

MAKASSAR HAJJ HOSPITAL: HARMONISATION OF SERVICES WITH CLINICAL PRACTICE GUIDELINES AND ISLAMIC PRINCIPLES

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ABSTRACK

Background: In the accreditation standard of hospitals in Indonesia, the preparation and application of clinical guidelines is indeed required in the form of a Clinical Practice Guide (PPK), especially for patient management with high risk. The accreditation standard also requests that PPK also be the basis for conducting the quality and safety of patients provided by each clinicali. In addition, it is needed by the Islamic Health Services which apply Sharia principle. The problem that is usually buried is how to implement Islamic values in management and health services in hospitals.

Objective: This study aims to determine the standard of services that are in accordance with the clinical practice guide (PPK) and the management of Islamic services at the Makassar General Hospital in Haji Regional Hospital.

Method: The research method used a type of qualitative research with an approach.

Result: The results obtained from the interview conducted, the Hajj Hospital has provided services that are in accordance with clinical practice guidelines and Islamic services standards at the Hajj Hospital have been well gone. Conclusion: Haji Hospital has provided services in accordance with clinical practice guidelines, clinical pathways and service standards. The form of these services is generally in accordance with Standard Operating Procedures (SOP).

INTRODUCTION

In the accreditation standard of hospitals in Indonesia, the preparation and application of clinical guidelines is indeed required in the form of a Clinical Practice Guide (PPK), especially for patient management with high risk. The accreditation standard also requests that PPK also be the basis for conducting the quality and safety of patients provided by each clinicali. Various studies have shown that the implementation of clinical guidelines can improve the management process of moral and

clinical service (output) in patients, such as compliance with procedures, increasing reducing unnecessary variations in services, increasing the success rate of treatment or operations to increase the efficiency of resource use including funds. However, this is not easy. The preparation and application of clinical guidelines in the hospital often faces obstacles. Constraints in the process of adaptation of international clinical guidelines are related to the possible presence of differences in culture and organizations between countries, this includes the availability of diagnostic types, medical services, nursing care, and other clinical services, and also the availability of resources and values, patient preferences, and prevalence characteristics of disease While the constraints in application are generally divided into 3 factors, namely: personal factors for doctors (knowledge and attitude); related to such as external resources and external norms, such as heavy external norms, and managing. (Djasri, 2020)

Obstacles in the process of drafting can be overcome by paying attention to various important principles, namely respecting the principles of preparing evidence-based guidelines, using reliable and consistent methods to ensure the quality of the guidelines compiled, ensuring the participation of the main stakeholders for the feelings of guides compiled, considering the context of local practices and policies, using flexible formats to accommodate specific needs, as well as stating materials and acknowledge the guidelines used as a source of preparation of guidelines. Tackling the obstacle needs to be carried out effective interventions and use several interventions at once. Intervention for only one type such as socialization of clinical guides in the form of sharing a guide or presentation that is too dictating often proved ineffective. Intervention needs to be selected by using various approaches such as clinical audit, developing a reminder system and also utilizing clinical leadership to increase compliance with the guidelines. (Djasri, 2020)

In addition, it is needed by the Islamic Health Services which apply Sharia principle. The problem that is usually buried is how to implement Islamic values in the management and services of Health in the hospital, and what problems that will arise with the value of Islam who strive to internalize. This happens because there are quite a lot in Indonesia the Hospital founded by the social organization of the Islamic religion. (Sa' et al., 2022)

With so many public demand regarding the implementation of Islamic values on Health services, in 2015, the Council of Islamic Health Efforts throughout Indonesia (MUKISI) together with the DSN-MUI began taking the initiative to formulate how the Hospital can elaborating on the Sharia operations in its activities. The meeting between MUKISI and the MUI DSN was intensely held in Bogor on February 8-10, 2016 to decide what kind of policy can support the good mission. Then a 107/DSN-

MUI/X/2016 fatwa regarding the Sharia Hospital Management Guidelines based on Sharia Principles. With Standards formulated together by the MUKISI Hospital management by MUKISI in 2019, the hospital began to transform implement Sharia principle. Currently, in 2021, there are 25 hospitals with the status of Sharia hospitals in Indonesia, and 42 hospitals that are still in the preparation stage to obtain the status of Sharia hospital. (Sa' et al., 2022)

There are six aspects of the global Islamic competent services, namely or called Islamic service quality dimensions (Windasari, et al, 2021), namely: 1). General Islamic General (Islamic values in general), 2). Halal/haram, 3). Attention to Islamic religious activities (attention to Islamic activities), 4.) (honesty), 5.) Modesty Honesty humaneness (simplicity and humanity), 6). Trustworthiness (trustworthy) With emphasis on aspects of sharia value, expected sharia competent hospitals have unique value propositions and competitive advantage to consider by consumers. Even further, regulators and service providers must understand what is critical for the patient's decision making in choosing Health services. (Sa' et al., 2022)

METHODS

This research was conducted in September 2023 at the Makassar Regional General Hospital, Tamalate District, Makassar City using a descriptive qualitative research approach. The intended informants were the head of the personnel and patient division at the Haji Makassar Regional General Hospital. Data was obtained by conducting in-depth interviews with informants, namely the head of the employee division and one of the patients at the hospital who had utilized health services at the Haji Makassar Regional General Hospital, Tamalate District, Makassar City.

RESULTS AND DISCUSSION

First, we carry out observations at the Hajj hospital and negotiate with the relevant hospitals that we want to do. We conducted an interview with several questions that had been prepared in the Personnel section who was the resource person, namely Mr. H. Muh. Husni Thamrin, SKM., M.Kes. father served as KA. General Affair. Apart from that, we conducted interviews with patients at the Hajj Hospital regarding the services provided and procedures carried out when they wanted to perform worship while sick. This activity was carried out for one day by paying attention to the activities carried out by medical personnel at the Haji Hospital.

Haji Hospital has provided services in accordance with clinical practice guidelines, clinical pathways and service standards. The form of these services is generally in accordance with Standard Operating Procedures (SOP). Therefore, the hospital carries out its duties in a structured and smooth manner because they have guidelines for carrying out work. The Islamic service

standards at the Haji Hospital have been running well, the form of application of which is a prayer time schedule in which employees and medical personnel enter prayer time, all activities will stop and carry out congregational prayers, build a prayer room, and the hospital also places posters on the procedures for prayer, ablution and tayammum in every patient's room. Apart from that, the Hajj Hospital also applies 5S, namely smile, greet, salute, be polite, polite.

Hospital Overview

Haji General Hospital - Makassar, or known as RSU Haji Makassar, is a religious hospital located in Tamalate, Makassar, South Sulawesi Province.

This hospital in Makassar began with a grant from the Kingdom of Saudi Arabia as compensation for the Mina Tunnel tragedy which claimed the lives of many Hajj pilgrims from South Sulawesi in 1990. Inaugurated in 1992, RSUD Haji Prov. At that time, South Sulawesi had the status of a type C hospital.

Starting in 2010, RSUD Haji Prov. South Sulawesi physically, equipment and service

procedures meet the standards of a Class B Non-Teaching Hospital. Since then, the development of one of the hospitals in Makassar has accelerated, for example providing 12 health services and so on.

Not only 24-hour emergency room and inpatient services, RSUD Haji Prov. South Sulawesi is equipped with outpatient services which provide around 12 general and specialist polyclinics, including:

- ENT Polyclinic
- Neurology Polyclinic
- Medical Check up Polyclinic
- Eye Polyclinic
- · Nutrition Polyclinic
- Heart and Blood Vessel Polyclinic
- Dental and Oral Polyclinic
- Children's Polyclinic
- Surgical Polyclinic
- Gynecology and Midwifery Polyclinic (brief introduction about the hospital)
 Implementation of Guidelines for Organizing Hajj Hospitals (Based on DSN-MUI fatwa No.107/DSN-MUI/X/2016)

Service Assessment Elements According to PPK, Clinical Pathway, and Applicable Service Standards

The hospital	Application		D. C.	Application	
	Already	Not yet	Patient	Already	Not yet
Does the hospital provide services in accordance with the Clinical Practice Guidelines (PPK), clinical pathways, and/or applicable service standards?	V		How do you get Islamic services as a patient?	V	
What are the Islamic service standards at this hospital and how are they applied?	V		Are there special sharia services for patients?	V	

Explanation:

Hospital: Haji Hospital has provided services in accordance with clinical practice guidelines, clinical pathways and service standards. The form of these services is generally in accordance with Standard Operating Procedures (SOP). Therefore, the hospital carries out its duties in a structured and smooth manner because they have guidelines for carrying out work. The Islamic service standards at the Haji Hospital have been running well, the form of application of which is a prayer time schedule in which employees and medical personnel enter prayer time, all activities will stop and carry out congregational prayers, build a prayer room, and the hospital also places posters on the procedures for prayer, ablution and tayammum in every patient's room. Apart from that, the Hajj Hospital also applies 5S, namely smile, greet, salute, be polite, polite.

The results of this research are in line with research conducted by Hanevi Djasri (2020) which states that in hospital accreditation standards in Indonesia, the preparation and implementation of clinical guidelines is required in the form of a Clinical Practice Guide (PPK), especially for the management of high-risk patients. Accreditation standards also require that PPK also be the basis for evaluating the quality and safety of patient care provided by each clinician (Djasri, 2020). Islamic rules or sharia have also been written in the guidelines of each hospital so that Muslim patients remain comfortable in the healing process. (Sa' et al., 2022)

Patients: At the Hajj Hospital, patients have experienced sharia services, especially for postpartum mothers, which are handled by female doctors and the process has been carried out in accordance with written Islamic law. The application is that the patient is

assisted in performing tayamum when he cannot perform ablution and this makes the patient feel very helped.

CONCLUSION

In hospital accreditation standards in Indonesia, the preparation and implementation of clinical guidelines is required in the form of a Clinical Practice Guide (PPK), especially for the management of high-risk patients. Accreditation standards also require that PPK also be the basis for evaluating the quality and safety of patient care provided by each clinician. Various studies have shown that the application of clinical guidelines can improve the clinical service management process and clinical outcomes. In addition, Islamic health

services are needed that apply Sharia principles.

Haji Hospital has provided services in accordance with clinical practice guidelines, clinical pathways and service standards. The form of these services is generally in accordance with Standard Operating Procedures (SOP). Therefore, the hospital carries out its duties in a structured and smooth manner because they have guidelines for carrying out work. The Islamic service standards at the Hajj Hospital are running well.

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