

Intervensi Lean Six Sigma Dalam Menurunkan Waktu Tunggu Obat Pasien Rawat Jalan Di Mayapada Hospital Bogor Tahun 2025

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Abstrak

Latar Belakang : Waktu tunggu obat merupakan salah satu indikator rumah sakit untuk menilai kualitas pelayanan terhadap pasien. Waktu tunggu yang lama akan berdampak pada penurunan kepuasan pasien yang datang berobat ke rumah sakit. Standar pelayanan minimal waktu tunggu obat yang ditetapkan oleh Kemenkes yaitu kurang dari 60 menit untuk obat racikan dan kurang dari 30 menit untuk obat non racikan. Sepanjang tahun 2024 pencapaian data patient experience Mayapada Hospital Bogor untuk waktu tunggu obat racikan adalah 83% dan non racikan adalah 75%, masih dibawah target yang ditetapkan (>90%).
Tujuan : Menurunkan waktu tunggu obat racikan dan non racikan dengan menggunakan konsep Lean six sigma di Departemen Rawat Jalan Mayapada Hospital Bogor
Metode : Penelitian ini mempunyai desain operational research yang menggabungkan metode kuantitatif dan kualitatif. Peneliti melakukan observasi dengan time motion study. Teknik pengambilan sampel yang digunakan adalah stratified random sampling, dengan total sampel sebanyak 264 pasien yang berobat dan mendapat obat di rumah sakit. Pemilihan sampel didasarkan pada shift berobat, dan jenis penjaminan yang telah ditetapkan.
Hasil : Hasil penelitian dengan pendekatan lean six sigma berhasil mengidentifikasi lead time waktu tunggu obat non racikan di Mayapada Hospital Bogor yaitu sebesar 1 jam 10 menit 45 detik dimana 78% merupakan kegiatan non-value added yang didominasi oleh waste tipe waiting sebesar 49 menit 55 detik. Sedangkan waktu tunggu obat racikan sebesar 57 menit 56 detik dimana 60% merupakan kegiatan non-value added yang didominasi oleh waste tipe waiting sebesar 28 menit 23 detik. Akar masalah dari memanjangnya waktu tunggu obat berada di fase pembayaran obat pada kegiatan konfirmasi penjamin, tunggu bayar dan pada fase penginputan obat pada kegiatan input resep. Penerapan lean six sigma dalam proses waktu tunggu obat racikan di Mayapada Hospital Bogor berhasil mengurangi lead time sebesar 23% post intervensi dan 14% pada tahap kontrol, dari 57 menit 56 detik menjadi 38 menit 30 detik, sedangkan penurunan lead time waktu tunggu obat non racikan mengalami penurunan 25% post intervensi dan 27% pada tahap kontrol, dari 1 jam 10 menit 45 detik menjadi 38 menit 16 detik pada tahap kontrol. Pengurangan lead time ini diikuti dengan penurunan waste di seluruh tahapan waktu tunggu obat, dengan penurunan waste terbesar terjadi pada fase penginputan resep, yaitu sebesar 69%, dari 4 menit 39 detik menjadi 1 menit 58 detik untuk obat racikan. Pada fase pembayaran sebesar 63% dari 52 menit 23 detik menjadi 24 menit 35 detik untuk obat non racikan.
Kesimpulan : Terdapat penurunan waktu tunggu obat racikan dan non racikan di Mayapada Hospital Bogor setelah penerapan lean six sigma. Penurunan waktu tunggu obat masih diatas target standar pelayanan minimal yang ditetapkan oleh Mayapada Hospital.

Background
: Drug waiting time is one of the hospital indicators to assess the quality of service to patients. Long waiting times will have an impact on reducing the satisfaction of patients who come to the hospital for treatment. The minimum service standard for drug waiting time set by the Ministry of Health is less than 60 minutes for compounding drugs and less than 30 minutes for non compounding drugs. Throughout 2024, the achievement of Mayapada

Hospital Bogor's patient experience data for waiting time for compounding drugs was 83% and non-compounding was 75%, still below the set target (>90%)

Objective: Reducing the waiting time for compounding and non compounding drugs by using the Lean six sigma concept in the Outpatient Department of Mayapada Hospital Bogor

Methodology: This study employs an operational research design combining quantitative and qualitative methods. The researcher conducted observations using a time-motion study. The sampling technique used was stratified random sampling, with a total sample size of 264 patients who received treatment and medication at the hospital. Sample selection was based on the distribution of days, treatment shifts, and types of insurance coverage as defined.

Results: The study using the Lean Six Sigma approach successfully identified the lead time for non-compounded medication waiting time at Mayapada Hospital Bogor as 1 hour, 10 minutes, and 45 seconds, with 78% being non-value-added activities dominated by waiting-type waste of 49 minutes and 55 seconds. Meanwhile, the waiting time for compounded medications was 57 minutes and 56 seconds, with 60% being non-value-added activities dominated by waiting-type waste amounting to 28 minutes and 23 seconds. The root cause of the prolonged waiting time for medications lies in the medication payment phase during the insurance confirmation and payment waiting activities, as well as in the medication input phase during the prescription input activities. The implementation of Lean Six Sigma in the waiting time process for compounded medications at Mayapada Hospital Bogor successfully reduced lead time by 23% post-intervention and 14% during the control phase, from 57 minutes and 56 seconds to 38 minutes and 30 seconds. Meanwhile, the reduction in lead time for non-compounded medications decreased by 25% post-intervention and 27% during the control phase, from 1 hour 10 minutes 45 seconds to 38 minutes 16 seconds during the control phase. This reduction in lead time was accompanied by a decrease in waste across all stages of medication waiting time, with the largest reduction in waste occurring during the prescription input phase, amounting to 69%, from 4 minutes 39 seconds to 1 minute 58 seconds for compounded medications. In the payment phase, there was a 63% reduction from 52 minutes 23 seconds to 24 minutes 35 seconds for non-compounded medications.

Conclusion: There was a reduction in waiting time for compounded and non-compounded medications at Mayapada Hospital Bogor after the implementation of Lean Six Sigma. The reduction in medication waiting time remains above the minimum service standard target set by Mayapada Hospital.