THE EFFECT OF CLARITY OF INFORMATION AND COMFORT OF WAITING ROOM ON SATISFACTION WITH DRUG SERVICE THROUGH PERCEPTION OF WAITING TIME

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Abstract: This study was aimed to examine the influence of clarity of waiting time information and the comfort of waiting room towardssatisfaction through waiting time perception of drug services. Chosen observational analytical study by cross-sectional study was used as methods in this study. Sampling technique used in this study was purposive sampling. 120 respondents were chosen as study sample among all of the outpatients out of pocket which waiting for drug services on March - April 2017. Path analysis was used as data analysis method. Study result showed that clarity of waiting time information and the comfort of waiting room had a positive and significant influence on waiting time perception and satisfaction awaiting drug services. As of intervening variable, waiting time perception was contributed increasing influence clarity of waiting time information and the comfort of waiting room towardssatisfaction with drug services. The most predominant variable in constructing satisfaction with drug servicesthrough waiting time perception was the comfort of the waiting room.

Keywords: clarity of waiting time information, the comfort of the waiting room, waiting time perception, satisfaction with drug services.

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INTRODUCTION

Health services including pharmaceutical services are currently competing tightly. Customers have a strong bargaining position in choosing a pharmaceutical service to use;they do not only consider the product, but also many things that impact on patient satisfaction. Redeeming drug prescription means that customer has to wait. Long queue and long waiting time have a negative effect on customer perception and satisfaction (Nosek andWilson, 2001). Afolabi and Erhun (2003) stated that patient satisfaction with pharmaceutical service is greatly influenced by satisfaction with waiting time. Long waiting time implies pharmaceutical inefficiencies and leads to patient dissatisfaction and bad image of the hospital providing poor service (Anderson, Camacho and Balkrishnan, 2007).

One of the complaints raised by customers in 2016 on outpatient services is the length of waiting time for drug services at Outpatient Pharmacy

Installation (IFRJ). The customer satisfaction survey at IFRJ in 2016 found that the satisfaction level on the aspect of the speed of drug service was 56%, which is considered below the established standard of > 75%. The comfort of the waiting room is also considered to be less satisfactory for customers, with a satisfaction rate of 61%. Another thing customers complain about is the lack of clarity of information on the length of waiting time for drug services. Customers perceive that waitingis an activity without certainty, so customers feel that the waiting time is longer than the actual; it impacts on the low level of customer satisfaction.

IFRJ determines the waiting time for a non-concoction drug of 15 minutes at most and the waiting time for concoction drug of 20 minutes at most. This target is purposely made under the target Minimum Service Standards (SPM) in accordance with the Minister of Health Decree No.129 of 2008 thatthe waiting time for non-concoction drugs is 30 minutes at most and the waiting time for concoction drugs is 60 minutes at most. The average waiting time for non-concoction drugs in August - December 2016 was 75%. Similarly, the average waiting time for drug concurrency is 69%. It can be said that the achievement of drug service waiting time both for concoction and non-concoction drug is mostly in accordance with the standard of quality indicators set by IFRJ. However, there is a gap between expectations and customer perceptions of actual drug service waiting times. Customers perceive that the waiting time for drug service is not as they expected. This study aims to examine the effect of clarity of waiting time information and the comfort of the waiting room to the satisfaction with drug services through the perception of waiting time.

METHOD

This research is an explanatory quantitative research. The type of this research is an observational analytical study with a cross sectional design approach. The research location was at IFRJ of hospitals in March - April 2017. Research population taken in this study was customers waiting for drug services at IFRJ. The sample size was 120 respondents takenusing purposive sampling method. The sample mustbeabove 18 years old have and general customer status. The independent variables of this research were clarity of waiting time information and comfort of the waiting room. The dependent variable was the satisfaction with drug service.There is intervening variable in this study, namely perception of waiting time. The research instrument was in the form of the questionnaire using "*Likert* scale" to measure the respondents' answers, ranging from 1 – 5. Previously,the research instrument has been tested for its validity and reliability. Data analysis used was path analysis.

RESULTS

Description of Customer Characteristics

Characteristics of customersshow that the ratio of the number of male and female customersis almost equal: female (52.5%) and male (47.5%). There is no significant difference between male and female in making decisions to use health services. The majority of customers using the drug services are young adults, 18-40 years old (53.3%).The education level ofthe most dominated customersis diploma or bachelor's degree (90%). The majority of customerswork as private employees (32.5%) or civil servants (17.5%). Housewives (12.5%) and students (8.3%) are a fraction of the customers who do not work formally. On average,the customers have jobs and fixed incomes; they can meet their health needs. The complete distribution of customer characteristics is presented in Table 1.

Results of Data Analysis

The result of path analysis is reflected as path coefficient. The results of path analysis can be seen in Table 2.

Table 1 Distribution of Customer Characteristics

Customer Characteristics		Frequency (F)	Percentage (%)
Sex	Male	57	52.5
	Female	63	47.5
Age	Young adults: 18-40 years old	64	53.3
	Mature adults: 40-60 years old	45	37.5
	Advanced adults >60 years old	11	9.2
Education Level	Primary education: Elementary School and Junior High School	3	2.5
	Secondary education: SMA	9	7.5
	Higher education: Academy/ PT	108	90
Occupation	College students/ unemployed	10	8.3
	Private employees	39	32.5
	Civil servants	21	17.5
	Entrepreneurs	37	30.8
	Housewives	15	12.5

Source: Processed primary data, 2017

Tabel 2 Results of Path Analysis

Dependent variable	Independent variable	Coefficient β	t count	p-*value*	Note
Perception of waiting time (Z)	Clarity of waiting time information (X_1)	0.219	2.524	0.013	Significant
	The comfort of the waiting room (X_2)	0.450	5.174	0.000	Significant
Satisfaction with drug services (Y)	Clarity of waiting time information (X_1)	0.227	2.616	0.010	Significant
	The comfort of the waiting room (X_2)	0.390	4.045	0.000	Significant
	Perception of waiting time (Z)	0.131	2.396	0.016	Significant

Source: Processed primary data, 2017

The results of path analysis using correlation coefficient are illustrated as path diagram as in Figure 1.

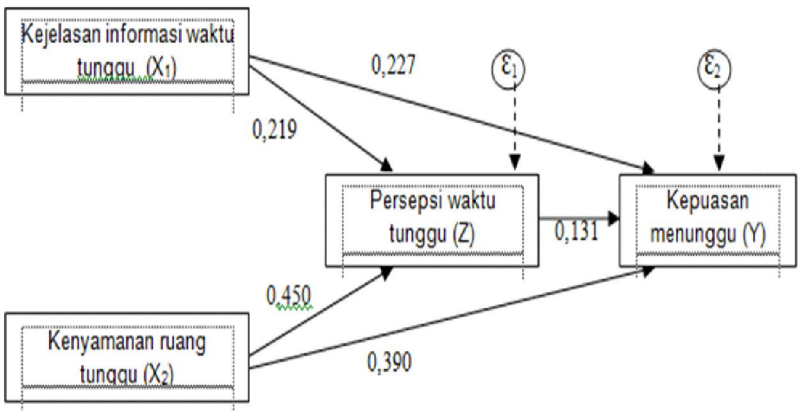

Figure 1 Path Diagram

Based on the path coefficient, regression equations that can be made are as follows:

$Z = 0.219X_1 + 0.450X_2 + \varepsilon_1$

$Y = 10.884 + 0.227X_1 + 0.390X_2 + 0.131Z + \varepsilon_2$

Note:

X1 = Clarity of waiting time information; X2 = Comfort of waiting room; Z = Perception of waiting time; Y = Satisfaction with waiting time; ε_1 and ε_2 = Residual

Results of Hypothesis Testing

The first hypothesis (H1) of this study was accepted. The effect of the clarity of waiting time information on the perception of waiting time can be formulated in the path equation, i.e. $Z = 0.219\ X_1 + \varepsilon_1$. Since p-value was smaller than α (0.013 <0.05), then H_0 is rejected. The path coefficient was positive, so it can be concluded that clarity of waiting time information (X1) has a significant positive effect on the perception of waiting time (Z).

The result of second hypothesis testing (H2) of this research showed the positive influence of clarity of waiting time information (X_1) to satisfaction with waiting time for drug service (Y), with a coefficient value of 0.227. The path equation was formulated with $Y = 0.227\ X_1 + \varepsilon_2$. The result of path analysis on ρ-value 0.010 was significant. Since ñ-value was less than α (0.010 <0.05), then $H_0$was rejected. Thus, the second hypothesis (H_2) was accepted.

The third hypothesis (H3) of this study was accepted. The path equation was formulated with $Y = 0.227\ X_1 + 0.131\ Z + \varepsilon_2$. The result of path analysis found the influence of the clarity of waiting time information towards satisfaction with waiting time for drug service through a perception of waiting time. The coefficient value of indirect effect was obtained by multiplying the direct effect of clarity of waiting time information (X_1) and the waiting time (Z) by the satisfaction with the length of waiting time of 0,029. Since the coefficient of direct influence was significant, the indirect coefficient of influence was also significant. The positive direction of coefficient means that the clarity of waiting time information has a significant positive effect on the satisfaction with waiting time through the perception of drug service waiting time.

The result of the fourth hypothesis test (H4) showed that the comfort of the waiting room (X_2) had a positive influence on the perception of waiting time (Z) with the coefficient of 0.450 and the significance of ρ-value of 0.000. The path equation was formulated with $Z = 0.450\ X_2 + \varepsilon_1$. Since ñ-value was smaller than α (0,000 <0.05), then $H_0$was rejected. Thus, the fourth hypothesis (H4) was accepted. There was a significant positive influence on the comfort of the waiting room (X2) on the perception of waiting time (Z).

The result of path analysis (X_2) on satisfaction with waiting time for drug service (Y) obtained path coefficient value of 0.390 and ρ-value of 0.000. Path equation was formulated with $Y = 0.390\ X_2 + \varepsilon_2$. Since ρ-value was smaller than á (0,000 <0.05), then $H_0$was rejected. Thus, the comfort of the waiting room (X2) has a significant positive influence on the satisfaction withthe length of waiting time for drug services (Y). The fifth hypothesis (H5) of this study was accepted.

The sixth hypothesis (H6) of this study was accepted. Path equation was formulated with $Y = 0.390\ X_2 + 0.131\ Z + \varepsilon_2$. The result of path analysis found the influence of waiting room comfort towards the satisfaction with the length of waiting time for drug service through a perception of waiting time. The result of path analysis obtained coefficient value of indirect effect of 0.051. The coefficient value of indirect effect was obtained by multiplying the direct influence of the comfort of the waiting room (X_2) and the perception of waiting time (Z) bythe satisfaction with waiting time for drug service. Because the coefficient of direct influence was significant, the coefficient of indirect effect was significant as well. The positive direction of the coefficient means that the comfort of the waiting room had a significant positive effect on satisfaction with the length of waiting time for drug service through the perception of waiting time.

The results of the seventh hypothesis testing (H7) showed that the waiting time (Z) had a positive influence on the satisfaction with the length of

waiting time for drug service (Y), with the coefficient of 0.131 and the significance value of 0,016. The path equation was formulated with $Y = 0.131 Z + \varepsilon_2$. Since the ñ-value was smaller than α (0.016 <0.05), then $H_0$was rejected. Thus, the seventh hypothesis (H7) was accepted. There was a significant positive influence between the perceptions of waiting time (Z) on the satisfaction with the length of waiting time for drug service (Y).

Analysis of Direct and Indirect Effect

The details of the causality model between variables can be seen in Table 3. The perception of waiting time (Z) was directly influenced by the clarity of waiting time information (X_1) of 21.9% and comfort of the waiting room (X_2) by 45%, and the rest of 33.1 % influenced by other variables outside this study. Other variables are a conceptual model developed by the previous research. Research which was conducted by Antonides (2000) stated that the objective waiting time has a significant effect on the perception of waiting time. Music has a positive influence on the perceptions of waiting time, as has been investigated by Hui and Chebat (1997).

Satisfaction with waiting time for drug service (Y) was directly influenced by the clarity of waiting time information (X_1) amounted to 22.7% and the comfort of the waiting room (X_2) amounted to 39%. Satisfaction with waiting time for drug service was also influenced directly by the perception of waiting time (Z) of 13.1%, and the rest of 25.2% was influenced by other variables outside the study. These variables have been studied previously and have a significant influence on the satisfaction of waiting time for drug service such as objective waiting time, activities are done while waiting, and the design of queue system.The effect of clarity of waiting time information (X_1) on satisfaction with waiting time for drug service (Y) through a perception of waiting time (Z) of 25.6% had a direct effect of 22.7% and indirect effect of 2.9%. The total value of the effect of the clarity of waiting time information to the waiting satisfaction through the perception of waiting time of 0.256 was obtained from the sum of indirect coefficients and the direct coefficients of clarity of waiting time information (X_1) to the satisfaction of waiting time for drug service (Y). It can be said that the perception of waiting time (Z) had a mediating effect increasing the effect of clarity of waiting time information (X_1) on satisfaction with waiting time for drug service (Y).

The effect of waiting room comfort (X_2) on the satisfaction with waiting time for drug service (Y) through a perception of waiting time (Z) was 44.1%, with a direct effect of 39% and indirect effect of 5.1%. The total value of the influence of

Table 3 Causality Effect between Variables

Dependent Variable	Independent Variable	Causal Effect			*P Value*
		Direct	Indirect	Total	
Perception of waiting time	Clarity of waiting time information	0.219	-	0.219	0.013
Satisfaction with waiting time		0.227	-	0.227	0.010
Satisfaction with waiting time through the perception of waiting time		0.227	0.029	0.256	0.010
Perception of waiting time	The comfort of the waiting room	0.450	-	0.450	0.000
Satisfaction with waiting time		0.390	-	0.390	0.000
Satisfaction with waiting time through the perception of waiting time		0.390	0.051	0.441	0.000
Satisfaction with waiting time	Perception of waiting time	0.131	-	0.131	0.016

Source: Processed primary data, 2017

waiting room comfort on the satisfaction with waiting time for drug service through the perception of waiting time was obtained from the sum of indirect coefficients and the direct coefficients of waiting room comfort (X_2) on the satisfaction with waiting time for drug service (Y) amounted to 0.441. It can be said that the perception of waiting time (Z) has a mediating effect increasing the effect of waiting room comfort (X_2) on the satisfaction with waiting time for drug service (Y).

The variable that has the most dominant effect on the perception of waiting time (Z) was the comfort of the waiting room (X_2) amounted to 45%. The comfort of the waiting room (X_2) also showed the strongest effect on satisfaction withthe waiting time for drug service (Y) amounted to 39%. The comfort of the waiting room (X_2) showed the strongest influence on the satisfaction withthe waiting time for drug service (Y) through a perception of waiting time (Z) amounted to 5.1%.

DISCUSSIONS

Respondent Characteristics

There is no significant difference between men and women in making decisions to use health care services. Most respondents aged 18-40 years old; this range of age is included in early young according to Hurlock (1999). Productive age and advanced age use more health facilities than other age groups (Wirth et al., 2011).

The education level of the majority of respondents is diploma or bachelor's degree. Wicaksono (2013) stated that high education level will affect the knowledge, comprehension, information, attitudes, and interests of a choice. The level of education affects one's understanding of the information received (Notoatmodjo, 2003). Hospital management packs service information through brochures/leaflets, websites, banners, customer service "*Halo Jember Clinic*", health rubric at *Radar Jember*, on air with *Radio Republik Indonesia* (RRI) and Prosalina FM. Information media are provided to the public in the hope that they understand the services provided by the hospital and it can influence customer interests and decisions in utilizing health services.

Most respondents work as employees of both government and private agencies. Jacobalis (2002) states that occupation/job affects income as well as decision making. Hospitals seize market opportunities by collaborating with partners from companies or private agencies and commercial insurance.

Effect of Clarity of Waiting Time Information on Perception of Waiting Time

The clarity of waiting time information had a positive and significant effect on the perception of waiting time. This means that the clearer the information received, the better the customer perception of the waiting time for the drug service and vice versa. It supports the finding of a research which was conducted by Antonides et al. (2000) that the element that affects the perception and interest of the customer while waiting is the clarity of waiting time information. Bielen and Demoulin (2007) also stated that there is a significant influence between the information of drug service delay with a perception of waiting time. Clarity of waiting time information at IFRJ of the hospital was in the moderate category.This indicates that the waiting time information for drug service has not been fully in line with customer expectations. Customers sometimes still asked pharmacists about how long it would finish. The indicator of the clarity of waiting time information with the lowest average value was the provision of information about the estimated waiting time. Customers have not been fully aware of how long it would take to wait for the drug service. This led to poor customer perceptions and an impact on low satisfaction with waiting timefor drug services. Waiting is considered a waste that causes economic losses and affects customers psychologically. This situation is in accordance with the hospital customers that the majority of them are employees so that the management of time becomes a serious concern.

Effect of Clarity of Waiting Time Information on Satisfaction with Waiting Time for Drug Service

The clarity of waiting time information had a positive and significant effect on the satisfaction with

waiting time for drug service. This means that the clearer the information received by customers, the more satisfied customers in waiting for drug services, and vice versa. This result supports the theory of Antonides (2000), stating that the information of estimated waiting time has a significant effect on increasing satisfaction with waiting time. Providing waiting time information can reduce uncertainty and provide a positive effect on cognitive (Hui and Tse, 1996). The provision of information on the length of waiting time for drug services was still considerednot optimum by the customers, so it impacted less on the satisfaction with waiting time. It needs to be the management's concern to manage the waiting time information and provide guarantees against waiting time according to customer expectations.

Effect of Clarity of Waiting Time Information on Satisfaction with Waiting Time through Perception of Waiting Time

The clarity of waiting time information affected the satisfaction with waiting time through the perception of waiting time both directly or indirectly. The perception of waiting time contributed to maximizing the effect of clarity of waiting time information on the satisfaction with waiting time for drug services. In other words, the clarity of waiting time information will be perceived as a positive thing that affects the decision and the customer's assessment of the waiting time. Bielen and Demoulin (2007) suggest that there is an influence between information on service delay and waiting time perceptions on satisfaction with waiting time. IFRJ customers were less satisfied with waiting time due to the lack of clarity of waiting time information. The lack of clarity of waiting time information affects the affection or perception of the customer; thus, it impacts the dissatisfaction with waiting time for drug services (Afolabi and Ola-Olorun, 2013).

Effect of the Comfort of Waiting Room on the Perception of Waiting Time

The comfort of waiting room had a positive and significant effect on the perception of waiting time. This means that the more comfortable waiting room in IFRJ, the better the customer perception about the waiting time for the drug services, and vice versa. This supports the previous research conducted by Pruyn and Smidts (1998) stating that the comfort of the waiting room affects the perception of waiting time. Baker and Cameron (1996) stated that environmental factors have an effect on the perception of the length of waiting time and satisfaction with waiting time. Indicator with the lowest average was the availability of facilities in IFRJ waiting room which can distract customers' attention from waiting such as television. The itemwhich was consideredlow by the customers was the ease of accessing the television. The existence of distractions during waiting for drug servicewas considered more effective in controlling customer perceptions through effective responses by diverting their attention and improving customer convenience (Borges, Herter and Chebat, 2015). Mustapha et al. (2015) revealed that the existence of facilities which can distract customers' attention from waiting have a significant effect on customer satisfaction. Hospital management needs to think about alternative means of distraction other than television that can be utilized by customers during the waiting process for drug service at IFRJ. Diversion means might be a product that is pampering and pleasing the customers.

Effect of Comfort of Waiting Room on the Satisfaction with Waiting Time for Drug Service

The comfort of waiting room had a significant effect on the satisfaction with waiting time. This means that the more comfortable the waiting room, the more satisfied the customers while waiting for drug services. This study supports Bielen (2007), which states that there is a significant influence between of the comfort of waiting room on satisfaction with waiting time. In their research, Pruyn and Smidts (1998) also state that the comfort of waiting room environment affects the satisfaction with waiting time. The comfort ofthe waiting room at IFRJ of the hospitalwas still considered bad by the customer. One aspect that is still considered less attractive and satisfying for customers was the adequacy of the seat. There have been no physical design changes and the addition of seats in the wait-

ing room to meet the capacity of the IFRJ's waiting room. The lack of seats at the waiting room of IFRJ mainly occurred during peak hours between 09.00 and 12.00 as well as 19.00 and 21.00. On the other hand, outpatient visits, especially in specialists, are increasing every year. Certainly, the waiting room is getting crowded and full of visitors queuing to take the drugs.

Effect of the Comfort of Waiting Room on Satisfaction with Waiting Time through Perception of Waiting Time

The comfort of waiting room had a significant effect, either directly or indirectly, on the satisfaction with waiting time through the perception of waiting time. This means that the more comfortable the waiting room, the better the customer perception of waiting time, which increases customer satisfaction in waiting for drug services. The perception of waiting time contributed to the effect of the comfort of waiting room on the satisfaction with waiting time for drug services. The comfort of waiting room affected the satisfaction with waiting time through the perception of waiting time on the cognitive and affective aspects (Hul, Dube and Chebat, 1997). The dimension of waiting room comfort gives the most dominant contribution to the perception of waiting time and satisfaction with waiting time for drug services. This is in line with the efforts made by management to always maintain cleanliness and neatness throughout the hospital environment.

Effect of the Perception of Waiting Time on the Satisfaction with Waiting Time for Drug Service

Perception of waiting time has a positive and significant effect on the satisfaction with waiting time for drug services. This means that the longer customers are waiting, the lower their level of satisfaction with the waiting time, and vice versa. This supports the theory of Pruyn and Smidts (1998) that perception of waiting time affects the assessment of waiting time. The variable that had the strongest influence on the perception of waiting time was the comfort of the waiting room. Similarly, the comfort of waiting room gave a dominanteffect on satisfaction with waiting time for drug services. The independent variable that had the strongest influence on satisfaction with waiting time for drug service through a perception of waiting time was the comfort of the waiting room. Hospital management needs to think about the effort to increase the satisfaction with waiting time by managing the customer perception of the waiting time for drug service. Improving the waiting room environment at IFRJ is a key alternative for better perceptions and higher customer ratings of waiting time from drug service.

Limitations of the Study

This study was limited by time, so the data obtained was an interpretation of the sampling of a particular object. The sampling technique used in this study was purposive sampling, so the results of this study only captured a small phenomenon based on existing empirical data. This study was limited to one hospital organization only, so the results apply only to the hospital. It might not work in another organization because of the different characteristics of the object and the system. Variables and indicators used were the clarity of waiting time information and the comfort of the waiting room that affect the perception of waiting time and satisfaction with waiting time for drug services. Other factors not investigated in this study have the potential to contribute to the results of this study.

Theoretical and Practical Implications

The results of this study provide empirical support to the theories that have been done in previous research. This research complements previous research by reinforcing the conceptual model theory. The objects and characteristics are also different from the previous research. Variables used in this study were taken from some previous studies. Assumed with different objects, characteristics, and research methods, the results are relatively different. Nevertheless, the results obtained show similar patterns and significant effects. It can be said that the conceptual model of satisfaction with waiting time is already saturated. For further research, it is hoped that other variables can be developed beyond the variables that have been studied.

Hospital management manages potential resources that have not been maximized. An alternative solution includes providing written information about the standard length of waiting time for drug services. The use of queue engine system with visualization of queue sequence makes it easier for customers to predict the waiting time for drug service. There is a need for a facilityto distract customer's attentionfrom waiting for drug services other than television. Offering drug delivery to customer's house at a certain distance also can be an alternative. Registration of outpatients online has an indirect effect on reducing the length of registration queues in outpatients, thus reducing the utilization of seats in the waiting room. Another alternative is by opening a pharmacy counter or depot on the second floor of the polyclinic; it can break the queue density at IFRJ.

CONCLUSIONS AND SUGGESTIONS

Conclusions

- Based on the empirical data, it can be proved that clarity of waiting time information had a positive and significant effect on the perception of waiting time. Provision of information on the estimated waiting time and delays in drug services determined the clarity of information provided to customers. Customers were not fully aware of the length of time required to wait for the drug service. This led to poor perceptions of the long waiting time for drug services.
- Hypothesis testing results proved that the clarity of waiting time information had a positive and significant effect on the satisfaction with waiting time for drug services. Provision of waiting time information can reduce uncertainty and provide a positive cognitive effect so that the evaluation of waiting time also would be better. Satisfaction with waiting time for drug services can be achieved if there is a guarantee thatinformation on waiting time is delivered to the customers.
- Based on the empirical data,it can be proven that the clarity of waiting time information had a positive and significant effect on the satisfaction with waiting time for drug services through a perception of waiting time. Waiting time perceptions contributed to increasing the clarity of waiting time information on satisfaction with waiting time for drug services. Customer's complaints included the lack of clarity of information on the estimated length of waiting time for drug services so that customers perceive a longer waiting time. This had an impact on the low level of customer satisfaction.
- Based on the empirical data, it can be proven that the comfort of waiting room had a positive and significant effect on the perception of waiting time. The cleanliness of the waiting room is a dimension that contributes to the comfort of the waiting room with the highest average value. A dimension with the lowest value was the availability of television as a facility used to distract customer's attention from waiting for drug service in the waiting room. Subscribers could not access television while waiting for drug services in the IFRJ's waiting room.
- The results of hypothesis testing can prove that the comfort of waiting room had a positive and significant effect on satisfaction with waiting time for drug service. The comfort of the waiting room can enhance the positive feelings and tolerance of customers while waiting. The seating adequacy was still considered unsatisfactory while waiting for drug services at IFRJ.
- Based on the empirical data, it can be proven that the comfort of waiting room had a positive and significant effect on the waiting satisfaction through the perception of waiting time. Waiting time perception contributed to increasing the effect of waiting room comfort on waiting satisfaction through cognitive and affective aspects.
- Based on the empirical data, it can be proven that the perception of waiting time had a positive and significant effect on the satisfaction with waiting time for drug services. The satisfaction can be improved by managing customer's perceptions of waiting time for the better.

Suggestions

The results of this study are expected to be an input for hospital management to further improve the quality of service at outpatient pharmacy installation so as to achieve satisfaction and even customer loyalty. This is a long-term strategy to further increase customer visit and interest. Efforts to continually improve customer satisfaction impact on word of mouth (WOM) marketing and increase hospital's revenue. The organization of hospital needs to pay attention to the needs of its customers and create innovative innovations in managing drug service waiting times.

Further research can be done by developing other variables that have not been studied. The qualitative method research on the perception of waiting time and satisfaction with waiting timecan be an alternative to do, so it can more express customer expectation and satisfaction at the hospital.

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