

Supplement

Factors Causing Outpatient Long Waiting Time at Outpatient Polyclinic of X Hospital

Faktor Penyebab Lamanya Waktu Tunggu Pasien Rawat Jalan di Poli Rawat Jalan RS X

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ABSTRACT

The long waiting time at the outpatient polyclinic is challenging at various hospitals. Waiting too long at the outpatient polyclinic will decrease patient satisfaction, so hospitals must continue improving quality service. Therefore, this study aimed to discover the causes of outpatient prolonged waiting time and solutions to these problems. This research was qualitative research conducted at X Hospital in Malang. The research sample was five participants. In this study, direct interviews, FGDs, and questionnaires were used. Factors causing prolonged waiting time for outpatient services at X Hospital that were not yet effective or still exceeded the minimum standard of hospital services were obtained through observation and Focus Group Discussions (FGDs); and the three root causes compiled using a fish diagram were no online registration and online queues, no Standard Operating Procedure regulating delays in the arrival of specialists for outpatient care, and a limited number of human resources. An alternative solution to the root of the problem was the creation of a Standard Operating Procedure that specifically regulates delays in specialist doctors at the outpatient polyclinic, creating WhatsApp online registration, and increasing the number of human resources in the outpatient polyclinic registration desk.

Keywords: Outpatient polyclinic, registration, waiting time

ABSTRAK

Lamanya waktu tunggu di poli rawat jalan menjadi tantangan di berbagai rumah sakit. Waktu tunggu yang terlalu lama di poli rawat jalan membuat kepuasan pasien akan semakin menurun. Sehingga rumah sakit harus terus memberikan peningkatan kualitas layanan. Maka peneliti tertarik meneliti terkait apa penyebab waktu tunggu rawat jalan dan solusi dari permasalahan tersebut. Penelitian ini adalah penelitian kualitatif. Penelitian ini dilakukan di wilayah Malang dengan objek penelitian yaitu Rumah Sakit X. Sampel dari penelitian terdapat 5 peserta. Dalam penelitian ini dilakukan wawancara langsung, FGD dan juga kuisioner yang diberikan ke 5 peserta tersebut. Faktor-faktor yang menyebabkan waktu tunggu pelayanan rawat jalan di rumah sakit x yang belum efektif atau masih melebihi standar minimal pelayanan rumah sakit diperoleh melalui hasil observasi, *Focus Group Discussion* (FGD) dan disusun dengan menggunakan diagram ikan maka didapatkan 3 akar permasalahan yaitu belum terdapat pendaftaran online dan antrian online, belum terdapat Standar Operasional Prosedur yang mengatur keterlambatan kedatangan dokter spesialis dirawat jalan, dan terdapat keterbatasan jumlah SDM. Dan alternatif solusi dari akar masalah tersebut adalah pembuatan Standar Operasional Prosedur yang mengatur khusus keterlambatan dokter spesialis yang praktek dirawat jalan, pembuatan *Whatsapp* sebagai pendaftaran online, dan penambahan jumlah SDM di bagian pendaftaran poli rawat jalan.

Kata Kunci: Pendaftaran, poli rawat jalan, waktu tunggu

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INTRODUCTION

Patient waiting time for services in health facilities is a problem that many health service providers face. Waiting time is one of the components of assessing patient satisfaction as a customer, that the longer the waiting time, the lower the level of patient satisfaction (1). Patient satisfaction is the patient's feelings that arise from the performance of the health services they get after comparing with the patient's expectations (2), while patient waiting time can be interpreted as the length of time needed by the patient starting from registration until being served by a specialist doctor. Based on the Minister of Health Regulation of 2008 concerning minimum hospital service standards, the waiting time is ideally less than 60 minutes (3). Patients can have an unpleasant experience if they wait too long for treatment, which can cause them to use other health facilities. It, of course, can be detrimental to the hospital and the patient (4).

The length of waiting time significantly impacts patient satisfaction since it is directly related to the quality of service, so policymakers must consider it (5). Several reasons for the long patient service time are usually due to the length of time for registration at the counter, the large number of patients, the limited number of doctors, and the limited number of service staff (6). Based on research at Blambangan Hospital in 2015, the cause of the long waiting time was due to the accumulation of patient registrations without online registration and a lack of registration counters (7). Another study at the outpatient polyclinic at Surabaya Islamic Hospital found that the long waiting time was caused by long service flow, frequent registration machine interruptions, and the discrepancy between specialist doctors' arrival hours and the predetermined schedule (8). Causes of long waiting times, such as the absence of clear lines in writing, the lack of resources to direct patients, and the lack of information regarding the completeness of files, also confuse patients (9).

The problem of waiting time is also faced by the Outpatient Polyclinic of X Hospital, which affects the level of patient satisfaction. The suggestion box and patient

satisfaction questionnaire at X Hospital found that some patients were dissatisfied since the waiting time for the registration queue was too long. Several comments on Google review of X Hospital stated that the waiting time for outpatient polyclinic services was too long. Based on these problems, this study aimed to identify the factors causing the long waiting time for patients at the outpatient polyclinic of X Hospital and to find solutions as well as considerations for the hospital to improve the quality of outpatient polyclinic services.

METHOD

This research was conducted using a descriptive observational approach to assess the phenomenon of patient waiting time, identify, and carry out a comprehensive analysis to obtain a solution. This research was conducted from 9 August 2021 to 10 November 2021. The primary data used in this study was obtained through interviews and group discussions. The number of informants or resource persons selected was five employees of X Hospital as a management team directly related to improving services at X Hospital. The resources were divided into P1, P2, P3, P4, and P5. All informants have expressed willingness to provide the information needed to achieve the study objectives. Data collection in this study was carried out by in-depth interviews using a voice recorder and conducting FGDs (Focus Group Discussions). The fishbone diagram was used to determine the root of the problem, USG (Urgency, Seriousness, and Growth) was used to determine the priority problems, and then the CARL method (capability, accessibility, readiness, and leverage) was used to find solutions.

RESULT

After interview and FGDs with the X Hospital management team were carried out, the root cause of the problem of the long waiting time at the outpatient polyclinic was found. The fishbone diagram, as seen in Figure 1, was used to help identify and visualize the root cause of the long waiting time for patient queues at the outpatient clinic.

Figure 1. Fishbone Diagram

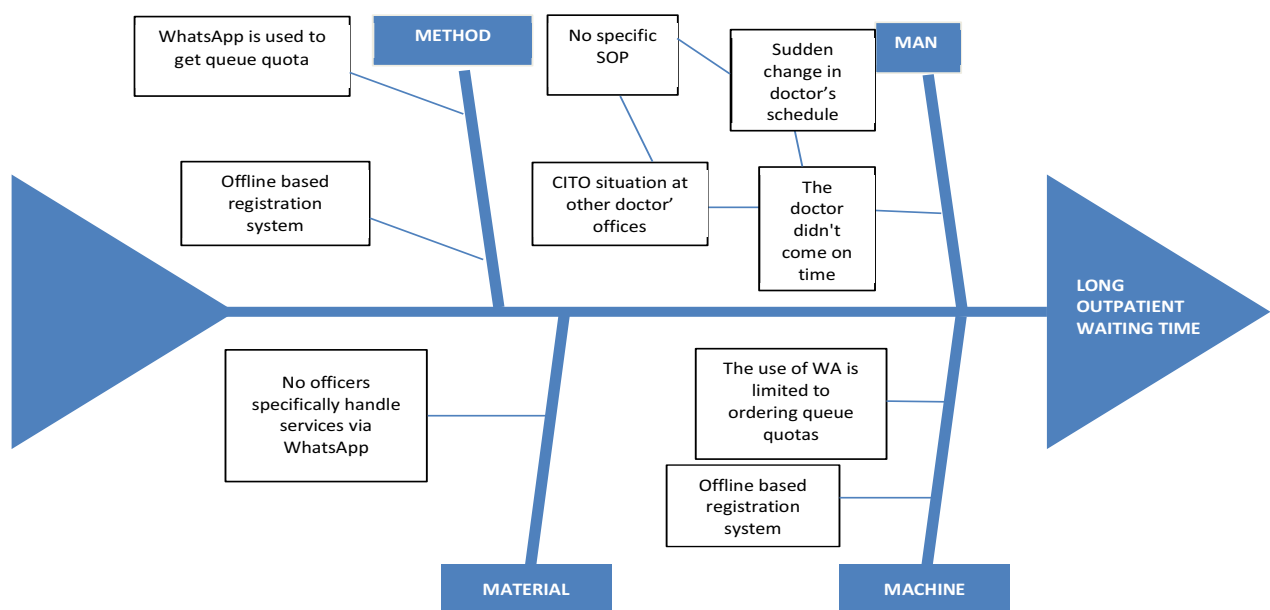


Table 1. List of calculation results with the CARL method

| Alternative Solutions | C | A | R | L | Total Score | Order |
|-------------------------------------------------------------------|---|---|---|---|-------------|-------|
| Formulating standard operating procedures related to late doctors | 8 | 9 | 8 | 9 | 5184 | 1 |
| Using WhatsApp as online registration and queue | 8 | 8 | 8 | 9 | 4608 | 2 |
| Adding the human resources at the registration desk | 8 | 8 | 8 | 8 | 4096 | 3 |

After finding the root of the problem, three main root problems were selected through the USG (Urgency, Seriousness, and Growth) method, namely offline or manual registration system, limited officers who specifically handle registration, and delays in the doctor's attendance at the outpatient clinic. Furthermore, to find the solution, group discussions were carried out and scored using the CARL (capability, accessibility, readiness, and leverage) method and obtained the following results:

Based on the scoring using the CARL (capability, accessibility, readiness, and leverage) method, an alternative solution with the highest score was obtained, namely formulating the standard operating procedures related to doctors' lateness at the polyclinic. Furthermore, the use of WhatsApp-based online media is also needed as a breaker for the long offline queues, and patients can attend according to the order. The alternative solution with the lowest score is adding human resources at the outpatient polyclinic registration counter of X Hospital.

DISCUSSION

Based on the study results, the long waiting time at the X Hospital outpatient clinic was caused by the absence of standard operating procedures, the absence of online registration, and the lack of human resources at X Hospital registration. These three were the biggest problems in X Hospital.

The absence of a standard operating procedure for late doctors at the outpatient polyclinic at X Hospital is in line with previous research at Achmad Darwin Hospital in 2018. This study found that doctor delays played a vital role in waiting time, so management makes regulations that specifically regulate the doctor's attendance schedule (10). A study in Uganda found that doctor delays often occurred in hospitals that did not have permanent doctors. Due to busy doctors and weak regulations, the waiting time could reach two hours (11).

Other reasons, such as sudden schedule changes, CITO treatments carried out at other hospitals, and doctors who were not present during service hours, caused complaints from patients at X Hospital. To avoid this, the hospital must update standard operating procedures that can bind doctors to come and serve their patients timely. Delays that can be submitted by doctors are also arranged within a certain period before service hours start. If the doctor arrives late, the level of patient satisfaction will decrease (12).

The absence of online registration using WhatsApp is a problem in the outpatient polyclinic of X Hospital. The research at Muhammadiyah Hospital Lamongan found

that 97% of outpatients assessed that the online registration system using WhatsApp was better than having to come directly to the hospital to register (13). Previous research at Blambangan Hospital found that the use of an online registration system also needs to be complemented by socialization with the public regarding how to use it. The availability of cellphones' internet quota for online registration also needs to be considered as an effort to increase patient service satisfaction (7).

The online system for outpatient polyclinics registration is more effective since patients do not need to queue to take a number, and patients can estimate their arrival according to the queue number. Moreover, questions regarding the completeness of the files can be submitted via WhatsApp (14). WhatsApp was chosen since it is easier to access by various groups. WhatsApp is more preferred over other social media because it is easy to operate, accessible to all ages, and used as a communication tool for most people. The chatbot system also needs to be performed so that there is an impression of a fast response from the hospital (15).

The lack of availability of human resources at outpatient polyclinic registration at X Hospital is also a significant problem. Previous research at Lubuk Begalung Hospital found that administrative staff who also worked as polyclinic nurses were also found to make patient waiting hours longer, so additional resources were needed in the registration and patient medical record departments (4). In line with previous research at the Yogyakarta Eye Hospital, an adequate number of officers with the correct job description made the service run optimally. Especially for additional procedures in online registration, the hospital must prepare officers to operate the registration system (15). Adding resources to outpatient polyclinic registration is crucial because registration is the first face of a health facility, so a good impression is needed at the start of the service, especially in creating an effective waiting time (13).

The limitations of this study were that the researchers did not have more time to see from the visitor's point of view, so further research is needed on the solutions provided to the market targeted by X Hospital. Improvements made in outpatient care and registration at X Hospital would be able to increase patient satisfaction.

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