Implementation of Islamic values in Indonesia's hospital

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Abstract

Objective: This research aims to describe the implementation of Islamic values in Indonesia's toward their patient health services.

Methods: This study used a descriptive observational with a cross-sectional design. The data obtained were from two phases of analysis. The first phase, researchers collected data on Islamic Hospitals in Indonesia through a website that has Islamic words in its vision, mission, and objectives. The second phase, distributing questionnaires in Google form via the internet.

Result: The researchers listed 19 Islamic words in the vision, mission, and objectives, formed in 10 themes. They were faith (Imaan)-Sholeh-Akhlaqul Khaimah, innovation, the welfare of people, social duties, nature of the prophet, work as worship, trust, and sincerity, friendship, greetings, and sharia principles.

Conclusion: The implementation of sharia values in most Islamic hospital staffs in Indonesia still focuses on self-improvement and innovation, but it is still not optimal in the staffs' operational activities in the hospitals.

KEYWORDS: Shariah value; Islamic hospital

Introduction

Indonesia is a country with Muslims as the majority as much as 88% of the total population (1). The Government responds to meet the needs of religiosity by applying Islamic values, one of them being in the field of health. The practice of Islamic or Sharia value is in the form of medication procedure and food diet in hospitals, known as Sharia Compliant Hospital (2).

Yahya reveals that the application of sharia principles in hospitals makes hospital staff should understand the principles of sharia, like covering 'awrah, Salah, no smoking, and the staffs work process should be following standard operational procedures (SOP) based on sharia values and using technology based on sharia provisions, especially in terms of abortion, transgender, sperm bank, and so on (2).

The implementation of sharia principles in-hospital services gets positive effects. Islamic Friendly hospital could increase satisfaction, comfort for its patients (3), benefit in physical healing, meet the spiritual needs patients' (4), so the patients can be patient and always pray (5). Because of the quality in the health services given by the hospitals, administration process, clinical process, social responsibility, and compassion from its staff (3). Also, the practice of sharia principles in hospitals may increase the

staffs' awareness to do the morning prayer, implement the prayer guide to patients, and provide Islamic reading materials (4).

Islam Organization in Indonesia, from 2010 to 2015, has Islamic Hospitals as charity virtue as much as 457 hospitals with visions, missions, and purposes based on Islamic values to give health service to the patients, but only two of those hospitals have sharia certification, which is Islamic Hospital Sultan Agung in Semarang and Islamic Hospital in Bantul (6), the sharia principles shown through its visions (7). The purpose of this study is to describe the implementation of Islamic values in terms of health service in Islamic Hospitals in Indonesia.

Method

This study used descriptive observational with a cross-sectional design. The researchers obtained the data through two phases from July to August 2018.

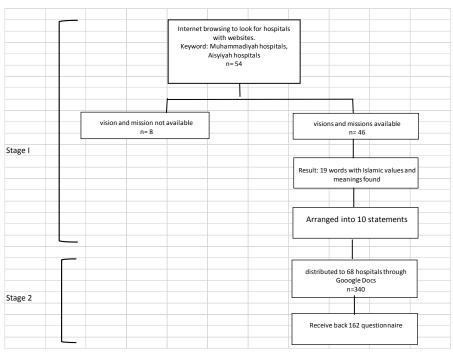


Figure 1 Phases of Data Collection

In the first phase, the researchers collected the data of Islamic Hospitals in Indonesia with websites available, and the sites should have Islamic words in their visions, missions, and purposes. The researchers found nineteen words on the sites, then summarized them into ten themes with ten questions for the questionnaire (Table 2).

In the second phase, employees agreed on a questionnaire on Islamic performance conducted by the hospital. The questionnaire containing ten statements distributed through Google Docs to 85 hospitals. The researchers asked each hospital for four employees to fill out. The purpose of this questionnaire distribution is to know the score of staffs' perceptions of 10 statements of Islamic performance in their respective hospitals. These statements then were measured using the Likert Scale (1 = strongly disagree to 10 = strongly agree).

Results

One hundred and sixty-two respondents came from various Hospital classes: 9,9% from B classes, 50% from C classes, and 40,1% from D classes.

Table 1. The Distribution of Frequency of Respondents' Characteristics in Islamic Hospitals in Indonesia

		Number	Total		Staff	Number	Total
No	Staff Characteristics	(n=162)	(%)	No	Characteristics	(n=162)	(%)
1.	Age				Non Structural Function	31	19.1
	<20-30 years	41	25.3	5.	Occupation		
	>30-40 years	72	44.4		Specialist	5	3.1
	>40-50 years	38	23.5		Doctor/Dentist	44	27.2
	>50-60 years	11	6.8		Nurse	33	20.3
2.	Genders				Midwife	5	3.1
	Male	64	39.5		Pharmacist	13	8
	Female	98	60.5		Others	62	38.3
3.	Education Level			6.	Employment Status		
	S3/Doctoral Degree	3	1.9		Permanent Staff	129	79.6
	S2/Master Degree	30	18.5		Temporary Staff	33	20.4
	S1/Bachelor Degree	49	30.2	7.	Work Duration		
	Profession	45	27.8		<1-5 years	55	34
	Diplomas	35	21.6		>5-10 years	47	29
4.	Structural				>10-15 years	24	14.8
	Structural	84	51.9		>15-20 years	19	11.7
	Function	47	29		>20 years	17	10.5

Table 2. Ten Words Theme into 9 Behaviour Statements based on Staffs' Perception of Islamic Performance in Islamic Hospitals and the Score

No.	Words Theme	No.	Statements on Staffs' Perception of Islamic Performance in Their	Mean Score
			Respective Hospitals	
1.	Innovation	1.	Today should be better than yesterday, and tomorrow should be better than today is the Islamic values to improve continuously and	9.05
1.		1.	to do innovation.	
	Faith		Hospitals provide mosque and recommend to do the prayers	9.04
2.	Amal Sholeh Akhlaqul Khaimah	2.	together with short da'wa to increase faith, Amal Sholeh, and Akhlaqul Khaimah.	
3.	People Welfare	3.	Hospitals participate in realizing people's welfare by giving health services to the people.	9.00
4.	Social Work	4.	Hospitals participate in social work for the people in need of health service.	8.97
	The Prophet's'		The nature of Rasulullah SAW with Sadiq, Amanah, Tabligh,	8.94
5.	Characteristics	5.	and Fathonah as his character becomes the example	
	(Sadiq, Amanah, Tabligh, Fathonah)	Э.	in Kader Islamic organization training in hospitals.	
6.	Work as Worship	_	The implementation of the "Work as Worship" value so that the	8.79
7.	Amanah and Ikhlas	6.	hospital's staff can work sincerely.	
			Silaturahmi activities should be done between the head of the	8.75
8.	Silaturahmi,	7.	Hospitals and the staff routinely (for example, once a month in the form of Quran recitation).	
			Give greetings when meeting with other hospital staffs, patients	8.51
9.	Salam	8.	and their families or guests in the hospitals is the culture in the hospitals	
10.	Sharia principles	9.	Operational activities in hospitals based on sharia principles.	8.04

Based on Table 2, there are 19 Islamic words found in the profiles of 68 Islamic hospitals and the expert (an Islamic expert), then combining the words in the same theme. The result of this combination is that there are ten words items, namely people welfare, sharia principals, Silaturahmi, salam, work as

worship, Amanah and Ikhlas, social work, faith-Amal sholeh-Akhlaqul Khaimah, the Prophet's characteristics (Sadiq, Amanah, Tabligh, Fathonah), and innovation. Nine statements of attitude can conclude from these ten themes based on the staffs' perception of Islamic performance done in Islamic Hospitals where they devote themselves. Staffs' attitude implementation in accordance with Islamic values is mostly about "today should be better than yesterday, tomorrow should be better than today is the Islamic values to make improvement continuously and to do innovation" by the score 9.05 and the lowest score in staffs' attitude implementation in accordance with Islamic values is about "operational activities in the hospitals based on sharia principles".

Discussion

Research result from 68 Islamic Hospitals in Indonesia shows that the lowest score is in the statement of operational activities in the hospitals based on sharia principles. These findings illustrate the hospital's staffs' attitude is not following the application of sharia principles in Islamic hospital operational activities. Medication in Islam is not only done physically but also physic-spiritual holistically. Sharia-based hospitals are hospitals with sharia principles in their works, policies, procedures, and staff recruitment, so it is not only focused on halal products or sharia-based services (8).

Operational activities that are not really in sync with sharia principles in Islamic hospitals can influence by hospital management, incompetent human resources, and work ethics of the health staff. System management of the hospitals play essential roles to observe the activities, so hospitals with sharia principles should have Quality Management System with Sharia Advisory Council and Sharia Staffs in the organization to make sure the operational activities in the hospitals can be done well (9), but in practice not every Islamic Hospitals have these management system to accommodate the success of sharia-based operational activities.

Rahman and Shariff reveal that sharia principles should be implemented relatively to everyone in the hospitals. In this case, all staff should get the same right in treatment and training to increase sharia-based work qualities (9). In health service, staffs' work ethics associated with the quality of health services. Work ethics in traditional medicines shows that practitioners/doctors are responsible for patient privacy, but it does not match with the perception of science and technology development as well as complex medical practices (10).

Based on the research of Zawawi and Othman, Muslim patients encounter uncomfortable situations while being treated in the hospital regarding privacy, cross-gender interactions with health workers, and halal medications. These situations forced them to choose hospitals with Islamic principles as its ground base in giving health service (11). In line with the research done in Iran, as a country with a lot of Muslims, the health service does not implement its service following sharia principles, even though most of the Muslim patients want Islamic-based health service done by health workers with the same gender (12).

Islamic Hospital with sharia principles in giving service is more efficient, watch for 'awrah and patients, remind prayer times, spiritual guidance, safety guarantee, and halal food and medicines (8). Following Saudi Arabia, the nurses try to fulfill the patients' spiritual needs by helping wudu' or tayammum before Salah and place the patients facing the Qibla. Moreover, in the relationship between the nurses and the patients, nurses try to maintain patients' privacy by covering their 'awrah using hijab and closing the dividing curtain or drapes. Nurses should have professional knowledge about Islam and integrates it into the patients' treatment plans (13).

Other facilities provided by sharia-based hospitals are Islamic reading materials. It discusses about Islamic health topic like how to fast and Salah for those who are sick, how to prepare guidance and Salah equipment like *tayammum* and *mukena* (women's prayer dress), and the availability of Spiritual

Compliance Officer (SCO) who gives counseling based on Spiritual Patient Care Assesment, Islamic antenatal class, and Nursing Program (4). Kamaruzzaman explains that the ideal concept of sharia-based Islamic hospitals covers the quality of hospitals management process, sharia-based finance management, professional nursing and treatment service with certain quality, policies for patients and staffs to pray and have to cover their 'awrah, the use of halal products (food and medicines) as well as halal procedure. All SOP should be sharia-based and have guidance to treat Muslim and non-muslim patients. The experienced staff in guiding the patients in worship and rukhsah should have sharia advisory hospital council to meet the needs of all staff in running the sharia principles in Islamic hospital service (14).

Certified sharia-based Islamic hospital excels in services. Facilities provided for the patients in non-sharia-based hospitals are: sharia-based Islamic hospitals prioritized in wellness and health of the patients both physically, mentally, and spiritually by religious activities, Salah, and Quran recitation. It is different from high-risk patients who need specific guidance. The food and medicines provided by the hospitals must be halal, hygienic, and high in nutrition following the patients' therapy, as Allah SWT said in Al Baqarah: 168 and the availability of clean laundry. Besides, the most interesting health service is the availability of *Husnul Khotimah* service in ICU for patients who are dying. Sharia-based health service respects patients' privacy, like their 'awrah, not Ikhlilat, except when an emergency occurs (15).

Hospitals with sharia certification have a positive impact on their service performance. They are proved to be more efficient, and the staff focuses more on the patients. Building high-quality work ethics among the staff based on sharia values can improve the staff's performance (16). The result found in Islamic Hospital Sultan Agung shows sharia-based treatment services have an association with patients' loyalty because patients get good services and feel comfortable, and patients' satisfactory will increase (17,18).

Conclusion

The implementation of sharia values in most of Islamic Hospitals' staffs in Indonesia still focuses on self-improvement for continuous refinement and innovation, but it is still not optimal in the staffs' operational activities in the hospitals.

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