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The Framework of Maternity Care Practices Guideline toward the Enhancement of ShariaCompliant Hospital

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Abstract

Sharia-Compliant Hospitals are healthcare institutions that emphasize Islamic principles in their services. In the context of maternity care, healthcare providers' practices aligned with Sharia are critical to ensuring the comfort and safety of Muslim patients. The presence of Sharia-compliant hospitals is increasing in Malaysia. However, there is a lack of specific guidelines to assist healthcare providers in applying Sharia principles in maternity care. This need is more pressing given the requirement to ensure medical practices do not conflict with Islamic values. There is confusion and a lack of specific guidance for healthcare providers in practicing Islamic principles in maternity care. This deficiency can affect the quality of services and patients' confidence in Sharia-compliant hospitals. This study aims to develop a framework of guidelines for healthcare providers' practices in sharia-compliant maternity care. The study uses a qualitative approach through document analysis about maternity care services. The collected data are analyzed using a thematic approach to identify key themes related to Sharia-compliant practices. The findings of this study indicate an urgent need for comprehensive and practical guidelines. Healthcare providers face challenges in integrating Islamic principles with modern medical practices. This study also proposes a framework of guidelines that can be applied in sharia-compliant hospitals to improve the quality of maternity care services.

Keywords: Maternity Care, Sharia-Compliant Hospitals, Guideline Framework

Introduction

In Malaysia, the concepts of Sharia-Compliant Hospitals and Worship-Friendly Hospitals (HMI) are gaining increasing attention and have become important agendas in the healthcare sector to meet the needs of the Muslim community specifically and the Malaysian population generally. The launch of the Malaysian Sharia Index by former Prime Minister Dato' Sri Mohd

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Najib bin Tun Abdul Razak on February 10, 2015, also led to the introduction of a framework for Islamic governance in Malaysia. One of the main areas included in this sharia-compliant index, based on *maqasid sharia*, is the health sector. The input for this health sector is through compliance with sharia-compliant work practices, quality assurance, and effectiveness of processes, as well as continuous empowerment and strengthening of structural resources and human resources (JAKIM, 2015). This is also related to the goal of meeting Sustainable Development Goal (SDG) 3, which focuses on Good Health and Well-Being at the international level (WHO, 2018).

Establishing core Islamic values within organizations that manage hospitals is also one of the criteria for a sharia-compliant hospital. This clearly demonstrates that sharia-compliant work practices are an important aspect in measuring the compliance of the health sector with maqasid sharia, thus contributing to the achievement of SDG 3. The field of maternity services, in particular, is an area of health that requires a holistic approach to ensure optimal benefits for all parties involved. The development of a sharia-compliant hospital concept necessitates the integration of Islamic values in various aspects, such as infrastructure facilities, administration, management of medications, patients, and healthcare staff. The benefits of a sharia-compliant hospital include fairness in service provision, patient satisfaction, and patient loyalty. Sharia compliance ensures that the hospital operates according to Islamic principles, which can lead to higher levels of trust and satisfaction among patients. Additionally, sharia-compliant hospitals follow specific standards and certifications to ensure compliance with Islamic values in their services and operations (Wahyuningsih et. al, 2023).

In this regard, healthcare workers are seen as individuals directly involved with the national healthcare services. This group is also a key entity supporting the success of the Sharia-Compliant Hospital concept and the implementation of Worship-Friendly Hospitals (HMI). The general framework for the criteria of a healthcare worker in a sharia-compliant hospital requires the development of detailed guidelines, particularly in aspects of maternity care. Recognizing the importance of the role of healthcare workers in hospital services in general and in specific fields such as obstetrics and gynaecology, this study will develop a set of guidelines necessary for healthcare workers to ensure their role as entities that support the success of the Sharia-Compliant Hospital concept, which practices worship-friendly principles. The study will identify the basic provisions for the practice of maternity care providers and highlight guidelines in aspects of preserving patients' rights and privacy, as well as resolving related sharia issues. This study is also a continuation of research related to the maternity care model in Malaysia (Ismail & Mutalib, 2022) and the need for Sharia-compliant maternity services in Malaysia (Ismail & Mutalib, 2022).

Literature Review

Various studies related to sharia compliance in Malaysia have been conducted by previous researchers. Studies on sharia-compliant hotels conducted by Salleh et al. (2014) and Sulaiman et al. (2022) show consumer awareness in seeking services that align with sharia principles. This is similarly reflected in the attitudes of tourists visiting Malaysia. The aspect of sharia compliance is also a focus in other fields such as administration, financial financing, and national governance.

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

The history of maternity care in Malaysia dates back to ancient times when traditional practices and rituals were used to ensure the well-being of mothers and babies. Over the years, these practices have evolved to incorporate modern medical techniques and technologies. Today, Malaysia has a comprehensive healthcare system that provides maternity care services to women across the country. The principal public health provider in Malaysia is the Ministry of Health, which offers primary, secondary, and tertiary care through a range of healthcare facilities, including clinics, general hospitals, and district hospitals. In 2005, there were 1,919 rural clinics, 89 maternity and child health clinics, 146 mobile clinics, 122 MOH hospitals (a total of 30,021 beds), six special medical facilities (with 4,740 beds), and 809 health clinics.

The availability of healthcare is a basic tenet of the Malaysian healthcare system. In the World Health Report 2000, Malaysia was placed 49th out of 191 WHO member nations. The report evaluated the effectiveness of the health system as a whole in relation to three goals: responsiveness, excellent health, and equitable financial contribution (WHO, 2000). The rise in the number of skilled personnel (doctors, nurses, midwifes) over the traditional birth attendants was an important factor in the reduction of maternal mortality. The women started to use the government trained midwifes for antenatal care and deliveries and as such maternal mortality declined (Pathmanathan et. al, 2003).

The government has implemented various policies and programs to improve maternal and child health outcomes, including the promotion of sharia compliant practices in maternity care (Hamzah et al, 2019). Despite these efforts, there is still a need to further integrate Islamic principles into maternity care to ensure that Muslim women receive culturally sensitive and religiously appropriate care during pregnancy, childbirth, and postpartum. This will not only benefit the physical and emotional well-being of mothers and babies but also strengthen the bond between healthcare providers and Muslim communities.

The framework of guidelines for a good maternity care practice of health care givers includes ensuring timely, equitable, respectful, evidence-based, and safe maternal health care, delivered through context-appropriate implementation strategies. It also involves building linkages within and between maternal and other health care services to address the increasing diversity of the burden of poor maternal health (Koblinsky, 2016). Building trust between care recipients, providers, and managers, lowering out-of-pocket expenses, resolving access barriers, and enhancing quality of care are all part of the framework of recommendations for health care providers' optimal maternity care practices.

Sociocultural aspects, the standing of the facility, and past encounters are trust determinants in maternity care that influence care-seeking behaviours. In maternity care settings, trusting relationships are also influenced by structural variables and gendered patient-provider interactions. Health facilities' ability to adjust to policy changes and accountability elements can both have an impact on confidence in policy contexts like Kenya's devolution and free maternity programs (Kathy et al., 2019).

There are general guidelines in delivering maternity services. These guidelines include ensuring timely, fair, respectful, evidence-based, and secure maternal health services are delivered through context-friendly implementation strategies. It is also creating relation

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between maternal health services and other health services to address the diversity of poor maternal care burdens (Crowe & Manley, 2019). This study will focus on developing a framework for maternity care practice guidelines to further strengthen the concept of shariacompliant hospitals.

Methodology

The research employs document analysis as the primary methodology to develop a guideline framework for maternity care practices that align with sharia-compliant principles. This approach involves a comprehensive review and examination of existing literature, policy documents, and relevant guidelines that pertain to sharia compliance in healthcare, particularly in maternity services. The analysis focuses on identifying key elements and best practices from various sources, including religious texts, medical ethics, and legal frameworks that influence sharia-compliant practices. By synthesizing information from these documents, the study aims to establish a robust framework that healthcare practitioners can adopt to ensure their maternity care services are consistent with Islamic principles. The findings from the document analysis will provide a solid foundation for the development of detailed guidelines that address both the practical and ethical aspects of maternity care in sharia-compliant hospitals.

Discussion and Conclusion

The study on The Framework of Maternity Care Practices Guideline Towards the Enhancement of Sharia Compliant Hospitals reveals the importance of developing sharia-based guidelines to guide healthcare workers in providing maternity services that adhere to Islamic principles. These guidelines encompass aspects such as modesty, emergency management, and the execution of medical procedures that comply with Islamic jurisprudence. The study also highlights the critical need for enhanced training and education programs for healthcare workers to equip them with the knowledge and skills required to apply Islamic principles in maternity care. This not only ensures high-quality service but also guarantees that the services are sharia-compliant.

Additionally, the study emphasizes the importance of strengthening interpersonal relationships between healthcare workers and patients, considering religious and cultural sensitivities. Effective communication is key in explaining treatment options that align with Sharia principles. The study also identifies the need to review and refine certain medical procedures, such as Bilateral Tubal Ligation (BTL), to ensure they align with Islamic principles, with potential solutions including more sharia-compliant alternatives or clear justifications for specific cases. Ultimately, the implementation of these guidelines is expected to enhance the overall sharia compliance of hospitals, solidifying their reputation as institutions committed to upholding Islamic values in all aspects of service delivery.

The Importance of Religious Considerations in Healthcare

Medical professionals must balance upholding medical regulations with their commitment to religious ideals when treating patients. When healthcare practitioners disregard Islamic standards, patients' health results may suffer, which could result in delayed treatment, reluctance to seek care, and ultimately worse outcomes (Karen et al., 2011). Enhancing patient satisfaction, treatment adherence, and disease outcomes requires effective

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

communication and an understanding of patients' religious and cultural views (Karen et al., 2011).

Both patients and providers recognize the importance of addressing language-related communication barriers and lack of understanding of disease processes to ensure culturally appropriate care for Muslim women (Karen et al., 2011). Healthcare practitioners can have a better understanding and appreciation of maternity leave by using recommendations such as guidelines for maternity care practices by healthcare workers. Religious considerations of their patients, ultimately leading to improved patient outcomes.

By recognizing and incorporating religious beliefs into patient care, healthcare professionals can create a more holistic and patient-centered approach that promotes the well-being of all individuals (Christina & Betty, 2011) and a part of sharia compliant hospital scope (Yahya, 2018). For example, a Muslim woman may refuse certain medical treatments during pregnancy due to religious beliefs, such as avoiding medications that contain alcohol. Healthcare providers who are aware of these considerations can work with the patient to find alternative solutions that align with her faith while still ensuring her health and safety. This level of understanding and respect can foster trust between the patient and provider, leading to better cooperation and outcomes in the long run.

Challenges in Implementing the Role

The rise in demand of sharia-compliant services has driven considerable growth in the personal well-being, health, and wellness tourism sector. As a result, gaining a clear understanding of how to effectively meet the needs of this important group is crucial to ensuring that the development of the Islamic medical tourism industry is inclusive and sustainable. Undoubtedly, with the growing potential of this profitable sector, providing sharia-compliant hospital services poses significant challenges, particularly in balancing the application of Islamic medical ethics with the individual needs of Muslim medical tourists. According to Padela (2007), medical ethics focus on moral principles related to biomedical science in clinical and academic research.

However, Islamic medical ethics are closely linked to Islamic law (sharia), which not only distinguishes between obligatory and prohibited actions but also includes intermediate categories such as recommended, discouraged, and permissible (Padela, 2007). Since Islam places the responsibility of practicing religion on individuals, there can be personal and cultural variations that may lead to differences in expectations.

The existence of the sharia-compliant hospital concept in general, and in the context of maternity services specifically, not only impacts hospital management practices but also closely relates to the practices of health workers. Health workers in the field of maternity face challenges in adhering to this sharia-compliant concept. These challenges encompass the application of sharia-compliant principles, interpersonal relationships with patients, and determining legal rulings related to maternity care.

In addition to the requirement for halal medications, health workers also face challenges in ensuring that medical procedures fully comply with Islamic principles, particularly in maternity services. For instance, in certain cases, a bilateral tubal ligation (BTL) or tubectomy

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

might be necessary for the safety of the mother's life, but such a procedure may not align with Sharia principles if its necessity is not thoroughly examined.

From the aspects of training and education, health workers still require both elements to further enhance the services provided and to empower the concept of sharia-compliant hospitals in general, and maternity services in particular. These elements are crucial for providing an understanding of applying Islamic principles in a medical context. Another challenge for health workers is related to interpersonal relationships with patients. Religious and cultural aspects can sometimes pose challenges for them in providing the best Sharia-compliant services. There is a possibility that patients or their families may have differing opinions on the appropriate treatment. For instance, they might reject certain treatments for religious reasons, which can lead to conflicts between medical needs and sharia aspects.

Health workers must set aside funds to supply the right supplies, facilities, and qualified personnel so that Muslims can fulfill their religious duties. Financial implications play a major role in determining the feasibility of accommodating Islamic practices and Muslim-friendly regulations (Elmira & Amilah, 2019). Research has shown that there is a lack of knowledge among health workers about the religious needs of Muslims, leading to challenges in obtaining religious accommodation (Elmira & Amilah, 2019). Due to this ignorance, Muslim patients may feel ignored or misinterpreted when receiving medical care.

Health workers also need to actively educate themselves on the religious practices and beliefs of their Muslim patients in order to close this knowledge gap. They can guarantee that every patient receives the culturally competent treatment they need by doing this. deserve. This will not only improve patient satisfaction and outcomes but also promote a more inclusive and respectful healthcare environment for all. For example, a Muslim patient may require special dietary considerations during their hospital stay, such as avoiding pork or alcohol. If healthcare providers are unaware of these restrictions, it could lead to misunderstandings and potential harm to the patient's health.

By taking the time to learn about and respect these religious practices, (Elmira & Amilah, 2019) healthcare providers can ensure that all patients receive the appropriate care and support they need. This level of cultural competence can also help build trust between healthcare providers and patients, leading to better communication and overall quality of care. Additionally, by acknowledging and accommodating diverse religious beliefs, healthcare facilities can create a welcoming and inclusive environment that values the individual needs and preferences of each patient. Ultimately, by prioritizing cultural sensitivity and respect, healthcare providers can truly deliver patient-centered care that promotes the well-being of all individuals.

Framework of Health Workers Practice Guidelines in Maternity Care

The development of detailed guidelines for the criteria of a health worker in a sharia-compliant hospital is a complex process that involves the integration of Islamic principles into financial management, strategic planning, and performance evaluation. Various studies have highlighted the importance of aligning hospital operations with Islamic values and principles to ensure comprehensive and measurable performance.

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

Implementing sharia-compliant financial management requires working with sharia financial institutions and following specific accounting standards (Armein & Mukhaer, 2023). Integrating Islamic values into the Balanced Scorecard (BSC) for strategic planning can help Sharia hospitals formulate strategies that promote Islamic values while evaluating financial and non-financial performance (Arlina et al., 2024). Research on sharia management models in hospitals emphasizes the gradual implementation of sharia principles and the need for research to establish feasible sharia models for hospitals (Armein & Mukhaer, 2023). Analysis of financial management in sharia hospitals involves complex systems and interactions between hospital management, government policies, and sharia principles (Armein & Mukhaer, 2023).

The framework of guidelines for a good maternity care practice of health care givers involves providing high-quality care that meets the needs of women, newborn infants, and families throughout the pregnancy, birth, and postpartum period. This includes effective practices, organization of care, values of care providers, and characteristics of care providers (Mary et al., 2014). Adherence to high-quality clinical practice guidelines, combined with simulation-based training, can help improve providers knowledge, skills, and attitudes (Koblinsky, 2016). However, the shortage of qualified health workers, especially in low-income countries, remains a challenge in ensuring quality maternity care. It is important to tailor care to the local burden of illness and address issues like timeliness, quality, and over-intervention in maternity care services (Koblinsky, 2016). Global recommendations for care content are valuable, but implementation strategies should consider context, resources, and individual needs due to variations in health systems and maternity care models (Koblinsky, 2016).

In addition to addressing workforce shortages, improving the quality of maternity care also requires a focus on continuous education and training for existing providers. This includes ongoing professional development opportunities, mentorship programs, and regular skills assessments to ensure competency and adherence to best practices. By investing in the education and support of healthcare workers, we can ultimately improve the overall quality of care provided to pregnant women and their newborns (Karen et al., 2011; Mary et al., 2014; Koblinsky, 2016).

This investment in education and training not only benefits the healthcare providers themselves, but also has a direct impact on patient outcomes. Providers who receive ongoing education and mentorship are better equipped to handle complex cases and provide evidence-based care. By prioritizing the professional development of maternity care providers, we can ensure that pregnant women receive the highest quality care possible, leading to better health outcomes for both mothers and babies. Ultimately, investing in the education and support of healthcare workers is crucial for improving the overall quality of maternity care and promoting positive birth experiences (Karen et al., 2011; Koblinsky, 2016; Elmira & Amilah, 2019).

Based on previous studies and current needs, several elements must serve as the foundation for developing the framework of guidelines. The necessary items include Introduction, Core Principles, Patient Care Guidelines, Clinical Practices, Staff Training and Development, Operational Policies, Community Engagement, and Conclusion. The introduction provides a structured and comprehensive framework that aligns maternity services with the principles

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

of sharia, ensuring that healthcare delivery respects Islamic ethical values while maintaining high standards of medical care. The framework is applicable to all health workers involved in maternity services, including doctors, nurses, midwives, and support staff. The study by Harun et. al (2024) demonstrated that key elements for Muslim-friendly hospital providers to implement include Sharia-compliant prescriptions, Islamic infrastructure, Islamic medical practices, compassion and support, Islamic medical service competencies, a conducive Islamic environment, reasonable and convenient services, and an Islamic work culture.

Under the aspect of Core Principles, the guidelines focus on preserving religion, life, dignity, and ethical conduct. Meanwhile, the Patient Care Guidelines emphasize elements such as Informed Consent and Autonomy, Privacy and Modesty, and Spiritual Support. For the aspect of Clinical Practices, there are three areas of management that healthcare workers need to address in a sharia-compliant manner (Manaf et al., 2024) namely during labour and delivery, postpartum care, and new born care.

Every health worker in maternity services must also emphasize the aspect of training and development that focuses on cultural and religious competency. The Millennium Development Goal 5 emphasizes the essential role of midwives and those with midwifery expertise in advancing maternal health, as reflected in its second indicator, which measures the proportion of births attended by skilled healthcare professionals (Fauveau et. al, 2008).

Under Operational Policies, this aspect aims to ensure that resources such as female staff and prayer facilities are adequately allocated to support sharia-compliant care. It also aims to establish a committee to regularly review and assess the implementation of sharia-compliant practices in maternity services and conduct patient satisfaction surveys to gather feedback on the sharia-compliance of services provided. Through the community engagement aspect, educational materials should be developed to inform patients about the sharia-compliant services available at the hospital, host community workshops to educate the public on the importance of sharia-compliant maternity care, and create channels for patients and families to provide feedback on their experience with maternity services, ensuring that concerns related to sharia compliance are addressed promptly. The following table shows the framework for the guidelines for healthcare workers in Shariah-compliant hospitals.

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

Table 1
The Framework of Healthcare Workers Guidelines in Shariah-Compliant Hospitals

Introduction	 Introduction to the concept of shariah-compliant hospitals. The importance of shariah compliance in healthcare services. Objectives of the guidelines for healthcare workers.
Core Principles	 Maqasid sharia as the foundation of healthcare practices. Differentiation of actions into obligatory, recommended, permissible, discouraged, and forbidden in healthcare. Integration of Islamic medical ethics into clinical practices.
Patient Care Guidelines	 Patient care from the shariah perspective. Fulfilments of the rights of Muslim patients. Holistic approach in treatment that adheres to sharia principles.
Clinical Practices	 Management of medical procedures in accordance with shariah. Guidelines for the use of halal medical equipment and medications. Management of female patients and the issue of <i>aurah</i> (modesty) in treatment.
Staff Training and Development	 Training programs on shariah compliance for healthcare workers. Enhancing the competency of staff in delivering sharia-compliant services. Development of Islamic-based learning modules for healthcare workers.
Operational Policies	 Implementation of operational policies and protocols that comply with shariah. Hospital management from the perspective of sharia requirements. Integration between hospital administration and shariah compliance.
Community Engagement	 Relationship between shariah-compliant hospitals and the community. Shariah-based health awareness and education programs for the public. Collaboration with religious institutions to strengthen Shariah compliance.
Conclusion	 Summary of the role of healthcare workers in ensuring shariah-compliant hospitals. Challenges and opportunities in strengthening shariah-compliant hospital practices. Steps towards enhancing and sustaining shariah-compliant healthcare services.

The table of outlines above showed a comprehensive framework for health workers in sharia-compliant hospitals. It begins by introducing the concept and importance of sharia-compliance in healthcare, emphasizing the role of magasid sharia in guiding healthcare

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

practices. Key guidelines are provided for patient care, focusing on fulfilling the rights of Muslim patients and adopting a holistic, sharia-based approach to treatment.

Clinical practices are directed by sharia, including the use of *halal* medical tools and medications, and sensitive management of issues like modesty, especially for female patients. The framework also stresses the need for staff training on shariah compliance to enhance their competency and offers Islamic-based learning modules. Operational policies are outlined to ensure hospital management aligns with sharia principles, integrating administrative functions with religious compliance. The importance of community engagement is highlighted, encouraging collaboration with religious institutions and promoting sharia-based health education.

In conclusion, the table summarizes the critical role of health workers in maintaining shariah-compliant practices, while addressing the challenges and opportunities for strengthening and sustaining these practices in the healthcare sector.

As a conclusion, the implementation of guidelines for maternity care practices by healthcare workers in sharia-compliant hospitals has the potential to greatly benefit both patients and healthcare providers. Despite challenges such as resistance to change and lack of resources, strategies can be put in place to overcome these barriers and promote compliance with the guidelines. By doing so, we can ensure improved patient satisfaction, trust, and quality of care for Muslim patients, while also strengthening ethical and moral values in healthcare practices. It is imperative that healthcare workers recognize the importance of implementing these guidelines in order to provide the best possible care in line with Islamic principles and make the necessary adjustments to their practices. This may involve providing cultural competency training for staff, ensuring that appropriate resources and facilities are available to accommodate Muslim patients' needs, and actively seeking feedback from the community to continuously improve services. By prioritizing adherence to sharia guidelines, healthcare institutions can not only better serve their Muslim patients, but also uphold their commitment to providing equitable and respectful care for all individuals. It is time for healthcare organizations to take proactive steps towards promoting cultural sensitivity and religious inclusivity in their practices.

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Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

References

- Arlina, D., Hidayah, N., Ahmad, G. & Suleman, S. (2024), Integration of Islamic Values Into Balanced Scorecard As A Strategic Management System At A Sharia Hospital, *Journal of Application Business & Management*, 10 (2), 351-362.
- Armein, S. R. & Mukhaer P. (2023). Policy Formulation of Financial Management Patterns with Sharia Principles in Bogor City Hospital, *Journal of Education on Social Science*, 7 (1), 74-90.
- Christina, P. & Betty F. (2011). Making Health Care Whole: Integrating Spirituality into Patient Care, New Jersey: Templeton Press.
- Crowe, C. & Manley, K. (2019). Person-centred, safe and Effective Care In Maternity Services:

 The Need For Greater Change Towards Best Practice, *International Practice Development Journal*, 9 (1) [8]
- Elmira, A., Amilah, A. A. R. S., Salilah,. (2019). "Religious Accommodation for Muslim Workers and Patients in Healthcare". *ICR Journal* 10 (2):242-63.
- Fauveau, V., Sherratt, D. R. & de Bernis, L. (2008). Human Resources For Maternal Health: Multi-Purpose or Specialists?. *Human Resour Health*, 6(21), 1-15.
- Hall, C. M., & Prayag, G. (Eds.). (2019). The Routledge Handbook of Halal Hospitality and Islamic Tourism (1st ed.). Routledge.
- Hamzah, M., Jamaludin, M., & Md Sawari, M. (2019). The Establishment of Fundamental Shari'ah Compliant Hospital Management in Malaysia. *Journal Halal Industry and Services*, 2(1).
- Harun, S., Ahmad, I., Shafie, S., Choirisa, S.F.F. and Rizkalla, N. (2024), "Developing Muslim-Friendly Hospital Practices: Understanding The Key Drivers", *Journal of Islamic Marketing*,
- Ismail, S. K. & Mutalib, L. A. (2022). Determination of The Malaysian Sharia Index in Health Aspects According to The Perspective of Maqasid Sharia, *International Journal of Academic Research In Business and Social Science*, 12(10), 1109 1117.
- Ismail, S. K. & Mutalib, L. A. (2022). Necessity of Sharia Compliant Maternity Care System in Malaysia, *International Journal of Academic Research In Business and Social Science*, 12(10), 1158 1167.
- Karen, J. Connel, Hasnain, M., Meron, U. & Patrick, A. T. (2011). Patient-Centered Care for Muslim Women: Provider and Patient Perspective, Journal of Women's Health, 20(1).
- Kathy, Debra, Claudia, Carlos, & Gerald. (2019). The International Childbirth Initiative: 12 steps to safe and respectful MotherBaby–Family maternity care. *International Journal of Gynecology & Obstetrics*, 146(1), 65–73.
- Koblinsky, M., Cheryl, A. M., Clara, C., Campbell, J., Campbell, O. M. R., Feigl, A. B., Graham, W. J., Hatt, L., Hodgin,s S., Matthews, Z., McDougall, L., Moran, A. C., Nandakumar, A. K., Langer, A. (2016). "Quality Maternity Care for Every Woman, Everywhere: A Call To Action, *The Lancet*, 388(10057), 2307-2320.
- Manaf, N. H. A., Ahasanul, H., Uddin, M. N., Akther, N. & Mokhtar, A. (2024). Enhancing Community Health Sustainability Through The Use of Maqasid Al-Shariah Theory, *International Journal of Islamic Marketing and Branding*. 6(2),
- Padela, A. I. (2007). Islamic medical ethics: a primer, Bioethics, 21 (3), 169-178.
- Pathmanathan, I., Liljerstrand, J., Martins, J. M., Rajapaksa, L. C., Lissner, C., Silva, A., Selvaraju, S., Singh, P. J. (2003). Investing in Maternal Health: Learning from Malaysia and Sri Lanka. Washington: The World Bank.

Vol. 14, No. 12, 2024, E-ISSN: 2222-6990 © 2024

- Salleh, N. Z. M., Hamid, A. B. H., Hashim, N. H., and Omain, S. Z. (2014). "The Practice of Sharia-Compliant Hotel in Malaysia," International Journal of Trade, Economics and Finance vol.5, no.1, pp. 26-30.
- Sulaiman, Z. A., Iranmanesh, M., Foroughi, B. and Rosly, O. (2022). "The impacts of Sharia-compliant hotel attributes on Muslim travellers revisit intention: religiosity as a moderator", *Journal of Islamic Marketing*, Vol. 13 No. 10, pp. 2108-2125.
- Wahyuningsih, E., Mariyanti, T, & Hatta, Z. M. (2023). Patient Satisfaction Mediates The Influence of Trust, Service Quality and Hospital Sharia Compliance on Patient Loyalty In Sharia Hospitals In Riau Province From An Islamic Perspective. *International Journal of Research in Business and Social Science* (2147-4478), 12(9), 39–59.
- World Health Organization World, (2000). Health systems: Improving performance, World Health Organization.
- World Health Organization World, (2018). WHO Recommendations on Intrapartum Care for a Positive Childbirth Experience, World Health Organization World.
- Yadav, H. (2007). "Poverty and Health Development". *Medical Journal of Malaysia*, 62(4): 278-281.
- Yahya, R. R., (2018). What is Sharia Compliant Criteria and Scope, International Journal of Academic Research in Business & Social Sciences, 8(5), 1057-1065.