

## MODELING TRANSFORMATIONAL LEADERSHIP AND PATIENT SAFETY

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<https://doi.org/10.5281/zenodo.20287427>

### Abstract

**Aim/purpose:** Moving health care upstream is founded on transformational leadership lest providing medicine only is not the solution to all patient problems. This upstream approach to health occurs through motivating and guiding people involved in taking care of patient's health, and requires sharing fresh thoughts. Transformation ensures coordination for increasing the readiness and ability of health care providers to collaborate besides the traditional medical care. At the same time the increased performance of nurses is directed through the locus of control (LC) to manage ever changing demands at the hospital. This study aims at examining the relationship of transformational leadership and patient safety with nurses' locus of control as moderator and decision making capacity of nurses as mediator. Further the mediated-moderations are also examined. Additionally the mean differences prevailing in public and private sector hospitals are also assessed.

**Methodology:** A quantitative study is conducted using well-structured closed ended questionnaires. A cross-sectional sample of 240 nurses was selected and their responses were gathered using a five points Likert scale. For analysis purpose the Structural Equation Modeling was used through SmartPLS software.

**Results:** The results predicted that no doubt the transformational leadership style positively and significantly influences the patient safety. The nurse's locus of control is moderating the relationship of transformational leadership and patient safety. Further the decision making capacity of the nurses mediates the patient safety. Further the nurse's emotional intelligence is a healthy contributor in the relationship of decision making and patient safety.

**Implications:** The nursing leaders interested in boosting patient safety can focus on concentrating upon the guidelines of the transformational leaders.

**Originality/Value:** Appropriate leadership style is necessary to enhance the role of nurses through making effective work environment for nurses that improves the quality of services provided. The current study makes few contributions one is combining the leadership effects on patient safety and other is assessing the developed framework through advanced statistical software for providing empirical results in the healthcare sector. Moreover the decision making capacity of the nurses is examined.

**Keywords:** Transformational leadership, Nurses' Locus of control, patient safety

### Introduction

An array of studies investigated the leadership styles having impact on various work practices but the literature is deficient about the transformational leadership having effect on patient safety (Boamah, Laschinger, Wong, & Clarke 2018). Patient safety is recognized as priority for health care organizations throughout the world. The literature is evident regarding healthcare systems being prone to errors and the risks of adverse happenings are significant (de Vries, Ramrattan, Smorenburg, Gouma, & Boermeester, 2008). The patient related adverse events can be observed in the form of unintended injuries or complications caused by healthcare providers instead of the actual disease (Baker, et al., 2004). The death rate is in constant rise, a report by an Institute of

Medicine – IOM reported that 98,000 patients expired and more than 01 million are injured every year in the USA as a result of preventable medical errors (Boamah et al., 2017). Further a Canadian report from Canadian Institute for Health Information highlighted that one in every 18 patients suffered preventable harm (CIHI, 2016). It became evident that the costs of such events are really great adding to the financial burden of the hospitals and nations (Etchells, et al., 2012).

The patient safety is becoming an important public health challenge (Maher, Ayoubian, Rafiei, Tehrani, Mostofian, & Mazyar, 2019). Studies indicate that alarmingly high rates of adverse events in hospitals are a result of preventable incidents, some of which are likely because of nursing-related factors (Schwendimann, Blatter, Dhaini, Simon, & Ausserhofer, 2018; Aiken, Clarke, Sloane, Sochalski, & Silber, 2002). Researchers have linked patient safety to the working of nurses (attention towards work) and lack of effective leadership (Sfantou, Laliotis, Patelarou, Sifaki-Pistolla, Matalliotakis, & Patelarou, 2017). The organizational literature the relational leadership styles such as transformational leadership is found positively linked to reduced adverse patient outcomes (Frankel, & Pgcms, 2019; Weng, Huang, Chen, & Chang, 2015).

Further the studies have developed the mechanisms of nurses' behaviors being influenced by the leadership styles having subsequent implications on patient safety (Wong, Cummings, & Ducharme, 2013; Wong, & Giallonardo, 2013). The nurses' work outcomes depend upon enhancing their ability through guidance and empowerment to decision making for adopting safety behaviors. The transformational leaders have the strength to direct the followers as well as brace them with rewards thus boosting their intrinsic motivation. The transformational leaders enhance the self-efficacy of employees (Malik, Butt, & Choi, 2015) and in general the self-efficacy and internal locus of control are conceptually positively related as both reflect a positive belief about personal control over success (Chen, Li, & Leung, 2016).

#### Methodology

A cross-sectional data (n = 311 nurses) with a random sampling technique with explanatory, causal design was used to test the framework developed. The survey instruments were distributed among private and public sector male/female nurses (private, n = 120 and public, n = 120). The sample was generated from a list of registered nurses from the administration departments of the hospitals having beds 100 or above. A cover letter explaining the purpose of the study was used with each questionnaire and distributed separately to each nurse to ensure the confidentiality.

#### Measures

The first section of the questionnaire encompassed the demographic information of the respondents including their age, education, job experience in the same position and the type of hospitals in which they worked (See table 1). The second section encompassed the measures for the constructs that helped in devising the framework. The transformational leadership questionnaire was adopted from (Carless, Wearing, & Mann, 2000) having items = 7, the patient safety (Okumura, Ishigaki, Mori, & Fujiwara, 2019) items = 11, locus of control (Spector, 1988) items = 16, decision making capacity (Wiens, 1991) items = 07, safety culture (Li, et al., 2017) items = 7, nurse emotional intelligence (Bar-On, 2006) items = 15. All the statements written in the questionnaire were rated on the five points Likert scale distributed along disagreement to agreement to the statements.

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