

3rd ANNUAL SYMPOSIUM ON HAJJ AND UMRAH MEDICINE (ANSHAR) 2022

Satisfaction of Prospective Hajj Pilgrims with Pharmaceutical Services at the Outpatient Unit of Dinoyo Public Health Centers

Dhani Wijaya*1, Asyifa Nira Sardinella1, Sadli Syarifuddin1, Ria Ramadhani DwiAtmaja1, Nabila Nur alifah1

¹Pharmaceutical Department, Faculty of Medicine and Health Science, Universitas IslamNegeri Maulana Malik Ibrahim, Malang, Indonesia

*E-mail: dhanishalas@gmail.com

ABSTRACT

Health hajj pilgrims should be in istitha'ah condition to do the optimum hajj worship. Health services are needed to achieve the istitha'ah, including pharmaceutical services. Providing satisfactory pharmaceutical services could motivate prospective hajj pilgrims to constantly check their health conditions at health facilities, especially public health centers. Thus, prospective hajj pilgrims can obtain and maintain the state of istitha'ah. This study aimed to determine the level of satisfaction of prospective Hajj Pilgrims with Pharmaceutical Services at the Dinoyo Public Health Center. This descriptive observational cross-sectional study was conducted from July to August 2022 at the Dinoyo Public Health Center. The population in this study were all prospective pilgrims who received pharmaceutical services at the Dinoyo Public Health Center. Study sample set if prospective pilgrims aged 18 years and over. Prospective pilgrims who are part of the Dinoyo Public Health Center employees were excluded. A validated questionnaire was used as the study instrument, and the percentage of satisfaction stated by the customer satisfaction index formula. The results showed that samples were very satisfied with pharmaceutical services at the Dinoyo Public Health Center, with a portion of satisfaction in the tangible dimensions (90.3%), reliability (96.1%), responsiveness (93.7%), empathy (95.7%), guarantee (96.8%).

Keywords: istitha'ah, pharmaceutical services, prospective hajj pilgrims, satisfaction, services quality

INTRODUCTION

Pharmaceutical services are directly oriented to patients related to pharmaceutical supply and services to improve patient quality of life [1]. Pharmaceutical services carried out at public

health centers refer to the Pharmaceutical Service Standards based on the Regulation of the Minister of Health Number 74 of 2016, which states that pharmaceutical service activities consist of the management of pharmaceutical preparations and consumable medical materials as well as clinical pharmacy services. Clinical pharmacy services include assessment prescription services, drug information services, drug therapy monitoring, drug side effects monitoring, drug use evaluation, counseling, and patient visit in public health centers with inpatient care. Patient satisfaction is an affective and evaluative response related to the quality of health services and patient expectations for provided services [2]. Therefore, good patient satisfaction is one of the indicators to be achieved by every health service as one parameter of successful service. Patient satisfaction with pharmaceutical services can affect the level of awareness and patient attitudes toward the effectiveness and safety of drugs [3]. Patient satisfaction to the service quality could be evaluated in five dimensions: tangible, empathy, reliability, assurance, and responsiveness. In a study by Molla et al. (2022), around 49.1% of patients were dissatisfied with pharmaceutical services. The services provider should fix this finding to enhance the quality of the service [4].

Satisfying pharmaceutical services could improve patients' convenience and willingness to get pharmaceutical services. This effort can improve the clinical condition of patients therefore that patients can achieve and maintain istitha'ah conditions. Istitha'ah is important in hajj worship since this worship needs a healthy physical condition. With optimal health and physical conditions, pilgrims can make the pilgrimage to the fullest according to the stages [5].

In 2017-2019, the percentage of the number of regular Indonesian pilgrims was dominated by the elderly [6]. This fact is an essential concern since the health condition of elderly pilgrims has decreased in vision, hearing, memory, and physical strength [7]. Therefore, it is imperative to check and monitor prospective Hajj pilgrims by giving an optimum health service, including pharmaceutical services, to achieve an istitha'ah condition. This study aimed to determine the level of satisfaction of prospective hajj pilgrims with Pharmaceutical Services at the Dinoyo Public Health Center, one of the primary health services providers in Indonesia.

MATERIALS AND METHODS

This study used a descriptive observational design with a cross-sectional study approach and was conducted in July - August 2022. The sampling technique used by the researcher is Non-Probability Sampling with the population in this study were all prospective hajj pilgrims who

received pharmaceutical services at the Dinoyo Public Health Center, Malang. The sample pointed out are prospective pilgrims aged 18 years and over; prospective pilgrims who are part of the Dinoyo Public Health Center employees were excluded.

The Likert scale questionnaire is a research instrument used to collect information about prospective hajj pilgrims sociodemographic factors; prospective hajj pilgrims satisfaction related to tangibles, reliability, responsiveness, assurance, and empathy. Likert scale, 5 points count as 1 point for very dissatisfied, 2 points for dissatisfied, 3 points for dissatisfied, 4 points for satisfied, and 5 points for very satisfied. The satisfaction analysis technique used is the Customer Satisfaction Index (CSI) and adjusted to the satisfaction level criteria. Prospective hajj pilgrims stated satisfied if the CSI value was more than 50%. Vice versa, if the CSI value was less than 50%, it was classified that the prospective hajj pilgrims were dissatisfied with the pharmaceutical services provided [8].

RESULT AND DISCUSSION

Validity Test

The validity test was carried out on a minimum of 30 respondents specifically for the trial who had characteristics similar to the research subjects where this minimum number of value distributions would approach the normal curve. This validity test was conducted with the help of the IBM SPSS 25 program with test criteria if r count > r table with a significance level of 0.05 or with an error tolerance limit of 5% of the total sample, then the measuring instrument can be said to be valid. On the other hand, themeasuring instrument is not valid, if r count < r table. Sampling to test the validity of this research instrument is based on the opinion of Singarimbun and Efendi (1995) which states that the minimum number of trial samples is 30 respondents and the instrument can be said to be valid if r count > r table, with r table of 0.36 [9]. Based on the results of the calculation of the validity test in the expectations and satisfaction column, all 22 items have an r arithmetic value that is greater than the r table. This means that all items are said to be valid so that they can be used for satisfaction research.

Reliability Test

Based on the 22 question items that are said to be valid, then the reliability test calculation is carried out with the help of the SPSS 25 program. In the calculation results of the reliability test in the expectation column, Cronbach's Alpha value is obtained at 0.960 and in the satisfaction

column, Cronbach's Alpha value is 0.962. This value indicates that measurement using a questionnaire instrument provides the same score results in the same sample at different times.

Patient Demographics

This study involves 100 prospective hajj pilgrims as samples, with more female respondents than males as stated in Table 1. It proves that more female visited health facilities for treatment than males [10]. In a study by Thompson et al. (2016), the number of women who carry out health checks is more than men because women have greater trust in the health workers, so they are more likely to carry out health checks as a response to physical health problems [11].

Table 1. Patient Demographics

Criteria	Number of	
	Respondents	
Gender	-	
Male	41	
Female	59	
Age (years)		
18-25	17	
26-35	29	
36-45	17	
46-55	18	
56-65	15	
>65	4	
18-25	17	
26-35	29	
36-45	17	
46-55	18	

In this study, prospective hajj pilgrims were mostly in the age range of 26-35 years, with 29 respondents. Meanwhile, the respondents' lowest age range is prospective hajj pilgrims over 65 years, namely four respondents. This finding is supported by the study of Thompson et al. (2016) that adult patients are more willing to carry out health checks in response to health problems than the elderly [11].

Prospective Hajj Pilgrim's Satisfaction

Satisfaction evaluation is done in 5 dimensions. The tangible dimension stated di Table 2 is an assessment by prospective pilgrims of the physical facilities, equipment, personnel, and means of communication in pharmaceutical services.

Table 2. Prospective Hajj Pilgrim's Satisfaction in Tangible Dimension

Statement	CSI of each statement (%)	CSI of tangible dimension (%)
The waiting room is cleanand tidy	93.6	90.3
The waiting room has adequate facilities (AC,TV, loudspeakers, or magazines)	88.2	
The place for drug delivery is different from the counter with the delivery of Prescriptions	92.8	
There is drug information in the form of brochures, pamphlets, or banners	80.2	
The appearanceof pharmacist is neat and polite	95.2	

The CSI of prospective hajj pilgrims' satisfaction in the tangible dimension is 90.3% and classified as good of the pharmacy staff. very satisfied. This finding indicates that the Dinoyo Public Health Center have good physical facilities; a clean and comfortable waiting room; a clean and tidy appearance.

The highest satisfaction percentage is in the statement about the appearance of the pharmacist, with a CSI of 95.2%. This result shows prospective hajj pilgrims are very satisfied with the neat and polite pharmacist's appearance. Moreover, the lowest tangible satisfaction percentage is in the statement of availability of drug information in the form of brochures, pamphlets, or banners. This indicates that the prospective hajj pilgrims feel there is a lack of booklets or other reading materials in the waiting room. This fact is in line with Hasen and Bedaso's research (2021); as much as 58.9% of respondents were dissatisfied with printed drug information media availability [12].

Prospective Hajj Pilgrim's Satisfaction in Reliability Dimension is stated in Table 3. The CSI percentage of this dimension is 96.1% and is categorized as very satisfied. This result shows

that Dinoyo Public Health Center has an easy dan quick services system. The lowest CSI found in the statement related to the availability of drugs in prescription, as much as 94%. This finding could happen because of the drug stock's emptiness and the delay in drug supply in health care [13].

Table 3. Prospective Hajj Pilgrim's Satisfaction in Reliability Dimension

Statement	CSI of each statement (%)	CSI of reliability dimension (%)
Pharmacists provide services easily and without convoluted	96,2	96,1
Prescription drugs are always available	94	
Delivery of drugs according to the queue number	96,6	
The drug packaging is received by the patient in good condition	97,6	

Table 4. Prospective Hajj Pilgrim's Satisfaction in Responsiveness Dimension

Statement	CSI of each statement (%)	CSI of responsiveness dimension (%)
Pharmacists prepare drugs after prescriptions are received immediately (service no more than 15 minutes)	94	93,7
Pharmacists are responsive in responding to complaints related to patient health problems	93	
Pharmacists provide information on drug use, drug side effects and drug doses at the same time as drug delivery	92,2	
Pharmacists answer patient questions smoothly	95,4	

A study in the responsiveness dimension in Table 4. gives results of patient satisfaction in the very satisfied category with a CSI of 93.6%. This result indicates that most respondents stated

that the pharmacy staff of Dinoyo Public Health Center are responsive to drug complaints and prepare the drug quickly. The lowest CSI percentage in this dimension is on the satisfaction statement related to information on drug use, drug side effects, and drug dosage together at the time of drug delivery the pharmacy officer provides. This happens because the pharmacy staff is not sensitive to the patient's condition or the pharmacy is busy, and there are many queues of patients [13].

Prospective Hajj Pilgrim's Satisfaction in the empathy dimension has CSI 95.7%, as stated in Table 5. These results show that prospective hajj pilgrims are very satisfied with the ability of health workers to maintain good communication relationships and understand patient needs. The highest CSI in this dimension is in the statement that pharmacist officers should be on standby in the pharmacy. This result is in line with El-Kholy et al (2022), that founded as many as 81.5% of respondents agree pharmacy should be guarded by pharmacist officers during pharmacy operational hours [14].

Table 5. Prospective Hajj Pilgrim's Satisfaction in Empathy Dimension

Statement	CSI of eachstatement (%)	CSI of empathy dimension (%)
Pharmacists provide services with a friendly and polite attitude	96,2	95,7
Pharmacists listen and answer patient complaints and questionspatiently	94,4	
Pharmacists pay attention to patients	93,6	
Pharmacists provide services fairly without discriminating against the patient's social statu	ıs 96,8	

Pharmacists are always on standby at the 97,2 pharmacy public health center

The last dimension studied in this satisfaction research is assurance. The CSI in this dimension is 96.8% (Table 5) and classified as very satisfied. This result shows prospective hajj pilgrims appraise pharmacy health workers with competence, ethics, and characteristics that convince them.

Table 6. Prospective Hajj Pilgrim's Satisfaction in Assurance Dimension

Statement	CSI of each statement (%)	CSI of assurance dimension (%)
Pharmacists are well- groomed and provide information that can reassure patients	96,6	96,8
Medicines are prepared properly and thoroughly	97	
Pharmacists re-assure thesuitability of the prescription and the patient's name when dispensing drugs	96	
The medicine given to the patient has been confirmed tobe in a condition fit for consumption	97,6	

The statement regarding the drug handed over to the patient confirmed that it was in a sealed condition suitable for consumption, obtaining the highest satisfaction score of 97.6%. This can happen because there is control over the process of receiving, storing, and dispensing drugs from the drug warehouse to the place of service (pharmacy) so that expiration dates, physical changes in the form of drugs, or changes in drug color can be monitored [15].

CONCLUSION

In this study, it was found that prospective pilgrims were very satisfied with the pharmacy services as evidenced by the CSI of satisfaction on the tangible dimension of 90.3%, reliability of 96.1%, responsiveness of 93.6%; empathy 95.7%; and 96.8% assurance satisfaction on 5 dimensions indicate that patients are very satisfied with outpatient pharmaceutical services at Dinoyo Public Health Centers. However, the lowest satisfaction is found in the tangible dimension. Dinoyo Public Health Centers must complete facilities such as the availability of brochures or

pamphlets as a source of information for patients.

ACKNOWLEDGEMENT

Acknowledgement for DIPA FKIK UIN Maulana Malik Ibrahim

REFERENCES

- [1] Prihartini, N., Yuniar, Y., Susyanty, A. L., dan Raharni. 2020. 'Kepuasan Pasien Rawat Jalan terhadap Pelayanan Kefarmasian di Rumah Sakit dan Puskesmas di 11 Provinsi di Indonesia', *Jurnal KefarmasianIndonesia*, 10(1), pp. 42–49.
- [2] Mumu, L. J., Kandou, G. D., dan Doda, D. V. 2015. 'Analisis Faktor-Faktor Yang Berhubungan Dengan Kepuasan Pasien di Poliklinik Penyakit Dalam RSUP Prof. Dr. R. D. Kandou Manado'. *Jurnal Unsrat*, 1.
- [3] Kefale, A. T., Atsebah, G. H. dan Mega, T. A. 2016. 'Clients' Perception and Satisfaction Toward Service Provided by Pharmacy Professionals at A Teaching Hospital in Ethiopia', *Integrated Pharmacy Research and Practice*, pp. 85–94.
- [4] Molla, M., Sisay, W., Andargie, Y., Kefale, B., dan Singh, P. 2022. "Patients' satisfaction with outpatientpharmacy services and associated factors in Debre Tabor comprehensive specialized hospital, Northwest Ethiopia: A cross-sectional study". *PLoS ONE*, *17*(1 January), 1–13.
- [5] Kementrian Kesehatan RI. 2017. Data dan Informasi Kesehatan Profil Kesehatan Indonesia 2016.
- [6] Abidin, Z. 2020. Survei Kepuasan Pelayanan Jemaah Haji di Dalam Negeri. Jakarta: Litbangdiklat Press.
- [7] Widyarini. 2016. 'Penyelenggaraan IbadahHaji bagi Lansia', Jurnal Az Zarqa', 8(2).
- [8] Devani, V., dan Rizko, R. A. 2016. 'Analisis Kepuasan Pelanggan dengan Metode Customer Satisfaction Index (CSI) dan Potential Gain in Customer Value (PGCV)'. *Jurnal Rekayasa Dan Manajemen Sistem Informasi*, 2(2), 24–29.
- [9] Singarimbun, Masri dan Shofian Effendi. 1995. Metode Penelitian Survey. Jakarta: LP3ES
- [10] Joshua, E. 2017. Patient Satisfaction with Pharmaceutical Care Services in Selected Health Facilities in Delta State, South-South of Nigeria. *Orthopedics and Rheumatology Open Access Journal*, 8(3), 1–14.
- [11] Thompson, A. E., Anisimowicz, Y., Miedema, B., Hogg, W., Wodchis, W. P., dan Aubrey-Bassler, K. 2016. The influence of gender and other patient characteristics on health care-seeking behaviour: A QUALICOPC study. *BMC Family Practice*, 17(1), 1–7.
- [12] Hasen, G., dan Negeso, B. 2021. Patients satisfaction with pharmaceutical care and associated factors in the Southwestern Ethiopia. *Patient preference and adherence*, 15, 2155.

- [13] Yunita, B., Ma'aly, D. I., Pakiding, D. S., Utama, Y. A., Wardani, T. S., dan Santoso, A. P. A. 2022. Tingkat Kepuasan Pasien terhadap Pelayanan Kefarmasian Beberapa Apotek di Samarinda. *Media Farmasi Indonesia*, *17*(1), 91–100.
- [14] El-Kholy, A. A., Abdelaal, K., Alqhtani, H., Abdel-Wahab, B. A., & Abdel-Latif, M. M. (2022). Publics' Perceptions of Community Pharmacists and Satisfaction with Pharmacy Services in Al-Madinah City, Saudi Arabia: A CrossSectional Study. *Medicina*, *58*(3),432.
- [15] Manapode, M., Tampa'i, R., Pareta, D., dan Tulandi, S. 2021. Evaluasi Kepuasan Pelayanan Kefarmasian Di Instalasi Farmasi RSJ. Prof. DR. V.L Ratumbuysang. *Biofarmasetikal Tropis*, 4(1), 109–117.