

## Analysis of Drug Waiting Time at the Pharmacy Depot at the Outpatient Installation at the Bangkinang Regional General Hospital, Kampar Regency, in 2023

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**Abstract:** To realize safe and quality health services, every hospital is required to meet the National Indicators for the Quality of Health Services which is one of the tools for assessing and evaluating hospitals in maintaining and improving the quality of health services in accordance with Regulation of the Minister of Health Number 30 of 2022, one of the indicators Hospital service qualities is patient satisfaction. Patient satisfaction plays an important role in determining the quality and quality of health services provided by health care facilities. The extension of waiting time for drug services is a matter of concern to the public and is seen as one of the things that has the potential to cause patient dissatisfaction. The purpose of this study was to analyze the waiting time for prescription services at the pharmacy depot at the Outpatient Installation at Bangkinang Regional General Hospital, Kampar Regency in 2022. This study used a qualitative research method through in-depth interviews with 8 informants, observation, and document reviews. The research results obtained are that the number of staff on duty at the Outpatient Pharmacy Depot is still lacking so that the workload of officers is excessive, while prescription writing is currently being carried out using electronic and manual prescriptions with quite many recipes being served every day. Bangkinang Hospital already has a good SPO for prescription drug services to be used as a reference for officers, while the room for the Outpatient Pharmacy Depot is narrow, which hinders the movement of officers in providing services. The conclusion of this study is that the man factor, the tool factor and the material factor are inadequate and do not comply with the provisions.

**Abstract:** Untuk mewujudkan pelayanan kesehatan yang aman dan bermutu, setiap rumah sakit wajib memenuhi Indikator Nasional Mutu pelayanan kesehatan yang merupakan salah satu perangkat untuk menilai dan mengevaluasi rumah sakit dalam mempertahankan dan meningkatkan mutu pelayanan kesehatan sesuai dengan Peraturan Menteri Kesehatan Nomor 30 Tahun 2022, salah satu indikator mutu pelayanan Rumah Sakit adalah kepuasan pasien. Kepuasan pasien memainkan peran penting dalam menentukan mutu dan kualitas layanan kesehatan yang diberikan oleh fasilitas pelayanan kesehatan. Perpanjangan waktu tunggu pelayanan obat menjadi hal yang dikeluhkan oleh masyarakat dan dipandang sebagai salah satu hal yang berpotensi menimbulkan ketidakpuasan pasien. Tujuan penelitian ini adalah menganalisis waktu tunggu pelayanan resep di depo farmasi pada Instalasi Rawat Jalan Rumah Sakit Umum Daerah Bangkinang Kabupaten Kampar Tahun 2022. Penelitian ini menggunakan metode penelitian kualitatif melalui wawancara mendalam kepada 8 orang informan, observasi dan telaah dokumen. Hasil penelitian yang diperoleh adalah jumlah tenaga yang bertugas pada Depo Farmasi Rawat Jalan masih terdapat kekurangan sehingga beban kerja petugas berlebih, sedangkan penulisan resep yang dilakukan saat ini adalah menggunakan resep elektronik dan manual dengan jumlah resep yang



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dilayani cukup banyak setiap harinya. RSUD Bangkinang sudah memiliki SPO pelayanan resep obat yang baik menjadi acuan petugas, sedangkan ruangan Depo Farmasi Rawat Jalan sempit sehingga menghambat pergerakan petugas dalam memberikan pelayanan. Kesimpulan penelitian ini adalah pada faktor *man*, faktor alat dan faktor *materials* belum memadai dan belum sesuai ketentuan

## INTRODUCTION

To provide safe and quality health services, every hospital is required to meet the National Indicators for the Quality of Health Services one of the tools for assessing and evaluating hospitals in maintaining and improving the quality of health services. This is in accordance with the Regulation of the Minister of Health Number 30 of 2022, one indicator of the quality of hospital services is patient satisfaction. Patient satisfaction is the result of the patient's opinion and assessment of the performance of services provided by health care facilities (RI Ministry of Health, 2022). Extended waiting times have long been something that the public complains about and is seen as one of the things that has the potential to cause patient dissatisfaction (Alrasheedi et al., 2019).

A patient's experience of waiting for a long period of time can completely influence his or her perception of service quality. The close relationship between patient satisfaction and waiting time has been studied in many studies (Margusino & Framiñán, 2017; Xie & Or, 2017; Sengupta et al., 2019).

There are several things that are considered to be the main causes of this long waiting time, such as a lack of staff, large polyclinic rooms, an ineffective Hospital Management Information System (SIMRS), and the existence of prescriptions that are not based on the formulary, which causes the waiting time service to not be sufficient standards, both Minimum Service Standards (SPM) and hospital quality indicators (Purwandari et al., 2017). Waiting time for medicine is the time it takes a patient from submitting a prescription for the medicine to the pharmacy depot until the patient gets the medicine (Alam et al., 2020).

The problem of waiting time for drugs is still a problem in several hospitals, including in Riau Province, but if we look at the achievement of service waiting times at class C local government hospitals in Riau Province, namely at Rokan Hulu Hospital and Tengku

Rafi'an Siak Hospital, we get waiting times better service. The waiting time for prescription drug service at Rokan Hulu Hospital is 20 minutes (30 minutes SPM), and the waiting time for concoction prescription services is 45 minutes (50 minutes SPM) in 2022, while at Tengku Rafi'an Siak Hospital in 2022 the waiting time for prescription drug service is 26 minutes, and the waiting time for concoction drug prescription service is 43 minutes (Rokan Hulu Regional Hospital, 2023; Tengku Rafian Hospital, Siak, 2023).

At Bangkinang Hospital based on data on patient visits in 2020-2022, the service with the most visits is the Outpatient Installation. The Outpatient Installation is the initial entry point for patients to get various kinds of services. Outpatient installations are medical services intended for patients for observation, diagnosis, treatment, rehabilitation and other health services without requiring patients to be hospitalized or requiring patients who experience health problems to control or resolve their health problems in hospital. Based on SIMRS data at Bangkinang Hospital from the last three years patient visits to the outpatient installation will be the most in 2022 where there were 60,087 patients who received examination and treatment. The table of patient visits at the Bangkinang Hospital Outpatient Installation is attached.

The impact that can arise as a result of long waiting times for prescription services causes patients to feel uncomfortable, this creates a negative perception of the quality of hospital services, so that patient satisfaction decreases and will trigger complaints to the hospital. Then in the end lead to a decrease in the quality of hospital services and affect patient confidence in the future (Dwi Arini et al., 2020).

Pharmacy Depo is a service unit in a hospital that provides pharmaceutical services such as managing and distributing medicines. The Bangkinang Hospital Outpatient Pharmacy Depot provides services

to patients in the Outpatient Installation. Based on the Preliminary Survey conducted on the Head of Pharmacy Installation and the Head of the Outpatient Pharmacy Depot Unit and the observations made, it was obtained an initial description of the Outpatient Pharmacy Depot where the Outpatient Pharmacy Depot has a staff of 12 people consisting of pharmacists, pharmacy technicians, and medical staff. admin. The service room at the pharmacy depot consists of a compounding room, delivery room, counseling room, and administration room. The number of recipes served throughout 2022 is 44,080 recipes.

## METHODS

The type of research used in this research is qualitative research. Qualitative research is a method of research to understand human or social phenomena by producing global and complex images and the environment that can be reported in words, providing detailed thoughts obtained from informants, and researched within the framework of natural conditions.(Fadli, 2021). The main goal in qualitative research is to make facts/phenomena easy to understand (understandable) and make it possible according to the model to produce new hypotheses(Hennink et al., 2020). In this study the research informants consisted of key informants, supporting informants and key informants. The selection of informants was adjusted to the principles of qualitative research, namely suitability and adequacy. The suitability of this research is based on the selection of respondents based on the research topic and the knowledge obtained. The principle of adequacy is that the information obtained must be diverse and meet the criteria relevant to the research(Martha & Kresno, 2017).

Primary data in this research obtained through in-depth interviews with main informants, supporting informants and key informants using interview guidelines (conversations conducted with 2 parties) as well as observation (direct observation) using a checklist instrument. Secondary data in this research is data or documents related to the Bangkinang Hospital Outpatient Pharmacy Depot Services and the Bangkinang Regional Hospital profile for 2022-2023. Methods of data collection In-depth interviews,

Observation and document review. The validity test used in qualitative research is triangulation, namely: Source triangulation, Method triangulation and data triangulation (Martha, 2020) Explaining that data analysis is divided into 6 (six) stages, namely the data transcription stage, data coding, analysis process, presenting data in matrix form, data analysis during data collection and analyzing data using content analysis.

## RESULTS AND DISCUSSION

### Man Factor

#### Power Amount

The results of interviews on the Man factor related to the number of staff, the main informant said that the number of officers was still lacking, especially in the TTK section, as stated by the main informant with the following results

*"The number of officers is currently 12 people, consisting of 3 pharmacists, 4 pharmacist assistants, 4 admins, and 1 drug delivery worker, namely the romance application, I think this is sufficient at this time"*

According to research by Siregar (2018), the number of human resources in prescription services greatly influences the waiting time for prescriptions. The more energy you have, the faster the prescription service will be provided. This is also in line with research Dwi Arini et al (2020) where a lack of staff causes the TTK to work with a large load and sometimes the TTK carries out the task of dispensing medicines with the approval of the pharmacist, so this affects the prescription service time.

### Behavior

Based on the results of interviews related to behavior, the main informant said that the pharmacy depot officers already understood that good knowledge really supports the services provided, the officers also worked in accordance with applicable regulations. as expressed by the informant with the following results.

*"In my opinion, knowledge about medicine is really necessary to speed up service"*

Research conducted by Awal Bros Ujung Batu Hospital in 2020, officer behavior reflect minimum service standards

while still providing excellent service with limited space and restrictions on infrastructure to follow health protocols due to the Covid-19 pandemic at that time (Winata et al., 2021).

### **Workload**

The results of interviews regarding workload conducted with the main informants stated that the workload of pharmacy officers was quite heavy and the officers worked together to overcome this heavy workload, as expressed as follows:

*"e... his main task is to provide outpatient prescription services e... then making claims for chronic drugs outside of the Ina cbgs package then there is drug delivery with the Asmara service eeee... that's by e... adjusting the entry hours for officers so there are those who are slowed in, they will also be late going home so that it extends the service period so that e... recipes that are slow to arrive can appropriate service is provided"*

Study Mulfiyanti et al (2020) which shows that there is a significant relationship between workload and the level of work fatigue, there is a significant relationship between work stress and work fatigue and there is a significant relationship between conflict and the level of work fatigue. The results of research conducted by Septiyana (2017) shows that to carry out the development of the Hospital Pharmacy Installation dr. Harjono Ponorogo, one of the strategies that can be implemented is to improve the quality and quantity of human resources. It is hoped that the addition of pharmacy staff will accelerate pharmaceutical services so that patients will not leave the Pharmacy Installation to redeem drugs, besides that services can also be provided optimally.

### **Communication**

Based on the results of interviews related to communication conducted with key informants, it was important to communicate effectively, confirm so that mistakes were not made, and provide clear information to patients, as expressed as follows:

*"Yes, e... because every patient who comes e... is verified directly and seen*

*whether it matches the patient's disease or diagnosis. If there is something wrong, it is immediately confirmed e... confirm again with the doctor. "Firstly, it works a little faster, secondly, it gives the patient an understanding of what problems are occurring e... at that time."*

Communication is the process of conveying messages to others can be organized and able to immediately understand the message and provide good feedback. Effective and efficient communication in health services has a vital role for patient safety. Not only in conveying information on available services but also when it comes to giving unpleasant news. For patients, effective communication from the hospital can provide a sense of comfort and foster confidence that their health is a priority. Something that should be the foundation for providing health services but is often hampered by limited communication skills (Harahap & Putra, 2019).

Research conducted at Arosuka Regional Hospital, Solok Regency in 2020 concluded that there was a very close relationship between pharmaceutical services and patient satisfaction and the influence of pharmacist interpersonal communication on patient satisfaction gave very real results showing that the satisfaction and interpersonal communication of pharmacists working in the Arosuka Regional Hospital's pharmaceutical installation had very close attachment (Elnita & Asrinaldi, 2020).

### **Tool Factor Recipe Writing**

The results of interviews conducted by researchers regarding equipment factors related to prescription writing, the main informant said that Bangkinang District Hospital was already using electronic prescriptions, but even so manual prescriptions using paper were still being used, as expressed as follows:

*"Recipe writing? There are two of us, there are e-recipes and manual recipes. If the e-prescription is automatic, the writing of the recipe is clear, it will speed us up to reduce errors in e... reading the recipe, if we have a manual prescription, our*

*system is the recipe that is entered, e... we accept "first by the pharmacist, we read it first, if there is any doubt, we pharmacists will immediately e...contact the doctor by, firstly going directly to the doctor or secondly, we will take a photo of the prescription, we will send it via WhatsApp to the doctor and thirdly, we will call the doctor."*

Developments in the world of health in Indonesia, the drug prescription system still experiences problems such as: errors in reading prescriptions in interpreting handwritten drugs by doctors, errors in writing drug doses which can result in long queues for ordering drugs.(Arifin & Dirgahayu, 2017).

Electronic prescriptions (e-prescriptions) are electronic prescriptions by writing drug prescriptions by inputting drug data using software that has been prepared at SIMRS with a network and server connected to IFRS(Arifin & Dirgahayu, 2017). Electronic prescribing is a system to facilitate and improve communication of drug orders, drug choices, and drug provision through knowledge and decision support as well as a strong data trail for all drugs used based on previously entered data.(De Waal et al., 2019).

### **Number of Recipes**

According to the main informants, based on the results of interviews related to the number of recipes, they said that the number of recipes served was quite a lot and more on certain service days, as expressed as follows:

*"The average e... at the moment, is around e... more or less 200 on average per day, because there are days when there are a lot of prescriptions, there are days when there are a few prescriptions."*

Research conducted on BPJS Kesehatan patients at RSUP DR. M. Djamil Padang in 2020 found that the waiting time for drug prescription services was also not in accordance with the SPM set by the Ministry of Health. The cause of the non-compliance with the waiting time for prescription services with SPM is due to the large number of prescriptions piled up in the label and re-

check or verification section.(Reslina et al., 2021).

Research at the M. Natsir Solok Hospital at the end of 2018 concluded that a decrease in the number of prescriptions being served caused the waiting time to be shorter, this certainly shows that the number of prescriptions greatly influences the waiting time for drug services.(Adrizal et al., 2019). This is also in line with research at the Cut Meutia North Aceh Regional Hospital, the large number of prescriptions entered at the same time at the Pharmacy Installation resulted in longer waiting times for medicines experienced by patients and made the majority of efficiency levels at the North Aceh Cut Meutia Regional Hospital not up to standard.(Coal, 2019).

### **Recipe Type**

The results of interviews conducted by researchers related to the types of recipes to the main informants said that the types of recipes served at the Outpatient Pharmacy Depot consisted of concoction recipes and non-concoction recipes, as expressed as follows:

*"As for the concoction recipe, as I said earlier, if the service is ours, it means we prepare it 1 day before, if 1 day before it is no longer available, but if not, we will prepare it the next morning. "If the prescriptions for non-mixed medicines are in boxes, we take them out of the box, to make it easier for us to take the medicine."*

The results of research conducted at the Manado Adventist Hospital in 2020 provide an illustration that the service for finished drug prescriptions and for patients is quite good, although data is still obtained that several times the prescription service exceeds the SPM time limit because the drug prescription service is carried out during busy hours where patients it does pile up. The type of service for prescriptions for compounded medicines or ready-made medicines depends on the number of prescriptions received(Toreh et al., 2020).

### **Method Factor**

The results of interviews regarding the Method factor with the main informant stated that the SOP for prescription services already

exists, can be understood by officers and is still effective in providing drug prescription services, as stated by the main informant with the following results:

*"Yes, as usual, as soon as you enter the e... pharmacy depot, from the prescribing doctor, the drugs are immediately sorted, finished or concocted or non-concocted drugs, then immediately packed, ready, then packed, straight to front with the administration, then get there, later the medicine label will be made, then later e...give it to the patient then e...explain the drug label, and the things that should be explained about the drug to the patient, it's already there SPO"*

SPO is a set of written instructions that explains the step-by-step process that must be taken to perform routine activities correctly. SOPs must be followed in the same way at all times to ensure that the services provided at a hospital remain consistent and in accordance with applicable regulations. SPO consists of policies, processes and standards necessary for services to run well and can reduce errors, increase efficiency and create a safe work environment.(Brushes, 2021).

Another factor that can influence the length of waiting time for prescription services related to procedures is the absence of technical instructions or SOPs for administering medication to patients. Sometimes the SPO already exists but has not been socialized to all officers so that not all health workers know about the SPO(Purwandari et al., 2017).

## **Materials Factor**

### **Room**

Results of interviews with informantsmainRegarding material factors related to the room, it was said that the room for prescription drug services was too narrow so that the movement of the staff was limited, according to the interview excerpt conducted as follows:

*"Narrow. "The medicine preparation room is narrow e... so e... our space for movement is limited... e... more for e... the medicine places are good e... but the room is a bit narrow so our movement space is more limited"*

Research at the Bhayangkara Hospital Pharmacy Installation in Manado concluded that delays in delivering medicines were also caused by facilities and infrastructure factors, one of which was the room for processing prescription services, the room where prescriptions were processed was not spacious enough, causing officers to have less freedom in the process of processing prescriptions and preparing medicines.(Makinggung et al., 2023). The narrow space of the room affects the services provided and also poor room layout causes delays in the service process provided (Purwandari et al., 2017).

### **Equipment**

Results of interviews with informantsmainrelated to equipment, he said that there was still a lack of equipment at the Outpatient Pharmacy Depot, such as medicine baskets and medicine blenders, according to the interview excerpt conducted as follows:

*"What is currently lacking is a medicine blender, there is a shortage of 1 medicine blender. The first is to test it before using it, the second is like thatblendersee e... "Hear e... the sound of the blender is still as usual or not."*

This was supported by Afqary who stated that the lack of facilities and infrastructure also affected the waiting time for prescription drug services, for example, the blender was broken so he had to mix the medicine manually and there was a lack of computer facilities for inputting prescriptions.(Afqary & Firliah, 2018).

The results of the research at Bangkinang Regional Hospital are also in line with research conducted at the hospitalPekanbaru Medical Center in 2023concluded that equipment supporting prescription services is also a factor that can influence prescription services in hospitals. Equipment that is not in good condition and often breaks down is quite disruptive to services, including labeling equipment that is still manual and not yet computerized, this can slow down outpatient drug services.(Mulya et al., 2023).

### **SIMRS**

The results of interviews with key informants related to SIMRS stated that the problems that occurred related to SIMRS were that the network was sometimes slow and there was still inaccurate drug data, according to the excerpt from the interview conducted as follows:

*"In my opinion, it's SIMRS now Stille.... existing drug data e.... poly with those in the pharmacy is not accurate, e.... by seeing the doctor often call me the stock is on e....their computer is empty, while ours is still available"* (IU3)

According to SIMRS theory, the presentation of data based on a web system can reduce Human Error and Fraud so that pharmaceutical depots can provide more accurate and faster services. All systems in hospitals such as billing systems, electronic medical records, electronic prescriptions, pharmacy information systems, barcode medication administration, logistics information systems, and electronic medication administration records so that all systems are integrated to produce efficiency, effectiveness, professionalism, performance, and access and Hospital services are getting better. Competency-based human resource management and synergy with technological advances (SIMRS) produces speed, accuracy, efficiency, ease of reporting in carrying out operations, speed of decision making, transparency, productive work culture, (Sulaini et al., 2020).

Drug service facilities include the use of computer technology in hospital services using SIMRS. Research conducted at the Pekanbaru Medical Center Hospital in 2023 concluded that SIMRS is a supporting infrastructure for drug services, if SIMRS is inadequate and not appropriate, the service process can also increase the waiting time for drug services. (Mulya et al., 2023)

## CONCLUSION

The human factor on the waiting time for drug service at the Bangkinang Hospital outpatient pharmacy is not in accordance with the provisions, so it can be concluded that there is still a shortage of pharmacists and TTK, resulting in excessive workload for outpatient pharmacy staff. The factor that plays a role is the waiting time for drug service

at the Bangkinang Hospital outpatient pharmacy which does not meet the requirements, so it can be concluded that prescription writing is not uniform, namely electronic prescriptions and manual paper prescriptions. The methodological factor for waiting time for drug service at the outpatient pharmacy at Bangkinang Hospital is good and valid, it can be concluded that the hospital has implemented SPO and implemented by all outpatient pharmacy staff. The material factor is that the waiting time for drug services at the outpatient pharmacy at Bangkinang Regional Hospital is inadequate, and it can be concluded that the prescription drug service space is small, equipment is still lacking, and SIMRS is not yet effective in supporting drug services. drug service work.

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