

The Level of Satisfaction of inpatients and outpatients with Pharmaceutical Installation Services in Arifin Ahmad Hospital

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Published: July, 2025

ABSTRAK

Pelayanan kesehatan yang bermutu ditandai dengan terpenuhinya kebutuhan dan harapan seluruh pasien. Tingkat kepuasan pasien juga sangat bergantung pada mutu pelayanan yang diberikan oleh rumah sakit dan dapat diukur dengan 5 dimensi yaitu kehandalan, daya tanggap, kepastian, empati, dan nyata. Oleh karena itu, penelitian ini bertujuan untuk mengetahui tingkat kepuasan pasien rawat inap dan rawat jalan terhadap pelayanan kefarmasian di depo farmasi RSUD Arifin Achmad Pekanbaru. Prosedur penelitian dilakukan dengan metode observasional deskriptif dengan rancangan Cross-Sectional. Populasi sampel sebanyak 95 pasien rawat inap dan 100 pasien rawat jalan yang dipilih secara purposive sampling dan diwawancarai dengan kuesioner. Data yang terkumpul kemudian dianalisis secara deskriptif menggunakan analisis univariat dan bivariat dengan perangkat lunak komputer. Hasil penelitian menunjukkan bahwa tingkat kepuasan pasien rawat inap terhadap pelayanan memperoleh skor rata-rata sebesar 92,31%, 80,35%, 92,91%, 90,07%, dan 85,15% untuk dimensi kehandalan, ketanggapan, kepastian, empati, dan bukti fisik masing-masing. Sedangkan kepuasan pasien rawat jalan menunjukkan skor rata-rata sebesar 83,24%, 75,99%, 87,42%, 85,14%, dan 88,18% untuk dimensi kehandalan, ketanggapan, kepastian, empati, dan bukti fisik masing-masing. Berdasarkan hasil penelitian tersebut, pasien sangat puas terhadap pelayanan instalasi farmasi dengan skor rata-rata keseluruhan sebesar 88,75% untuk pelayanan pasien rawat inap dan 84,68% untuk pelayanan pasien rawat jalan pada seluruh dimensi.

Keywords: Kepuasan Pelayanan Kefarmasian, Rawat Inap, Rawat Jalan, Instalasi Farmasi

ABSTRACT

Quality healthcare services are characterized by the satisfaction of the needs and expectations of all patients. The level of patients satisfaction is also largely dependent on the quality of services provided by hospitals and can be measured by 5 dimensions, namely *reliability*, *responsiveness*, *assurance*, *empathy*, and *tangible*. Therefore, this study aimed to determine the level of inpatients and outpatients satisfaction with pharmaceutical services at the pharmacy depot of Arifin Achmad Hospital in Pekanbaru. The study procedures were carried out using a descriptive observational method with a *Cross-Sectional* design. The sample population comprised 95 inpatients and 100 outpatients who were selected using purposive sampling and interviewed with a questionnaire. The data collected were then analyzed descriptively using univariate and bivariate analysis with computer software. The results showed that the level of inpatients satisfaction with services obtained an average score of 92.31%, 80.35%, 92.91%, 90.07%, and 85.15% for *reliability*, *responsiveness*, *assurance*, *empathy*, and *tangible* dimensions, respectively. Meanwhile, outpatients satisfaction showed an average score of 83.24%, 75.99%, 87.42%, 85.14%, and 88.18% for *reliability*, *responsiveness*, *assurance*, *empathy*, and *tangible* dimensions, respectively. Based on these findings, patients were highly satisfied with pharmacy installation services with an overall average score of 88.75% for inpatients care and 84.68% for outpatients care across all dimensions.

Keywords: Satisfaction Pharmaceutical services, Inpatient, Outpatient, Pharmacy Installation

PENDAHULUAN

Hospitals are the major providers of healthcare services in Indonesia, offering inpatients, outpatients, and emergency care. These organizations are also known to provide supporting facilities, such as pharmaceutical services (Kemenkes RI, 2010). According to the Minister of Health Regulation Number 72 of 2016, pharmaceutical services in hospitals are an essential aspect of the healthcare system (Kemenkes RI, 2016). In line with previous studies, patients satisfaction typically depends on the quality of services provided by hospitals. Several reports have also shown that quality services comprise patients recovery and satisfaction with attitude as well as facilities and infrastructure. (wahyuni *et al.*, 2021). In addition, the level of patients satisfaction can be measured by 5 main dimensions, including *reliability*, *responsiveness*, *assurance*, *empathy*, and *tangibles* (physical facilities) (Sulistiyowati W, 2018).

For example, Dewi in 2022 conducted a study at the Pharmacy Installation of Syamrabu Bangkalan Regional Hospital regarding services provided to inpatients. The results showed *reliability*, *responsiveness*, *assurance*, *empathy*, and *tangibles* values of 72%, 68%, 69%, 68%, and 74%, respectively, indicating a high level of satisfaction (Dewi RM, *et al.*, 2022). Indriyani & Herfiyanti (2021) at Bina Sehat General Hospital also obtained a score of 80.87%, showing that the patients were satisfied with the services provided (Herfiyanti L, 2021). However, Bunet, *et al.*, (2020) recorded an average score of -0.38, indicating dissatisfaction among outpatients at the Tanawangko Health Center (Bunet, *et al.*, 2020).

In Indonesia, Arifin Achmad Regional General Hospital is a Class B hospital and a referral center in Riau Province, providing services for both outpatients and inpatients care. In terms of service performance achievement, it has a record of 162,456 outpatients and 20,656 inpatients visits in 2021. According to data from the Pekanbaru City Health Office in 2019, Arifin Achmad Regional General Hospital has the highest number of inpatients in Pekanbaru City, with a total of 25,431 patients (Dinkes, 2019).

METODE PENELITIAN

This was an observational descriptive study with a *Cross-Sectional* design, which was carried out at the inpatients and outpatients pharmacy depots of Arifin Achmad Regional General Hospital from March to July 2023. The sample population comprised patients or their families who received services at the pharmacy depot and met the inclusion criteria. In addition, the sample size for inpatients was 95 participants, while a total of 100 outpatients were used. The participants were selected using the purposive sampling method based on considerations as well as inclusion and exclusion criteria.

The measurement instrument used in this study was a questionnaire and the data obtained were analyzed by assigning values to each question using a Likert scale. The Likert scale depicted the sequence and level of satisfaction by comparing the actual value with the patient's expectations. In addition, it was used to measure attitudes, opinions, and perceptions of individuals or groups with various levels (Sugiyono , 2016). The measurement of satisfaction levels was carried out by comparing the reality scores with the expectation scores in each dimension. The formula used to measure the level of satisfaction is presented below: (Supranto, 2011)

$$\text{Patient Satisfaction Score} = \frac{\text{Reality}}{\text{Expectation}} \times 100\%$$

After calculating the percentage of patient satisfaction levels, the results obtained were

Table 1. Satisfaction Index Scale

Satisfaction Level	Rating Range	Expectation Level	Rating Range
Very satisfied	81 - 100%	Very important	81 - 100%
Satisfied	61 – 80%	Important	61 – 80%
Quite satisfied	41 - 60%	Quite important	41 - 60%
Unsatisfied	21 – 40%	Unimportant	21 – 40%
Very Unsatisfied	0 – 20%	Very unimportant	0 – 20%

Validity testing was used to measure whether a questionnaire was valid. Furthermore, the number of samples used was typically around 30 participants. A questionnaire was considered valid when the calculated r value was greater than the tabled r value, with a value of $r = 0.361$ for 30 participants. Meanwhile, reliability testing was used to measure whether a questionnaire was reliable. A questionnaire was considered reliable when the responses to the questions were consistent or stable when measured once. Reliability was tested using *Cronbach's Alpha* coefficient formula. When *Cronbach's Alpha* value was > 0.6 , it was considered reliable, trustworthy, and could be used for further analysis (Sugiyono , 2016).

The data analysis used were univariate and bivariate analyses. Univariate analysis was used to describe the data for each variable obtained from the results. These data were presented in frequency distribution tables. Meanwhile, bivariate analysis was used to determine the characteristics of each variable using the Chi-Square test, leading to the identification of the relationship between independent and dependent variables. The independent variables were inpatients and outpatients at Arifin Achmad Regional General Hospital, while the dependent variable was the level of satisfaction with pharmaceutical services at the inpatients and outpatients pharmacy depots of Arifin Achmad Regional General Hospital. The parameters examined were reliability, responsiveness, assurance, empathy, and physical facilities.

HASIL DAN PEMBAHASAN

The respondents in this study were inpatients and outpatients who received services at the pharmacy depot of Arifin Achmad Regional General Hospital. The sample population comprised 95 inpatients and 100 outpatients who served as participants, and their characteristic descriptions were presented in Tables 2 and 3.

Table 2. Characteristics of Inpatients Participants

Characteristics	Frequency	%
Age		
17-30 old	22	23,2
31-50 old	49	51,6
51-60 old	18	18,9
>60 old	6	6,3
Gender		
Male	43	45,3
Female	52	54,7
Education		
Elementary School	1	1,1
Junior High School	15	15,8
Senior High School	48	50,5
Diploma	15	15,8
Bachelor	16	16,8
Job		
Student	6	6,3
Self-employed	7	7,4
Civil servants	6	6,3
Private employees	27	28,4
Housewife	28	29,5
Etc	21	22,1
Number of Arrivals		
Once	20	21,1
2-5 Times	49	51,6
> 5 Times	26	27,4
Total	95	100

Table 3. Characteristics of Outpatients Participants

Characteristics	Frequency	%
Age		
17-30 old	43	43
31-50 old	36	36
51-60 old	21	21
Gender		
Male	29	29
Female	71	71
Education		
Elementary School	12	12
Junior High School	3	3
Senior High School	45	45

Diploma / Bachelor	40	40
Job		
Student	21	21
Self-employed	16	16
Civil servants	5	5
Private employees	10	10
Housewife	28	28
Etc	20	20
Total	100	100

Based on Tables 2 and 3, the majority of the inpatients were aged 31-50 years, with 49 participants (51.6%), while most of the outpatients were aged 17-30 years, with 43 participants (43%). This was because advancement in age affected individuals' likelihood of using healthcare services, particularly hospitals, as aging tended to correlate with declining health (Wahyuni *et al.*, 2020). The majority of the participants were females, with 52 inpatients (54.7%) and 71 outpatients (71%). This was consistent with the availability of participants willing to fill out the provided questionnaires. Females were more likely to accompany sick family members or relatives for treatment and were more patient in waiting queues to collect prescriptions (Sulo, 2020).

The results of the participants' characteristics based on the highest level of education showed that the majority were Senior High School graduates, with 48 inpatients (50.5%) and 45 outpatients (45%). Higher education levels can increase awareness of health status and the consequences of using healthcare services (Sari *et al.*, 2018). The majority of the participants were housewives, with 28 inpatients (29.5%) and 28 outpatients (28%). This is because some housewives had spare time to take care of household needs, including collecting prescription medicines for themselves or their families, and homemakers were not bound by any particular institution. The largest number of visits was between 2-5 times, with a total of 49 participants (51.6%). Patients' interest in returning visits was greatly influenced by their experience during the first visit, hence, good quality service could attract patients to return (Ahmar *et al.*, 2022).

The level of patients satisfaction with pharmaceutical services was the percentage assessment of reality and expectation affecting the level of satisfaction with the pharmaceutical services provided across 5 dimensions, including *reliability*, *responsiveness*, *assurance*, *empathy*, and *tangibles*. *Reliability* referred to the ability to provide promised services promptly, accurately, and satisfactorily to patients (Citraningtyas *et al.*, 2022). This dimension included a total of 5 questions, which were presented in Tables 4 and 5.

Table 4. Frequency Distribution of Satisfaction and Expectations on Inpatients Reliability Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
Pharmacy staff can respond to patient questions effectively.	0	0	2 (2,1)	38 (40)	55 (57,9)	0	0	0	4 (4,2)	91 (95,8)
Pharmacy staff explain how to use medications.	0	1 (1,1)	0	32 (33,7)	62 (65,3)	0	0	0	2 (2,1)	93 (97,9)
Pharmacy staff explain about potential side effects.	0	1 (1,1)	4 (4,2)	42 (44,2)	48 (50,5)	0	0	0	10 (10,5)	85 (89,5)
Pharmacy staff use easily understandable language.	0	0	0	31 (32,6)	64 (67,4)	0	0	0	3 (3,2)	92 (96,8)
The service procedure is straightforward.	0	0	2 (2,1)	37 (38,9)	56 (58,9)	0	0	0	2 (2,1)	93 (97,9)

Table 4 showed that the highest scores for expectations were found in questions 2 and 5. For question 2 (pharmacy staff explain how to use medications), the expectation and reality levels were 97.9% and 65.3%, respectively. In question 5 (service procedures are straightforward), the expectation and reality levels were 97.9% and 58.9%, respectively.

Table 5. Frequency Distribution of Satisfaction and Expectations on Inpatients Reliability Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
Pharmacy staff can answer patient questions well.	0	0	0	26	74	0	2	25	53	20
The pharmacy staff explains how to use the medication.	0	0	0	28	72	0	3	19	51	27
The pharmacy staff explains about the potential side effects.	0	0	0	30	70	1	6	31	49	13
The pharmacy staff uses easily understandable language.	0	0	0	26	74	0	1	10	62	27
The service procedure is straightforward.	0	0	0	27	73	0	1	23	59	17

Based on Table 5, the highest expectations were found in questions 1 and 4. For question 1 (pharmacy staff can answer patient questions well), the expectation and actual levels were 74% and 53%, respectively. In question 4 (pharmacy depot staff use easily understandable language), the expectation and actual levels were 74% and 62%, respectively.

In terms of the *reliability* of pharmacy staff, there was still room for improvement in the service provided, due to the gap between reality and expectation. Based on the actual and expected values, the average satisfaction score for the *reliability* dimension was 92.31% for inpatients and 83.24% for outpatients, indicating that participants were very satisfied with the services provided.

The *responsiveness* dimension was the willingness or readiness and the ability of staff to assist customers and provide service quickly and responsively. This dimension's performance helped patients and provided the best service that was perceived as satisfactory by patients (Citraningtyas *et al.*, 2022)). In addition, it included 3 questions, which were presented in Tables 6 and 7.

Table 6. Frequency Distribution of Satisfaction and Expectations on Inpatients Responsiveness Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The pharmacy staff is responsive when there is a prescription coming in.	0	0	6 (6,3)	60 (63,2)	29 (30,5)	0	0	0	0	95 (100)
The pharmacy staff dispenses medications promptly.	0	0	10 (10,5)	62 (65,3)	23 (24,2)	0	0	0	0	95 (100)
The dispensing time for medications adheres to standards (finished medications < 30 minutes and compounded medications < 60 minutes).	0	3 (3,2)	34 (35,8)	49 (51,6)	9 (9,5)	0	0	0	0	95 (100)

Based on Table 6 regarding *responsiveness*, the highest expectation scores were found in questions 1, 2, and 3. For question 1 (pharmacy staff is responsive when there is a prescription coming in), the expectation and reality levels were 100% and 63.2%, respectively. In question 2 (pharmacy staff dispenses medications promptly), the expectation and reality levels were 100% and 65.3%, respectively. For question 3 (dispensing time for medications adheres to standards), the expectation level and reality levels were 100% and 51.6%, respectively. Some participants felt dissatisfied with the dispensing time for medications, with a percentage of 3.2%, and only 9.5% were very satisfied with the dispensing time for medications. This was based on the standards of Arifin Achmad Regional General Hospital's pharmacy services, with a waiting time for finished medications ≤ 30 minutes and compounded medications ≤ 60 minutes.

Table 7. Frequency Distribution of Satisfaction and Expectations on Outpatients Responsiveness Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The pharmacy staff is quick to respond when a prescription comes in.	0	0	0	34	6 6	1	4	21	58	16
The pharmacy staff provides prompt medication service.	0	0	0	36	6 4	1	9	34	43	13
The dispensing time for medications adheres to standards (finished medications < 30 minutes and compounded medications < 60 minutes).	0	0	0	43	5 7	3	23	40	27	7

According to Table 7, the highest expectation score was found in question 1 (pharmacy depot staff are quick to respond when there is a prescription coming in), with 66%, while the actual value was 58%, which was categorized as satisfied. Based on the actual and expected values, the average satisfaction percentage was 75.99%, indicating that the participants were satisfied. However, some participants were dissatisfied with question 3 (dispensing time for medications adhering to standards) with a percentage of 23%. In terms of the *responsiveness* of pharmacy staff, there was still room for improvement in the service provided, due to the gap between reality and expectation. In addition, it was advisable to further enhance the services provided by adding pharmacy staff and medication pick-up counters to improve patients satisfaction. Based on the actual and expected values, the average satisfaction score for the *responsiveness* dimension was 80.35% for inpatients and 75.99% for outpatients, indicating satisfaction with the service provided. The *assurance* dimension comprised assessing the attitude of staff to care and provide attention to patients. This dimension aimed to determine patients' satisfaction with the ability of staff to provide services (16). In addition, it comprised 5 questions, which were presented in Tables 8 and 9

Table 8. Frequency Distribution of Satisfaction and Expectations on Inpatients Assurance Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The pharmacy staff provides service according to the order of medication pick-up.	0	0	2 (2,1)	41 (43,2)	52 (54,7)	0	0	0	0	95 (100)
The pharmacy staff clearly labels the medications.	0	0	1 (1,1)	20 (21,1)	74 (77,9)	0	0	0	4 (4,2)	91 (95,8)
The pharmacy staff dispenses medications according to the doctor's prescription.	0	0	0	9 (9,5)	86 (90,5)	0	0	0	1 (1,1)	94 (98,9)
The pharmacy staff is present at the inpatients pharmacy depot during working hours.	0	0	7 (7,4)	45 (47,4)	43 (45,3)	0	0	0	5 (5,3)	90 (94,7)
The pharmacy staff can instill trust in patients for a speedy recovery.	0	0	3 (3,2)	45 (47,4)	47 (49,5)	0	0	0	9 (9,5)	86 (90,5)

Based on Table 8, the highest expectation score was found in question 1. For question 1 (pharmacy staff provides service according to the order of medication pick-up), the expectation and reality levels were 100% and 54.7%, respectively. In addition, there was a gap between the actual and expected values.

Table 9. Distribution of Frequency of Satisfaction and Expectation in the Assurance Dimension (Outpatients Care)

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The pharmacy staff provides service according to the order of medication pick-up.	0	0	0	27	73	0	3	19	54	24
The pharmacy staff clearly labels the medications.	0	0	0	27	73	0	1	17	53	29
The pharmacy staff dispenses medications according to the doctor's prescription.	0	0	0	26	74	0	0	8	51	41
The pharmacy staff is present at the inpatients pharmacy depot during working hours.	0	0	0	25	75	0	0	12	53	35
The pharmacy staff can foster trust in patients for a speedy recovery.	0	0	0	26	74	0	0	21	52	27

Table 9 showed that the highest expectation score was found in question 4 (pharmacy staff is present at the pharmacy depot during working hours), with 75%, while the actual value was 53%, categorized as satisfied. In terms of *assurance*, the pharmacy staff still needed to make improvements, as there was a gap between reality and expectation. Based on the actual and expected values, the average satisfaction score for the *assurance* dimension was 92.91% for inpatients and 87.42% for outpatients. This showed that the participants were very satisfied with the services provided.

The *empathy* dimension could show the ability to pay attention to patients to understand their problems (Kemenkes, 2016). In addition, this dimension included 3 questions, which were presented in Tables 10 and 11.

Table 10. Frequency Distribution of Satisfaction and Expectations on the Inpatients Empathy Dimension

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The pharmacy staff pays attention to the complaints and condition of the patients.	0	0	2 (2,1)	49 (51,6)	44 (46,3)	0	0	0	10 (10,5)	85 (89,5)
The pharmacy staff is friendly and polite in providing medication information.	0	0	4 (4,2)	42 (44,2)	49 (51,6)	0	0	0	1 (1,1)	94 (98,9)
The pharmacy staff provides service without considering social status.	0	0	1 (1,1)	49 (51,6)	45 (47,4)	0	0	0	3 (3,2)	92 (96,8)

Based on Table 10, the highest expectation score was found in question 2 (pharmacy staff is friendly and polite in providing medication information) with a percentage of 98.9%, while a value of 51.6% was in reality.

Table 11. Frequency Distribution of Satisfaction and Expectations on Outpatients Empathy Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The pharmacy staff pays attention to the complaints and condition of the patients.	0	0	0	27	73	1	1	30	46	22
The pharmacy staff is friendly and polite in providing medication information.	0	0	0	24	76	0	3	13	54	30
The pharmacy staff provides service without considering social status.	0	0	0	22	78	0	0	16	51	33

Based on Table 11, the highest expectation score was found in question 3 (Pharmacy staff provides service without considering social status) with a percentage of 78%, while a value of 51% was obtained in reality. In terms of *empathy*, the pharmacy staff still needed to make improvements, as there was a gap between reality and expectation. Based on the actual and expected values, the average satisfaction score for the *empathy* dimension was 90.07% for inpatients and 85.14% for outpatients, indicating that participants were very satisfied with the services provided.

The *tangible* dimension was part of the service appearance that was directly observed by patients, including the room, cleanliness, and completeness of facilities and infrastructure (Kemenkes, 2016). This dimension included 5 questions, which were presented in Tables 12 and 13.

Table 12. Frequency Distribution of Satisfaction and Expectations on Inpatients Physical (Tangible) Facility Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
The medications in the inpatients pharmacy depot are available in full supply.	0	0	0	14 (14,7)	81 (85,3)	0	0	0	3 (3,2)	92 (96,8)
Adequate seating is available in the waiting area.	0	0	5 (5,3)	56 (58,9)	34 (35,8)	0	0	0	28 (29,5)	67 (70,5)
The inpatients pharmacy depot environment appears clean, tidy, and comfortable.	0	0	5 (5,3)	66 (69,5)	24 (25,3)	0	0	0	29 (30,5)	66 (69,5)
Supporting facilities are available (such as a public address system and queue cards).	1 (1,1)	9 (9,5)	53 (55,8)	31 (32,6)	1 (1,1)	0	0	0	31 (32,6)	64 (67,4)

Information media in the form of brochures or posters on the use of medications or medical devices are available.	0	5 (5,3)	32 (33,7)	56 (58,9)	2 (2,1)	0	0	0	34 (35,8)	61 (64,2)
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Table 12 showed that the highest expected scores were in questions 1 and 4. In question 1 (completely available medicines at the inpatients pharmacy depot), the expectation and reality levels were 96.8% and 85.3%, respectively. In question 4 (availability of supporting facilities such as loudspeakers and queue cards), the expectation and reality levels were 67.4% and 55.8%, respectively. In addition, several patients were very dissatisfied with the availability of supporting facilities, such as loudspeakers and queue cards with a percentage of 9.5% being dissatisfied and 1.1% was very satisfied.

Table 13. Frequency Distribution of Satisfaction and Expectations on Outpatient sPhysical (Tangible) Facility Dimensions

Questions	Satisfaction n (%)					Expectation n (%)				
	1	2	3	4	5	1	2	3	4	5
There is a complete supply of medicines at the inpatient pharmacy depot	0	0	0	22	78	0	2	18	49	31
Adequate seating in the waiting area	0	0	0	22	78	0	2	7	50	41
The inpatient pharmacy depot environment looks clean, neat and comfortable	0	0	0	20	80	0	0	7	46	47
Supporting facilities available (loudspeakers, queue cards)	0	0	0	20	80	0	0	11	43	46
Information media is available in the form of brochures or posters on the use of drugs or medical devices	0	0	0	21	79	0	3	22	49	26

Table 13 showed that the highest expectation value was found in question 3 (the pharmacy depot environment appears clean, tidy, and comfortable), namely 80%, while the actual value was 47%, categorized as satisfied. In the dimension of pharmacy staff physical facilities, improvement in service delivery was still necessary as there was still a disparity between the higher expectation and the reality received. Based on the actual and expected values, the average satisfaction score based on the physical facilities dimension (tangible) was obtained with a percentage of 85.15% for inpatients care and 88.18% for outpatients care, indicating that the participants were very satisfied with the services provided.

In this study, participants' characteristic testing was conducted with patients satisfaction using *Chi-Square* Test analysis, and the results were presented in Tables 14 and 15. *Chi-Square* test was used to find the relationship between participants' characteristics and the level of satisfaction with pharmaceutical services.

Table 14. Relationship between Participants Characteristics and Inpatients Satisfaction

Respondent Characteristics	Patient Satisfaction
	p Value
Age	0,131
Gender	0,330
Education	0,997
Job	0,257
Number of Arrivals	0,493

Table 15. Relationship between Participants Characteristics and Inpatients Satisfaction

Respondent	P Value
Age	0,062
Gender	0,573
Education	0,438
Job	0,458

Based on Tables 14 and 15, the results showed that there was no correlation between participants characteristics and satisfaction. The significance of these results was determined by comparing them to the significance level α of 0.05. When the p-value was $p \leq \alpha$ (0.05), there was a significant relationship. Meanwhile, when the p-value was $p \geq \alpha$ (0.05), it was concluded that there was no significant relationship. Based on the analysis of participants' characteristics with satisfaction as shown in Table 13, a p-value greater than 0.05 was obtained. Therefore, the conclusion was drawn that there was no significant relationship between participants' characteristics and the satisfaction level of inpatients and outpatients care patients towards the services of the inpatients pharmacy depot of Arifin Achmad General Hospital.

KESIMPULAN

In conclusion, the level of inpatients satisfaction with pharmacy installation services yielded satisfaction percentages in the dimensions of reliability, responsiveness, assurance, empathy, and physical facilities at 92.31%, 80.35%, 92.91%, 90.07%, and 85.15%, respectively. Meanwhile, the satisfaction percentages of outpatients patients in the dimensions of *reliability, responsiveness, assurance, empathy, and physical facilities* were 83.24%, 75.99%, 85.14%, and 88.18%, respectively. The average satisfaction level of inpatients was 88.75%, and 84.68% for outpatients, both indicating high satisfaction.

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