

Relationship between of Islamic Spiritual Care, Service Quality and Patient Loyalty: A Cross-Sectional Study at Siaga Al Munawwarah Islamic Hospital

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Abstract

Background: Islamic spiritual care (ISC) is a holistic religious health service based on Islamic values that emphasizes empathy and friendliness and provides space for patients to perform worship during treatment. This study aims to analyze the correlation between integrating ISC with the quality of service and patient loyalty, and to determine the most dominant variables influencing patient loyalty.

Method: A quantitative study with a cross-sectional design was conducted on 176 outpatients, during February–April 2025, at Siaga Al Munawwarah Islamic Hospital, Samarinda, Indonesia. The measuring instruments used consisted of the Islamic Spiritual Care questionnaire (ISCQ), SERVQUAL (Service Quality Questionnaire), and HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems), which have been proven valid and reliable. Data analysis used the Spearman Rank test and Binary logistic regression

Results: The integration of ISC and service quality was good (54.5%) and showed good loyalty (51.7%). There was a significant relationship between integration of ISC and service quality ($p = 0.000$; $r = 0.905$), there was a significant relationship between integration of ISC and patient loyalty ($p = 0.000$; $r = 0.787$), and there was a significant relationship between service quality and patient loyalty ($p = 0.000$; $r = 0.817$). Patient service quality is the most dominant variable influencing patient loyalty ($POR = 10.271$).

Conclusion: Integration of ISC affects service quality and patient loyalty. This finding indicates that ISC needs to be implemented comprehensively and continuously at Siaga Al Munawwarah Islamic Hospital.

Keywords: Islamic Hospital, Islamic Spiritual Care, Service Quality, Patient Loyalty

INTRODUCTION

Patient loyalty in Islamic hospitals is a crucial indicator of service quality as it reflects medical satisfaction and aligns with Islamic values such as empathy, honesty, and spiritual support. This level of loyalty has a direct impact on the sustainability of the hospital, strengthens its reputation within the Muslim community, and is a determining factor in competitiveness. Studies show that spiritual value-based services can improve the perception of service quality and patient satisfaction, thereby building trust and encouraging recommendations.¹⁻³ Therefore, Islamic hospitals need to develop service strategies that pay attention to trusted health.

According to National Health Law Number 17 of 2023, a hospital is a health service facility that provides comprehensive services, from health promotion to palliative care. Hospitals are required to provide outpatient, inpatient, and emergency services evenly and inclusively, including for people in remote and vulnerable areas. In 2020, there were 2,985 hospitals in Indonesia, the majority of which were privately managed, and around 83.2% of them had been accredited. However, only a small portion has met the international standards. As non-profit institutions, hospitals are responsible for providing health education to the public. In addition to medical functions, hospitals act as socio-economic institutions that must uphold the service ethics of the Indonesian Hospital Association in accordance with the Indonesian Hospital

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Directors Committee, in order to ensure the quality of service, justice, and protection of patient rights in the national health system. The majority of Indonesia's population is Muslim, hence the need for health services in accordance with sharia principles is increasing.⁴

Islamic hospitals play a significant role in implementing the values of *Maqashid al-Shariah*, such as preserving religion, soul, and mind. They continue to develop through the support of *Majelis Upaya Kesehatan Islam Seluruh Indonesia* or MUKISI (in English: The Indonesian Islamic Health Effort Council) and cooperation with *Dewan Syariah Nasional - Majelis Ulama Indonesia* or DSN-MUI (in English: The National Sharia Council of the Indonesian Ulema Council) to develop sharia certification standards. Although only a few hospitals are certified, sharia hospitals are inclusive and contribute to the global Islamic economy, with examples of their implementation at Siaga Al Munawwarah Hospital and Muhammadiyah Hospital. The implementation of Islamic standards is evident in the provision of worship facilities, the use of halal products, and the protection of patients' private parts.^{5,6}

The quality of service in Islamic-based hospitals has a significant influence on patient loyalty, which is motivated by various aspects based on Islamic values. Islamic values in service are the main basis, where compliance with sharia is reflected in the provision of halal food, sharia financial management, and medical procedures aligned with Islamic teachings. In addition, the manners and ethical conduct of medical personnel—such as friendliness, patience, empathy, and honesty—enhance patient comfort and foster trust. Spiritual services, including prayer facilitation, spiritual counseling, and the availability of worship facilities, further strengthen the emotional bond between patients and hospitals. Cultural and religious conformity also constitutes an essential factor, as muslim patients tend to feel safer and more comfortable with a service system that are sensitive to gender and awrah aspects, such as the separation of male-female wards or the assignment of same-sex medical personnel. The quality of interaction and Islamic communication—shown through greetings, gentle education, and the incorporation of prayers—builds a deep emotional connectedness. Commitment to trust and professionalism is a moral motivation for health workers to deliver optimal services because it is based on the intention of worship, thereby increasing patient trust and loyalty. The integration of Islamic principles with spiritual care strengthens a holistic and valuable service experience, enhancing overall patient satisfaction. The reputation of Islamic hospitals as clean, safe, and serene institutions, embodying the value of *rahmatan lil 'alamin* (mercy to all creation), strengthens their positive public image. Finally, the influence of the social and family environment, such as the recommendations of religious or community leaders, is also a factor that encourages patients to remain loyal and return to Islamic-based hospitals.^{7,8}

Islamic values, such as compassion and honesty, shape a professional and humanistic work culture, increasing muslim patient satisfaction. Challenges, including gender segregation and transparency of treatment, continue to be addressed, while great opportunities exist to develop ISC as part of holistic health services in Indonesia. The quality of service at islamic hospitals is influenced by the competence of medical personnel, adequate facilities, and services aligned with sharia values. Spiritual aspects, such as the provision of spiritual guidance, halal food, and a religious atmosphere, also support patient comfort. The accuracy of service, ease of access, and good communication also play a critical role. When patients feel satisfied, safe, and appreciated physically and spiritually, this encourages their loyalty to return for treatment and recommend the hospital to others. Previous research indicates that health services adopting Islamic values have a positive impact on patient perceptions of quality and loyalty, with trust serving as a pivotal factor in enhancing satisfaction.⁸ Spiritual approaches have also been shown to support patients' physical and emotional well-being, strengthening assessments of service quality.⁹⁻¹¹ However, the integration of ISC at Indonesian hospitals, including Siaga Al Munawwarah Islamic Hospital, has rarely been studied specifically, and the influence of Islamic values has not been widely explored.

Several other studies have revealed the importance of loyalty programs and spiritual competence of medical personnel, but their implementation is still limited.¹²⁻¹⁴ Other research confirm that ISC has the potential to create inclusive, religiously just and holistic services.^{15,16} The aim of this study was to examine the correlation between the integration of Islamic Spiritual Care and service quality, and its influence on patient loyalty at Siaga Al Munawwarah Islamic Hospital, Samarinda.

METHOD

Participants and Study Design

This research was a quantitative study. A cross-sectional design was used to examine the relationship between the integration of ISC and service quality and patient loyalty, as well as service quality and patient loyalty. A total of 176 people were selected as respondents from a population of 325 inpatients, using a simple random sampling technique. The Cochran formula was utilised to calculate the sample size. An Islamic spiritual care questionnaire, Service Quality Questionnaire (SERVQUAL)^{17,18} and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)¹⁷ were utilised as instruments. From February to April 2025, this research was conducted in the inpatient wards at Siaga Al Munawwarah Islamic Hospital, Samarinda.

Measurements and Procedure

The initial model assumed that ISC acted as an independent variable, while service quality and patient loyalty acted as dependent variables. Islamic Spiritual Care was measured through several indicators, including the availability of worship facilities, spiritual assistance, the application of Islamic values in service, and the empathetic attitude of health workers. Meanwhile, the quality of service included aspects of reliability, care, responsiveness, and compliance with sharia principles. Patient loyalty was measured by considering several indicators, which were intention to return for treatment, recommendations to others, and ongoing satisfaction with the treatment.

Statistical Analysis and Ethical Clearance

Validity and reliability tests on the three questionnaires were conducted and proved valid (validity index = 0.711—0.907, Cronbach's Alpha = 0.93). Data were analyzed using the Spearman Rank test. The strength of the relationship between variables was determined by the Pearson Product-Moment Correlation Coefficient [$r = 0.00—0.10$ (negligible correlation), $r = 0.10—0.39$ (weak correlation), $r = 0.40—0.69$ (moderate correlation), $r = 0.70—0.89$ (strong correlation), $r = 0.90—1.00$ (very strong correlation)].¹⁸ This study received ethical approval from the Health Research Ethics Committee of Atma Husada Mahakam Hospital Samarinda (approval number: 0009.2/224/RSUD. AHM/3/III).

RESULT

The frequency distribution of characteristics for age, gender, education level and type of work of respondents in this study was showed in Table 1. Most respondents in this study were aged 35—44 years old (21.0%), with a relatively balanced gender composition. Male respondents were slightly more represented than females (52.8% vs. 47.2%). In terms of the latest education attainment, those who completed senior high school were ranked first (31.3%), followed by those who had a bachelor's degree. Regarding the type of work, almost half of the respondents were private employees (46.6%). Based on their perceptions, most respondents (54.0%) rated the integration of ISC at Siaga Al Munawwarah Islamic Hospital as good. More than half of the respondents (54.5%) also considered that the quality of service at the hospital was good. No less than 91 of 176 respondents (54.7%) were categorized as good in terms of their loyalty.

These findings show that respondents—generally characterized by being in the productive age, having completed their secondary education, and working in the private sector—tend to hold positive perceptions of services which integrate Islamic spiritual values. This could indicate that certain sociodemographic backgrounds might influence the level of acceptance and appreciation of Islamic values-based approaches to service, which ultimately also affect their assessment of the quality of service and loyalty as patients.

Table 1. Description of Respondent Characteristics, Islamic Spiritual Services, Service Quality and Patient Loyalty

Variables	Categories	Frequency (n)	Percentage (%)
Age (years)	15–24	24	13.6
	25–34	34	19.3
	35–44	37	21.0
	45–54	33	18.8
	55–65	31	17.6
	>65	17	9.7
Gender	Male	93	52.8
	Female	83	47.2
Education	Never went to school	29	16.5
	Elementary school	26	14.8
	Secondary high school	23	13.1
	Senior high school	55	31.3
	Diploma	4	2.3
	Bachelor	39	22.2
Type of Work	Doesn't work	24	13.6
	Student	9	5.1
	Government employees	45	25.6
	Private employees	82	46.6
	Retired	4	2.3
	Armed Forces/National Police	12	4.6
Islamic Spritual Care	Not good	81	46.0
	Good	95	54.0
Quality of service	Not good	80	45.5
	Good	96	54.5
Patient loyalty	Not good	85	48.3
	Good	91	54.7

Bivariate analysis is used to test the relationship between two variables, namely the independent and dependent variables. Table 2 presents the results of bivariate analysis using the Spearman Rank test, with ISC, the quality of service, and patient loyalty as variables. The integration of ISC was significantly related to service quality, shown by a very strong correlation ($p = 0.000$; $r = 0.905$), The integration of ISC was also significantly related to patient loyalty, with a strong correlation ($p = 0.000$; $r = 0.787$). Additionally, service quality was significantly related to patient loyalty with a strong correlation as well ($p = 0.000$; $r = 0.817$).

Tabel 2. The Relationship Between Islamic Spiritual Care, the Quality of Service, and Patient Loyalty

Relationship between Variables	P-value	r
Islamic Spiritual Care_Quality of service	0.000	0.905
Islamic Spiritual Care_Patient loyalty	0.000	0.787
Quality of service_Patient loyalty	0.000	0.817

Multivariate analysis was used to determine the most dominant variable influencing patient loyalty at Siaga Al Munawarah Islamic Hospital Samarinda, with independent variables consisting of the integration of ISC, service quality, and patient loyalty levels. Table 3 displays the results of the multivariate test.

Table 3. The Most Dominant Variables Influencing Patient Loyalty at Siaga Al Munawarah Islamic Hospital Samarinda

Independent Variables	B	Standard Error	P-value	POR	95% CI
Islamic Spiritual Care	1.541	1.007	0.126	4.671	0.649—33.614
Service Quality	2.329	0.947	0.014	10.271	1.605—65.733
Patient Loyalty	2.188	0.661	<0.001	8.915	2.440—32.570
Constant	-9.353	1.285	<0.001	.000	

The service quality had the largest POR (10.271) when compared to ISC Care (POR = 4.671) and patient satisfaction (POR = 8.915). Thus, it can be concluded that the quality of patient service was the most dominant variable influencing patient loyalty. The results of the logistics regression analysis showed that service quality had the highest POR, which was 10.271, when compared to the ISC variable of 4.671 and patient loyalty of 8.915. This Prevalence Odds Ratio (POR) indicates the likelihood of patient loyalty to the hospital. Thus, it can be interpreted that patients who rated the quality of service as good had a 10.27 times greater chance of becoming loyal than patients who rated the quality of service as poor. This makes service quality the most dominant factor that affected patient loyalty compared to the other two variables. These findings confirm that although the integration of ISC and patient loyalty also has a significant effect, improving the quality of services remains a top priority in efforts to build patient loyalty in Islamic-based hospitals. Therefore, hospital management needs to continuously improve the quality of service that not only meets medical standards, but also reflects the values of professionalism, empathy, and care that are in line with the principles of Islamic service.

DISCUSSION

Age and gender characteristics influence patient perceptions and needs for hospital services, especially in the context of integrating ISC. Productive age patients (35–44 years) tend to be more aware of the importance of holistic services, including spiritual aspects, while elderly patients are more in need of spiritual attention, especially in serious conditions. At Siaga Al Munawwarah Islamic Hospital Samarinda, the majority of respondents were aged 35–44 years, indicating a high need for spiritual services. In addition, although the difference in the number of male (52.8%) and female (47.2%) patients was not significant, both showed a positive response to this service, with women being more emotionally open and men more rational. Occupational and lifestyle factors likely influence the dominance of male patients. Therefore, the implementation of ISC needs to be adjusted to gender needs to increase patient satisfaction and loyalty, including separating gender-specific rooms.

The level of education and employment status of patients influence their perceptions, expectations, and loyalty to hospital services, including aspects of ISC. Patients with higher education tend to have a better understanding of medical procedures, are open to spiritual approaches, and have higher expectations of service quality, which increases satisfaction and loyalty if the service meets their expectations. At Siaga Al Munawwarah Islamic Hospital Samarinda, the majority of respondents had a high school education (31.3%), indicating sufficient understanding of health services despite needing assistance in medical decisions. Meanwhile, patients from the private sector (46.6%) had high expectations for holistic, professional, and spiritually based services, related to stable income and easy access to health facilities. This is indicated by the availability of worship facilities, as well as spiritual tools in each inpatient room. Patients are also visited by a religious teacher every morning. Therefore, hospitals need to provide services that are responsive and aligned with the physical and spiritual needs of patients, to improve their satisfaction and loyalty.

The Correlation between the Implementation of Islamic Spiritual Care and Service Quality

This study found a significant relationship between the implementation of ISC and service quality. ISC is a health service approach that integrates Islamic values to meet the spiritual needs of patients, which has a positive impact on emotional comfort, calmness, and trust during the healing process. This approach involves prayer, dhikr, and spiritual counseling, which support the physical and emotional recovery of patients, as well as increase positive perceptions of service quality. The implementation of ISC has been shown to improve patient satisfaction and enhance their loyalty. This is because it meets their physical and spiritual needs, accelerates healing, and strengthens the patient's relationship with the hospital.

The results of this study are in line with and can strengthen the results of previous studies, suggesting there is an influence and relationship between the integration of ISC and service quality in hospitals. The integration of spiritual values at hospitals improves service quality, especially in communication and friendliness, with patients feeling spiritually valued, which increases their satisfaction.¹⁹ Shariah facilities improve muslim patient satisfaction and enhance their loyalty.²⁰ Private prayer rooms improve patient well-being.²¹ Islamic values, such as hospitality and spiritual care, contribute to patient satisfaction.²² This study showed that 54.5% of patients were satisfied with the service, especially in terms of efficiency, security, friendliness, and empathy. These results are in line with the SERVQUAL model, which emphasizes the importance of tangibles, reliability, responsiveness, assurance, and empathy dimensions in service.²³ In other words, the implementation of ISC in Hospital services can strengthen these dimensions, improving patient satisfaction and enhancing their loyalty.

The spiritual theory proposed by Koenig states that the integration of spiritual aspects in health care can accelerate recovery, reduce stress, and improve the quality of life of patients.²⁴ Research at several hospitals, such as Faisal Islamic Hospital Makassar and Queen Latifa General Hospital Yogyakarta, found the importance of implementing spirituality-based care in improving service quality and patient satisfaction. The findings of this study support the theory by showing that the implementation of Islamic Spiritual Care (ISC) can improve service quality.²⁵ ISC fulfilled their spiritual needs through the provision of worship facilities and assistance from clergy. The SERVQUAL service quality theory also supports that spirituality-based services can enhance the dimensions of empathy and patient comfort.²⁶ The practical implication of these results is that if the hospital wants to improve the quality of service to patients, then the implementation of ISC is critical and must be a top priority, in line with the vision and mission of the Siaga Al Munawarah Islamic Hospital.

The Correlation between Islamic Spiritual Care and Patient Loyalty

The results of this study concluded that the integration of ISC was significantly related to patient loyalty. These results indicate that ISC plays a vital role in shaping patient loyalty, by providing a meaningful emotional and spiritual experience through attention to the patient's spiritual needs. These needs include inner peace and tranquility. When patients feel their religious values are respected, their level of satisfaction and loyalty to the hospital increases. The results of this study can strengthen the theory of customer loyalty, which includes affective attitudes, conative commitment, and ongoing behavior. Spiritual needs in Islamic hospital care include the patient's need to feel calm, close to God, and to pray during illness. Islamic Hospitals are equipped with prayer facilities, spiritual guidance, sharia-compliant services, halal foods, and Islamic psychological support. These help patients feel calmer, more patient, and sincere in facing illness, as well as accelerate the healing process holistically. Meanwhile, customer loyalty itself is defined as a customer's ongoing commitment to repurchase products or use services from a particular company consistently in the future, despite situational influences and marketing efforts from competitors that have the potential to cause customers to switch.^{24,31}

The results of this study are in line with the results of previous studies, arguing that good service quality builds trust and satisfaction, which encourages patient loyalty.²⁵ Spiritual support, such as prayer and spiritual counseling, reduces anxiety and accelerates recovery, strengthening patient loyalty to the hospital. The implementation of ISC has been proven to have beneficial impacts on patient perceptions of the quality of hospital services. Patients who are given space to fulfill their religious needs would feel more

respected and satisfied, and enhance their loyalty. Services based on Islamic values create comfort and emotional attachment. ISC creates meaningful experiences that encourage patients to return to use the service and recommend it.²⁶

The findings of this study are in accordance with the results of previous studies, which suggested that the integration of spiritual values can strengthen patient loyalty, provide a competitive advantage for hospitals, and improve reputation in the community. Patient satisfaction, trust, and emotional closeness influence patient loyalty. Services based on Islamic values, such as empathy, prayer, and spiritual guidance, can foster emotional attachment to patients and strengthen their commitment to hospital services. This is in line with the analysis test of this research, which found a strong correlation between ISC and patient loyalty. Thus, a spirituality-based approach has proven effective in enhancing loyalty. The results of this study prove that the implementation of ISC has a positive impact on patient satisfaction, comfort, and trust, which encourages long-term loyalty and strengthens the hospital's reputation.^{27,28} The practical implication of these results is that to build, strengthen or improve patient loyalty at the Al Munawarah Islamic Hospital, ISC integration needs to be a top priority for management and all health workers.

The Correlation between Service Quality and Patient Loyalty

The results of this study prove that service quality is significantly related to patient loyalty. The quality of service at Siaga Al Munawarah Hospital has been examined previously in relation to the integration of ISC values in service delivery. The quality of hospital services plays a critical role in shaping patient loyalty, including medical aspects, facilities, staff friendliness, and attention to emotional and spiritual needs. When patients feel physically and psychologically satisfied, they tend to return to use the service and recommend it to others. Satisfaction with medical and non-medical services increases patient trust and attachment to the hospital. In addition, effective communication and patient involvement in care also strengthen satisfaction and loyalty. Research in the field of health management also confirms that service dimensions such as reliability, responsiveness, empathy, assurance, and physical facilities contribute greatly to the creation of long-term relationships between patients and hospitals.²⁹ There were no differences or special matters related to the quality of service and patient loyalty between Islamic hospitals and general hospitals.

This finding reinforces previous research reporting that service dimensions such as reliability, empathy, and responsiveness have a significant impact on loyalty. Patients who feel valued and served in a friendly and empathetic manner tend to have higher levels of loyalty, in line with the importance of quality service in building trust and long-term relationships.³⁰⁻³⁴ The health service approach that integrates Islamic values (ISC), which includes the physical, mental, social, and spiritual needs of patients in this study has been proven to create meaningful services and increase positive patient perceptions of the hospital.

The correlation between the integration of ISC in this study is proven to be related to the quality of service, with a very strong level of closeness of the relationship, or almost approaching a value of 1 (0.905). The relationship is more closely related to the relationship between ISC and patient loyalty. These results prove that the integration of ISC in services at the hospital consisting of Islamic-based spiritual support, fulfillment of patient spiritual needs, application of Islamic values in services, education and counseling based on Islamic values, family involvement in spiritual support, empathetic services with an Islamic approach and compliance with Islamic standards in the care process is closely related to patient perceptions of the quality of service provided by all health workers at the Hospital. In other words, the integration of ISC can strengthen patient satisfaction in the aspects of reliability, responsiveness, assurance, empathy and tangibles. Patient satisfaction affects patient loyalty. This study found that the integration of ISC, including the application of "ihsan" and "akhlakul karimah" values in education and counseling, spiritual support based on the Qur'an and Sunnah, prayer facilities, Islamic empathy, and family involvement and compliance with sharia standards, had a very strong correlation with patient perceptions of service quality ($r = 0.905$). This means that when Islamic values are implemented in real terms in every aspect of service, from spiritual assessment and compassionate communication to a halal and comfortable environment, patients perceive the service as not only reliable, responsive, safe, and empathetic, but also has tangible Islamic physical evidence. The satisfaction that arises from this experience further drives patient loyalty, indicating that

Islamic values are not just religious aesthetics, but the main foundation of service quality and long-term trust in Sharia hospitals.

Although the results of this study can generally reinforce the findings of previous research and provide important implications regarding the importance of integrating ISC in increasing patient loyalty, this study has some limitations that need to be noted. First, this research was conducted in the context of one Islamic hospital, namely Siaga Al Munawwarah Hospital, so the results may not be widely generalized to other Islamic hospitals that have different organizational characteristics, human resources, and work culture. Second, the data used came from patients' perceptions through a closed questionnaire, so it relied heavily on the respondents' understanding and honesty in answering, and did not describe in depth the qualitative aspects of their spiritual experience. Third, the variables studied were limited to the relationship between the integration of spiritual care, quality of service, satisfaction, and patient loyalty, without considering other factors that also have the potential to affect loyalty, such as hospital image, service price, or socio-cultural factors of patients. Therefore, further research is expected to be carried out with a wider scope, involving more than one hospital, and combining quantitative and qualitative approaches to gain a more comprehensive understanding of the integration of spiritual care in Islamic-based hospital services.

CONCLUSION

The integration of ISC, service quality and patient loyalty at Siaga Al Munawwarah Islamic Hospital is classified as good. The findings suggest that the integration of ISC is significantly related to service quality, and service quality is strongly linked to patient loyalty. The integration of ISC with the quality of service provided has the strongest level of association. Patient service quality emerges as the most dominant variable influencing patient loyalty. Therefore, ISC needs to be implemented comprehensively and continuously, as it has been proven to have a significant positive impact on patient satisfaction, which subsequently has a significant positive relationship with patient loyalty.

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