THE IMPACT OF SERVICE WAITING TIME ON PATIENT SATISFACTION AT RSUD R. ALI MANSUR JATIROGO

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ABSTRACT

Outpatient services involve a process where patients arrive, receive a queue number, and wait in the registration area until called. Subsequently, they wait at the destination polyclinic for their examination. Patient waiting time serves as an indicator of healthcare quality. This study employs a non-experimental, correlational design to investigate the relationship between waiting time and patient satisfaction in the outpatient unit at RSUD R. Ali Manshur Jatirogo. A sample of respondents was selected using cluster random sampling techniques. The independent variable in this study is service waiting time, while the dependent variable is patient satisfaction in the outpatient unit. The data analysis employed the Contingency Coefficient Test, utilizing SPSS for Windows. Findings reveal a statistically significant relationship between service waiting time and patient satisfaction in the outpatient unit, supporting the hypothesis that service waiting time has a significant impact on patient satisfaction. Most respondents perceived the waiting time as not meeting expected standards, and many expressed dissatisfaction with the service provided. The study confirms a relationship between waiting time and patient satisfaction in the outpatient unit at RSUD R. Ali Manshur Jatirogo, emphasizing the importance of reducing waiting times to improve patient experiences.

Keywords: Satisfaction; Service; Time.

1. INTRODUCTION

According to the World Health Organization (WHO), hospitals are an integral part of social and health organizations, with a mission to serve the community. Hospitals with high integrity are committed to providing the best care for the community. (Petrick *et al.*, 2023). Outpatient services begin when the patient arrives, then the patient gets a queue number, and waits in the registration area until called to register, then proceeds to the appointed Polyclinic to wait for the examination. Patient waiting time is an important indicator of the quality of health care. (Dwi Lestari, Khodijah Parinduri and Fatimah, 2020).

Patient waiting time in outpatient services is a critical factor that shapes the public perception of a healthcare institution. Excessive waiting times can lead to patient dissatisfaction, as patients often judge

healthcare quality based on long waits, unresolved health issues, or unfriendly staff despite their professional expertise (Rahmiati and Temesveri, 2020). Waiting time has become a recurrent issue in healthcare settings, particularly in outpatient departments, highlighting an area that warrants attention and improvement (Kairupan, 2021).

Hospital management sometimes overlooks waiting time issues, leading to perceptions of unprofessional service quality. (Fadhilatul Hasnah and Dian Paramitha Asyari, 2022). This mismatch between patient expectations and reality can stem from various issues, including lengthy waits, missed appointments, or service disruptions when healthcare providers take unscheduled breaks during consultations. Assessing patient satisfaction is one approach to evaluating healthcare quality. (Zulaika, Suhermi and Soejoto, 2022).

A study by (Dewi, Eravianti and Putri, 2020) At RS Santa Clara, Madiun found that only a portion of patients' waiting times met standards, while nearly half expressed dissatisfaction. (Simarmata et al., 2021) Research at RSUD Dr. Muhammad Zein Painan found that waiting times exceeded standard thresholds, with many patients waiting more than 60 minutes.

In 2021, RSUD R. Ali Manshur Jatirogo conducted a patient satisfaction survey, gathering responses from 220 patients. The survey results showed a community satisfaction index of 80. By 2022, the index had risen to 81, though patient satisfaction with waiting time remained a concern. A preliminary survey on July 22, 2023, revealed that six out of ten respondents were dissatisfied with the waiting time, while four expressed satisfaction. Timeliness was one of the main factors assessed.

According to the Indonesian Ministry of Health Standard No. 129/Menkes/SK/II/2008, the waiting time standard for outpatient services is less than 60 minutes. Waiting times exceeding this threshold are considered excessive and indicative of service quality issues. Hospital management must improve waiting

times to uphold minimum service standards.(Sulisna *et al.*, 2023) Identifies several critical factors for healthcare service quality, including timeliness, accuracy, courtesy, and reliability. Enhanced service quality plays a vital role in healthcare, directly contributing to patient satisfaction(Wijayanti, Lidiana, and Widiastuti, 2023). Patient satisfaction is crucial for service sustainability, as dissatisfied patients are likely to share negative experiences, impacting hospital reputation (Widhawati, 2021).

Several elements influence patient satisfaction, including service quality, product aesthetics, accessibility, and perceived value. (Astika, Jepisah and Asmarwiati, 2024). According to (Ginting, Simbolon and Sihombing, 2023)Key service quality indicators include tangibles, reliability, responsiveness, assurance, and empathy.

Polite, prompt, and comfortable service characterizes quality healthcare. (Supandi and Imanuddin, 2021). Comfortable waiting areas and efficient service times contribute positively to patient perceptions. Patient satisfaction grows when wait times are minimized, and punctuality is maintained. Patient perspectives are essential; those satisfied with treatment are more likely to return, fostering improved hospital reputation and service quality.

Based on these considerations, this study aims to examine the relationship between service waiting time and patient satisfaction in the outpatient unit of RSUD R. Ali Manshur Jatirogo.

2. METHOD AND ANALYSIS

This study employed a quantitative correlational design with a cross-sectional approach. The sample population of this study was some patients at RSUD R. Ali Manshur Jatirogo in May 2024, a many as 87 patients. The sampling technique in this study used a probability sampling technique with cluster random sampling type. The stage carried out in this study by means of researchers taking care of a license to conduct research signed by the Chairperson of the Institute of Health Sciences, Nahdlatul Ulama Tuban, then the

initial stage of this research is that the researcher submits a letter of permission to the Director of RSUD R. Ali Manshur Jatirogo. After obtaining permission, ensure the researcher collected data by visiting the outpatient unit of RSUD R. Ali Manshur Jatirogo.

In the course of the study, the researcher made an identity card with the aim that the researcher could easily observing the patient's waiting time. The contents of the identity card, then the researcher asked for the help of friends to complete tasks related to the various parts that were the subject of the study. At the initial stage, one of the researchers was at the counter taking the queue number, approached the research subjects by meeting prospective respondents to explain and ensure that the data taken by the researcher was kept confidential, then asked for availability to become a respondent., if they agree, the potential respondent will be given an informed consent sheet that has been made by the researcher. After getting prospective respondents, researchers will distribute identity cards to respondents and tell them to give them to researchers who are in the polyclinics to observe patient waiting times. Furthermore, after the respondents were served, the researchers distributed research questionnaire sheets to the respondents to be filled in within 20 minutes. Then the researcher checks and ensures that the results of the questionnaire have been filled out by the sample number of respondents calculated. The data collection process from 87 respondents will be selected based on service waiting time using a data collection sheet and a cellphone to track time and patient satisfaction using a questionnaire sheet that the researcher has distributed to respondents. Then the researcher checks and ensures that the results of the questionnaire that have been filled in are by the calculated sample number of respondents. The criteria for waiting time for service are when the researcher gives an identity card to the respondent, who is then given to a research colleague who is in the poly. Then the researcher uses a

stopwatch to find out the time the clock is set during the examination. The criterion for measuring service waiting time is that if it is more than 60 minutes, then it is not according to standard, and if it is less than 60 minutes, then it is according to standard. Then the criteria for measuring patient satisfaction using a questionnaire sheet if the respondent can answer with a score of 30–50 Dissatisfied, 51–70 Moderately Satisfied, 71–90 Satisfied. After that, the researchers analyzed the data using SPSS 25 for Windows software, including: frequency distribution, percentage, Spearman's Rank test with a significance level of 0.05, and drew conclusions from the data that the researchers obtained from respondents. This research has been approved by the Tuban Nahdlatul Ulama Health Research Ethics Commission, number: 93/LEPK.IIKNU/IV/2024.

3. RESULT AND DISCUSSION

General Data of Respondents

1. Characteristics of Respondents Based on Gender

Respondents in this study were patients at the Outpatient Unit of RSUD R. Ali Manshur Jatirogo, with a total of 87 respondents.

Table 5.1 Frequency Distribution of Respondents Based on Gender in Patients in the Outpatient Unit of RSUD R. Ali Manshur Jatirogo.

Gender	Frequency	Percentage (%)
Male	23	26,4 %
Female	64	73,6%
Total	87	100%

Source: Primary Data Researcher, Year 2024

As shown in Table 5.1, it can be seen that of the 87 respondents, the majority were female, namely 64 (73.4%) respondents.

2. Characteristics of Respondents by Age

Respondents in this study, based on age, in inpatients at the Outpatient Unit of RSUD R. Ali Manshur Jatirogo as follows :

Category	Age	Frequency	Percentage (%)
Teenagers	10–18	8	9,2%
Adults	19–59	66	75,9%

Elderly	> 60	13	14,9%
Total		87	100%

Based on Table 5.2, it can be seen that of the 87 respondents, most of the respondents were in the adult category with a vulnerable age of 19 – 59 years, namely 66 (75.9%) respondents.

Respondent Specific Data

1. Identification of waiting time for services to patients in the outpatient unit of RSUD R. Ali Manshur Jatirogo.

Table 5.3 Frequency Distribution of Respondents Based on Waiting Time for Services to Patients in the Outpatient Unit of RSUD R. Ali Manshur Jatirogo.

Service Waiting Time	Frequency	Percentage (%)
Not up to standard	66	75,8 %
By the standard	21	24,2 %
Total	87	100%

Based on Table 5.4, it can be seen that out of 87 respondents in patients at the Outpatient Unit of RSUD R. Ali Manshur Jatirogo, most respondents with waiting time for services in the category not according to standards were 66 (75.8%) respondents.

2. Identification of patient satisfaction in patients in the outpatient unit of RSUD R. Ali Manshur Jatirogo.

Table 5.4 Frequency Distribution of Respondents Based on Patient Satisfaction in Patients in the Outpatient Unit of RSUD R. Ali Manshur Jatirogo.

Patient Satisfaction	Frequency	Percentage (%)
Not Satisfied	67	77%
Quite Satisfied	10	11,5%
Satisfied	10	11,5%
Total	87	100%

Based on Table 5.4, it can be seen that of the 87 respondents in patients at the Outpatient Unit of RSUD R. Ali Manshur Jatirogo, almost all respondents were dissatisfied, as many as 67 (77%) respondents.

3. The relationship between service waiting time and patient satisfaction in the outpatient unit of RSUD R. Ali Manshur Jatirogo.

Table 5.5 Cross Table Relationship between Waiting Time and Patient Satisfaction in the Outpatient Unit of RSUD R. Ali Manshur Jatirogo.

Service Waiting Time	Patient Satisfaction						Total	
	Not Satisfied		Quite Satisfied		Satisfied			
	f	%	f	%	f	%	f	%
Not up to standard	66	100	0	0	0	0	66	100

By the standard	1	1,0	10	49,5	10	49,5	21	100
Total	67	77,0	10	11,5	10	11,5	87	100

Based on table 5.6, it can be seen that of the 87 respondents in patients at the Outpatient Unit of RSUD R. Ali Manshur Jatirogo, all respondents had patient satisfaction in the category of dissatisfied with the waiting time for service in the category of non-standard as many as 66 (100%) and almost half of the respondents had patient satisfaction in the category of moderately satisfied and satisfied with the waiting time for service in the standard category as many as 10 (49.5%) respondents.

Data Analysis

Research analysis in this study used the contingency coefficient test with a value of α = 0.05, and the calculation was carried out using the SPSS for Windows software application; the significance of the p value = 0.000 was obtained. This shows that p < α (0.000 < 0.05), which means that H1 is accepted, namely the relationship between service waiting time and patient satisfaction in the outpatient unit of RSUD R. Ali Manshur Jatirogo. In the test results also obtained a positive correlation coefficient value of 0.696 which indicates that between the two variables have a strong relationship strength with a unidirectional relationship direction, This means that the faster the service waiting time, the higher the service satisfaction in the outpatient unit of RSUD R. Ali Manshur Jatirogo, and vice versa. If the longer the service waiting time, the lower the service satisfaction in the outpatient unit of RSUD R. Ali Manshur Jatirogo.

DISCUSSION

Identification of Service Waiting Time. Of the 87 respondents in the Outpatient Unit of RSUD R. Ali Manshur Jatirogo, 75.8% rated the service waiting time as not according to the standard, which is more than 60 minutes, while 24.2% rated it as according to the standard. Waiting time is measured from registration until the patient is served by a doctor, where the maximum standard waiting time according to the Indonesian Ministry of Health is 60 minutes. Factors such as offline registration systems, staff shortages, and administrative constraints cause

waiting times to exceed the standard, which has an impact on patient satisfaction.

Identification of Patient Satisfaction: A total of 77% of patients were dissatisfied, 11.5% were moderately satisfied, and only 11.5% were satisfied. Patient dissatisfaction was mainly caused by long waiting times, lack of information, and unclear queue management. To increase satisfaction, hospitals need to improve queuing systems, facilities, and service efficiency.

Statistical analysis showed a significant relationship between waiting time and patient satisfaction. The longer the waiting time, the lower the level of satisfaction. Conversely, a reduction in waiting time can increase patient satisfaction.

4. CONCLUSION

Based on the results of a study entitled "Relationship between Waiting Time and Patient Satisfaction in the Outpatient Unit of RSUD R. Ali Manshur Jatirogo," with a total sample of 87 respondents, the following conclusions were drawn: Most of the respondents considered that the waiting time for services was not up to standard. Almost all respondents were dissatisfied with the service in the outpatient Unit of RSUD R Ali Mansur Jatirogo.

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