

RESEARCH ARTICLE

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Implementation of Islamic Nursing Care in Improving Patient Satisfaction

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ABSTRACT

Hospital must have a superiority in order to survive and compete with other hospitals which have patients satisfaction oriented. One of the factors that influence the patients' satisfaction is nursing care. Nursing care must relevant with Islamic rule that it was basic for nurses in practicing nursing care plan. The purpose of this research was to analyze the influence of Islamic nursing care phases of orientation, working, and termination on patients' satisfaction level in Lumajang Islamic hospital. The respondent 92 people were taken by proportionate stratified random sampling. The instrument used was check list of Islamic nursing care phases of orientation, working, termination, and questionnaire of patients' satisfaction. The result of ordinal regression test showed that there were significant influence in all phases of Islamic nursing care of orientation, working, and termination on patients' satisfaction level in Lumajang Islamic hospital where p<0.05 and wald > 3.84/df (in orientation p = 0.000 and wald 14. 274; working p = 0.000 and wald 12.230; termination p = 0.000 and wald 20.850). Islamic nursing care which most significant was termination phase. Islamic nursing care was significantly influence on patients' satisfaction; therefore it could be used as guidelines for nurses on practicing nursing care plans.

Keywords: Islamic nursing care, Orientation, Working, Termination, Patients satisfaction level

INTRODUCTION

Spiritual or religious dimension is just as important as other dimensions, such as physic, physiologic, and psychosocial. WHO (1984) in Hawari 1997: 28 stated that holistic therapy which supposed for patients included four dimensions, such as physic or biologic therapy, physiologic, psychosocial, and psych spiritual therapy. The importance of spiritual aspects on supporting other aspect of treatments are bio-physic-social that cannot be bargained, because patients in hospital, especially inpatients not only suffering physical illness but also suffering from pressures and mental spiritual disorder which was light to heavy as caused of their illness. Religious therapy approach in medical practice will raise his spiritual power to face the disease that he suffered (Hawari, 1997: 28-29).

Spiritual dimension regulated in act No. 36 Year 2009 article 1 section 1 provided that healthy is stated of complete physical, mental and social well-being which allow individual to live productive socially and economically. Act No. 36 Year 2009 article 2 provided that health development is held based on humanity, balance, advantage, protection, respect on right and obligation, justice, gender, and nondiscrimination and religious norms (Act No. 36 Year 2009 about Health).

Spiritual dimension also regulated on hospital accreditation standard. Religious care or others related patient's religion and belief is one of HPK (Patient and Family Rights) in standard of Commission for Hospital Accreditation which must met by hospitals. Standard of patient and family rights stated that hospitals have to be responsible in giving a process that support patient and family rights during hospitalization. Hospitals must have process to response the patient and family needs in giving spiritual care or others related with religious and patient belief. Hospital regulations must have a spiritual care guidelines and SOP (Standard Operational Procedure) of spiritual care. In its process healthcare staffs provide spiritual care based on the patient and family needs (standard of HPK 1.1.1 Commission for Hospital Accreditation). In this case all the staffs such as clergy, doctor, nurses, and other health care staffs, also provider must give support and Islamic caring so well.

Prior study was done by Bambang (2014), in implementation the value of Islamic morals research on nursing care activities by healthcare staffs for inpatient and outpatient in RST Dr. Amir Salatiga in 2014 was need implemented the value of Islamic morals on nursing care activities. In this research Islamic caring was

done widely from caring staffs, financial, treatment, and physic. The other researches were also done by Winarti (2016) about the effect of implementation spiritual nursing care on patients satisfaction in Islamic Hospital Sultan Agung Semarang, it concluded that there was significant influence between implementation of spiritual nursing care and patients satisfaction. In this research, nurses practiced spiritual nursing care from assessment until evaluation, the implementation still general not in specific yet on implementation of three phases such as orientation, working, and termination.

Lumajang Islamic hospital is one of the private hospitals from four of private hospitals in Lumajang. Based on the preliminary study on May 22, 2017 that the average of patients satisfaction level on nursing care inpatient room Lumajang Islamic hospital in January- April 2017 were 85%. The percentage of patients satisfaction on nursing care was good but it hasn't met the standard of Islamic hospital that ≥90%.

Based on (2015: 128) stated that one of the factors that influence patients satisfaction was nursing care. Nursing care here was Islamic nursing care as basic for nurses in practicing nursing care plan. Islamic nursing care was important done by nurses in giving nursing care plans start with pre-assessment (orientation), giving assessment (working) and post- assessment (termination). Based on the background of the study, researcher wants to do deep analysis about the influence of implementation of Islamic nursing care in inpatient room at Lumajang Islamic hospital on patients satisfaction level (case study in Lumajang Islamic hospital).

The purpose of this research was to analyze the influence of Islamic nursing care phases of orientation, working, and termination on patients' satisfaction level in Lumajang Islamic hospital.

METHODS

This research used analytical observation with cross sectional design. This research was done in Lumajang Islamic hospital including inpatient room Nurse Station 1 and 2. Nurse Station 1 included VVIP I, VVIP 2, VIP, first class and second class. Nurse Station 2 included 3 VVIP rooms, such as VIP, second class, and third class. This research was conducted in July to September 2017. Ninety- two respondents were taken by Proportionate stratified random sampling as sample with inclusive criterion, such as patients were willing to be respondent, patient have been minimum treated 3 x 24 hours inpatient room in Lumajang Islamic hospital, they were Islam and able to communicate.

Check list was used in this research as instrument. Islamic nursing care here included three phases; orientation, working, termination and questionnaire of patients satisfaction. When patients may go home, minimally they had been threated the third day, according to the inclusion criteria, researcher collected the data using questionnaire of patients satisfaction assessment during patients were treated in Lumajang Islamic hospital and respondents also fill in the checklist about Islamic care that was done by nurses on him. SPSS software using univariate and multivariate statistical analysis were applied in this research to analyze the data. Univariate analysis described respondents' distribution according to age, sex, and education. Multivariate analysis was to analyze the effect of implementation Islamic nursing care phases of orientation, working, and termination on patients satisfaction level in Lumajang Islamic hospital used ordinal regression test.

RESULTS

The respondent characteristic in this research included respondent characteristics based on sex, age, and education level. Here, the table about respondent distribution based on sex, age, and education level.

Table 1. Distribution of respondent frequency based on sex, age, and education at Lumajang Islamic Hospital in August – September 2017

No.	Characteristic	Frequency	Percentage
1	Sex		
	• Male	36	39.1
	• Female	56	60.9
2	Age		
	• ≤26 years	9	9.8
	• 26 – 45 years	38	41.3
	• 46 – 65 years	34	36.9
	• >65 years	11	12
3	Education		
	 No School 	6	6.5
	 Elementary School 	18	19.6
	 Junior High School 	21	22.8
	 Senior High School 	39	42.4
	• College	8	8.7

Tabel 1 showed that most of respondents were female with the total 56 respondents (60.9 %), almost half of the respondents were 26 - 45 years with total 38 respondents (41.3 %), and few of respondent were ≤ 26 years with total 9 respondent (9.8%). Where, in characteristic of education level, nearly the respondents had been graduated from Senior High School were 39 respondent (42.4 %).

Table 2. The influence of Islamic nursing care phases of orientation, working and termination on patients satisfaction level in Lumajang Islamic Hospital in Agustus-September 2017

Islamia Nursing Cara —	Patients Satisfaction Level		
Islamic Nursing Care —	Wald	p	Pseudo-R (Nagelkerke)
Orientation	14. 274	0.000	0. 230
Working	12.230	0.000	0. 344
Termination	20.850	0.000	0. 417

Table 2 showed that the Wald Value >3.84/df or p value < 0.05, so null hypothesis was rejected, so Null Hypothesis (Ho) cannot actually be proved, it means that there significant influence noted between variable of Islamic Nursing Care Phases of Orientation, Working, and Termination on Patients Satisfaction Level in Lumajang Islamic Hospital. From the phases of Islamic nursing care, a termination phase was shown very significant influence with wald value 20.850.

Based on Dahlan (2014: 54), contribution of independent variable on dependent variable was measured using Pseudo-R Table 2 showed that the ability of Islamic nursing care on orientation phases to explain patients satisfaction level in Lumajang Islamic hospital was 23%, the ability of Islamic nursing care on working phases to explain patients satisfaction level in Lumajang Islamic hospital was 34%, and the ability of Islamic nursing care on termination phases to explain patients satisfaction level in Lumajang Islamic hospital was 41.7%.

DISCUSSION

The result of this research showed that there was significant influenced of Islamic nursing care phases of orientation, working, and termination on patients' satisfaction level in Lumajang Islamic hospital. The result finding was supported by Fuad (2017) stated that Islamic caring has significant influence on patients satisfaction in Regional Public Hospital Meuraxa Kota Banda Aceh. Where, the percentage of influence level was 65.0%. This research was also supported by Winarti (2016) noted that there was significant influence of patients satisfaction between the implementation of spiritual nursing care with patients satisfaction in Sultan Agung Semarang Islamic Hospital. This research also aligned with research conducted by Abdurrouf (2013) stated that there was significant effect of Islamic caring on patients' satisfaction in Islamic hospital Sultan Agung Semarang, here Islamic caring means professional, friendly, trust, consistent, patient, and sincere in giving nursing care.

According to Sukowati (2014) Islamic values were need implemented on nursing care activities by medical personnel. Hence, positive behavior which done by health workers indirectly it has valuable meaning for patients and families moral. They felt cared for, quiet and comfortable because they get nursing care from health workers who responsible, trust, and have good attitude based on norms and ethical values, those Islamic best treatment for patients became support and motivation for patients' recovery. Healthcare staffs behavior when gave treatment for inpatient and outpatient based on the Islamic behavior, like doing nursing care activities with sincere, patient, polite, and well mannered, Islamic nuances such as greeting, using veil, always remembrance, and praying when doing nursing care and also they were trust. Those entire relevant sources were patients satisfaction in Lumajang Islamic hospital on implementing Islamic nursing care phases of orientation, working, and determination. Most of the patients satisfaction on Islamic nursing care was good. Patients felt quiet, felt cared for, and comfortable because they got nursing care from nurses who were responsible and trust, and their behavior relevant with norms and ethical nursing base on religion. By implementing Islamic nursing care, it would have been given support and motivation for patients discovery, so it was influence patients satisfaction level in Lumajang Islamic hospital.

Islamic nursing care was in plenary nursing care. Nurses gave nursing care holistically. Relevant with human concepts as a holistic creature, they were holistically creatures of bio, psycho, socio, and also spiritual (Ristianingsih, et.al, 2014). Nurses must look patients holistically such as bio, psycho, socio, and also spiritual and every part has influenced. Islamic nursing care was very important done by nurses like stated in WHO (1948), Public Health Laws Number 36 Year 2009 and Hospital Accreditation Standards.

The result of multivariate analysis used ordinal regression test described that all phases of Islamic nursing care was influence on patients satisfaction level in Lumajang Islamic hospital, however the implementation of Islamic nursing care which has high significant influence was termination phases. This was

because of prayer which given to the patients contain spiritual power or spirituality could raise self-confident and optimism (recovery hope) on patients. Both self-confident and optimism were very important for healing of disease, besides using medicines and medical treatments (Hawari, 1997:478). The result of this research was supported by Dr. Dale A. Matthews (1996 in Hawari, 1997: 478) stated that from 212 studies were done by expert, in fact 75% explained in giving prayer showed positive influence for patients. Positive feeling on patients were influence patients satisfaction on nursing care which given. Besides prayer, they offered favor if patients or their families need a nursing care that it could make patient feel cared for by nurses. According to Satrianegara (2009: 118-119), factors which influence quality dimension was knowing the customer, such nurses care to the patient like their hope. Besides, responsiveness; it was nurses responsive at patients' needs and hope. A phase of working in this research has significantly smallest influence. Thus was relevant with Maslow theory about human basic needs where, hierarchy Maslow stated that human tend to chase physiological and safety needs first, then mental and spiritual needs.

The nurses' ability of Islamic nursing care of termination phase to explain patients satisfaction level in Lumajang Islamic hospital were significantly high because most of the nurses have been well done Islamic nursing care of termination phase, such as reviewing patients feeling, giving compliment, praying for their patients, offering help, and greeting. Termination phase which was applied nicely will give comfort and increase patients motivation to heal, so it was influence on patients satisfaction.

Lumajang Islamic hospital made Islam as their identity in nursing care was an obligation. Islamic nursing care became a differentiator and superiority for Islamic hospital. The importance of spiritual dimension on nursing care in Lumajang Islamic hospital must be supported by all components, one of them was policy maker in Lumajang Islamic hospital. Patricia, et.al, (2005: 289) stated that holistically approach could be achieved if there were health providers including professional group such as doctors, nurses, and therapists and also other professional health, such as social workers and clergy.

Nursing care was one of the factors that influence patients satisfaction (Nursalam, 2015: 128). The patients' satisfaction was one of the indicators of quality caring that was nurses given and as a modal to achieve patients more and to get loyal patients. Loyal patients will use the same health care if they need it. Loyal patients will ask others to use the same of health care facilities (Supriyanto, 2010: 303-304). Besides, loyal patients were cheap media of promotion. Having loyal patients will increase selling power of healthcare institutions, profitability will increase. Therefore, cross subsiding to improve the service quality and honorarium which given for all the human resources in thus healthcare institutions will increase, wealth fare, passionate work will increase, and also eager to increase their patient. Increasing of performance will cause caring for patients will be better, it will make the patients more satisfied and if someday thus patients need a healthcare, they will use the same caring. Loyal patients are not sensitive about cost or payment. In the long term, loyal patients will give hospital profitability. Therefore, satisfaction was valuable assets (Nursalam, 2015: 127).

Religion become sources of suggestion and strong motivation for patients itself to live positively. Beside becomes motivation, religion teaching was part of ethical source for nursing healthcare. The implementation of Islamic nursing care became a part that cannot be separated on patients healing effort in Lumajang Islamic hospital. Islamic nursing care as factor that influence patients' satisfaction, so it was hoped Islamic nursing care become commitment of their nurses in Lumajang Islamic hospital and to improve patients satisfaction which relevant with their hope. Islamic nursing care become one of the implementations of nursing care that could be done by nurses in Lumajang Islamic hospital and the most dominant phases to increase patients satisfaction was termination, like nursing care which given for patients based on Islamic values in the end of treatment, included reviewing patients feeling, giving compliment, praying for patients, offering help, and greeting.

CONCLUSION

There was a valuable influence of Islamic nursing care phases of orientation, working, and termination on patients' satisfaction level in Lumajang Islamic hospital.

REFERENCES

Abdurrouf, M., Nursalam, Purwaningsih. (2013). Islamic caring model to increasing patient satisfaction (Caring Islami terhadap peningkatan kepuasan pasien). *Jurnal Ners*, 8(1), 153-164.

Departemen Agama RI. (2005). Al-Quran and its translation (Al-Quran dan terjemahannya). Bandung: PT Syaamil Cipta Media.

Bakar, A., Kurniawati, N.D. (2013). Phenomenological study of Islamic patient worship experience treated with Islamic spiritual approach at Aisyiyah Bojonegoro Hospital and Haji Hospital Surabaya (Studi fenomenologi pengalaman ibadah pasien Islam yang dirawat dengan pendekatan spiritual Islam di Rumah Sakit Aisyiyah Bojonegoro dan Rumah Sakit Haji Surabaya). *Critical Medical & Surgical Nursing Journal*, 1(2).

- Dahlan, S. (2010). Sample size and sampling technique (B esar sampel dan cara pengambilan sampel). Jakarta: Salemba Medika.
- Dahlan, S. (2014). Ordinal regression (Regresi ordinal). Jakarta: Ebook.
- Gunarsa, S. (2008). Psychology of nursing (Psikologi Perawatan). Jakarta: Gunung Mulia.
- Hawari, D. (1997). Al-Quran, psychiatry (Al-Quran Ilmu Kedokteran Jiwa). Yogyakarta: Victory Jaya Abadi.
- Hidayanti, E. (2014). Da'wah on hospital setting: descriptive study of counseling service system of Islamic counseling for patient in inpatient unit at Sultan Agung Hospital Semarang (Dakwah pada setting rumah sakit: studi deskriptif terhadap sistem pelayanan bimbingan konseling Islam bagi pasien rawat inap di RSI Sultan Agung Semarang). *Jurnal Bimbingan Konseling Islam*, 5(2).
- Nursalam. (2015). Nursing management: application in professional nursing practice (Manajemen keperawatan: aplikasi dalam praktik keperawatan profesional. Jakarta: Salemba Medika.
- Nursalam. (2013). Research methodology for nursing science (Metodologi penelitian ilmu keperawatan). Jakarta: Salemba Medika.
- Potter A.P., dan Perry A.G. (2005). *Text book of fundamental of nursing: concept, process and practice (Buku ajar fundamental keperawatan: konsep, proses dan praktik.* Jakarta: EGC.
- Riyadi, A. 2014. Da'wah for patient: study of da'wah model through Islamic spiritual guidance service system in hospital (Dakwah terhadap pasien: telaah terhadap model dakwah melalui sistem layanan bimbingan rohani islam di rumah sakit). *Jurnal Ilmu Dakwah*, 5(2).
- Rouf. A. (2013). Effect of Islamic caring on patient satisfaction (Pengaruh caring Islami terhadap kepuasan pasien. Thesis. unpublished.
- Satrianegara, F. (2009). Textbook of organization and management of health and midwifery services (Buku ajar organisasi dan manajemen pelayanan kesehatan serta kebidanan). Jakarta: Salemba Medika.
- Satrianegara, F. (2014). Organization and management of health services: theories and applications in health center and hospital services (Organisasi dan manajemen pelayanan kesehatan: teori dan aplikasi dalam pelayanan puskesmas dan rumah sakit. Jakarta: Salemba Medika.
- Standard of PFR of the Hospital Accreditation Commission (Standar HPK Komisi Akreditasi Rumah Sakit).
- Sukowati, B. (2014). Implementation of Islamic moral values on health service activities by medical personnel on outpatients and inpatients in dr. Asmir hospital, Salatiga (Penerapan nilai nilai akhlak islami pada kegiatan pelayanan kesehatan oleh tenaga medis terhadap pasien rawat jalan dan pasien rawat inap di RST dr. Asmir, Salatiga. *Thesis. Program Pascasarjana Sekolah Tinggi Agama Islam Negeri Salatiga*.
- Supriyanto S., Ernawaty. (2010). *Marketing of health services industry (Pemasaran industri jasa kesehatan)*. Yogyakarta: ANDI.
- Sugiyono. (2008). Educational research methods (Metode penelitian pendidikan). Bandung: Alfabeta.
- Tasmara, T. (2002). To cultivate an Islamic work ethic (Membudayakan etos kerja Islami). Jakarta: Gema Insani
- Tjiptono. (2005). Management of service marketing (Manajemen pemasaran jasa), Edisi 4. Yogyakarta: Andi Press.
- Utama, S. (2005). Understanding the phenomenon of hospital patient satisfaction (Memahami fenomena kepuasan pasien rumah sakit). *Jurnal Manajemen Kesehatan*, 9(1), 1-7.
- Pemerintah RI. (2009). RI Law no. 36 of 2009 on Health (UU RI No. 36 tahun 2009 tentang Kesehatan). Jakarta: Pemerintah RI.
- Winarti. (2016). The influence of the application of spiritual nursing care to patient satisfaction in the Islamic Hospital of Sultan Agung Semarang (Pengaruh penerapan asuhan keperawatan spiritual terhadap kepuasan pasien di rumah sakit islam sultan agung semarang). *Thesis*. Program Studi Magister Keperawatan Fakultas Kedokteran Universitas Diponegoro Semarang.