

Article

RELATIONSHIP BETWEEN RESPONSE TIME LEVEL OF PATIENT HANDLING WITH PATIENT SATISFACTION LEVEL IN EMERGENCY OF KLAKAH LUMAJANG COMMUNITY HEALTH CENTERTomoi¹, Ro'isah², Zainal Abidini³^{1,2}Faculty of Health, Hafshawati University, Jawa Timur, Indonesia³Faculty of Nursing, Jember University, Jawa Timur, Indonesia

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A B S T R A C T

The health center is one of the health facilities that are widely used by the community where the health center and its network are the spearhead of health services in Indonesia. Response time is an indicator of speed and accuracy in handling patients which is calculated from the time the patient arrives until the patient is treated. The purpose of this study was to determine the Relationship between the Level of Response Time Speed of Patient Handling and the Level of Patient Satisfaction in the Emergency Room of the Klakah Health Center. In this study, the sample determination used the Accidental Sampling method and a Cross-sectional research design with data collection techniques using questionnaires and observations. The population in this study was 100 emergency room patients who met the inclusion and exclusion criteria, with a sample of 80 respondents. The results obtained that the Level of Response Time Speed of Handling Patients in the Emergency Room of Klakah Health Center, Lumajang Most of them are in the fast category, namely 67 people (83,8%), in the slow category there are 12 respondents, namely (15%) and in the very slow category there is 1 respondent, namely (1.3%). This finding indicates that response time greatly influences the level of patient satisfaction at the Klakah Health Center Emergency Department in the fast category, namely 67 people (83.8%).

I. INTRODUCTION

Emergency is a condition that threatens life and disability, so it requires fast, precise, effective and quality action (Indriono, 2020). The Emergency Room (IGD) is a leading service system for every emergency that occurs in everyday life or disasters (Nhdi et al., 2021). The purpose of services in the ER

is to stabilize and meet patient needs according to the level of emergency (Ministry of Health, 2018). ER services are an important component because patients will receive first aid and avoid various risks, such as death and disability. ER services also deal with victims of cardiac emergencies, accidents, and other disasters that

require immediate intervention (Setyawan et al., 2019).

Response time or timeliness given to patients who come to the ER requires standards according to their competence and abilities so that they can guarantee emergency treatment with a fast response time and appropriate treatment. This can be achieved by improving facilities, 3 infrastructure, human resources and hospital emergency room management according to standards (Isrofah, Indriono and Setiyarso, 2020).

A community health center is a health service facility that organizes public health efforts and first-level individual health efforts, prioritizing promotive and preventive efforts to achieve the highest level of public health in its working area according to Minister of Health Regulation Number 75 of 2014. A community health center is one of the health facilities that is widely used by the community where the community health center and its network are the spearhead of health services in Indonesia (Ivana et al., 2020). As the spearhead of health services and development in Indonesia, community health centers need attention, especially regarding the quality of community health center health services so that in this case the community health center is required to always improve the professionalism of its employees and improve its health facilities or facilities to provide satisfaction to the community of health service users (Mulyati et al., 2020). Indonesia is an ASEAN country that has a lot of patient visits to the Emergency Installation. Data on visits in 2007 reached 4,402,205 patients (13.3% of the amount visits at the RSU) with the number of visits 12% of the ER visits coming from referrals with the number of General Hospitals 1,033 units from 1,319 existing Hospital units. This significant number then requires considerable attention with emergency patient

services (Minister of Health Decree, 2010) The results of Anggraini's research (2011) explain the results of a survey on nursing services in the ER of one of the Hospitals in Indonesia which was conducted on September 27, 2010 with direct interviews with patients. Interview results from 10-20 patients who were treated in the ER, two patients (20%) stated that they were dissatisfied with the services provided, namely from the nurse's assessment in responding to patient complaints about their illnesses, six patients (60%) stated that they were satisfied with the interaction/attention between nurses and patients that was lacking, two patients stated that they were dissatisfied with the time in providing services that were lacking, such as not giving patients the opportunity to ask about their illnesses, and one patient was dissatisfied with safety, such as the nurse's lack of attention to restless patients. According to the World Health Organization (WHO), there are several diseases that are considered emergencies and causes of death in the world, including ischemic heart disease 7.4 million (13.2%), stroke 76.7 million (11.9%), chronic obstructive pulmonary disease 3.1 million (5.6%), lower respiratory infections 3.1 million (5.5%), and cancer 1.6 million (2.9%), cases of injury or accidents cause 1.2 million deaths. From several cases that occur, it is necessary to improve the quality of health services in accordance with standards including the level of knowledge of health workers in the emergency installation (Surtiningsih, 2016).

The World Health Organization (WHO) has explained how important it is to implement first aid in emergency cases as stated in the Basic Life Support (BLS) concept, where emergency medical services must have the principle of effective and efficient assistance in dealing with diseases and injuries and can provide quality medical services for

patient safety. Emergency response time is a fundamental factor in care so that control is needed to increase the chances of survival and reduce the increasing severity of a disease (Cabral et al., 2018).

The impact that occurs if the response time is slow will result in patient conditions such as damage to internal organs such as lung disease, severe asthma attacks (respiratory failure), acute kidney failure, brain cells are damaged or complicated, disability and even death. Based on the decision of the Indonesian Minister of Health number 129 / Menkes / SK / II / 2008 concerning minimum hospital service standards, response time is one of the indicators of hospital service quality, especially in the Emergency Installation. In 2009, the Minister of Health has established the general principle of emergency patient handling (Response Time) must be handled no later than five (5) minutes after arriving at the emergency installation. Indonesia is one of the countries in ASEAN with a high accumulation of patient visits to the Emergency Installation. Data shows that the number of patients visiting the Emergency Installation reached 4,402,205 patients in 2017 (Ministry of Health of the Republic of Indonesia, 2019). This figure is an accumulation of 12% of Emergency Installation visits originating from referrals from RSU, namely 1,033 units and 1,319 other hospital units. Then, in 2018, in Central Java there were 1,990,104 patient visits to the hospital (Ministry of Health of the Republic of Indonesia, 2019). Based on the results of a preliminary study on May 6, 2024, from 10 patients who received services at the Klakah Health Center Emergency Room, data was obtained that 60% of patients received services from officers 10 minutes after entering the Emergency Room and 30% of patients received services from officers 8 minutes after entering the Emergency

Room and 10% of patients received services 5 minutes after entering the Emergency Room. The results of this study are also supported by research on the relationship between service response time and patient satisfaction levels that the response time with patient satisfaction levels in the satisfied category was 43.3%, and the response time was less than satisfied was 100% in the Emergency Room of Batang Hospital and the results of research on patient satisfaction in the Emergency Room of Batang Hospital showed that 41.9% were satisfied 41.9%, felt very satisfied 28.0% and felt less than satisfied as much as 30.1% (Isofrah, Indriono & Teguh, 2019).

According to Karokaro et al. (2020), response time is one of the indicators of service quality that affects patient satisfaction. The faster the nurse in handling the patient, the higher the satisfaction felt by the patient and vice versa, the slower the response given by the nurse, the lower the patient satisfaction.

II. METHODS

Research design is a systematic way used to obtain answers to research questions (Masturoh, 2019). This type of research uses a quantitative approach with an analytical type of correlation and cross-sectional design. This study aims to describe the phenomenon in the form of form, activity, characteristics, changes, relationships, similarities, and differences between one phenomenon and another which are then analyzed to determine how much relationship arises from the phenomenon (Hasdianah, 2016). While cross-sectional is a study that aims to study the dynamics of the correlation between risk factors and effects, by means of an approach, observation or data collection at the same time (snapshot of the population) (Nursalam, 2016).

III. RESULT

The results of this study present two main data, namely general data and specific data. General data contains characteristics of patient identity in the Emergency Room of Klakah Health Center. Meanwhile, specific data presents the results of the analysis of research variable data in the form of the level of response time speed of patient handling with the level of patient satisfaction in the Emergency Room of Klakah Health Center, which is presented as follows:

1. General Data

a. General Description

The research location is in the Emergency Room of Klakah Lumajang Health Center with a amount of 80 respondents. The general data displayed consists of: respondent age, gender, education, and occupation.

b. Respondent Characteristics in General Data from this study include the following respondent characteristics:

1) Respondent Characteristics Based on Age in Patients at the Emergency Room of Klakah Lumajang Health Center

Table 1. Frequency distribution of patients at the Emergency Department of Klakah Health Center based on age in July 2024.

NO	Age	Frequency	Percentage (%)
1	19-40	53	66.25
2	Years old 40-65 Years old	27	33,75
	Amount	80	100

Based on table 1, it was found that the age of the largest number of patients in the Emergency Room of the Klakah Lumajang Health Center when the study was conducted was young adult patients, namely 19-40 years old (66.25%).

2) Respondent Characteristics Based on Gender in Patients at the Emergency Room of Klakah Lumajang Health Center

Table 2. Frequency Distribution of Patients at the Emergency Room of Klakah Health Center Based on Gender in July 2024

NO	Gender	Frequency	Percentage (%)
1	Male	42	52.5
2	Female	38	47.5
	Amount	80	100

Based on table 2, it was found that the majority of patients in the Emergency Room of the Klakah Lumajang Health Center during the research were male, namely 42 people (52.5%).

3) Respondent Characteristics Based on Occupation of Patients at the Emergency Room of Klakah Lumajang Health Center

Table 3. Frequency Distribution of Patients at the Emergency Department of Klakah Health Center Based on Occupation in July 2024

NO	Occupation	Frequency	Percentage (%)
1	Doesn't Work	13	16.3
2	Work	67	83.8
	Amount	80	100

Based on table 3, it was found that the majority of patients in the Emergency Room of the Klakah Lumajang Health Center when the research was conducted were working, namely 67 people (83.8%).

4).Characteristics of Respondents Based on Education Level in Patients at the Emergency Room of Klakah Lumajang Health Center

Table 4. Frequency Distribution of Patients at the Emergency Department of Klakah Health Center Based on Education Level in July 2024

NO	Pendidikan	Frequency	Percentage (%)
1	Elementary School	49	61.3
2	JHS	19	23.8
3	SHS	11	13.8
4	College	1	1
Amount		80	100

Based on table 4, it was found that the level of education of the patients at the Klakah Lumajang Health Center Emergency Department showed that the majority had an elementary school education, namely 49 people (61.3%).

2. Specific Data

Specific data in this study is to identify the response time of patient handling with the level of patient satisfaction in the Emergency Room of Klakah Health Center, Lumajang. Cross table of the relationship between the response time of patient handling with the level of patient satisfaction in the Emergency Room of Klakah Health Center, Lumajang

Table 5. Frequency Distribution of Emergency Room Patients at Klakah Health Center Based on the Level of Response Time for Patient Handling in July 2024

NO	Speed level	Frequency	Percentage (%)
1	Fast	67	83.8
2	Slow	12	15.0
3	Very Slow	1	1.3
Amount		80	100

Based on table 5, it can be seen that the level of response time speed in handling patients at the Emergency Room of Klakah Health Center, Lumajang, is

mostly in the fast category, namely 67 people (83.8%), in the slow category there are 12 respondents, namely (15%) and in the very slow category there is 1 respondent, namely (1.3%).

Table 6 Frequency Distribution of Patients in the Emergency Room of Klakah Health Center Based on Patient Satisfaction Level in July 2024

NO	Satisfaction Level	Frequency	Percentage (%)
1	Quite satisfied	13	16.3
2	Satisfied	41	51.2
3	Very Satisfied	26	32.5
Amount		80	100

Based on table 6, it is known that the level of satisfaction at the Emergency Room of Klakah Lumajang Health Center is mostly in the satisfied category, namely 41 people (51.2%).

Table 7 Cross Table of Response Time Speed Level of Patient Handling with Patient Satisfaction Level at the Emergency Room of Klakah Lumajang Health Center.

Speed level	Satisfaction Level			Amount
	Quite satisfied	Satisfied	Very Satisfied	
Fast	0	41	26	67
Slow	12	0	0	12
Very Slow	1	0	0	1
Amount	13	41	26	80

		Speed Level	satisfaction level
Speed Level	Correlation Coefficient	1.000	-.702**
	Sig. (1-tailed)	.	.000
satisfaction level	Correlation Coefficient	.702*	1.000
	Sig. (1-tailed)	.000	.
		N	80

Based on table 7 above, it is found that the level of speed of Response Time in handling patients in the Emergency Room of Klakah

Health Center obtained the Spearman Rank statistical test obtained $p = 0.000 < \alpha = 0.05$, meaning that the H_0 test decision is rejected and H_1 is accepted so it is concluded that there is a significant relationship between the level of speed of Response Time in handling patients and the level of patient satisfaction in the Emergency Room of Klakah Health Center. at the level of satisfaction, which is 0.702, it is said to be a strong relationship.

IV. DISCUSSION

This section describes the results of the study consisting of a general description of the research location, Response Time speed level, patient satisfaction level, and the results of the study related to the Relationship between Response Time Speed Level and patient handling at the Emergency Room of Klakah Health Center, Lumajang.

1) General Description of Research Location

Klakah Health Center is one of the Health Centers in Lumajang Regency which has a working area covering one Klakah District consisting of 12 villages. The Health Center is a public service center with the main objective of maintaining and improving health and preventing disease without ignoring disease healing and health recovery.

2) Identification of the level of response time speed in handling patients in the Emergency Room of Klakah Lumajang Health Center

Response time is the speed of serving or taking action quickly to emergency patients (Mardalena, 2019). Based on several opinions, it can be concluded that the achievement of the Response Time standard for health workers in emergency room services is influenced by the availability of facilities and infrastructure, the availability of special health workers in triage, physical workload, human resources and a good emergency room management system and the level of patient characteristics. Response time is the time calculated

from the time the patient arrives at the hospital door until receiving a response or response time from the emergency room officer until the emergency handling process is complete. Response time is said to be on time and not too late if the time required does not exceed the average standard time. One indicator of the success of medical treatment for emergency patients is the speed of providing adequate assistance to emergency patients both in everyday situations or during disasters (Wulandari et al., 2020). Based on the results of the study, it is known that the Level of Response Time Speed of Patient Handling in the Emergency Room of Klakah Lumajang Health Center is mostly in the fast category, namely 67 people (83.8%), in the slow category there are 12 respondents, namely (15%) and in the very slow category there is 1 respondent, namely (1.3%).

In the researcher's observations, the average response time of nurses in independent actions is 2 minutes, and 8 minutes for collaborative actions. the longest time in carrying out independent actions is 15 minutes. This happens because the emergency room is overcrowded. These results are in accordance with Kundiman's research (2019) which proves a relationship between overcrowded and triage accuracy.

In line with the results of this study supported by research on the relationship between nurse response time and patient satisfaction levels, it explains that the response time or nurse response time when the patient arrives at the Emergency Room of Santa Elisabeth Hospital explains the correct response time ≤ 5 minutes, which is 82.2%, and the inappropriate response time > 5 minutes, which is 17.2%, and patient satisfaction is obtained by 24.1% who are dissatisfied and 75.9% who are satisfied (Sinurat, Angin & Sepuh, 2010). The results of the study on the

relationship between nurse response time and patient satisfaction showed that the most respondents were nurses who did a fast response time ≤ 5 and patients felt satisfied as many as (51.4%), and a slow response time > 5 minutes and patients felt dissatisfied as many as (43.5%) in the Emergency Room of Prof. Dr. D Hospital and patient satisfaction in the Emergency Room of Prof. Dr. D Hospital. It can be seen from the results of the study that the faster the nurse's response time to patients, the higher the level of satisfaction will be and vice versa (Mahyudin et al., 2021)

3) Identification of the level of patient satisfaction in the Emergency Room of Klakah Lumajang Health Center

According to (Muninjaya, 2011) patient satisfaction is an indicator of the success of personalizing health services. Satisfaction is defined as the client's response to the similarity of the level of needs or expectations of the client before they receive services and after they receive services. Client satisfaction can be defined as the response of the service recipient to the difference between perceived interests and performance. A good relationship between agents and clients increases patient satisfaction, because patients will share experiences with family, neighbors or others.

Based on the study, it is known that the Level of Satisfaction in the Emergency Room of Klakah Lumajang Health Center Most of them are in the satisfied category, namely 41 people (51.2%), in the very satisfied category there are 26 respondents, namely (32.5%) and in the less satisfied category there are 13 respondents, namely (16.3%).

In line with the results of the study According to Stuart, quoted by Kaban (2015), St. Louis mid Missouri in the United States about the quality of nursing services regarding patient satisfaction got the result that 50% of patients were not satisfied with the

services provided by nurses to patients, nurse services are sometimes ineffective in the dimension (responsiveness). Data from the Indonesian Ministry of Health in 2018 that the average data results from several hospitals in Indonesia showed 67% of clients who complained of dissatisfaction in receiving health services. The results of the study above, supported and strengthened by Heffernan's research (2016) in Queens, Nassau USA that 84.96% 44 regarding satisfaction with IGD services, respondents said that they were not satisfied with the health services provided by nurses. Data from the Indonesian Ministry of Health in 2018 that the average data results from several hospitals in Indonesia showed 67% of clients who complained of dissatisfaction in receiving health services

This is in accordance with Eko Widodo's research (2015) which states that health workers in the ER should know that the quality of service, be it responsiveness, empathy, reliability, tangibility or assurance, can maintain the satisfaction of patient families in the ER at a high level. From the results of the questionnaire, the level of satisfaction of patients in the ER of the Klakah Health Center was on average satisfied with receiving services in the ER, namely 41 respondents, from here we can see that each nurse has a good awareness to provide satisfaction to both patients and their families with a good response time. The indicator is that most of the patient's families are at a high level of satisfaction, namely at a satisfied level of 51.2%.

4) Relationship between the Level of Response Time Speed of Patient Handling and the Level of Patient Satisfaction in the Emergency Room of Klakah Health Center, Lumajang

Response Time or nurse response time can be influenced by internal and external factors. Where internal factors

are found in a nurse or other staff such as nurses who are not yet proficient in carrying out nursing actions, and delays in handling patients, or patients who have to wait for inadequate facilities. While external factors are where nurses prioritize emergency patients, lack of health workers, nurses who have to take patients to other rooms because they do not have special officers to mobilize patients (Aprianti, 2015).

Maatilu (2014) the success of management such as punctuality in providing support is not only carried out in everyday situations because the success of emergency medical care (ER) in any situation such as a disaster. The success of response time is said to be good if it can prevent errors at the scene of the incident on the way to the hospital, which is why response time is very dependent on the speed and quality of medical assistance. Based on the research, it was found that the level of speed of Response Time for handling patients in the Emergency Room of Klakah Health Center after the Spearman Rank statistical test was obtained $p = 0.000 < \alpha = 0.05$, meaning that the H_0 test decision was rejected and H_1 was accepted, so it was concluded that there was a significant relationship between the level of speed of Response Time for handling patients and the level of patient satisfaction in the Emergency Room of Klakah Health Center. at the level of satisfaction, which is 0.702, it is said to be a strong relationship. In line with the results of this study, it is supported by research on the results of this study are also supported by research on the relationship between service response time and patient satisfaction that the response time with the level of patient satisfaction in the satisfied category was 43.3%, and the response time was less satisfied was 100% in the Emergency Room of Batang Hospital and the results of research on patient satisfaction in the

Emergency Room of Batang Hospital showed that 41.9% felt satisfied 41.9%, felt very satisfied 28.0% and felt less satisfied as much as 30.1% (Isofrah, Indriono & Teguh, 2019). The results of the study on the relationship between nurse response time and patient satisfaction showed that the most respondents were nurses who did a fast response time ≤ 5 and patients felt satisfied as many as (51.4%), and a slow response time > 5 minutes and patients felt dissatisfied as many as (43.5%) in the Emergency Room of Prof. Dr. D Hospital and patient satisfaction in the Emergency Room of Prof. Dr. D Hospital showed that respondents who were satisfied were (38.3%), respondents who were less satisfied were (33.3%) and respondents who were dissatisfied (28.3%). Internal and external factors can be influenced by response time or response time. When internal factors end up with nurses or other staff such as nurses who are not competent to perform nursing operations and delays in client care or clients are required to wait in fewer facilities. Although external factors are where nurses pay more attention to emergency patients, lack of medical personnel, nurses are required to move clients to another room because no one mobilizes clients, the conclusion of this analysis is supported by (Pisu, 2015) which shows that emergency services provide a response time that is felt to be fast, but there are still respondents who admit that their response time is fast, the nurse's response time is still slow. Because there are still nurses who are slow to respond to clients, the quality of nursing care for patients is still lacking, and the health center infrastructure is still limited by the number of patients who come to the ER at the same time. In the ER, letting other patients get slow service because they are waiting for treatment, this situation is felt by patients in the ER as uncomfortable so that patients are

unhappy. Therefore, the role of nurses is very important because in addition to being the spearhead of the health center in the Emergency Installation and inpatient care, the role of nurses greatly determines the level of patient satisfaction, because every individual definitely wants to get the best service, especially in health services. Patients who come to the health center expect speed and accuracy in handling and providing services so that patients feel satisfied with the services provided. The quality of health services can also be improved according to patient expectations through improvement efforts concerning facilities, procedures, services, and other technical aspects. So in the Klakah Health Center Emergency Room, only one person is waiting for the patient because so far at the Klakah Health Center when the patient enters the ER, all relatives and family members enter the IGD room, so that it can provide a sense of comfort for nurses and patients to improve the quality at the Klakah Health Center.

5) Research Limitations

Research limitations are part of nursing research that explains the limitations in writing research, in every writing there must be weaknesses, these weaknesses are written in limitations (Hidayat, 2018). The limitations in this study are that patients were not accompanied by family when entering the ER and also the patient's family refused to be given a questionnaire sheet, then the officer who gave the questionnaire sometimes gave the questionnaire to patients who were not p2 or who needed invasive treatment.

V. CONCLUSION

1. Level of Response Time Speed of Patient Handling at the Emergency Room of Klakah Health Center, Lumajang Most of them are in the fast category, namely 67 people (83.8%), in the slow category there are 12

respondents, namely (15%) and in the very slow category there is 1 respondent, namely (1.3%).

2. Level of Satisfaction in the Emergency Room of Klakah Health Center, Lumajang Most of them are in the satisfied category, namely 41 people (51.2%), in the very satisfied category there are 26 respondents, namely (32.5%) and in the less satisfied category there are 13 respondents, namely (16.3%)

3. There is a Relationship between the Level of Response Time Speed of Patient Handling and the Level of Patient Satisfaction in the Emergency Room of Klakah Health Center, Lumajang, by conducting the Spearman Rank statistical test, it was obtained $\rho = 0.000 < \alpha = 0.05$, meaning that the H_0 test decision was rejected and H_1 was accepted, so it was concluded that there is a significant relationship between the Level of Response Time Speed of Patient Handling and the level of patient satisfaction in the Emergency Room of Klakah Health Center. While for the criteria for the strength of the correlation in determining the level of strength of the relationship between variables according to the table above for the correlation coefficient value at the Response Time Speed Level, which is 1.00, it is said to be a perfect relationship. at the satisfaction level, which is 0.702, it is said to be a strong relationship.

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