



A Quality of Pharmaceutical Staff Services Over Out- Patients Satisfaction at Murni Teguh Sudirman Jakarta (MTSJ) Hospital

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Services provided by hospital staff to patients greatly affects patient satisfaction. The cause of patient dissatisfaction can be caused by several factors including the service quality factor, such as Reliability, Assurance, Tangibles, Empathy and Responsiveness. Apart from that, there are 2 other factors that were examined this study, namely Accessibility and Communication. Thus, the problem in this study at Murni Teguh Sudirman Jakarta (MTSJ) Hospital there is decreased performance of pharmacy staff, so that there are complaints from outpatients to pharmacy service unit at MTSJ Hospital. Here analyses a quality of pharmaceutical staff services at out-patients satisfaction at MTSJ Hospital, also analyses the influence of Reliability, Assurance, Tangibles, Empathy, Responsiveness, Accessibility and Communication pharmaceutical staff services at out patients' satisfaction at MTSJ Hospital. In addition, in this study we use a quantitative descriptive causality approach which aims to analyse relationships and influence (cause and effect) of two or more phenomena and correlation and regression analysis. The data collection techniques using is primary questionnaire with 5 Likert scale distributed to 49 respondents. The results shows that there is no influence from Reliability and Responsiveness pharmacy staff to out-patients satisfaction at MTSJ Hospital. There is influence from Assurance, Tangible, Empathy, Accessibility and Communication pharmacy staff and pharmaceutical installation to out-patients satisfaction at MTSJ Hospital, with value of correlation and regression analysis, if Significance values (Sig) < probability 0,05, then H₀ (null hypothesis) be rejected and H_a (alternate hypothesis) accepted (there is no influence), if Significance values (Sig) > probability 0,05, then H₀ (null hypothesis) accepted and H_a (alternate hypothesis) be rejected (there is influence).

Keywords: Service Quality, Pharmaceutical Staff, Out Patients Satisfaction.

1. INTRODUCTION

Murni Teguh Sudirman Jakarta (MTSJ) Hospital is a private hospital B Grade at Special Capital District (of Jakarta) who has a pharmaceutical staff and has a number of bed capacities 48 bed. The Hospital Pharmacy Installation is one of the medical support units. MTSJ Hospital in the middle of the city center have fourteen pharmacists, where the patient who came is 70-80% residents of the apartment, company staff, non-BPJS insurance, and 20% BPJS patients. There is decreased performance of pharmacy staff, by looking at the decrease in the quality indicator when the non-concocted drug was administered at September, October, and November 2019 raises out-patient's complaints at MTSJ Hospital. Pharmacy Department location at 2nd Floor while the public polyclinic is on the 1st floor and specialist polyclinic at 6th floor, that matter raises out-patient's

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complaints. In 2019 MTSJ Hospital. Pharmacy Department have never done quality assessment based on Minimum Service Standard pharmaceutical field at Hospital according to the Minister of Health of the Republic of Indonesia No. 129 year 2008. Based on data on the number of patient visits and the number of incoming prescription sheets at MTSJ Hospital Pharmacy Installation that is, experiencing fluctuations (increasing and decreasing) it can be indicated that it occurs because the level of customer satisfaction with the quality of pharmaceutical services provided is not optimal. This has the potential to result in a loss of revenue from the pharmaceutical installation. Obtained data from pharmacy installation at MTSJ Hospital, it is known that hospital management is targeting around 80% patients both outpatients and inpatients must buy drugs at MTSJ Hospital. Based on the results of the researchers' interviews with outpatients at the pharmacy installation,

some patients have a perception of long waiting times, the location of the pharmacy installation that must use an elevator, the pharmacy staff is less friendly and less responsive to serving patients. The formulation of the problems discussed in this study as follows:

- a) How does the reliability of pharmacy staff affect outpatient satisfaction at MTSJ Hospital in 2020?
- b) How does the assurance of pharmacy staff affect outpatient satisfaction at MTSJ Hospital in 2020?
- c) How does the tangible of pharmacy installation affect outpatient satisfaction at MTSJ Hospital in 2020?
- d) How does the empathy of pharmacy staff affect outpatient satisfaction at MTSJ Hospital in 2020?
- e) How does the responsiveness of pharmacy staff affect outpatient satisfaction at MTSJ Hospital in 2020?
- f) How does the accessibility of pharmacy installation affect outpatient satisfaction at MTSJ Hospital in 2020?
- g) How does the communication of pharmacy staff affect outpatient satisfaction at MTSJ Hospital in 2020?

Furthermore, to analyze the quality and service quality of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020, we had special purposes as follows:

- a) To analyze the effect of reliability of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- b) To analyze the effect of assurance of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- c) To analyze the effect of tangible of pharmacy installation on outpatient satisfaction at MTSJ Hospital in 2020.
- d) To analyze the effect of empathy of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- e) To analyze the effect of responsiveness of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- f) To analyze the effect of accessibility of pharmacy installation on outpatient satisfaction at MTSJ Hospital in 2020.
- g) To analyze the effect of communication of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.

2. METHODOLOGY

A. Patient Satisfaction

The concept of patient satisfaction is mentioned in the abstract [1-6]. The role of each individual in service encounter is very important and affects the satisfaction that is formed as a decision making [6-12]. Patient satisfaction can also be measured by indicators are [12-17]:

- a) Satisfaction with access to health services.
- b) Satisfaction with the quality of health services.
- c) Satisfaction with the health service process, including human relations.
- d) Satisfaction with the health service system.

B. Service Quality

Service quality becomes an obligation that must be done at the hospital in order to be able to survive and still get the trust of the patient [17-24]. The patient's consumption pattern and lifestyle demand that the hospital management be able to provide quality services [24-29]. The success of the hospital in providing quality and international standard services can be determined by an approach service quality [30, 31]. Service Quality are actions or activities offered by one party to another which are basically intangible and do not lead to ownership of something [32]. Service Quality can be felt by comparing patients' perceptions of the hospital service management system that they actually receive with what they expect [33]. Service quality can be measured using hospital service indicators which are useful for improving service performance, such as the five dimensions of service quality [34]. Therefore, in formulating the quality of pharmacy services, hospital management must be patient-oriented and must pay attention to the quality dimensions [35, 36]. A customer perceptions of organizational service satisfaction especially in pharmaceutical installations can be measured based on dimensions of tangible (physical facilities, equipment, employees, and others), dimensions of reliability, dimensions of responsiveness, dimensions of assurance and dimensions of attention to understand the patient's needs (empathy) [37, 38, 39]. The importance of assessing patient satisfaction with pharmaceutical installation services to study patient responses to the quality of service in demand, is to know the patient's needs and expectations for future services, improve service quality, arrange work arrangements to improve the quality of service in the future for pharmaceutical services [40, 41]. There are five (5) dimensions of service quality [42], as follows:

- a. Tangibles
- b. Reliability
- c. Responsiveness
- d. Assurance
- e. Empathy

The advantages of a service product, especially in pharmacy installation services, depend on the uniqueness and quality shown by the hospital service, whether it is in accordance with the expectations and desires of the patient or not according to the wishes of the patient [43, 44]. Patients' expectations are shaped by past experiences, with word of mouth about the quality of service at the pharmacy in the hospital, then the patient will compare [45]. The demands of patients on the quality of hospital services, especially at the pharmacy installation, necessitate a change in service from the old paradigm (drug oriented) to new paradigm (patient oriented) with Philosophy Pharmaceutical Care (pharmacy services) [46]. Thus, the Theoretical Framework in this study has captured on Figure 1.

Independent Variable

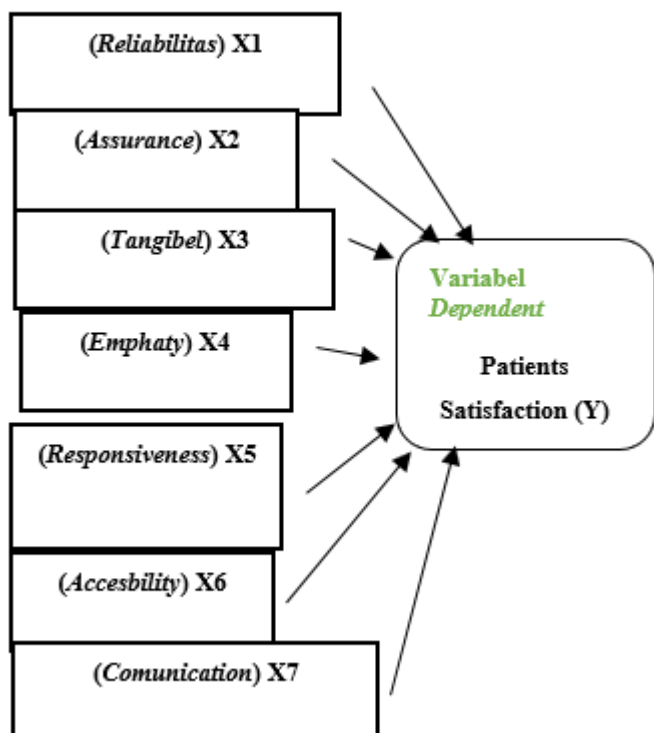


Figure 1. Patient Satisfaction Theoretical Framework

C. Research Hypothesis

Based on previous theories and research, the author wants to prove the truth in the hypotheses formulated in this study, are:

- H1: There is an effect of reliability of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- H2: There is an effect of assurance of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- H3: There is an effect of tangible of pharmacy installation on outpatient satisfaction at MTSJ Hospital in 2020.
- H4: There is an effect of empathy of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- H5: There is an effect of responsiveness of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.
- H6: There is an effect of accessibility of pharmacy installation on outpatient satisfaction at MTSJ Hospital in 2020.
- H7: There is an effect of communication of pharmacy staff on outpatient satisfaction at MTSJ Hospital in 2020.

Furthermore, this research was conducted in a scale MTSJ Hospital at Special Capital District (of Jakarta). The study was conducted especially for outpatients (August & September 2020) and fourteen pharmacists in August 2020. The research method used in this study is an explanatory research. This research is a causality research, which aims to analyze the relationship and influence (cause-effect) of two or more phenomena [47]. Data collection using research instruments, data analysis is quantitative / statistical with explanatory research type

namely to explain the influence of the research variables in order to test the predetermined hypothesis. Data from MTSJ Hospital, the total population is 110 people. The total population at MTSJ Hospital will be tabulated with Microsoft excel 2010 using Slovin formula as a support for calculations sample. Population calculation if calculated using Slovin formula with the error rate 10% then the population in this study is 49 people. The results from the population will be used to calculate the sample, thus 49 people considered as A variable. The data used in this study are primary and secondary data. Primary data is obtained from respondents' answers through distributed questionnaires offline, namely providing a list of questions to respondents and selecting several alternative answers based on their perceptions. The instrument used in this study was a questionnaire using Likert scale. Testing of the research model was carried out using Correlation and Regression Analysis. Correlation analysis states the degree of relationship between two variables (dependent, independent and moderator or supporter) regardless of which variable is the variable [48]. The data that has been obtained are then processed using the SPSS program for windows 23 version which are divided into univariate, bivariate and multivariate analysis (multiple regression test), which will be described in the form of tables and explanations.

3. RESULT AND DISCUSSION

A. Analyze Tests & Univariant Analyze

Univariant Analyze conducted on the characteristics of respondents and research variables by describing the results of the study (see Table I).

Table I. Characteristics of Respondents in this study

NO.	CHARACTERISTICS	AMOUNT	% Respondents'
1	AGE		
	- 15-24 years	8	16.32
	- 25-34 years	9	18.36
	- 35-44 years	13	26.5
	- 45-54 years	12	24.5
	- 55-64 years	7	14.32
	TOTAL	49	100
2	GENDER		
	MAN	27	55.1
	WOMAN	22	44.9
	TOTAL	49	100
3	EDUCATION		
	Primary School	2	4
	Junior High School	5	10.2
	Senior High School	10	20.4
	DIII	14	28.6
	Bachelor	15	30.6
	Post Graduate	3	6.2
	TOTAL	49	100
4	WORK		
	PNS/PTN/POLRI	9	18.4
	Private Employees	18	36.7
	Laborer	6	12.2
	Traders	4	8.2
	And Others	12	24.5
	TOTAL	49	100

Respondents from MTSJ Hospital, Indonesia. Based on table 4.1, it can be seen that the majority of respondents are aged 35-44 years as many as 13 people (26.5%). Based on gender, the majority of male respondents were 27 people (55.1%). Based on the educational background, the majority of respondents have undergraduate education (S1) as many as 15 people (30.6%). Based on the occupation, the majority of respondents work as private employees as many as 18 people (36.7%).

B. Validity and Reliability Test Results

The results of processed data to test the validity using SPSS 23 with 30 respondents' sample at random with r-table value $0,3610 <$ from r-count value with range $0,434 - 0,910$ then the data is valid

C. Reliability Test Results

Reliability Test carried out on question items that are declared reliable. For the instrument reliability test, the closer the reliability coefficient to 1,0 it's much better. In general, reliability is less than 0,6 considered bad, reliability in range 0,7 acceptable, and more than 0,8 is good. The results of processed data with 30 respondents' sample, Cronbach's alpha values $0,738 - 0,776$ closer the reliability coefficient to 1,0, then the data is reliable.

D. Description of the Analysis of Respondents' Answers

To get the tendency of respondents' answers to each variable, it will be based on the average score value from the calculation results with Three Box Method [49], as follows:

Upper limit of the score range:

$$(\%F_x5)/5 = (49 \times 5)/5 = 245/5 = 49 \tag{1}$$

Lower limit of the score range:

$$(\%F_x1)/5 = (49 \times 1)/5 = 49/5 = 9,8 \tag{2}$$

$$\text{Scale Range: } 49 - 9,8/3 = 13 \tag{3}$$

This range will be used as the basis for the interpretation of the index (see Table II).

NO.	RANGE	CATEGORY
1	9,8 - 22,7	Low
2	22,8 - 35,7	Moderate
3	35,8 - 49	High

a) Description of the respondents' answer regarding Reliability

Based on the descriptions of respondents' answers regarding the reliability of officers, it is known that the average value for the reliability variable is 34.62 and is included in the moderate category. The highest index value is found in the indicator of pharmacy installation officer services MTSJ Hospital, should be optimal when open 24 hours with the 42.2 of value index.

b) Description of the respondents' answer regarding Assurance

Based on the descriptions of respondents' answers regarding the assurance of officers, it is known that the average value for the assurance variable is 33.7 and is included in the moderate category. The highest index value is found in the indicator of pharmacy installation officer services MTSJ Hospital, econciles the queue number with the patient's name, with the index value 37,8.

c) Description of the respondents' answer regarding Tangible

Based on the descriptions of respondents' answers regarding the tangible of pharmaceutical installation, note that the mean value for the variable tangible of pharmaceutical installation is 36,6 and is included in the high category. The highest index value is found in the waiting room indicator which is quite wide with the index value 43.

d) Description of the respondents' answer regarding Emphaty

Based on the descriptions of respondents' answers regarding the pharmacy staff empathy, it is known that the average value for the empathy variable of pharmacy staff is 31 and it is included in the moderate category. The highest index value is found in the indicator of pharmacy installation officer services MTSJ Hospital, give the patient the opportunity to ask questions with an index value 35,2.

e) Description of the respondents' answer regarding Responsiveness

Based on the descriptions of respondents' answers regarding the responsiveness of officers, it is known that the average value for the responsiveness variable is 35 and is included in the moderate category. The highest index value is found in the indicator of pharmacy installation officer services MTSJ Hospital, immediately notify how to use and dosage of drugs, rules for use of generic drugs in good and easy to understand language with index values of 42.6.

f) Description of the respondents' answer regarding Accesibility

Based on the descriptions of respondents' answers regarding the accessibility to pharmaceutical installation, it is known that the average value for the accessibility variable is 31,3 and is included in the moderate category. The highest index value is found in the indicator of

pharmacy installations MTSJ Hospital serve patients for 24 hours with index value 43,2

g) Description of the respondents' answer regarding Communication

Based on the descriptions of respondents' answers regarding the communication of officers, it is known that the average value for the communication variable is 29,66 and is included in the moderate category. The highest index value is found in the indicator of pharmacy installation officers explain how to use and dosage drugs in easy and understandable language with each index value 40.4 while the Characteristics of respondents Base on Reliability is showed on Table III.

Table III. Distribution of Respondents Based on Pharmacy Staff Reliability at MTSJ Hospital.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid average	28	57.1	57.1	57.1
Below average	21	42.9	42.9	100.0
Total	49	100.0	100.0	

Based on Table III, represents that the respondents who think the pharmacy staff have sufficient reliability on pharmaceutical management are 28 respondents (57,1%) while the Characteristics of respondents Base on Assurance is showed in Table IV.

Table IV. Distribution of Respondents Based on Pharmacy Staff Assurance at MTSJ Hospital.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid average	26	53	53	53
Below average	23	47	47	100.0
Total	49	100.0	100.0	

Based on Table IV, represents that the respondent thinks that the pharmacy staff has sufficient assurance are 26 respondents (53%). Thus, the Characteristics of respondents Base on Tangible is showed in Table V.

Table V. Distribution of Respondents Based on Tangible Pharmacy Installation at MTSJ Hospital.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid average	30	61.2	61.2	61.2
Below average	19	38.8	38.8	100.0
Total	49	100.0	100.0	

Based on Table V, represents that the respondent thinks tangible pharmacy installation are quite good are 30 respondents (61.2%). Thus, the Characteristics of respondents Base on Emphaty is showed in Table VI.

Table VI. Distribution of Respondents Based on Pharmacy Staff Emphaty at MTSJ Hospital.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Average	32	65.3	65.3	65.3
Below average	17	34.7	34.7	100.0
Total	49	100.0	100.0	

Based on Table VI, represents that respondents who think the pharmacy staff provide sufficient empathy are 32 respondents (65,3%). Furthermore, the Characteristics of respondents Base on Responsiveness is showed in Table VII.

Table VII. Distribution of Respondents Based on Pharmacy Staff Responsiveness at MTSJ Hospital.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Average	41	83.7	83.7	83.7
Below average	8	16.3	16.3	100.0
Total	49	100.0	100.0	

Based on Table VII represents that the respondent who thinks the officer gives an adequate response are 41 respondents (83.7%) while the Characteristics of respondents Base on Accesbility is showed in Table VIII.

Table VIII. Distribution of Respondents Based on Accesbility of Pharmacy Installation at MTSJ Hospital

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Average	32	65.3	65.3	65.3
Below average	17	34.7	34.7	100.0
Total	49	100.0	100.0	

Based on Table VIII, represents that respondents think that access to pharmaceutical installations is good enough are 32 respondents (65,3%). Here, the Characteristics of respondents Base on Communication is showed in Table IX.

Table IX. Distribution of Respondents Based on Pharmacy Staff Communication at MTSJ Hospital.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid				
Average	37	75.5	75.5	75.5
Below Average	12	24.5	24.5	100.0
Total	49	100.0	100.0	

Based on Table IX, represents that respondents think that pharmacy staff communication is good enough are 37 respondents (75,5%). Furthermore, Model Test (F Test) was performed to determine the effect of Reliability (X1), Assurance (X2), Tangible (X3), Empathy (X4), Responsiveness (X5), Accessibility (X6), and Communication (X7) jointly on Patient Satisfaction (Y) is showed on Table X.

Table X. Model Test (F Test)

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	2118.296	7	302.614	13.270	.000 ^b
Residual	934.970	41	22.804		
Total	3053.265	48			

where, Dependent Variable: y while Predictors: (Constant), x7, x1, x4, x5, x6, x3, x2.

The calculation results F Test from SPSS 23 version earned value F calculation amounting to 13.270, while value *degree of freedom* on the numbers 7 and 41 in F table earned value amounting to 1,162. Of the results F Test earned F calculation value 13.270 > from F table value 1,162 significantly amounting to 0.05 < 0,05. This explains that there is a significant influence from Reliability (X1), Assurance (X2), Tangible (X3), Empathy (X4), Responsiveness (X5), Accessibility (X6), and Communication (X7) jointly on Patient Satisfaction (Y). Thus, the Multiple Regression Analysis is showed in Table XI.

Table XI. Multiple Regression Analysis Results

Model		Unstandardized Coefficients		Standardized Coefficients Beta	T	Sig.
		B	Std. Error			
1	(Constant)	9.412	4.897		1.922	.062
	x1	.008	.099	.009	.078	.938
	x2	-1.313	.403	-1.199	-3.255	.002
	x3	.605	.227	.625	2.672	.011
	x4	.980	.386	.998	2.538	.015
	x5	.151	.184	.124	.818	.418
	x6	-.534	.204	-.465	-2.626	.012
	x7	.853	.228	.670	3.744	.001

where, Dependent Variable: y

D. Hypothesis Results with t-Test

Decision making for rejection or acceptance of the hypothesis with the amount of data is 49 and with a significance level of 5%, then it is based on Significance value (Sig), based on the following criteria:

Based on the comparison of Significance values (Sig), the basis for making decisions is:

- a. If Significance values (Sig) < probability 0,05, then H₀ (null hypothesis) be rejected and H_a (alternate hypothesis) accepted (there is no influence).
- b. If Significance values (Sig) > probability 0,05, then H₀ (null hypothesis) accepted and H_a (alternate hypothesis) be rejected (there is influence).

Thus, the t-Test results from Table 4.19 are as follows:

- a) There is no significant influence between variables X1 to Y, due to the value of Significance (Sig) > probability 0,05 (0,938 > 0,05). So, there is no influence between variables X1 to Y, or in other words H₀ accepted and H_a be rejected.
- b) There is a significant influence between variables X2 to Y, due to the value of Significance (Sig) > probability 0,05 (0,002 < 0,05). So, there is an influence between variables X2 to Y, or in other words H₀ rejected and H_a be accepted.
- c) There is a significant influence between variables X3 to Y, due to the value of Significance (Sig) > probability 0,05 (0,011 < 0,05). So, there is an influence between variables X3 to Y, or in other words H₀ rejected and H_a be accepted.
- d) There is a significant influence between variables X4 to Y, due to the value of Significance (Sig) > probability 0,05 (0,015 < 0,05). So, there is an influence between variables X4 to Y, or in other words H₀ rejected and H_a be accepted.
- e) There is no significant influence between variables X5 to Y, due to the value of Significance (Sig) > probability 0,05 (0,418 > 0,05). So, there is no influence between variables X5 to Y, or in other words H₀ accepted and H_a be rejected.
- f) There is a significant influence between variables X6 to Y, due to the value of Significance (Sig) > probability 0,05 (0,012 < 0,05). So, there is an influence between variables X6 to Y, or in other words H₀ rejected and H_a be accepted.
- g) There is a significant influence between variables X7 to Y, due to the value of Significance (Sig) > probability 0,05 (0,001 < 0,05). So, there is an influence between variables X7 to Y, or in other words H₀ rejected and H_a be accepted.

a) Influence Between Pharmacy Staff Reliability to Patient Satisfaction

The results of data processing are represented that the pharmacy staff reliability has no effect on patient satisfaction.

This research is in line with previous research which shows that there is not always their influence between the pharmacy staff reliability on patient satisfaction.

b) Influence Between Pharmacy Staff Assurance to Patient Satisfaction

The results of data processing is represented that the pharmacy staff assurance has an effect on patient satisfaction. This research is in line with the previous research which shows that there is an influence between the pharmacy staff assurance on patient satisfaction.

c) Influence Between Pharmaceutical Installation Tangible to Patient Satisfaction

The results of data processing is represented that the pharmaceutical installation tangible has an effect on patient satisfaction. This research is in line with the previous research which shows that there is an influence between the pharmaceutical installation tangible on patient satisfaction.

d) Influence Between Pharmacy Staff Emphaty to Patient Satisfaction

The results of data processing is represented that the pharmacy staff emphaty has an effect on patient satisfaction. This research is in line with the previous research which shows that there is an influence between the pharmacy staff emphaty on patient satisfaction.

e) Influence Between Pharmacy Staff Responsivenees to Patient Satisfaction

The results of data processing is represented that the pharmacy staff responsivenees has no effect on patient satisfaction. This research is in line with the previous research which shows that there is no influence between the pharmacy staff responsivenees on patient satisfaction.

f) Influence Between Pharmaceutical Installation Accesbility to Patient Satisfaction

The results of data processing is represented that the pharmaceutical installation accesbility has an effect on patient satisfaction. This research is in line with the previous research which shows that there is an influence between the pharmaceutical installation accesbility on patient satisfaction.

g) Influence Between Pharmacy Staff Communication to Patient Satisfaction

The results of data processing is represented that the pharmacy staff communication has an effect on patient satisfaction. This research is in line with the previous research which shows that there is an influence between the pharmacy staff communication on patient satisfaction.

4. CONCLUSION

This study has been successfully studied. Based on the results of research and discussion such as no influence pharmacy staff Reliability to patient satisfaction, influence pharmacy staff Assurance to patient satisfaction, influence pharmaceutical Installation Tangible to patient satisfaction, influence pharmacy staff empathy to patient satisfaction, no influence pharmacy staff responsiveness to patient satisfaction, influence pharmaceutical installation accessibility to patient satisfaction, influence pharmacy staff Communication to patient satisfaction.

Furthermore, the implications that can be applied by hospital management based on the research findings such as time of receipt of drugs from the pharmacy still a long time, hospital management must have a hospital information system and have an electronic queue number for patients waiting for drugs, some drugs are not always available, hospital management must improve distribution of drug procurement system, determination and socialization drugs formulary's to doctors, payment to drugs vendors according to payment schedule, To improve pharmaceutical installation facility, it is necessary to add brochures or banners about education on how to take medicine properly, explanations about medicines etc., The respondent's answer regarding the communication from the pharmacy staff got the smallest response compared to other factors that affect patient satisfaction. It is necessary need service excellent course, team building course, etc., for improve skill pharmacy staff.

Thus, based on conclusions and implications described above, the researcher provides the following as follows Pharmacy staff need to improve skill and knowledge about assurance, to improve services to outpatient or the patient's family. Need to improve how to do solving the patient problem especially regarding the use of drugs, and type dugs. There is regular training from both internal and external about service excellent, team building, improve skill and knowledge especially in the field of pharmacy for pharmacy staff. It is hoped that the hospital management will be able to hold one place / floor where the specialist polyclinic is located on the same floor / place for receipt of drugs. For further research it is expected to develop competency theory and by adding other research variables such as the provision of drugs installed by pharmaceuticals, the workload of pharmacy staff, etc., that have not been tested in this study.

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