

SUITABILITY OF WAITING TIME FOR PRESCRIPTION SERVICE BASED ON TIME STUDY IN PHARMACEUTICAL INSTALLATION FASTABIQ SEHAT PKU MUHAMMADIYAH HOSPITAL

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Abstract. Waiting time is one of the minimum standards for pharmacy services in hospitals that must be evaluated to improve the quality of pharmaceutical services in hospitals and can provide satisfaction to patients. Prescription services must be carried out in the shortest possible time to achieve this quality. The waiting time for non-concoction drug services is the grace period from the time the patient submits the prescription to receive the drug for 30 minutes. Meanwhile, the waiting time for the concoction drug service is the grace period from when the patient presents the prescription until receiving the compounded drug, with a standard time of 60 minutes. This study aims to determine the suitability of the waiting time for concoction and non-concoction prescription services based on the time study for outpatients at the Pharmacy Installation of the Fastabiq Sehat PKU Muhammadiyah Hospital. This study used a quantitative descriptive method. Primary data was collected through direct observation with a time study approach, recording waiting times for prescription services in the waiting time recording form in April 2022. In this study, 206 recipes were sampled, consisting of 158 non-concoction recipes and 48 blended recipes. The average time needed to complete a non-concoction recipe is 14.24 minutes, and the time required to complete a blended recipe is 31.09 minutes. Based on the results of the research that has been carried out, it was found that the average waiting time for prescription services at the Fastabiq Sehat PKU Muhammadiyah General Hospital was by the minimum service standards in the hospital, namely based on the Regulation M of Health entry—no—58 of 2014.

Keywords: [Waiting Time, Time Study, Prescription Service]

INTRODUCTION

The quality of pharmaceutical services from the performance results is analyzed by measuring the percentage of prescription coverage and patient satisfaction. This research on the quality of pharmaceutical services was carried out on aspects of input/structure, process, and results (Arini et al., 2020). Quality or quality of service is a standard set under the specified requirements. The importance of minimum service standards (SPM) in the health sector in hospitals is used as a benchmark for the performance of health services provided by hospitals (Sabarudin *et al.*, 2015)

Evaluation of service quality is a process of measuring and evaluating all pharmaceutical service activities in hospitals regularly. Service quality includes technical service, service process, procedures/standard operating procedures, and waiting time to get service (Menkes RI, 2014). Pharmaceutical service quality control is an activity that can be carried out on ongoing or past actions. This activity can be carried out through monitoring and evaluation, which aims to ensure that pharmaceutical services are carried out according to plans and efforts to improve future activities (Menkes RI, 2016).

Pharmacists must carry out prescription reviews by Standard Operating Procedures (SPO), including review of administrative, pharmaceutical/preparation, and clinical requirements (Rosida & Sudiro, 2017). The amount of time spent waiting for finished and prepared drug services is one of the minimum standards for pharmaceutical services in hospitals. One of the minimum requirements for pharmaceutical services in hospitals is waiting time. Non-concoction drug services have a grace period of thirty minutes from the time the patient submits their prescription following the Ministry of Health's minimum standards. In contrast, for mixed drug services, the grace period from when the patient submits the prescription to when they receive the medication is 60 minutes (Kepmenkes RI, 2008). By establishing minimum service standards that support the accuracy of drug administration, the possibility of drug administration errors can be anticipated (Rosida & Sudiro, 2017)

METHODS

This study uses a quantitative descriptive method by describing the results of direct observations for each stage of processing drug prescription services in an objective, systematic, factual, and accurate manner. Then, each time is calculated quantitatively, namely based on the results of observations that can provide an overview of the results of the study. The number of samples is 206 recipes.

RESULTS AND DISCUSSION

The study's results yielded a sample of 206 recipes, including 158 non-concoction recipes and 48 concoction recipes, based on the characteristics of each type of recipe. The percentage of recipe characteristics can be seen in Table 1.

Table 1 Characteristics of Recipe Characteristics Based on Recipe Type

Type of Recipe	Number of Recipes	Percentage
Concoction	48	23%
Non Concoction	158	77%
Total	206	100%

Source: Processed primary data (2022)

In this study, the percentage of non-concoction prescriptions was 158 prescriptions (77%) more than concoction prescriptions, with a percentage of 48 prescriptions (23%) because most patients who came to check out the RSU Fastabiq Sehat PKU Muhammadiyah were prescriptions for adult patients whose prescriptions used non-concoctions (finished drugs). The number of concoction drug prescriptions was lower than that of non-concoction drug prescriptions (finished drugs), consistent with the waiting time for prescription services in the Tegal district. This is because the number of pediatric patients is less than the number of adult patients. Recipes for children are mostly concoction drug recipes (Prabasiwi *et al.*, 2019).

According to the findings of this study, the Pharmacy Installation of the RSU Fastabiq Sehat PKU Muhammadiyah waiting time for prescription services is suitable in the following ways:

Table 4.2 Results of Conformity of Prescription Service Waiting Time

Conformity of Prescription Service Waiting Time	Number of Recipes		Percentage		Average	
	Concoction	Non Concoction	Concoction	Non Concoction	Concoction	Non Concoction
Not Appropriate	19	4	91,67%	88,0%	14,24	31,09
Appropriate	139	44	8,33%	12,0%		

Source: Processed primary data (2022)

This study uses the stopwatch time study method to measure working time (time study). This stopwatch time study uses a stopwatch as a measuring instrument to estimate work based on the time taken to complete an activity that is being observed in real-time. (Sofyan & Meutia, 2019). The time that was successfully measured and recorded was then processed using Microsoft Excel to find the problem formulation of this study, namely to find the average suitability of the prescription service waiting time.

According to this study's findings, the average wait time for prescription services for concoction drugs is 31.09 minutes, while the average wait time for non-concoction drugs is 14.24 minutes. The standard waiting time for prescription services in this study was 60 minutes for concocted drugs and 30 minutes for non-concocted drugs when the patient submitted their prescription. This shows the average waiting time for prescription services at the outpatient pharmacy installation at the RSU Fastabiq Sehat PKU Muhammadiyah follows the established standards.

According to Septini (2012), there is a correlation between prescription service time and the type of recipe (concocted or non-concocted). Similar to research, it takes 15.53 minutes on average to finish a recipe for a concoction. This indicates that the Pharmacy Installation RSIA AMC Metro has met the

minimum service standards outlined in Keputusan Menteri Kesehatan Republik Indonesia Nomor 129/Menkes/SK/II/2008 regarding Hospital Minimum Service Standards, which states that the average waiting time for prescription services for outpatient BPJS patients is less than 30 minutes for finished drug prescriptions and less than 60 minutes for concoction prescriptions. (Puspitasari, 2011).

Herjunianto & Aryo (2014) explained that managing perceptions of waiting time could be the key for hospitals to increase the scope of pharmaceutical service satisfaction. Good waiting time management can be the key for hospitals to expand the range of pharmaceutical services such as friendly staff behavior, clear waiting time information, and public facilities as a diversion when patients are waiting.

Based on Regulation No. 2 of the Peraturan Menteri Kesehatan Republik Indonesia, the duration of concoction and non-concoction prescription services in pharmaceutical facilities is explained. 129 Tahun 2008 regarding hospitals' Minimum Service Standards. The waiting time for prescription service is when the patient submits the prescription until the patient receives the drug. The waiting time for recipe service for non-concoction recipes is <30 minutes, and for concoction recipes <60 minutes (Menkes RI, 2008).

This study has not referred to Permenkes Nomor 58 Tahun 2014 regarding Hospital Minimum Service Standards, which determines the maximum waiting time for drugs is 15 minutes for non-concoction drugs and 30 minutes for concocted drugs, regardless of the number of drug items. So that the waiting time for concoction drugs in this study was not appropriate, but the waiting time for non-concocted drugs was by the Minister of Health.

In this study, all concoction and non-concoction recipes received after 14:00 WIB had a longer waiting time than those received between 7:00 and 11:00 AM on the morning shift. Because numerous recipes have accumulated since 14.00 WIB when all polyclinics have completed providing their services. The concoction prescription service has a longer wait time than the non-concoction service because the concoction prescription service needs more time to prepare the drug, calculate the dosage, and administer the medication. (Miftahudin, 2019).

One of the factors that influence the length of time spent waiting for prescription services at the pharmaceutical installation of the RSU Fastabiq Sehat PKU Muhammadiyah at the prescription reception stage is this study's findings. Acknowledgment is done by the drug specialist, who likewise plays out the screening system. The process of screening prescriptions was hampered by several obstacles at the time, including the prescription's incompatibility with the patient's medical history, the inability to read the doctor's handwriting, a lack of computer systems and programs, and damage or refilling of the patient's printed label paper. The waiting time for prescription services is also influenced by the number of prescriptions received at the pharmacy depot. The waiting time for prescription service is also affected by the number of prescription concoctions and drug items per prescription (Maftuhah & Susilo, 2016). The greater the number of drug items in a prescription, the longer the waiting time will be. The fewer drug items per recipe, the faster the pharmacy staff can serve the prescription (Suripto, 2013).

The type of prescription includes factors that affect the waiting time for prescription services. The waiting time for concoction recipe services tends to be longer than for non-concoction recipes. This is because, in the process of concocting recipes, it takes time to input recipes, calculate doses, and compound needs to be done at the processing stage (Karuniawati *et al.*, 2016). However, some non-concoction drug prescriptions also require a longer processing time, such as non-concoction prescriptions in patients with chronic diseases. This prescription requires more time in the inputting process because it has to be checked for the length of time the drug has been used, and the number of drugs prescribed tends to be significant. This is in line with the results of Septini's research (2012), showing a relationship between the type of recipe and the waiting time for prescription service at the preparation stage.

In this study, prescriptions from certain outpatient polyclinics, such as cardiac polyclinics, contained many drugs, so the process took a little longer than prescriptions with a small number of drugs. Still, this study also had small amounts of drugs but waiting times. Long. This is because when the service occurs, empty medicines and stocks of drugs run out, and then the store is taken to the pharmacy warehouse. There is a prescription payment flow process at the cashier for general guarantees, so taking medicine takes a long time.

This can be seen where any addition of a large number of items will undoubtedly affect the

accumulation of time in the numbering stage, the entry prescription stage, the patent drug collection stage, and the preparation stage for the concoction of drugs into capsules, packs, liquids so that it takes a long time compared to the small number of items. Sahlawati & Tamri (2018) said that there is a relationship between the number of drug items and the waiting time for prescription drug service at the Pharmacy Installation of the Hospital Puskidkes Kodiklat TNI AD, where a large number of items has a longer service time (56.7%) compared to the small number of items (42.2%).

Based on the results of this study, the number of pharmacy officers who provide prescription services at the RSU Fastabiq Sehat PKU Muhammadiyah is 5. The number of pharmacy staff can affect the waiting time for prescription services (Megawati *et al.*, 2015).

The duration of service may be extended by employees who lack professionalism and skill. Waiting times can be influenced by officers' knowledge, length of work, workload, and skills (Puspitasari, 2011). Several factors, including pharmacists, patient types, prescription types, availability of drugs, doctor's prescriptions, facilities and infrastructure, drug formularies, and standard operating procedures (SOP), influence the length of the waiting period (Wijaya, 2012).

CONCLUSION

Based on the results of research conducted at the Pharmacy Installation for outpatients, the RSU Fastabiq Sehat PKU Muhammadiyah, it can be concluded:

1. According to a time study conducted at the pharmaceutical facility of the RSU Fastabiq Sehat PKU Muhammadiyah, the average suitable waiting time for prescription services for tinctures is 31.09 minutes. This demonstrates that the Fastabiq Sehat Hospital Pharmacy Installation's average wait time for concoction prescription services has met the Ministry of Health's minimum service standards, which are 60 minutes for concoction drugs.
2. According to a time study conducted at the pharmaceutical installation of the RSU Fastabiq Sehat PKU Muhammadiyah, the average suitable waiting time for services that provide prescriptions for non-concoction drugs is 14.24 minutes. This demonstrates that the RSU Fastabiq Sehat PKU Muhammadiyah Pharmacy Installation's average waiting time for non-concoction drug prescription services (finished drugs) meets the Ministry of Health's minimum service standard for concoction drugs, which is 30 minutes for non-concoction drugs.

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