

THE IMPACT OF IMPLEMENTATION UDD SYSTEM TO PASS CARE PATIENT SATISFACTION IN JOGJA INTERNATIONAL HOSPITAL

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Abstract

Unit Dose Dispensing (UDD) system is medicine distribution system on hospital is a system the dispensing method of pharmaceutical form to patient packed in single dose, for one use during therapeutic. Distribution system was also implemented inside of pharmaceutical service in Jogja International Hospital (JIH). Naswir saying (2000) implementation inside of UDD system influenced many factor side of input, process and output, identification result be able to improve the distribution system to optimum. Value of quality service to patient inside of customer satisfaction (patient) to use Survey Servqual, this survey have two part is perception and expectation patient. From 3 dimension quality use of this research: responsiveness, assurance and empathy. In the hope identification result be able to aid improve quality of pharmaceutical service was also implemented UDD system. To estimate impact of the implementation UDD system to pass care patient satisfaction in Jogja International Hospital .

This research was a research of retrospectif and prospectif analytic with *case study* design. Analytic data obtained as data qualitative and data quantitative. Subject in research is pass care patients, pharmacists and nurses.

Generally value of implemented UDD system be a good function, although side of input, process and output each part importance to improve. All patient were not significant value ($P=0,242>0,05$). But for patient satisfaction showed there were significant gap ($P=0,000<0,05$) between perception and expectation, although from result test scala of likert to obtain value 70-90% patient feel satisfied enough to implemented UDD in JIH. Highest gap score in every dimension quality analytic to improve and optimum service is: service of dispensing quickly and exactly with medicine information service from pharmacist; high experience safe feel to patient of dispensing direct from pharmacist; and good attention from pharmacist beside give of pharmaceutical service during therapeutic.

Generally implemented UDD on dispensary pass care JIH be a good function, but significant gap on each quality dimation to be still from analytic result patient satisfaction. To increase patient satisfaction to be means is to give of medicine information complete and detail, time of medicine present beginning than usually and visit to patient at first day care.

Keywords: UDD system, patient satisfaction, hospital

A. Introduction

Service a hospital is an integral part of the system service oriented to patient care, the provision of the quality, including service pharmacy clinics, is affordable for all walks of life. One of the main task of the pharmacy is to distribute supplies pharmaceutical to units of service in the hospital.⁽¹⁾

One of the distribution of medicine at the hospital, it is unit Dose. Dispensing (UDD) which is a distributed system with the way the provision. Pharmacy oral medications and injection given to patients in the form of dosage. Single and handed over to a use for treatment. It took place. The UDD have some advantage when. Compared with the distribution of other, among others : patients receiving services from the

installation of a fully in accordance with the needs, patients pay for medicine is consumed, a system of the drug in doubles so that reduce errors. Drug delivery, an increase in control and monitoring. The use of drugs as a whole by the installation of the pharmacy⁽²⁾

It is said Naswir⁽³⁾ in the implementation of the system UDD be influenced by many factors in terms of input, process and outputnya. The factors that influences is : the completeness of support from the hospital in the form of the Decree, the structure of the UDD and procedures, the completeness of equipment available, the number and types of people that are needed, financing, the presence or absence of systems and procedures are efficient, time service, the frequency of delivery, payment system, acceptance or support officers, including doctors, nurses, and assistant pharmacists, accuracy, the dose, time of, the possibility of a residual or waste, large numbers of patients who feel lhelped by the system UDD, the number of missing drugs, the frequency of occurrence of mistakes as well as income the hospital. From the identification of the factors mentioned above, can be an attempt repairs in managerial for the implementation of the system UDD.

Satisfaction of the patient is very important in the implementation of the health care, One way to measure the quality of service is by measuring the level of patient satisfaction. Model Servqual (service quality), which was developed by Parasuraman. Et al (1994) to assess the quality of service in accordance with the dimensions of quality. Service. Survey Servqual have two parts those are expectations and perception of customers. Hope and perception is comprised of five dimensions of quality, namely :. 1) The evidence directly, 2) Mainstay, 3) The response, 4) Social Security, and 5) Empathy. Hope and perception can form the satisfaction. Satisfaction. It's compatibility between the perception of services received or to be expected⁽⁴⁾

Jogja International Hospital (JIH) is a private hospital located in Sleman, Yogyakarta Special Region. In the distribution of drugs to inpatients, JIH using the system UDD as a method of

distribution of drugs for live-in patients who are based on commitment to run a clinic. The observation in JIH there is a means to assess the satisfaction of inpatients with a questionnaire given to patients or patient's family when the patient going, But the contents of questionnaires only to the extent of patient satisfaction in the service provided is already good enough or less without digging deeper into whether expectations and perception of patients to services provided, Regarding the implementation of distributed system UDD it should have this can help improve communication between patients with the pharmacy because of the interactions that be done more frequently when compared with the distribution of the other, That's what needs to be done research to assess the impact of the implementation of the system UDD to the satisfaction of inpatients in JIH. Further research will be able to identify the hope and desire of patients to services kefarmasian in JIH, so it can help improve the quality of service.

B. Method

This type of research is research analytic descriptive with a case study. The analysis of data to be done in quantitative and qualitative. Analysis the applicability of the method of this document and questionnaire be done to identify the application of the system UDD in JIH and its impact on customer satisfaction by looking at the gap between perception. And hopefully inpatients to services kefarmasian in JIH of the implementation of the system UDD. The analysis a qualitative with the method of in-depth interviews conducted to supplement what can be achieved through the quantitative⁵

Analysis of data on the applicability to the manual on the likert on a questionnaire patient satisfaction, followed by the statistics to measure the gap analysis of expectations and perception of the patient,As well as the questionnaire on the application of UDD good for pasien/keluarga the patient, assistant pharmacist and nurses. Analysis of data on the qualitative, by making transcripts, the results of interviews, used as supporting data.

He subject of this research is the patient's stay in JIH in Februari-Maret, 2010 which would be of the respondents, The subject of research is divided into three groups : the patient from the treatment room paediatric, obsgyn, and general (in addition to the patient the care paediatric and obsgyn), with the number of proportion from each of the treatment room, It's each group of 32 people. The subject of this research also involves the pharmaceuticals, head of a hospitalization and assistant pharmacists (AA) who served in a hospitalization, as well as the head of the ward inpatient and nurses who served in the care inpatient care.

Variables are free on this research is the application of UDD of the input (the structure of the UDD, procedures, equipment, human resources), measured by observation through the examination documents as well as equipped with an interview, the (prosedur/alur UDD, communication officers of pharmacy with a patient and other health), Measured with observation through the examination documents as well as equipped with interviews and output (support health workers, the support of patient/ the patient family, precise drug delivery, the possibility of a residual), measured by

observation through the examination documents as well as equipped with an interview, dependent variables are the patient's satisfaction with three dimensions is measured, namely : the response, guarantees and empathy, measured by counting a score of questionnaires given to patient/ the patient family with 26 statements prepared using the scale of Likert that has been filled by pasien/keluarga the patient, questionnaires contains the statement that is favorable and choose one of five options the answer, which is in a statement the perception is very well be given a score of 5 and not be good to give a score of 1, and in a statement the hope is very important given a score of 5 and doesn't matter given a score of 1.

The number of the score at least to all the items the statement is $1 \times 96 = 96$, and scores the most is $5 \times 96 = 480$. So a score ranging from 96-480.

C. Result and discussion

1. Description The characteristic of The subject of research

Most subjects are women (84,375 %), women are using health facilities than pria6. With the age group the biggest 21-40 years (77,083 %),

Table 1. Try a questionnaire to assess the implementation of the UDD by inpatients.

No	Statement	x ± % A	x ± % B	x ± % C
1	The implementation of the way the provision of drugs by the pharmacy to you - your family when a stay in JIH.	3 ± 79	4 ± 84	4 ± 81
2	The effect of the implementation of the procedures for granting the drug by the pharmacy to you - your family when a stay in JIH to patient comfort during treatment.	3 ± 79	4 ± 83	4 ± 82
3	The effect of the implementation of the procedures for granting the drug by the pharmacy to you - your family when a stay in JIH of the benefits that dirasakan/didapatkan the patient during treatment.	3 ± 78	4 ± 85	4 ± 81
4	The effect of the implementation of the procedures for granting the drug by the pharmacy to you - your family when a stay in JIH of the benefits that dirasakan/didapatkan the patient during treatment.	4 ± 80	4 ± 84	4 ± 80

Source: data primary processed

Description :

- score of 5 = very good, 4 = good, 3 = good enough, 2 = not good, and 1 = not good.

- x = a score of the average value of ; % = percentage ; A = the Paediatric ; B = group Obsgyn ; C = general groups.

and educational background of the Akademi/Perguruan of (61,458 %), for the highest in the private sector (52,083 %), with the location of shelter (home address.) the most part on the Sleman, and Bantul (90,625 %), as well as the treatment of the largest in the VIP or VVIP (34,375 %).

The pharmacy involved in this study as many as six people, the five women and one man, between the ages of 20-26 years, the work in JIH it more than 1 year and all educational background in the SMF, for the job kefarmasian the hospital it's better than graduates AMF (Academy - the pharmacy) and SMF, The nurse who took part in this study as many as 10 people, it's all women age between 23-32 years, with the work in JIH the two < a year and other \geq a year, is only one person with the education of undergraduate Nursing while other D3 Nurse.

2. The Measurement Instruments Research

a. Questionnaire for Patients Inpatient.

The questionnaire of 96 pasien/keluarga the patient in table 1 were analyzed statistically using One-Way Anova⁷ to see the perception of three groups to the application UDD in JIH. the results $p=0,242$ ($p > 0, 05$) means that from three groups of this study contend the same to the application UDD in the service of the pharmaceutical JIH with a score of the average value of good.

Satisfaction is a compatibility between expectations and perceptions about the services, satisfaction scores the compatibility between expectations and perception of the customer will be services pelayanan⁸. The patient satisfaction (See table 2) be processed by the method of Paired Sample T-Test ($p < 0, 05$). Results of analysis of statistics on the " A (paediatric), B (obsgyn) and C (commonly). The value of the (p) equal value, namely $p=0,000$ of the value of the ($p=0,000 < 0, 05$) it means there are differences in meaning between perception and expectations of patients in each group. This shows that there are still patients who have not satisfied with the quality of care, especially in the implementation of the UDD that has been

implemented in the pharmaceutical dispensary inpatient care.

From every dimension of the quality of analysis, the gap with the highest, to know what things that can be fixed in order to maximize the implementation of the UDD. Assessment of perceptions and expectations of patients as well as the gap between perception and expectations based on the quality in its entirety can be seen in table 1 below.

In table 2 below, patient satisfaction gap the highest in the dimension of the response regarding the provision of drugs in the immediate and appropriate accompanied by complete information by the pharmaceutical (0,614), followed by the dimension of empathy about a good attention from the pharmacy for patients treated (0,604) and on the dimensions of security about a sense of security a higher perceived by patients to the drugs provided by the pharmacy.

It is in line with the research Nurjanah Similarly, in the study which said the dimensions of the response the biggest in the quality of service.

From the results of the final gap in the study this in the value of 0,156-0,614 means service pharmaceutical related to the implementation of the UDD to be seen from the questionnaire on the patient stated that the company has been pretty good in the service provided. by the dimension of the quality of used to being analyzed and know what are the things that can be improved to optimize the application of UDD.

Data is also supported on the results of the likert in table 3 below, mean the percentage for each statement either on a questionnaire for the application of the UDD and a questionnaire the satisfaction of the patient is in the range of 374-443 with a value of a percentage above 80 % for the implementation of the UDD and 70-90 % to the satisfaction of patients. One company was enough to satisfy its customers when the customer satisfaction over 60%¹¹.

The test results on the Likert in table 3 also shows there is a different score between their hopes (423-443) and perception (374-428) the patient. The high expectations than the

perception of indicating the persistence of patients who have not satisfied with the implementation of the UDD.

b. Kuesioner to Officer the pharmacy and the nurse.

The statistical analysis using the independent of the sample t-test⁷ between the pharmaceutical and nurses to assess the difference of opinion about the application of UDD in the service of the pharmacy in JIH. The value of the 0,089 and 0,068 means. > 0, 5 which means no significant differences between the pharmaceutical and nurses about his opinion in the implementation of the UDD, also supported the results of the Likert in table 4 below. Is that mean the percentage for each statement on a questionnaire the assessment of the implementation of the UDD by the pharmaceutical in the range of 17-24 (the maximum 30) and nurses are on the range of 35-43 (the maximum 50) with a value of a percentage between the two groups on 56-86 %.

The difference in scores of test results on, among the pharmaceutical (17-24) and nurses (35-43), indicating the difference in perception between the two of the implementation of the UDD, even though the results of the analysis of statistical difference is not meaningful significant or can be said to be the perception of both almost the same.

3. The application of UDD

a. Input

The results of the input include : the (SK), the structure of the UDD, procedures UDD, equipment and human resources, summarized in table 5 below.

Decree (SK) about the application of UDD in service pharmacy in JIH is not in writing, but it is listed in and strategic plans JIH in point Clinical Pharmacy, since the beginning, JIH to stand (2007) and supported by the board of directors. One of the forms of real implementation of the pharmaceutical clinical service pharmacy is realized by choosing the system UDD as a method of distribution of drugs for patients hospitalized in JIH. It is in contrast to the research Naswir3, according to him to the

hospital the government it will be good if the application UDD be intensified with the support of the decree of the board of directors.

In JIH the structure of the UDD to be structurally there is no different, with the results of research Naswir3, which states that the presence of the structure of the UDD can be a factor driving force in its application, The daily routine can generally done well by the pharmacy, but there is still his patient complaints about the delay time of the drug as well as the lack of information that is given to patients and lead to the dissatisfaction of patients on the dimensions of the response, one of them caused by the absence of a business log and a clearly each individual, The lack of cooperation in doing the job caused the officers did not have its good in performance and productivity¹⁰.

The procedure still (sop) UDD in JIH there have been, and in general its implementation is in conformity with the contents of the sops the implementation of the UDD in accordance with the sop, a contributing factor in the implementation of the UDD.

The latter, support in the implementation of the UDD in JIH in terms of quantity and type for the time is quite adequate. The equipment in terms of input according to Al-Assaf (2009), categorized as a source of the needed power and interact with other parts and to support the smooth process of activities and outputs produced.

From the standpoint of human resources, there are eight people AA (6 women, two men) the background of education SMF is headed by a Pharmacist is assisted by one Pharmacist, in terms of education are quite supportive, ideally 30 patients treated by one Pharmacist.

When there's an increasing number of patients more than the usual (over 70 patients hospitalized every day), the pharmacy doesn't look so hard to perform their duties. It became one of the causes of the value of the questionnaire the pharmacy is lower than with the nurse about his response to the implementation of the UDD the time being, In general the nurse thought UDD help reduce the

workload of it while pharmacy argued the opposite. It also affects the dissatisfaction of patients on the dimensions of the response, which is due to limited number of the pharmacy, so not all patients get drug information are complete. Drug information is very influential in reducing the number of drug misuse.

The addition of the number of pharmaceutical, of course, is required when the number of patients continues to rise, the division of tasks that can obviously facilitate the implementation of the UDD. In addition to the details of the tasks and work that is obvious to the pharmacy. Translator Training is also needed to improve skills and knowledge of the pharmacy. Education plays an important role in improving the quality and of pharmaceuticals, training is needed to get an insight, knowledge and skills in the pharmaceutical field hospital.

b. Process

The results of the process include : prosedur/alur UDD, communications officer for pharmaceutical, summarized in table 6 below.

Procedur UDD in general are in accordance with should always be made and has been running well and smoothly even though there are some sections that is not the same. Lack of drug information received by patients to be one factor in the cause of the dissatisfaction of patients on the dimensions of the response of the provision of the immediate and appropriate accompanied by drug information are complete. The full of drugs that comes to making the patient feel safer in the use of drugs and this will affect the level of patient satisfaction of the dimensions of security about a sense of security a higher perceived by patients. Complaints of those patients about the length of time administering the drug to be one of the causes of the dissatisfaction of patients on the dimensions of the response is because of the right time is considered very important for patients who want the problem be resolved soon and dimensions of this. The dimensions of the response is one of the fact is that with the service or the provision of services and time dispensing that is rapidly becoming one of the smooth application of the UDD. For that will

need to be re-evaluated on schedule time administering the drug, so that patient complaints about delays in administering the drug can be overcome.

Communication to the pharmacy with pasien/keluarga the patient is generally done at a better every time the provision of drugs and the home. Communication with consumers (patient) to be part of the form of service to consumers.85 % of the community pharmacy in New Zealand stated that the side effects of drugs should be informed to the patient and the provision of information written in the form of etiquette with information orally in a submission to the patient's drug can increase understanding of those patients about drugs. The quality of health services related to communication and dissemination of information For this reason it is an increase in skills for officer service in communication as a strategy to prevent the occurrence of complaints related to communication.

Communication to the pharmacy with other health (nurse and midwife and doctor), as far as this well and always there is interaction and communication related to the job though it can not be denied there must be the possibility of communication miss for activities that have an impact on the job. Generally, the nurse was helped by the implementation of the UDD.

c. Output

The results of the output include, support health workers, the support of pasien/keluarga the patient, precise drug delivery, the possibility of drugs the rest of the summarized in table 7 below.

But the contents of questionnaires only to the extent of patient satisfaction in the service provided is already good enough or less without digging deeper into whether expectations and perception of patients to services provided. A total of 78 % nurses and assess better the implementation of the UDD in service pharmaceutical dispensary this inpatient nurse also argued the implementation of the UDD good for the convenience, security and benefits that patients get in return for treatment. The nurse also feel the benefits in defense work.

To the pharmacy, the value of the questionnaire in general enough, but these results would be important to always be improved, and one of them is by digging into what are the things that want patients to services that have been given. As many as 81 % pasien/keluarga the patient to assess both in terms of the implementation of the UDD and the effect on security, comfort and benefits are felt pasien/keluarga for the patients in care. This support is also influenced by educational background of respondents most (61, 46 %) the Academy. Regarding the implementation of distributed system UDD it should have this can help improve communication between patients with the pharmacy because of the interactions that be done more frequently when compared with the distribution of the other.

Because of the general awareness about the importance of health based on educational background that is quite tinggi¹⁸ and this is a tendency to use the facility to inpatient which baik¹⁹ of respondents in the study is the largest are in the Infirmery VIP or VVIP (34, 38 %). That's what needs to be done research to assess the impact of the implementation of the system UDD to the satisfaction of inpatients in JIH. It is impacting on the facility service who want to get during hospitalization, which is indicated in a sense of comfort that is expected to patient / patient family, one of them in the form of a good attention from the pharmacy. Further research will be able to identify the hope and desire of patients to services kefarmasian in JIH, so it can help improve the quality of service. It is related to the existence of dissatisfaction on the dimensions of the quality of empathy, which is about a good attention from the pharmacy for patients in care. In the barrel with research Fitri¹⁰. which in this dimension in negative in the attitude of a rush of officers when serving patients. This type of research is research analytic descriptive with a case study. The analysis of data to be done in quantitative and qualitative. In fact the customer wants to get the attention as good as of the other costumers.

Analysis the applicability of the method of this document and questionnaire be done to

identify the application of the system UDD in JIH and its impact on customer satisfaction by looking at the gap between perception. The precision of a (That's right patients, just an indication of the drug, the right kind of drugs, appropriate dose of medicine, just the way the use of drugs, timely provision of drugs, appropriate rules on) and complaints, reports and monitoring²⁰ is closely related to the process dispensing for work kefarmasian And hopefully inpatients to services kefarmasian in JIH of the implementation of the system UDD. The analysis a qualitative with the method of in-depth interviews conducted to supplement what can be achieved through the quantitative. For accuracy in administering the drug from the questionnaire to the pharmacy, on average have said that they are good enough even for precise patient on average stated, while for the nurse accuracy of the average said. Analysis of data on the applicability to the manual on the likert on a questionnaire patient satisfaction, followed by the statistics to measure the gap analysis of expectations and perception of the patient. Report and monitoring the use of drugs a patient in JIH be done by the Pharmacist, if something goes wrong by charging the incident was injured in an incident report the safety of patients in monitoring by the special. As well as the questionnaire on the application of UDD good for pasien/keluarga the patient, assistant pharmacist and nurses. Analysis of data on the qualitative, by making transcripts, the results of interviews, used as supporting data. Pharmacist to do monitoring and evaluation in the use of drugs by patients as well as all personnel involved in it should be involved in the safety of patients. The subject of this research is the patient's stay in JIH in Februari-Maret, 2010 which would be of the respondents. The study is different from the results of research Sujarwato, said the application of UDD has not been able to improve the safety of drugs, but the research Widayati said that System Distribution of Drugs The dosage unit (SDODU) with the frequency of giving drugs to patients one of the daily doses a good impact on inpatients. The subject of research is divided into three groups : the

patient from the treatment room paediatric, obsgyn, and general (in addition to the patient the care paediatric and obsgyn), with the number of proportion from each of the treatment room. Providing quality and quantity of services are much better, a decrease in the use of medicine at 87, 5 %, from before and after the implementation of SDODU. The precision of the drug in JIH can work better because of the implementation of the UDD have the provision of drugs to patients as much as three times a day. It's each group of 32 people. The subject of this research also involves the pharmaceuticals, head of a hospitalization and assistant pharmacists (AA) who served in a hospitalization, as well as the head of the ward inpatient and nurses who served in the care inpatient care. In fact the customer wants to get the attention as good as of the other costumers. Variables are free on this research is the application of UDD of the input (the structure of the UDD, procedures, equipment, human resources), measured by observation through the examination documents as well as equipped with an interview, the (prosedur/alur UDD, communication officers of pharmacy with a patient and other health). So the exactness of a more controlled. Monitoring of the exactness of a one of them can be done with the provision of information is complete to the patient, as revealed Widayati²² that the provision of information that can constantly reducing drug misuse. Measured with observation through the examination documents as well as equipped with interviews and output (support health workers, the support of patient / patient family, precise drug delivery, the possibility of a sisa/terbuang), measured by observation through the examination documents as well as equipped with an interview. The provision of information the drug also affects the quality of the response, which in this research is still felt less by patients in the provision of information is complete by the pharmacy. The drug information is to be one of the concrete manifestation of the attention of the pharmacy to patients. Variables are terikat the patient's satisfaction with three dimensions is measured, namely : the response, guarantees and empathy,

measured by counting a score of questionnaires given to pasien/keluarga the patient with 26 statements prepared using the scale of Likert that has been filled by pasien/keluarga the patient. The provision of information the drug also affects the quality of the response, which in this research is still felt less by patients in the provision of information is complete by the pharmacy. The drug information is to be one of the concrete manifestation of the attention of the pharmacy to patients. Kuesioner contains the statement that is favorable and choose one of five options the answer, which is in a statement the perception is very well be given a score of 5 and not be good to give a score of 1, and in a statement the hope is very important given a score of 5 and doesn't matter given a score of 1. The number of the score at least to all the items the statement is $1 \times 96 = 96$, and scores the most is $5 \times 96 = 480$. So a score ranging from 96-480. It is the dimension of empathy. The drug information is to be one of the pharmacy in doing the job kefarmasiannya.

Most subjects are women (84,375 %), women are using health facilities than pria⁶. With the age group the biggest 21-40 years (77,083 %), and educational background of the Akademi/Perguruan of (61,458 %), for the highest in the private sector (52,083 %), with the location of shelter (home address.) the most part on the Sleman, and Bantul (90,625 %), as well as the treatment of the largest in the VIP or VVIP (34,375 %.) The possibility of drugs the rest, wasted in the implementation of the UDD this from the observations mainly on prescription drugs cocktail (pulveres). As many as 80 % The pharmaceutical and nurses to the questionnaire agreed that the implementation of UDD to minimize the possibility of drugs. The pharmacy involved in this study as many as six people, the five women and one man, between the ages of 20-26 years, the work in JIH it more than 1 year and all educational background in the SMF, for the job kefarmasian the hospital it's better than graduates AMF (Academy - the pharmacy) and SMF. As the results of research Sujarwato the implementation of the UDD to the management of the drug can reduce the frequency of events

on the drug from 42 to 2, 5 times and reduce the frequency of incidents of loss medication from 19, 5 to 3 times and the results of research Naswir which states that the possibility of drugs the rest, is lost, wasted a lot smaller in the implementation of the UDD. The nurse who took part in this study as many as 10 people, it's all women age between 23-32 years, with the work in JIH the two < a year and other \geq a year, is only one person with the education of undergraduate Nursing while other D3 Nurse.

4. Satisfaction patient

a. The dimension of Response

In the dimension of the response, gap/kesenjangan highest on the items of the 2nd of service of drug delivery immediately and appropriately, accompanied by drug information provided by the pharmacy. 90 % of patients taking this very important and just 77 % of patients think this has been implemented well, this means there is still a patient has not satisfied with the provision of services regarding the provision of drug information and often the patient feels a delay in administering the drug. The research results ' in the dimension of the response, the gap the highest on the length of time patients.

The precision of a (the output) to do with the dimensions of the response of the patient wants the provision of the immediate and appropriate, service the right time is considered very important for patients because patients want to the problem be resolved soon. The pharmaceutical (63 %) of the opinion of the implementation of the UDD be helpful for timeliness of drug delivery, but there are still complaints of these patients should be addressed by changing the time a little earlier so patients can be given complete information, the provision of drug information orally with the drug is to improve the observance of the patient.

The research is the same as the research result from Sandjaja19 that Gap in the response of the highest in the " A (paediatric), this happens because often the pharmacy did not meet with patients. The syrup that is generally a choice sediaan the drug for children delivered

through pneumatic tube system or handed over by a nurse after being given the drug by the pharmacy, so that complaints and obstacles in the use of drugs are often not known by the pharmacy. In fact the quality of service is closely related to the smooth communication between providers of services and receiving services.

Tied with a variable the communication between the pharmaceutical and patients (the process) with the result pretty auspiciously, then this needs to be evaluated and still have to be improved. To do this, of course necessary to improve skills, such as the holding of training related to an increase in the way good communication, and an increase in the skill of a foreign language for the pharmacy. Education and skills needed in improving the quality of human resources.

b. The dimensions of security

In the dimension of security gap in the items the 6th of a sense of security that is higher for patients to drugs that directly given by the pharmaceutical side of the exactness of the provision of medicine, medicine doesn't expire as well as drug side effects, means the patient feel normal when the drugs is a pharmacy in fact with the pharmacist who provided the drug directly to patients. It is hoped that patients feel safer using drugs during hospitalization because of medication provided by officers who are experts in the field. The gap is due to lack of communication between the pharmacy with a patient (the process) and most patients don't know and can not distinguish the pharmaceutical and nurses, even though between the two had been distinguished by using the uniform is different but was not equipped with identity in the form of ID card. This is identified from a lot of patients to ask the researchers when filling out questionnaires.

c. The dimension of empathy

Gap highest on the items in a statement to the 9th (- 0,604) in the dimension of empathy about a good attention by the pharmaceutical in providing services for care, this means the patient has not satisfied with the service provided on the item, namely patients assessed that the attitude of the pharmaceutical fine in

providing services. In fact, 92 % of patients taking this very important and new 80 % of patients who feel this has been implemented well. The results of this percentage is closely related to the lack of support from the pasien/keluarga the patient about the application of UDD (the output). But in a matter of statistics there is still a gap between perception and expectations of patients enough attention. here it seems not only on the hospitality of the officers are in this case the pharmacy already considered friendly by patients during the service as well as from the observations of the observations of the researchers.

D. Conclusion

1. The application of the system UDD in a hospitalization JIH in terms of :

A. **Input** : strategic plans JIH in point clinical pharmacy as well as the structure of the department of pharmaceutical support of the implementation of the UDD ; there are procedures UDD ; equipment is adequate ; human resources quite proportionate to date.

06:14 ID-EN Translator The daily routine can generally done well by the pharmacy, but there is still his patient complaints about the delay time of the drug as well as the lack of information that is given to patients and lead to the dissatisfaction of patients on the dimensions of the response, one of them caused by the absence of a business log and a clearly each individual.

B. **The process** : procedur/alur UDD, in general to fruition ; communication to the pharmacy with pasien/keluarga the patient, in general quite well ; communication to the pharmacy with health workers, in general, has been running smoothly.

C. **Output** : support health workers, very good (78 %) ; support pasien/keluarga the patient, very good (81 %) ; accuracy of medicine in general have improved ; the possibility of drugs the rest, in the implementation of the UDD can be minimized.

2. Satisfaction of patients, the gap by the dimensions of quality :

A. The dimensions of Response: about the medication immediately and appropriately, accompanied by drug information provided by the pharmacy, 90 % of patients consider service is very important. In connection with the variable human resources, communications officer for pharmaceutical with pasien/keluarga the patient and precise medication.

B. The dimensions of security, of a sense of security that is higher for patients to drugs that directly given by the pharmacy, 90 % of patients taking this as a guarantee and it is very important. In connection with the variables the procedure remained the UDD, prosedur/alur UDD, communications officer for pharmaceutical with pasien/keluarga the patient and precise medication

C. The dimensions of Empathy, about a good attention by the pharmaceutical in providing services for care, 92 % of patients taking this very important. In connection with the variables of communication to the pharmacy with pasien/keluarga the patients and support pasien/keluarga the patient.

In general the implementation of the UDD in a hospitalization JIH is going well, those communications the pharmaceutical & pasien/keluarga the patient (process). be a point to the improvement of quality in order to maximize the implementation of the UDD in JIH.

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