



Management Analysis in Health Services for Hajj Pilgrims at the Karawang District Health Service

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Abstract

Healthcare services for Hajj pilgrims involve continuous health examinations, treatment, and maintenance according to standards, enabling pilgrims to perform Hajj rituals optimally. However, several challenges persist in ensuring the effectiveness and efficiency of these health examinations. This internship study adopts a descriptive method involving direct observation of activities. Findings reveal several pre-departure health examination issues among Hajj pilgrims, including delays due to inadequate understanding of information and insufficient facilities and medical staff at health centers. These constraints significantly affect healthcare quality, compounded by limited human resources allocated for vaccination registration by the Health Department. Based on these findings, the study recommends solutions such as enhancing communication and coordination, improving infrastructure, and recruiting and training medical personnel to enhance healthcare service effectiveness for Hajj pilgrims at the Karawang District Health Office.

Keywords: Management Analysis; Healthcare Services; Hajj Pilgrims

A. INTRODUCTION

The pilgrimage to Mecca, known as Hajj, is the fifth pillar of Islam and obligatory for every capable Muslim once in their lifetime. Hajj is a physically demanding worship comprising various rituals. Physical challenges faced during Hajj include dense crowds, traffic congestion, extreme climatic conditions, and the risk of infectious diseases, which pose significant health risks and mortality factors (Sulaiman et al., 2019).

According to the 2024 Hajj surveillance data, 1,116 pilgrims from Karawang District have completed their pilgrimage costs (BIPIH). The administration of Hajj services includes pre-departure vaccinations, regular health checks before departure, during the pilgrimage in Saudi Arabia, and upon return to Indonesia, aiming to ensure pilgrims' health is optimal. Healthcare services for Hajj pilgrims are provided at local health centers, hospitals, during travel, and at referral hospitals. The Karawang District Health Office coordinates vaccination activities at health centers and hospitals.

Pre-departure health screenings are conducted for pilgrims who have settled their Hajj journey costs in the current year. These screenings ensure that health examinations, treatments, and maintenance align with standards, enabling pilgrims to perform Hajj rituals effectively. Programs implemented by the Health Office during Hajj encompass health screenings and guidance to safeguard pilgrim health. Pilgrim health conditions are assessed through tests and guidance in their

home countries, ensuring their readiness and health during Hajj. Health readiness, or "Istithaah Health," is crucial as it determines a pilgrim's physical and mental capacity, which is essential for a smooth Hajj journey.

Healthcare services for pilgrims require adequate numbers, types, and qualified healthcare personnel to work optimally, aiming to reduce pilgrim mortality rates. Besides healthcare management issues, socioeconomic challenges also impact service delivery. Misinformation among pilgrims due to inadequate understanding, insufficient facilities and medical staff at health centers, and limited human resources allocated for vaccination registration pose significant challenges, affecting healthcare service quality.

Strengthening healthcare management for Hajj is essential to enhance service quality. This involves improving human resources quality, developing health information systems, and coordinating technical support for healthcare management during Hajj preparations in Saudi Arabia. Health Office officials plan and allocate healthcare facilities across districts, coordinate referrals to hospitals for high-risk pilgrims, ensure communication between the health center and Health Office staff, conduct vaccinations, complete pilgrim health examination documents, and enter data into the Siskohatkes application. These efforts are stipulated in Indonesia's Health Hajj Implementation Law No. 62 of 2016. Based on the above, further research is needed to explore healthcare management for Hajj pilgrims, encompassing planning, reporting, guidance, and financing at health centers and hospitals that have yet to achieve optimal service delivery.

B. METHODS

This research employs an implementation method, specifically descriptive, aimed at depicting and describing existing phenomena with a focus on their characteristics, quality, and engagement in activities. Data collection includes articles, observations, and documentation. The article technique involves sourcing relevant literature related to the research problem. Observation employs direct observation and involvement to gather comprehensive data on activities. Documentation utilizes document-based data such as photos or electronic records. The study delves into the management of healthcare services for Hajj pilgrims by the Health Office. Data analysis systematically organizes findings from articles, observations, and documentation to enhance the researcher's insight into the investigated issues.

C. RESULTS

The Karawang Regency Health Office, situated in West Java Province, Indonesia, borders Central Java Province to the east, Purwakarta Regency to the north, Bekasi Regency to the south, and the Java Sea to the west. It serves as a pivotal government institution responsible for delivering comprehensive healthcare services to the residents of Karawang Regency. The office's overarching vision is "Achieving a healthy and self-reliant Karawang community," underscored by specific missions aimed at realizing this vision. These include effective management of environmental health, community health monitoring, healthcare provision, and continuous evaluation of service delivery (Afrianika, 2022).

The office's vision, "KARAWANG HEALTHY AND SELF-SUFFICIENT," embodies the aspiration for a future Karawang characterized by robust health through comprehensive health development. This includes fostering healthy environments and behaviors, ensuring accessible, high-quality healthcare services, and promoting optimal health outcomes. The notion of self-reliance encompasses a community that is knowledgeable, proactive, and capable of identifying, preventing, and addressing health challenges independently, thereby achieving sustained health and well-being. The missions undertaken to achieve a healthy and self-reliant community include: 1) Enhancing the quality of healthcare services; 2) Empowering the community through health education and awareness; 3) Strengthening disease prevention and control efforts; 4) Developing and optimizing healthcare resources; 5) Improving the management and governance of healthcare personnel.

In fulfilling its mandate, the Karawang Regency Health Office implements several key programs and activities: 1) Maternal and Child Health Program (KIA), encompassing prenatal, delivery, and postnatal care services; 2) Environmental Health Program, focusing on clean water management, environmental sanitation, and vector control; 3) Dental and Oral Health Program, providing comprehensive dental care services; 4) Mental Health Program, offering psychological and psychiatric services; 5) School Health Program, ensuring health services are available in educational institutions; and 6) Occupational Health Program, addressing health needs in workplaces.

Additionally, the Health Office plays a crucial role in providing healthcare services to Hajj pilgrims, conducting health screenings, and delivering health education on issues such as hydration, heat management, and infectious disease prevention.

The Health Office is led by a dedicated Head of Office who oversees leadership, coordination, and strategic management. The office is supported by department heads and staff comprising both medical and non-medical professionals, all committed to delivering quality healthcare services. Regular evaluations of service delivery help identify areas for improvement, while collaborations with other agencies enhance service quality and effectiveness. The Health Office manages various healthcare facilities, including hospitals, community health centers, clinics, and integrated health posts, equipped with trained personnel to meet the healthcare needs of the community.

To ensure transparency, the Karawang Regency Health Office publishes an annual health profile that provides comprehensive data and information on public health issues. This profile involves collaboration among the Health Office, community health centers, hospitals, and relevant stakeholders from various sectors, aiming to promote public health awareness and accountability in healthcare service delivery. By steadfastly pursuing its vision and missions, the Karawang Regency Health Office endeavors to create a healthier, self-reliant community guided by principles of equity, accessibility, and quality in healthcare provision.

D. DISCUSSION

The implementation of health services for Hajj pilgrims at the Karawang District Health Office follows established procedures and mechanisms. During the internship period, data collected indicated that the Karawang Health Office has a structured system for managing the health of Hajj pilgrims from initial examinations to vaccination. This process involves a Hajj surveillance team within the Health Office, with two main stages: laboratory examinations at the nearest hospital and health examinations at community health centers (puskesmas) to administer meningitis and influenza vaccinations.

The first stage of examination takes place at the nearest hospital, where pilgrims undergo various laboratory tests, including blood tests, liver and kidney function tests, and screenings for infectious diseases such as hepatitis and HIV. The results from this stage are used to assess the pilgrims' initial health status and to determine if any medical conditions require special attention during the pilgrimage.

The second stage occurs at the community health centers, involving physical examinations and the administration of meningitis and influenza vaccinations. These vaccinations are crucial to protect pilgrims from common infectious diseases in the Holy Land. Additionally, pilgrims receive health education on maintaining their health during their stay in Saudi Arabia, including practices like personal hygiene, adequate hydration, and precautions against excessive heat exposure. During the study, several primary issues were identified in the implementation of health services for Hajj pilgrims: First, Pilgrim Delays: Delays often stem from unclear information and ineffective communication between the Health Office and pilgrims. Solutions could include improving communication through IT tools like scheduling reminders via text messages or dedicated apps, as well as regular community-level outreach and awareness campaigns. Secondly, Lack of Facilities and Infrastructure: Community health centers and other facilities frequently face limitations in resources, leading to long queues and wait times. Enhancing facilities and medical equipment at health centers is necessary to expedite the examination process. Thirdly, Shortage of Medical Personnel: Insufficient healthcare staff can hinder the efficiency of examinations. Addressing this could involve recruiting additional medical personnel during peak Hajj seasons and optimizing resource management. Forth, Ineffective Health Education: There is a need to enhance the effectiveness and comprehensiveness of health education efforts, employing interactive methods and digital media to ensure pilgrims understand and apply the information provided.

To address these challenges, the Karawang District Health Office can implement various improvement measures, including enhancing infrastructure, increasing medical staffing, and improving communication and health education for pilgrims. Continuous evaluation and monitoring are crucial to identifying issues early and implementing effective solutions to enhance the quality of health services for Hajj pilgrims in the future.

E. CONCLUSION

Health services for Hajj pilgrims at the Karawang District Health Office have shown reasonably good performance by adhering to established procedures and mechanisms. Based on data gathered during the internship period, the Karawang Health Office has a structured system for managing the health of Hajj pilgrims, from initial examinations to administering vaccinations. Health examinations are conducted in two main stages: laboratory tests at the nearest hospital and health assessments at community health centers (puskesmas) to administer meningitis and influenza vaccinations.

However, several issues persist that require serious attention. Delays among Hajj pilgrims are a major problem, leading to postponements in health examinations and vaccination processes. Furthermore, inadequate facilities and infrastructure at puskesmas, along with shortages of medical personnel, significantly affect the quality of health services. Insufficient medical equipment at some puskesmas and a shortage of medical staff, especially during peak Hajj seasons, slow down the examination process and reduce efficiency.

Pre-departure health education provided to Hajj pilgrims also often proves ineffective, resulting in some pilgrims being ill-prepared for health conditions in the Holy Land. These factors contribute to various barriers to providing health services to Hajj pilgrims at the Karawang District Health Office.

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