



(MUDIMA)



## Swot Analysis in the Formulation of Strategies for Increasing Outpatient Satisfaction in the Pharmacy Installation of Baptis Hospital, Batu City, 2023

Baiq Astrid Risviarina Hardanty<sup>1</sup>, Jason Merari Peranginangin<sup>2\*</sup>, Ismi Rahmawati<sup>3</sup>

Setia Budi University

**Corresponding Author:** Baiq Astrid Risviarina Hardanty [bilfaqihreyalteza07@gmail.com](mailto:bilfaqihreyalteza07@gmail.com)

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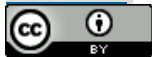
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### ABSTRACT

Patient satisfaction is the main indicator of the standard of a health facility. Pharmaceutical services in hospital pharmacy installations are one of the service units that must be provided by hospitals. The aim of this research is to determine the level of satisfaction of outpatients at the Pharmacy Installation at Batu City Hospital with five dimensions of *servqual*, namely: tangible, reliability, assurance, empathy, and responsiveness, to formulate a strategy analysis then using SWOT so that IFRS Baptist Batu City can improve its service. Descriptive quantitative research involved 397 respondents; the data were tabulated to determine the level of satisfaction and gaps in the IFRS Baptist City of Batu. Analysis of questionnaire data was tested for validity and reliability, then different tests using *Kolmogorov-Smirnov* and *Wilcoxon*. The results of the analysis of the level of satisfaction of outpatients with the pharmacy installation services at Baptist Hospital, Batu City, showed positive gap values in five dimensions of service quality, namely tangible (+0.18); reliability (+0.15); assurance (+0.19); empathy (+0.13); responsiveness (+0.12), while the results of the Wilcoxon rank test p value <0.05, which means there is a significant difference in satisfaction between reality and patient expectations. The results of the SWOT analysis of IFRS Baptist Batu City, conducted by researchers, indicate that IFRS is in quadrant one, meaning it is implementing an aggressive strategy that leverages its strengths to develop rapidly and supports the SO (Strength-Opportunity) strategy

## **INTRODUCTION**

One of the health services that plays a very important role in providing health services to the community is hospitals. Hospitals play an important role in the health service system and are medical institutions that provide professional medical personnel, inpatient and outpatient facilities 24 hours a day, 7 days a week, and provide complete medical services. Providing curative and preventive health services to patients and the community. A hospital is a health service institution that provides complete individual health services, providing inpatient, outpatient, and emergency services. Hospitals also have a function as a place for education for health workers and a place for research. The criteria for good health services are providing effective, safe, and high-quality services to patients who need them, supported by adequate resources. The world of health is experiencing very significant developments, and the prospects are very promising. These conditions make competition even more competitive. Therefore, every health service that provides services in health services must be able to attract customers through service quality in various ways. The higher the level of public education, the more critical it is to choose and assess which health services have the best service quality. Moreover, for health service owners, customer satisfaction is something they really pay attention to.

This creates increasingly fierce competition between hospitals. Today's business owners are very concerned about services, especially services in the health sector, namely consumer satisfaction, because people are very critical in assessing health services, which ones have the best service quality, especially because there are so many health services available. Satisfaction reflects a person's assessment of perceived product performance in relation to expectations. If performance falls short of expectations, customers are disappointed. If it meets expectations, the customer is satisfied. If it exceeds them, then customers will be happy.

Hospitals need to provide services in accordance with patient expectations. With appropriate services, the patient's expectations

regarding a service can be met or even exceeded, thereby giving rise to patient satisfaction. Hospitals need to know how to serve patients effectively and quickly. Services are patient-oriented because the measure of perceived quality is not in the view of the health service provider but lies in the patient. If the service received by the patient is as expected, then the service can be said to be good. In achieving service goals that are oriented towards patient satisfaction, it is necessary to pay attention to things that play an important role in determining patient quality perceptions, including facilities, the role of doctors, medical staff, and nurses.

Nowadays, consumer satisfaction is something that service business owners really pay attention to, especially in the health sector, because people are very critical in choosing and assessing which health services have the best service quality, especially because there are so many health service providers available. Consumer satisfaction is a person's feeling of happiness or disappointment that arises after comparing the perception of the performance (results) of a product with his or her expectations. Patient satisfaction is an important issue for health care providers.

## **METHODS**

### **A. Research Preparation**

In the research preparation stage, the researcher asks for an introductory letter to carry out the research from the Burdi Regional Hospital and requests permission from the head of IFRS and the Hospital Director so that the research carried out can run smoothly, with the expectations and success of the hospital.

### **B. Validity and Reliability Test**

Validity and Reliability Test, namely testing the content of an instrument to measure the accuracy of the instrument used in research, and its reliability. This test was carried out using a questionnaire distributed to 30 respondents from the IFRS Baptist Batu City outpatients.

### **C. *Servqual* Five Dimensions Test**

Testing the five dimensions of *SERVQUAL* by distributing the same questionnaire to 397

respondents to determine the level of outpatient satisfaction with services at IFRS Baptist Batu City. The results of distributing questionnaires were tabulated, and the percentages for each dimension were calculated to determine patient satisfaction with IFRS services at Baptist Batu City.

#### **D. Test the Difference between Expectations and Reality on the Five Dimensions**

The Difference Test is carried out to determine whether there is a difference between expectations and reality regarding the five dimensions *servqual*, as seen from the significance value  $<0.05$ .

#### **E. Analysis gap**

An analysis *gap* to find out whether there is a gap between the patient's expected value and the actual value received by the patient regarding service quality. The gap value is obtained from tabulated data on the difference between the actual value and the expected value for the five dimensions *servqual*.

#### **F. SWOT Analysis**

The results of interviews with heads of hospital pharmacy installations were tabulated and included *IFAS*, *EFAS*, and *SFAS* to determine the rating and weight in accordance with the standards and vision and mission of Batu City Baptist Hospital. The data obtained are the strengths, weaknesses, opportunities, and threats at the Baptist Hospital Pharmacy Installation in Batu City, so that the right strategy for the Baptist Hospital Pharmacy Installation in Batu City can be identified.

## **RESULTS AND DISCUSSION**

### **A. Validity and Reliability Test**

Validity testing is a step in testing the content of an instrument to measure the accuracy of the instrument used in research.

Based on the sample size (N) of 30 and the significance level is 5%, the *r* value of the table is 0.361 from 25 statements. In fact, the validity of the questionnaire data shows valid results. Therefore, the *SERVQUAL* questionnaire can be used for research. Shows the calculated *r* value for service satisfaction at the Pharmacy Installation of Batu Baptist Hospital. Subordinate distributions of the *r* value, subject to

only a significance of 5%, can be seen in the attachment. Validity test obtained valid results, then continued with reliability testing with the same data to test the extent to which the measuring device or instrument is reliable.

A variable is considered reliable if its responses are consistent over time. Reliability testing is performed using SPSS. A variable is considered reliable if *Cronbach's Alpha* value is  $> 0.60$ .

Based on the results of validity and reliability, the calculated *r* of the validity of reality and expectations is greater than the subject *r* of 0.361, and the *Cronbach's alpha* value of all *servqual* dimensions, namely *tangible*, *reliability*, *responsiveness*, *assurance*, and *empathy* show greater than 0.6. Thus, the respondents' answers from the research variables are reliable and valid, so that the questionnaire can be used for further research.

### **B. Respondent Characteristics**

The number of respondents analyzed in the study was 397 respondents. The determination of respondents used a *purposive sampling method* by ensuring that respondents met the inclusion and exclusion criteria of the study. Presentation of respondent identities to provide an overview of the conditions of respondents who participated in the study. Respondent descriptions were classified based on gender, age, education, and occupation.

The results of the study revealed that the majority of respondents were women (50.6%), while men (49.4%) used health services. Women outnumbered men in their use of health services. Their behavior suggests that women are more likely to take care of themselves and seek treatment than men. The presence of biological factors can lead to health problems in women, such as when they enter menopause. When women feel ill, they are more likely to seek health care. This is what I mean by the fact that women receive more health care than men.

Respondent characteristics based on age show that the majority of respondents who received pharmaceutical services at the Batu Baptist Hospital Pharmacy Installation were aged 54-60 years old (72 people, representing 18.1%). Patients of productive age are much more aware of the importance of

health, as it supports work activities. A person's age can influence their behavior in seeking preventive and curative health services. Even though they are of productive age, if they do not adopt a healthy lifestyle due to their busy daily activities, it can trigger the emergence of disease

Respondent characteristics based on education showed that of the 397 respondents, those with a high school education level were the highest at 30.7%, and those with a master's degree level were the lowest at 1%. It can be concluded that the higher a person's education, the greater their health concern.

Based on occupational classification, the majority were self-employed, at 61.5%. According to the East Java Representative Office of the Supreme Audit Agency (BPK), the majority of Batu City residents work as farmers, growing fruit, flowers, and vegetables as their primary agricultural products. Batu City's economy is supported by the tourism and agricultural sectors, thus making it more self-employed than other occupations.

### C. Data Analysis *Service Quality*

In *Servqual*, service quality is referred to as service quality, namely how far the difference is between reality and customers' expectations of the service they get or receive (Justiana, 2000). One of the service quality approaches that is widely followed is the service quality gap model with the *servqual* (*service quality*) model developed by Parasuraman, Ziethaml, and Berry (Kotler, 2007).

The *Servqual* study identified five dimensions of service quality: *tangibles*, *reliability*, *responsiveness*, *assurance*, and *empathy*. Statements for each dimension were provided to 397 respondents regarding services at the Batu Baptist Hospital Pharmacy Unit.

Based on the results of the analysis of patient expectations regarding the tangible dimension carried out by the Batu Baptist Hospital Pharmacy Installation, it is very important as a benchmark for service, as evidenced by a percentage of 91.01%, which is very satisfactory. Evidence is very important as a benchmark for service, where good tangible assets will influence customer expectations because good tangible makes consumer expectations higher. (Ramdan, 2008). The highest percentage of this data was 93.32%, with the officer's statement being fair in providing services, while the lowest percentage was 85.52%, with the officer's statement receiving patients quickly and accurately. Meanwhile, the lowest percentage was found in the statement "The staff received patients quickly and correctly," namely 85.52%. This can happen because of the large number of queues waiting and the lack of service staff, so that the staff is not quick and precise in serving patients, thus making patients feel less satisfied. Correct and fast service can also provide *outcome* that is positive for IFRS.

Table 1. Results of Patient Reality Analysis of Dimensions *Tangible*

No.	Statement	Alternative Answers				Amount	Shoes Total	Shoes Ideal	Percentage
		4	3	2	1				
<b>Tangible</b>									
1	Staff receive patients quickly and precisely	290	107	0	0	397	1481	1588	93,26
2	The service procedures are fast and do not bother patients	290	107	0	0	397	1481	1588	93,26
3	Staff are fair in providing services	334	63	0	0	397	1525	1588	96,03
4	Staff provide SOP according to the service	323	74	0	0	397	1514	1588	95,34

5	Nursing services provide the clearest information about what patients want	334	63	0	0	397	1525	1588	96,03
<b>RATE-RATE</b>								<b>94,79</b>	

Table 1 shows that the tangible evidence provided by the Batu Baptist Hospital pharmacy is very important as a benchmark for service, as evidenced by a percentage of 94.79%, which is very satisfactory. Tangible evidence is a tangible form that is visible when consumers first see it or that can be directly felt by patients. (Rani *et al.*, 2020). The data shows that respondents were very satisfied with all items in the tangible dimension statement, meaning that the reality received directly by patients regarding the service was in accordance with patient expectations. Other research explains that most respondents were satisfied with services based on physical evidence. This is because the physical facilities of the service available and received by patients were appropriate, so that the service was comparable to patient expectations (Mulyani, 2017). Meanwhile, the lowest percentage was found in the statement "Service procedures are fast and do not bother patients," namely 93.26%. According to the researchers, this could occur due to a lack of human

resources, the large number of patients, which causes a large number of prescriptions in IFRS, but still in a good percentage range in the general patient satisfaction dimension. This is also in line with research conducted, which states that the performance and behavior of officers is a priority in determining patient satisfaction.

In this study, the *tangible* dimension includes direct evidence of services provided by the Baptist Batu Hospital Pharmacy Installation, such as fast service, officers providing services according to SOP, officers providing clear information to patients, and officers receiving patients quickly and accurately. From the results of the percentage of patient expectations and reality regarding the tangible dimension, the results were greater at 94.79% than the expectations of 91.01%, which indicates that respondents were very satisfied with the services provided by the Baptist Batu Hospital Pharmacy Installation.

Table 2. Results of Analysis of Patient Expectation Regarding the *Reliability*

No.	Statement	Alternative Answers				Amount	Shoes Total	Shoes Ideal	Percentage
		4	3	2	1				
<b>Reliability</b>									
1	Management is responsive in dealing with patient complaints	266	131	0	0	397	1457	1588	91,75
2	The task force responds quickly when there is a problem	253	144	0	0	397	1444	1588	90,93
3	The snoozing time is not too long	291	106	0	0	397	1482	1588	93,32
4	Staff provides timely service	364	33	0	0	397	1555	1588	97,92
5	Manpower is responsive to patient emergencies	268	129	0	0	397	1459	1588	91,88
<b>RATE-RATE</b>								<b>93,16</b>	

Based on the table above, patient expectations regarding the *reliability* dimension provided by the Batu Baptist Hospital Pharmacy Unit are able to provide promised services to patients, as evidenced by a percentage of 93.16%. This dimension assesses the institution's ability to provide services as promised accurately and reliably. Performance must meet customer expectations, meaning punctuality, the same error-free service for all customers, and compassion. Based on this data, the highest percentage is 97.92%, namely officers provide services on time, while the lowest percentage is 90.93%, namely officers are responsive

and come quickly when needed. That speed response, and teamwork in helping solve patient problems are very important, apart from being friendly and patient, they are also skilled in providing services to patients. So that patients who come give a very satisfied assessment of the services provided by the officers.

Table 3. Results of Patient Reality Analysis of Dimensions *Reliability*

No.	Statement	Alternative Answers				Amount	Shoes Total	Shoes Ideal	Percentage
		4	3	2	1				
<b>Reliability</b>									
1	Management is responsive in dealing with patient complaints	349	48	0	0	397	1540	1588	96,98
2	The task force responds quickly when there is a problem	284	113	0	0	397	1475	1588	92,88
3	The snoozing time is not too long	368	29	0	0	397	1559	1588	98,17
4	Perturgas provides timely service	340	57	0	0	397	1531	1588	96,41
5	Manpower is responsive to patient emergencies	268	129	0	0	397	1459	1588	91,88
<b>RATE-RATE</b>									<b>95,26</b>

Based on the table above, it can be concluded that patients' perceptions of the reliability dimension of the Batu Baptist Hospital Pharmacy Installation indicate that it delivers the promised services, as evidenced by a percentage of 95.26%. This means that the percentage is greater than patient expectations, and patients are satisfied with the reliability of the staff. This is proven by the results of previous research, which shows that the level of patient satisfaction in the reliability dimension is in the satisfied category (Setiawan et al., 2023). Meanwhile, the lowest percentage was found in the statement "Officers are responsive to patient needs," namely 91.88%. According to the researchers, this could happen because the large number of patients

who received prescriptions for puyer made the patients feel bored with waiting, and created the patient's perspective that the staff did not respond quickly to what the patient needed, and a lack of human resources could also be one of these factors, thus causing the low percentage obtained. This is in line with research, which explains that patient anxiety can be reduced by having staff who are trained and responsive to patient needs.

In this study, the reliability dimension includes prompt service delivery, concern for patient concerns, reliability of service delivery, and timeliness of service provided by the Batu Baptist Hospital Pharmacy Unit. The results of the percentage of patient expectations and reality

regarding the reliability dimension show that the percentage of reality is greater, 95.26%, than expectations, 93.16%. It can be concluded that respondents are very satisfied with the ability of staff to answer patient questions, skilled in providing services, and with easy service procedures. This is based on the ability of staff to provide good and appropriate health services so that the service can be felt by the patient themselves or the companion of outpatients, exceeding expectations.

The *assurance* dimension indicates that respondents were highly satisfied with the service. Respondents assessed that patients greatly needed motivation from pharmacists to foster trust, and they also assessed that pharmacists could provide everything patients needed. This is evident from the percentage of expectations (94.27%) and the actual

results (94.45%). The results of the two are not significantly different. It can be concluded that the assurance dimension of the Batu Baptist Hospital Pharmacy Installation has been met by the actual results. This is also based on the fact that the services offered are guaranteed to be safe for patients; thus, the service is comparable to patient expectations.

The *empathy* dimension of patient satisfaction indicates that most respondents were very satisfied with the service. This is evidenced by the percentage of actual service exceeding patient expectations, namely 94.01% compared to 93.99%, as the service is comparable to the reality that patients receive from the service staff in providing an understanding of the patient's needs and interests that have been met.

Table 4. Results of Patient Reality Analysis of Dimensions *Responsiveness*

No.	Statement	Alternative Answers				Amount	Shoes Total	Shoes Ideal	Percentage
		4	3	2	1				
<b>Responsiveness</b>									
1	Cleanliness and beauty of the room	290	107	0	0	397	1481	1588	93,26
2	Cleanliness and neatness of staff	290	107	0	0	397	1481	1588	93,26
3	Completeness and availability of medicines	276	121	0	0	397	1467	1588	92,38
4	Comfortable and clean waiting room chairs	323	74	0	0	397	1514	1588	95,34
5	The queue line is orderly and doesn't have to wait too long.	334	63	0	0	397	1525	1588	96,03
<b>RATE-RATE</b>									<b>94,06</b>

The data above shows that the reality received by patients regarding the *responsiveness* dimension provided by the Batu Baptist Hospital Pharmacy Installation, respondents assessed that the *responsiveness* of pharmacists in providing services was categorized as very satisfied, namely very satisfied with a percentage of 94.06%. The data shows that respondents were very satisfied with all the statement items given in the responsiveness dimension, which can be interpreted as being in accordance with what was received by patients. From the data above, it can also be seen that the

lowest percentage is 92.38% with the statement "completeness and availability of medicines", this can be seen from the pharmaceutical service side when the patient submits a prescription, then the patient waits, and when the officer calls it turns out there is one If there is no medicine, that is where the patient's perception arises that the patient is less responsive, less attentive to the patient. However, IFRS Baptist Batu City provides drug delivery services to patients so that patients do not have to wait long in the waiting room. This is in line with the fact that computer stock data collection is less

relevant than physical stock, resulting in patient perceptions of a lack of completeness and availability of medicines. And there is a need to improve information systems, carry out monitoring and evaluation regarding data collection on physical drug stocks and computer data.

Patient satisfaction levels based on the responsiveness dimension indicate that patients are highly satisfied with the services provided by the Batu Baptist Hospital Pharmacy Installation. The highest satisfaction factor, as measured by the data above, is that patients queue according to their

assigned queue and do not wait too long. This indicates that staff are responsive to patient needs in providing pharmaceutical services and are able to take the time to respond to patient requests. This is also based on the clarity of information provided, the regularity, and the speed of pharmaceutical services.

Table 5. Percentage of Satisfaction Levels for All Dimensions

No	Dimensions	Percentage		Conclusion
		Hope	Statement	
1	<i>Tangible</i>	91,01%	94,79%	Very Satisfied
2	<i>Reliability</i>	93,16%	95,26%	Very Satisfied
3	<i>Assurance</i>	94,27%	94,45%	Very Satisfied
4	<i>Emphaty</i>	93,99%	94,01%	Very Satisfied
5	<i>Responsiveness</i>	93,55%	94,06%	Very Satisfied

The table above shows the percentage of outpatient satisfaction levels at the Batu Baptist Hospital Pharmacy Installation across all *Servqual* dimensions. The results indicate very satisfied patients. This is because the actual percentages for all dimensions exceeded expectations. Furthermore, the percentages of expectations and actual

performance are nearly identical for each dimension, with not much difference. This means that the service provided exceeded patient expectations.

### C. Test the Difference between Expectations and Reality on the Five Dimensions

#### 1. Test *Kolmogorov-Smirnov*

Table 6. Test Table *Kolmogorov-Smirnov*

One-Sample Kolmogorov-Smirnov Test

		H_Tangible	K_Tangible	H_Re liability	K_Re liability	H_Assurance	K_Assurance	H_Empathy	K_Empathy	H_Respons	K_Respons	
N		397	397	397	397	397	397	397	397	397	397	
Normal Parameters <sup>a,b</sup>	Mean	14.62	18.06	20.77	16.13	4.43	13.93	14.62	18.06	16.22	12.42	
	Std. Deviation	15.759	16.016	15.617	16.020	4.836	14.976	15.759	16.016	15.428	14.419	
Most Extreme Differences	Absolute	.420	.372	.320	.408	.512	.439	.420	.372	.393	.461	
	Positive	.420	.372	.320	.408	.512	.439	.420	.372	.393	.461	
	Negative	-.231	-.246	-.303	-.216	-.384	-.244	-.231	-.246	-.240	-.257	
Test Statistic		.420	.372	.320	.408	.512	.439	.420	.372	.393	.461	
Asymp. Sig. (2-tailed) <sup>c</sup>		<.001	<.001	<.001	<.001	<.001	<.001	<.001	<.001	<.001	<.001	
Monte Carlo Sig. (2-tailed) <sup>d</sup>	Sig.	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	
	99% Confidence Interval	Lower Bound	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
		Upper Bound	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000

a. Test distribution is Normal.

b. Calculated from data.

c. Lilliefors Significance Correction.

d. Lilliefors' method based on 10000 Monte Carlo samples with starting seed 221623949.

Table 6 shows the results of the data normality test using the *Kolmogorov-Smirnov* test due to the large sample size (more than 50 respondents). The analysis of all dimensions showed a significance value of  $0.001 < 0.05$ , indicating that the data were not normally distributed and could be continued with the *Wilcoxon test*.

## 2. Uji Wilcoxon

Wilcoxon test results for the five dimensions, that is:

First, dimensions *tangible* between reality and expectations obtained a significance value of  $0.006 < 0.05$ , which means that there is a significant difference between reality and expectations

Second, dimensions *reliability* between expectations and reality, a significance value of  $0.011 < 0.05$ , which means that there is a significant difference between reality and expectations.

Third, dimensions *assurance* Between expectations and reality, a significance value of  $0.001 < 0.05$  which means that there is a significant difference between reality and expectations. Fourth, dimensions *empathy* Between expectations and reality, a significance value of  $0.005 < 0.05$  which means that there is a significant difference between reality and expectations. Fifth, dimensions *responsiveness* Between expectations and reality, a

significance value of  $0.001 < 0.05$  can be interpreted to mean that there is a significant difference between reality and expectations. Based on the results of the Wilcoxon test, there is a difference between expectations and reality regarding the satisfaction of outpatients at IFRS Baptist, Batu City. This means that the satisfaction obtained by patients is more than the desired expectations, so that patients feel satisfied with their health. Gustina's research (2022) using the Wilcoxon test also found a significance value of  $0.000 < 0.05$ . This means that there is a significant difference between reality and expectations, so that  $H_0$  is rejected.

## D. Analysis Gap

From the results of the *gap* analysis, it can be seen that the *tangible* evidence variable has the highest total average *gap* between reality and expectations of 0.18, which is based on the opinion of Parasuraman (1990) in Sinollah and Masruro (2019), the *gap* difference measurement interval table is high and good in terms of service quality. While the *reliability* dimension has a total average *gap* between reality and expectations of 0.15, which based on the measurement interval table, the *gap* difference is high and good in terms of service quality. Based on the *gap* value in the statement Q3 "Waiting time is not too long", which is -0.19, which means that patient expectations are greater than the

reality obtained. According to Sugiono *et al.* (2019) in their research, drug waiting time is included in the low rating, but still in the good range in the dimension of patient satisfaction with pharmaceutical services.

The assurance dimension has a total average gap between reality and expectations of 0.19, which based on the gap difference measurement interval table, is good and quite good in terms of service quality. The empathy dimension has a total average gap between reality and expectations of 0.13, which based on the gap difference measurement interval table is high and good in terms of service quality. Based on the value *gap* in each statement, the Q1 gap value "Employees provide encouraging service" is -0.19, which means patient expectations. Exciting service here can be interpreted as pleasant service; patients are greeted with friendly staff, smiles, and greetings. According to (Kurnia, 2010) factors *empathy* It is very important and necessary for patients to obtain health services. In general, the patient's assessment of the encouraging service is as expected and desired by the patient. It's just that this statement gets the lowest score. This could happen due to a lack of explanation from staff to patients, which also affects the level of patient satisfaction.

And the *responsiveness* dimension has a total average gap between reality and expectations of 0.12, which based on the gap difference measurement interval table is high, or good. In the *responsiveness* dimension, there is one statement that has a gap value of -0.22, namely Q5 "The queue line is orderly and does not wait too long." This is in line with Sugiono's (2019) research at Batu Baptist Hospital that the lowest rating is waiting time for medication, but it is still in the good range in the service dimension in general.

Overall, the gap in the Baptist Batu Hospital Pharmacy Unit indicates that the difference between expectations and reality averages out to a moderate or fairly good level. This indicates that the services provided by the Baptist Batu Hospital Pharmacy Unit are quite good, with any deficiencies being addressed and complemented by the existing strengths.

#### **E. SWOT Analysis**

A SWOT analysis is a systematic examination of various factors used to formulate a company's strategy. This analysis is based on the logic of maximizing *strengths* and *opportunities* while simultaneously minimizing *weaknesses* and *threats*. This analysis is based on the assumption that an effective strategy will maximize existing strengths and opportunities while minimizing weaknesses and threats. When implemented accurately, this simple assumption has a significant impact on the design of a successful strategy and the analysis of the business environment, providing the information needed to identify opportunities and threats within an organization.

Based on questionnaires collected from 397 respondents, the results of the *IFAS* and *EFAS* of Baptist Batu Hospital were obtained. The *IFAS* results indicate that the strength of the Baptist Batu Hospital Pharmacy Installation is its patient-oriented vision and mission by continuously improving capabilities, both skills and knowledge, in order to provide services to the community. This can be interpreted as meaning that the Baptist Batu IFRS receives support from the director in developing the IFRS. This is one of the strengths of the Baptist Batu IFRS. Meanwhile, the weaknesses of the Baptist Batu IFRS include long waiting times for medication, lack of inter-team cooperation, lack of supervision during employee orientation, and sub-optimal clinical pharmacy activities.

The *EFAS* results for IFRS Baptist Batu include opportunities such as government support, as a primary referral hospital, and collaboration with the BPJS (Social Security Agency) and the government. Furthermore, IFRS Baptist Batu also faces threats, including changes in BPJS regulations and advances in science and technology

Table 7. EFAS IFRS Results Baptist Batu

No	Key Factors	Weight	Rating	Score P
<i>Peluang (Opportunities)</i>				
1.	There is support from the government	0.11	4	0.44
2.	As the main referral hospital	0.15	4	0.6
3.	High patient expectations for IFRS services to be more efficient and effective	0.10	3	0.3
4.	Cooperation with BPJS and the government	0.13	4	0.52
<b>Sub Total</b>				<b>1.86</b>
<i>Ancaman (Threats)</i>				
1.	Many competing hospitals	0.12	4	0.48
2.	Human resource quality in global era competition	0.09	3	0.27
3.	Clinical pharmacy activities have not been running optimally	0.09	3	0.27
4.	BPJS regulatory company	0.11	3	0.33
5.	Development of Science and Technology	0.10	4	0.4
<b>Sub Total</b>				<b>1.75</b>
<b>Total</b>		<b>1</b>		<b>3.61</b>

The IFAS factor analysis yielded a strengths score of 2.28 and a weaknesses score of 1.63, resulting in a total IFAS matrix score of 3.91. Meanwhile, the external factor analysis using the EFAS yielded an opportunities score of 1.86 and a threats score of 1.75, resulting in a total EFAS score of 3.61.

Table 8. SFAS Analysis

Key Strategic Factors	Weight	Rank	Weight Score	Duration			Comment
				Short	Secondary	Long	
IFRS has a patient-oriented vision and mission	0.15	4	0.6	x			Maintaining the vision and mission
There is a director's failure to develop IFRS	0.12	4	0.48	x			Improving the quality of IFRS
Long medication maturity time	0.08	4	0.32	x			Evaluation of HR performance
Lack of cooperation between teams	0.09	4	0.36		x		Training and evaluation between teams
There is support from the government	0.11	4	0.44		x		Improve service
Collaboration with BPJS and the Government	0.13	4	0.52	x			Improving Service

Development of Science and Technology	0.10	4	0.4	x	Training
Changes in BPJS Regulations	0.11	3	0.33	x	Evaluation and Training

The strategy used is to utilize the short to long term by improving quality and service through training, HR evaluation, and increasing and maintaining cooperation with third parties.

#### Conflict of Interest

In writing this journal the author states that there is no conflict of interest in writing this journal, a conflict between carrying out tasks and personal interests which influences the assessment and results.

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