LAMPIRAN

Lampiran 1. Perhitungan tabel data waktu tunggu pelayanan resep rumah sakit tipe kelas B

No	Peneliti, Tahun	Tipe Kelas RS	Metode Penelitian	Hasil Penelitian (Rata-rata waktu tunggu resep obat)
1	Purwandari *et al*, 2017	B	Kualitatif dan Kuantitatif	Obat non racikan = 48,90 menit Obat racikan = 46,54 menit.
2	Dampung *et al*, 2018	B	*Non Probability Accidental Sampling*	Obat non racikan = 32 menit Obat racikan = 45 menit.
3	Karuniawati *et al*, 2016	B	*Purposive sampling*	Obat non racikan = 5,70 menit Obat racikan = 9,18 menit.
4	Sobandi *et al*, 2020	B	*Purposive sampling*	Obat non racikan = 11,2 menit Obat racikan = 38,22 menit.
5	Ekasari & Bachtiar, 2019	B	*Systematic random sampling*	Obat non racikan = 9 menit Obat racikan = 4 menit.
6	Himawan *et al*, 2018	B	*Descriptive*	Obat non racikan = 134 menit Obat racikan = 215 menit.
Rata-rata waktu tunggu pelayanan resep				Obat non racikan = $\frac{48,90+32+5,70+11,2+9+134}{6}$ = 40,13 menit. Obat racikan $= \frac{46,54+45+9,18+38,22+4+215}{6}$ = 59,65 menit.

Lampiran 2. Perhitungan tabel data waktu tunggu pelayanan resep rumah sakit tipe kelas C

No	Peneliti, Tahun	Tipe Kelas RS	Metode Penelitian	Hasil Penelitian (Rata-rata waktu tunggu resep obat)
1	Sari *et al*, 2020	C	*Deskriptif cross sectional*	Obat non racikan = 18,7 menit Obat racikan = 30,9 menit.
2	Fahrizal *et al*, 2018	C	Deskriptif non eksperimental	Obat non racikan = 25,1 menit Obat racikan = 35 menit.
3	Payung & Idayani, 2019	C	Random sampling	Obat non racikan = 30 menit Obat racikan = 37 menit.
4	Baroroh *et al*, 2012	C	*Deskriptif*	Obat non racikan = 19,45 menit Obat racikan = 41,02 menit.
5	Yunus *et al*, 2020	C	*Deskriptif*	Obat non racikan = 36,38 menit Obat racikan = 59,88 menit.
6	Ahmad *et al*, 2020	C	*Quantitave*	Obat non racikan = 22,34 menit Obat racikan = 31,62 menit
7	Febrianta *et al*, 2017	C	*Descriptive observational*	Obat non racikan = 22,37 menit Obat racikan = 41,22 menit
Rata-rata waktu tunggu pelayanan resep				Obat non racikan $$= \frac{18,7+25,1+30+19,45+36,38+22,34+22,37}{7}$$ = 24,90 menit. Obat racikan $$= \frac{30,9+35+37+41,02+59,88+31,62+41,22}{7}$$ = 39,52 menit.

Lampiran 3. Perhitungan tabel data waktu tunggu pelayanan resep rumah sakit tipe kelas tidak diketahui

No	Peneliti, Tahun	Tipe Kelas RS	Metode Penelitian	Hasil Penelitian (Rata-rata waktu tunggu resep obat)
1	Arini *et al*, 2020	C	*Cross sectional*	Obat non racikan = 21,1 menit Obat racikan = 35,2 menit.
2	Meila *et al*, 2020	C	Observasional	Obat non racikan = 0 menit Obat racikan = 43,03 menit.
3	Rusdianah Eva, 2017	C	*Deskriptif*	Obat non racikan = 8,62 menit Obat racikan = 13,90 menit.
Rata-rata waktu tunggu pelayanan resep				Obat non racikan $=\dfrac{21,2+0+8,62}{3}$ $= 14,91$ menit. Obat racikan $=\dfrac{35,2+43,03+13,90}{3}$ $= 30,71$ menit.

Lampiran 4. Jurnal 1

ANALISIS WAKTU TUNGGU PELAYANAN RESEP PASIEN RAWAT JALAN DI DEPO FARMASI GEDUNG MCEB RS ISLAM SULTAN AGUNG SEMARANG

Nurma Katrinnada Purwandari, Antono Suryoputro, Septo Pawelas Arso
Bagian Administrasi dan Kebijakan Kesehatan, Fakultas Kesehatan Masyarakat
Universitas Diponegoro Semarang
Email: nurmakatrin@gmail.com

The outpatients at Sultan Agung Islamic Hospital complained about the long waiting time duration of their prescription services. This case primarily occured in the pharmaceutical depot at MCEB Bulding, a building which contained most of the specialist polyclinic. Thus at the rush hour causing the waiting time become longer. There are few things that considered to be the main cause of this long waiting periods, such as the lack of employee, the space of the room, the hospital information system and management (SIM RS), and also the still existence of prescribing that is not based on the formularium, that caused the waiting time service has not meet the standard, both the standard of minimum service standard (SPM) and hospital quality indicators (IMRS). The purpose of this study is to describe and identify the factors that lead to long periods of waiting times in prescription services, whichever on the general, national health insurance (JKN), and private health insurance patients. This research is a quantitative and qualitative research. The data of this research were collected with an observation sheet of the waiting time and with an in-depth interviews. The result of this research indicating that the average waiting time for non concoction prescription services is 48.9 minutes and concoction recipes is 46.54 minutes, whereas delay time in the process of non concoction recipes is 40.39 minutes which is larger than the action time 8.47 minutes. Recipe that do not reach waiting time standard mostly are the recipes for non concoction, mainly from JKN patients with percentage 85.7% on SPM standard and 57.1% on IMRS standard. The factors that lead this longer waiting period are the lacking numbers of employee, the SIM RS and the space of the room that has not been optimal, the big numbers of recipes that not suitable with the formulary, and the lack of understanding about standard operating procedure (SPO) and the waiting time standard. The few suggestion for this case are increasing the number of employees accompanied with expansing of the room's space, maintaining the facility periodically, repairing SIM RS, and promoting about SPO and the waiting time standard.

Keywords: Pharmacy Services, Waiting Time on Prescription Services, Outpatient

PENDAHULUAN
Latar Belakang

Undang-Undang Nomor 44 Tahun 2009 bahwa rumah sakit berkewajiban untuk memberi pelayanan kesehatan yang aman, bermutu, anti diskriminasi, dan efektif dengan mengutamakan kepentingan pasien sesuai dengan standar pelayanan rumah sakit.[1] Ketatnya kompetisi jasa rumah sakit serta banyaknya tuntutan masyarakat akan pelayanan yang cepat dan bermutu memaksa rumah sakit untuk meningkatkan kualitas pelayanannya.[2] Waktu tunggu merupakan salah satu komponen yang menyebabkan ketidakpuasan

Lampiran 5. Jurnal 2

EVALUASI WAKTU TUNGGU PELAYANAN RESEP PASIEN RAWAT JALAN
DI RUMAH SAKIT ANWAR MEDIKA

ERVIANI DINDA MAHMUDAH SARI, KHURIN IN WAHYUNI, PUSPITA RARAS ANINDITA

Departemen Farmasi Komunitas, Program Studi Farmasi, STIKes Anwar Medika, Sidoarjo

ABSTRACT

The waiting time for finished drug service is the grace period from the time the patient submits the prescription until receiving the finished drug with a minimum standard set by the Ministry of Health is ≤ 30 minutes, while the waiting time for concoction drug service is the grace period from the time the patient submits the prescription until receiving the concoction drug that is ≤ 60 minutes. This study aims to determine the average waiting time for outpatient prescription services at Anwar Medika Hospital. This research was conducted with a cross sectional descriptive method. Primary data was collected through direct observation and recording of prescription service waiting times in the waiting time recording form on February 10, 2020 to February 11, 2020. Data taken were 384 outpatient prescriptions consisting of 346 non-concoctions and 38 prescription concoctions. In this study, 384 recipes were used as the research sample consisting of 346 for non-concoction recipes and 38 for recipe concoctions. The average time needed to complete a non-concoction recipe is 18.7 minutes and the time required to complete a recipe concoction is 30.9 minutes. Based on the results of research that has been done, it is found that the average waiting time for prescription services at Anwar Medika Hospital has fulfilled the requirements according to the minimum service standards at the hospital.

Keywords: Waiting Time, Prescription Service, Anwar Medika Hospital.

ABSTRAK

Waktu tunggu pelayanan obat jadi adalah tenggang waktu mulai pasien menyerahkan resep sampai dengan menerima obat jadi dengan standar minimal yang ditetapkan kementerian kesehatan adalah ≤ 30 menit, sedangkan waktu tunggu pelayanan obat racikan adalah tenggang waktu mulai pasien menyerahkan resep sampai dengan menerima obat racikan yaitu ≤ 60 menit.Penelitian ini bertujuan untuk mengetahui rata-rata waktu tunggu pelayanan resep pasien rawat jalan di RS Anwar Medika.Penelitian ini dilakukan dengan metode deskriptif cross sectional. Data primer dikumpulkan melalui pengamatan langsung dan pencatatan waktu tunggu pelayanan resep dalam formulir pencatatan waktu tunggu pada bulan Febuari 2020. Data yang diambil sebanyak 384 resep pasien rawat jalan yang terdiri dari 346 non racikan dan 38 resep racikan. Pada penelitian ini didapatkan 384 resep yang menjadi sampel penelitian yang terdiri dari 346 resep non racikan dan sebanyak 38 resep racikan. Rata-rata waktu yang dibutuhkan untuk menyelesaikan resep non racikan adalah 18,7 menit dan waktu dibutuhkan untuk menyelesaikan resep racikan adalah 30,9 menit. Berdasarkan hasil penelitian yang telah dilakukan didapat bahwa rata-rata waktu tunggu pelayanan resep di Rumah Sakit Anwar Medika telah memenuhi persyaratan sesuai standar pelayanan minimal di rumah sakit.

Kata Kunci: Waktu Tunggu, Pelayanan Resep, Rumah Sakit Anwar Medika.

Correspondence: *Erviani Dinda Mahmudah Sari, Departemen Farmasi Komunitas, Prodi Farmasi Sekolah Tinggi Ilmu Kesehatan Anwar Medika.* **Email** : *ervianidinda99@gmail.*

Lampiran 6. Jurnal 3

WAKTU TUNGGU PELAYANAN RESEP DI DEPO FARMASI RS X

Heny Dwi Arini[1], Agustina Nila Y.[2], Ari Suwastini[3]
[1,2,3]Sekolah Tinggi Farmasi Mahaganesha, Jl. Tukad Barito Timur No. 57 Denpasar,
(0361)4749310
e-mail: [1]henydwi71@gmail.com; [2]nila290789@gmail.com; [3]arisuwastini20@gmail.com

Abstrak
Salah satu indikator pelayanan farmasi yang diatur dalam standar pelayanan minimal (SPM) rumah sakit adalah waktu tunggu pelayanan obat jadi (non racikan) dan racikan. Menurut Peraturan Menteri Kesehatan Nomor 129 Tahun 2008 menyebutkan bahwa standar waktu tunggu pelayanan obat jadi adalah ≤30 menit, sedangkan untuk obat racikan adalah ≤60 menit. Penelitian ini bertujuan menggambarkan waktu tunggu pelayanan resep RS. X. Kemudian, membandingkan rata-rata waktu tunggu pelayanan resep dengan *standard operating procedures* (SOP) dan SPM rumah sakit, serta mengetahui faktor-faktor yang mempengaruhi waktu tunggu tersebut. Rancangan penelitian ini adalah *cross sectional*. Data penelitian dikumpulkan secara prospektif selama bulan Januari hingga Februari 2020. Sampel penelitian diambil secara acak dengan teknik *simpe random sampling*. Hasil penelitian menunjukan bahwa rata-rata waktu tunggu pelayanan resep non racikan adalah 21,2 menit dan obat racikan adalah 35,2 menit. Hal ini menunjukan bahwa rata-rata waktu tunggu pelayanan resep di depo farmasi rawat jalan RS.X telah sesuai dengan standar waktu tunggu pelayanan resep pada SPM, namun belum memenuhi SOP yang telah ditetapkan. Berdasarkan hasil uji *one sample t-test*, rata-rata waktu tunggu pelayanan resep berbeda bermakna dengan standar yang ditetapkan pada SOP dan SPM (p<0,05). Faktor-faktor yang mempengaruhi waktu tunggu pelayanan resep adalah jenis resep, jumlah sumber daya manusia (SDM), dan ketersediaan sarana prasarana.
Kata kunci: waktu tunggu pelayanan resep, standar pelayanan minimal rumah sakit

Waiting Time for Filling Prescription in Outpatient Hospital Pharmacy X

Abstract
One indicator of pharmaceutical services regulated on Minimum Hospital Service Standards (called Standar Pelayanan Minimal (SPM)) is waiting time for filling prescription. According to the Minister of Health of the Republic of Indonesia No. 129/Menkes/SK/III/2008 on Minimum Hospital Service Standards set the standard waiting time for non-compounding prescription is no more than 30 minutes, and the waiting time for compounding prescription is no more than 60 minutes. This study aims to describe the waiting time for filling prescription in hospital X, compare the average waiting time for prescription services with standard operating procedures (SOP) and SPM, and determine the factors that affect the waiting time. The study design was cross sectional. Data were collected prospectively from January to February 2020. Sample was taken randomly with simple random sampling technique. The results showed that the average waiting time for non compounding prescription services was 21.2 minutes and a compounding prescription was 35.2 minutes. It shows that the average waiting time for prescription services at the outpatient pharmacy installations in Hospital X has been appropriate with the waiting time standard for prescription services at SPM, but has not met the established SOP. Based on the results of the one sample t-test, the average waiting time for prescription services was significantly different from the standards set in the SOP and SPM (p <0.05). The factors that affect the waiting time for prescription services are the type of prescription, the number of pharmacy staff, and the availability facilities and infrastructure.
Keywords: waiting time for filling prescription, minimum hospital service standards

Pendahuluan

Rumah sakit sebagai salah satu sarana kesehatan untuk masyarakat memiliki peran yang sangat strategis dalam meningkatkan derajat kesehatan masyarakat. Oleh karena itu, rumah sakit dituntut untuk dapat memberikan pelayanan yang bermutu

Lampiran 7. Jurnal 4

ANALISIS PELAKSANAAN STANDAR PELAYANAN MINIMAL (SPM) RUMAH SAKIT BIDANG FARMASI DI INSTALASI FARMASI RUMAH SAKIT UMUM DAERAH MUARA TEWEH TAHUN 2016

Handi mukti fahrizal*, Gunawan Pamudji, Tri Murti Andayani
Jurusan S2 Farmasi, Falkutas Farmasi, Universitas Setia Budi Surakarta-57127, Indonesia
Email: handimf@gmail.com
Jurusan S2 Farmasi, Falkutas Farmasi, Universitas Gadjah Mada- 55281, Indonesia

ABSTRAK

Rumah Sakit perlu memenuhi Standar Pelayanan Minimal (SPM) rumah sakit, termasuk RSUD Muara Teweh. Penelitian ini bertujuan mengetahui bagaimana pelaksanaan SPM RS terutama di Instalasi Farmasi RSUD Muara Teweh yang meliputi 4 indikator, yaitu waktu tunggu pelayanan resep, kepuasan pasien, tidak adanya kesalahan pemberian obat dan penulisan resep sesuai dengan formularium dan untuk mengetahui faktor apa saja yang menghambat pelaksanaan SPM di RSUD muara Teweh.

Penelitian ini merupakan penelitian deskriptif non eksperimental dengan pendekatan secara kualitatif dan kuantitatif. Data diperoleh dari hasil observasi, wawancara pada pihak yang terkait dengan empat indikator dan kuesioner tingkat kepuasan pelanggan kepada pasien. Penelitian ini dilakukan di RSUD Muara Teweh pada bulan Desember 2016 dengan sampel sebesar 110 untuk waktu tunggu pelayanan resep jadi dan waktu tunggu pelayanan resep racikan, untuk kepuasan pasien diambil 110 pasien yang sudah pernah lebih dari satu kali berkunjung ke instalasi farmasi, untuk cek tidak adanya kesalahan pemberian obat dan kesesuaian penulisan resep diambil seluruh pelayanan resep pada bulan Desember.

Hasil penelitian menunjukkan bahwa rata – rata waktu tunggu pelayanan obat yaitu 25,1 menit/lembar resep obat jadi, 35 menit/lembar resep obat racikan, kepuasan pasien terhadap pelayanan farmasi 94,88%, tidak adanya kesalahan pemberian obat 100% dan kesesuaian penulisan resep dengan formularium 99%. Faktor yang mempengaruhi pelaksanaan SPM Rumah Sakit adalah SDM dan sarana prasarana.

Kata Kunci: Standar pelayanan minimal RS, RSUD Muara Teweh

PENDAHULUAN

Jaminan mutu untuk pelayanan kesehatan merupakan salah satu pendekatan atau upaya yang sangat penting dan mendasar dalam memberikan layanan kesehatan kepada pasien. Professional layanan kesehatan, baik perorangan atau kelompok, harus selalu berupaya memberikan layanan kesehatan yang terbaik mutunya kepada semua pasien tanpa terkecuali (Pohan, 2007). Rumah sakit sebagai wadah pelayanan kesehatan sangat diperlukan dalam menyelenggarakan upaya kesehatan. Sebagai salah satu fasilitas pelayanan kesehatan, rumah sakit harus terus menerus memberikan pelayanan yang bermutu kepada setiap pasien. Untuk menjamin mutu pelayanan tersebut Menteri Kesehatan Republik Indonesia membuat keputusan tentang Standar Pelayanan Minimal (SPM) Rumah sakit.

SPM Rumah sakit diharapkan dapat membantu pelaksanaan penerapan SPM di rumah sakit. SPM ini dapat menjadi acuan bagi pengelola rumah sakit untuk menjamin mutu dari setiap jenis pelayanan yang ada di rumah sakit. Salah satu fasilitas pelayanan kesehatan yang ada di rumah sakit ialah pelayanan farmasi, dalam rangka meningkatkan pembangunan dibidang pelayanan farmasi yang bermutu dan efisien yang berasaskan pelayanan kefarmasian *(Pharmaceutical Care)* di rumah sakit. maka jenis pelayanan farmasi juga memiliki standar yang dapat digunakan sebagai pedoman dalam memberikan pelayanan kefarmasian di rumah sakit.

Menurut Permenkes RI nomor 129 Tahun 2008 tentang standar pelayanan minimal rumah sakit, standar pelayanan farmasi rumah sakit adalah waktu tunggu pelayanan obat jadi adalah ≤ 30 menit dan obat racikan adalah ≤ 60 menit, tidak

Lampiran 8. Jurnal 5

ANALISIS LAMA WAKTU TUNGGU PELAYANAN RESEP DI APOTEK BPJS RAWAT JALAN RUMAH SAKIT PELAMONIA

Analiysis Waiting Time On Prescription Services In Bpjs Pharmacy Pelamonia Hospital

Veronica Dampung[1], Ita Purnama Sari[2], Citra Rahayu[3], Rusli[4]

[1]Bagian Farmasi, StikesPelamoniaKesdam VII/Wirabuana
(email:veronicamd@gmail.com)
[2]Bagian Farmasi, StikesPelamoniaKesdam VII/Wirabuana
(email: itapurnamasari.mks@gmail.com)
[3]Bagian Farmasi, StikesPelamoniaKesdam VII/Wirabuana
(email:citracite@gmail.com)
[4]Bagian Farmasi, Politeknik Kesehatan Kemenkes RI Makassar
(email: rusfar67@yahoo.com)

Alamat Korespondensi:
Ita Purnama Sari Amd. Farm
Prodi D III Farmasi
Stikes Pelamonia Kesdam VII/Wirabuana
Makassar, 90125
HP: 085397029028
Email: itapurnamasari.mks@gmail.com

ABSTRACT

In Pharmacy installationTK II PelamoniaHospital there waiting time for prescription services that have not reached the minimum service standard (SPM), This is not in accordance with the Decree of the Minister of Health No. 129 / Menkes / SK / II / 2008 concerning Standards Hospital Minimum Services. So this study aims to analyze timeliness of waiting time for prescribing BPJS patients with minimum service standards hospital. This research uses Non Probability Accidental Sampling method on the prescription of outpatients of the Social Security Organizing Body (BPJS) at TK II Pelamonia Hospital. The research time was carried out with a sample of 1,466 recipes with 1,159 non-concoction recipes and 307 concoction recipes. The research was carried out by observation direct and calculation of the waiting time for non-concoction recipe services and concoctions. The conclusion of this study is the long waiting time for non-concoction prescription services has a 32 minute waiting time not standard and the recipe recipe has a waiting time of 45 minutes according to the standard.

Keywords : Service With Minimal Standard, Prescription Waiting Time.

ABSTRAK

Di instalasi Farmasi Rumah Sakit TK II Pelamonia terdapat waktu tunggu pelayanan resep yang belum mencapai standar pelayanan minimal (SPM), Hal tersebut belum sesuai denganKepmenkes Nomor 129/Menkes/SK/II/2008 tentang Standar Pelayanan Minimal RumahSakit. Maka penelitian ini bertujuan untuk menganalisis ketepatan waktu tunggu pelayanan resep pasien BPJS dengan standar pelayanan minimal rumah sakit. Penelitian ini menggunakan metode *Non Probability Accidental Sampling* terhadap resep pasien rawat jalan Badan Penyelenggara Jaminan Sosial (BPJS) di Rumah Sakit TK II Pelamonia. Waktu penelitian dilakukan dengan jumlah sampel 1.466 dengan 1.159 resep non racikan dan 307 resep racikan. Penelitian dilakukan dengan pengamatan langsung dan penghitungan lama waktu tunggu pelayanan resep non racikan dan racikan. Kesimpulan dari penelitian ini yaitu lama waktu tunggu pelayanan resep non racikan mempunyai waktu tunggu 32 menit tidak sesuai standar dan resep racikan mempunyai waktu tunggu 45 menit sesuai dengan standar.

Kata kunci : Standar Pelayanan Minimal, Waktu Tunggu Pelayanan Resep

Lampiran 9. Jurnal 6

EVALUASI PELAKSANAN STANDAR PELAYANAN MINIMAL (SPM) FARMASI KATEGORI LAMA WAKTU TUNGGU PELAYANAN RESEP PASIEN RAWAT JALAN DI RSUD KOTA SALATIGA

[1] **Hidayah Karuniawati**, [2] **Ika Gilar Hapsari**, [1] **Marwiani Arum**, [1] **Adiva Tantyas Aurora**, [1] **Nungky Asmaraning Wahyono**

[1] Fakultas Farmasi Universitas Muhammadiyah Surakarta,
[2] RSUD Kota Salatiga
Corresponding author email: hk170@ums.ac.id

ABSTRAK

Salah satu standar pelayanan farmasi di rumah sakit adalah waktu tunggu. Waktu tunggu pelayanan obat adalah tenggang waktu mulai pasien menyerahkan resep sampai dengan menerima obat. Waktu tunggu berpengaruh pada kualitas pelayanan dan kepuasan pasien. Penelitian ini bertujuan untuk mengevaluasi pelaksanaan Standar Pelayanan Minimal (SPM) Rumah Sakit dengan jenis pelayanan farmasi kategori lama waktu tunggu pelayanan resep rawat jalan di RSUD Kota Salatiga. Penelitian ini merupakan penelitian non eksperimental dengan rancangan deskriptif (penelitian survey) terhadap pasien rawat jalan yang menebus resep di Instalasi Farmasi RSUD Salatiga dan pengambilan sampel dengan menggunakan metode *purposive sampling*. Waktu penelitian yaitu pada bulan Januari – Maret 2016. Dilakukan penghitungan waktu tunggu pelayanan resep obat jadi dan obat racikan kemudian dilakukan analisis terhadap kesesuaian dengan standar pelayanan minimal kategori lama waktu tunggu. Jumlah resep yang diteliti dalam penelitian ini sebanyak 225 resep dengan 78 resep obat racikan dan 147 merupakan resep obat jadi atau non racikan. Waktu tunggu rata-rata obat racikan adalah 9,18 menit dan rata-rata waktu tunggu obat jadi atau obat non racikan adalah 5,70 menit. Hal tersebut sudah sesuai dengan standar pelayanan minimal yang dipersyaratkan oleh Kepmenkes No 129/ Menkes/SK/II/2008 tentang pelayanan resep baik obat jadi maupun obat racikan yaitu lama waktu tunggu obat jadi ≤30 menit dan obat racikan ≤60 menit , dan dari semua sampel yang diteliti tidak ada yang melebihi lama waktu tunggu seperti yang dipersyaratkan.

Kata Kunci : standar pelayanan minimal, waktu tunggu, obat jadi, obat racikan

ABSTRACT

One of the pharmaceutical care standard in hospital is waiting time. Waiting time is counted from patients give the prescription until get medicines in pharmacy department. Waiting time influences quality of health care and patients' satisfy. This research is due to evaluate implementation of minimum health care standard at hospital categorize waiting time for concoction medicines and non concoction medicines in outpatients at RSUD Kota Salatiga. This is a non experimental experiment with descriptive design. Samples were collected with purposive sampling method. Research was done on January until March 2016. The numbers of samples are 225 prescriptions consist of 78 concoction medicines and 147 non concoction medicines. Result showed that the average of waiting time for concoction medicines was 9.18 minutes and the average of waiting time for non concoction medicines was 5.70 minutes. These were proper the regulation of Indonesian health ministry No 129/Menkes/SK/II/2008, which is for concoction medicines is less than or equal to 60 minutes and non concoction medicines is less than or equal to 30 minutes. All of the samples were proper to the regulation.

Keywords*: minimum health care standard, waiting time, concoction medicines, non concoction medicines*

Lampiran 10. Jurnal 7

KUALITAS PELAYANAN FARMASI BERDASARKAN WAKTU TUNGGU PENYELESAIAN RESEP DI RUMAH SAKIT KABUPATEN BANDUNG

Mamay Maulana Sobandi , Ani Anggriani, Dwi Septivianie

Fakultas Farmasi Universitas Bhakti Kencana

Jalan Soekarno Hatta No 754 Cibiru Bandung

mamay.maulana@bku.ac.id

ABSTRAK

Instalasi farmasi adalah salah satu unit di rumah sakit yang memberikan layanan produk dan jasa dalam bentuk pelayanan resep. Pelayanan resep sebagai garis depan pelayanan farmasi kepada pasien harus di kelola dengan baik, Karena mutu pelayanan resep farmasi yang baik umumnya di kaitkan dengan kecepatan dalam memberikan pelayanan. Waktu tunggu adalah salah satu standar minimal pelayanan farmasi di rumah sakit. Waktu tunggu pelayanan obat jadi adalah tenggang waktu mulai pasien menyerahkan resep sampai menerima obat jadi dengan standar minimal yang di tentukan kementerian kesehatan adalah ≤ 30 menit sedangkan waktu tunggu pelayanan obat racikan adalah tenggang waktu mulai pasien menyerahkan resep sampai dengan menerima obat racikan yaitu ≤ 60 menit. Tujuan penelitian ini untuk mengetahui apakah waktu tunggu pelayanan resep obat jadi dan racikan sudah memenuhi standar pelayanan minimal rumah sakit yang telah di tetapkan oleh pemerintah. Metode penelitian di lakukan dengan observasi partisipasi lengkap dengan menggunakan teknik purpose sampling. Pengamatan pelayanan resep obat jadi maupun racikan di lakukan pada bulan Juni - Juli 2019 . Data yang diambil sebanyak 177 Resep pasien rawat jalan yang terdiri dari 142 resep obat jadi dan 35 Resep obat racikan . Rata-rata waktu tunggu pelayanan resep obat jadi yaitu 11,22 menit sedangkan waktu tunggu pelayanan untuk resep obat racikan 38,22 menit. Hal ini telah sesuai dengan keputusan Menteri Kesehatan No. 129/Menkes/SK/II/2008 yaitu waktu tunggu obat jadi (non racikan) ≤ 30 dan Obat Racikan ≤ 60 menit.

Kata kunci: Waktu tunggu, Pelayanan Resep, Standar Pelayanan Minimal Rumah Sakit

ABSTRACT

Pharmacy installation is one of the units in a hospital that provides products and services in the form of prescription services. Prescription services as the frontline of pharmaceutical services to patients must be managed properly, because the quality of pharmaceutical prescription services is generally associated with speed in providing services. Waiting time is one of the minimum standards for pharmaceutical services in a hospital. Waiting time for finished drug services is the grace period from when patients submit prescriptions to receiving finished drugs with a minimum standard determined by the ministry of health is ≤ 30 minutes while waiting time for concoction drug services is a grace period starting the patient submits a prescription until receiving the concoction drug that is ≤ 60 minutes. The purpose of this study was to determine whether the waiting time for prescription drugs and concoctions services had met the minimum hospital service standards set by the government. The research method was conducted with complete participation observation using purpose sampling techniques. Observation of prescription drugs and concoction services in do in June - July 2019. Data taken were 177 outpatient prescriptions consisting of 142 finished drug prescriptions and 35 prescription concoctions. The average waiting time for prescription drugs is 11.22 minutes while the waiting time for prescription drugs is 38.22 minutes. This is in accordance with the decision of the Minister of Health No. 129 / Menkes / SK / II / 2008, namely waiting time for finished drugs (non-concoction) ≤ 30 and concoction drugs ≤ 60 minutes.

Keywords: Waiting time, Prescription Services, Minimum Hospital Standards

PENDAHULUAN

Lampiran 11. Jurnal 8

GAMBARAN KECEPATAN PELAYANAN RESEP DI INSTALASI RAWAT JALAN
RUMAH SAKIT ELIM RANTEPAO KABUPATEN TORAJA UTARA

*The Speed Description Of Reservation Prescription In Patient Instalation Of Elim Hospital
North Toraja Rgion*

Estherina Allo Payung[1*] , Sisilia Idayani[2]

[1,2] Akademi Farmasi Toraja
*)Koresponden Author : estherinaallopayung@gmail.com / Tlp. 081342136015

ABSTRAK

Seiring semakin meningkatnya tuntutan masyarakat akan mutu pelayanan rumah sakit, maka perlu adanya upaya yang dilakukan utnuk memberikan pelayanan yang maksimal. Salah satu upaya yang dilakukan adalah dengan mengukur kecepatan pelanyan resep. Penelitian ini merupakan penelitian observasi untuk melihat gambaran kecepatan pelayanan resep. Jumlah responden sebanyak 410 yang diambil secara acak pada pasien yang datang berobat rawat jalan di Rumah Sakit Elim Rantepao selama bulan juli sampai Agustus 2018. Pengumpulan data dilakukan dengan cara menghitung waktu mulai resep diterima oleh petugas rawat jalan instalasi farmasi sampai obat diterima oleh pasien. Hasil penelitian menunjukkan rata-rata waktu penyelesaian resep racikan 37 menit, non racikan 30 menit.

Kata kunci: Resep racikan dan non racikan, Kecepatan pelayanan resep, pasien rawat jalan

PENDAHULUAN

Rumah Sakit adalah salah satu institusi pelayanan kesehatan yang menyelenggarakan pelayanan kesehatan perorangan secara paripurna yang menyediakan pelayanan rawat inap, rawat jalan dan gawat darurat. Salah satu tujuan rumah sakit adalah untuk mempermudah akses masyarakat untuk mendapatkan pelayanan kesehatan (Undang-Undang Nomor 44 tahun 2009).

Dewasa ini banyak tersedia institusi pelayanan kesehatan. Hal tersebut menimbulkan persaingan bisnis yang semakin kompetitif, sehingga mengubah cara berpikir masyarakat dalam memilih dan menilai mutu pelayanan kesehatan. Mutu tersebut merupakan salah satu tolok ukur kepuasan dan berdampak terhadap kembalinya pasien pada institusi yang memberikan pelayanan kesehatan yang efektif dan efisien sesuai dengan harapan

mereka. Salah satu upaya untuk mengetahui mutu pelayanan rumah sakit adalah dengan cara mengetahui kecepatan pelayanan resep pasien rawat jalan, baik resep obat racikan maupun non racikan. Menurut standar pelayanan minimal rumah sakit dari Menteri Kesehatan Nomor 129/Menkes/SK/II/2008 tentang waktu penyelesaian resep yaitu ≤ 30 menit untuk resep obat jadi dan ≤ 60 menit untuk resep obat racikan. Menurut Nita Rusdiana dalam penelitiannya tentang kualitas pelayanan farmasi berdasarkan waktu penyelesaian resep di Rumah Sakit Umum Tangerang menyimpulkan bahwa waktu penyelesaian resep dokter yang memberikan jaminan kepuasan adalah kurang dari 13 menit dan didukung dengan hasil kuesioner yang dinyatakan dalam hasil tertinggi pada variabel daya tanggap sebesar 3,29 yang setuju bahwa waktu tunggu obat tidak lama.

Lampiran 12. Jurnal 9

Evaluasi Waktu Tunggu Pelayanan Obat
di Instalasi Farmasi Rawat Jalan RS X

Okpri Meila[1*], Jenny Pontoan[2], Didi Nurhadi Illian[1]

[1]Jurusan Farmasi, Fakultas MIPA, Universitas Syiah Kuala, Banda Aceh, Indonesia
[2]Fakultas Farmasi, Institut Sains dan Teknologi Nasional, Jagakarsa, Jakarta Selatan, Indonesia

E-mail korespondensi: okprimeila@unsyiah.ac.id

ABSTRAK

Standar waktu tunggu yang ditentukan pemerintah melalui Standar Pelayanan Minimal rumah sakit yaitu, pelayanan resep obat non racikan adalah ≤ 30 menit dan obat racikan adalah ≤ 60 menit. Pada pelayanan farmasi di rumah sakit, waktu tunggu adalah waktu yang dibutuhkan untuk menyelesaikan satu proses pelayanan mulai dari penerimaan resep sampai penyerahan obat. Pada jam 11.00 sd 14.00 merupakan jam sibuk di RS X, sehingga pada jam tersebut resep-resep masuk secara bersamaan sehingga terjadi penumpukan resep (*delay*). Hal ini tentu saja akan berdampak pada rendahnya kepuasan pasien rawat jalan terhadap kualitas pelayanan Depo Rawat Jalan. Maka perlunya mengevaluasi waktu tunggu untuk resep racikan dan non racikan pada Depo Rawat Jalan dan Pelayanan Swasta sehingga aktivitas-aktivitas yang memakan waktu lama pada proses pelayanan resep dapat diketahui. Penelitian dilakukan secara observasional dengan pengambilan data secara prospektif di depo rawat jalan dan pelayanan swasta, evaluasi lama waktu tunggu pelayanan obat dilakukan dengan menuliskan waktu saat pasien menyerahkan resep hingga pasien menerima obat di depo rawat jalan dan pelayanan swasta RS X. Berdasarkan hasil evaluasi waktu tunggu pelayanan obat di depo rawat jalan diketahui waktu tunggu pelayanan obat racikan di depo rawat jalan adalah selama 43 menit 8 detik, dimana ini belum memenuhi standar minimal pelayanan rumah sakit. Sedangkan waktu tunggu pelayanan obat racikan dan non racikan di Pelayanan Swasta adalah selama 13 menit 7 detik dan 32 menit 42 detik, dimana ini telah memenuhi standar minimal pelayanan rumah sakit.

Kata Kunci: *instalasi farmasi, pelayanan obat, waktu tunggu*

Evaluation of Waiting Time for Drug Services
in The Outpatient Pharmacy Installation at RS X

ABSTRACT

The waiting time standard determined by the government in Hospital Minimum Service Standards, for non-concoction prescription drug service is ≤ 30 minutes and concoction drug is ≤60 minutes. In pharmacy services at hospitals, waiting time is the time needed to complete a service process from receiving a prescription to delivering the drug. At 11:00 to 14:00 is a rush hour so at that hour the prescriptions come in simultaneously so that there is a buildup of prescription (delay). This, of course, will have an impact on the satisfaction of outpatients with quality services. That's why it is necessary to evaluate the waiting time for prescription concoctions and non-concoctions at the outpatient depot and Private Services so the activities that require a long time in the prescription service process can be known. The study was conducted prospectively by observing directly in the outpatient depot and private services, evaluating the length of time waiting for drug services is done by writing the time when patients submit prescriptions until patients receive drugs in the outpatient depot and private services at X Hospital. Based on the results of the evaluation of waiting times for drug services in the outpatient depot it is known that the waiting time for a concoction of drug services in the outpatient depot is 43 minutes 8 seconds, not accordance with the minimum hospital service standards. Meanwhile, the waiting time for concoction and non-concoction drug services in Private Services is 13 minutes 7 seconds and 32 minutes 42 seconds, which is per under with the minimum hospital service standards.

Keywords: *drug service, pharmaceutical installation, waiting time*

Lampiran 13. Jurnal 10

ANALISIS WAKTU TUNGGU PELAYANAN PASIEN RAWAT JALAN DI INSTALASI FARMASI RUMAH SAKIT

Eva Rusdianah
(Prodi Kesehatan Masyarakat,
STIKes Bhakti Husada Mulia Madiun)

ABSTRAK

Instalasi farmasi merupakan bagian penting di sektor rumah sakit. Pelayanan farmasi dituntut untuk memberikan kepuasan pasien. Pelayanan resep sebagai garis depan pelayanan farmasi kepada pasien harus dikelola dengan baik, karena mutu pelayanan resep farmasi yang baik umumnya dikaitkan dengan kecepatan dalam memberikan pelayanan. Berdasarkan data tingkat kepuasan terhadap pelayanan farmasi, pasien rawat jalan di Instalasi Farmasi RSI Siti Aisyah Madiun, bahwa 83,3 % pasien menyatakan tidak puas dengan waktu tunggu pelayanan obat dan 16,7 % menyatakan puas.
Jenis penelitian ini adalah penelitian observasional dengan metode deskriptif. Tujuan penelitian ini adalah untuk mengetahui gambaran waktu tunggu pelayanan resep pasien rawat jalan di instalasi farmasi RSI Siti Aisyah Madiun. Populasi penelitian ini adalah resep untuk pasien rawat jalan berjumlah 2.492 resep. Pengambilan sampel untuk resep dengan purposive sampling sebanyak 344 resep.
Hasil penelitian ini menunjukkan bahwa rata-rata waktu tunggu pelayanan resep obat jadi adalah 8,62 menit, waktu tunggu pelayanan resep obat racikan adalah 13,49 menit, sedangkan rata-rata total waktu tunggu pelayanan resep adalah 9,17 menit. Rata-rata waktu tunggu pelayanan resep obat jadi dan obat racikan telah memenuhi standar PERMENKES Nomor. 129/MENKES/SK/II/2008 yaitu waktu tunggu obat jadi kurang dari 30 menit dan untuk obat racikan kurang dari 60 menit.

Kata kunci:
Waktu tunggu, Pelayanan resep, Farmasi, Rumah sakit

PENDAHULUAN

Latar Belakang

Pelayanan farmasi rumah sakit merupakan salah satu kegiatan di rumah sakit yang menunjang pelayanan kesehatan yang bermutu. Hal tersebut diperjelas dalam Keputusan Menteri Kesehatan Nomor 1197/Menkes/SK/X/2004 tentang standar Pelayanan Farmasi Rumah Sakit, yang menyebutkan bahwa pelayanan farmasi rumah sakit adalah bagian yang tidak terpisahkan dari sistem pelayanan kesehatan rumah sakit yang berorientasi kepada pelayanan pasien, penyediaan obat yang bermutu, termasuk pelayanan farmasi klinik, yang terjangkau bagi sesama lapisan masyarakat (Departemen Kesehatan RI, 2004).

Instalasi Farmasi Rumah Sakit bertanggung jawab terhadap semua perbekalan farmasi dan termasuk salah satu *revenue center* rumah sakit. Besarnya omzet obat dapat mencapai 50-60% dari anggaran pendapatan rumah sakit (Septini, 2011). Pelayanan obat merupakan salah satu bagian yang penting dalam penyelenggaraan pelayanan rumah sakit dan tidak terpisahkan dari pelayanan medik keperawatan.Di rumah sakit, pelayanan obat adalah tanggung jawab dari instalasi farmasi yang bekerja 24 jam.Kecermatan, ketepatan dan kecepatan pelayanan farmasi merupakan indikator penting kepuasan penderita (Megawati, 2015).

Waktu tunggu pasien didefinisikan sebagai jangka waktu dari saat pasien menyerahkan resep ke Instalasi Farmasi Rawat Jalan sampai dengan waktu pasien menerima obat dan meninggalkan instalasi farmasi (Kepmenkes RI, 2008). Menurut Survei yang dilakukan oleh *Health Services and Outcomes Research, National Healthcare Group* Singapore, selain akurasi resep dan keterjangkauan obat, waktu tunggu pelayanan obat sangat mempengaruhi kepuasan pasien yaitu kurang dari 30 menit. Pengalaman seorang pasien dalam menunggu pelayanan dapat mempengaruhi persepsinya tentang kualitas pelayanan (Megawati, 2015).

Penelitian yang dilakukan oleh Yulianthy (2011) tentang lama waktu tunggu pelayanan resep pasien umum di Farmasi Unit Rawat Jalan Selatan Pelayanan Kesehatan Sint Carolus, didapatkan hasil

Lampiran 14. Jurnal 11

IMPLEMENTATION OF WAITING TIME OF PHARMACY SERVICE FOR OUTPATIENTS AT PHARMACY INSTALLATION OF JOGJA HOSPITAL

Faridah Baroroh[1], Lukman Hakim[2], Endang Sulistyani[3]

Faculty of Pharmacy, Ahmad Dahlan University

Abstract

Background. The waiting time of pharmacy service is a performance indicator of pharmacy service in hospitals as specified by the Ministry of Health of Indonesia in decree No. 129/MENKES/SK/II/2008 about Minimum Service Standard of Hospital. This study was aimed to identify the realization of the waiting time implementation of pharmacy service at Pharmacy Installation of Jogja Hospital compared to the targeted performance.

Method. This study used descriptive desaign. The secondary data was taken from programs of Pharmacy Installation. While primary data was taken from direct observation. Samples were consisted of 200 items of data of compound medicine and 200 of non compound medicine. Data was analysed using descriptive statistic to identify the implementation. While gap analysis method to find out the gap between the target and the realization of the implementation of waiting time of pharmacy service for outpatients.

Result. The result showed that the waiting time implementation of pharmacy service at Pharmacy Installation of Jogja Hospital for compound medicine service in average was 41 minutes 2 seconds. This finding was appropiate to the range of minimum service standard of hospital but was not appropiate to the range of waiting time targeted by Pharmacy Installation. The gap was negative 0.50% or the realization did not achieve the targeted waiting time. Meanwhile the waiting time implementation of non compound medicine service in average was 19 minutes 45 seconds. This finding was appropiate to the minimum service standard of hospital and targeted waiting time of Pharmacy Installation. The gap was positive 1.0% which meant that it had exceeded the target.

Conclusion. The waiting time implementation of pharmacy service for outpatients at Jogja Hospital had been in the range of hospital minimum service standard.

Keywords : waiting time, pharmacy service, outpatients, Jogja Hospital

Faculty of Pharmacy, Gadjah Mada University
Pharmacy Installation, Jogja Hospital
Email : ida_br@yahoo.com

Lampiran 15. Jurnal 12

Indonesian Journal of Pharmaceutical and Clinical Research

Evaluation of Waiting Time for Outpatient Prescription Services at the Pharmacy Installation at the Universitas Sumatera Utara Hospital

Muhammad Yunus[1]*, Wiryanto[2], Yuandani[2]

[1]Postgraduate Programs Faculty of Pharmacy, Universitas Sumatera Utara, Medan, 20155, Indonesia
[2]Department of Pharmacology, Faculty of Pharmacy, Universitas Sumatera Utara, Medan, 20155, Indonesia

Abstract. The pharmacy installation is one of the units in the hospital that provides. service products and services in the form of prescription services. Prescription service asthe front line of pharmacy services to patients must be managed properly becausethe quality of pharmaceutical prescription service which is generally associated with the speed ingiving service. This research is a descriptive type of research with prospective data collection from March-June 2019 to evaluate the waiting time for outpatient prescription services at the Hospital Pharmacy Installation of the Universitas Sumatera Utara. The data taken were 357 outpatient prescriptions.The results of this study indicate the total average length of time waiting for outpatients for the provision of non-fake drugs at the Pharmacy Installation of Outpatients at the University of Sumatera Utara Hospital at 09.00 - 11.00 is 29.10 minutes, at 11.00 - 13.00 is 34.44. minutes and at 13.00 - finished 42.60 minutes. The average length of waiting time for outpatients for the provision of compound drugs at the Outpatient Pharmacy Installation of the University of Sumatera Utara Hospital at 09.00 - 11.00 is 51.67 minutes, 11.00 - 13.00 hours is 62.27 minutes and at 13.00 - completion was 65.71 minutes. The waiting time for prescription services is ≤ 60 minutes.Based on the results of research conducted at the Outpatient Pharmacy Installation at the University of Sumatera Utara Hospital, non-concocted prescription drugs meet the requirements if the service time speed is ≤ 30 minutes and the concocted drug prescription fulfills the requirements if the service time speed is ≤ 60 minutes.

Keywords: Waiting time, prescription service, hospital pharmacy installation

Abstrak. Instalasi farmasi adalah salah satu unit di rumah sakit yang memberikan layanan produk dan jasa dalam bentuk pelayanan resep. Pelayanan resep sebagai garis depan pelayanan farmasi kepada pasien harus dikelola dengan baik, karena mutu pelayanan resep farmasi yang umumnya dikaitkan dengan kecepatan dalam memberikan pelayanan. Penelitian ini merupakan jenis penelitian deskriptif dengan pengambilan data secara prospektif selama bulan maret-juni 2019 untuk mengevaluasi waktu tunggu pelayanan resep rawat jalan di Instalasi Farmasi Rumah Sakit Universitas Sumatera. Data yang diambil sebanyak 357 resep pasien rawat jalan. Hasil penelitian ini menunjukkan total lama rata-rata waktu tunggu pasien rawat jalan untuk penyediaan obat non rancikan di Instalasi Farmasi Pasien Rawat Jalan Rumah Sakit Universitas Sumatera Utara pada pukul 09.00 – 11.00 adalah 29,10 menit, pada pukul 11.00 – 13.00 adalah 34,44 menit dan pada pukul 13.00 – selesai 42,60 menit. Lama rata-rata waktu tunggu pasien rawat

*Corresponding author at: Postgraduate Programs Faculty of Pharmacy, Universitas Sumatera Utara, Medan, 20155, Indonesia

E-mail address: yunusmy11@yahoo.com

Lampiran 16. Jurnal 13

ANALYSIS OF WAITING TIME FOR PHARMACEUTICAL SERVICES CEMPAKA PUTIH HOSPITAL

Ferti Dwi Ekasari, Adang Bachtiar

Faculty of Public Health, Universitas Indonesia

ABSTRACT

Background: With the increasing public awareness of the importance of the health of the services and excellent health services become indispensable by the community to meet the demand for health especially pharmaceutical services in support of optimal health system. In order to give satisfaction to the patient, the pharmacy service becomes one of the factors that affect the realization of the objectives of the policy making. The quality of services as a measure of how good a given level of serviceable to match the expectations of patients. Quality of services is an advantage that is perceived by the consumer services of the comparison between what customers want with what is acceptable to the consumer after the purchase of services. This study aimed to analyze of waiting time for pharmaceutical services Cempaka Putih Hospital.

Subjects and Method: This was a quasi experiment before and after with no control design conducted at Cempaka Putih Hospital on 1 August 2017 to 30 September 2017. A sample of several patients in the queue at the pharmacy was selected by systematic random sampling. The dependent variable was waiting time. The independent variable was effort to improve pharmaceutical service quality, including improved service flow, centralize pharmacies, arrange pharmacy, create programs between cashiers and pharmacy, make etiquette with programs, and socialize doctors about writing well and correct recipes. The data were collected by questionnaire and tested by by t-test.

Results: The average of waiting time for pharmaceutical services was faster after intervention (12 minutes) than before (24 minutes) and it was statistically significant.

Conclusion: Effort to improve pharmaceutical service quality has successfully decreased waiting time for pharmaceutical service less than 30 minutes of Minimum Service Standards.

Keywords : waiting time, pharmaceutical services, minimum Service Standards.

Correspondence:
Ferti Dwi Ekasari. Faculty of Public Health, Universitas Indonesia.
Email: fertydwi@gmail.com. Mobile: +6281510303716.

BACKGROUND

The hospital as one of the providers of health services is required to provide quality health services to the community. According to Law of the Republic of Indonesia Number 44 of 2009 concerning Hospitals stated that the Hospital is a health service institution that organizes individual health services comprehensively that provides inpatient, outpatient and emergency services. Plenary health services are services that are expected to provide maximum hospital patient satisfaction according to established standards. There are many ways to improve patient satisfaction in getting services at the hospital, one of which is to accelerate waiting time in getting services at the hospital.

Service waiting time is the length of time needed by patients ranging from registering to getting services. Patient satisfaction with a hos-

Lampiran 17. Jurnal 14

Implementation of lean management to reduce waiting time for drugs in Islamic Hospital, Surabaya

Halimah Salim Ahmad [1], Thinni Nurul Rochmah [1*], Budhi Setianto [2]

[1] Department of Health Policy and Administration, Faculty of Public Health Universitas Airlangga, Surabaya 60115, INDONESIA
[2] Surabaya Islamic Hospital, Surabaya 60243, INDONESIA
*Corresponding author: thinni_nurul@fkm.unair.ac.id

Abstract

Introduction: Outpatient pharmacy services in Islamic Hospital, Surabaya, still have problems regarding the length of waiting time. This study aimed to reduce the length of waiting time for outpatient pharmacy services by implementing lean management.
Methods: A quantitative study was carried out in the outpatient pharmacy service unit at Islamic Hospital of Surabaya from January to March 2018.
Results: This study showed that the average time at each stage of the process for non-concoction drugs, for the process of the insurance debtor was 56.86 minutes, followed by the (National Health Insurance Board) BPJS debtor with the time was 54.50 minutes and the cash debtor with time a total of 50.67 minutes. It showed non-concoction drugs with working time before the intervention with an average of 60.546 minutes to 33.474 minutes.
Conclusion: The implementation of lean management can reduce the length of waiting times for pharmacy services in outpatient units from non-concoction and concoction drugs.

Keywords: waiting time, lean management, waste

INTRODUCTION

Pharmacy services must be carried out with due regard to the quality of high-quality pharmacy services, through well pharmacy services too (Curtiss, et al.2004; Downing, 2015). Pharmacy services include the supply and distribution of all pharmacy supplies, clinical pharmacy services, making information, and guaranteeing the quality of drug services (Gray, et al. 2005). Good pharmacy service is one of the benchmarks of service quality in a hospital. One important aspect of pharmacy service is the management of the length of time for drug services (Afolabi & Erhun, 2003; Hakim & Irbantoro, 2015; Kumari, et al. 2012). Service quality approach originally has five dimensions, including tangibility, empathy, responsiveness, reliability, and assurance (Lubis, et al. 2017). Employee commitment and customer satisfaction are reciprocally related to internal and external attributes (Yusuf, et al. 2019). The service quality determinants are measuring, controlling, and improving customer service quality (Tuami, et al. 2018). Pharmaceutical care has become an important subject to optimize patient care (Nasution, et al. 2014). The pharmacist role is not only responsible for product-oriented but also to identify, manage and prevent the patient's drug-related problems (Tanjung & Nasution, 2017).

Pharmacy services in Islamic Hospital, Surabaya, become one of the service units having an important role in hospital operations. The performance of pharmacy services leading to the emergence of revenue for hospitals dominates the proportion of overall hospital revenue. The performance of pharmacy services in achieving production based on the number of recipes served in 2014 and 2015 showed that the number of recipes served by this pharmacy unit has grown from 212.810 recipes to 251.271 recipes or 18% from 2014 to 2015. This growth gives an overview that in the future, the number of recipes served will continue to increase which must be balanced with the quality of service in various aspects. Specifically for service quality, in terms of pharmacy services in outpatient pharmacy, Islamic Hospital in Surabaya has a problem that needs to be immediately followed up; this is the length time for pharmacy services in outpatient pharmacy services. This waiting time is the time from the patient takes the drug in the queue until the drug is received by the officer to the patient. Patients have to go through several consecutive stages in pharmaceutical service to get a

Lampiran 18. Jurnal 15

Waiting Time Analysis of Pharmaceutical Services with Queue Method In PKU Muhammadiyah Hospital Bantul

Nanda Surya Febrianta[*], Sri Sundari[**], Dwi Pudjaningsih[***]

*Master Student of Hospital Management, Universitas Muhammadiyah Yogyakarta, Indonesia

**Medical Faculty, Universitas Muhammadiyah Yogyakarta, Indonesia

*** Medical Faculty, Universitas Muhammadiyah Yogyakarta, Indonesia

Abstract- The increasing number of patient visits in the Outpatient Pharmacy Installation of Pku Muhamadiyah Hospital Bantul in 2016, impact on the number of recipes that should be served by the higher staff. This leads to long queues due to the slow service process that also affects long waiting times. Knowing the picture of waiting time of outpatient pharmacy service, Identify model of queuing system, and identify any factors influencing waiting time of outpatient pharmacy service. This research is a quantitative research with descriptive observational research method from samples taken and to support this approach, the researcher also conducted qualitative observation by doing observation interview. The average waiting time of outpatient pharmacy service is 39.23 minutes with the longest service time reaching 54.08 minutes and the fastest time of 19.04 minutes. The process of service delay at the time prior to delivery of the drug is the most contributing greatly affecting service time. From result of analysis using queuing method obtained queuing system Pharmacy Outpatient PKU Muhammadiyah Hospital Bantul have pattern of arrival of Poisson distributed patient, time of patient service of Poisson distribution and result, as follows: $Lq = 14{,}27$; $L = 16.15$; $Wq = 0.3036$; $W = 0.3436$; $Po = 3.09\%$, and Officer busyness level is 94%. The percentage of unemployed time officers whose value is 6% then the number of IFRS of PKU Muhammadiyah Bantul is not ideal yet. There are factors that influence the service time, among others; Availability of tbsp means of infrastructure, delay, and peak hours of service. The level of busyness of the officers is very high 94%, need additional staff to decrease workload (utility) officer and waiting time service.

Index Terms- waiting time, outpatient pharmacy, queuing system

I. INTRODUCTION

The hospital is one of the important networks of health services, the conditions with the tasks, burdens, problems and hopes that are hung on it. The development of number of hospitals in Indonesia, followed by the development of disease patterns, the development of medical technology and health and the development of public expectations of hospital services. It should be realized that the main purpose of hospital activities is to serve patients and their families, in various forms of service [1]. One part of the hospital service that is busy every day is outpatient pharmacy service. The large number of patients served by the number of officers who serve also affects the speed of service. If the service personnel is too little while the patient must be served greater then it will impact on service quality and patient satisfaction. On the other hand, if the service personnel is more than the optimal number, this means needing excessive capital investment, but if the amount is less than optimal result is delayed service [2]. Increased outpatient visits, especially in the Outpatient Pharmacy Installation service in 2016 with an average visit of 118,838 per month. The impact is the number of recipes that the officer must serve higher. This leads to long queues due to the slow service process that also affects long waiting times.

The average waiting time depends on the average rate of service. The queuing process is a process associated with the arrival of a customer at a service facility, then waits in a row (queue) if all the maids are busy, and finally leaves the facility. A queuing system is a set of customers, servants, and a rule governing the arrival of customers and processors of the problem [3].

There are several important factors that are closely related to the queuing system. Factors that affect the queue and service line according to Kakiay are as follows:

1. Distribution of arrival In queue system,
2. Time Distribution Service Distribution time of service related to how many service facilities that can be provided.
3. Service Facilities Service facilities are closely related to the line of queues to be established.
4. Service discipline
   Service discipline is closely related to the order of service for that customer. The discipline of service is divided into four forms, namely:
   a. First come, first served (FCFS = first come first service)
   b. Last come, first served (LCFS = last come first service)

Lampiran 19. Jurnal 16

System Effectivity of Pharmacy Services Queue Time in Outpatient Pharmacy Depot RSD Dr. Soebandi Jember

Vanji Budi Himawan[1(CA)], Nikma Fitriasari[2], Anna Widyassari[3]

[1(CA)]Master Program of Hospital Management, Faculty of Medicine, Brawijaya University, Indonesia;
vanjibudi@gmail.com (Corresponding Author)
[2]Master Program of Hospital Management, Faculty of Medicine, Brawijaya University, Indonesia
[3]dr. Soebandi Regional Hospital of Jember, Indonesia

ABSTRACT

Hospital pharmacy service is one of healthcare activity in hospital supporting quality health service. Good service time is associated and affecting customer satisfaction. Achievement results of Minimum Service Standard (MSS) in Pharmaceutical Depot RSD dr. Soebandi Jember in 2016 showed that service queue time of concocted drug was up to 3 hours and 35 minutes and for non-concoction drug was up to 2 hours and 14 minutes meaning that MMS had not been reached. The purpose of this research was to identify factors causing prolonged queue time of pharmacy service and give recommendation of alternative solution to queue time problem. This research used descriptive study approach by analyzing service flowchart, document review, observation, interview, and group discussion. The process of identifying the problem preceded by data collection stage, prioritizing the problem, determining the root of the problem, and determining the solution. The results of research along with the application of alternative solutions agreed upon was presented as a draft guidelines pharmacy services effectivity system. Implementation of pharmacy service activities based on the effectivity guidelines can speed up queue time despite resulting in pick hour up to 30-minute for concocted drugs and up to 22 minutes for non-concoction drug service. Implementation of system effectivity showed significant differences and were able to reach Pharmaceutical Depot MSS especially in its queue time.

Keywords: Queue time, Outpatient pharmacy depot, Effectivity

INTRODUCTION

Background

Today's emerging hospitals could be interpreted as labor-intensive, capital-intensive and tech-intensive industries because hospitals used large quantities of Human Resources (HR) with various qualifications, as well as the amount of funds used to perform various services. General hospital industry product is health services[1].

Pharmacy service is one of the hospital services that must exist and cannot be separated from the health service system and oriented to patients' service and safety[2]. Hospital pharmacy service is one of healthcare activity in hospital supporting quality health service. Pharmacy service is inseparable from the hospital healthcare system oriented to patient care, provision of quality medicine, clinical pharmacy services that can be afforded by everyone in society. Pharmacy services with good pharmaceutical supplies could become one of the hospital's revenue centers because the turnover could reach 50-60% of hospital income[3].

Implementation of pharmaceutical services becomes an important thing that must be paid attention by the hospital in maintaining quality service to improve patient satisfaction. Pharmaceutical services were involved in supplying medication, and ensuring that it is safe to be used, effective and appropriate so as to improve patients' quality of life. The final process of health services in hospitals showed that about 80% of patient visits concluded with drug prescriptions[1].

One of the indicators that could be used as a guideline for pharmaceutical services was the Minimum Service Standard (MSS). MSS implemented in the hospital refers to the Decree of Health Minister of the Republic of Indonesia No. 129/Menkes/SK/II/2008 about hospital pharmacy service such as queue time of pharmacy service[4].