

1 *Type of the Paper (Review)*

2 **Narrative Study of Shariah Hospitals in Indonesia: A** 3 **Review of Islamic Brand Communities Innovation** 4 **for Health Care**

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14 **Abstract:** The Ministry of Health evaluates hospital management in accordance with the standard
15 of quality of service. The concept of Shariah hospitals offers management services that exceed the
16 standard of quality of hospital care. The study aims to illustrate the concept of Shariah hospitals in
17 Indonesia. We collect related literature from various media via online search with the keywords
18 "Shariah hospitals," "implementation of Shariah hospitals," and "application of Shariah hospitals."
19 Main findings: The study finds that the Shariah hospitals built by the philosophy of Islam are willing
20 to provide the best health-care services to patients. A code of conduct must be fulfilled by the
21 hospital management in Shariah hospitals: (1) general liability, (2) obligations to society and the
22 environment, (3) obligations to patients, (4) obligations to the leaders, staff, and employees, and (4)
23 relationships with related institutions. The foremost challenges include the improvement of health
24 personnel performance and the quality of services in addition to perceptions that are not inclusive
25 of the system of Shariah hospitals. This implementation should run consistently and with the
26 commitment of all parties. Such insight, in turn, can be counted as an input to an approach to health
27 services, particularly in increasing the performance rates, such as hospital. This study is the first to
28 provide new insight into discussion about shariah hospital by presenting its focuses on Islamic
29 approaches in meeting the quality standards of health services in hospitals so as to obtain more
30 value. However, exclusive principles —Islamization, heterogeneity, and the performance of health
31 workers —challenge the implementation of this hospital system.

32 **Keywords:** Shariah; hospital; healthcare; management; Islam

34 **1. Introduction**

35 The existence of hospitals continues to grow from time to time, and even now, the hospital has
36 become a global health necessary [1]. In this way, hospital management are expected to emulate
37 principles containing a summary of the values and norms of the community [2,3]. In line with the
38 development of civilization, that of the order of sociocultural society, and that of the progress of
39 science and technology, especially in the fields of medicine and health, the hospital has evolved into
40 a "socioeconomic unit" [4,5]. Hospitals in Indonesia, in accordance with travel history, typically
41 identify with the entrenchment principle, the *Pancasila* principle, and the State Act of 1945 as the
42 philosophy of the nation and the Republic of Indonesia [6]. In time, these hospitals face the full
43 challenge of exerting the necessary efforts to maintain the purity of the values of basic hospitalization
44 in Indonesia. This study aims to present the collected literature from various media on the concept of
45 Shariah hospitals in Indonesia.

46 2. Literature Review

47 In line with the development of civilization, that of the order of sociocultural society, and that
48 of the progress of science and technology, especially in the fields of medicine and health, the hospital
49 has evolved into an entity that requires an orientation of the various socioeconomist complexities it
50 often encounters [7,8]. In the history of Indonesia, hospital management is based on the principles of
51 Sharia. Such hospitals are known as Shariah hospitals, which have been granted Sharia certification
52 by the Indonesian Ulema Council [9].

53 The ethical code of Shariah hospitals as well as that of hospitals in general are applied in
54 operational hospitals [9]. For doctors and health workers, ethics means the obligation and
55 responsibility to meet the expectations of the profession and the public. For the leader or the owner
56 of the hospital, ethics should mean the obligation and responsibility specifically for patients and
57 clients against the organization, the personnel, themselves, the profession, the government, and other
58 levels not apparent to the public. The criteria of fair, honest, professional, and respectable practices
59 also apply to other officers in the hospital. The ethical code of a hospital consists of ethical practices
60 that are developed for the hospital as an institution, often almost meeting with ethics of biomedicine.
61 It can also be said that the ethics of an institutional hospital entails the development of the ethics of
62 biomedicine (bioethics) because of new ethical problems or dilemmas, such as the impact or
63 consequence of the rapid progress of science and technology in biomedicine [4].

64 The Indonesian hospital, as with any government hospital, is in the process of meeting
65 certification as a Shariah hospital to serve the population in the country, of which the majority
66 practice the religion of Islam. Such determination to meet this certification is a challenge for the
67 hospital management, which consists of health personnel from different religions and tribes. All
68 parties should implement the principles of Sharia on all health services so that such services would
69 be optimally accomplished. Hence, the study of the application of the ethical code of Shariah hospitals
70 is important in increasing health personnel performance, which can assist the decision making of the
71 hospital management.

72 3. Methodology

73 3.1. Eligibility Criteria

74 We collect all existing evidence relevant to shariah hospital in Indonesia to identify evidence, all
75 type of literature, including published or unpublished scientific articles or government/institution
76 reports and other related eligible documents for review in Bahasa Indonesia or English. No
77 publication date or publication status restrictions were imposed.

78 3.2. Evidence Resources

79 In this review, we search bibliographic sources i.e. MEDLINE, Science Direct, SCOPUS, Wiley
80 Library, and Directory of Open Access Journals (DOAJ). We also search literature not listed in the
81 above bibliographic resources using Indonesian Portal Indexing (IPI), and we examined the recent
82 literature on the current issue and prospects for the shariah hospital in numerous studies.

83 3.3. Search Strategy

84 We assemble related literature from various media via online search with the keywords "Shariah
85 hospitals," "implementation of Shariah hospitals," and "application of Shariah hospitals." The
86 researchers defined the keywords based on the research's question. No years of publication and
87 language restriction will be placed on the search strategy. The team researcher used the key words to
88 conduct the searching and input the search results into Mendeley library. Subsequently it inputs all
89 meta-data for each article, including the abstract, and discuss it to the meeting.

90

91 4. Results and Discussion

92 4.1. Philosophy of the Shariah hospital

93 According to the Islamic faith, human life should be beneficial and, as much as possible, do
94 good, as stated in the Qur'an Surah Al-Ashr (verses 1–3). Allah says, "By time, (1) Indeed, mankind is
95 in loss, (2) Except for those who have believed and done righteous deeds and advised each other to truth and
96 advised each other to patience". Shariah hospitals should provide the best health services, more than the
97 patient expects. The Prophet stated that the most beloved man of God benefits higher than others,
98 and the most beloved work of God is to make others happy and alleviate hardship [10]. Health care
99 at hospitals do so with the appropriate standard of quality of services that can benefit the patient.
100 Similarly, in the Qur'an Surah Ash-Sharh (verses 6–8), Allah says, "Indeed, with hardship [will be] ease.
101 (6) So when you have finished [your duties], then stand up [for worship]. (7) And to your Lord direct [your]
102 longing. (8)".

103 Hospitals with Shariah certification carry out their services with reference to the concept of
104 *Maqoshid Al-Sharia*, namely, the preservation of religion (*Hifzh Al-Din*), the soul (*Hifzh Al-Nafs*), the
105 senses (*Hifzh Al-'Aql*), the descent (*Hifzh Al-Nasl*), and property (*Hifzh Al-Mal*) [9]. As commanded by
106 Allah in the Qur'an surah Jaatsiyah, verse 18, "Then We made you on top of a sharia (laws) of matter
107 (religion it). Then follow the Shari'a, and do not follow the desires of lust people do not know." According to
108 the verse, the implementation of health services should be based on Sharia to ensure the good of the
109 world and the hereafter.

110 *Maqoshid Al-Sharia* is the value or spirit contained in Sharia law. Sharia is a set of rules set by
111 Allah for His creatures to be used as a guide in regulating relations with the Creator as well as
112 relations between humans and all of nature [11]. Sharia also refers to all the laws that Allah
113 established for all humans to be believed and carried out for their own benefit, both in this world and
114 the hereafter [12]. According to the word of God in Surah al-Maidah (verse 48), "And We have revealed
115 to you, [O Muhammad], the Book in truth, confirming that which preceded it of the Scripture and as a criterion
116 over it. So judge between them by what Allah has revealed and do not follow their inclinations away from what
117 has come to you of the truth. To each of you We prescribed a law and a method. Had Allah willed, He would
118 have made you one nation [united in religion], but [He intended] to test you in what He has given you; so race
119 to [all that is] good. To Allah is your return all together, and He will [then] inform you concerning that over
120 which you used to differ.". Thus, the application of Sharia principles in hospital services aims to benefit
121 humans both alive and deceased. The application of *Maqoshid Al-Sharia* in hospital services implies
122 that Shariah hospitals are responsible for five things: they must protect their patients in terms of their
123 beliefs, protect their patients' rights from being saved, protect their patients from wasting wealth,
124 protect their patients from the maintenance of common sense, and protect their patients from their
125 offspring [9].

126 4.2. Code of conduct of Shariah hospitals

127 In the code of conduct of Shariah hospitals, established by the Indonesian Shariah Hospital
128 Association, Chapter I concerns the obligations of public Shariah hospitals [9]:

129

130 Article 1: Shariah hospitals shall comply with the Code of Conduct of hospitals in Indonesia and
131 the Code of Conduct of Shariah hospitals in Indonesia as well as the entire regulation legislation on
132 hospitals in Indonesia, as in the Qur'an Surah An-Nisa: 59, "O you who have believed, obey Allah and
133 obey the Messenger and those in authority among you. And if you disagree over anything, refer it to Allah and
134 the Messenger, if you should believe in Allah and the Last Day. That is the best [way] and best in result.".

135 Article 2: Shariah hospitals shall strive to apply the values of Siddiq (truth and honesty) and
136 have a vision, mission, and management as well as true and honest services, as in the Qur'an Surah
137 Az-Zumar: 33, "And the one who has brought the truth and [they who] believed in it - those are the righteous.".

138 Article 3: Shariah hospitals shall strive to apply the values of trust (belief) and to give priority to
139 quality services in a safe and satisfactory manner, congruous with the values of Islam as a result of
140 the practice of the pillars of Islam, as in the Qur'an Surah An-Nisa: 58, "Indeed, Allah commands you to

141 *render trusts to whom they are due and when you judge between people to judge with justice. Excellent is that*
142 *which Allah instructs you. Indeed, Allah is ever Hearing and Seeing.”.*

143 Article 4: Shariah hospitals shall strive to apply the values of Fathonah (intelligence). The entire
144 health management and services should follow the progress of hospitalization based on cutting-edge
145 scientific knowledge and document the whole activity as well as maintain/archive all medical and
146 non-medical knowledge, as in the Qur’an Surah Al-Baqoroh: 269, “*He gives wisdom to whom He wills,*
147 *and whoever has been given wisdom has certainly been given much good. And none will remember except those*
148 *of understanding.”.*

149 Article 5: Shariah hospitals shall strive to apply the values of Tabligh (on target and
150 communication), wherein the hospital is responsible for the strategy to carry out the mission and the
151 achievement of the hospital’s vision as well as the implementation of education for patients and
152 families as a means of preaching, as contained in the Qur’an Surah An-Nahl: 125, “*Invite to the way of*
153 *your Lord with wisdom and good instruction, and argue with them in a way that is best. Indeed, your Lord is*
154 *most knowing of who has strayed from His way, and He is most knowing of who is [rightly] guided.”*
155

156 Similarly, the results of the study show that the letter An-Nahl 16, paragraph 125, contained
157 three methods of education: wisdom, *Mau’idzhah Hasanah*, and *Jidal*. Wisdom is the knowledge owned
158 by a teacher. With tools such as scientific knowledge, he becomes a person entitled to provide
159 religious learning to his children and students. *Mau’idzhah Hasanah* and *Jidal* are methods that can
160 best be used according to the situation and educating needs. In the practice of educating adults, the
161 paragraph cited above could be developed further into some of the methods according to the existing
162 situation, conditions, and needs.

163 4.3. Challenges in the management of Shariah hospitals

164 Maintaining the quality and safety of health care for all patients through the improvement of
165 health personnel performance is a challenge to all Shariah hospitals, in addition to the principle of
166 exclusivity (only serve Muslims), as perceived by the majority. In fact, this recent challenges on
167 inequities in health and health care can bridge by discussing on this topic between ethicists and health
168 care professionals [13].

169 The success of health services is not apart from health personnel performance but also requires
170 rules that must be carried out in accordance with standard quality [14]. Health-care quality is highly
171 dependent on the performance of individuals who provide health services [15]. The reverse applies
172 in that health services require the support of hospital management. “Performance management refers
173 to the broad range of trials, policies, dealings, and deliberate interventions to help workers improve
174 their performance.” To determine the level of success that is achieved, the measurement of health
175 personnel performance should consider the following matters [16]:
176

- 177 1. Quality relates to the quality of the product, either in the form of the neatness and accuracy of
178 the work or the level of error of health workers. In other words, the perceptions of health workers
179 regarding the workforce must be in accordance with the established standards and can be
180 accepted with the following measurement indicators:
 - 181 a. completion of work at a low level of error;
 - 182 b. completion of work while prioritizing hygiene, safety, and reliability; and
 - 183 c. completion of work in accordance with the targets and quality of the set.
- 184 2. Quantity relates to the amount of work that must be completed or achieved. In other words, the
185 perception of health personnel about the results of health services must be in accordance with
186 their duties, staples, and functions, with the following indicator measurements:
 - 187 a. the ability to complete a number of jobs according to the basic tasks and functions;
 - 188 b. the ability to complete additional tasks given by the leadership; and
 - 189 c. the ability to complete the work as much as possible.
- 190 3. Timeliness relates to the amount of work done in accordance with the time planned for health
191 services, with the following measurement indicators:

- 192 a. obedience of the discipline of entering, resting, and going home from work;
 193 b. completion of work as soon as possible within the stipulated time; and
 194 c. completion of work that one has to do for another.

195

196 The dimensions of service quality according to the World Health Organization can be used as a
 197 reference by adjusting the conditions in the hospital [17], as follows:

198

Table 1. Dimension of service quality according to WHO

Quality Dimension	Meaning
Effective	Health services should be close to the evidence base and successful in increasing individual or community health outcomes based on need. The health services provided should be based on the needs of the patient's disease diagnosis conditions, both for medical examinations and for medical actions, or other supporting examinations so that quality control is achieved.
Efficient	The Ministry of Health should maximize resources and avoid wastage. Health services should be given and utilized as optimally as possible to achieve the control of costs.
Accessible	The Ministry of Health, at the right time, should be geographically accessible and provide within the framework the right skills and resources to fulfill needs. The use of health services must be easy to use for all users and implementers of health services, and the services and actions of medical staff and support should be responsibly justified.
Accepted (Patient-centered)	Health services should consider the choices and aspirations of individual service users and the culture of their community. The availability of services should be tailored to the needs of people (the need and demand of society) so that all the units of service can be used optimally with the purpose of adding value to the health services provider.
Equitable	The Ministry of Health must not discriminate health personnel based on their personal characteristics, such as gender, race, ethnicity, geographical location, and socioeconomic status.
Safe	Health services should minimize risk and harm. The management and all personnel, health and non-health, should be committed to implementing a culture of safety for patients.

199

200 4.4. Limitation and study forward

201 Strengths of this study include conduct by a researcher with philosophical experience in shariah
 202 hospital and Islamic healthcare service provision, which facilitated the extraction of relevant
 203 information from webpages and when communicating with other literatures. Relevant sources of
 204 information may have been omitted or inaccurate but this was minimized by the transparent web-
 205 based search process, checked by a second researcher in a random sample, and the added stage of
 206 checking in person by direct telephone contact. The scoping review was limited to Indonesian
 207 websites, thus findings may not reflect international practice or health services. Study results provide
 208 a snapshot of information available and current during the study period (July -December 2019), and
 209 specific details may have changed over time.

210 An important implication of this scoping review is to ensure that if shariah hospital's code of
 211 conduct interventions or services are provided, this information needs to be readily available to
 212 patients on the hospital. Information should include preferred healthcare methods and referral
 213 pathways. While patient with resistant conditions were the researchers focus of this scoping review,

214 the findings have implications for making services visible to healthcare actors (e.g. patient, health
 215 professionals or hospital managers) who may use the philosophy of health services to conduct for
 216 better health provision. Further research in this area should consider defining and describing these
 217 actors' perception, to assist with national and international benchmarking for shariah hospital's
 218 models of care.

219 5. Conclusions

220 Shariah hospitals have significant opportunities and challenges to improve their management,
 221 especially with health personnel from different religions and tribes. All parties should implement the
 222 principles of Sharia on all health services. Maintaining the quality and safety of health care for all
 223 patients through the improvement of health personnel performance is a challenge to all Shariah
 224 hospitals, in addition to the principle of exclusivity (only serve Muslims), as perceived by the
 225 majority.

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 227 review design. Both WS and AA performed the data analysis including to made conceptual contributions,
 228 performed the data collection, calculated the study results and prepared the first manuscript. Both SR and MV
 229 were all performed co-wrote and involved to the revision of manuscript. All authors approved the final
 230 manuscript.

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