



Implementation and Impact of Hospital Bylaws in Indonesian Healthcare: A Scoping Review

Zulfa Nadia Danasti ^{1*}, Qurratul Aini ¹

Abstract

Background: Hospital bylaws are essential regulatory frameworks governing hospital operations and defining roles among medical staff, administrators, and owners. Effective implementation ensures compliance with legal standards and enhances patient safety. **Method:** This scoping review analyzed literature from 2003 to 2023 on hospital bylaw implementation in Indonesian hospitals. Data were gathered from PubMed, ScienceDirect, and Google Scholar using systematic searches and evaluated using Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. **Results:** Out of 2,492 articles screened, 11 met inclusion criteria after quality assessment. Findings highlighted factors influencing bylaw implementation, including owner knowledge gaps, directorial roles in clinical management, and staff adherence to patient safety protocols. Challenges such as workload impact on safety practices were also noted. **Conclusion:** Effective hospital bylaw implementation in Indonesia hinges on collaborative efforts among stakeholders. Enhancing owner awareness, optimizing directorial roles, and fostering staff compliance are critical. Continuous evaluation and adaptation are necessary for sustained improvements in hospital governance and patient care.

Significance | This review identifies factors influencing bylaw implementation, enhancing hospital governance and patient safety in Indonesian healthcare settings.

*Correspondence. Zulfa Nadia Danasti, University of Muhammadiyah Yogyakarta, Kasihan, Bantul, Yogyakarta Special Province, 55183, Indonesia. E-mail: zulfanadia2@gmail.com

Editor Md Shamsuddin Sultan Khan, And accepted by the Editorial Board May 26, 2024 (received for review Apr 03, 2024)

Keywords: Hospital Bylaws, Healthcare Governance, Indonesia, Patient Safety, Regulatory Compliance

1. Introduction

Hospital bylaws encompass a wide range of regulations and policies governing various aspects of hospital operations, including legislative mandates, procedural rules, and uniform standards. Narrowly defined, hospital bylaws specifically address the relationships and responsibilities between medical staff, hospital administrators, and hospital owners (Andriani, 2019). These bylaws, also referred to as hospital statutes or management regulations, are crucial for guiding the overall operations, setting objectives, and ensuring the effective functioning of the hospital (Aseweh Abor et al., 2008).

The legal implications of hospital bylaws are multifaceted. Firstly, hospitals are mandated to establish comprehensive regulations. Secondly, these bylaws delineate the duties, functions, and authority of hospital owners, managers, and medical personnel. Thirdly, they underscore the hospital's commitment to good corporate and clinical governance (Riyana Dody Setiawan et al., n.d.). Effective hospital bylaws are also designed to provide legal protection for healthcare workers through mechanisms that address potential legal issues and enhance patient safety (Leana et al., 2017). Hospital bylaws function as binding agreements between the hospital and its medical staff, ensuring that operations are conducted under a shared understanding and adherence to agreed-upon rules (Paterick & Paterick, 2019). These regulations must be actively maintained and enforced to ensure compliance and the effective functioning of hospital services. Enforcement of hospital bylaws is akin to the implementation of any statutory regulation, requiring

Author Affiliation.

¹ Universitas Muhammadiyah Yogyakarta, Bantul, Special Region of Yogyakarta, 55183, Indonesia.

Please cite this article.

Zulfa Nadia Danasti, Qurratul Aini (2024). Implementation and Impact of Hospital Bylaws in Indonesian Healthcare: A Scoping Review, *Journal of Angiotherapy*, 8(5), 1-7, 9696

2207-8843/© 2024 ANGIOTHERAPY, a publication of Eman Research, USA. This is an open access article under the CC BY-NC-ND license. (<http://creativecommons.org/licenses/by-nc-nd/4.0/>). (<https://publishing.emanresearch.org>).

diligent application and oversight (Ishaq, 2008).

The development and enforcement of hospital bylaws must be tailored to the specific context and needs of the hospital, facilitating appropriate medical practice and ethical conduct (Litvak et al., 2020). However, non-compliance with these regulations can lead to significant issues, such as compromised hospital reputation and decreased quality of care, as evidenced by a study in Saudi Arabia (Albrithen & Yalli, 2013).

To address gaps in the understanding and implementation of hospital regulations, this article reviews literature published between 2002 and 2023 on the enforcement and impact of hospital bylaws in Indonesia. This period was selected because the Indonesian Ministry of Health formalized internal hospital regulations with the issuance of Decree No. 722/MENKES/SK/VI/2002. The review aims to shed light on the effectiveness of these bylaws in improving hospital governance and healthcare outcomes in Indonesia.

2. Material and Methods

This study employed a scoping review design to identify factors influencing the implementation of hospital regulations in Indonesia. Data were collected through a systematic search utilizing two methods: systematic database searches and systematic manual searches. The databases consulted included Science Direct, PubMed, and Google Scholar.

2.1 Inclusion and Exclusion Criteria:

The inclusion criteria for this study were research articles related to the implementation of hospital bylaws in Indonesia, available as free full-text articles, written in English or Indonesian, and focused on hospitals in Indonesia. Additionally, the articles needed to be published within the last 20 years (2003-2023). The exclusion criteria eliminated articles that employed systematic review methods or reviews and those that were not available for full access (i.e., lacking full text). The selection and organization of articles followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) protocol.

The selection process followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) protocol. Articles were screened according to the inclusion and exclusion criteria, and were evaluated based on the review topic, objectives, and review questions as outlined by Tricco et al. (2018).

2.2 Quality Assessment Method:

The quality of the articles was assessed using frequency counting and content analysis, based on the methods of Arksey and O'Malley (2005) and later adapted by the Joanna Briggs Institute. Critical appraisal tools focused on two main aspects: the methodology of the source articles and the presentation of research findings and results (Glynn, 2006).

3. Results

Using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework, we identified 2,492 potentially relevant articles from three databases: PubMed, ScienceDirect, and Google Scholar. From these, 300 articles were initially reviewed, leading to a closer examination of 15 articles. Following quality assessment, two articles were excluded due to lack of legal affiliation with hospitals, two were incomplete, and one was a systematic review. Ultimately, 11 articles met the inclusion criteria and were included in the synthesis presented in Table 1 and Figure 1.

The results of the literature review indicate that the articles employed a variety of research instruments, including legal, qualitative, and quantitative methodologies. These articles utilized interviews, observations, documentation, and questionnaires to explore the factors influencing the implementation of hospital bylaws in Indonesia (Figure 2, Figure 3). Data collection was grounded in applicable regulations and laws, such as director regulations, resolutions, and technical details. Observations were derived from hospital settings, while interviews provided in-depth insights from owners, administrators, and physicians.

The analysis identified several key characteristics and factors influencing the implementation of hospital bylaws. Respondents included hospital owners, heads of health service departments, hospital directors, commission doctors, general practitioners, specialists, and other medical and auxiliary service representatives.

3.1 Factors in Implementation:

Owner Factor: In Lampung, hospital owners exhibited a lack of knowledge and understanding of hospital laws, viewing regulations primarily as tools for licensing and accreditation rather than conflict resolution or policy development.

Director Factor: Research in Central Java revealed varying levels of clinical management implementation, with 67% implementation of clinical management, 75% completion of clinical management structure, and 58% implementation of clinical management processes. The Medical Commission's tasks showed low implementation rates in medical audits and accreditation but higher rates in continuous professional development and support for medical professionalism.

Medical Staff: Studies on patient safety highlighted mixed results. While some nurses demonstrated good patient safety practices, others were less capable. High workloads, especially during night shifts, were noted as a challenge. At Ibnu Sina Hospital, patient safety policies were well-implemented, reflecting the hospital's commitment to patient safety.

3.2 Patient Safety and Hospital Policy Implementation:

The implementation of patient safety protocols is critical for hospital regulation adherence. Ensuring patient safety is an ongoing priority and requires systematic updates to hospital policies.

Effective patient safety measures are integral to improving overall safety outcomes. Factors influencing the application of patient safety include management and organizational levels, such as transformational leadership, resource allocation, and regular audits of personnel and processes. Efficiency in patient safety policies, including risk evaluation, incident reporting, and management, contributes to minimizing errors and improving patient care.

The implementation of hospital bylaws in Indonesia is influenced by the knowledge and attitudes of hospital owners, the administrative capabilities of directors, and the patient safety practices of medical staff. The ongoing commitment to patient safety is vital for enhancing the overall effectiveness of hospital regulations.

According to the synthesis of the reviewed articles, factors influencing the implementation of hospital bylaws in Indonesia include the knowledge and understanding of hospital owners, the involvement of directors, and the engagement of medical staff. A significant finding from Lampung highlighted that hospital owners often lacked the necessary knowledge and understanding of hospital regulations, viewing them primarily as tools for licensing and accreditation purposes rather than for conflict resolution or policy development.

Directors played a critical role in implementing clinical management and supporting medical professionalism. Research by Manajemen Pelayanan Kesehatan et al. (2014) indicated a moderate to high level of clinical management implementation, with varying degrees of completion and process adherence.

Medical staff, particularly nurses, had a significant impact on patient safety, which in turn affected the implementation of hospital regulations. Sumarni (2017) noted that no respondents rated the implementation of patient safety practices as very poor, and Retno Yunita et al. (2016) found that 50.8% of nurses performed well in ensuring patient safety, although 49.2% faced challenges. Darliana (2016) identified that nurses' knowledge of patient safety was generally sufficient, yet the implementation efforts were categorized as poor by 43.3% of respondents. Additionally, the study found no significant relationship between nursing staff workloads and their performance in implementing patient safety policies during different shifts at Hasanuddin University Hospital.

Overall, patient safety emerged as a crucial factor influencing the implementation of hospital regulations. Effective hospital policy implementation requires a comprehensive patient safety program, focusing on continuous updates and improvements. At Ibnu Sina Hospital, patient safety regulations were well-implemented, aligning with the hospital's vision to prioritize patient safety. This hospital demonstrated a structured approach to managing patient safety through a dedicated council responsible for overseeing the patient safety management system (Sumarni, 2017).

The literature review revealed that successful implementation of hospital bylaws involves multiple levels of management and organizational factors. Key elements include management's perception and commitment to patient safety, transformational leadership, resource availability, safety committee leadership, transparency, and regular personnel and process audits. Efficient patient safety policies contribute to improved safety outcomes, emphasizing the importance of comprehensive strategies in hospital regulation implementation (Satria et al., n.d.).

These findings underscore the multifaceted nature of hospital bylaw implementation, highlighting the interconnected roles of hospital owners, directors, and medical staff in ensuring effective and safe healthcare delivery in Indonesian hospitals.

4. Discussion

The implementation of hospital bylaws is a multifaceted process influenced by various stakeholders, including medical staff, hospital directors, and regulatory bodies. A crucial aspect of this process is the perception and role of medical staff, who often see themselves primarily as executors of policies rather than active participants in the development and long-term feasibility of hospital regulations (Murniati et al., 2016). Despite this perception, medical staff hold valuable insights into the practical aspects of implementing hospital orders, which can significantly impact patient safety outcomes and the overall effectiveness of hospital regulations.

Health personnel are required to communicate their opinions on medical practices to the hospital director via the chairman of the medical commission, in accordance with hospital regulations. The Medical Council plays a pivotal advisory role to the Director or Deputy Director of Medical Services concerning clinical services. This advisory function is critical as it does not impede any authority but ensures a balanced power dynamic among the involved authorities, thus fostering effective regulation (Muhammad Purnomo, 2010, Qurratul and Nur, 2024). A positive and collaborative relationship between medical staff and hospital management is fundamental for effectively expressing and addressing concerns related to hospital bylaws, which ultimately enhances patient safety (Zulham et al., 2022).

Patient safety implementation is a cornerstone of developing a robust patient safety program. Focusing on the practical aspects of patient safety implementation tends to yield better outcomes compared to merely having a patient safety program on paper (Sumarni, 2017). Building a culture of patient safety involves raising awareness about its importance, leading, and supporting staff in its implementation, which are critical steps outlined in PMK No. 1691 of 2011. The effective performance of patient safety measures directly correlates with the implementation of hospital bylaws, making it an essential component of healthcare management.

Table 1. Factors of Hospital Bylaws Implementation in each article

No	Meaning of cle	Factors of Hospital Bylaws Implementation
1	(Andriani , 2018)	Owner: Absence of Knowledge and awareness
2	(Murniati . 2016)	Juridical: The existence of Minister of Health Regulation No: 755/MENKES/PER/IV/2011
3	(Purnomo, 2016)	Owner: The existence of monitoring Director: The existence of supervision
4	(Sumarni , 2017)	Medical staff: The existence of patient safety
5	(Harati et al., 2014)	Director: Medical Committee Management
6	(Afandi et al., 2023)	Medical Staff: Guaranteed legal protection in accordance with Hospital Bylaws
7	(Leana & Bachtiar , 2017)	Juridical: The existence of Minister of Health Regulation No: 755/MENKES/PER/IV/2011
8	(Yunita et al., 2016)	Medical Staff: Knowledge & Commitment
9	(Yusuf, 2017)	Medical staff: The existence of patient safety
10	(Darliana , 2016)	Medical staff: The existence of patient safety
11	(Satria et al., 2013)	Medical staff: The existence of Performance

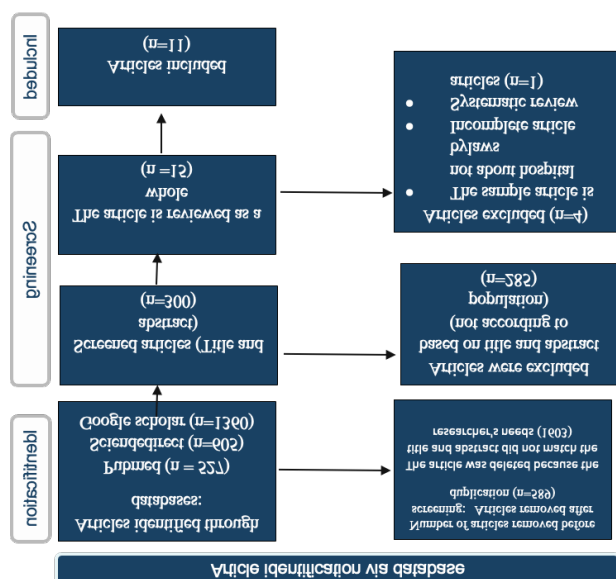


Figure 1. Diagram of Prism

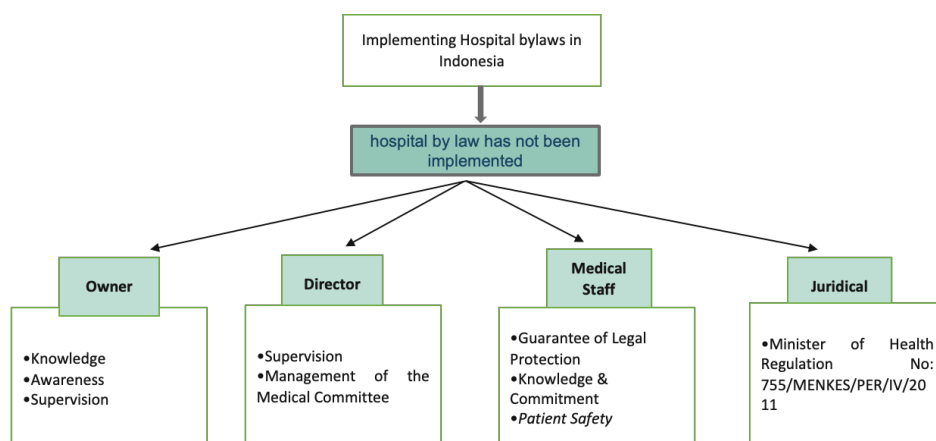


Figure 2. Mind map



Figure 3. Mind Map Distribution of Implementation of Hospital bylaws in Indonesia

Table 2. Question Implementation of Patient Safety

Researcher	Statement	Results
Sumarni , (2017)	Implementation Patient Safety: 1. Weak 2. Currently 3. Strong 4. Very strong	n = 11 (0.49%) n = 39 (15.69%) n = 224 (71.57%) n = 30 (12.25%)
Yusuf (2017)	Implementation Patient Safety: 1. Not enough 2. Good	n = 30 (49.2%) n = 31 (50.8%)
Darlina (2016)	Implementation Patient Safety by : 1. Knowledge Good 2. Knowledge Enough 3. Lack of Knowledge	Implementation Good n = 16 (23.9%) n = 7 (10.4%) n = 1 (35.8%) Poor Implementation n = 9 (13.4%) n = 22 (32.8%) n = 12 (17.9%)

Medical staff's communication with the hospital director through the medical committee president is vital for conveying insights about medical activities that fall within the scope of hospital regulations. The medical committee advises the medical director/assistant director on clinical services, ensuring that non-functioning or problematic areas are addressed. The distinction in roles, responsibilities, and authorities among the various institutions involved is crucial for the effectiveness of hospital regulations (Muhammad Purnomo, 2010).

The performance of patient safety implementation is the result of individual or collective efforts to make patient care safer. This includes risk assessment, identification and management of patient-related risks, incident reporting and analysis, learning from incidents, and implementing solutions to minimize risk and prevent injuries. Hospital patient safety is a comprehensive system aimed at integrating patient safety into nursing care performance. Factors affecting the performance of nurses in implementing patient safety are pivotal as they directly influence the overall safety outcomes. According to Gibson's performance theory, performance is influenced by individual, psychological, and organizational variables. Furthermore, Griffiths highlights that nursing staff workloads are significant contributors to health problems within hospitals (Satria et al., n.d.).

In enhancing patient safety through the implementation of hospital bylaws, it is crucial to consider the personality traits of medical staff. A positive and proactive personality can significantly enhance patient safety measures, leading to effective implementation of hospital regulations. Hospital management can utilize tools such as the DISC Personality Test to assess and place healthcare providers appropriately based on their strengths and weaknesses (Aini et al., 2023). This strategic placement can optimize staff performance and contribute to a safer healthcare environment.

5. Conclusion

In conclusion, the successful implementation of hospital bylaws and patient safety measures hinges on the collaborative efforts of medical staff, hospital directors, and regulatory bodies. Building a culture of patient safety, fostering positive relationships among stakeholders, and strategically managing human resources are key elements in achieving effective hospital regulation and ensuring high standards of patient care. The insights and active participation of medical staff are invaluable in this process, making their engagement and feedback crucial for continuous improvement and safety in healthcare settings.

To achieve effective implementation of hospital bylaws, it is imperative for medical staff to enhance their performance, thereby ensuring optimal patient safety. Concurrently, hospital management must actively oversee the implementation of patient

safety protocols and conduct regular re-evaluations to uphold standards.

This study provides valuable insights into the practices of medical staff in Indonesian hospitals, shedding light on the adherence to hospital bylaws. However, it is important to acknowledge that the findings are limited to the Indonesian context. Future research could benefit from exploring similar topics in diverse international settings to enrich our understanding and inform global best practices.

Exploring pertinent literature and engaging with ongoing research endeavors will be instrumental in shaping future studies on hospital management, particularly focusing on the effective implementation of hospital bylaws by medical staff. These efforts will contribute to advancing knowledge and addressing critical issues in healthcare governance and patient safety.

Author contributions

Z.N.D. designed the research proposals, conducted literature reviews, processed and visualized the data. Q.A. supervised and guided the interpretation of results and discussions, and finalized the research conclusions.

Acknowledgment

Author gratefully acknowledged Muhammadiyah University of Yogyakarta, Indonesia, and its Master of Hospital Administration program for their invaluable support and facilitation during the research process.

Competing financial interests

The authors have no conflict of interest.

References

- Aini, Q. (2020). Model of patient safety behavior influenced by culture and attitudes of safety patients: Case study of PKU Muhammadiyah Hospital in Bantul. *Enfermeria Clínica*, 30, 272–275. <https://doi.org/10.1016/j.enfcli.2020.06.062>
- Aini, Q., Dzakiyullah, N. R., & Abdulmir, M. (2023). The Use Of Dominance, Influence, Steadiness, And Compliance (Disc) Personality Test In The Assessment Of Nurses' Personal Characteristics. *Jurnal Keperawatan Soedirman*, 18(2), 111–115. <https://doi.org/10.20884/1.jks.2023.18.2.6592>
- Albrithen, A., & Yalli, N. (2013). A Discussion of Professional Issues of Hospital Social Workers in Saudi Arabia. *Social Work in Health Care*, 52(1), 20–42. <https://doi.org/10.1080/00981389.2012.728559>
- Andriani, Y. (2019). Pengaturan dan Implementasi Hospital Bylaws di Provinsi Lampung (Studi pada Rumah Sakit di Kabupaten Lampung Tengah). *Cepalo*, 2(1), 67. <https://doi.org/10.25041/cepalo.v2no1.1763>
- Aseweh Abor, P., Abekah-Nkrumah, G., & Abor, J. (2008). An examination of hospital governance in Ghana. *Leadership in Health Services*, 21(1), 47–60. <https://doi.org/10.1108/17511870810845905>

- Glynn, L. (2006). A critical appraisal tool for library and information research. *Library Hi Tech*, 24(3), 387–399. <https://doi.org/10.1108/07378830610692154>
- Hospital Bylaws, P., Amal Usaha Kesehatan Muhammadiyah, S. DI, Jawa Timur, A., Muhammadiyah, K., East Java, A., Natsir Nugroho, M., & Kusumaningrum, A. (n.d.). Upaya Meningkatkan Good Corporate Governance Dengan With Determination Of Hospital By Laws / Statute In Amal Usaha.
- Ishaq. (2008). *Dasar-dasar Ilmu Hukum*.
- Klein, D. G. (1987). Impact of Exclusive Contracts on Medical Staff Bylaws. *QRB - Quality Review Bulletin*, 13(6), 215–218. [https://doi.org/10.1016/S0097-5990\(16\)30136-1](https://doi.org/10.1016/S0097-5990(16)30136-1)
- Leana, A., Bachtiar, A., Sakit Ketergantungan Obat Jakarta, R., Lapangan Tembak No, J., Jakarta Timur, K., & Khusus Ibukota Jakarta, D. (2017). An Analysis of The Hospital Bylaws Policies to Protect Healthcare Workers Against Indictments of Adverse Events (Vol. 02, Issue 1).
- Litvak, A. I., Mykhalenko, V. L., & Fedorchenko, R. A. (2020). Medical staff morality. *Journal of Education, Health and Sport*, 10(5), 249–260. <https://doi.org/10.12775/jehs.2020.10.05.026>
- Manajemen Pelayanan Kesehatan, J., Hartati, K., Djasri, H., Utarini, A., Karanganyar, R., Tengah, J., Manajemen dan Pelayanan Kesehatan, P., Gajah Mada, U., Ilmu Kesehatan Masyarakat, B., & Ugm, F. (2014). Implementasi Tata Kelola Klinis Oleh Komite Medik Di Rumah Sakit Umum Daerah Di Provinsi Jawa Tengah Implementation Of Clinical Governance By The Medical Committee At District General Hospitals In Central Java Province. In *Jurnal Manajemen Pelayanan Kesehatan* (Vol. 17, Issue 1).
- Muhammad Purnomo. (2010). Efektifitas Dan Efisiensi Pelaksanaan Hospital Bylaws Rumah Sakit Umum Muhammadiyah Gubug Grobogan Tahun 2010.
- Murniati, L., Wahyati, E., Siswo, Y. D., Santoso, P., & Kesehatan, M. H. (2016). Implementasi Hospital Bylaws Di Rumah Sakit Santo Antonio Baturaja Setelah Berlakunya Permenkes Nomor: 755/Menkes/Per/lv/2011 Tentang Penyelenggaraan Komite Medik Di Rumah Sakit. In *SOEPRA Jurnal Hukum Kesehatan* (Vol. 2, Issue 2). <http://www.mutupelayanankesehatan.net/index.php/publikasi/artikel/9-publikasi/184>
- Paterick, Z. R., & Paterick, T. E. (2019). Peer Review – Legal and Ethical Issues Faced by Medical Staff: The Mandate for Physician Leadership. *Hospital Practices and Research*, 4(3), 76–79. <https://doi.org/10.15171/hpr.2019.15>
- Qurratul Aini, and Nur Rachman Dzakiyullah (2024). Leadership Styles in healthcare settings for Hospital Management and Employee Engagement, *Journal of Angiotherapy*, 8(5), 1-7, 9697
- Retno Yunita, A., Sriatmi, A., Yunila Fatmasari Bagian Administrasi dan Kebijakan Kesehatan, E., & Kesehatan Masyarakat, F. (2016). Analisis Faktor-Faktor Kebijakan Dalam Implementasi Program Keselamatan Dan Kesehatan Kerja Rumah Sakit (K3rs) Di Instalasi Gawat Darurat Rumah Sakit Umum Daerah Kota Semarang (Vol. 4, Issue 2). <http://ejournal-s1.undip.ac.id/index.php/jkmTelp/Fax>:
- Riyana Dody Setiawan, L., Galang Asmara, M., Chrisdianto Eko Purnomo, dan, Majapahit Nomor, J., & Tenggara Barat, N. (n.d.). Hospital Bylaws: Implikasi Penerapannya.
- Satria, W., Sidin, A. I., Noor, N. B., Manajemen, A., Sakit, R., Masyarakat, K., & Manajemen, B. (n.d.). Hubungan Beban Kerja Dengan Kinerja Perawat Dalam Mengimplementasikan Patient Safety Di Rumah Sakit Universitas Hasanuddin Tahun 2013 Relation Of Work Load With Nurse Performance In Implementation Of Patient Safety Inpatient In Hasanuddin University Hospital 2013.
- Sultan, A. A., & Noor, S. M. (2017). Absorptive capacity, civil conflict and e-commerce adoption among Iraqi firms. *Advanced Science Letters*, 23(8), 7992-7995.
- Sultan, A. A., Alfaiza, S. A., & Riyadh, H. A. (2022). Impact of mass collaboration on knowledge sharing process using mediating role of innovation capability. *International journal of organizational analysis*, 30(5), 1085-1099.
- Sultan, A. A., Hassan, M. G., & Noor, S. M. (2017). E-Commerce Adoption Among Iraqi Companies: Does Context Matters? *Qalaai Zanist Journal*, 2(4), 339-348.
- Sultan, A. A., Noor, S. M., & Nasirun, N. (2018). Technological factors and e-commerce adoption among small medium enterprises in Kurdistan, Iraq. *Int. J. Eng. Technol*, 7(3.5), 98-101.
- Sumarni, S. (2017). Analisis Implementasi Patient Safety Terkait Peningkatan Mutu Pelayanan Kesehatan di Rumah Sakit. *Jurnal Ners Dan Kebidanan Indonesia*, 5(2), 91. [https://doi.org/10.21927/jnki.2017.5\(2\).91-99](https://doi.org/10.21927/jnki.2017.5(2).91-99).
- Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K. K., Colquhoun, H., Levac, D., Moher, D., Peters, M. D. J., Horsley, T., Weeks, L., Hempel, S., Akl, E. A., Chang, C., McGowan, J., Stewart, L., Hartling, L., Aldcroft, A., Wilson, M. G., Garritty, C., ... Straus, S. E. (2018). PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. *Annals of Internal Medicine*, 169(7), 467–473. <https://doi.org/10.7326/M18-0850>
- Zulham, Z., Aini, Q., Mehmood, N., Sharma, S., Iswanto, A. H., Wekke, I. S., Zainal, A. G., Panova, E. P., & Fedorova, N. (2022). Analysing the relationship between ethical leadership and the voice of Malaysian Muslim employees. *HTS Theologiese Studies / Theological Studies*, 78(4). <https://doi.org/10.4102/hts.v78i4.7340>