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 3 above, it shows that less than half of the respondents' last education was high school, as many as 28 respondents (46.7%).

Table 4 Distribution of Respondents Based on Occupation

<table>
<thead>
<tr>
<th>No.</th>
<th>Work</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Self-employed</td>
<td>33</td>
<td>55%</td>
</tr>
<tr>
<td>2.</td>
<td>Private sector</td>
<td>8</td>
<td>13.3%</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 4 above, it shows that more than half of the respondents' jobs are self-employed as many as 33 respondents (55%).

Table 5 Distribution Waiting Time for Internal Medicine Polyclinic

<table>
<thead>
<tr>
<th>No.</th>
<th>Waiting time</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>≥ 60 minutes</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>2.</td>
<td>≤ 60 minutes</td>
<td>55</td>
<td>92%</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 5 above, it can be seen that from 60 respondents (100%) it shows that most of the respondents have waiting time ≤ 60 minutes 55 (92%).

Table 6 Distribution Patient Satisfaction

<table>
<thead>
<tr>
<th>No.</th>
<th>Patient Satisfaction</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Not satisfied</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>Less satisfied</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>3.</td>
<td>Satisfied</td>
<td>57</td>
<td>95%</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 6 above, it can be seen that from 60 respondents (100%) it shows that most of the respondents are satisfied as much as 57 (95%).
DISCUSSION

Waiting Time at the Internal Medicine Polyclinic at the Outpatient Installation at Nahdlatul Ulama Hospital Tuban

Based on table 5, it is known that of the 60 respondents in Internal Medicine Polyclinic Patients at the Outpatient Installation at Nahdlatul Ulama Hospital Tuban, most of them, respondents who have waiting time more than 60 minutes as many as 55 (92%).

Waiting time is the time used by patients to get health services from the registration point to entering the doctor's examination room (Marno, 2002). Patient waiting time is one component that has the potential to cause dissatisfaction. Patients will perceive bad health services if their illness does not heal, long queues and health workers are not friendly even though they are professional (Dewi, 2015).

The category of distance between waiting time and examination time which is estimated to be satisfactory or unsatisfactory for the patient is when the patient comes from coming to the counter, queuing and waiting for a call to the general polyclinic to be anamnesis and examined by a nurse, doctor, or midwife > 90 minutes (old category), 30-60 minutes (medium category) and ≤30 minutes (fast category). Waiting times in Indonesia are set by the Ministry of Health through minimum service standards. Minimum service standards in outpatient care are less than or equal to 60 minutes (Kemenkes, 2008).

Waiting time is the time used by patients to get outpatient and inpatient services from the place of registration to entering the doctor's examination room by Soebarto (2011).

According to Kakiay, a queue time (waiting) for patients is influenced by several factors including, distribution of service time, service facilities, service discipline, size in queue and source of call.

According to research conducted by Yulfa Yulia, the longest waiting time at the Eye Polyclinic at the Outpatient Installation at Tarakan Hospital in 2013 was 70 minutes. In addition, there are several other factors that are thought to affect the satisfaction of every patient who comes for treatment to the Eye Polyclinic at the Outpatient Installation at Tarakan Hospital, including one of them is facilities (facilities and infrastructure), such as electronic media (television), waiting room which comfortable and clean, adequate visitor seating, Mass media (magazines or newspapers) provided by the hospital in the waiting room at the Eye Polyclinic can be used easily and flexibly by every patient or family visiting the Polyclinic. So it can be said that the long wait (waiting time) has less effect on the sense of satisfaction in patients who come for treatment at the Eye Polyclinic of Tarakan Hospital, East Kalimantan.

Based on the results of research observations, it was found that the majority of patients at the Internal Medicine Polyclinic at the Outpatient...
Installation at the Nahdlatul Ulama Hospital Tuban got the waiting time for outpatient services that had met the standards and there were some who felt they did not meet the standards, both for the first and repeated patient visits. Factors that cause patients to get waiting time services up to 60 minutes is, there is a reliability factor, namely the officer is able to provide accurate and reliable service without making mistakes. Responsiveness (responsiveness), namely officers help patients when they are asking for help, and officers are willing to listen to complaints from patients. Assurance (assurance), namely the officer is polite and masters the knowledge and skills when answering patient questions without hesitation and without halting. Empathy (attention), namely the ease with which patients and families contact the hospital, ease in administering administration, and ease in reaching the location. Tangibles (physical factors), namely supporting facilities located in The Internal Medicine Polyclinic of the Nahdlatul Ulama Hospital, Tuban, has air conditioning, free drinking is available, the appearance of the staff is clean and attractive, and medical equipment is up to standard.

Patient Satisfaction at the Internal Medicine Polyclinic at the Outpatient Installation at the Nahdlatul Ulama Hospital Tuban

Based on table 6, it is known that of the 60 respondents at the Internal Medicine Polyclinic Patient at the Outpatient Installation at the Nahdlatul Ulama Hospital, Tuban, patient satisfaction owned by respondents who felt dissatisfied as many as 3 (5%), and 57 (95%).

Patient satisfaction can be determined by the various types of services obtained during the use of several stages of health services. According to Kotler (2005), service quality is the overall characteristics and characteristics of an outcome (service) that affect its ability to satisfy stated or implied needs. Satisfaction is not only influenced by factors from the service provider, but is also influenced by factors from outside and from within the patient. Internal factors include resources, education, knowledge and attitudes. According to Parasuraman, Zeithaml, and Bery (1985) in Purwoastuti (2015), five (5) dimensions of service quality are: Reliability (reliability), Responsiveness (responsiveness), Assurance (guarantee), Empathy (attention), and Tangibles (physical factors).

According to research conducted by Yulfa Yulia, the level of patient satisfaction with health services obtained is influenced by several factors, including Responsiveness (responsiveness), Assurance (guarantee), Empathy (concern), Reliability (reliability), Tangibles (physical factors), comfort, availability of facilities and infrastructure. In addition, the physical appearance (tidiness) of health workers, conditions of cleanliness and comfort of the room,
costs, and types of health service packages received. Muninjaya (2011).

Based on the research results obtained, that the majority of patients at the Internal Medicine Polyclinic at the Outpatient Installation at the Nahdlatul Ulama Hospital, Tuban feel satisfied, and some patients feel dissatisfied. The cause of the satisfaction felt by the patient is due to the reliability factor, in this case it was found that the average result was that all patients were satisfied, most of the patients were satisfied because the officers provided accurate and reliable services without making any mistakes, but in the registration points and polyclinic is in accordance with expectations and realization of time, some patients feel that expectations and realization of time are not appropriate. Responsiveness factor (responsiveness), with the results of patients feeling satisfied, marked by the presence of service officers helping patients when asking for help, providing fast and easily accessible services, the officer is willing to hear the complaints of the patient, but at the point the officer informs when the service will be provided, in this case most of the patients choose to be dissatisfied because it is considered that the officer does not convey or inform when the service will be provided to the patient, only directly call the name of the patient who will be examined by the doctor specialist. Assurance factor (guarantee), getting a satisfied final result in this case the patient has felt good satisfaction, because the officer is able to grow the patient's trust by telling about the pain problems experienced by the patient and a better lifestyle must be done by the patient, the officer is able to create a sense of safe for patients, and officers have been polite and have mastered the knowledge and skills to answer any questions from patients easily and understood by patients and do not stutter in explaining. Empathy factor (attention), in this case the patient has felt satisfaction, both in the ease of contacting the hospital, the officers give high attention, ease in managing administration, and the ease of reaching the location, but some patients are not satisfied with this point, due to the location of the patient's house which is far from the hospital, while the patient gets a referral at the hospital, as well as this pandemic so that inter-city and inter-provincial buses rarely operate, if they operate, the tariffs issued are 3x the usual day before the pandemic. Tangibles factor (physical factor), this point the patient is satisfied with the supporting facilities, namely the availability of free drinking water, air-conditioned examination room, clean, neat, and attractive appearance of the staff, standard medical equipment, cool waiting room and clean, but the patient is not satisfied with the available seats. Due to the pandemic and having to do social distancing, there are not enough seats available for patients who are queuing at the Internal Medicine Polyclinic.
In a previous study belonging to Yulfa Yulia and Hasan, the factors that influence patient satisfaction are age, gender, last education, occupation, and insurance. Because at the Nahdlatul Ulama Hospital in Tuban, most of the patients use Health Insurance Agency, so researchers do not use insurance as a factor that affects patient satisfaction. After doing the research, the same thing happened with the previous research, namely the factors that influence patient satisfaction. In the study, the average age of most patients at the Internal Medicine Polyclinic was 35-65 years. Produces the same result, in feeling patient satisfaction. For gender, women feel more patient satisfaction than men. There are 32 female respondents (53.3%), while 28 male respondents (46.7%). For the most recent education, most patients at the Internal Medicine Polyclinic are SMA. Because the higher the education, the more understanding about patient satisfaction services.

The Relationship of Waiting Time with Patient Satisfaction at the Internal Medicine Polyclinic at the Outpatient Installation at the Nahdlatul Ulama Hospital, Tuban

Based on table 7, it can be seen that almost all respondents who have a waiting time ≥ 60 minutes 54 (90%).

Based on the Spearman Rho test with SPSS Software For Windows with a significance level of α = 0.05, the p value = 0.001 where p < 0.05 then H1 is accepted that there is a relationship between waiting time and patient satisfaction in patients at the Internal Medicine Polyclinic at the Outpatient Hospital. Nahdlatul Ulama Tuban.

The results of previous research on the level of satisfaction in terms of timeliness in providing health services at the Rantoana Health Center Waru by Panggato, et al (2013) with the results of the study that it was found that it had met the satisfaction level of outpatients because on average patients were satisfied with the timeliness of the services provided. However, there are also several other factors that can affect patient satisfaction with the health services obtained. In an effort to increase the utilization of government-owned health care facilities, the level of patient satisfaction should be measured and analyzed. Based on the results of calculations in the Christian Journal, Ani, and Vita (2015) with the title “The Relationship of Waiting Time with Patient Satisfaction Priority 3 in the Emergency Installation of Waluya Sawahan Hospital, Malang, from his research it was found that patients with the right waiting time had a higher level of satisfaction. big. Research conducted by Utami (2015) entitled "The Relationship of Waiting Time for Outpatient Services with Patient Satisfaction at RSU Assalam Gemolong" shows that the level or strength of the relationship between waiting time for outpatient services and patient satisfaction is classified as a strong relationship level. In line with Dewi’s research (2015) entitled “The
Relationship of Waiting Time for Registration with Patient Satisfaction at the Outpatient Registration Place Sukoharjo Hospital, the results also show that there is a relationship between waiting time for registration and patient satisfaction.

After doing the research, it can be seen that many Internal Medicine Polyclinic patients at the Outpatient Installation at Nahdlatul Ulama Hospital Tuban feel satisfied and the waiting time \( \leq 60 \) minutes, compared to less satisfied and waiting time \( > 60 \) minutes. This is due to the age factor, marked by an average age of 35-65, while the most data is 47 years old. This is because, the more mature the age will provide good cooperation because they are indeed in a period of development and adapting to various kinds of relationships and the development of responsibilities. The second factor is the gender factor, the results obtained are more female than male. This is because women see more of their appearance in detail, while men do not heed it. The third factor is the last education, the most recent education results are high school, and the least is junior high school. This is because, Higher education and knowledge demands better service. Patient education can affect satisfaction with services in accordance with patient values and expectations (Hidayat, 2003). The higher a person's education, the higher his knowledge (Nursalam, 2013). One's educational background will affect one's thinking ability, with one's education one will be able to increase intellectual maturity so that they can make decisions in acting and giving certain assessments. The fourth factor, namely, work, got the most work results, namely self-employed, while the least is IRT. This is because, people who work tend to have higher expectations than people who do not work for health services. Patient education can affect satisfaction with services in accordance with patient values and expectations (Hidayat, 2003). The higher a person's education, the higher his knowledge (Nursalam, 2013). 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housewife. This is because, people who work tend to have higher expectations than people who do not work for health services. the higher the knowledge (Nursalam, 2013). One's educational background will affect one's thinking ability, with one's education one will be able to increase intellectual maturity so that they can make decisions in acting and giving certain assessments. The fourth factor, namely, work, got the most work results, namely self-employed, while the least is IRT. This is because, people who work tend to have higher expectations than people who do not work for health services. With education a person will be able to increase intellectual maturity so that they can make decisions in acting and give certain assessments. The fourth factor, namely, work, got the most work results, namely self-employed, while the least is IRT. This is because, people who work tend to have higher expectations than people who do not work for health services.

CONCLUSION
Based on the results of the study, Most of the patients at the Internal Medicine Polyclinic at the Outpatient Installation at the Nahdlatul Ulama Hospital, Tuban, had long waiting times 60 minutes, this can be categorized as good. Most of the patients at the Internal Medicine Polyclinic in the Outpatient Installation at the Nahdlatul Ulama Hospital, Tuban, had satisfied patient satisfaction. After the SPSS for Windows statistical test was carried out, the results showed that there was a significant relationship between waiting time and patient satisfaction at the Internal Medicine Polyclinic at the Outpatient Installation at Nahdlatul Ulama Hospital, Tuban.

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