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The Effect of Waiting Time on Patient Satisfaction at Sabokingking Health Center Palembang

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Abstract

This study aims to analyze the effect of service waiting time on patient satisfaction at the Sabokingking Community Health Center in Palembang. Waiting time is an important aspect in assessing the quality of health services because patients not only assess the results of medical procedures but also their experience during the process of receiving services. This study uses a quantitative approach with a survey method. Data were collected through the distribution of Likert-scale questionnaires to 60 patient respondents, then analyzed using the SPSS application. Tests carried out include validity, reliability, normality, heteroscedasticity, multicollinearity, simple regression analysis, t-test, F-test, and coefficient of determination. The results showed that the research instrument was valid and reliable, with a Cronbach's Alpha value of 0.960 for the service waiting time variable and 0.955 for the patient satisfaction variable. The regression results showed a coefficient value of 0.663 with a significance of 0.000, while the R Square value was 0.627. These findings indicate that service waiting time has a positive and significant effect on patient satisfaction by 62.7%, while the rest is influenced by other factors outside the study. Thus, increasing the efficiency of waiting times needs to be a concern in efforts to improve the quality of service at the Sabokingking Palembang Community Health Center.

Keywords:patient satisfaction, health services, community health centers, service waiting time

INTRODUCTION

Healthcare is a vital public need because it directly impacts a person's physical condition and quality of life. Community health centers, as first-level healthcare facilities, play a significant role in providing fast, accurate, and accessible services. Patients not only expect medical treatment but also comfortable and efficient service, which impacts their satisfaction. Long queues and slow service processes often lead to boredom, so the quality of healthcare is measured not only by the outcome but also by the patient's experience during the service (Purba et al. 2026).

In accordance with Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning Community Health Centers, every healthcare facility must meet service quality standards. Ideally, outpatient waiting times should not be excessively long, as prolonged service durations can cause physical and psychological discomfort. This is especially true for elderly patients, those with physical limitations, and those requiring expedited care. Therefore, waiting time is a crucial dimension in assessing the quality of healthcare services at community health centers.

Long wait times can diminish patients' perceptions of overall service quality, even if the medical treatment provided complies with established procedures. Patients who wait too long tend to feel tired, bored, and under-served. Conversely, prompt, clear, and organized service can increase patient comfort and strengthen patient trust in the healthcare facility. This demonstrates that managing wait times is not solely about queue management, but also about service management and the staff's ability to respond to patient needs.

Sabokingking Community Health Center, Palembang, serves the surrounding community and plays a crucial role in providing basic healthcare services. The high demand for community health

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center services can lead to queues and impact patient waiting times. If queue management is suboptimal, this situation can potentially lower patient satisfaction and undermine public trust in healthcare services. Therefore, research into the effect of waiting times on patient satisfaction at Sabokingking Community Health Center, Palembang, is crucial for evaluating service quality improvement.

The ongoing problem of long waiting times in various healthcare facilities, both community health centers and hospitals, can impact patient assessments of service quality. According to Prasastin and Rahmah (2025), healthcare quality is closely related to the responsiveness of staff in providing services. Patients generally expect fast, clear, and efficient service. Excessively long service times, especially when waiting rooms are crowded and queues move slowly, often trigger discomfort. Daryono (2024) also emphasized that patient satisfaction depends not only on treatment outcomes but also on the experience of receiving healthcare services, including the speed of the process and staff communication.

Previous research has shown that service waiting time has a strong relationship with patient satisfaction. Rendra et al. (2024) found a significant relationship between drug service response time and patient satisfaction with a significance value of 0.003. Percunda et al. (2024) also reported that waiting times exceeding the standard are still common and have a negative impact on patient satisfaction. Research by Wijayanti and Rejeki (2024) showed that outpatient services with shorter waiting times can improve patient satisfaction. These findings are supported by Gurusinga et al. (2025) who concluded that most studies show a significant relationship between service waiting time and patient satisfaction in healthcare facilities.

Patient satisfaction is a crucial indicator of successful healthcare services because it directly impacts public trust. Fatrida et al. stated that fast, accurate, and responsive service can increase patient comfort and loyalty to healthcare facilities. Fitriyani et al. (2025) emphasized that the quality of healthcare services depends not only on the technical aspects of waiting time but also on the patient's emotional well-being. Uncertainty during the wait can decrease satisfaction, while attentiveness from the service provider can increase positive patient perceptions of the overall service.

This study aims to analyze the effect of waiting time on patient satisfaction at the Sabokingking Community Health Center in Palembang. The study focused on two variables: waiting time and patient satisfaction. This study is expected to provide the community health center with an empirical understanding of the importance of managing waiting time as part of efforts to improve the quality of healthcare services.

METHOD

This study used a quantitative approach with a survey method. This approach was chosen because this study aims to measure the relationship between variables through numerical data and examine the effect of service waiting time on patient satisfaction. The survey method was used to obtain direct assessments from patients regarding their experiences receiving healthcare services at the Sabokingking Community Health Center in Palembang.

The population in this study were patients receiving services at the Sabokingking Community Health Center in Palembang. The sample consisted of 60 patient respondents. Data collection was conducted by distributing a Likert-scale questionnaire containing statements regarding the variables of service waiting time and patient satisfaction. The variable of service waiting time includes aspects of service speed, queue order, and service process accuracy. The variable of patient satisfaction includes comfort, service assessment, staff responsiveness, and patient perception of service quality.

The collected data were analyzed using the SPSS application. The analysis stages included a validity test to measure the feasibility of each statement item, a reliability test to assess the

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consistency of the instrument, a normality test to ensure data distribution, heteroscedasticity and multicollinearity tests to test the feasibility of the regression model, and a simple regression analysis to determine the direction and magnitude of the influence of the service waiting time variable on patient satisfaction. Furthermore, the t-test and F-test were used to test the significance of the influence, while the coefficient of determination was used to determine the magnitude of the contribution of the service waiting time variable to patient satisfaction.

RESULTS AND DISCUSSION

1. Validity and Reliability Test

Validity and reliability tests were conducted to ensure that each statement in the questionnaire accurately describes the conditions being studied. Validity testing was performed using the Corrected Item-Total Correlation value, while reliability was measured using Cronbach's Alpha. A research instrument was deemed suitable if each item had an adequate correlation and a high reliability value.

Table 1. Validity Test of Service Waiting Time

Item	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
X1	21.00	79,220	.796	.957
X2	21.00	77,017	.895	.951
X3	21.00	77,220	.886	.952
X4	21.00	78,746	.817	.956
X5	21.00	78,068	.847	.954
X6	21.00	77,051	.894	.951
X7	21.00	78,203	.841	.954
X8	21.00	79,492	.784	.958

Table 1 shows that all items in the service waiting time variable have high Corrected Item-Total Correlation values, ranging from 0.784 to 0.895. This indicates that each statement consistently measures patient experience regarding service length, queues, and staff speed. Items X2 and X6 are the strongest indicators because they obtained the highest correlation values. Thus, all items in the service waiting time variable are declared valid and suitable for use as research instruments.

Table 2. Patient Satisfaction Validity Test

Item	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
Y1	27.00	116,475	.845	.948
Y2	27.00	115,797	.869	.947
Y3	27.00	117,627	.803	.950
Y4	27.00	119,254	.745	.952
Y5	27.00	116,881	.830	.949
Y6	27.00	117,390	.812	.950
Y7	27.00	118,169	.784	.951
Y8	27.00	120,136	.715	.954
Y9	27.00	117,051	.824	.949
Y10	27.00	117,627	.803	.950

Table 2 shows that all patient satisfaction variable items have high Corrected Item-Total Correlation values, ranging from 0.715 to 0.869. These values indicate that each statement adequately represents patient satisfaction with community health center services. Item Y2 is the most dominant indicator, while item Y8 has the lowest value but remains in the valid category. Therefore, all patient satisfaction variable items can be used in this study.

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Table 3. Reliability Test of Service Waiting Time

Cronbach's Alpha	N of Items
.960	8

Table 3 shows a Cronbach's Alpha value of 0.960 for the service waiting time variable, with eight items. This value is considered very high and indicates strong consistency among respondents' responses to each item. Therefore, the service waiting time variable instrument is considered highly reliable and suitable for use in the analysis process.

Table 4. Patient Satisfaction Reliability Test

Cronbach's Alpha	N of Items
.955	10

Table 4 shows a Cronbach's Alpha value of 0.955 for the patient satisfaction variable for 10 statement items. This value reflects the very high consistency of respondents' responses. This means that the items in the patient satisfaction variable support each other and produce stable data. Therefore, the patient satisfaction instrument is considered highly reliable.

2. Classical Assumption Test

Classical assumption tests were performed to ensure that the regression model met the analysis requirements. These tests included normality, heteroscedasticity, and multicollinearity. Normality tests were performed to assess data distribution patterns, while heteroscedasticity and multicollinearity tests were performed to ensure there were no disturbances in the regression model.

Table 5. Normality Test

Information	Mark
N	60
Mean Residual	.0000000
Standard Deviation	6.15145176
Test Statistics	.053
Asymp. Sig. (2-tailed)	.200

The normality test results showed an Asymp. Sig. value of 0.200. Because this value is greater than 0.05, the research data is considered normally distributed. The mean residual value, which is close to zero, also indicates that the model's prediction error is relatively small. Thus, the data is suitable for further analysis.

The heteroscedasticity test showed that the residual points were randomly distributed above and below zero and did not form a specific pattern. This distribution pattern indicates that the regression model does not experience heteroscedasticity. Therefore, the regression model is suitable for analyzing the effect of service waiting time on patient satisfaction at the Sabokingking Community Health Center in Palembang.

Table 6. Multicollinearity Test

Model	B	Std. Error	Beta	t	Sig.	Tolerance	VIF
(Constant)	4,095	2,169		1,888	.064		
Total_Y	.663	.067	.792	9,875	.000	1,000	1,000

The tolerance and VIF values for the research variables were 1.000. This value is within the safe limit and indicates the absence of multicollinearity in the research model. Therefore, the relationship between service waiting time and patient satisfaction can be analyzed reasonably without any interference from the independent variables.

3. Simple Regression Analysis

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Simple regression analysis was used to determine the direction and magnitude of the effect of waiting time on patient satisfaction. This test is important because waiting time can influence patients' perceptions of the overall quality of healthcare services.

Table 7. Simple Regression Analysis Test

Model	B	Std. Error	Beta	t	Sig.
(Constant)	4,095	2,169		1,888	.064
Total_Y	.663	.067	.792	9,875	.000

The regression coefficient value of 0.663 indicates that improving the quality of service waiting times is positively correlated with patient satisfaction. A beta value of 0.792 indicates a fairly strong relationship, while a significance value of 0.000 indicates a significant effect. Therefore, better management of service waiting times leads to increased patient satisfaction.

4. Hypothesis Testing

Hypothesis testing was conducted to determine whether the influence of the research variables was statistically proven. Testing was conducted using t-tests, F-tests, and coefficients of determination. The test results were used to determine whether service waiting time significantly impacted patient satisfaction.

Table 8. t-test

Variables	t	df	Sig. (2-tailed)	Mean Difference	Lower	Upper
Total_X	18,456	59	.000	24,000	21.40	26.60
Total_Y	19,331	59	.000	30,000	26.89	33.11

The t-test results show that the service waiting time variable has a calculated t-value of 18.456, while the patient satisfaction variable has a calculated t-value of 19.331. Both have a significance value of 0.000, which is below 0.05. These results indicate that service waiting time has a significant effect on patient satisfaction at the Sabokingking Community Health Center in Palembang.

Table 9. F Test

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	3753.419	1	3753.419	97,510	.000
Residual	2232,581	58	38,493		
Total	5986,000	59			

The F-test results showed an F-value of 97.510 with a significance level of 0.000. A significance value of less than 0.05 indicates that the research model is feasible and that service waiting time has a significant impact on patient satisfaction. This reinforces the idea that service efficiency that minimizes waiting time can improve patient satisfaction.

Table 10. Determination Coefficient Test

Model	R	R Square	Adjusted R Square	Standard Error of the Estimate
1	.792	.627	.621	6,204

The R-square value of 0.627 indicates that waiting time for service explains 62.7% of the patient satisfaction. The remaining 37.3% is influenced by factors outside the study, such as facility comfort, staff communication, environmental conditions, and the attitudes of healthcare workers. Thus, waiting time is an important, but not the sole, factor in determining patient satisfaction.

5. Discussion

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Research findings at the Sabokingking Community Health Center in Palembang indicate that waiting time for services has a positive and significant impact on patient satisfaction. This result is supported by simple regression analysis, t-tests, F-tests, and coefficients of determination. Service speed has been shown to be a crucial aspect of the patient experience when receiving healthcare services. Patients generally expect fast, clear, and efficient service processes, so excessively long service times can reduce comfort and impact overall service quality.

The results of this study align with Purba et al.'s (2026) theory of patient satisfaction, which explains that satisfaction arises when the service received meets patient expectations. In the context of community health center services, these expectations relate not only to medical procedures but also to the queuing process, administrative speed, staff friendliness, and clarity of service flow. Short wait times make patients feel more cared for, while long wait times can create the impression of less responsive service.

Prasastin and Rahmah's (2025) perspective on healthcare quality also supports the findings of this study. Service quality is measured not only by the success of medical procedures but also by the patient's experience during the care process. Waiting time is part of the responsiveness dimension because it indicates how quickly staff respond to patient needs. If queues are organized and processes are efficient, patients will have a more positive perception of the care they receive.

Research by Rendra et al. (2024) demonstrated a significant relationship between response time for drug services and patient satisfaction. The results of the study at the Sabokingking Community Health Center in Palembang showed a similar pattern: patients tended to rate services more favorably when service was prompt and queues moved smoothly. For patients, time is not just measured in minutes; it also relates to feelings of fatigue, anxiety, and boredom while waiting. Therefore, prompt service can make patients feel more valued.

Support for this finding is also seen in research by Gurusinga et al. (2025), who concluded that most studies show a significant relationship between waiting time for services and patient satisfaction at healthcare facilities. The coefficient of determination of 62.7% in this study indicates that waiting time contributes significantly to patient satisfaction. However, patient satisfaction is still influenced by other factors, such as staff communication, waiting room comfort, clarity of information, and the attitude of healthcare workers.

Based on these results, the Sabokingking Community Health Center in Palembang needs to optimize queue management, clarify service flows, improve coordination between staff, and utilize a more structured administration system. These efforts are expected to shorten wait times without compromising the quality of medical care. With good wait time management, the community health center can improve patient comfort, strengthen public trust, and encourage continuous improvement in the quality of healthcare services.

CONCLUSION

Based on research at the Sabokingking Community Health Center in Palembang, it can be concluded that waiting time for services has a positive and significant impact on patient satisfaction. Patients assess services not only by the outcome of treatment, but also by the process they experience from arrival to receiving medical treatment. Excessively long wait times can trigger feelings of fatigue, boredom, and discomfort, while prompt and organized service can increase positive perceptions of service quality.

The test results indicate that the research instrument is valid and reliable. The Cronbach's Alpha value for the service waiting time variable is 0.960 and for the patient satisfaction variable is 0.955. The simple regression results show a coefficient value of 0.663 with a significance of 0.000. The t-test and F-test also show a significance value below 0.05, so the research hypothesis is accepted. The R Square value of 0.627 indicates that service waiting time explains patient satisfaction by 62.7%, while the other 37.3% is influenced by other factors outside the study.

Sabokingking Community Health Center in Palembang is recommended to improve service effectiveness through more orderly queue management, clearer service flows, increased staff responsiveness, and more efficient use of administrative systems. Further research could examine other factors influencing patient satisfaction, such as facility comfort, staff communication quality, healthcare provider friendliness, and the service environment.

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