



## Strategy of Islamic Service Quality and Spiritual Care Services in Enhancing Patient Loyalty Through Holistic Satisfaction (Case Study: Inpatients at Jabal Rahmah Hospital)

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**Abstract:** This study examines the influence of Islamic service quality and spiritual care services on patient loyalty, with holistic (kaffah) satisfaction as a mediating variable. The study is motivated by gap phenomena and contemporary business challenges, particularly the decline in the number of inpatients at Jabal Rahmah General Hospital amid increasingly intense competition in the healthcare service industry. In the context of Islamic hospitals, patient satisfaction alone is insufficient; hospitals are required to foster long-term patient loyalty through comprehensive and value-based services. The population of this study consisted of inpatients at Jabal Rahmah General Hospital in 2025. A total of 100 respondents were selected using simple random sampling. Data were collected through questionnaires and analyzed using multiple linear regression, t-tests, coefficient of determination (Adjusted R<sup>2</sup>), and path analysis. The findings indicate that Islamic service quality and spiritual care services have a positive and significant effect on holistic satisfaction. Furthermore, Islamic service quality, spiritual care services, and holistic satisfaction significantly and positively influence patient loyalty. Holistic satisfaction partially mediates the relationship between Islamic service quality, spiritual care services, and patient loyalty. These results highlight the importance of integrating Islamic values and spiritual dimensions into healthcare services to enhance patient satisfaction and loyalty in Islamic hospitals.

**Keywords:** Islamic Service Quality, Spiritual Care Services, Holistic Satisfaction, Patient Loyalty

### INTRODUCTION

background of the problem In the contemporary era, many national economies have increasingly shifted toward service-based industries. Along with this shift, consumers have become more selective in choosing service providers, resulting in intense competition among organizations. In the healthcare service industry, patient satisfaction alone is no longer sufficient, as it does not necessarily guarantee repeat utilization. Hospitals are therefore required to develop patient loyalty in order to maintain sustainability and competitiveness.

This condition is particularly relevant for hospitals implementing Islamic principles. According to Parsons (1972), illness is defined as a disturbance in the normal functioning of an individual as a whole, including biological systems and social adaptation. Historically, illness was viewed solely from a medical perspective. However, since the nineteenth century, medical scholars have acknowledged the reciprocal relationship between physical illness and psychological conditions. Mental disorders may lead to physical illness (psychosomatic), while physical illness may also result in psychological distress (somatopsychotic).

From an Islamic perspective, illness is not merely a physical or psychological abnormality but is also understood as a divine test from Allah SWT intended to strengthen faith and spiritual awareness. Illness may serve as a reminder for self-reflection and repentance. Consequently, recovery is not limited to physical healing but also encompasses spiritual well-being. Patients seek healthcare services not only to regain physical health but also to restore their ability to perform religious obligations optimally.

Given the comprehensive Islamic concept of illness, healthcare services are expected to address both worldly and spiritual dimensions. Islamic service quality integrates professional medical standards, ethical conduct, and Islamic values. In addition, spiritual care services play a crucial role in providing religious guidance, emotional support, and spiritual tranquility to patients. These services are expected to foster holistic satisfaction (kaffah satisfaction), characterized by inner peace, gratitude, and strengthened faith.

Based on inpatient data at Jabal Rahmah General Hospital, patient numbers tend to fluctuate, indicating the presence of factors that have not been optimally addressed, particularly patient satisfaction and loyalty. Therefore, this study examines the influence of Islamic service quality and spiritual care services on patient loyalty, with holistic satisfaction as a mediating variable.

1. How does the quality of Islamic services affect comprehensive satisfaction?
2. How does spiritual guidance affect comprehensive satisfaction?
3. How does the quality of Islamic services affect loyalty?
4. How does spiritual guidance affect loyalty?
5. How does comprehensive satisfaction affect loyalty?

## METHOD

This study employs a quantitative approach with an explanatory research design, aimed at explaining the causal relationships among Islamic service quality, spiritual services, holistic (kaffah) satisfaction, and patient loyalty. The quantitative approach was selected because it allows for objective hypothesis testing through statistical analysis and enables the measurement of both direct and indirect effects among variables within a structural model (Creswell, 2014; Sugiyono, 2019). The explanatory design is used to examine the extent to which independent variables influence the dependent variable, either directly or through mediating variables.

The population of this study consists of all inpatient patients at Jabal Rahmah General Hospital in 2025. The sample was determined using a simple random sampling technique, whereby each member of the population had an equal probability of being selected as a respondent. The sample size was calculated using a confidence interval approach, with a 95 percent confidence level and a 10 percent margin of error, resulting in a total sample of 100 respondents. This sampling technique is considered adequate for quantitative research employing regression and path analysis, as recommended in social science and service management research (Hair et al., 2019).

Prior to data analysis, the research instrument was tested for validity and reliability. The validity test was conducted using the Pearson Product–Moment correlation technique by comparing the item–total correlation coefficients with the critical  $r$ -value at a significance level of 0.05. An instrument was considered valid if the calculated  $r$ -value exceeded the critical  $r$ -

value (Sanusi, 2003; Yarnest, 2000). Meanwhile, reliability testing was performed using Cronbach's Alpha, with an alpha value of  $\geq 0.60$  indicating that the instrument demonstrated acceptable internal consistency (Santoso, 2004).

Data analysis was conducted using multiple linear regression and path analysis with the assistance of SPSS software. Prior to hypothesis testing, classical assumption tests—including normality, multicollinearity, heteroscedasticity, and autocorrelation—were performed to ensure that the regression model satisfied the BLUE (Best Linear Unbiased Estimator) criteria (Ghozali, 2018). Path analysis was employed to examine the role of holistic satisfaction as a mediating variable in the relationship between Islamic service quality and spiritual services on patient loyalty, as this technique enables the simultaneous decomposition of direct and indirect effects (Kerlinger, 2006; Kothari, 2004).

## RESULTS AND DISCUSSION

### Respondent Profile

**Table 1. Respondent Profile**

No	Profile	Frequency (People)	Ratio (%)
1	<b>Gender</b>		
	Man	43	43
	Woman	57	57
	<b>Amount</b>	<b>100</b>	<b>100</b>
2	<b>Age Group (Years)</b>		
	< 25	10	10
	25-35	24	24
	36-45	24	24
	> 45	42	42
	<b>Amount</b>	<b>100</b>	<b>100</b>
3	<b>Respondent's Occupation</b>		
	Students	12	12
	Self-Employed	38	38
	Civil Servants	7	7
	Private Employees	11	11
	Housewives	32	32
	<b>Amount</b>	<b>100</b>	<b>100</b>

Source: Questionnaire data processing results (2025).

### Uji Validitas Data

The degree of freedom (df) is  $n-k$ , where  $n$  is the number of samples and  $k$  is the number of constructs. In this study, the df can be calculated as  $100 - 2 = 98$ . With an alpha of 0.05, the r table is 0.1654. If the calculated r (for each question item, as seen in the corrected item statement total correction column) is greater than the r table and the r value is positive, then the question item is considered valid. Validity testing in this study was performed using the computer program SPSS version 30. The calculation yielded the following results:

**Table 2. Validity Test Results**

Variable	Indicator	r count	r table	Information
X1	X1.1	0,749	0,165	Valid
	X1.2	0,610	0,165	Valid
	X1.3	0,689	0,165	Valid
	X1.4	0,797	0,165	Valid
	X1.5	0,247	0,165	Valid
	X1.6	0,199	0,165	Valid
X2	X2.1	0,702	0,165	Valid
	X2.2	0,881	0,165	Valid

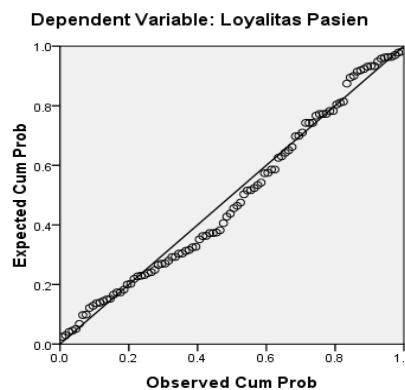
Variable	Indicator	r count	r table	Information
Y1	X2.3	0,511	0,165	Valid
	Y1.1	0,802	0,165	Valid
	Y1.2	0,882	0,165	Valid
Y2	Y1.3	0,809	0,165	Valid
	Y2.1	0,860	0,165	Valid
	Y2.2	0,915	0,165	Valid
	Y2.3	0,887	0,165	Valid

Source: SPSS 25.0 for windows output (2025)

Based on Table 2 which presents the results of the validity and reliability tests on 15 respondents, it can be interpreted that all research instruments have met the testing requirements and are declared suitable for use in primary data collection. Based on the Pearson Product Moment correlation technique with 15 trial respondents, the degree of freedom used is  $df = n - 2$ , which is 13. At a significance level of 5 percent ( $\alpha = 0.05$ ), the r-table value obtained is 0.514. where a statement item is declared valid if the r-count value is greater than the r-table value ( $r\text{-count} > r\text{-table}$ ), which indicates a significant relationship between the item score and the total score of the variable. Meanwhile, the results of the reliability test are interpreted based on the Cronbach's Alpha value  $> 0.6$ , to assess the level of internal consistency of the instrument used.

### Results of Classical Assumption Tests

Based on the results of the classical assumption tests, it can be concluded that the regression model in this study satisfies all the required analytical assumptions. The normality test indicates that the residuals are normally distributed, as evidenced by the pattern of points in the Normal Probability Plot that follow and closely align with the diagonal line, as shown in Figure 1. This condition confirms that the normality assumption is fulfilled, indicating that the data are suitable for further regression analysis.



Source: SPSS 21.0 for Windows Output

**Figure 1. Normality Test Results (Normal Probability Plot) P-Plot of Regression Standardized Residual**

Furthermore, the results of the multicollinearity test indicate that there is no strong correlation among the independent variables. This is evidenced by the Variance Inflation Factor (VIF) values of all variables being below the critical threshold of 10, along with tolerance values approaching 1 (Table 3). Therefore, it can be concluded that the regression model is free from multicollinearity issues.

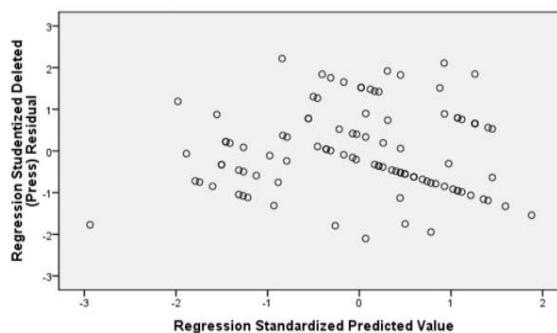
**Table 3. Multicollinearity Test Results**

Model	Coefficients <sup>a</sup>	
		Collinearity Statistics

	Tolerance	VIF
(Constant)		
Islamic Service Quality	0.672	1.488
Spiritual Services	0.683	1.464
Complete Satisfaction	0.709	1.411
a. Dependent Variable: Patient Loyalty		

Source: SPSS 21.0 for Windows Output

Furthermore, the results of the heteroscedasticity test (Figure 2) show that the distribution of points in the scatterplot is random, does not form a specific pattern, and is dispersed both above and below the zero value on the Y-axis. This indicates that the residual variance is constant, suggesting that the regression model does not suffer from heteroscedasticity



Source: SPSS 21.0 for Windows Output

**Figure 2. Heteroscedasticity Test Results (Scatterplot)**

Finally, the results of the autocorrelation test using the Durbin–Watson statistic yield a value of 1.852 (Table 4), which falls between the upper bound ( $d_U$ ) and the value of  $4 - d_U$ . This result indicates the absence of autocorrelation in the regression model. With all classical assumption tests satisfactorily fulfilled, the regression model employed in this study is deemed appropriate and capable of producing unbiased and efficient estimates for examining the effects of Islamic service quality and spiritual services on kaffah satisfaction and patient loyalty.

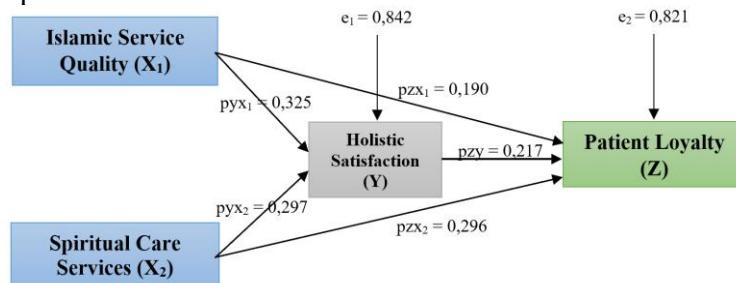
**Table 4. Autocorrelation Test Results**

Model Summary <sup>b</sup>			
Model	R	R Square	Durbin Watson
1	.570 <sup>a</sup>	0.325	1.852

Source: SPSS 21.0 for Windows Output

## Path Analysis Results

To examine the effects of Discipline Style (X1) and Leadership Style (X2) on motivation (Y) as an intervening variable and their subsequent impact on employee performance (Z), the results of the questionnaire data were analyzed using SPSS version 22. Based on this analysis, the path analysis equations can be formulated as follows:



**Figure 3. Path Coefficient Analysis of Islamic Service Quality and Spiritual Guidance on Loyalty Mediated by Kaffah Satisfaction**

The path analysis in this study consists of two sub-structures, each designed to address the respective research hypotheses. The results of the path analysis for each sub-structure are presented and discussed sequentially as follows.

1. The results of the path analysis indicate that Islamic service quality ( $X_1$ ) has a positive effect on holistic satisfaction (Y), with a path coefficient of 0.325. This coefficient suggests that improvements in Islamic service quality—encompassing professionalism, empathy, and adherence to Islamic values—are capable of enhancing patients' overall satisfaction across physical, psychological, and spiritual dimensions. These findings underscore that value-based religious services are not merely perceived as technical medical care, but also as a form of worship and holistic concern, which significantly contributes to patients' inner satisfaction.
2. Spiritual services ( $X_2$ ) were also found to have a positive effect on holistic satisfaction (Y), with a path coefficient of 0.297. This finding indicates that the more optimally spiritual services are implemented—such as religious guidance, spiritual counseling, and psycho-religious support—the higher the level of holistic satisfaction experienced by patients. Spiritual services play a crucial role in fostering inner peace, gratitude, and acceptance of illness, thereby strengthening kaffah satisfaction that goes beyond conventional service satisfaction.
3. The direct effect of Islamic service quality ( $X_1$ ) on patient loyalty (Z) is reflected by a path coefficient of 0.190. This value indicates that Islamic service quality is able to directly promote patient loyalty, although its effect is relatively smaller compared to other variables in the model. This finding suggests that high-quality Islamic services can foster patients' commitment to continue utilizing hospital services, particularly among patients with a strong religious value orientation. The resulting loyalty tends to be value-based rather than purely transactional.
4. The results of the path analysis reveal that spiritual services ( $X_2$ ) have a relatively strong direct effect on patient loyalty (Z), with a path coefficient of 0.296. This finding indicates that spiritual services are a key factor in shaping patient loyalty. Patients who experience inner peace, spiritual strength, and religious care during their treatment tend to develop a stronger emotional attachment to the hospital, thereby increasing their likelihood of returning for future services and recommending the hospital to others. Holistic satisfaction (Y) was found to have a positive effect on patient loyalty (Z), with a path coefficient of 0.217.
5. These results confirm that holistic satisfaction—encompassing physical, psychological, and spiritual dimensions—plays a crucial role in shaping patients' long-term loyalty. When patients experience kaffah satisfaction, the resulting loyalty is not solely grounded in the quality of medical services, but also in the spiritual and emotional experiences encountered throughout the care process.

Furthermore, the results of the direct, indirect (mediated), and total effect calculations are summarized in the following table:

**Tabel 5. Path Analysis Results**

Antar Variabel	Direct	Indirect	Total
$X_1 \rightarrow Y_2$	0,190	-	
$X_2 \rightarrow Y_2$	0,296	-	
$X_1 \rightarrow Y_1 \rightarrow Y_2$	-	$0,325 \times 0,217 = 0,071$	$0,190 + 0,071 = 0,261$
$X_2 \rightarrow Y_1 \rightarrow Y_2$	-	$0,297 \times 0,217 = 0,064$	$0,296 + 0,064 = 0,360$

Source: Data Analysis (2025)

- a. The direct effect of Islamic Service Quality on patient loyalty is 0.190, which is greater than the indirect effect of 0.071. Therefore, enhancing patient loyalty is more effectively achieved through the direct pathway, while kaffah satisfaction does not function as an intervening variable in this relationship.
- b. The direct effect of spiritual services on patient loyalty is 0.296, which is greater than the indirect effect of 0.064. Accordingly, improving patient loyalty is more effectively achieved through the direct pathway, while kaffah satisfaction does not serve as an intervening variable in this relationship.

### Hypothesis Testing Results

Based on the results of the three analytical structures conducted, the findings are summarized in the table below.

**Table 6. Summary of Hypothesis Testing Results**

Hypothesis	t	Sig.	Conclusion
Islamic Service Quality → Complete Satisfaction	3,918	0,001	Supported
Spiritual Care Services → Complete Satisfaction	3,007	0,003	Supported
Islamic Service Quality → Loyalty	1,861	0,066	Not Supported
Spiritual Care Services → Loyalty	2,914	0,004	Supported
Complete Satisfaction → Loyalty	2,178	0,032	Supported

Source: SPSS 21.0 for windows output

Based on the summary of the hypothesis testing results presented in Table 6 above, the findings can be interpreted as follows.

1. The results of the hypothesis testing indicate that Islamic Service Quality has a positive and significant effect on Kaffah Satisfaction. This is evidenced by a *t*-value of 3.918 with a significance level of 0.001, which is lower than  $\alpha = 0.05$ . Therefore, the first hypothesis is accepted. These findings suggest that the better the Islamic service quality implemented by the hospital—encompassing professionalism, empathy, and adherence to Islamic values—the higher the level of kaffah satisfaction experienced by patients. The resulting satisfaction is not limited to physical aspects but also includes psychological and spiritual dimensions.
2. The results of the hypothesis testing indicate that Spiritual Care Services have a positive and significant effect on Kaffah Satisfaction, with a *t*-value of 3.007 and a significance level of 0.003 ( $< 0.05$ ). Therefore, the second hypothesis is accepted. These results demonstrate that spiritual support provided to patients—such as religious guidance and spiritual accompaniment—plays a crucial role in shaping kaffah satisfaction. Spiritual services are able to foster inner peace and enhance patients' acceptance of their illness, thereby strengthening overall satisfaction.
3. Based on the results of the hypothesis testing, Islamic Service Quality does not have a significant effect on Patient Loyalty. This is indicated by a *t*-value of 1.861 with a significance level of 0.066, which is greater than  $\alpha = 0.05$ ; therefore, the third hypothesis is rejected. This finding suggests that the Islamic service quality perceived by patients is not sufficient, by itself, to directly foster loyalty. Patient loyalty appears to be influenced not only by Islamic service quality but also by other factors, such as emotional experiences, spiritual attachment, and holistic satisfaction throughout the care process.
4. The results of the hypothesis testing indicate that Spiritual Care Services have a positive and significant effect on Patient Loyalty, with a *t*-value of 2.914 and a significance level of 0.004 ( $< 0.05$ ). Therefore, the fourth hypothesis is accepted. This finding demonstrates that spiritual services play a strategic role in building patient loyalty. Patients who experience

spiritual attention and religious support during their treatment tend to develop a stronger emotional bond with the hospital, thereby increasing their likelihood of returning for future services and recommending the hospital to others.

5. The results of the hypothesis testing indicate that Kaffah Satisfaction has a positive and significant effect on Patient Loyalty, as evidenced by a *t*-value of 2.178 with a significance level of 0.032 (< 0.05). Therefore, the fifth hypothesis is accepted. This finding confirms that kaffah satisfaction—encompassing physical, psychological, and spiritual dimensions—is a crucial factor in shaping patient loyalty. When patients experience comprehensive satisfaction, the resulting loyalty becomes stronger and more sustainable.

## Discussion

### 1. Islamic Service Quality Has a Positive and Significant Effect on Kaffah Satisfaction

The results of the above study indicate that Islamic Service Quality has a positive and significant effect on Kaffah Satisfaction. This is further supported by a calculated *t*-value of 3.283, which is greater than the *t*-table value of 1.660, with a significance level of 0.001 (< 0.05). From this study, it can also be concluded that Jabal Rahmah Hospital provides high-quality Islamic services to inpatient patients. This serves as evidence that Jabal Rahmah Hospital recognizes the benefits and importance of Islamic service quality; the better the services provided by the hospital, the greater the increase in Kaffah satisfaction among inpatients. The essence of Islamic Service Quality is fundamentally aligned with the teachings of the Prophet Muhammad (peace be upon him):

لَا يُؤْمِنُ أَحَدُكُمْ حَتَّىٰ يُحِبَّ لَأَخِيهِ مَا يُحِبُّ لِنَفْسِهِ

*“A person’s faith is not complete until he loves his brother as he loves himself.”. (HR. Bukhori)*

Based on this hadith, the Prophet deliberately links the aspect of faith to the way one treats others. Treating a fellow believer is equivalent to treating oneself. Consequently, the value of faith manifests itself through actions, particularly in the form of services that align with Islamic values. This allows the concept of worship to be genuinely practiced at Jabal Rahmah Hospital.

Such services can achieve satisfaction that addresses not only physical (zhohir) needs but also spiritual (bathiniyyah) aspects. Islamic services in a hospital setting encompass two main aspects: medical services and specialized services. Medical services include all efforts aimed at preventing illness, improving and maintaining health, and rehabilitating patients. These services are carried out using facilities, procedures, regulations, and ethics that comply with Islamic principles. They are provided by healthcare personnel—including doctors, nursing staff, and non-nursing medical personnel—who perform their duties based on the Islamic ethical values of Al-Karimah, as taught by Allah through the Prophet Muhammad (peace be upon him). Specialized services for patients are conducted with a holistic approach.

This approach considers patients as a whole, addressing their biological, psychological, social, and spiritual dimensions. Patients’ biological needs are treated, psychological needs are supported, social aspects are attended to, and spiritual/religious aspects are nurtured and guided.

These results are consistent with the studies conducted by Puspa Yudha Utama (2013) and Rosmawati (2012), both of which concluded that there is a positive and significant effect of service quality on patient satisfaction.

### 2. Spiritual Services Have a Positive and Significant Effect on Kaffah Satisfaction

Based on the results above, with a calculated t-value of 3.007 greater than the t-table value of 1.660, and a significance level of 0.003 ( $< 0.05$ ), it is evident that Jabal Rahmah Hospital provides effective Spiritual Services to its inpatient patients. This finding is further supported by interviews with several inpatients. For instance, Mr. Mohadi (60 years old, Medical Record No. 01-22-13-35, Pelepat, Bungo) stated that he experienced a sense of inner peace after receiving Spiritual Services. Similarly, another patient, Mr. Suharno (54 years old, Medical Record No. 01-23-14-23, Bungo), who was preparing for surgery at the time, highly appreciated the Spiritual Services at Jabal Rahmah Hospital. He reported that the services provided him with a sense of spiritual strength and readiness to undergo the operation.

These Spiritual Services are fundamentally based on the Word of Allah (SWT) in An-Nahl 16:125:

ادْعُ إِلَى سَبِيلِ رَبِّكَ بِالْحِكْمَةِ وَالْمُوَعِظَةِ الْحَسَنَةِ وَجَادِهِمْ بِالَّتِي هِيَ أَحْسَنُ إِنَّ رَبَّكَ هُوَ أَعْلَمُ مِنْ ضَلَالٍ عَنْ سَبِيلِهِ  
وَهُوَ أَعْلَمُ بِالْمُهْتَدِينَ

*“Invite (people) to the way of your Lord with wisdom and good instruction, and argue with them in a way that is best. Indeed, your Lord knows best who has strayed from His path, and He knows best who is guided.”*

The above verse explains the obligation of da’wah, as indicated by the command “ادْعُ” (Invite). Da’wah is the responsibility of every Muslim, not only limited to religious scholars or teachers; every Muslim has an obligation to carry out da’wah because it is part of *amar ma’ruf nahi munkar* (enjoining good and forbidding wrong). Patients who are ill and lack a strong foundation of faith tend to experience hopelessness. This condition must be addressed by Jabal Rahmah Hospital, as fellow Muslims, by providing guidance on the Islamic perspective of illness and reminding patients of a Muslim’s religious duties, such as performing prayers. In this way, patients’ hope can be rebuilt based on solid Islamic principles, enabling them to cultivate gratitude and inner peace. These attitudes prepare patients spiritually to face all events in their lives. The ultimate goal of Spiritual Services is to help patients develop positive thinking toward Allah (SWT). Therefore, at Jabal Rahmah Hospital, Spiritual Services are also utilized as a medium for da’wah

### **3. Islamic Service Quality Has a Positive and Significant Effect on Patient Loyalty**

With a calculated t-value of 1.861, which is greater than the t-table value of 1.660, and a significance level of 0.06 ( $> 0.05$ ), the third hypothesis is accepted. This indicates that Islamic Service Quality has a positive and significant effect on Patient Loyalty. In this study, loyalty is measured using indicators strongly rooted in Islamic values, namely *istiqomah*. In the Islamic context, the concept of *istiqomah* relates to the quality of a Muslim’s faith. Thus, *istiqomah* in this study is accompanied by an ideological strength based on the principles of faith. Therefore, fostering such attitudes must begin with services provided with an Islamic nuance.

These results are consistent with the study conducted by Rachmad Hidayat (2015), which concluded that service quality has a positive effect on consumer loyalty.

### **4. Spiritual Services Have a Positive and Significant Effect on Patient Loyalty**

With a calculated t-value of 2.914, which is greater than the t-table value of 1.660, and a significance level of 0.032 ( $< 0.05$ ), it is evident that the Spiritual Services variable has a positive effect on Patient Loyalty. Effective Spiritual Services at Jabal Rahmah Hospital can enhance patient loyalty, and this aspect is expected to be further improved, considering that patients experience inner peace while being bedridden due to illness. This conclusion is also reflected in the experience of one of the respondents, Mrs. Sumarni from Tanah Tumbuh

(Medical Record No. 01-33-33-16). When asked about the Spiritual Services, she stated that the services provided a sense of “*ayem*” (peaceful and calm) in her heart, and she hopes that such services continue to be offered by Jabal Rahmah Hospital. Spiritual Services represent a manifestation of the specialized care provided by Jabal Rahmah Hospital to support patient recovery. The concept of recovery, or *afiat* in religious literature, differs from the concept of health. Health is defined as the overall well-being of the body and its parts (free from illness), whereas recovery (*afiat*) refers to Allah’s protection of His servants from all forms of calamity and deception. Such protection can only be fully attained by those who follow His commands. This aspect becomes a distinctive feature of Jabal Rahmah Hospital, which bases its services on Islamic values as its primary foundation.

These results are consistent with the study conducted by Fitriyah (2015) at Jabal Rahmah Hospital, which concluded that guidance through Spiritual Services has a positive effect on patient loyalty.

## 5. Kaffah Satisfaction Has a Positive and Significant Effect on Patient Loyalty

With a calculated t-value of 2.178, which is greater than the t-table value of 1.660, and a significance level of 0.004 ( $< 0.05$ ), there is evidence of a positive effect. This indicates that the satisfaction provided by Jabal Rahmah Hospital enhances patient loyalty. Therefore, this aspect needs careful attention to ensure that Kaffah satisfaction can be achieved. Many other variables also influence patient satisfaction; in this study, only Islamic Service Quality and Spiritual Services explain 27.6% of the variance. The remaining 72.4% is not addressed in this study, leaving an opportunity for future researchers to identify additional variables that affect Kaffah satisfaction.

These results are consistent with the study conducted by Setyo Budiarto (2012), which concluded that consumer satisfaction has a positive effect on consumer loyalty. The higher the consumer satisfaction, the higher the consumer loyalty, and conversely, the lower the satisfaction, the lower the loyalty.

Based on the scores obtained from the patient survey, it is evident that patients’ responses to the Islamic spiritual guidance provided by the counselors at Jabal Rahmah Hospital are highly positive. This guidance has been able to bring about religious changes in patients, supporting the process of physical recovery. Furthermore, it provides patients with understanding and guidance, enabling them to practice the teachings of Islam as conveyed by the hospital’s spiritual counselors.

With patients responding positively, it is expected that the spiritual counselors can provide high-quality services and select appropriate methods, ensuring that the spiritual guidance activities run smoothly and achieve optimal results. Consequently, patients who have received the messages conveyed during the guidance are expected to be able to implement them in their daily lives, reflected in their relationships with others as well as with their Creator.

## CONCLUSION

Based on the results of this study, the following conclusions are presented:

1. Islamic Service Quality has a positive and significant effect on Kaffah Satisfaction. This result is supported by the *t*-test, which shows that Islamic Service Quality has a significance probability value of 0.001, which is lower than the significance level of 0.05 ( $0.001 < 0.05$ ). Therefore,  $H_0$  is rejected and  $H_a$  is accepted, indicating that better Islamic Service Quality leads to higher levels of kaffah satisfaction among inpatient patients at Jabal Rahmah Hospital.
2. Spiritual Care Services have a significant effect on Kaffah Satisfaction. This is supported by the *t*-test, which shows that Spiritual Care Services have a probability value of 0.003, lower than the significance level of 0.05 ( $0.003 < 0.05$ ). Therefore,  $H_0$  is rejected and  $H_a$  is

accepted, indicating that the better the spiritual care provided, the higher the level of patient satisfaction.

3. Islamic Service Quality has a positive but not significant effect on Patient Loyalty. This means that improvements in Islamic Service Quality do not necessarily lead to an increase in patient loyalty. The *t*-test results show that Islamic Service Quality has a probability value of 0.066, which is greater than the significance level of 0.05 ( $0.066 > 0.05$ ). Therefore,  $H_0$  is accepted and  $H_a$  is rejected, indicating that Islamic Service Quality does not have a significant effect on patient loyalty at Jabal Rahmah Hospital.
4. Spiritual Care Services have a positive and significant effect on Patient Loyalty. The *t*-test results show that Spiritual Care Services have a probability value of 0.032, which is lower than the significance level of 0.05 ( $0.032 < 0.05$ ). Therefore,  $H_0$  is rejected and  $H_a$  is accepted. This demonstrates that spiritual care can foster loyalty among inpatient patients, as these services are primarily spiritual in nature and ensure that the hospital's attention is genuinely felt by patients. Consequently, improving spiritual care services will lead to an increase in patient loyalty.
5. Kaffah Satisfaction also has a positive and significant effect on Patient Loyalty. The *t*-test results show that Kaffah Satisfaction has a probability value of 0.004, which is lower than the significance level of 0.05 ( $0.004 < 0.05$ ). Therefore,  $H_0$  is rejected and  $H_a$  is accepted. This finding can serve as a strategy for Jabal Rahmah Hospital to enhance patient loyalty by fostering kaffah satisfaction among inpatient patients. Kaffah satisfaction encompasses not only worldly dimensions but also spiritual dimensions, indicating that as kaffah satisfaction among inpatients increases, patient loyalty will also improve.

Based on the findings, discussion, and conclusions of this study, the following recommendations are suggested:

1. It is recommended that hospital management enhance the quality of Islamic services by focusing on responsiveness and empathy, so that patients at Jabal Rahmah Hospital can develop a sense of gratitude to Allah. In addition, spiritual care services have a positive and significant effect on patient outcomes; therefore, these services should be further improved, particularly in the area of spiritual counseling, by increasing the engagement and proactivity of BPI staff.
2. For future research, it is recommended to expand the scope of the study beyond Jabal Rahmah Hospital. Similar studies should also be conducted in other hospitals that implement Islamic service concepts, so that the findings can further enrich knowledge regarding the importance of providing spiritual care services.
3. Furthermore, it is essential to emphasize that in an Islamic business, particularly in Islamic hospitals, the ideal of products or services must be based on Sharia principles and continuously maintained and improved. This commitment is what distinguishes Islamic hospitals from conventional or general hospitals.

This study has several limitations. Not all patients were allowed to be included as research respondents due to the policies of Jabal Rahmah Hospital, specifically patients in VIP and VVIP rooms. In addition, the study was conducted only at Jabal Rahmah Hospital. Therefore, it is recommended that future research encompass a broader range of patients. Moreover, the research permit provided by the hospital's LITBANG division was not fully compliant with administrative procedures. This was evidenced by one of the ward heads refusing to allow the distribution of questionnaires, claiming that the permit letter was not addressed to the relevant ward head.

In this study, patient loyalty is explained by Islamic Service Quality, spiritual care services, and kaffah satisfaction, with a residual value of 30.4%. This means that approximately 69.6% of other factors may also influence patient loyalty but were not examined in this study.

Therefore, it is strongly recommended that future research explore additional variables that may affect patient loyalty.

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