ANALYSIS OF THE IMPLEMENTATION OF SHARIA HOSPITAL IN BOGOR CITY BASED ON DSN MUI LAW AND FATWA "CASE STUDY OF BOGOR ISLAMIC HOSPITAL"

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Abstract

Indonesia is the country with the largest Muslim population in Southeast Asia, with the enactment of DSN-MUI Fatwa Number 107 of 2016 concerning the Implementation of Hospitals Based on Sharia Principles with binding provisions therein which are shariacertified by MUKISI (All-Indonesian Health Effort Council). Law number 33 of 2014 on Halal Product Guarantees states that goods and services related to food, beverages, medicines, cosmetics, products, chemicals, biological products, genetically engineered products, as well as consumer goods that are used, utilized or utilized by the public. It is also stated that halal products are products that have been declared halal in accordance with Islamic law. This research was conducted descriptively using a mixed qualitative method to analyze the implementation of Sharia hospitals at the Bogor Islamic Hospital and quantitatively using SWOT analysis to analyze to support management in making decisions in the marketing sector. The conclusion of this study states that the management of the Bogor Islamic Hospital has fulfilled the Sharia compliance aspect referring to DSN-MUI Fatwa Number 107 of 2016 and has met halal standards in accordance with Law Number 33 of 2014. And there are results of IFAS factor analysis with a total weight value of 1 with a score of +0.71 and the EFAS factor with a total weight value of 1 with a score of +0.21. These results show that the Bogor Islamic Hospital is in quadrant 1 which means a fast growth strategy, meaning it has good opportunities and strengths.

Keywords: DSN-MUI Fatwa, Halal Product Guarantee, Hospital Marketing, Sharia

hospitals, SWOT analysis

JEL Classification: 110, 115, M31

1. INTRODUCTION

Indonesia is the country with the largest Muslim population in Southeast Asia, even on a global scale. This was recorded in The Royal Islamic Strategic Studies Center (RISSC) report entitled The Muslim 500 Most Influential Muslims 2024. According to the RISSC report, the total Muslim population in Indonesia will reach 240.62 million people in 2023, equivalent to 86.7% of the national population. the total is 277.53 million people. Health services that comply with Islamic principles are increasingly needed by Indonesian people. Currently there are 3,120 hospitals in Indonesia, both private and government. Of this number, according to data from MUKISI (Islamic Health Efforts Council throughout Indonesia) there are around 79 hospitals, while there are 4 clinics and 1 laboratory that have been sharia certified. A total of 24 hospitals have received certification as sharia hospitals and four of them are government owned. So, sharia hospitals are not only for Muslims, but also for all communities (Republika, 2022).

According to Law Number 33 of 2014, Halal Product Guarantee, article 1 paragraph (1), states that halal products guaranteed by this Law are goods and/services related to food, drinks, medicine, cosmetics, products, chemicals, biological products, genetically engineered products, as well as consumer goods that are worn, utilized, or utilized by the public. Furthermore, paragraph (2) states that halal products are products that have been declared halal in accordance with Islamic law (Yumarni, 2019; Amelia *et al.*, 2024; Devi *et al.*, 2024).

Based on its nature, hospitals are public services based on humanity in order to provide services in the health sector and have an obligation to carry out their social functions towards all groups, ethnicity, race and religion. Health is the basic right of every individual, and hospitals are the place where people seek help when they or their loved one's experience health problems. In this case, hospitals need special attention and support, especially in carrying out their vision and mission to help the government maintain the health of its citizens. The existence of sharia hospitals, apart from having a humanitarian mission, also functions to serve Allah, in other words, hospitals are a choice place to live to seek ma'isyah and worship. Its existence cannot be separated from the true mission of human life in the world.

As Allah says in Surah Al-Jasiyah verse 18:

وَلَا تَتَّبِعْ اَهْوَاءَ الَّذِيْنَ لَا يَعْلَمُوْنَ

Meaning: "Then, We made you (Prophet Muhammad) follow the Shari'ah regarding (religious) matters. So, follow it (the Shari'a) and do not follow the desires of those who do not know.

Sharia hospitals are a transformation from hospitals that use a general system to an Islamic system that originates from the passion of the people to achieve Islamic treatment. Starting from the feeling that there is a need for hospitals that need to be further certified according to sharia, MUKISI (Indonesian Health Effort Council/Majelis Upaya Kesehatan) in collaboration with the DSN (Indonesian National Sharia Council) MUI formalized the old sharia system for hospitals with certain standards and certification (MUKISI, 2018).

Several standards in sharia hospital certification are divided into 5 major chapters, namely:

- 1. Hifz Al Din (Maintaining religion) 32 standards and 108 assessment elements
- 2. Hifz Al Nafs (Nurturing the soul) 6 standards and 17 assessment elements
- 3. Hifz Al Aql (Maintaining Reason) 6 Standards and 18 assessment elements
- 4. Hifz Al Nasl (Care for Offspring) 2 standards and 7 assessment elements
- 5. Hifz Al Maal (Maintaining Assets) 4 standards and 11 assessment elements

The application of services in all activities carried out by Islamic hospitals is based on Maqasid al-Sharah al-Islamiyah, namely protecting religion, protecting life, protecting reason, protecting offspring and protecting property. As a basic guideline for everything we do, the principles of Maqasid Shari'ah are used as a basis for managing hospital management functions, including human resource management, financial management, marketing, facilities and infrastructure management. Solutions to address very complex health problems holistically is one of the roles of Islamic hospitals (Annisa, 2018).

Each chapter is then divided into two groups of standards, namely, the management aspect and the standard group for the service aspect.

The management group aspect includes an assessment of:

- a. Sharia Standards for Organizational Management. Regarding the organizational structure which includes the Sharia Supervisory Board and others, regarding the responsibility and accountability of the hospital owner in managing the hospital such as operational permits, organizational structure
- b. Human Capital Sharia Standards contain human resource governance
- c. Marketing Management Sharia Standards regarding hospital marketing governance
- d. Sharia Standards for Accounting and Financial Management contain sharia-based financial management and hospital accounting
- e. Sharia Facilities Management Standards contain the provision of hospital facilities, implementing facility standardization according to the rules
- f. Quality Management Sharia Standards contain quality policies and guidelines regarding the maintenance of faith, morals and muamalah through religious activities.

The service standard group includes:

- a. Sharia Standards for Service Access and Continuity include the process of receiving, guiding and returning patients
- b. Sharia Standards for Patient Assessment include a comprehensive initial assessment of the patient's medical-spiritual condition
- c. Sharia Service Standards include psychospiritual services to cover a variety of health service needs
- d. Sharia standards for drug services include the application of the concept of essential drugs in hospitals which contains a list of drugs, stock of selected drugs and therapies used that do not contain prohibited elements
- e. Sharia Standards and Spiritual Guidance include spiritual assistance services for all Muslim patients and patients who have special requests
- f. Sharia Standards for Patient and Family Education include the hospital's obligation to provide education to inpatients regarding the spiritual services received during treatment
- g. Sharia Standards for Infection Prevention and Control include the obligation for hospitals to have an infection prevention and control program.

These standards are based on sharia laws and have been reviewed by experts, so these points can become a reference for hospitals that will carry out certification. Allah SWT has very clearly ordered Muslims to consume halal food, in the Qur'an, surah Al-Maidah (3): 88

Meaning: "Eat what Allah has bestowed upon you as lawful and good fortune, and fear Allah in Whom alone you believe."

In Article 8 Paragraph 1 of the Law, it is appropriate for domestic consumers to receive protection in obtaining certainty regarding the halalness of food products in circulation. According to Law no. 33 of 2014 concerning Halal Product Guarantees,

including article 4 which states that products entering circulation and trading in Indonesia must be Halal certified (President of the Republic of Indonesia, 2014). And as a country with the largest Muslim population, it certainly has an interest in the distribution of safe and standard products (Hidayat, 2015; Maliha & Devi, 2023). In this study, researchers chose the Bogor Islamic Hospital as the research location. The reason why researchers chose the Bogor Islamic Hospital is because the hospital is the only hospital in the city of Bogor that is currently carrying out the sharia hospital certification process.

2. LITERATURE REVIEW

2.1. Sharia Hospitals

Hospitals in terms of cash management as well as financial assistance and hospital investment, collaborate with sharia financial institutions. (MUKISI Book-Standard-1441H). In the Indonesian dictionary literature, a hospital is defined as a house where sick people are cared for, provides health services and provides supporting health services covering various health issues. (Depdikbud Library Hall, 1995). Not only serving Muslims but also serving non-Muslim patients is one of the goals of sharia hospitals. Because of this, sharia hospitals are flexible and patients who seek treatment at Sayriah hospitals receive the usual services and have certification and are guided by the MUI fatwa, so they are able to have a higher quality level compared to other hospitals. And the public also agrees that a hospital with sharia service standards is a hospital that is trustworthy and safe and has better services in accordance with Islamic law so that it has added value in trusted services both medically and spiritually/religiously (MUI *et al*, 2017).

In order to realize the highest level of health, considering that hospitals are health service institutions for the community which have their own characteristics influenced by the development of knowledge regarding health sciences, technological advances and the socio-economic life of the community, Law (UU) Number 44 of the Year 2009 concerning hospitals, decided that a hospital is a comprehensive individual health service institution that provides inpatient, outpatient and emergency services. Requirements and procedures for applying for Sharia Hospital certification

1. Visitation Requirements

Hospitals that will apply for sharia hospital certification must fulfill the mandatory requirements in the requirements checklist, namely the requirements that hospitals must fulfill before submitting a visitation application. If the hospital has not met these requirements, then the visitation cannot be carried out

- a. The hospital has been accredited by the Hospital Accreditation Commission (KARS).
- b. The hospital has received recommendations from MUKISI.
- c. The hospital has Halal certification for Hospital Gynecology, and
- d. The hospital has a candidate for the Sharia Supervisory Board who has received a recommendation from the local Regional Ulema Council

2. Procedures for Requesting a Visitation\

 a. Hospitals that have met the Visitation requirements can submit an application for a Sayariah Hospital Certification Visitation to the National Sharia Council of the Indonesian Ulema Council (DSN-MUI)

- b. The visitation was carried out for 1 (one) day by 3 assessors, consisting of 2 (two) assessors from DSN-MUI and 1 (one) assessor from MUKISI
- c. DSN-MUI notifies the schedule and names of the assessors who will carry out the visitation.
- d. The hospital pays the visitation costs to DSN-MUI.
- e. The hospital provides facilities and infrastructure during the visitation
- 3. Sharia Standards for Accounting and Financial Management (SSMAK)
 - a. Normative basis. Allah commands to record all business and financial transactions (QS Al Baqarah: 282)
 - b. Allah commands to convey mandates to those who are entitled to them, and to establish laws fairly (QS An-Nisa': 58)
 - c. Allah commands to do justice and goodness (QS An-Nahl: 90)
 - d. Allah forbids consuming/obtaining wealth through false means, except through business that is carried out with mutual consent. (QS An-Nisa': 29)

Accounting and financial management are conducted in alignment with Islamic principles, encompassing the following:

- a. Hospital planning involves the preparation of work plans and budgets
- b. Revenue from services is managed, distinguishing between halal and non-halal sources
- c. Funds are allocated (tasharuf) for operational needs, development, as well as social and da'wah activities
- d. The hospital collaborates with sharia-compliant financial institutions for fund management and financial assistance
- e. Financial reports are prepared based on sharia financial reporting standards established by the Indonesian Institute of Accountants (IAI)
- f. Zakat and benevolent funds are organized and managed effectively
- g. Financial management is monitored and audited to ensure proper oversight

2.2. Conceptual framework

BPJPH carries out supervision of Halal Product Guarantees (JPH), this supervision is carried out by BPJPH individually or jointly with Ministries, related institutions or regional governments. JPH supervisors are obliged to maintain the confidentiality of the formula for the information submitted by the applicant. JPH supervision is carried out on several things: LPH, Validity Period of Halal Certification, Halal Products, Inclusion of Halal Labels, Inclusion of non-halal information, Separation of location, place, slaughtering tools, and processing, storage, packaging, distribution, sale and presentation between halal products and not halal (Devi, 2023). Supervision is also carried out periodically once every 6 (six) months and/or at any time according to need and/or in the event of suspected violations of statutory provisions. The implementation of halal product guarantees cannot be implemented optimally without cooperation and support from the community. With regard to the MUI Organizational Regulations regarding the provisions of the National Sharia Council (DSN), the Sharia Supervisor is an external body of the Sharia Council National, which is responsible for overseeing the implementation of the DSN MUI fatwa, the National Sharia Council acts

as the supervisor of Islamic financial institutions. Therefore all these organizations operate in accordance with the requirements of Islamic law.

All-Indonesian Islamic Health Effort Council or abbreviated as MUKISI. It is an organization that brings together Islamic health providers, is independent and does not solely seek profit. By imbuing the spirit to realize professional, quality and Islamic health efforts. The purpose of Mukisi being founded is:

- a. Realizing and improving the quality of the implementation of professional and Islamic health efforts
- b. Fostering, developing and improving members' human resource capabilities
- c. Participate in improving the level of public health in the national health system through implementing the functions of liaison, source and distribution of health information, mobilizing resources, coordinating and representing Islamic health efforts institutions in national and international forums

Administrative institutions are actually dissemination activities (communication of policy results) from implementers to implement policy results. "Task" in this title means referral from the Bogor Islamic Hospital. The framework can be seen as follows:

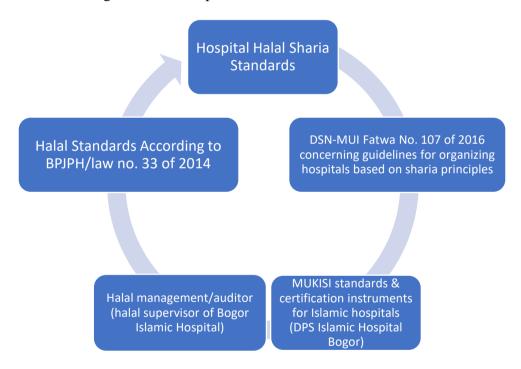


Figure 1. Research Framework

3. METHODOLOGY

In this study, the author carried out data collection techniques using interview techniques, conversations carried out by both parties with a specific purpose between the interviewer, the interviewer who asked questions and the interviewee who gave answers to the questions. Interviewing is a technique data collection is carried out through face to face and direct Q&A between data collectors and resource person/data source (Erga, 2022). The interview technique is one type of secondary data, where the researcher directly conducts a survey or goes directly to the place being studied and conducts interviews. The purpose of calculating the weight of internal and external factors is to

provide an assessment of how much influence each statement that has been made has (Nugraheni, 2021).

This type of method uses a mixed qualitative and quantitative research study using a SWOT analysis approach. The research subjects were the Deputy Medical Director, Sharia Supervisory Board and Marketing Section of the Bogor Islamic Hospital. The research instrument uses an interview guide. Meanwhile, if we look at the form of this research, it is categorized as evaluative research, where the author will carry out an analysis of hospitals that already have a Halal Management Team in accordance with the provisions of the DPJPH in Law Number 33 of 2014 and the Sharia Supervisory Board whose implementation refers to the DSN-fatwa. MUI Number 107/DSN-MUI/X/2016 concerning Guidelines for Organizing Hospitals based on Sharia principles. Marketing management in this research uses literature study analysis which refers to previous paper reports regarding SWOT analysis using the Internal Strategy Factors (IFAS) and External Strategy Factors (EFAS) approaches.

4. RESULT AND DISCUSSION

The existence of the Bogor Islamic Hospital is based on the commitment and concern of Bogor community leaders, intellectuals, ulama and doctors, who are summarized in a foundation, called YARSIB (Bogor Islamic Hospital Foundation). Starting with a meeting on Sunday, 27 Rabiul Akhir 1402 H, coinciding with 21 February 1982 AD, a friendly meeting was held at the invitation of KH Soleh Iskandar (late Founding Fathers) as a community leader, cleric and freedom fighter. Located at UIKA Jln. RE Martadinata Bogor to discuss the issue of establishing an Islamic Hospital Foundation in the Bogor Municipality / Regency area. With the vision of realizing an Islamic Hospital, which is trusted and of good quality and Mission: Providing quality Islamic health services by prioritizing patient safety, improving the quality of human resources in accordance with competence, Islamic values and norms, increasing the quantity and quality of facilities and infrastructure in accordance with Hospital standards, collaborating with related institutions in an effort to improve the level of public health, making Faith, Islam and Ihsan the organizational culture. And with the motto "Friendly, Patient, Sincere and Barakah".

The application of sharia principles in sharia hospitals includes hospital compliance with DSN MUI fatwa no. 107, guidelines for minimum hospital service standards and mandatory quality indicators for sharia hospitals, code of ethics for sharia hospitals, code of ethics for sharia hospital doctors and standard certification instruments. sharia hospital created by DSN MUI along with MUKISI which is the application of hospital standards to be declared a sharia hospital. The following is an analysis of the application or implementation of fatwas regarding the administration of sharia hospitals.

4.1. Implementation of DSN Fatwa No. 107 of 2016 at the Bogor Islamic Hospital

At the Bogor Islamic Hospital there are several contracts used in the personnel and procurement section, there are several contracts used in accordance with the fatwa, namely contracts with financial institutions, contracts related to human resource management (HR) and contracts with vendors. The following is the contract used by the Bogor Islamic Hospital. There are three contracts used by the Bogor Islamic Hospital, the Execution of the contract In ijarah there must be a collaborative relationship between the institutions Sharia Finance as the fund provider and tenant will lease back assets to

members with the party providing the lease of the asset. (Iblam, 2023) The ijarah contract is the contract most often used by the Bogor Islamic Hospital. This contract is used in the same way as in the field of human resources, with an example being the work contract when an employee is first accepted into work using an ijarah contract, then a contract with a patient with an example of an ijarah contract for approval of treatment services (Dewi, 2024). The second Ba'i contract, the Bai' contract, is a sale and purchase transaction agreement between a hospital and a supplier of food ingredients and medicines, as one example is the Ba'i contract between the Bogor Islamic Hospital and CV Rizky Makmur Sejahtera regarding the purchase of Chemicals. Laundry. The three Shirkah contracts, etymologically, the Syirkah contract means mixing, where someone mixes their assets with other people's assets so that one part and the other part are difficult to distinguish (Mahmudatus, 2019). The Syirkah contract at the Bogor Islamic Hospital is in the form of collaboration between the hospital and the owner of the hemodialysis equipment.

The service of the Bogor Islamic Hospital as a Sharia Hospital is mandatory for it to comply with the minimum standards of sharia hospital services and the mandatory sharia quality indicators that have been implemented by the Bogor Islamic Hospital. The minimum standard of sharia hospital services at the Bogor Islamic Hospital is to recite Basmallah at every administration of medicine and action, at every activity carried out by every hospital staff to read orally and invite the patient and the patient's family to recite Basmallah at the time of action or administration of medicine. As a form of effort and trust from the Bogor Islamic Hospital employees, patients and families understand that healing comes from Allah so it is an obligation for them to do so (Mukisi, 2018).

Having a hijab for patients, hijab (veil, patient clothes or cloth) is one of the things that must be prepared in stock, which covers all of the patient's private parts except the face and palms. By providing education the first time a Muslim patient comes, this can illustrate Islamic services. Mandatory training for patient fiqh, learning for employees about thaharah, one of which is prayer guidance for patients and talqin. With this, Islamic Resources (SDI) employees at the Bogor Islamic Hospital must understand fiqh for sick people in order to provide appropriate guidance for worship.

The Islamic education provided and given is in the form of leaflets and spiritual books to Muslim patients, so that the Bogor Islamic Hospital is able to provide education to patients and families. Installation of an Electrocardiogram (EKG) according to gender. An Electrocardiogram (EKG) is a graphic measuring tool that records the electrical activity of the heart. (Peter Kabo, 2008) when installing this device, it is installed according to gender between the patient and health workers at the Bogor Islamic Hospital in order to ensure that the patient's private parts are protected and that the patient has skin contact with people of other genders.

Operating time schedulingp, there is effective operating time scheduling, namely scheduling operations that do not coincide with prayer times except for operating conditions that must be hastened (Cyto). Apart from this, the following is a sharia-obligatory quality indicator for accompanying Sakaratul Maut patients with talqin. In measuring the indicator of accompanying Muslim patients at the Bogor Islamic Hospital, support to seriously ill Muslims in their last moments of life. Research (Khair, *et al.*, 2021)

Reminding prayer times, reminding prayer times is an activity of hospital staff to remind patients to perform obligatory prayers and provide prayer guidance assistance if needed. These indicators aim to ensure that Muslim patients perform fardu prayers. Dowry Catheter (DC) installation according to gender. Gender-appropriate Dower

Catheter (DC) installation is a catheter installation procedure that takes into account Sharia aspects and is carried out by staff of the same gender as the patient to whom the catheter is to be installed. Relating to the patient's private parts and the patient's comfort when a catheter is installed, taking into account the patient's privacy (MUKISI, 2018).

As well as sharia laundry, the Bogor Islamic Hospital already has a sharia-based laundry. The working mechanism is by separating infectious and non-infectious clothing or fabric. The purpose of this separation is to prevent the mixing of pure clothes with patients who are unclean, because if the two are mixed it will result in being completely unclean. Apart from that, the soap used for washing has received halal certification by LPPOM MUI, so it is guaranteed to be halal.

Medicines at the Bogor Islamic Hospital. In DSN MUI Fatwa no. 107 concerning guidelines for administering sharia hospitals in section six, namely provisions relating to the use of medicines, food and drinks, cosmetics and consumer goods, in point one states that hospitals use halal medicines, food, drinks, cosmetics and consumer goods. Obtain halal certification from the Indonesian Ulema Council. One of the advantages of a sharia hospital is that it guarantees that all medicines in the hospital are medicines that are halal certified and have been provided by LPPOM MUI. The existence of Sharia hospitals guarantees that Muslims receive halal medicine when treated in hospital. The requirement for halal certificates for medicinal products, cosmetics and consumer goods is in accordance with the mandate of Government Regulation (PP) Number 39 of 2021 concerning the implementation of the Halal Product Guarantee Sector (Ministry of Religion, 2021).

The nutrition of the Bogor Islamic Hospital has been certified halal. Sharia hospitals refer to the concept of halal nutrition, namely in the Al-Qur'an Surah Al Baqarah: 168. "O all humans, eat what is halal and good¹ from what is found on earth, and do not follow the steps of the devil, because indeed the devil is a real enemy for you." This verse states that we are commanded to eat food that is halal and good. For example, the aim of halal nutrition certification at the Bogor Islamic Hospital is to improve the quality of food and beverage products produced in order to obtain a halal guarantee from the MUI so that those who consume them will receive blessings. Bogor Islamic Hospital has received a halal certificate with number ID00220000242501021 which was issued on April 7 2022 with a validity period of April 7 2026.

Laundry activities use household health supplies that are halal certified. Meanwhile, halal chemicals used in laundry activities use materials that have been certified halal by LPPOM MUI (Institute for the Study of Drugs, Food and Cosmetics - Indonesian Ulema Council). Rumah Sakiut Islam Bogor has used certified household health supplies with number ID32110000255600122 which was issued on 28 April 2022 and is valid until 28 April 2026.

In managing funds, the Bogor Islamic Hospital has used the services of a Sharia financial institution in its efforts to run a sharia hospital. Currently, the Bogor Islamic Hospital has collaborated with Bank Syariah Indonesia to provide financing. In collaborating with the insurance company, the Bogor Islamic Hospital is collaborating with conventional BPJS Health because there is no BPJS Syariah yet.

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¹ https://kemenag.go.id/pers-rilis/obat-kosmetik-dan-barang-gunaan-wajib-bersertifikat-halal-et3gi2

DPS (*Dewan Pengawas Syariah*/Sharia Supervisory Board) at the Bogor Islamic Hospital is a necessity to comply with regulations that every company or institution that implements Sharia principles must have a Sharia Supervisory Board. Bogor Islamic Hospital has one person, namely Dr. Maman Nurjaman, S.Kom., ME and one other person who is still in the process of submitting the Bogor City MUI application letter. The main task of DPS is to carry out supervision, therefore DPS members really understand the jurisprudence and standards of Sharia Hospitals, one of which is the implementation of maintaining purity.

The existence of a Sharia Supervisory Board in the administration of a sharia hospital is mandatory, as in other sharia institutions which require the existence of a Sharia Supervisory Board. in this case, in order to become a DPS at a sharia hospital, the DPS must be certified by DSN-MUI because later the DPS will become the DSN representative at the sharia institution which has an important role in the implementation of sharia hospitals, one of which is providing input relating to the implementation of the standards that will be followed. by the hospital (Mukisi, 2019).

The existence of DPS is legally protected by law, one of which is Law No. 4 of 2007 concerning Limited Liability Companies in article 109 discussing the position of DPS in the Company (Law no.40 of 2007):

- 1. Companies that carry out business activities based on sharia principles, in addition to having a Board of Commissioners, are required to have a Sharia Supervisory Board
- 2. The Sharia Supervisory Board as referred to in paragraph (1) consists of or more sharia supervisors appointed by the GMS on the recommendation of the Indonesian Ulema Council
- 3. The Sharia Supervisory Board as referred to in paragraph (1) is tasked with providing advice and suggestions to the Board of Directors and supervising the Company's activities so that they comply with sharia principles (Law No. 40 of 2007 concerning Limited Liability Companies)

DPS is a DSN-MUI apparatus whose task is to supervise DSN-MUI fatwas and decisions on Sharia Financial Institutions (LKS) or Sharia Business Institutions (LBS), regarding this there are sharia-certified hospitals, even though he is only a representative of DSN-MUI and in his placement, he is part of and affiliated with the hospital. In its implementation, DPS is responsible to DSN-MUI. In the organizational structure of the hospital, the DPS is at the same level as the supervisory board's function as supervisor of the Board of Directors. If the function of the supervisory body is to supervise a series of management performance activities, then the DPS carries out supervision of management, especially those that are closely related to the implementation of services and hospital management so that they comply with sharia principles. Based on this structure, DPS has the following authority (DSN-MUI, MUKISI, 2018). The Sharia Supervisory Board (DPS) plays a critical role in ensuring Sharia compliance within the hospital's operations. Their responsibilities encompass providing advice and recommendations to the Foundation and hospital directors on matters related to Sharia principles. Additionally, DPS acts as a mediator between the hospital and the National Sharia Council-Indonesian Ulama Council (DSN-MUI), facilitating the communication of proposals and suggestions for developing business activities, particularly in products and services requiring fatwas or further Sharia studies.

As part of their duties, the DPS is authorized to issue warnings to hospital management to address and rectify any deviations from Sharia principles. Moreover, they have the right to escalate such issues by reporting violations to the relevant authorities when necessary.

In day-to-day operations, the DPS ensures that all hospital activities adhere to the fatwas issued by DSN-MUI. They are tasked with assessing the Sharia aspects of operational guidelines and hospital-issued products while providing expert opinions on the compliance of overall hospital operations and performance. For new products and services without existing fatwas, the DPS conducts reviews and requests the necessary fatwas from DSN-MUI. To maintain accountability and transparency, DPS submits detailed Sharia supervision reports every six months to the hospital directors, owners, and DSN-MUI.

Through these roles, the DPS safeguards the integrity of Sharia compliance, contributing to the hospital's alignment with Islamic ethical and legal standards. The Sharia Supervisory Board (DPS) advises the Foundation and hospital directors on Sharia compliance, mediates with DSN-MUI to develop products and services requiring fatwas, and warns against Sharia deviations, with the authority to report violations to relevant authorities. DPS ensures hospital operations align with DSN-MUI fatwas, assesses Sharia aspects of guidelines and products, reviews operations and performance, and requests fatwas for new services as needed. It also submits Sharia supervision reports every six months to hospital leadership, owners, and DSN-MUI.

The role and function of the Sharia Supervisory Board is very necessary for the ongoing operation of the hospital so that in the future the implementation of the Sharia hospital will be consistent and in accordance with the provisions so that the supervision system carried out by the Sharia Supervisory Board at the hospital will be maximized. One of the mandatory requirements for Sharia Hospital certification is that the hospital has a Sharia Supervisory Board Candidate who has received a recommendation from the local Regional Ulema Council. In the DPS of the hospital itself, there are people who have taken basic training for Maliyah muamalah and DSN MUI fatwa, basic training for Sharia supervisors (for Sharia financial institutions), basic training for hospital Sharia supervisors and have passed the Sharia Hospital Supervisory Board certification. The Sharia Supervisory Board (DPS) Work Program for Bogor Islamic Hospital 2022-2026 is as follows:

- 1. Prepare DPS work program for Bogor Islamic Hospital for a year
- 2. Hold regular meetings with the board of directors
- 3. Develop and perfect DPS Rumah sharia assessment instrumentsBogor Islamic Hospital is based on Sharia Hospital Certification Standards and Instruments version 1441 H
- 4. Gradually, issuing sharia opinions on 173 assessment elements based on Syariah Sakiy Home Certification Standards and Instruments version 1441 H
- 5. Sharia monitoring and compliance with related sections.

The Sharia Supervisory Board for the Bogor Islamic Hospital was proposed by the hospital, then a recommendation was requested from the Bogor City Indonesian Ulema Council. The hospital's DPS reports once every six months by conducting a self-assessment to the MUI in the form of evaluation attachments regarding Sharia hospital activities in accordance with MUKISI standards in the form of:

1. Sharia Standards for Access to HomePain and Continuity of Service (SSARK)

- 2. Sharia Standards for Patient Assessment (SSAP)
- 3. Sharia Standards for Sharia Drug Services (SSAP)
- 4. Sharia Standards for Spiritual Services and Guidance (SSPO)
- 5. Sharia Standards for Spiritual Services and Guidance (SSPBK)
- 6. Sharia Communication and Education Standards (SSKE)
- 7. Management and Organization Sharia Standards (SSMO)
- 8. Sharia Quality Management Standards (SSMM)
- 9. Sharia Standards for Human Capital Management (SSMMI)
- 10. Sharia Standards for Facility Management (SSMF)
- 11. Sharia Marketing Management Standards (SSMP)
- 12. Sharia Standards for Accounting and Financial Management (SSMAK)

Sharia hospital DPS itself has issued a DPS Opinion regarding hospital services, one example of which is regarding patients who are unable to pay treatment costs. With the following stages: From the cashier, the report is made to the finance department, then it is reported to the director to be forwarded to the relevant department for a survey, after that it is analyzed by the Sharia committee to issue a Sharia opinion after there is a decision to make installments using a Qard contract or with settlement released using a grant contract. The next example is the absence of Risywah in an organization which technically does not provide it directly to individuals.

4.2. Sharia Standards for Marketing Management

In this case, the Sharia hospital assessment is based on the Sharia hospital certification standards book version 1441 Hijriah which has a policy that regulates marketing of hospitals according to Sharia principles which includes the following points:

- a. Hospital marketing planning (marketing mix) does not violate Sharia principles
- b. Making products/services that do not conflict with Sharia
- c. The marketing process is in accordance with ethics (no risywah)
- d. Use of Sharia contracts in collaboration with other parties
- e. The hospital has a policy regarding promotions according to Sharia principles
- f. The hospital has a promotional program according to Sharia principles
- g. Media promotion of hospital services does not conflict with Sharia principles
- h. Management of promotional media according to Sharia rules
- i. There is a hospital policy regarding the management of HSR (Hospital Social Responsibility) in accordance with Sharia principles
- j. The hospital has a program on HSR according to Sharia principles
- k. Monitoring evaluation and reporting of HSR activities

Observing a company includes the scope of what occurs inside and outside using analysis (Zia *et al.*, 2018). Islam explains that the company's mission is to make a multipurpose company based on universal values (Didin & Hendri, 2023). SWOT analysis is one way to support management in making decisions, SWOT analysis is an evaluation of the internal environment (Strength/Strength, and Weaknesses) and the external environment (Opportunities), and challenges/Threats). Strategy directed defensive tactics to reduce internal weaknesses and avoid external threats. (Rika,2023) In terms of sharia standards for marketing management, the author conducted a SWOT analysis to determine the opportunities for innovation for the Bogor Islamic Hospital, with the following data obtained.

Table 1. Internal and External Factors

Internal factors		External Factors	
S	W	0	Q
The only Islamic Hospital in Bogor City	Service quality is less than optimal	Will be the first sharia hospital in Bogor City	There is a rival, namely RSIA Bunda Suryatni and there will be a new hospital within a close radius
Quite a strategic place	Tariffs have undergone revisions/adjustments	Islamic Hospital as a type C hospital is a big opportunity in terms of receiving initial level referrals from PPK 1	Community inability to pay
24-hour support services (Radiology, Pharmacy, Laboratory)	Lack of permanent doctors	Collaboration with companies/insurers in serving company patients/insurance participants	Lack of optimality in providing services
MCU's flagship service, Hemodialysis and Transfusion	The number of employees is not sufficient in accordance with Minister of Health Regulation No. 26 of 2014	Public awareness of health is getting better	Incompatibility of InaGbgs rates with hospital rates
Islamic Hospital has a relatively new inpatient building and quite comfortable outpatient rooms	The marketing program is not optimal		
There are meningitis and influenza vaccine services	There are no executive clinics and CT scans yet		

Calculation of Internal and External Factor Weights

This calculation of the weight of Internal and External factors aims to provide an assessment or weight regarding how much influence each statement that has been made internally and externally in the hospital has on the success of a hospital's achievements. The weighting ranges from 1.0 (very important) to 0.0 (not important). Table 2 presents the Internal Factors Analysis Summary (IFAS) and Table 3 External Factors Analysis Summary (EFAS). Giving a score to each factor on a scale ranging from +3 (very strong) to -3 (weak), based on several factors regarding the variables being analyzed. Variables that are positive (all variables that fall into the strength category) are given a value of +3 to +1 by comparing the influence of these variables on hospital success. Meanwhile, the

opposite applies to variables that are negative, if the weakness is very large (compared to the influence of the variable on the success of the hospital) the value is -3, while the value of the weakness is low, the value is -1.

Table 2. Internal Factors Analysis Summary (IFAS) Internal Strategy Factors

Internal Strategic Factors (IFAS)	Mark	Weight	Score (ValueixWeight)
Strength			<u> </u>
1. The only Islamic hospital in	+3	0.12	+0.36
Bogor City			
2. Quite a strategic place	+2	0.10	+0.20
3.24-hour support services			
(Radiology, pharmacy,	+2	0.09	+0.18
Laboratory)			
4.MCU superior services,			
Hemodialysis, Transfusion	+3	0.12	+0.36
5. Islamic Hospital has a relatively			
new inpatient building and quite	+3	0.12	+0.36
comfortable outpatient rooms			
6. Meningitis and Influenza Vaccine	+3	0.12	+0.36
services are available			
Weakness		0.12	
1. Service quality is less than	-3	0.12	-0.36
optimal	2	0.00	0.10
2. Tariffs have undergone	-2	0.09	-0.18
adjustment revisions	2	0.00	0.10
3. There is no permanent doctor yet4. The number of employees is not	-2	0.09	-0.18
sufficient in accordance with	-2.	0.08	-0.16
Minister of Health Regulation	-2	0.08	-0.10
No. 56 of 2014			
5. The marketing program is not			
optimal	-2	0.09	-0.18
6. There are no executive clinics and	~	0.07	0.10
CT scans yet	-1	0.05	-0.05
C1 Sound you	•	3.02	0.00
Total		1	+0.71

Internal Factor Analysis using IFAS was prepared after identifying the internal strategic factors of the Bogor Islamic Hospital. From the results of the analysis in the table above, the total weight value obtained is 1 with the total number of IFAS matrix calculations with the figure +0.71 coming from multiplying the value and weight.

 Table 3. External Factors Analysis Summary (EFAS)

External Strategy Factors	Mark	Weight	Score
(EFAS)			(ValueixWeight)
Opportunity			

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External Strategy Factors (EFAS)	Mark	Weight	Score (ValueixWeight)
1. Will be the first Sharia hospital in	+3	0.12	+0.36
Bogor City			
2. Islamic Hospital as a type C			
hospital is a big opportunity in terms of receiving initial level referrals from PPK 1	+3	0.12	+0.33
3. Collaboration with			
companies/insurers in serving			
company patients/insurance participants	+3	0.12	+0.36
4. Public awareness of health is getting better			
	+3	0.12	+0.18
Threat			
1. There is a rival, namely RSIA Bunda Suryatni and there will be a new hospital within a close radius	-3	0.12	-0.33
2. Community inability to pay	-3	0.12	-0.33
3. Lack of optimality in providing services			
4. Incompatibility of InaGbgs rates with hospital rates	-2	0.10	-0.18
	-2	0.10	-0.18
Total		1	+0.21

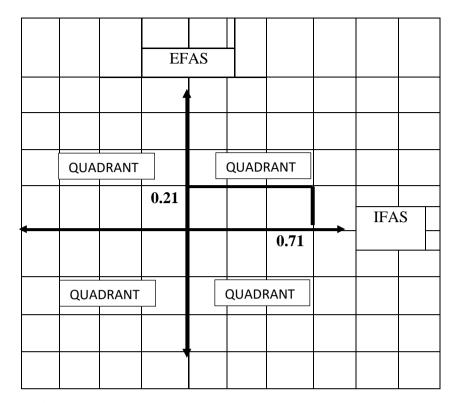


Figure 2. SWOT Analysis Diagram of Bogor Islamic Hospital

External Factor Analysis using the EFAS table was prepared after identifying the external strategic factors of the Bogor Islamic Hospital. From the results of the analysis in the table above, the total weight value obtained is 1 with the total number of EFAS matrix calculations with a figure of +0.21.

1. Internal Environmental Analysis

The environment in an organization includes strengths and weaknesses. Strength itself is everything that is needed in conditions that are internal to the organization so that all activities run optimally (Sulistiani, 2014). Weaknesses are deficiencies that exist in the internal conditions of a company, which result in its implementation not being optimal (Nasution, 2018; Pertiwi, 2018). The strength of the Bogor Islamic Hospital is the first Islamic hospital in the city of Bogor and has a relatively new inpatient building. Islamic hospitals have meningitis and influenza vaccine services, which not all hospitals have. Meanwhile, the weakness of the Bogor Islamic Hospital is the lack of optimal service quality. There are no permanent doctors yet, the number of employees is not sufficient in accordance with Minister of Health Regulation No. 56 of 2014 due to financial constraints and tariff revisions/adjustments are being carried out. The marketing program is not optimal due to the lack of adequate facilities and infrastructure, one of which is the absence of a CT scan and the absence of an executive clinic.

2. External Environmental Analysis

The external environment of the organization is the opportunities and threats of the organization. Opportunities are several external environmental factors that are positive and capable of directing the activities of an organization in the intended direction. Meanwhile, challenges are external environmental factors that can hinder the movement

of an organization (Lalanurmala, 2016). Opportunities at the Bogor Islamic Hospital is a type C hospital which has a wide reach because it is a level 2 health facility which accommodates referrals for level 1 health facilities and is the first hospital to be sharia certified in the city of Bogor where most of the people of Bogor are Muslim. Likewise, Islamic hospitals have collaborated with companies and insurance. Meanwhile, the threats to the Bogor Islamic Hospital are the community's inability to pay treatment costs, the existence of a type C hospital close to the area and the existence of a new type of hospital which is in the process of being built.

3. Matrix Calculation Analysis

The matrix calculation results are presented in diagram form in Figure 2. The figure shows that the condition of Bogor Islamic Hospital is in quadrant 1 which means a fast growth strategy. Quadrant 1 can be interpreted as a favorable situation because the hospital has good opportunities and strengths so that it can direct all of the organization's internal potential to take advantage of opportunities and can optimize by minimizing all weaknesses and threats. In this condition, the strategy that must be determined is to support aggressive growth policies. Therefore, it is recommended to support aggressive strategies that aim to advance the program, one of which is by increasing the availability of CT Scan support equipment (CT 64 Slice) so that the Bogor Islamic Hospital is able to minimize the number of referrals to other hospitals. As well as minimizing weaknesses originating from human resources by improving the quality of existing resources. The Internal Factor Evaluation Matrix (EFI) is a strategy formulation tool to summarize and evaluate main strengths and weaknesses. The stages in the EFI matrix are the same as the stages in the EFE matrix (Mulyono & Ayuniyyah, 2022).

4.3. Implementation based on Law no. 33 of 2014 at the Bogor Islamic Hospital

At the Bogor Islamic Hospital Nutrition Installation, halal certification has been carried out and is appropriate because it has received halal certification from the Halal Product Organizing Agency (BPJPH) which is in accordance with the flow guided by Law No. 33 of 2014 concerning halal product guarantees with number ID00220000242501021 which is issued on April 7, 2022 with a validity period until April 7, 2026. Rumah Sakit Islam Bogor has used certified household health supplies with number ID32110000255600122 which was issued on 28 April 2022 and is valid until 28 April 2026. At the Bogor Islamic Hospital, there are three types of medicines, namely medicines that are certified halal with an estimate of around 80%, medicines that have not been certified halal but are not haram 15%, and there are three vaccines that are haram 5%, used in emergency situations and before used with a note of using informant consent.

5. CONCLUSION AND RECOMMENDATION

Based on the results of the research above, after several data were obtained, regarding the implementation of the conformity of the Bogor Islamic Hospital with the Fatwa of the National Sharia Council of the Indonesian Ulema Council (DSN-MUI) Number 107 of 2016 through standards and assessment instruments for sharia certified hospitals version 1441 and implementation Regarding suitability for the application of halal certificates from the Halal Product Guarantee Organizing Agency (BPJPH) Republic of Indonesia Law No. 33 of 2014, there are several conclusions.

First, implementation of DSN fatwa no. 107 concerning guidelines for administering sharia hospitals at Bogor Islamic Hospital, there are seven important points,

namely first regarding contracts, there are Ijarah contracts, Ba'i contracts and Syirkah contracts. *Second*, regarding the minimum standards for hospital services that are in accordance with MUKISI standards. *Third*, regarding the use of medicines at the Bogor Islamic Hospital, there are three groups, namely 80% halal medicines, 15% halal medicines but not yet certified, and 5% haram medicines with the condition that their use requires informant consent. *Four*, nutritional installations at the Bogor Islamic Hospital themselves have halal certificates from the MUI, then in terms of chemical use, the Bogor Islamic Hospital has collaborated with companies that have halal certification. Fifth, fund management is in accordance with the provisions of the DSN fatwa. Sixth, the Bogor Islamic Hospital has a Sharia Supervisory Board which has a certificate from DSN MUI regarding the Supervisory Board. Seventh on Sharia standards for marketing management, the author examines it using SWOT analysis to find out whether there are advantages or disadvantages to the Bogor Islamic Hospital.

SWOT analysis can be used at the Bogor Islamic Hospital as a design for how a more advanced and developing health agency will look like by taking advantage of its internal and external environment. As for the results of the SWOT obtained from the Bogor Islamic Hospital, there is a favorable situation by having good strengths and opportunities so that it can develop the entire potential of the organization in order to take advantage of existing opportunities and be able to optimize by minimizing all existing weaknesses and challenges.

The implementation of halal certificates from the Halal Product Guarantee Organizing Agency (BPJPH) at the Bogor Islamic Hospital has three aspects, firstly, the Nutrition Installation at the Bogor Islamic Hospital has a halal certificate from the LPPOM MUI (Institute for the Study of Drugs, Food and Cosmetics - Indonesian Ulema Council) with number ID00220000242501021 which was issued on April 7 2022 with a validity period until April 7 2026. Both Bogor Islamic hospitals use chemical as laundry ingredients and other household health supplies which have been halal certified with number ID32110000255600122 which was issued on April 28 2022 valid until 28 April 2026. Thirdly, the use of medicines and health care in Islamic hospitals is grouped into three sections, namely halal medicines, halal medicines but not yet certified and haram medicines with service procedures using informant consent.

Based on the conclusions above, the author formulates the following suggestions: (1) Bogor Islamic Hospital already has meningitis and influenza vaccine services which other hospitals rarely have. It would be a good idea to collaborate with Umrah and Hajj travel, as well as marketing via the website; (2) In its marketing, Bogor Islamic Hospital is advised to promote services in the form of podcasts; (3) More aggressively provide health outreach to the public regarding the importance of utilizing existing health services; (4) Improving the quality of hospital services so that they can be better than other institutions, so that patients feel satisfied with existing services and prefer the Bogor Islamic Hospital to other hospitals; (5) Improving service bureaucracy, because if bureaucracy is provided quickly then service can also be in accordance with what is expected; (6) Adding supporting services in the form of a CT Scan (64 Slice) to minimize the number of referrals to other hospitals.

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