



ISLAMIC ACCOUNTING INFORMATION SYSTEM IN HOSPITAL, AN URGENT DESIRE

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Abstract

Purpose of Study: The purpose of this paper is to report research findings of the urgency of the application of AIS Islam in hospitals. Key informants in this study were employees, supervisors, patient families and top executives as many as 80 people. Expert informant consists of Muhammadiyah leaders who understand the health problems of 4 people. This study focuses on seeking answers to "Why hospitals need to practice Islamic AIS", and "How to practice Islamic AIS". By using Content Analysis, the research found evidence that the majority of key informants at RSML and RSUAP answered the "Why" question with the criteria of "Regulation Compliance", while the majority of key informants in RSMS were under the "Marketing purposes" criteria, while the majority of expert informants answered "Effectiveness of Goals". Overall the three Muhammadiyah hospitals based the reason for implementing Islamic AIS is "Marketing purposes".

Methodology: This research was conducted with a qualitative approach using phenomenology technique. Data were collected through Focus Group Discussion, In-depth Interview, and Outside Observation. Research location in three hospitals owned by Muhammadiyah.

Results: The implementation of Islamic AIS at the Muhammadiyah hospital in East Java, Indonesia is a necessity no longer a desire. The research found evidence that the overall reason for the implementation of Islamic AIS in all three hospitals studied was marketing purposes for business continuity. This means that if the hospital does not implement Islamic AIS it will have an impact on the continuity of the hospital business because it is not friendly to consumer and market considerations.

Implications/Applications: Implications for this finding are to show different orientations in each hospital. For urban hospitals, the orientation is marketing, while the district hospital's orientation is regulatory compliance.

Keywords: *Islamic Accounting Information System, Focus Group Discussion, Hospital, Muhammadiyah*

INTRODUCTION

The hospital service has not been able to satisfy all its customers. For Islamic consumers, doubts about the practice of sharia are enormous. This concern stems from doubts in Islamic banking ([Shomad 2012](#); [Zare & Rajaeapur, 2013](#)). One of those doubts is the imposition of a cost charge that is alleged to contain usury such as interest on late paying hospital bills.

The demands of implementation of sharia in hospital management are getting bigger along with the increase of highly educated Muslims and conscious of their obligation to fulfill the rules of religion in their daily life ([Ilyas 2017](#)). It is realized that the implementation of new management rules can begin with the application of new accounting information system ([Richardson, Chang, and Smith 2018](#); [Nazoktabar & Tohidi, 2014](#)).

Currently, the Indonesian government, in this case, the Ministry of Health in cooperation with Majelis Ulama Indonesia (MUI) has introduced the Sharia Hospital ([Ilyas 2017](#)). Nevertheless, people are still unsure about shariah practice in the hospital. Therefore, a breakthrough is needed to start with Sharia-based. This paper is intended to report research on the possibility of implementation of Sharia Accounting Information System conducted in hospital owned by Islamic institutions, such as Muhammadiyah.

LITERATURE REVIEW

Accounting Information System (AIS) is used as a management tool to obtain information, analyze, and decide. Also, it serves as a medium to account for the authority that has been delegated management to the levels below. Accountability will go smoothly with the help of a system that enables every employee to record and document all events and transactions that occur systematically, regularly, standardized and easy.

So, Accounting Information System is a network of all procedures, forms, records, and tools used to process financial data into a form of a report that will be used by the management in controlling business activities and then used as a tool of decision management. AIS is a subsystem which is a unity of business process system which is related to each other (Richardson, Chang, and Smith 2018, Elgueta, Martín Quintana, et al. 2018). The system will process the data recorded into a report in accordance with the will of management whenever and under any circumstances. Therefore we need an integrated system that can cover all activities so that management decisions taken based on information from the system is effective and efficient. An integrated information system will support the business process. Integrated information systems should be started from small systems that include a specific activity such as accounting information systems. Hospitals as a social institution that still have to heed the rules of management facing problems in the form of administrating patient data, medical data, and financial data. So that administrative services to patients cannot be fast and accurate. Therefore appropriate Accounting Information System is required (Romney, and Steinbart 2017; Marbán, Jose and Eddie Mulenga. 2019).

AIS is expected to be able to meet the needs of general corporate information relating to financial information as a basis for making important and strategic decisions. Because the business organization is very complex, especially with technological developments covering all aspects of this final business including engineering activities and product development of new products and the use of new tools and gadgets to support information processing, the AIS is expected to support the provision of information quickly, accurately and according to the latest business trends. Therefore the AIS material of a company must be prepared by considering the following: 1) The theoretical concepts of AIS and the applicable Financial Accounting Standards (SAK), 2) Management needs to improve organizational performance, 3) The current state of the organization and its possible future development, 4) The basic assumption of the preparation of the Financial Statements (Hall 2013, Marbán, José M., and Eddie M. Mulenga. 2019).

By considering the four AIS materials mentioned above, AIS can run well and easily and able to follow the development of the era at least 3 to 5 years ahead. Strategic planning should be integrated into the preparation AIS to accommodate business development possibilities. The company's AIS is designed on a computerized basis because of the demands of the times and for the need for future development flexibility (Mulyadi 2016; Luo et al., 2018). In general, the company's AIS materials consist of 1) Accounting policies, 2) List and code of accounts, 3) Input media and journalistic guidelines, 4) Book-keeping media.

Accounting Policies is the rules that underlie the accounting treatment of a transaction. These rules are adjusted to SAK, other government regulations and the practical conditions of the organization. List and code of account is a list of estimates expressed in the general ledger and other subsidiary books and is used for control purposes. The account code provides information and illustrates clearly and completely from each sub and its groups so that the information provided can be used for the purposes of control, judgment, and decision making. Input media and Guidelines for Journaling, Input media in the computerized system are the forms used to record a transaction, while the Journaling Guidelines contain rules set to journal a transaction that includes the necessary evidence, debit and credit merchandise of a transaction and the value recorded. Bookkeeping media includes the various books and their respective functions required to organize the SIA properly. Ultimately, the types of standard reports and management reports that AIS reports, such as the Financial Position Report (Balance Sheet), the Comprehensive Income Statement and the Statement of Cash Flow, and the Statement of Changes in Equity are also determined (Romney, and Steinbart 2017).

Islamic Accounting Information System (IAIS)

Islamic AIS is a set of interrelated elements based on sharia and subject to the rules of Islamic norms to produce accounting information that is needed in decision making (Anshori, Windijarto, and Iswayuni 2011). The basic concept of Sharia Accounting is Islamic law (Alquran, hadith, fiqh, etc.) which in its implementation or implementation process by accountants and Islamic accounting practitioners is based on ability, skill, honesty which refers to the noble Islamic moral (Setiadi 2007). Therefore, the basic concepts of Islamic accounting are as follows: a) The basic concepts of shariah accounting are based on Al-Quran and hadith, as well as rulings by scholars. b) The basic concepts of shariah accounting are based on strong faith and the recognition that Allah SWT, Islam is a religion, Muhammad, peace be upon him is the Messenger of God, and other Messengers, and believe in Doom Day. c) The basic concepts of sharia accounting are based on good ethics. Therefore, a Muslim accountant who carries out the accounting process must have honest, neutral, fair and professional nature. d) The basic concepts of shariah accounting are based on that an Islamic accountant must be held accountable in front of society and Muslims about how far economic unity has been based on Islamic sharia law, especially with regard to Islamic Banking (Deloitte 2017).

The basic concepts of shariah accounting are based on the features of faith and ethics, Islamic accounting must also be based on a legitimate financial process. The basic concept of sharia accounting is based on aspects of behavior as an element that also plays a role in the economy ([Suherman, and Putri 2008](#)). Sharia AIS should also refer to the sharia principles of hospital management, namely: contracts, services, medicines and financial management ([Ilyas 2017](#)).

The reason in Islamic Accounting thinking about why accountants should be accountable to God will lead to an accounting process based on truth, fairness, justice, goodwill, honesty, virtue, and reliability. For example, the relevance and representation of loyal financial and financial reporting to provide the most useful information for decision making, full transparency in financial statements and financial reporting to meet reasonable information demand in accordance with sharia. There is no reason for an accountant to make limited disclosures subject to several interests, in operation prohibited to allow anything that can injure justice such as hoarding, free market disruption, exploitation, etc. to achieve the highest profits but a necessity to do everything. At the borders of shariah to get a reasonable profit ([Asfadillah, Latifah, and Sukmana 2012](#)).

Hospital Management

Hospitals are health care professional institutions whose services are provided by doctors, nurses, and other healthcare professionals. The term hospital comes from the Latin, host, which is also the root of the word hotel and hospitality. Some patients may only pay attention to diagnosis or treatment and then ask for outpatient care, or may also request hospitalization. Hospitals are distinguished from other health institutions from the ability to provide medical care and diagnostics to the patient as a whole. Definition of the hospital according to [WHO \(2005\)](#), WHO Expert Committee on Health Service Organization is: an integral part of social and medical organization, whose function is to provide complete, curative and preventive health care for anyone. The hospital is also a training center for health and biosocial research. So the health services provided by the hospital can be curative or preventive ([Shapiro et al. 2000](#)).

Hospital management issues have recently been highlighted, not only in the complaints of people who feel disappointed with hospital services, both in terms of quality, convenience and price, but there has also been a shift in philosophy aspects that are more concerned with services to patients and their families and are more sensitive to environmental and social environment around the hospital ([UN 2016](#)). There are several reasons to improve hospital management: 1) The rapid development of science and medical technology, 2) Demand society is increasing and widespread ([Bellman 2012](#)).

METHODS

This research uses a qualitative approach, with the aim of revealing a broader perspective on the application of Islamic Accounting Information System (AIS) in hospitals. As a system, AIS involves humans and a set of support tools, which work simultaneously and related to one another and influence each other. Humans as social and spiritual beings in their daily activities cannot be treated mechanically, otherwise, AIS's and the other support equipment such as computers, forms and standard operating procedures (SOPs) are made precisely mechanistic. Nevertheless, the role of the human as the operator of AIS is more prominent than the role of AIS's mechanistic support equipment ([Romney, and Steinbart 2017](#)). Therefore, this study tends to use a qualitative approach to find out more in achieving meaningful goals and individual interpretations. In addition, this research will involve a variety of disciplines (accounting, economics, management, organizational behavior, psychology, and sociology) with a view to improve the point of view and finding complex problem solving ([Creswell 2013](#)).

The phenomenological approach used in this research aims to reveal and understand the meaning behind the phenomenon of individual actions that perform various actions based on their own perceptions as well as various aspects of the underlying action. The study was conducted using Focus Group Discussion (FGD), in-depth interviews and outside observation. With in-depth interviews, a series of questions were prepared with the aim of answering research questions. Questions posed are not structured but flow following the situation and conditions until the research questions are answered. FGDs are intended to understand or answer "why" and "how" questions ([Hennink 2014](#)). While outside observations were made to obtain an objective perspective on some findings found either through interviews or found through secondary data. Outside observation is also useful for obtaining initial materials when designing research questions.

The FGDs were conducted at Muhammadiyah Hospital in Lamongan, Ponorogo, and Surabaya (RSML, RSUAP, RSMS) organized with participants ranging from 15 to 20 employees and leaders related to Accounting and Finance work, so in this FGD involving 50 employees. The FGD was attended by the Director of the Muhammadiyah Hospital and all the leaders including Deputy Directors and Section Heads. The FGD was opened by the Director with a speech on the

importance of FGD and freedom of speech during the FGD. The FGD went well, warmly and openly. It starts at 9 am and ends at 5 pm with an hour break. The FGD position is arranged in a circle, where participants sit around the opposite table, at the far end of the moderator's desk (FGD expert) and main researcher. At the far right of the table sit 2 documentaries. Another documentary moves freely throughout the space to document and serve the FGD.

In-depth interviews (II) were conducted three times for each hospital, involving a Director, 2 Deputy Directors and 5 Heads of Part related to Accounting and Finance. In-depth interviews were conducted flexibly with presence and timeliness. Interviews are sometimes held in the office, or while walking review the condition of the hospital. Interviews are conducted flexibly either during working hours or after working hours and even outside the hospital.

An Outside Observation (OO) was held four times when the research team came to visit each hospital. This observation puts the researcher as an outsider who has no relationship with the hospital. Observations were made to patients and families of patients unnoticed by employees and hospital management. Observations were made to confirm findings during FGD and in-depth interviews. During this observation period, interviews with 10 patients and their families for each hospital were also conducted.

The three data collection tools (FGD, II, OO) aims to: 1. Identify Profit / Loss and Financial Position Accounts that are not in accordance with Sharia Principles, 2. Design the development of Sharia SIA in accordance with the Waterfall model, and 3. Establish a sharia AIS development model.

Triangulation was held to test the validity of informant answers during FGD and in-depth interview. Triangulation was also conducted to test the reliability of the 9 topics asked during focus group discussions and in-depth interviews. Triangulation is done by asking the opinion of four-person expert for Muhammadiyah and health study. The expert is Prof.Dr.ShafiqMoeghni (one of the Chief Executive Muhammadiyah who responsible for social welfare and hospital), then Prof.Dr.Jainuri (one of Chairman of Muhammadiyah East Java Regional), Prof.Dr.Zainuddin Maliki (Chairman of the Advisory Council of the National Disaster Management Agency and former rector of Muhammadiyah Surabaya), and dr. SugengRistanto, MARS (national hospital assessor, former director of a private hospital in Surabaya). Interviews with experts (expert informant) conducted during the research period. Qualitative data collected from FGD, II, OO will be analyzed by using Content Analysis.

FINDING AND DISCUSSION

Exposure to the following data results from focus group discussions (FGDs) with key informants as many as 50 people in 3 hospitals in 3 FGDs. Data were also obtained from 15 people during II and out of 15 people during OO and 4 as EI. Key and Expert Informants involved in this research can be seen in table 1.

There are 31 informants from RSML, 26 from RSUAP, 23 from RSMS and 4 expert informants. In the FGD forum will be involved 20 people from RSML, 16 people from RSUAP, and 14 people from RSMS with different place and time. For In-depth Interview (II), each hospital is involved 5 leaders from RSML, RSUAP, and RSMS. Meanwhile Outside Observation (OO) will involve patients and/or families of patients encountered in each hospital as many as 6 people representing RSML, 5 representing RSUAP, and 4 for RSMS.

Table 1: Key and Expert Informant

	RSML	RSUAP	RSMS	Total
Key Informant (FGD)	20	16	14	50
Key Informant (II)	5	5	5	15
Key Informant (OO)	6	5	4	15
Expert Informant (EI)	-	-	-	4
Total Informant	31	26	23	84

There are ten (10) focused discussion topics delivered by the moderators one by one and answered by the participants, sometimes the participant answers jump without following a focused topic sequence, this is not a problem and indeed such conditions are desirable to warm the atmosphere, not rigid. But such conditions must be controlled because there is a possibility that the atmosphere becomes rowdy and uncontrollable because the opinions of the participants may not be the same as the opinions of other participants, even mutual criticism among the participants.

Ten (10) focused topics consisting of four (4) subject "Why" need hospital implementation of Islamic AIS? With four (4) answer options: Fulfill Vision and Mission, Strengthen Marketing capabilities, Conform Regulation, and Sense of Pride. Then added with six (6) more topics about "How" Implement Islamic AIS? For this topic available six (6) answer choices: Establish Akad or contract with principles of justice and fairness, Provide polite and friendly service, Provide halal labeled medicine, Use Islamic Financial institution, Design Qur'anic forms, Design Islamic logo, and computer display. Some guidance question designed for these purposes than can be seen in table 2.

Table 2: Criteria with Guidance Question

No	Guidance Question	Criteria
1	We are engaged in the practice of Islamic AIS in order to fulfill the Vision and Mission of the hospital	(1) Effectiveness of goals
2	Practicing Islamic AIS can strengthen the marketing capabilities of hospitals	(2) Marketing purposes
3	Islamic AIS designs to conform to the regulations on Islamic Hospital	(3) Regulation Compliance
4	The plan of practicing Islamic AIS can foster a sense of pride as an Islamic hospital	(4) Sense of Pride
5	An Akad or contract is established by applying the principles of justice, fair agreement, honest, and transparent	(1) Effectiveness of goals
6	Provide a polite, friendly service and pray for the healing of patients	(1) Effectiveness of goals
7	Providing quality medicine and labeled halal	(2) Marketing purposes
8	Use Islamic Financial Management with reasonable profit and cooperate with Islamic BPJS, Insurance, and Bank	(2) Marketing purposes
9	Designing forms by adding the word Basmalah, Hamdalah, and the wise words of the Qur'an and Hadith	(3) Regulation Compliance
10	Designing computer display with Islamic picture, color, and logo	(4) Sense of Pride

There are four (4) criteria available for ten (10) guidance questions as shown in Table 2. Four (4) criteria are used as the basis for grouping answers put forward by a moderator or researcher while carrying out the FGD, II, OO process to the informant. The four criteria are Effectiveness of Goals, Marketing purposes, Regulation Compliance, and Feelings of pride. In table 2 for each of the criteria included a different color for easy grouping and eye-catching.

Reason for running Islamic AIS question, from total 31 informants in RSML majority answer regulation compliance that is 15, in RSUAP with 26 informant majority answer regulation compliance as many as 17, in RSMS with 23 majority informant answer marketing purpose as much 14, while 4 expert informant majority answer sense of pride as much as 3. Questions about Advantage when implementation of Islamic AIS, from total 31 informants in RSML majority answer marketing purposes as many as 17, in RSUAP with 26 informants majority answer regulation compliance as many as 15, in RSMS with 23 majority informants answer marketing purposes, While 4 expert informants majority answered effectiveness of goals as much as 3.

The question of Threat if hospital not implementation of Islamic AIS, from total of 31 informants in RSML majority answer "regulation compliance" that is equal to 10 equal to answer "effectiveness of goals", in RSUAP with 26 majority informants answer "sense of pride" In RSMS with 23 majority informants answered "marketing purposes" as much as 10, while 4 expert informant majority answered "effectiveness of goals" as much as 3. Question about Long-term interest on implementation of Islamic AIS, from total 31 informants in RSML majority answer "effectiveness of goals" as many as 11, in RSUAP with 26 informants majority answer "effectiveness of goals" as much as 10, in RSMS with 23 majority informants answer "effectiveness of Goals" of 9, while 4 expert informants all answered "effectiveness of goals" without any other answers. More can be seen in table 3.

Based on the answers of informants on the ten questions and after being grouped into four criteria, the majority of informants in RSML answered 46 regulation compliance, the majority of informants in RSUAP also answered "regulation compliance" as many as 40, the majority of informants in RSMS took "marketing purposes" 47, while the majority of expert informants answered "effectiveness of goals". In total from the four groups of informants, the majority answered "marketing purposes" as much as 116. This can be seen further in table 4.

Table 3: Answers Informant

No	Result Criteria	RSML (31)				RSUAP (26)				RSMS (23)				Expert (4)			
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1	Reason implement Islamic AIS	2	10	15	4	1	2	17	6	2	14	6	1	-	3	-	1
2	Advantage when implement Islamic AIS	-	17	14	-	1	9	15	1	1	16	2	4	3	1	-	-
3	Threat if hospital not implement Islamic AIS	10	5	10	6	4	7	3	12	2	10	7	3	3	-	1	-
4	Long term interest on implement Islamic AIS	11	8	7	5	10	9	5	2	9	7	3	4	4	-	-	-
Sub-Total		23	40	46	15	16	27	40	21	14	47	18	12	10	4	1	1
Total		124				104				91				16			

Table 4: Resume of answered question base on Criteria

No	Criteria	RSML	RSUAP	RSMS	EXPERT	TOTAL
1	Effectiveness of goals	23	16	14	10	63
2	Marketing purposes	40	27	47	4	116
3	Regulation Compliance	46	40	18	1	100
4	Sense of Pride	15	21	12	1	56
TOTAL		124	104	91	16	335

DISCUSSION

The reason for implementing Islamic AIS, most informants answered marketing purposes, especially informants from RSMS, a Muhammadiyah-owned hospital located in the big city of Surabaya. These findings are in line with the opinion of [Haniffa, and Hudaib \(2010\)](#) and [Al-Ajmi, Al-Saleh, and Hussain \(2011\)](#). This is understandable because of the character of big cities, which are more concerned with achieving marketing objectives in carrying out business activities. So, it is not surprising that to run activities that also nuanced religion though, the hospital as a business unit in the big city still make the marketing as the main consideration. There is a difference in the answer when compared with the answer to the reason for implementing the same Islamic AIS, between Muhammadiyah hospitals located in big cities with those located in the district cities, who prefer regulation compliance as a key consideration. For hospitals that are geographically close to Surabaya's big city, such as RSML, Lamongan about 43 km from Surabaya, the answer to marketing purposes is also quite high although not the most dominant. Similarly, what happens in hospitals far from the big city of Surabaya is RSUAP, the distance overland journey Surabaya - Ponorogo is 208 km, answer marketing purposes occupy the second position most. So in general Muhammadiyah hospitals in East Java have placed marketing purposes as an important consideration when implementing Islamic AIS.

The second most answer to the question of the reason for implementing Islamic AIS is regulatory compliance. The reason for this regulation compliance became the dominant answer for informants in RSML and RSUAP, two Muhammadiyah-owned hospitals located in the district city. The dominance of answers in these two hospitals is interesting because this regulation compliance answer is the lowest answer for informants in RSMS. These findings confirm a disparity between large urban hospitals and district city hospitals, where large urban hospitals tend to be ignorant of regulations while district city hospitals are very obedient to regulations. This finding is already pointed out and in line with [Haniffa, and Hudaib \(2010\)](#) and [Al-Ajmi, Al-Saleh, and Hussain \(2011\)](#). The findings on the regulation of compliance of Muhammadiyah hospitals that tend to be high especially those in the district city confirm that Muhammadiyah adherence to regulations in the health sector tends to be high, in line with [Ulfa, and Sarzuli \(2016\)](#).

Effectiveness of goals is the third most important answer to the question of the necessity of implementing Islamic AIS. This answer is the most dominant reason for the expert informant (10 out of 16 total answers). This finding can be understood because expert informants are people who understand the vision and mission of the hospital. They are health experts and/or experts about Muhammadiyah, so their mindset is always linked to how to achieve the goal effectively, including when answering the question of the reasons for implementing the Islamic AIS. This finding is in line with (Roze des Ordon et al. 2015). The findings also confirm reports made by the Chicago Health Research Institute (2016). Meanwhile, in the three hospitals studied, the reason for the effectiveness of these goals is in the third position in RSML and RSMS, while RSUAP is in fourth position. These findings indicate that in all three hospitals studied, not many people have the foresight to achieve goals in the long term. The majority of informants in the three hospitals have not thought far that by implementing Islam AIS can achieve organizational goals effectively. This is in line with previous research findings on the vision and mission of the hospital according to Marina, and Wahjono (2013) as well as research findings on the importance of economic literacy in building long-term hospital performance (Marina et al. 2014).

Overall, the sense of pride occupies the final position of the four answers to the question of the reasons for implementing the Islamic AIS. Informants in both hospitals (RSML and RSMS), as well as expert informants, place the reason for this sense of pride in the last place because lately, the pride of Muhammadiyah as a movement and as a religious-based business unit is declining. These findings are in line with opinion from Sholeh (2017) also confirming previous research findings on Behavioral Accounting to improve hospital performance (Marina 2011).

CONCLUSION

As a conclusion to this paper, the implementation of Islamic AIS at the Muhammadiyah hospital in East Java, Indonesia is a necessity no longer a desire. The research found evidence that the overall reason for the implementation of Islamic AIS in all three hospitals studied was marketing purposes for business continuity. This means that if the hospital does not implement Islamic AIS it will have an impact on the continuity of the hospital business because it is not friendly to consumer and market considerations.

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