

Integration of Sharia Principles in Islamic Hospital Management: Opportunities and Obstacles

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Abstract

This study aims to explore the opportunities and barriers in integrating sharia principles into Islamic hospital management. Such integration is not only important in clinical aspects, but also at managerial levels such as finance, human resources, strategic decision-making, and governance. This study analyzed 40 scientific articles published between 2013 and 2024 using the Systematic Literature Review (SLR) approach, collected through the Scopus, ScienceDirect, and Google Scholar databases. Data analysis was carried out with the help of NVivo software to identify key themes that emerged consistently in the literature. The results showed that integration opportunities arise from the increasing awareness of the Muslim community, the need for service differentiation, and the compatibility of sharia values with modern management principles. Significant barriers remain, such as the lack of human resources who understand sharia management, the absence of international standard standards, and dualism of regulations between medical and sharia. This study also presents case studies and provides practical recommendations for hospital managers, academics, and policy makers in strengthening the implementation of sharia-based management systematically and sustainably.

Keywords: *Islamic Hospital, Sharia Management, Integration, Health System, Governance.*



A. INTRODUCTION

Healthcare has been rapidly developing in many parts of the world in recent decades, including in countries with Muslim majorities. As living standards and public awareness of the importance of health have increased, so have broader expectations of the existing service system. People now demand not only quality medical services, but also services that are in line with the values they believe in. In countries such as Indonesia, Malaysia, Saudi Arabia, and the Middle East and North Africa region, the need for a healthcare system that is not only professional but also in line with Islamic sharia principles is becoming increasingly apparent, this demand reflects the fusion of physical and spiritual needs in the medical experience, while also encouraging the emergence of a more ethical, holistic, and value-based healthcare model (Gayatri et al., 2024; Mohidem & Hashim, 2023; Zailani et al., 2016).

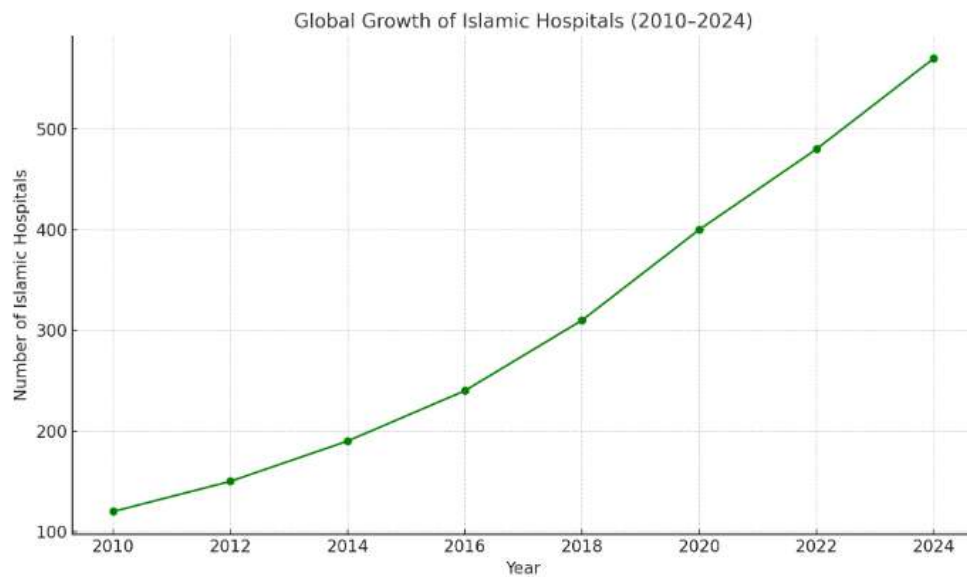


Figure 1. Global Growth of Islamic Hospitals (2010-2024)

Source: Journal Global Health Science Group

The number of Islamic hospitals worldwide has grown significantly, rising from approximately 120 institutions in 2010 to nearly 570 by 2024. This upward trend reflects increasing demand for healthcare services aligned with Islamic values, especially in Muslim-majority countries, this situation has encouraged the emergence of Islamic hospitals, which are healthcare facilities that strive to incorporate sharia values into their management systems and daily services. The goal is not only to provide good medical services, but also to ensure that every process runs in accordance with spiritual, ethical, and cultural values that are in accordance with Islamic teachings (Gayatri et al., 2024; Mohidem & Hashim, 2023; Rahman, 2024). This trend is increasingly visible with the increasing number of hospitals that carry the label "sharia" or "Islamic hospital", as well as the development of halal or sharia certification institutions in the health sector in various countries. In Southeast Asia itself, it turns out that many hospitals are starting to build a more comprehensive system for Muslim patients, starting from providing halal food, funeral services according to sharia, to implementing a sharia-based financial system in their operations.

The growth of Islamic hospitals shows a shift in perspective in health services, from previously only focusing on technical medical aspects, now starting to include spiritual and ethical considerations as an important part of the service. The Muslim community increasingly wants health services that are not only clinically effective, but also in line with their values and beliefs. Incorporating sharia principles into the hospital management system is no longer just an option, but a strategic step that needs to be taken, this integration not only strengthens the identity of the institution and builds patient trust, but also encourages the creation of a more ethical and sustainable management system (Maulina et al., 2023; Rahman, 2024).

The concept of an Islamic hospital itself is not just adding religious elements to services. An Islamic hospital is an institution that consciously and structurally builds

a system based on sharia values, this concept also includes how the organization is run, ethics in providing services, and how staff interact with each other, the goal is not only to cure physical illnesses, but also to maintain and care for spiritual values for patients and all parties involved in the service (Gayatri et al., 2024; Zailani et al., 2016).

Unlike conventional hospitals that generally emphasize efficiency and achieving clinical outcomes, Islamic hospitals make moral and spiritual values derived from Islamic teachings the main foundation in decision-making and organizational behavior. This difference is evident in the way Islamic hospitals treat patients. They emphasize the importance of compassion (*rahmah*), respect for human dignity (*karāmah al-insān*), and fair and equal treatment without discrimination. These values are also applied in human resource management, financial arrangements, and strategic planning, where sharia principles are the reference in every process.

In today's developing managerial practices, such as sharia principles, they include a number of core values that are not only normative, but can also be applied in real terms. Justice (*'adl*) is the basis for ensuring that decision-making and resource allocation are carried out equally. Amanah is the basis for integrity in carrying out tasks, both individually and institutionally. The principle of transparency (*shafāfiyyah*) encourages openness in every process and work report, and Service ethics (*akhlaq al-khidmah*) emphasizes the importance of politeness, empathy, and humane treatment of patients and fellow staff. The principle of maslahat or public benefit is the main determinant in the policies taken, ensuring that every decision brings broad benefits, not just benefits the organization (Anggraini, 2024; Samsudin, Kashim, Yahaya, et al., 2015b).

The role of Islamic hospitals does not stop at the healing function, but also includes efforts to provide examples, inspire good values, and represent Islamic teachings in professional public services. This approach provides a new perspective in the world of hospital management, where decisions are not only based on rational and technical considerations, but also on strong spiritual and ethical values. So far, the integration of sharia principles in hospitals has often been limited to aspects of clinical services—such as the provision of halal food, gender-based room arrangements, or the presence of a spiritual team (Alam & Miah, 2024; Malmoon et al., 2020; Rohman et al., 2021). The role of sharia values is much broader and very crucial in the managerial realm, these principles should also be applied in financial management that is free from usury, HR policies that uphold justice and empathy, and transparent and responsible organizational governance.

Core values in sharia such as amanah and justice have strong similarities with the principles of good governance that are now the global standard. Transparency in decision-making, participation of all stakeholders, and orientation towards the public interest reflect the alignment that allows Islamic hospitals to build a system that is resilient and trusted by the community in the long term. The integration of sharia values can actually be a strategic strength that differentiates Islamic hospitals amidst the increasingly tight competition in healthcare services. In an era when patients are increasingly selective, an identity as an institution that upholds spiritual and moral

values can be a special attraction—especially for Muslim patients who want healthcare services that are in line with their beliefs (Das et al., 2021; Dihan et al., 2023; Talwar et al., 2023).

Many principles of Sharia are in line with modern, values-based management approaches. Concepts such as integrity, social responsibility, and sustainability are now global standards in organizational governance. Sharia is not a barrier to professionalism or efficiency—it provides ethical depth that enriches managerial practices, making them more rooted in strong moral principles. However, in practice, many Islamic hospitals have not fully adopted Sharia values in their management systems (Samsudin, Kashim, Yahaya, et al., 2015a; Werkneh & Islam, 2023). Their implementation is often only symbolic or limited to certain aspects. One of the main challenges is the clash between modern management models that emphasize efficiency and bureaucratic structures, and the Sharia approach that focuses more on ethics, benefits, and spiritual balance, many institutions run conventional systems and only add Sharia elements as a complement, not as the main foundation.

The next challenge is the absence of standard operating procedures and implementation guidelines that can be used as a common reference. Not all hospital managers fully understand how principles such as amanah, justice, or maslahat can be translated into human resource policies, financial systems, or strategic decision-making. As a result, the implementation of sharia principles is highly dependent on individual perceptions or interpretations of each management, which of course causes quality disparities and inconsistencies in practice in the field (Randeree & El Faramawy, 2011; Saad et al., 2014; Sulistiadi & Rahayu, 2017).

The challenges faced by Islamic hospitals are not only conceptual, but also involve structural and cultural aspects. Many hospitals still lack professional staff who have a combination of management skills and understanding of sharia. Sharia values are often considered as a personal matter or part of spiritual services, not a core part of the organization's management system, this perception limits the integration of Islamic values into the managerial process. The problem is further complicated by the lack of scientific references, case studies, and documentation of practices that can be used as a common reference. Without the support of solid knowledge, hospitals have difficulty building a management system that is in line with sharia and resilient to change. Most of the existing research still focuses on the dimensions of clinical services and religious ethics. Studies generally discuss halal standards, patient prayer facilities, or professional behavior of health workers. The managerial approach has not been seriously touched upon. Important aspects such as organizational strategy, HR management, and governance systems are still minimally discussed from a sharia perspective. As a result, the integration of Islamic values in decision-making and hospital operational systems has not been carried out comprehensively (Abdurrokhman & Sulistiadi, 2023; Mat et al., 2021; Sunawari et al., 2023).

This article is here to fill a gap that has so far been overlooked. It focuses on Islamic hospital management, with the aim of comprehensively describing the opportunities and challenges in integrating sharia principles into hospital operational

strategies and practices. This article seeks to enrich the discussion on the Islamization of management in the health sector—a theme that is still rarely discussed in global literature. This article can also practically serve as a reference for hospital managers, regulators, and certification bodies who are looking for a clear and applicable direction in building a management system that is in accordance with Islamic values.

The main objective of this article is to identify the potential for integrating sharia principles into hospital management, while simultaneously unraveling the obstacles that often arise in the process. The article not only highlights the problems, but also presents a conceptual analysis that can be used as a basis for formulating policies and developing institutional systems that are more ethically aligned. The approach is exploratory and analytical, with a focus on mapping managerial issues that have so far been less addressed in previous research.

B. LITERATURE REVIEW

1. Sharia Principles in Management

The integration of sharia principles in organizational management, including hospitals, is based on the belief that Islamic values not only regulate the individual's spiritual relationship with God, but also form an ethical foundation in managing worldly affairs, including in leadership, decision-making, and resource management. In this context, a number of key principles such as *amanah*, justice (*'adl*), *maslahat*, transparency (*shafāfiyyah*), and efficiency are at the heart of the sharia-based management framework (Abdurrokhman & Sulistiadi, 2023; Mat et al., 2021).

The principle of *amanah* emphasizes moral responsibility in every managerial position and decision. A leader in a sharia-based institution is positioned not only as an administrator, but as a guardian of *amanah* who must be accountable for his actions in the worldly and hereafter. According to Dusuki & Abdullah (2007), *amanah* in the context of an organization includes honesty, integrity, and commitment to the tasks assigned, which ultimately creates a strong and trusted organizational culture. In the context of a hospital, this means that every decision—whether in recruitment, budget, or patient care—must be based on the intention of maintaining public trust and upholding moral standards (Andrianto & Rahmiyati, 2021; Sunawari et al., 2023).

Justice (*'adl*) is a central value that governs human relations, and in management it is translated as fair treatment of employees, patients, and other stakeholders. Justice also means that organizational policies must be free from bias, discrimination, or exploitation. Research by (Sulistiadi & Rahayu, 2017) emphasizes that justice in sharia management is not only procedural, but also substantive—ensuring that policies not only appear fair, but also have a real fair impact. In hospitals, this can include equal access to services, fair remuneration systems, and ethical conflict resolution mechanisms.

Maslahat (public interest) is a normative principle in sharia that is used as a basis for determining policies when there are no explicit legal provisions. In management, *maslahat* is a benchmark so that every policy and innovation is directed to create maximum benefits for as many parties as possible. According to (Saad et al.,

2014), the principle of *maslahat* is relevant in the context of strategic decision-making, especially in situations that require the adjustment of sharia values to the practical needs of modern organizations. In hospital practice, this can be reflected in inclusive, community-oriented service programs that do not only focus on profit.

Transparency (*shafāfiyyah*) is also an important principle in sharia management. It is related to openness in the decision-making process, financial reporting, and public accountability. (Randeree & El Faramawy, 2011) in their study emphasized that transparency is very influential in building trust, especially in organizations based on religious values. Without transparency, the principles of trust and justice will be difficult to uphold consistently. In the context of hospitals, transparency touches on aspects such as the disclosure of financial reports, audit results, and the procurement process for goods and services.

What is often less highlighted but no less important is the principle of efficiency. In the Islamic perspective, efficiency does not conflict with spiritual values, as long as the process is carried out in a halal and fair manner. Unorganized management, or management that does not prioritize optimal results, is seen as a form of waste that is prohibited (*isrāf*). As studied by (Forster & Fenwick, 2015), efficiency in sharia management reflects a professional attitude, is responsible for resources, and is able to maximize results in an ethical manner. Although these principles have been widely discussed in the context of Islamic management in general, their specific application in the health sector, especially Islamic hospital management, is still minimal. Most of the literature stops at the normative level, not many elaborate on how these principles are internalized in hospital policies, organizational structures, and operational procedures, this study takes an important position in bridging normative theory with real managerial practices in Islamic health institutions.

2. Modern Management Theory

In the development of hospital management, a modern approach plays an important role in creating an effective, efficient, and sustainable system. Some of the main theories that are often used as references include Total Quality Management (TQM), organizational governance, leadership, and performance measurement. Although developed in a secular context, many values in this approach are compatible with sharia principles, so they have the potential to be integrated harmoniously in the management of Islamic hospitals.

Total Quality Management (TQM) is a systematic approach to improving quality across all aspects of an organization. In the context of hospitals, TQM encompasses continuous improvement in medical services, administration, and patient interactions. According to (Samsudin, Kashim, Yahaya, et al., 2015a), TQM in hospitals is very effective in improving patient satisfaction, staff morale, and operational efficiency. Interestingly, the spirit of continuous improvement in TQM is in line with the Islamic value of *ihsān* — doing one's best in every aspect of life. Several studies such as by (Chughtai et al., 2020) show that the implementation of TQM in

hospitals in Muslim countries can be aligned with Islamic ethical principles, as long as there is contextual adaptation.

The concept of governance or organizational management emphasizes the importance of transparency, accountability, and integrity in strategic decision making. These principles are very much in line with sharia values such as amanah, 'adl, and shūrā (deliberation). Good governance is crucial in hospitals, because this institution manages public resources and concerns aspects of human life and death. WHO (2009) in (Werkneh & Islam, 2023) calls governance the foundation of a strong health system, and in the context of Islamic hospitals, this means governance that is not only administratively effective, but also ethical and spiritually responsible.

Leadership is also a key element in hospital management. Transformational leadership theory, for example, emphasizes the importance of vision, intrinsic motivation, and staff empowerment—values that are close to the ethos of prophetic leadership in Islam. (Dihan et al., 2023) call leadership the main driver of organizational change, while in a contextual study of (Das et al., 2021) emphasizes that leaders in Islam must have high moral character (*akhlāq*), not just technical competence. In hospital practice, leadership style greatly determines work culture, incentive systems, and the success of implementing sharia values.

Performance measurement is an important instrument to ensure that the vision and values of the organization are reflected in real results. Modern management systems emphasize the use of key performance indicators (KPI) to assess efficiency, effectiveness, service quality, and stakeholder satisfaction. According to (Talwar et al., 2023) through the Balanced Scorecard approach, organizations can combine financial and non-financial indicators to obtain a complete picture of institutional performance. In the context of Islamic hospitals, performance measurement is not only about productivity and patient satisfaction, but also includes aspects of sharia compliance, service ethics, and spiritual values reflected in the organizational culture.

Although these theories originate from a Western framework, modern management approaches can serve as value-neutral technical tools. Islamic values can be internalized as a normative framework that provides direction, while modern management theories provide the structure and methods to implement them effectively. The integration of these two approaches provides an opportunity for Islamic hospitals to remain competitive amidst demands for efficiency and professionalism, without losing their ethical and spiritual identity.

3. Conceptual Integration

Integration of sharia principles into hospital management is not merely symbolic or normative; it must be manifested in the organizational structure, work processes, and institutional culture. This integrative approach requires an understanding that sharia principles are not just legal rules, but a value system that shapes the way of thinking, acting, and making decisions at every managerial level. Integration can start with the establishment of a special unit or sharia advisory board that plays a role in overseeing compliance with Islamic values in all aspects of hospital

operations—not just those related to religious services. A study by (Tushar et al., 2023) on Islamic hospitals in Malaysia showed that the existence of this institution encourages the creation of hospital policies that are more holistic and consistent with the *maqāṣid al-sharī'ah* (main objectives of sharia), such as preserving life, mind, and human dignity.

At the policy and managerial process level, the integration of sharia principles touches various domains. In financial management, for example, hospitals can implement a sharia-based financing and investment system (non-riba, non-gharār), as discussed in a study by (Malmoon et al., 2020) which emphasized that the sharia financial system improves the stability and financial ethics of health organizations, principles such as amanah and justice can be realized in a fair recruitment process, a transparent performance evaluation system, and incentive management that is oriented towards the common good in human resource management.

The principle of *shūrā* (consultation) encourages a participatory and deliberative culture in decision-making, where stakeholders are invited to dialogue before important decisions are made. This is in line with the principles of transformational leadership and inclusive governance which are often used as models in modern management systems. Integration of these values also requires operational standardization based on sharia, so that these principles are not just jargon, but become work instruments that are systematically referred to. Unfortunately, until now there have not been many international standard standards that can be used as references in this context. A study by (Alam & Miah, 2024) noted that most Islamic hospitals still rely on conventional standards (such as JCI or ISO) without adequately adapting Islamic values. Conceptual integration requires institutional engineering: starting from the formulation of a vision and mission based on Islamic values, strategic planning that is oriented towards the public interest, to an internal audit system that also includes the sharia dimension. Without this comprehensive integration effort, sharia values risk becoming just a label, not a living and effective management system.

C. METHOD

This study uses a qualitative approach with a Systematic Literature Review (SLR) design combined with a limited contextual case study approach. This approach was chosen because this article aims to develop an in-depth conceptual understanding, by systematically summarizing and analyzing various existing scientific findings. Case studies are used to provide real illustrations of the application of sharia principles in Islamic hospital management in several regions, such as Indonesia, Malaysia, and GCC countries. SLR is considered appropriate to evaluate the development of literature holistically and identify gaps in existing research.

Data were collected from three major academic databases: Scopus, Web of Science, and Google Scholar, with a publication year range of 2013 to 2024 to ensure relevance and novelty. The keywords used included: “Islamic hospital management”, “Shariah principles in healthcare”, “Islamic governance in health institutions”, “maqasid shariah in hospital”, and “Islamic values in healthcare strategy”. From the initial search

results, 182 publications were obtained consisting of journal articles, conference proceedings, and research reports. After the title and abstract screening process, 84 articles were deemed relevant. Then, a selection was carried out based on inclusion criteria (peer-reviewed publications, topic relevance, and access to full-text), leaving 40 articles for further analysis, 30 main articles were used as the basis for analysis because they were the most relevant and had strong empirical and theoretical contributions to the research focus.

The analysis was conducted using content analysis and thematic analysis to identify key themes emerging from the selected literature. The analysis was conducted manually with the help of qualitative coding software (NVivo) to compile thematic categories, such as: sharia principles in management, barriers to integration, forms of best practices, and the position of Islamic hospitals in a global context. A framework analysis approach was used to map the integration of sharia values against modern management frameworks, such as Total Quality Management, good governance, and strategic leadership. The results of this analysis were compiled in the form of a matrix and narrative, to support conceptual arguments and compile applicable recommendations based on valid data and literature.

D. RESULT AND DISCUSSION

1. Integration Opportunities and Barriers

Based on the results of the analysis of 40 main articles in this SLR, there are several strategic opportunities that consistently appear in the literature related to the potential integration of sharia principles into the managerial system of Islamic hospitals. The results of the SLR research data are written in the following table:

Table 1. Major Themes and Subthemes (Generated from NVivo Coding)

Theme 1 Opportunities for Integration of Sharia Principle				
Sub Theme	Description	Number of Sources Coded (n=30)	Frequency of Reference	Example of References
Shariah-based Branding	Positioning hospitals as Islamic to strengthen identity and market differentiation.	21	47	(Berkah, 2017; Rohman et al., 2021; Widiastuti et al., 2022)
Ethical Compliance (Halal-Haram)	Implementation of halal-compliant drugs,	19	43	(Maulina et al., 2023; Rahman, 2024; Widiastuti et al., 2022)

	procedures, and patient care.			
Muslim Patient Trust	Increased patient loyalty, satisfaction, and perceived moral alignment.	18	38	(Gayatri et al., 2024; Mohidem & Hashim, 2023; Zailani et al., 2016)
Alignment with ESG Values	Syariah values overlap with ESG elements: transparency, accountability, social welfare.	15	29	(Mustika, 2022; Wijianto et al., 2023)
Theme 2: Barriers to Integration				
Subtheme	Description	Number of Sources Coded	Frequency of Reference	Example of References
Lack of Qualified Human Resources	Deficit in leadership and staff trained in Islamic management or governance.	23	56	(Dariati, 2022; Samsudin, Kashim, Yahaya, et al., 2015b)
Absence of Unified SOP	No standardized Sharia-compliant operational procedures across hospitals.	20	29	(Abdurrokhman & Sulistiadi, 2023; Mat et al., 2021)
Internal Resistance to Change	Organizational reluctance to shift from conventional to value-based systems.	17	33	(Abdurrokhman & Sulistiadi, 2023; Andrianto & Rahmiyati, 2021; Sunawari et al., 2023)
Dual Regulatory Framework	Conflict or gap between medical regulations and	16	30	(Forster & Fenwick, 2015; Randeree & El Faramawy,

	Islamic legal standards.			2011; Saad et al., 2014)
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From the aspect of identity and differentiation, several studies such as those conducted by (Mohtar et al., 2016) show that hospitals that carry a sharia identity have a competitive advantage in terms of positioning in the healthcare market. The label "Islamic hospital" is not only a religious symbol, but also a branding strategy that strengthens segmentation towards Muslim patients who want medical services according to sharia. This identity also strengthens institutional values and encourages a more cohesive organizational culture.

The absence of a globally recognized Shariah hospital management framework leads to fragmented implementation and unclear compliance metrics (Mohtar et al., 2016).

In terms of compliance and ethics, various literatures (eg: Haron et al., 2021; Azmi et al., 2018) highlight that the halal-haram principle in medical services, ranging from the selection of medicines, procedures, to patient-doctor relationships, can be systematically integrated into hospital SOPs. This not only strengthens the moral dimension but also creates clear service standards, based on *maqāṣid al-sharī'ah*. Third, the level of trust and loyalty of Muslim patients has been shown to increase when hospitals consistently apply sharia principles. A study by (Rochmiati et al., 2021; Wan Ab Rahaman et al., 2023) found that Muslim patients showed a strong preference for hospitals with a sharia approach because they were considered more trustworthy, comfortable, and in line with their personal values.

Branding an institution as 'Islamic' without internalizing Shariah principles at the managerial level risks reducing religion to a marketing label (Rochmiati et al., 2021).

Integration opportunities also arise from the alignment of sharia values with ESG (Environmental, Social, and Governance) principles which are the global standard in assessing organizational sustainability. Several articles (including: (Susanti et al., 2021)) emphasize that principles such as justice, social responsibility, and transparency in Islamic sharia are very parallel to ESG values. This opens up space for collaboration between Islamic hospitals and global institutions in terms of accreditation, sustainability reporting, and international partnerships. Islamic hospitals have the potential to become a model for a health service system that is not only spiritually based, but also in line with global value-based management trends.



Figure 2. Keyword Frequency Word Cloud from SLR Data

The word cloud generated from the systematic literature review (SLR) data reflects the most frequently discussed concepts related to the integration of Sharia principles in hospital management. The most dominant term, “Sharia”, appears 92 times across the analyzed sources, indicating its centrality in discussions of identity, ethics, and institutional structure. Closely following were “Governance” (81 mentions) and “Compliance” (67 mentions), highlighting that the integration of Islamic values is often framed within broader discourses of accountability and organizational performance.

Other prominent keywords include “Halal”, “Ethical”, and “Transparency”, which suggest that ethical conduct and regulatory clarity are key concerns in Sharia-compliant healthcare management. The presence of “Trust”, “Accountability”, and “Leadership” points to the importance of patient confidence and ethical leadership in operationalizing Islamic principles. Terms like “ESG” and “Standard” show an emerging alignment between Sharia values and global frameworks for sustainability and governance, these terms reflect a convergence between traditional Islamic ethical values and modern healthcare management principles, offering both opportunities and complexities in implementation.

Although the integration opportunities are quite large, findings from the literature also indicate significant structural and cultural challenges. The most frequently mentioned major obstacle is the lack of human resources (HR) who have competence in sharia management. Studies by (Yuhanah et al., 2024) show that most Islamic hospital managers come from general medical or administrative backgrounds, without specific training in Islamic economics, sharia law, or value-based governance. This causes sharia implementation to often be symbolic and does not touch the managerial system as a whole.

There is a serious obstacle in the form of the absence of standard and international sharia operational standards, Sharia-based managerial literacy still varies greatly between institutions and countries. A comparative study between

Malaysia and Indonesia (by (Samsudin, Kashim, Yahya, et al., 2015)) shows major differences in sharia practices in hospitals, because there is no single global reference framework that can be used as a reference. This is exacerbated by internal resistance to system change. Several studies (such as by (Anggraini, 2024)) note the reluctance of managers or staff to change existing work practices, especially when sharia values are considered to complicate or contradict the logic of efficiency.

Shariah-based hospitals can integrate ESG by framing environmental stewardship as part of *maqasid al-shariah* (protection of life and health) (Samsudin, Kashim, Yahaya, et al., 2015b).

The final significant obstacle is the duality of regulation—between national medical regulations and sharia principles. In many countries, including Muslim-majority countries, formal medical regulations have not incorporated sharia principles as part of the standard of care. This model creates legal ambiguity in strategic decision-making, especially in ethical cases such as the use of donor organs, artificial insemination, or the selection of pharmaceutical products. Without harmonization between state policies and religious principles, the integration of sharia management will continue to hit a dead end.

Various Islamic hospitals in Indonesia and other countries have shown diverse dynamics in integrating sharia principles into their management systems. Boyolali Islamic Hospital, for example, is an example of success in building an organizational culture based on Islamic values. Employee selection is carried out by considering the ability to read the Qur'an and understanding of basic worship, while routine spiritual guidance is part of the human resource development system. The result is increased work discipline and patient satisfaction, indicating that spirituality integrated with professionalism can be a competitive advantage.

Sari Asih Hospital Ciledug shows that the success of sharia integration also requires strict standardization and supervision. Evaluation shows a high level of sharia compliance, but practices in the field are not yet fully consistent, especially in terms of personal interaction between medical personnel and patients. A similar incident occurred at Siti Khodijah Muhammadiyah Hospital in Sidoarjo, which has implemented Islamic economic principles in financial management, but still faces obstacles in the consistency of implementing the sharia accounting system. Several other hospitals, such as Haji Hospital Makassar and Nur Hidayah Hospital Yogyakarta, face structural challenges such as the availability of halal drugs and dualism of regulations between medical standards and sharia principles. At the international level, An Nur Specialist Hospital in Malaysia is one of the pioneers that has succeeded in obtaining formal sharia certification through the Sharia Advisory Board supervision system and intensive training programs for staff, making it a regional benchmark in the implementation of sharia hospitals. It can be seen that the success of the integration of sharia principles is largely determined by the consistency of internal policies, collective ethical awareness, and institutional support in the form of clear and measurable operational standards. Many hospitals are still in the transition stage, showing that the integration of sharia principles into management is

not only a matter of normative intention, but also a matter of systemic readiness and the courage to innovate.

The results of this study bring a number of important notes for various parties involved in the management of Islamic hospitals. For practitioners, integrating sharia principles into management cannot be done all at once, but requires a gradual approach that is reasonable and appropriate to capacity. The process can start from the basics—such as instilling the values of trust, justice, and transparency into work culture and operational procedures. Human resources also need to be given comprehensive training, not only in technical matters, but also an understanding of sharia concepts in the context of modern management. In addition, forming a special sharia internal audit unit can help monitor the implementation of these values consistently, as well as being a space for continuous evaluation and learning.

This study highlights a major gap that has not been widely touched upon: sharia-based hospital management from a system and strategy perspective for the academic world. Most studies are still focused on the clinical or medical ethics level. Further research is needed—especially cross-country or long-term studies to enrich the theory and provide practice guidelines that are appropriate to various social and cultural contexts.

The urgency lies in the preparation of national or even international standards that can be a common reference. Currently, Islamic hospitals operate with very varied understandings and practices because there is no uniform operational guideline for sharia. Clear and flexible standards will help sharia hospitals be more consistent, professional, and trustworthy. This concept will also facilitate the alignment between general health regulations and sharia principles, as well as strengthen the position of Islamic hospitals in the eyes of the public and the health service market.

E. CONCLUSION

This study shows that the integration of sharia principles into Islamic hospital management is a strategic need that not only reflects religious values, but also contributes to increasing accountability, service ethics, and institutional competitiveness. It was found that integration opportunities are very open, especially in terms of branding, public trust, and alignment with global values such as ESG through a systematic literature study approach. Major challenges are still faced, ranging from the lack of competent human resources, the absence of standard operating sharia standards, to internal resistance to change. The success of implementing sharia in hospital management depends not only on normative intentions, but also on the systemic, regulatory, and adaptive capacity of the hospital itself.

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