



The Effectiveness of Innovation in Using the Ratri Tobat Application in Reducing Outpatient Waiting Times at the Pharmacy Installation of Bendan Regional Hospital, Pekalongan City

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ABSTRACT

The waiting time for medication collection is an important indicator in assessing the quality of pharmaceutical services in hospitals. To overcome queues and improve service efficiency, RSUD Bendan Kota Pekalongan launched the innovative Ratri Tobat (No Queue Waiting for Medication) service, which consists of three features: Waited, Left, and Delivered. This study aims to evaluate the effectiveness of this service based on three indicators: efficiency, service production, and patient satisfaction. The method used was quantitative with a descriptive approach. The study sample consisted of 100 respondents who were divided proportionally based on the service features used. Data were obtained through a questionnaire that had been tested for validity and reliability. The results showed that 63% of respondents stated that the waiting time was relatively fast (≤ 30 minutes), the average number of prescriptions processed per day reached 216 prescriptions after the service was implemented, and 89% of respondents were satisfied to very satisfied with the ease, speed, and convenience of the service. Conclusion: The Ratri Tobat service has proven effective in reducing waiting times, increasing service productivity, and providing a high level of patient satisfaction.

INTRODUCTION

Pharmaceutical services are an essential component of hospital healthcare systems. One of the most common complaints among patients is the long waiting time for medication, especially during peak hours. Bendan Regional Public Hospital (RSUD Bendan) in Pekalongan City, a government-owned hospital, has experienced an increase in outpatient visits, resulting in long queues at the pharmacy unit.

To address this issue, the hospital launched an innovative service called *Ratri Tobat* (an acronym in Javanese meaning "No Need to Wait for Medication") in mid-2023. This service offers three options for medicine retrieval: *Wait* (patients wait at the location), *Leave* (patients leave their prescription and return later), and *Deliver* (medications are delivered to the patient's home). However, in practice, most patients still choose the *Wait* option, as it is considered more practical and quicker.

This issue prompted researchers to examine the effectiveness of this service innovation in terms of service efficiency, increased service output (productivity), and patient satisfaction.

LITERATURE REVIEW

1. Concept of Service Effectiveness

According to Gibson (1985), organizational effectiveness is the extent to which an organization achieves its goals efficiently and satisfies stakeholders. In pharmaceutical services, effectiveness is measured by the speed, accuracy, and quality of service as perceived by patients.

2. Hospital Pharmacy Services

Hospital pharmacy services include the procurement, distribution, and provision of drug-related information. According to Ministry of Health Regulation No. 72 of 2016, the maximum waiting time for non-compounded drugs is 30 minutes. Exceeding this limit may reduce patient satisfaction and service quality.

3. Public Service Innovation

Budiani (2007) stated that public service innovation can take the form of system, technology, or workflow changes aimed at improving efficiency and service quality. *Ratri Tobat* is an example of a digital innovation based on an electronic queueing system.

4. Patient Satisfaction

According to Priagung & Fatkhiya (2024), patient satisfaction is influenced by ease of access, service speed, and interaction with staff. Satisfaction is a key indicator in evaluating the success of healthcare service innovations.

5. Previous Studies

Research by Dewi et al. (2024) found that online reservation systems in public services successfully reduced waiting times and increased user satisfaction, which aligns with the objectives of *Ratri Tobat*.

RESEARCH METHOD

This study uses a descriptive quantitative approach. The population consists of all outpatients who used the *Ratri Tobat* service. The sampling technique employed was proportional random sampling, with a total of 100 respondents divided among the three service features: *Wait* (82 respondents), *Leave* (10 respondents), and *Deliver* (8 respondents).

Data were collected through a closed-ended questionnaire that had been tested for validity and reliability. Data analysis was performed using frequency and percentage distributions to describe each effectiveness indicator: time efficiency, service output, and patient satisfaction level.

RESULTS AND DISCUSSION

1. Service Efficiency

A total of 63% of patients stated that their medication retrieval time was ≤ 30 minutes. This aligns with the Ministry of Health's Minimum Service Standards (MSS), which set the maximum waiting time for non-compounded drugs at 30 minutes. This indicates that *Ratri Tobat* has been quite successful in expediting services, especially with the *Wait* feature.

However, the dominance of the *Wait* feature (82%) shows that most patients still feel more secure and faster by waiting directly. The *Leave* and *Deliver* options have not been fully utilized, partly due to a lack of patient education and dependence on staff to explain these features.

2. Service Output

Before the implementation of *Ratri Tobat*, the number of prescriptions processed daily ranged from 150–180. After implementation, the average increased to 216 prescriptions per day, indicating a significant rise in pharmacy productivity.

With the separation of features and service flows, pharmacy staff can work more focused and organized. The *Deliver* option also helps reduce physical crowding in the pharmacy waiting area.

3. Patient Satisfaction

A total of 89% of respondents expressed satisfaction or high satisfaction with the *Ratri Tobat* service. The main factors influencing satisfaction were service speed, process simplicity, and a comfortable service environment. Patients using the *Deliver* feature felt especially helped, particularly those from out of town or elderly.

However, some obstacles remain, such as limited seating, patients unfamiliar with EDC machines and digital queue systems, and limited information during re-registration.

IMPLICATIONS AND FURTHER DISCUSSION

This study shows that digital service innovations like *Ratri Tobat* have great potential to enhance healthcare service efficiency. However, the success of digital services heavily depends on user education, supporting facilities, and integrated systems.

Strategic recommendations for the hospital include:

- Enhancing service outreach to patients via banners, educational videos, and social media.
- Providing dedicated staff to assist elderly or new patients in using the *Leave* and *Deliver* features.
- Regular evaluation of the digital queue system and maintenance of EDC machines to avoid service disruptions.

CONCLUSION

The *Ratri Tobat* service has proven effective in reducing waiting times, increasing service productivity, and achieving high levels of patient satisfaction. However, further efforts are needed to improve awareness and utilization of all available features to ensure more balanced usage.

RECOMMENDATIONS

1. Hospital management is advised to actively and interactively promote the *Ratri Tobat* service.
2. Pharmacy staff should be involved in providing brief education during registration or prescription retrieval.
3. Future researchers are encouraged to develop similar studies using a mixed-methods approach to gain deeper insights.

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