The Determination and Validation of Dimension of Islamic Health Care Service Quality in ISITEKS (Islam Ilmu Teknologi dan Seni) Boarding School Imogiri, Bantul, Jogjakarta, Indonesia

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Abstract—This study aims to test 55 point of in-depth interview items to reveal the quality of Islamic health care practice according to patients’ experience in managing their health, whether for medication, prevention, and health care in normal health condition. This study uses qualitative research method. The data were collected from 10 participants by using in-depth interview to identify the dimension of health care service quality, as well as from 30 participants by in-depth interview using list of questions which is compiled based on the identification of quality dimension to assess health care service they perceive. In-depth interview can be analyzed correctly according to the purposes, through IPA (Interpretative Phenomenological Analysis). There are 55 points in the in-depth interview to measure the performance of Islamic health care. The researcher found that there are two core dimensions to revive The Nuclear Biochip Health Care, the dimension of health information and the dimension of GCU (General Check-Up) result. The 29 point in the in-depth interview can be applied in the research on health care service satisfaction at various hospitals, especially Islamic Hospital.

Index Terms—Instant health information, Islamic hospitals, Nuclear Biochip Health Service, Quantum General Checkup.

I. INTRODUCTION

“... In this day unbelievers has despaired to defeat your religion, hence do not fear them, fear Me. This day I have perfected for you your religion, and had my both ends meet My favor unto you, and I have delight Islam as your religion... [1]. History of Imam Bukhari, saying of the Prophet Muhammad SAW., “Two favors that often go unnoticed by most humans, namely health and free time.” [2] From Abu Said al-khudri and Abu Hurairah, saying of the Prophet Muhammad SAW.: “not befall to a Moeslem the form of exhaustion, pain, grief, sorrow, sickness, narrowness, even thorn that pricks that person, except Allah SWT will erase their errors.” [3]. The government of Indonesia has initiated an effort to manage the implementation of health care services through health care institution which conduct a complete personal health care, which means this health care service provide promotive, preventive, curative, and rehabilitative service [4]. According to [5] promotive defined as tending or serving to promote (measures promotive of good health); preventive is defined as something that prevents, especially: something used to prevent disease; curative is defined as able to cure diseases or heal people; and rehabilitative is defined as to bring (someone or something) back to a normal, healthy condition after an illness, injury, drug problem, etc. Due to low quality of health care, then the health cost will be relatively high.

Patients are anyone who consults about their health problems to get health care they needed, directly or indirectly in the hospital [8]. Reference [9] stated that it is impossible for patients to examine whether a health care is qualified or not, and it is also impossible for them to understand what health services they need. Furthermore, information such as service quality and type of treatment will become an urgent need for the patients when they need treatment for their disease. Thus, it becomes the responsibility and duty of the health care employee to ensure the availability of this information because most of people have limited information about this matter. By using The Picker Patient Experience Questionnaire, [10] has found a significant overview from patient’s experience when they were hospitalized, related with the performance of doctors, nurses, and medical executive or employees, in providing health care service to their patients in five countries (The United Kingdom (UK), Germany, Sweden, Swizterland, and The United States (US)). The result presented in the study showed that most of the patients do not get optimal treatment [10]. This finding was developed as a guideline in assessing services given by hospitals to their patients in various countries [10].
Let us consider message from the wise, first, [11] advised that, “In trying to find a picture in the interpretation of one’s writing it can turn to be a scary finding, like found a picture of his/her life; weave, post facto, a picture inside,” this is what I mean by saying, is a thrilling temptation [11]. As a warning from Allah SWT, narrated by Abu Hurairah r.a who said, “The Prophet said, to everybody who covered the nakedness (evil) of other people in the world, Allah SWT will covers theirs in the doomsday.” [3]

Second, [11] message was, in the second decision which is slightly complicated, in general, I maintain a stare decisis view about published writings, only that if those writings need to much revision then those writings perhaps should not be reprinted, but should be replaced with an entirely new article, which fix the wrong part for better. This also applies in the interpretation of Al-Qur’an. The interpretation of Al-Qur’an also experience a progress according to its era, starts from The Prophet SAW and his friend era up to the tabiin and tabiin-tabin, and after the tabin era up to today [12].

Third, the message from Susane Langer in her book; Philosophy in a New Key, which stated by [11], that certain ideas appear in intellectual views with a powerful force. These ideas solve many fundamental problems in a short time so that it also promises to solve all fundamental problems, clarify all the vague questions. As the science ever found, second law of thermodynamics, or the principle of natural selection, or the idea of unconscious motivation, or organization of the means of production, does not explain everything, even not explain anything relating to human, but still explain something (material). Reference [11] supported the concept of culture, and who use it want to show the essays (themes), which is essentially a semiotic concept. Semiotics is a method to examine the phenomena in various fields, including aesthetics, anthropology, communication, psychology, and semantics. If we want to understand the answer of “what the science is”, then we have to take a look at the concrete events not at its theories or at its findings, and certainly not at what its apologist said about it; that we have to see at what have been done by practitioners of the science. This is in line with the knowledge revealed to ulema “In fact, the pious to God among His servants are ulama” (Qur’an (QS.) Al-Faathir [35], 28). As well as “There is nobody understood Him, except those who have knowledge” (QS. Al ‘Ankabubut [029]: 43) [1]. To understand the knowledge of ulama, we need to follow/adapt what they practiced. An ulama without deeds is like a lamp which burn himself (means that deeds should be in line with one’s teaching), (HR. Ad-Dailami) [13].

II. METHODS

A. Source of Data (participant)

This study aims to reveal the dimensions of health care service quality, by correctly analyzing the data which obtained by in-depth interview in accordance with its purposes. The analysis was conducted using IPA (Interpretative Phenomenological Analysis), which is used to explore in detail how participants are making sense of their personal and social world, and the main currency for an IPA study is the meanings of particular experiences, events, states hold for participants [14], and can be interpreted comprehensively to gain a detailed understanding about social and educational phenomenon studied. The process of data analysis using IPA is as follows: 1) reading and re-reading; 2) initial noting; 3) developing emergent themes; 4) searching for connections across-emergent themes; 5) moving the next cases; and 6) looking for patterns across cases [15].

Indonesian government program as well as health care practices described above illustrates that health care practices in Indonesia is still far from expectation of all parties involved. This situation encourages the researcher to reveal the Islamic health care practices that offer health care by look carefully at the needs and wishes from patients. The utilization of health care practice offered by The Nuclear Biochip Health Care, ISITEKS (Islam Ilmu Teknologi Seni-Islamic Technology and Art) boarding school, Imogiri, Bantul, Jogjakarta, is capable of giving satisfaction to the patients who seek treatment or improvement for their health conditions. This study is qualitative in nature. The data were collected from 10 participants by using in-depth interview to identify the dimension of health care service quality, as well as from 30 participants by in-depth interview using list of questions which is compiled based on the identification of quality dimension to assess health care service they perceive. The question items are developed based on the result of in-depth interview by asking patient to reveal all of health care services they got when they utilized The Nuclear Biochip Health Care services.

B. Results

The participants in this study are people who use The Nuclear Biochip Health Care, having access, and can explain the dimensions of quality. The 10 participants are: Mr. Djaka Sasmita (founder); Ms. Dika Sistrandari (young scientist, the second daughter of the founder); Mr. Dr. Ngadikun, M.Biomed (supervisor); Mr. Drs. Crys Fajar Partana, M.Si, (khatib); Mr. Suyatno (mosque imam); Mr. Hakim (santri); Mr. Tukijan (patient suffering mediastinum tumor); Mr. Faruq (patient); Mr. Ismana (patient); Mrs. Diana Savitri (patient), while the list of the other 30 participants is not attached in this article.

The researcher identified 55 items for the dimensions of health care service quality. These items can be divided into six categories of question, which was prepared to determine the dimensions of quality that frequently used by patients. The categories are as follows: business ethic (5 items), first category (promotive function, 5 items), second category (preventive function, 11 items), third category (curative function, 7 items), fourth category (rehabilitative function, 7 items), fifth category (administrative function, 18 items), and sixth category (supervising and research function, 2 items). Each item was analyzed to reveal how important the item for patients’ need, to show the level of health care quality.
C. Determining the Dimensions of Health Care Service Quality

The commencement treatment to The Nuclear Biochip Health Care service in ISITEKS boarding school

1) The initial visit to ISITEKS, the earlier somebody come, the more information about health care he/she will get, so that relatively, he/she will have a better understanding about the health care. They who come earlier also get benefit of better access to action or therapy offered by The Nuclear Biochip Health Care. Based on the results of in-depth interview, all of 30 participants stated that ISITEKS is capable of providing complete health care services. A participant (3%) takes the commencement treatment in 2000 and two participants (7%) take the commencement treatment in 2012. These participants stated that they got benefit of health improvement due to they did not have any disease. The facilities offered to these participants are, among others: a) health consultation, b) health lecture, c) GCU (General Check UP), d) action, and e) therapy. While they who pray together in the ISTEKES mosque will get a bonus, nuclear treatment, herbal medicine, or groceries.

2) The condition of patients when they visit ISITEKS, whether they have a disease or not, is a dimension that motivates the patient to visit and get treatment. There were 21 participants (70%) who take the commencement visit to find a treatment for their disease and nine participants (30%) stated that they did not have a disease when they make their first visit.

3) Participants’ interests to visit ISITEKS were dominated by they who want to get treatment with 21 participants (70%), take advantage of action with payment consist of 16 participants (53%), and take advantage of free facility in Sunday Afternoon Therapy consist of five participants (17%).

4) The most reliable source of information about the health treatment is from Mr. Djaka (the founder) but it is very limited in scope. The second reliable source of information is from the fellow worshippers, but this source also still limited in scope, only around the worshippers in daily praying. Source of information that can reach broader scope is from family. However, the reliability of this source is relatively less reliable than the other two sources because they only rely on information they acquired from the other two sources, so that the information they conveyed rather hearsay and not necessarily be informed correctly. The most unreliable source of information is friend. The reliability of this source is questioned and need to be proved. There are four participants (13%) who acquired information from Mr. Djaka, seven participants (23%) from fellow worshippers, eight participants (27%) from family, and 11 participants (37%) acquired information from friend.

5) Participants’ number of worshipper (Nomor Jamaah-NJ) is divided into two groups. The first group has NJ below 500, and they have a benefit of nuclear therapy, medication, and groceries bonuses depending on their visit frequency. The second group has NJ above 500, and they have a benefit of GCU bonuses. There are 20 participants (67%) get their NJ by applying, while ten participants (33%) get their NJ from Mr. Djaka himself.

6) Health services needed by participants are varies. There are 12 participants (40%) use treatment in Mr. Djaka’s house, 14 participants (47%) only use Sunday Afternoon Therapy, three participants (10%) use herbal medicine, and a participant (3%) as an ustaz to read Al-Qur’an.

Patients’ condition after the commencement treatment and utilizing health care service in ISITEKS boarding school:

7) In accordance with the accessibility of consultation about health issues, all of 30 participants (100%) stated that it is very easy to get information about health issues (after take the commencement treatment in ISITEKS mosque), either on the diagnosis of health condition through GCU, worshippers’ testimony, lecture, and blogspot.

8) The source of information about health issues as well as consultation and lecture on patients’ health condition and GCU result which was originally performed by Mr. Djaka, currently this duty is assisted by the worshippers and blogspot post, because nowadays Mr. Djaka is suffering mediastinum tumor. There are 10 participants (33%) who acquire the information of their health from Mr. Djaka and 18 participants (60%) acquire information from the worshippers. This shows that Mr. Djaka’s message has perfectly delivered, that is the worshippers in ISITEKS mosque can become the centre for development and study of Islamic science, especially about the understanding of health care services in ISITEKS.

9) The frequency of health lecture followed by the worshippers’ is varies. Each worshipper has different ability and experience, which will affect their ability to communicate the lecture they get. Thus, the frequency of acquiring information is the most influential factor for them because blogspot post cannot be relied upon to reach the participants due to their limited understanding and internet access. There are 23 participants (77%) often receive health information in ISITEKS, thus most of participants acquire information from the worshippers.

10) The accesses to get NJ for them who have take the commencement visit are as follows: a) offered to the worshippers who want to have an NJ, b) given when one of their grandchildren have birthday, and c) applying to get an NJ. There are 26 participants (87%) stated that they understand the procedure to get an NJ, only four participants (13%) who do not understand because they are a new comers.

11) Participants’ understanding on how to get health care action in Mr. Djaka house is high. There are 29 participants (97%) understand about the health care action conducted in Mr. Djaka house.
12) Participants’ understanding on how to get therapy in ISITEKS mosque is also high. All of 30 participants stated that they understand about the procedure to get therapy in ISITEKS mosque.

13) Participants’ understanding on the function of DACO (DNA Addressed Antibiotics Coconut-Oil, DACO is a substance which can eradicate all non-body biotic diseases) also high. There are 29 participants (97%) stated that they understand the function of DACO medication.

14) Participants’ understanding on the function of KLPP (KeLaPa Perbaikan-Improvement Coconut, a substance which can repair tissue cells throughout the body) is about the same. There are 27 participants (90%) stated that they understand the function of KLPP.

15) In contrast, participants’ understanding on the function of AKUS (Anti Kanker UsuS-Anti-Colon Cancer, special substance which can eradicate colon cancer throughout the body) is low. Only 16 participants (53%) who understand the function of AKUS.

16) In the item of whether participants do presence in GCU, 29 participants (97%) stated that they attend in the presence of GCU bonus.

17) In the item of whether participants do presence for bonus/grocery, 14 participants (47%) stated that they attend in the presence of grocery bonus.

18) In the item of presence system used by participants, 20 participants (67%) use blow sound system, five participants (17%) use touch censor, four participants (13%) use keyboard system, and a participant (3%) do not use presence system.

19) However, the level of success in using presence tool is high. There are 27 participants (90%) who stated that they always succeed in using the presence tool.

Benefits gained, felt, and proved by using health care in ISITEKS boarding school

20) On the item of whether the patients recover their health after treatment in The Nuclear Biochip Health Care, 27 participants (90%) stated that they recover from their illness and get their health improved. Three participants (10%) stated that their health is improved, even if they did not ill.

21) On the item of whether the participants get nuclear treatment bonus after visiting ISITEKS mosque, only 13 participants (43%) who qualified to get nuclear treatment bonus because this bonus will only given to they who have the frequency of visit of approximately 20 times visit.

22) On the item of whether the participants get grocery after frequent visit to ISITEKS mosque, eight participants stated that they accept the grocery bonus, but some of participants convert the grocery bonus with medication bonus.

23) On the item of whether the participants still get treatment in Mr. Djaka house, half of the worshippers or 15 participants (50%) still get treatment in Mr. Djaka house, because they suffering diseases that need an action.

24) On the item whether the participants still utilizing the facility in ISITEKS mosque, 29 participants (97%) stated that they get therapy in ISITEKS mosque. Thus some of the participants also get therapy beside get the treatment from Mr. Djaka.

The overall 24 items above will have a positive impact, thus it is expected that the worshippers and participants will pass their experience to the people who needed.

1) To be able to give an explanation about health care service in ISITEKS, participants have to understand and experience in using health care service in ISITEKS, so that their willingness to give the information is based on the level and experience they have. There are 27 participants (90%) who understand about health care in ISITEKS, which consist of 15 participants (50%) who stated their willingness to explain to people who need the information, seven participants (23%) stated their willingness to explain if asked by other people, and five participants (17%) stated that they do not have courage to explain to other people because other people might not understand and trust health care service in ISITEKS, while three participants stated that they do not have courage to explain to other people because they do not understand, eventhough they feel satisfied in the service provided.

2) Does participant willing to accompany or recommend to other people who need The Nuclear Biochip Health Care service in ISITEKS? The participants need to have understanding and experience, as well as ability to explain about health care in ISITEKS to be dare to accompany people to visit ISITEKS. Then their willingness will be based on understanding, experience, and ability to explain. There are 27 participants (90%) stated that they are dare and have experience in health care service in ISITEKS. Out of this number, 17 participants (57%) stated their willingness and their courage to accompany other people to take their commencement visit, eight participants (27%) stated that they have courage to accompany when they are asked, and two participants (7%) stated that they do not have courage to accompany other people to take their commencement visit even though other people need it and they understand, have experience, and have ability to do so. Three respondents stated that they do not have experience and courage to accompany other people.

3) Does participant willing to promote, invite, or suggest to other people to have treatment in The Nuclear Biochip Health Care in ISITEKS boarding school? To make participants dare to suggest to other people to have treatment in ISITEKS, they should have understanding, experience, high frequency in accompanying other people who need treatment in ISITEKS, as well as having the ability to encourage, persuade, and convince the prospective patients about the existence of health care in ISITEKS. Following, the researcher reveal about the number of participants who are willing to give suggestion to other people. There are 27 participants (90%) who stated that they have courage and have experience about services in ISITEKS.
From this number, 16 participants (53%) stated their willingness and have suggested persuasively to other people who need health care, six participants (20%) stated their courage to give suggestion, and five participants do not have courage to give suggestion because they feel that they cannot convince other people in the meantime. A participant (3%) stated that he/she does not have courage to give suggestion because he/she cannot convince other people.

III. DISCUSSION

Fifty five dimensions of health care service quality have been identified by revealing the fact in The Nuclear Biochip Health Care service in ISITEKS boarding school, which then was arranged to a set of question used as guideline in conducting the in-depth interview. The 55 points in-depth interview to measure the performance of Islamic health care has brought the researcher to find two main dimensions to revive The Nuclear Biochip Health Care. These two main dimensions are the dimension of health care information and GCU result dimension. These dimensions are applied in ISITEKS boarding school and resulting in all patients who get treatment is able to diagnose, read GCU result, and take action independently without medical assistance from medical personnel, but can recover 100% from their illness or have improvement in their health condition. As promised by its founder (Mr. Djaka Sasmita) if GCU result is accurate and receive proper treatment then 99% patient will fully recovered from their illness, however if GCU result is inaccurate then no matter how sophisticated the action taken patients will not recover from their illness.

IV. STUDY LIMITATION

The limitation of this study, especially regarding with the understanding on some practices in The Nuclear Biochip Health Care, among others;

1) The Nuclear Biochip Health Care
2) Quantum Medical Action Service
3) Quantum GCU service
4) Arteries and Veins GCU service
5) Internal GCU service (without blood sampling)
6) Free therapy service with prayer as password
7) Enculturation of Islamic value
8) Islamic health care quality management

This study only reveals The Nuclear Biochip Health Care practice in its relation with benefit obtained by patients and community.

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