



Research Paper

Patient Satisfaction Level with Pharmaceutical Services at Clinic X and Clinic Y in Pariaman City

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ABSTRACT: Evaluation of patient satisfaction needs to be done regularly and accurately because patient satisfaction is a key indicator of the quality of health services. Klinik X and Klinik Y are two private clinics that provide basic and specialist health services in Pariaman City. As the first referral for the community, both can handle around 2500-3000 patient visits every month efficiently. This study aimed to measure the level of patient satisfaction with pharmaceutical services at Klinik X and Klinik Y in Pariaman City in 2023. This study used a purposive sampling method, involving 380 respondents. This study evaluated five dimensions of assessment of pharmaceutical services, Clinic X (Responsiveness 79.85%, Assurance 79.07%, Tangibles 79.07%, Empathy 80.19%, and Reliability 78.04%). Clinic Y (Responsiveness 79.92%, Assurance 81.25%, Tangibles 80.1%, Empathy 82.23%, and Reliability 79.89%). The results show variations in the level of patient satisfaction at both clinics where overall patients gave a satisfied assessment of each assessment dimension, these results provide insights into aspects that need to be improved in pharmaceutical services at both clinics.

KEYWORDS: Patient satisfaction, pharmaceutical services, assessment dimensions, Clinic X, Clinic Y

Received 11 May, 2024; Revised 21 May, 2024; Accepted 23 May, 2024 © The author(s) 2024.

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I. INTRODUCTION

Quality of health services is a step towards improving health services both for individuals and populations by the expected *output* and by the latest professional knowledge. In line with the development of science and technology, there has been a shift in the orientation of pharmaceutical services from the management of pharmaceutical preparations to comprehensive services (*pharmaceutical care*) [1]. Pharmaceutical service standards are needed as a guide for pharmaceutical personnel to perform pharmaceutical services optimally. The importance of maintaining the quality of pharmaceutical services in health clinics is emphasized by the issuance of Permenkes Number 34 of 2021. Good pharmaceutical service standards include; assessment and prescription services, drug information services (PIO), patient *rounds/visits* which are visits to inpatients, monitoring of drug side effects (MESO), monitoring of drug therapy (PTO), evaluation of drug use, pharmaceutical services at home (*home pharmacy care*).

Clinic X and Clinic Y are two private clinics that provide basic and specialist health services to the community. As private clinics, both serve as the first referral for the people of Pariaman City to obtain health services. In functioning, both clinics can serve a high number of visits, which is around 2500- 3000 patients every month. Clinic X is a health care facility located in Pariaman City, which is located on Jl. Dr. Soeharjo No.24, Kp. Baru, Kec. PariamanTengah, Pariaman City, West Sumatra. Clinic Y is a clinic in Pariaman City that has its pharmaceutical installation and serves pharmaceutical practices. This clinic is located on Jl. Kapten Pierre Tendean No.4, Kp. Baru, Kec. Pariaman Tengah, Pariaman City, West Sumatra. The quality of health services is very important to improve the quality of life and patient satisfaction. In addition to providing complete health facilities, both clinics also have pharmaceutical service facilities that support providing health services to patients. This pharmaceutical service is an important aspect in helping patients get the right medicines and treatments according to the patient's medical condition. Due to the important role of these clinics in providing pharmaceutical services, researchers are interested in observing and evaluating the quality of

pharmaceutical services at Clinic X and Clinic Y. The evaluation will be carried out based on the level of pharmaceutical service satisfaction felt by patients seeking treatment at these two clinics.

Patient satisfaction surveys are important and need to be carried out in conjunction with measuring other dimensions of health service quality. Measurement of patient satisfaction needs to be carried out regularly and accurately [2]. Satisfaction is an important part of health care because patient satisfaction cannot be guaranteed, separated from the quality of health services. Satisfaction survey is one of the assessment indicators to assess the quality of service [3]. So that these services provided are to the needs and desires of the community in general and patients in particular [4]. Pharmaceutical service is a direct and responsible service to patients related to pharmaceutical preparations to achieve definite results to improve the quality of life of patients [1]. However, despite its importance, pharmaceutical services often do not meet patient expectations. This can be caused by various things, such as a lack of information provided by pharmaceutical personnel, long waiting times, or even pharmaceutical service standards not being implemented properly. It is important to measure the level of patient satisfaction with pharmaceutical services at the clinic. This study will help identify existing problems and provide solutions to improve pharmaceutical services at the clinic.

The results of this study will also help improve the overall quality of health services and ensure that patients receive good service and meet their expectations. This research is also expected to be an evaluation material to assess the level of performance, efficiency, impact, and *output of* a policy, as well as to find out if there are deviations and as input for future policies, ensuring that regulations related to the implementation of pharmaceutical services at the Clinic have been implemented [1]. Thus, this research has a high relevance in efforts to improve the quality of health services in the clinic. and can also make a positive contribution to the progress of the healthcare system as a whole, especially for all patients of Clinic X and Clinic Y.

II. RESEARCH METHODS

This research is an observational study with a descriptive design. This research will be conducted from March to May 2023, which will be held at Clinic X and Clinic Y in Pariaman City. This study involved a population of all patients aged 17-65 years who visited Clinic X and Clinic Y. The sample size was determined based on the Isaac and Michael table for an infinite or unknown population, with an error rate of 5%. Therefore, the sample size used was 349 respondents. To strengthen the analysis and anticipate the possibility of exclusion, the sample size was increased by 10%, so that the total sample taken was 380 respondents, then subdivided based on visit data in the last 3 months (October-December 2022) from both clinics. The sample in this study were patients who redeemed prescription drugs at the clinical pharmacy installation unit. The sampling method used is non-probability sampling with a *purposive sampling* approach, namely research sampling based on the characteristics that have been determined as follows: The inclusion criteria for this research sample are patients or families of patients who take drugs aged 17-65 years and have redeemed prescriptions one or more times at Clinic X or Clinic Y, patients can communicate well. Fill out the questionnaire and the attached consent statement. The exclusion criteria in this study were that the patient was a family member of the clinic employee, and the patient did not fill out the questionnaire completely. Based on the visit data from October to December 2022, the total visit of Clinic B was 11191, and Clinic F was 8809 so the percentage of Clinic B visits was 55, 95%, and Clinic F was 44.05%. Then the distribution of the number of respondents taken at each clinic is proportional so that the number of respondents to be studied at Clinic X is 213 respondents and at Clinic Y is 167 respondents, a total of 380 respondents. Researchers carried out the data collection process with a duration of 4 days a week with a sample quota to be taken per day of 20 respondents. The sample collection schedule was carried out on Monday-Thursday, during the process of distributing questionnaires, if the minimum quota of respondents was not met on that day, the data collection process was replaced on the following day according to the day of data collection, and the selection of this day was adjusted to the day the pharmaceutical practice services were carried out at Clinic X and Clinic Y Pariaman.

No.	Statement List	Perceived service				
		1	2	3	4	5
	<i>Responsiveness</i>					
1.	Pharmaceutical personnel help patients who have complaints about medicine (Tonasih, 2021)					
2.	Pharmaceutical personnel can provide appropriate solutions and recommendations to meet patient needs.					

3.	Pharmacy personnel ensure that patients understand the medicine that they are taking the patient receives by asking the patient to repeat the explanation that has been given (Permenkes, 2021).					
4.	Pharmaceutical personnel always ask about the patient's allergies. have against prescribed drugs					
5.	Pharmaceutical workers always provide time for consultation about drugs or complaints from patients (Oparah, 2006).					
6.	Pharmaceutical personnel are always available and willing to help patients when needed (Oparah, 2006).					
7.	Pharmaceutical personnel are responsive in serving every patient who came					
8.	Waiting time for pharmaceutical services by conditions crowd at the clinic (Handayani, 2016)					
	Assurance	1	2	3	4	5
1.	The clinic pharmacy provides alternative (generic) and branded (patent) drugs.					
2.	Pharmaceutical workers can provide drug recommendations alternatives if the required medicine is not available					
3.	Pharmaceutical personnel always seek the patient's consent for any decision to change medication if necessary (Permenkes, 2021)					
4.	Pharmaceutical workers perform services and hand over prescriptions with a concoction of 45-60 minutes (Permenkes, 2021)					
5.	Pharmaceutical workers always explain the benefits of Dagusibu (<i>get, use, keep, and dispose</i> of) medicine.(Permenkes, 2021)					
6.	Pharmaceutical personnel ensure that those receiving the medicine is the patient or their family (Permenkes, 2021)					
7.	Pharmaceutical personnel provide clear labeling/ticketing on each of the drug packaging (Oparah, 2006)					
	Tangible (Physical Evidence)	1	2	3	4	5
1.	Pharmacy personnel are clean and neat in appearance. work (Permenkes, 2021)					
2.	Pharmaceutical workers use practice equipment including practice clothes and identification.					
3.	There is a Pharmacist practice information board in the pharmacy installation clinic (Permenkes, 2021)					
4.	Prescription service is carried out by the prescription order number (Handayani, 2016)					
5.	The clinical pharmacy installation has facilities that meet the standards of security and health that expected. (applying applicable health protocols)					
6.	Pharmacy service facilities provide bulletins/brochures/ leaflets, community empowerment (counseling) (Permenkes, 2021)					
7.	The pharmacy installation has a comfortable waiting room for patients (Oparah, 2006)					
8.	The availability of good waiting room facilities such as adequate seating, drinking water, TV, etc. (Nusaputra, 2014)					
	Empathy (Empathy)	1	2	3	4	5
1.	The pharmaceutical worker did not show any expression of displeasure or resentment during the consultation process with patient					
2.	Pharmaceutical personnel have the first initiative in assisting patients. (Nusaputra, 2014)					
3.	Pharmacy personnel are willing to repeat questions from patients regarding their complaints.					
4.	Pharmaceutical workers handed over the medicine in a friendly manner, considering that the patient was sick. (Oparah, 2006)					
5.	Pharmaceutical workers always ask the patient if there are any problems. complaints after taking the drug.					

6.	Pharmaceutical workers provide solutions or explanations that help patients overcome problems with the drugs they receive. (Wardhani, 2006)					
7.	Pharmaceutical personnel can interact well and create a comfortable atmosphere for patients. (Meila, 2019)					
8.	Pharmaceutical personnel are always friendly when patients ask questions or ask for help. (Permenkes, 2021)					
	Reliability	1	2	3	4	5
1.	Pharmaceutical workers have good knowledge in resolving patient complaints about drugs. (Wardhani, 2006)					
2.	Pharmaceutical personnel can answer patient questions about medicinal products clearly and in detail.					
3.	Pharmaceutical personnel provide drugs by prescription received by the patient from the doctor					
4.	Length of time for prescription submission by pharmaceutical personnel to the patient. (Tonasih, 2021)					
5.	Pharmaceutical workers always explain how to use the medicine that is given to the patient. (Oparah, 2006)					
6.	Pharmaceutical workers always explain about the use of drugs given to patients (Permenkes, 2021)					
7.	Pharmaceutical workers always explain about side effects drugs given to patients (Permenkes, 2021)					
8.	Pharmaceutical workers use easy language understood by the patient. (Nusaputra, 2014)					
9.	Hours service pharmacy (consultation about medicine) implemented according to the schedule. (Alifah, 2020)					

Description: Value Statement:

Very satisfied	5
Satisfied	4
Quite satisfied	3
Not satisfied	2
Very dissatisfied	1

Table 1. Statement of Respondents

2.1 Research Instruments

The research instrument used was a questionnaire. The data was collected or obtained using a questionnaire containing questions about pharmaceutical services provided to patients when redeeming drugs at the X Clinic Pharmacy Installation and the Y Clinic Pharmacy Installation. 34 of 2021 concerning pharmaceutical service standards in clinics and several other sources such as Tonasih (2021)[5], Oparah (2006)[6], Handayani (2016)[7], Nusaputra (2014)[8], Melia (2019)[9], Wardhani (2006)[10], Alifah (2020)[11], which were modified as needed to obtain more specific data on the assessment of each test sub variable. The validity test was carried out at Clinic X and Clinic Y, with a division of 15 respondents taken at Clinic X and 15 respondents at Clinic Y. Provided that the validity test respondent data is not used as a research object. Content and construct accuracy are assessed by experts in their fields. The instrument is declared valid in content and construct if the expert has not provided suggestions/input and accepts the content, format, and construct of the instrument. Criterion accuracy was assessed by comparing the instrument with the criteria. The comparison is tested with the correlation test. The more the validity coefficient value approaches +1.00, the more valid the instrument is indicated.

2.2 Reliability Test

In this study, researchers used the *Cronbach's Alpha test* as a reliability test method. Calculations using *Cronbach's Alpha* formula are accepted, if the calculation of $r_{count} > r_{table 5\%}$. The reliability value is good if the *Cronbach's Alpha* value is ≥ 0.6 [9]. Reliability testing using *Cronbach's Alpha* test is carried out for instruments that have more than 1 correct answer [12].

2.3 Measurement Scale

This study uses a Likert scale in scoring the statements provided, with the following assessment criteria: Very Satisfied score 5 with a percentage value of 81%- 100%, Satisfied score 4 with a percentage value of 61%-80%, Quite Satisfied score 3 with a percentage value of 41%-60%, Unsatisfied score 2 with a percentage value of

21%-40% and very dissatisfied score 1 with a percentage value of 0%-20%. The Likert scale is used to indicate the degree of agreement or disagreement with each statement relating to the object being assessed. The original form of the Likert scale has five categories. When ranked, the order will start from *strongly disagree* to *strongly agree*." [13]

2.4 Data Processing

The data that has been collected is grouped based on each group of test variables, which will then be presented in the form of quantitative data in the form of numbers, diagrams or graphs, and percentages to describe the level of patient satisfaction with pharmaceutical services at Clinic X, and Clinic Y.

III. RESULTS AND DISCUSSION

3.1 Validity Test

Validity testing refers to the adequacy and appropriateness of interpretations made from assessments. Validity is an evaluative policy integrated with how far empirical facts and theoretical considerations support the accuracy and appropriateness of conclusions and actions based on test scores or instruments. Validity aims to demonstrate the support of empirical facts and theoretical considerations for the interpretation of test scores about measurement accuracy [15].

3.2 Content Validity

To ensure the reliability and validity of the questionnaire used in this study, a two-stage validity test was conducted. The first stage was a content validity test involving the participation of three experts, 1 linguist, and 2 pharmacy experts. The experts gave a quantitative assessment of each questionnaire statement item using a 4-point scale (*Not relevant, Moderately relevant, Relevant, Very relevant*). Analysis was conducted using the *Content Validity Index* (CVI) method to determine the validity and feasibility of each statement item to be tested on patients. The validity test results show that in the *Responsiveness* section, 8 statement items were declared valid with an I-CVI value of 1.00. In the *Assurance* section, 7 statement items were declared valid with an I-CVI value of 0.95. In the *Tangible* and *Empathy* section, there are 8 statement items declared valid with an I-CVI value of 1.00. The *Reliability* section as a whole statement is declared valid with an I-CVI value of 1.00. The results of this content validity test will be the basis for ensuring the validity and reliability of the questionnaire used in this study. Thus, it can be ensured that the questionnaire has been carefully and accurately designed to collect data from patients so that the research results can be relied upon in providing recommendations or a deeper understanding of the topic under study.

3.3 Construct Validity

The construct validity test was carried out by limiting the error to 5% and tested on 30 samples outside the main test sample, where 15 samples were taken from Clinic X and 15 other samples were taken from Clinic Y. Furthermore, the data was processed using the SPSS 25 program. By using 30 test samples, the *r*-table value was obtained as 0.361. The construct validity test is carried out using the *Pearson Product Moment* method, if the value of the statement item exceeds the *r* table value of 0.361, then the statement item can be declared valid, and vice versa if the value of the statement item does not exceed *r* table 0.361 then the statement item is considered invalid. Based on the results of the construct validity test carried out, it is stated that all statement items on the 5 dimensions of assessment (*Responsiveness, Assurance, Tangible, Empathy, Reliability*) are declared valid overall on all statement items.

3.4 Reliability Test

The reliability test is related to measurement error. The greater the reliability of an instrument, the smaller the measurement error, and vice versa [14]. This researcher uses the *Cronbach's Alpha* test as a reliability test method. Calculations using *Cronbach's Alpha* formula are accepted, if the calculation of $r_{count} > r_{table} 5\%$. The reliability value is good if the *Cronbach's Alpha* value is ≥ 0.6 [9]. From the reliability test results, it is known that in each assessment dimension. *Responsiveness, Assurance, Tangible, Empathy, and Reliability* are reliable with $r_{count} > r_{table} 5\%$, where the *Cronbach Alpha* value in each assessment dimension is greater than ≥ 0.6

A. Age

In this study, out of 380 respondents, followed by respondents aged 17-27 years 11.1% (42 respondents), respondents aged 28-38 years 30.5% (116 respondents), age 39-49 years old as much as 33.9% (129 respondents), and age >49 as much as 24% (93 respondents). According to Olson and Peter, different age groups have different behaviors. In adulthood, individuals tend to have an optimal and independent way of

thinking and making decisions (Ruditya, 2015)[15]. Age also affects the development of a person's attention span and mindset. In general, the older a person is, the better their mental development process tends to be." [16].

B. Gender

From the data on patient age characteristics, it is known that of the 380 respondents who participated in the data collection process, 46.1% were male respondents and 53.9% were female respondents. There is no difference between male and female gender in terms of receiving pharmaceutical services [2]. In general, women are more concerned about their health conditions, while men often do not care about health and underestimate the condition of their bodies [17]. The use of health services by women is higher than that of men because women have a greater incidence and risk of disease compared to men. [15]

C. Education

From the table above, it can be seen that respondents with junior high school education level were 2% (8 respondents), high school as much as 46.6% (117 respondents), and college as much as 51.3% (195 respondents). The level of education is closely related to knowledge. In general, individuals who have higher education have better knowledge in receiving information compared to individuals who have low education, a person's education also affects their knowledge about the level of community satisfaction with the facilities used. On the other hand, individuals with higher education tend to have a critical attitude in accepting the level of satisfaction or receiving services that do not by their expectations [18]. The education experienced by the patient also affects the way the patient thinks and acts, including views, understanding of information, level of knowledge, influence, attitude, and interest of patients in choosing healthcare facilities that can meet their expectations [2]. Differences in education levels also impact the way individuals respond to a problem and their ability to receive messages, which is easier for individuals with higher education [20]. Knowledge can form certain beliefs that influence individual behavior by these beliefs. With good health knowledge, it is expected to increase public awareness of the importance of health [20]. The level of education also affects a person's ability to absorb and understand the knowledge gained. In general, the higher a person's education, the better their knowledge [16].

D. Income Level

Based on the data obtained, people with income levels <2 million were 18.2% (69 respondents), 2-5 million were 60% (228 respondents), and >5 million were 21% (83 respondents). The patient's income level will affect the patient's purchasing power. The higher the patient's income, the higher the purchasing power. Patients who have high income have no problem with purchasing their medicine but patients who have low income levels will sacrifice other budgets to fulfill the purchase of these drugs [2].

E. Jobs

From the data on the characteristics of respondents based on occupation, it is known that the employment level of the Pariaman community has a percentage as students 7.1% (27 respondents), self-employed as much as 28.4% (108 respondents), civil servants as much as 15% (57 respondents), retirees as much as 12.4% (47 respondents), housewives 19.2% (73 respondents), others 17.9% (68 respondents). Employment influences the level of patient satisfaction with the health services they receive because individuals who work tend to have higher expectations than those who do not work. employment is also related to a person's income, which can affect their behavior in determining the type of health services they want. People who have jobs with higher positions tend to have higher expectations, especially in terms of pharmaceutical facilities and infrastructure [20].

F. Number of Visits

Based on the data obtained, respondent visits with 1-3 visits 11.3% (43 respondents), 3-5 visits 26.3% (100 respondents), and > 5 visits 62.4% (237 respondents), the number of patient visits to a service provider facility will greatly affect the patient's assessment of the service facility (Aryani, 2015) [2]. Patient satisfaction is a major factor and is a measure of success as a result of services provided to customers which has an impact on the number of patient visits increasing, and patients who are satisfied with the service tend to return [21].

Visits that Repetition can be an indicator of customer loyalty, as well as forming a favorable word-of-mouth recommendation [22].

G. Analysis of Patient Satisfaction Level Based on Assessment Dimensions

This study uses the five dimensions of SERVQUAL (Wardhani, 2006)[10], namely *Tangibles* (Physical

Evidence), *Reliability*, *Responsiveness*, *Empathy*, and *Assurance*, as measurement criteria parameters (dependent variables) to measure the level of patient satisfaction with the service. Measurement of the level of patient satisfaction is carried out using a Likert scale from 1 to 5, which includes the categories: very dissatisfied, dissatisfied, moderately satisfied, satisfied, and very satisfied. The level of patient satisfaction was evaluated based on their assessment of each assessment dimension (*Tangibles*, *Reliability*, *Responsiveness*, *Empathy*, *Assurance*). Based on the assessment of the level of patient satisfaction with pharmaceutical services from each of these assessment dimensions, the percentage (%) of the level of satisfaction at each clinic was obtained as follows:

1. Clinic X

Patient Satisfaction Level of Clinic X Based on 5 Dimensions of Measurement

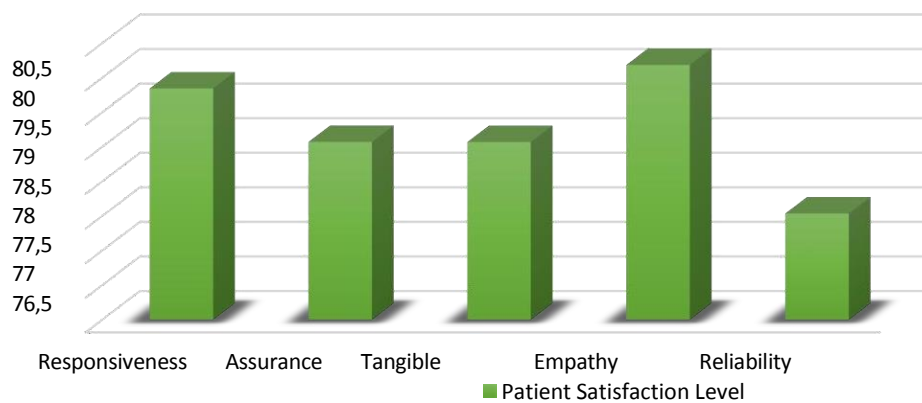


Figure 1: Level of patient satisfaction with pharmaceutical services at Klinik X Pariaman (%)

From the data analysis of the percentage level of satisfaction with pharmaceutical services in Figure 1, it can be seen that the average level of satisfaction in each dimension. *Responsiveness* is 79.85%, and a satisfaction level of almost 80% indicates that Clinic X is quite responsive in providing services to patients. However, it is possible to improve responsiveness in responding to patient requests and needs to achieve a higher level of satisfaction. Clinic X can improve responsiveness in responding to patient requests and needs. Shortening the response time to patient questions or requests will increase satisfaction levels and give a better impression of service. *Assurance* 79.07%. The satisfaction rate of 79.07% indicates that this clinic has a good level of trust from patients towards the pharmaceutical services provided. Providing confidence and strengthening communication with patients about the quality of services provided will help increase the level of trust or *assurance*. Explaining the service process in more detail and promoting transparency in providing information will help patients feel more trust and confidence in the clinic. *Tangibles* (Physical Evidence) 79.07%. Indicates that aspects of physical evidence such as facilities and clinic appearance are sufficient. However, it is still necessary to evaluate to ensure that the physical evidence provided is up to patient expectations. Performing regular care and maintenance on facilities and physical evidence (*Tangibles*) will improve the impression of professionalism and quality of the clinic. Ensure that facilities and equipment are always in good condition and provide comfort for patients. *Empathy* is 80.19%. Satisfaction above 80% indicates that Clinic X gives good attention and care to the needs and feelings of patients. This can be the clinic's strength in building good relationships with patients. Organizing training for clinic staff in developing empathy and a caring attitude toward patients will help improve the *Empathy* dimension. Ensuring patients feel heard and understood will provide a more satisfying service experience. *Reliability* is 78.04%. A satisfaction level slightly below 80% indicates that there is potential to improve consistency and service reliability. The clinic needs to evaluate its operational processes to ensure more reliable services. Consistency in providing good service and avoiding uncertainty will help improve patient satisfaction levels reliable services. Consistency in providing good service and avoiding uncertainty will help improve patient satisfaction levels.

2. Clinic Y

Patient Satisfaction Level of Clinic Y Based on 5 Dimensions of Measurement (%)

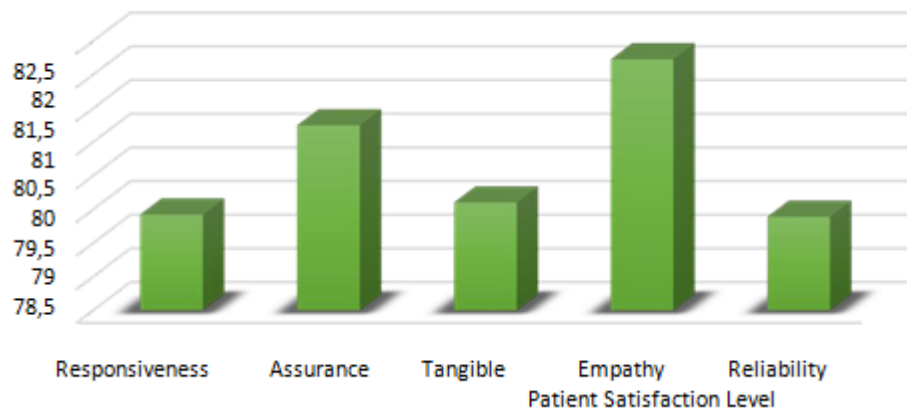


Figure 2: Level of patient satisfaction with pharmaceutical services at Klinik Y Pariaman (%)

From Figure 2, we can see that Responsiveness is 79.93%. With a satisfaction rate of almost 80%, Clinic Y shows responsiveness in responding to patient needs. It remains necessary to ensure that this level of responsiveness is maintained to meet evolving patient expectations, maintaining a good level of responsiveness in responding to patient requests and needs and providing prompt and appropriate attention will help maintain patient satisfaction levels. *Assurance* 81.25%. The satisfaction level of more than 80% indicates that Clinic Y has succeeded in providing confidence and assurance in service quality. This is the clinic's strength to maintain patient trust. Continue to develop good communication with patients and ensure staff provides clear and accurate information. Good communication will strengthen the *Assurance* dimension and increase patient trust in the clinic. *Tangibles* (Physical Evidence) 80.10%. With a satisfaction rate above 80%, this clinic has provided adequate physical evidence to support patient comfort. Continuing to pay attention to and improve aspects of physical evidence can help maintain this level of satisfaction. The clinic can continue to improve and enhance the facilities and physical evidence provided to ensure patient comfort and safety. A comfortable and friendly environment will create a positive experience for patients. *Empathy* is 82.23%. Satisfaction above 80% indicates that Clinic Y has succeeded in providing empathetic and caring services to patients' needs and feelings. Focusing on this aspect can help maintain good relationships with patients. Promoting an empathetic and caring attitude in service will help maintain a high *Empathy* dimension. The clinic needs to pay special attention to staff training to develop the ability to empathize in interacting with patients. *Reliability* is 79.89%. The satisfaction level is almost 80%, but there is still an opportunity to improve the consistency and service reliability. Evaluating and improving the clinic's operational processes will help improve service reliability. Consistency and reliability will give patients confidence that they will always receive good service.

IV. CONCLUSIONS

Based on the results of the analysis of each assessment dimension (*Responsiveness*, *Assurance*, *Tangible*, *Empathy*, and *Reliability*) univariately, the percentage (%) level of patient satisfaction with pharmaceutical services perceived based on each assessment dimension can be found, which is as follows: Clinic X shows that the aspects of empathy (*Empathy*) and responsiveness (*Responsiveness*) have become the main strengths, with satisfaction levels reaching 80.19% and 79.85% respectively. However, there is still room for improvement, especially in the dimensions of physical evidence (*Tangible*), assurance (*Assurance*) 79.07% and reliability (*Reliability*) 78.04% respectively. Recommendations resulting from the analysis of this data indicate the need for improvement in reliability, and maintaining consistency in the quality of pharmaceutical services, both in terms of physical evidence and service quality assurance. Klinik Y managed to achieve a positive level of satisfaction. In particular, the dimensions of *Empathy* (82.23%), *Tangible* (80.1%), and *Assurance* (81.25%) have been the main drivers in providing satisfactory service experience for patients. However, recommendations to maintain responsiveness (79.92%), improve service reliability (79.89%), and strengthen communication aspects remain relevant in achieving service excellence.

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