

Facilities and Employee Competence on Patient Waiting Time through Quality of Service at the Outpatient Installation

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Abstract

The quality of health services is the level of health service opportunities, which on the one hand, can cause satisfaction in each patient by the satisfaction of the average population, and on the other hand, the procedures for its implementation by established standards and codes of ethics. Services in the health field will always be needed by the community and will always develop in a better direction. One of the areas of service that is the community need is health. The more advanced the renewal in the field of technology, the more services in the field of health also progress in modern facilities and infrastructure and become more accurate. This research aims to analyze the influence of facilities and employee competencies on patient waiting for lengths through the quality of service at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. The research was designed in the form of survey research. The population in this study were all patients treated at K.H. Hayyung Hospital, Selayar Islands Regency, in 2018. The sample determination was carried out using an accidental sampling technique, with a total sample of 110 respondents from patients treated at the Selayar Islands KH Hayyung Hospital. There are seven hypotheses proposed in this study, and all hypotheses were accepted. The total effect of the facility (X1) on the patient's waiting time (Y2) is the sum of the direct influence plus indirect influence of 0.775. The total influence of employee competence (X2) on patient waiting time (Y2) is the number of direct and indirect influences, 0.781. The total effect of service quality (Y1) on patient waiting time (Y2) is 0.381.

Keywords

Facilities, Employee Competence, Patient Waiting Time, and Quality of service.

1. Introduction

The hospital has a mission to provide quality and affordable health services to the community to improve public health, including having competent human resources, adequate facilities, and fast patient waiting times. The quality of health services is interpreted as the level of health service opportunities. On the one hand, it can cause satisfaction in each patient to the satisfaction of the average population. On the other hand, the procedures for its implementation by the standards and codes of ethics have been established. The more advanced the renewal in the field of technology, the more services in the field of health also progress in modern facilities and infrastructure and become more accurate.

Waiting times are an important component of hospital service and are the first gateway that plays an important role in providing a good first impression for patients. According to the Hospital Minimum Service Standard, the length of waiting time in outpatient installations is from the time the patient registers until served by a doctor (KEPMENKES,

2008). If the waiting time in the registration is long, it will affect the length of the patient's overall medical service time and further affect patient satisfaction. In outpatient services in hospitals, the waiting time is used by patients to get outpatient services from the place of registration until the patient's medical record documents are found. Based on minimum service standards, it is stated that registration service is fast if the waiting time is less than 10 minutes and is called long if the waiting time is more than 10 minutes. Therefore, it is necessary to examine the factors that cause service waiting times in outpatient registration to hope the hospital can make improvement efforts.

The quality of public services can also be seen by managing facilities or infrastructure owned. If the facilities or infrastructure are managed appropriately, quickly, and completely by the needs or demands of the community, it will result in a better quality of service. In addition, the competence factor of employees also affects the quality of service. Tamsah et al. (2021) mentioned that the quality of public services includes aspects of human resource capabilities consisting of competencies, skills, knowledge, and attitudes sought to be improved. It will affect the implementation of their duties, and if the implementation of tasks is carried out more professionally, it will result in a better quality of service.

Based on the initial survey results at the registration counter of K.H. Hayyung Hospital, Selayar Islands Regency, patients need a waiting time starting from the arrival of patients to the registration counter to get medical records from officers takes ± 20 minutes. While based on the minimum service standards set by the Ministry of Health, the time of provision of medical records documents for outpatient services is ≤ 10 minutes (Regulation of the Minister of Health Ri No. 741 / MENKES / PER / VII / 2008).

This research gap research is as revealed in Ilyas et al. (2022) that infrastructure/facilities positively affect the quality of public services. Meanwhile, Tamsan & Yusriadi (2022) concluded that facilities and infrastructure/facilities do not affect the quality of service. Then research by Zacharias et al. (2021), the findings of the results showed that competence has a positive and significant influence on the quality of service. Meanwhile, Rahawarin et al. (2020) concluded that competence has no significant effect on the quality of service. So, the authors are interested in examining the effect of facilities and employee competence on patient waiting time through service quality. Therefore, the author takes the title of "The Effect of Facilities and Employee Competencies on Patient Waiting Length Through Quality of Service at The Outpatient Installation of K.H. Hayyung Hospital Selayar Islands Regency."

2. Literature Review

Human resources are an important part of an organization; its existence largely determines its success in achieving its goals. Organizations filled with quality people are more resistant to various changes and quickly adapt to technological and informational advances. Human resources are employees who are ready, able, and alert to achieving organizational goals (Rebele & St. Pierre, 2019). The quality of human resources can encourage and place themselves in various situations and working conditions, that they are more sensitive to developing technologies, including information technology. The good quality of human resources can encourage the improvement of technological mastery capabilities. This is supported by previous research conducted by (Agytri Wardhatul Khurun, 2019; Fauzan et al., 2019; Noe et al., 2017) concluded that there is a positive and significant influence on the quality of human resources on technology mastery.

The quality of human resources is the level of mastery of various work situations based on knowledge and skills to achieve their work goals. The more a person has quality work, the better the work results, and vice versa. Poor resources reduce the organization's achievements as expected (Kurniawan et al., 2022; Nath et al., 2021; Setianto et al., 2022; Suharyanto et al., 2021; Yusriadi et al., 2019). Someone who has good human resources quality will be more creative at work and happy to find solutions to their problems. As good as the quality of human resources, the more creative work. This is supported by previous research conducted by Sam et al. (2021) concluded that there is a positive and significant influence on the quality of human resources on work creativity. Creativity deals with thinking, finding new opinions and methods, and innovation in their use (Cahaya et al., 2022; Mulyana et al., 2021; Mustafa et al., 2020).

The quality of human resources is the level of ability and willpower that human resources can demonstrate. A person's ability will be seen with quality in his work; the quality of human resources will reflect the best work responsible to him. Related to the performance of public organizations, the quality of public employees becomes determinant in maintaining governance by encouraging good governance in showing the stabilization of government work and quality

of service. Good governance is the main source of benefit in government, benefiting the organization internally and its impact on satisfaction for the community.

3. Methods

3.1 Sample

The sample in this study was patients who visited K.H. Hayyung Hospital Selayar Islands regency during the study, which was determined by nonrandom sampling techniques. The sample in this study was 110 respondents from patients treated at K.H. Hayyung Hospital, Selayar Islands Regency.

3.2 Data Collection Techniques

Data collection is done to get the information needed in achieving research goals. The data needed in this study is data on the influence of facilities and employee competencies on patient waiting time through the quality of service. Data collection in this study was carried out by: Observation: Data collection by observation is carried out at the Outpatient Installation of K.H. Hayyung Hospital Selayar Islands Regency. Interview: data was obtained directly with the patient as a respondent by asking systematic questions. Questionnaire: Data is collected using direct and closed questionnaires. The questions in the question list are created using a Likert scale using five selected variables; each level is scored, ranging from a low level with a score of 1 to the highest level with a 5. In the measurement of these variables using the Likert scale that divides five respondents' answers that start in a row: Strongly Agree (SS) with a score of 5; Agree (S) with a score of 4; Neutral/undecided (N) with a score of 3; Disagree (TS) with a score of 2; Strongly disagree (STS) with a score of 1. Documentation: carried out through a search of documents that have been available at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency, and used as an archive to strengthen the observation results.

3.3. Data Analysis Techniques

Data analysis techniques used in research to be interpretable and easy to understand as follows: Research Instrument Test. The test of research instruments in this study is as follows: Validity Test; The validity test is used to measure the validity or validity. The score of each question item is valid or not, then the statistical criteria are set as follows: If r calculates $> r$ Table and is positive, the variable is valid; If r calculates $< r$ Table, then the variable is invalid; If r calculates $> r$ Table but is marked negative, H_0 will still be rejected, and H_1 is accepted; Reliability Test; Reliability tests can be performed using the help of the SPSS program, which will provide a facility to measure reliability with Cronbach alpha (α) statistical tests. A constructor variable is said to be reliable if it gives a Cronbach Alpha value of > 0.60 .

Descriptive Analysis; The descriptive statistical analysis explains respondents' characteristics, including age, gender, education level, and working life. In addition, descriptive statistical analysis is also used to explain respondents' responses to research variables, including the influence of facilities and employee competence on patient waiting for length through service quality. The decision interval is as follows: 1.00 - 1.80 = very low; 1.81 - 2.60 = Low; 2.61 - 3.40 = medium; 3.41 - 4.20 = Height; 4.21 - 5.00 = Very High

Path Analysis; Path analysis is used to analyze patterns of relationships between variables to know the direct or indirect influence of a set of free variables (exogenous) on bound variables (endogenous). Path Diagram; The path analysis model in this study can be described as follows in Figure 1:

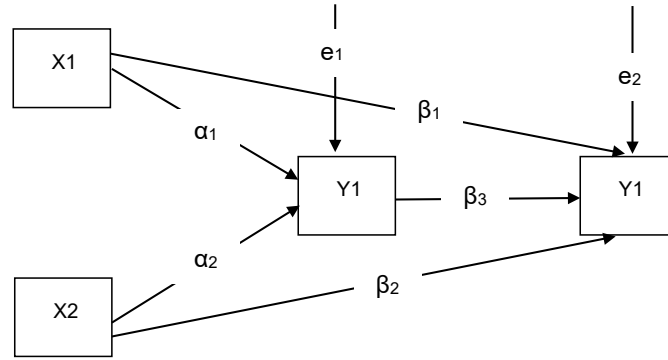


Figure 1. Path Diagram

4. Results

4.1 Partial Testing (Individual) Sub-structure 1

To find out the partial (individual) influence of employee facilities and competencies on the quality of service is presented in Table 1 as follows:

Table 1. Sub-structural Path Analysis Results 1
Coefficients

Type	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	4.306	2.116		2.035	.045
Facilities (X1)	.296	.099	.238	2.990	.004
Employee Competence (X2)	.379	.055	.549	6.903	.000

a. Dependent Variable: Quality of Service (Y1)

Based on Table 1 above, it can be known that the significance value for the facility variable on the quality of service and the significance value for the employee competency variable to the quality of service is less than 0.05. It means that the facility variable (X1) and employee competence (X2) have a positive and significant influence on the quality of service (Y1).

4.2 Determination Coefficient (R Square) Substructure Testing 1

Table 2. Substructure Determination Test Result 1

Model Summary				
Type	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.638a	.407	.395	1.095

a. Predictors: (Constant), Facilities (X1), Employee Competence (X2)

Based on the calculation results obtained, the price of the correlation coefficient with the value of R square of 0.407 (Table 2). The coefficient of determination (R²) price shows that facility determination and employee competence to the quality of service is 40.7%. While the remaining 59.3% is the influence of other factors not included in this model. Meanwhile, the magnitude of the path coefficient for other variables outside the study was $(pYe1) = \sqrt{1 - R^2} = \sqrt{1 - 0.407} = 0.770$.

Based on the results of the above test obtained a path diagram for sub-structure one, which can be described as follows in Figure 2:

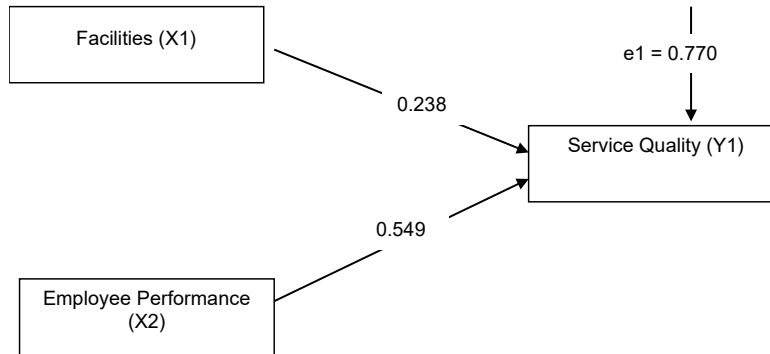


Figure 2 . Substructure Path Diagram 1

4.3 Partial Testing (Individual) Sub-structure 2

Find out the partial (individual) effect of facilities, employee competence, and quality of service on patient waiting time is presented in Table 3 as follows:

Table 3. Substructure Path Analysis Results 2

Type		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	5.222	1.197		4.362	.000
	Facilities (X1)	.285	.057	.342	4.973	.000
	Employee Competence (X2)	.132	.037	.286	3.561	.001
	Quality of Service (Y1)	.255	.056	.381	4.541	.000

a. Dependent Variable: Patient's Waiting Time (Y2)

Based on the Table above, it can be known that the significance value for facility variables to patient waiting for length and employee competency variables to patient waiting for lengths is less than 0.05. It means that facility variables (X1), employee competence (X2), and quality of service (Y1) have a positive and significant influence on patient waiting for length (Y2). Determination correlation price or R square as described in Table 4 below:

Table 4. Substructure Determination Test Result 2

Model Summary				
Type	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.854a	.729	.711	.546

a. Predictors: (Constant), Facilities (X1), Employee Competence (X2), Quality of Service (Y1)

Based on the calculation results obtained, the price of the correlation coefficient with the value of R square of 0.729. The coefficient of determination (R²) price shows that facility determination, employee competence, and quality of service to patient waiting time is 72.9%. While the remaining 27.1% is the influence of other factors not included in this model. Meanwhile, the magnitude of the path coefficient for other variables outside the study was $(pYe2) = \sqrt{1 - R^2} = \sqrt{1 - 0.729} = 0.521$.

Based on the results of the above tests obtained a path diagram for sub-structure two, which can be described as follows Figure 3:

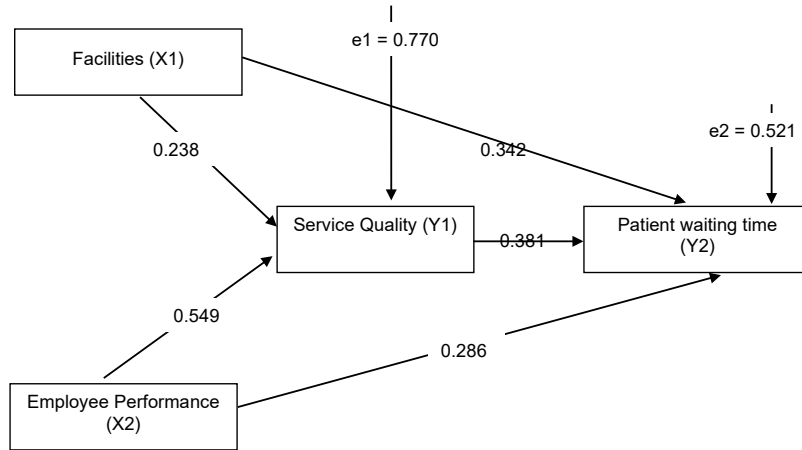


Figure 3. Substructure Path Diagram 2

Based on the preceding, the overall effect of facility variable causality (X1) and employee competence (X2) on patient waiting time (Y2) through the quality of service (Y1) can be described in the structure model as follows:

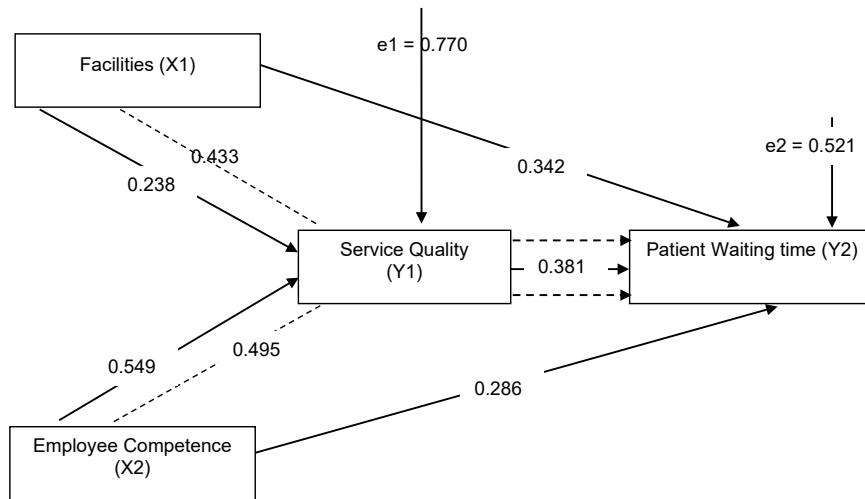


Figure 4. Overall, Path Diagram of Research Structure

Based on Figure 4, diagrams of the overall path of the research structure of the existing causality relationship, can be known as direct, indirect, and total influences. The following are the results of the overall research structure displayed in the form of the following Table 5:

Table 5. Summary of Influence Results

Variable Influence	Confusion line	Coefficient Value
The direct influence of facilities (X1) on service quality (Y1)	X1--> Y1	0.238
The direct influence of employee competence (X2) on service quality (Y1)	X2--> Y1	0.549
The direct effect of facilities (X1) on patient waiting time (Y2)	X1--> Y2	0.342
The direct influence of employee competence (X2) on patient waiting time (Y2)	X2--> Y2	0.286

Variable Influence	Confusion line	Coefficient Value
The direct effect of service quality (Y1) on patient waiting time (Y2)	Y1--> Y2	0.381
The indirect effect of facilities (X1) on patient waiting time (Y2) through the quality of service (Y1)	X1--> Y1--> Y2	0.433
The indirect influence of employee competence (X2) on patient waiting time (Y2) through the quality of service (Y1)	X2--> Y1--> Y2	0.495
Total effect of facilities (X1) on patient waiting time (Y2)	X1--> Y2	$0.342 + 0.433 = 0.775$
The effect of total employee competence (X2) on patient waiting time (Y2)	X2--> Y2	$0.286 + 0.495 = 0.781$
Effect of total quality of service (Y1) on patient waiting time (Y2)	Y1--> Y2	0.381
e1	-	0.770
e2	-	0.521

Source: Attachment Compute Results

5. Discussion

5.1 The Effect of Facilities on Service Quality

This research shows a positive influence of facilities on the quality of service at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. The results of this study are in line with Fatmawati et al. (2021), mentioning that the quality of public services includes aspects of facilities or infrastructure if facilities or infrastructure are managed appropriately, quickly, and completely to the needs or demands of the community. It will result in a better quality of service.

This study also supports the results of previous research from Arham et al. (2021), the conclusion that can be facilities/facilities have a positive effect on the quality of public services. Furthermore, research conducted by Humola et al. (2021), based on the research results, can be concluded that facilities influence/infrastructure on the quality of service. Then the research conducted by Yusriadi & Misnawati (2017) can be concluded that work facilities have a positive and significant effect on service quality.

Managerial implications of the influence of facilities on the quality of service are the conformity between the expected service from the hospital (expected service) with the services received or perceived (perceived service) by patients. By improving the facilities using service stages, the ease of the stages of health services is provided to the community in terms of simplicity of service flow. Then mean it, that is, paramedics are serious in providing services, especially to the consistency of working time by applicable provisions. Skills, namely paramedic officers, have good skills and skills when providing or completing services to the community. Then groups/statuses, namely when the implementation of health services, do not distinguish the class/status of the community served and lastly, affordable, namely the number of costs that the affordable service unit has set by the community in paying.

5.2 Effect of Employee Competence on Service Quality

This research shows a positive influence on employee competence on the quality of service at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. It will affect the implementation of their duties, and if the implementation of tasks is carried out more professionally, it will result in a better quality of service. The results of this study are in line with Syamsyucri et al. (2021), stating that the quality of general services includes aspects of human resource capabilities consisting of competencies, skills, knowledge, and attitudes that are sought to be improved.

This study also supports the results of previous research from Tamsan & Yusriadi (2022), the conclusion that competence has a positive and significant influence on the quality of service. Furthermore, research conducted by Mastulen et al. (2021), based on the research results, can be concluded that the competence of the apparatus has a positive effect on the quality of public services. Then research conducted by Ansar et al. (2019), based on the research results, can be concluded that competence influences competence on the quality/quality of service.

Managerial implications on the influence of employee competence on the quality of service is the conformity between the expected service from the hospital (expected service) with the services received or perceived (perceived service) by patients or perceived results, namely by increasing the competence of employees by means of knowledge, namely employees have knowledge that also determines the successful implementation of the tasks charged to him and employees who have sufficient knowledge will increase the efficiency of the organization, then skills, namely employees who have good work skills, it will accelerate the achievement of organizational goals, then self-concept and values, namely employees must have a nature that supports the achievement of organizational goals, then automatically all tasks assigned to him will be carried out as well as possible, then personal characteristics, namely employees are able to control themselves and the ability to remain calm under pressure and finally motive, that is, employees must have a driving force that will realize a behavior to achieve the goal of his satisfaction.

5.3 The Effect of Facilities on Patient Waiting Time

This study shows a positive influence of facilities on patients' waiting time at K.H. Hayyung Hospital Outpatient Hospital Selayar Islands Regency. The results of this study are in line with Mulyana et al. (2021), stating that outpatient management must be based on the belief that good medical practice must be seen in health facilities. Those are derived from the design and flow, cleanliness, layout, comfort, location, and flow of patients. According to Reynilda et al. (2021), The behavior of utilizing health services is again based on experience, confidence, and the availability of facilities that suit the needs of patients. This behavior concerns the response to service facilities, how officers are serviced, and the price of drugs.

Managerial implications of the influence of facilities on patient waiting time are the time used by patients to get outpatient and inpatient services from the place of registration to enter the doctor's examination room. By improving facilities using service stages, the ease of the stages of health services provided to the community in terms of the simplicity of the service flow means it, that is, paramedics are serious in providing services, especially to the consistency of working time by applicable provisions. Expertise and skills, paramedics have good skills when providing or completing services to the community. Then class/status, that is, when the implementation of health services, does not distinguish the class/status of the community served, and finally affordable, namely the number of costs that the affordable service unit has set by the community in paying.

5.4 The Effect of Employee Competence on Patient Waiting Time

This research positively influences employee competence on patient waiting time at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. The results of this study are in line with Cahaya et al. (2022) statement that waiting times are often the main complaints of patients. One of the factors that affect the patient's waiting time is the pattern of employee activity. According to Ritonga et al. (2022), one of the factors that affect patient satisfaction, namely, the technical competence of officers, includes courage to act, experience, degree, fame, and courses.

Managerial implications on the influence of employee competence on patient waiting time is the time used by the patient to get outpatient and inpatient services from the place of registration to enter the doctor's examination room, namely by increasing the competence of employees by means of knowledge, namely employees have knowledge that determines the successful implementation of the tasks charged to him and employees who have sufficient knowledge will be increase organizational efficiency, then skills, namely employees who have good workability, it will accelerate the achievement of organizational goals, then self-concept and values, namely employees must-have traits that support the achievement of organizational goals, then automatically all tasks assigned to them will be carried out as well as possible, then personal characteristics, namely employees are able to control themselves and the ability to remain calm Under pressure and finally motive, that is, the employee must have a driving force that will realize a behavior in order to achieve his satisfaction goals.

5.5 Effect of Quality of Service on Patient Waiting Time

This study positively influences the quality of service for patients waiting for lengths at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. The results of this study are in line with the statement that the waiting time for services to patients is one of the reflections of the good quality of health services. According to Muhammad et al. (2021). Quality health services are health services that can satisfy every user of health services that are by the average level of satisfaction and implementation by professional standards and codes of ethics. As with various other health services, one of the requirements for good outpatient services is quality service. Therefore, to guarantee the quality of outpatient services, the program to maintain the quality of outpatient services also needs to

be done. A service facility is an environment where services provide health services to patients. The service place must provide comfort and safety to patients if the patient gets services. For example, a clean examination room and waiting room, regular room arrangement, waiting chairs, trash cans, clean bathrooms that are not slippery, and sufficient water supply.

Managerial implications on the effect of quality of service on patient waiting time are the time patients use to get outpatient and inpatient services from the place of registration to enter the doctor's examination room. By improving the quality of service by tangibles (physical evidence), the physical appearance of service facilities, equipment/equipment, human resources, and communication materials look attractive. Then reliability, namely nurses and paramedics, can provide services promised immediately, accurately, and satisfactorily to patients. Then, nurses and paramedics can help patients and respond to the service. Assurance, namely nurses and paramedics, have knowledge, compensation, and the ability to cultivate a sense of compassion. The community to the hospital, and finally, empathy (attention), namely nurses and paramedics always give sincere individual or personal attention to patients by trying to understand the patient's wishes.

5.6 The Effect of Facilities on Patient Waiting Time through Quality of Service

This study shows a positive influence of facilities on patient waiting for lengths through the quality of service at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. Roghanian et al. (2012) stated that outpatient management must be based on the belief that good medical practice must be seen from health facilities separated from the design and flow, cleanliness, spatial layout, comfort, location, and flow of patients. According to Owens et al. (2003), The behavior of utilizing health services is again based on experience, confidence, and the availability of facilities that suit the needs of patients. Sawitri et al. (2019) mentioned that the quality of public services includes aspects of facilities or infrastructure; if facilities or infrastructure are managed appropriately, quickly, and completely by the needs or demands of the community, then it will produce a better quality of service. Thus, the facility accompanied by the quality of service will increase the patient's waiting time.

Managerial implications on the influence of facilities on patient waiting for length through the quality of service are that the quality of service with conformity between the expected service from the hospital (expected service) with the services received or perceived (perceived service) by the patient or the perceived results, able to affect the facility with the means to launch and facilitate the implementation of facility functions to provide convenience to customers in carrying out activities or activities, so that customer needs can be met to the patient's waiting time with the conformity between the expected service from the hospital (expected service) with the services received or perceived (perceived service) by the patient or the results felt

5.7 The Effect of Employee Competence on Patient Waiting Time through Quality of Service

This study positively influences employee competence on patient waiting time through the quality of service at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. According to Yusriadi et al. (2019), waiting time is often the main complaint of patients. One of the factors that affect the patient's waiting time is the pattern of employee activity. According to Awaluddin A et al. (2019), one of the factors that affect patient satisfaction, namely, the technical competence of officers, includes courage to act, experience, degree, fame, and courses. Sukimi et al. (2019) mentioned that the quality of public services includes aspects of human resource capabilities consisting of competencies, skills, knowledge, and attitudes that are sought to be improved. Thus, the competence of employees accompanied by the quality of service will increase the patient's waiting time. It will affect the implementation of their duties, and if the implementation of tasks is carried out more professionally, it will result in a better quality of service.

Managerial implications on the influence of employee competence on patient waiting time through the quality of service are that the quality of service with conformity between the expected service from the hospital (expected service) with the services received or perceived (perceived service) by the patient or the perceived results, able to affect the competence of employees with the abilities and characteristics possessed by an employee in the form of knowledge, expertise and behavioral attitudes required in the implementation of their position duties towards patient waiting for lengths with conformity between expected services from the hospital (expected service) with services received or perceived (perceived service) by patients or perceived results

6. Conclusion

Employee facilities and competencies positively affect patient waiting time through the quality of service at the Outpatient Installation of K.H. Hayyung Hospital, Selayar Islands Regency. In addition to facilities, the increase in patient waiting time at the Outpatient Installation is also influenced by the competence of employees because employee competence is the ability and characteristics possessed by an employee in the form of knowledge, expertise, and behavioral attitudes needed for the implementation of their job duties. Then the importance of quality of service to increase the waiting period of patients at the Outpatient Installation of K.H. Hayyung Hospital Selayar Islands Regency because the quality of service is the conformity between the expected service from the hospital (expected service) with the services received or perceived (perceived service) by the patient or the perceived results. Thus, health facilities are needed to shorten the patient's waiting period at the Outpatient Installation of K.H. Hayyung Hospital. It can improve the means to launch and facilitate the implementation of facility functions to provide convenience to customers in carrying out their activities so that customer needs can be met.

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