Spiritual-Based Transformational Leadership Style at Anutapura Regional General Hospital, Palu

Fajrillah Kolomboky1,*, Sukri Palutturi2,*, Fridawaty Rivai2,*, Lalu Muhammad Saleh4,*, Masudin Masudin5,*, Ridwan Amiruddin6

1Doctoral Student of Public Health, Universitas Hasanuddin, Makassar, Indonesia; 2Department of Health Policy and Administration, Faculty of Public Health, Universitas Hasanuddin, Makassar, Indonesia; 3Department of Hospital Administration Management, Faculty of Public Health, Universitas Hasanuddin, Makassar, Indonesia; 4Department of Occupational Health and Safety, Faculty of Public Health, Universitas Hasanuddin, Makassar, Indonesia; 5Department of Nursing, Poltekkes Kemenkes Palu, Palu, Indonesia; 6Department of Epidemiology, Faculty of Public Health, Hasanuddin University, Makassar, Indonesia

Abstract

BACKGROUND: The leadership style that is considered effective in responding to the challenges of the times as a result of the decline in human values due to the ethical crisis is a spiritual leadership style. The essence of transformational leadership and spiritual leadership is still not being applied by every leader in the organization.

AIM: This study aimed to examine the spiritual-based transformational leadership style at Anutapura Regional General Hospital, Palu.

METHODS: There were 12 informants in this qualitative research, namely, key informants from top management elements (two people), main informants (four people), supporting informants from Islamic/Christian/Hindu religious figures (three people), community leaders (1 person), and PPNI professional organization (two people). Sources of data were obtained directly through focus group discussions and in-depth interviews. Data analysis was done using NVIVO which was interpreted into a thematic analysis.

RESULTS: There were three themes related to the spiritual-based transformational leadership style in this study, those are (1) emotional skills, (2) spiritual skills, and (3) social skills. First, emotional skills consist of emotional skills and spiritual skills consist of emotional skills and emotional intelligence. Second, spiritual skills consist of spiritual attitude and spiritual intelligence. Third, social skills consist of being able to be social.

CONCLUSION: This study provides a perception based on an ideal spiritual-based transformational leadership style consisting of three things that affect the patients’ safety culture. It is hoped that the development of this leadership model indicator can be used as a policy approach in implementing a patient safety culture.

Introduction

Patient safety is a global health problem and is a very complex health issue involving many parties [1], [2]. Each year, there are 134 million cases which contribute to the 2.6 million deaths that occur in low and middle-income countries. In addition, the failure of patient safety measures occurs about 15% of spending the hospital costs [3].

Research conducted by Casida and Pinto concluded that one of the factors affecting the implementation of patient safety measures is the leadership style of the head of the ward who is responsible for the safety culture in the unit or treatment ward [4]. In the process, leaders have different leadership styles including using transformational leadership styles and spiritual leadership [5]. Transformational leadership is a relationship between leaders and their followers in which both parties are elevated to a higher moral level [6]. The results of studies using the pathway analysis method stated that transformational leadership is an important factor in building a patient safety culture and has a positive effect on patient safety culture and patient safety outcomes [7]. Meanwhile, Spiritual leadership is a developing paradigm designed to provide intrinsic motivation to help transform an organization, where a leader brings the worldly dimension to the spiritual dimension [8].

However, the essence of transformational leadership and spiritual leadership is still not applied by every leader in an organization. Spiritual-based transformational leadership is the combination of indicators of transformational leadership with spiritual leadership which is thought to create a trans-spiritual leadership style that has an effect on patient safety culture. Spiritual leadership in the field of nursing is relatively poorly studied, due to contextual factors such as social culture and pluralism, whereas a spiritually conducive environment has a positive impact on patients, nurses, and organizations. This is the urgency in our research because to foster a culture of patient safety, leaders who have personality qualities, religious ethics, and spiritual values are needed to lead. A leader figure is
expected to be able to inspire, generate, influence, and move through exemplary, love, and other divine qualities. Therefore, the researcher considered that there must be an alternative solution to overcome it. Researchers considered it necessary to offer a theoretical solution to the development of a trans-spiritual leadership model because its advantages lie in combining transformational leadership indicators with spiritual leadership and organizational culture which is thought to create a transspiritual leadership style so that it affects the patient safety culture. Perceptions of patient safety, cooperation within and between units, have not been maximal [9]. Building a patient safety culture in the hospital is the obligation and responsibility of all parties by involving all components of health workers, especially nurses who have the longest contact time with patients through the leadership role of the head of the room who has a vital role through a spiritual and organizational culture-based transformational leadership model development approach. In shaping a culture of patient safety [10].

This study aimed to examine the spiritual-based transformational leadership style at Anutapura Regional General Hospital, Palu.

**Methods**

This study used a qualitative method with a hermeneutical phenomenology approach. Researchers conducted focus group discussion (FGD) and in-depth interviews with all participants.- There were 12 informants, namely, key informants from top management elements (two people), main informants, namely, Executing Nurses, Head of Division (four people), supporting informants from Islamic/Christian/Hindu religious figures (three people), community leaders (one person), PPNI professional organization (two people). Selection of informant subjects using purposive sampling as a source of data in this study with the criteria of mastering the problem, having data, domiciled in Palu and its surroundings, and willing to provide complete and accurate information. The researcher conducted an FGD for all participants which were conducted from August to December 2020. The list of FGD questions is shown in Table 1.

Data analysis uses N Vivo through a coding draft mechanism, coding reduction, determining sub-themes and themes which will later be used as indicators or additional dimensions (sub variables) in the study.

**Results**

Based on the results of data analysis using NVIVO software, there were 3 themes related to spiritual-based transformational leadership in this study, those are; (1) emotional skills, (2) spiritual skills, and (3) social skills. The data analysis process led to each question that was used as a reference for the FGD, based on the sub-themes that are suitable by using NVIVO, including:

**Informants’ perceptions on emotional skills**

The first perception is related to emotional skills. The participants, consisting of health workers, religious leaders, and community leaders, have expressed their opinions about emotional skills. The two sub-themes obtained are emotional skills and emotional intelligence.

The results of this study indicate that the group of informants in the discussion group described one of the characteristics of a spiritual-based transformational leader, namely, having emotional skills including the ability to provide motivation and inspiration; be a role model, role model, and committed; have an attitude of empathy and sympathy; respond to conflict management and be able to be a motivator; able to work in teams, have good skills and obey the rules. Among the informants’ statements were expressed as follows: “the leader is able to motivate and lead the patient later to avoid injury. That is the first then the second that always inspires both his patients and his fellow workers. So motivation, give inspiration. When he motivates him, he raises the patient’s enthusiasm, for example, now it’s not just patient safety, everyone’s safety, people don’t want to wear masks “ (Professional Organization (P1)). “…….motivation and encouragement so that the situation of the leader and those who are led is well intertwined” (Religious group (P1)). “The head of the room can be an inspiration to the nurse in our room so that we have daily actions that can become their role model. The leader is a role model so he must have caring,

### Table 1: List of Questions for FGD

| No.  | Questions                                                                 |
|------|---------------------------------------------------------------------------|
| 1    | What do you think about spiritual-based leadership?                         |
| 2    | What do you think are the characteristics of a leader who has a spiritual-based? |
| 3    | What is the impact of a leader who has a spiritual basis?                  |
| 4    | In your opinion, how do you make a leader have a spiritual basis?          |
| 5    | In your opinion, what are the advantages and disadvantages of spiritual-based leadership? |
| 6    | What do you think is meant by patient safety, incidents, and patient safety culture? |
| 7    | Do you have work experience related to patient safety?                     |
| 8    | What do you think about the patient safety culture program in the hospital? (goal, process, engagement)? |
| 9    | Please explain about the supporting & inhibiting factors in building a patient safety culture in this hospital? |
| 10   | How do you rate the leadership of the head of your room?                  |
| 11   | In your opinion, what are the behaviors a head of the room should have as a leader |
| 12   | What do you think about transformational leadership?                       |
| 13   | How is the organizational culture applied in your room?                   |
| 14   | What activities are carried out by hospital leaders to build a patient safety culture? |
| 15   | In your opinion, what activities should the head of an inpatient room do to build a patient safety culture? for staff (nurses and administrative staff, team leaders, and ward heads)? |
| 16   | Is there anything else that needs to be said? Please                      |

FGD: Focus group discussion
sympathy and empathy for the patient” (Head of Division).

“...indeed, there must be exemplary and commitment from the leader. Then in addition to caring that is also added is empathy so that we can feel what other people feel. Able to respond to conflict management in an organization they lead” (Nurse group).

“That skill is definitely a must-have. Good skill...” (Head of Division)

“......what is important is trust and commitment” (community leaders).

The first sub-theme is emotional skills. Eight informants gave perceptions about emotional skills including the Executing Nurses, Head of Division, Professional Organization, and community leaders. The 8 informants argued that the emotional skills that must be possessed in a spiritual-based transformational leadership style consist of five parts, in which the leader must have empathy and sympathy, be able to be a mediator and have the capacity in conflict management, be able to be role models, as well as commit, provide motivation and inspiration to the environment. Finally, the leader must also be able to work in a team, have good skills, and comply with the applicable rules.

The informant group said it is important for a leader to have an Emotional Quotient (EQ) with the characteristics of being able to realize and manage one's own emotions, having sensitivity to the emotions of others, being able to respond and negotiate with others emotionally, and being able to use emotions as a tool to motivate oneself. The informants’ statements were as follows:

“A spiritual-based leadership style is closely related to a leadership style that upholds the values of belief, has a sense of density or high sensitivity in leading. A leader is not only able to mobilize but must lead based on religious ethics and be able to control emotions. So a leader must not only have an Emotional Quotient but must have an Emotional and Spiritual Quotient” (Executing Nurses).

Informants’ perceptions on spiritual skills

The second perception is related to spiritual skills. The participants who are health workers, religious leaders, professional organizations, and community leaders have expressed their opinions about emotional skills. There are two sub-themes obtained including the spiritual attitude and spiritual intelligence.

The first sub-theme is spiritual attitude. Seven informants gave perceptions about spiritual attitudes including the executing nurses, Head of Ward/Head of Division, religious leaders, professional organizations, and community leaders. The seven informants gave the perception that a leader with a spiritual-based transformational leadership style must uphold the values of belief, always involve God in every activity, believe in all values of worship and work as a field of charity, have good morals and attitudes, and be a leader who can carry out responsibilities.

The results showed that the group of informants characterized a leader who believed that all activities had religious values and made work as a field of charity; trustworthy leaders so as to create a sense of security; good character and attitude; uphold the value of belief and present God in every activity. Among the informants’ statements were expressed as follows:

“what he does he believes is the value of worship so the orientation is charity. There is worship and there is charity, so if later orientation is charity, then that motivation drives doing something. The head of the room, especially as a nurse, stated that helping someone is very valuable in the eyes of Allah SWT” (Professional Organizations (P2)).

“....In carrying out its activities, there is God who always sees and whatever is done is always of worship value. Whatever he does forever is solely because of the value of worship that we do both to ourselves and to others. Everything he does is there God is there, God is there whatever he moves. Wherever his footsteps, then his thoughts, feelings and others are inspired or believed that there is God there, there is God there, his spiritual approach is trustworthy leadership. The Prophet said that someone does not believe if he does not have a mandate, so that one indicator of that person is believing if he is carrying out the mandate” (Religious Leaders (P2)).

“....focuses on worship so that worldliness leads to the spiritual hereafter. Have a good attitude so that serving patients is done sincerely” (Head of Division).

Meanwhile, the second sub-theme is spiritual intelligence. Five informants provided perceptions about spiritual intelligence, including professional organizations, Head of Ward/Head of Field, and community leaders. The five informants argued that in addition to the value of EQ, leaders with a spiritual-based transformational leadership style must have SQ values (flexible, adaptable, have a high level of awareness, able to take lessons from failure, live according to the vision and mission, and independent).

The informant group stated the importance of a leader having a Spiritual Quotient (SQ) with the characteristics of being flexible, adaptable, having a high level of awareness, being able to take lessons from a failure, living according to the vision and mission, and being independent. The informants’ statements were as follows:

“....there is already belief or hope. Spiritual leadership has a clear vision and mission” (Head of Field).
Informants' perceptions on social skills

The third perception is related to social skills. The participants consisting of health workers, religious leaders, professional organizations, and community leaders have expressed their opinions on spiritual skills. There is one sub-theme obtained which is the ability to socialize.

The informant stated that the leader must have honesty, be patient and kind with prejudice; has caring properties; using bio, psycho, social, spiritual approaches; protect the rights of others, be responsible; have concern, make wise decisions; give a positive touch; and understanding basic human needs (Abraham Maslow's theory). These characteristics are summarized as the ability to be social. Among the informants' statements were expressed as follows:

“...there must be a dimension of patience in it. Leaders must be patient. Then kind. The leader must understand human beings as a whole in a biosocial-spiritual health approach” (Professional Organizations (P1)).

“...the honest leader creates a safe situation. So when transformational leadership is connected with spiritual I think the most important thing is honesty. Honesty is the key, a leader really has to be honest, then when it comes to cultural and health transformation, there are 8 categories of leadership, one of which is simply indrabrata with a very good biopsychosocial approach. Biological, Psychological and Sociological Approaches in the context of transformational leadership so as to protect and protect the rights of others” (Religious Leaders (P2)).

“Spiritual leadership besides having a clear vision and mission, has hope, love, honesty and empathy. Caring has a presence both physically and in communicating, in direct contact and eye contact. There is a value about morality. Responsible to the hereafter not only to friends in the hospital” (Executing Nurses).

“The truth is honesty, if a leader cannot be honest, what about the others?” (Head of Ward/Head of Division)

In this sub-theme, ten informants provided perceptions about the leader’s ability to behave socially including the executing nurse, Head of Ward/Head of Division, Religious Leaders, professional organizations, and community leaders. The ten informants argued that a spiritual-based transformational leadership style must also include aspects of society including caring, wise in making decisions; honest, patience and kindness; respecting others’ rights, be responsible; affects positively; understand the basic human needs (Abraham Maslow’s theory); and use bio, psycho, social, and spiritual approaches in interacting with others.

The results of qualitative data analysis with the NVIVO 12 plus program summarize the results of coding, sub-themes, and themes in the percentage coverage presented in Table 2:

Table 2: Analysis of the themes and sub-themes of the FGD results related to spiritual-based spiritual leadership

| Coding | Coverage (%) | Subthemes |
|--------|--------------|-----------|
| Emotional skills | | |
| 1. Provide motivation and inspiration | 10.42 | Emotional prowess |
| 2. Able to be a role model, role model, and commitment | 6.24 | |
| 3. Have empathy and sympathy | 5.21 | |
| 4. Handle conflict management, become a mediator | 4.16 | |
| 5. Able to work in teams, have good skills, obey the rules | 2.08 | |
| 6. Have EQ (able to realize and manage one’s own emotions, have sensitivity to other people’s emotions, be able to respond and negotiate with others emotionally, and can use emotions as a tool to motivate oneself) | 6.24 | Emotional intelligence |
| Spiritual skills | | |
| 1. Believing in all values of worship, Working as a field of charity | 10.96 | Spiritual attitude |
| 2. A trustworthy leader that creates a sense of security | 3.12 | |
| 3. Good character, good attitude | 1.04 | |
| 4. Upholding the values of trust | 1.04 | |
| 5. Presenting Allah in every activity | 1.04 | |
| 6. Have SQ (flexible, adaptable, have a high level of awareness, able to take lessons from a failure, live according to the vision and mission, be independent) | 7.83 | Spiritual intelligence |
| Social skills | | |
| 1. Have honesty, be patient and kind | 22.92 | Able to be social |
| 2. Have caring | 6.25 | |
| 3. Using a bio, psycho, social, spiritual approach | 5.21 | |
| 4. Safeguard other people’s rights, be responsible | 4.17 | |
| 5. Have caring, make wise decisions | 4.16 | |
| 6. Give a positive touch | 3.12 | |
| 7. Understanding basic human needs (Abraham Maslow’s theory) | 1.04 | |

Table 2 shows that a spiritual-based transformational leader needs to have three main skills, namely emotional skills, spiritual skills, and social skills.

Discussion

A factor which affects the adoption of patient safety measures is the managerial leadership style. In this context, the role of a leader who moves the organization into the future must recognize environmental needs and facilitate appropriate change to become clearer. Such leaders are called transformational leaders. These leaders can strengthen staffs’ understanding and fairness and improve the quality of work-life in the organization. The quality of work-life includes the enhancement of organizational culture which increases the employees’ satisfaction which leads to their development and growth in the
Transformational leadership styles have a direct and positive effect on managerial performance. Transformational leadership styles can rely on decision influence and decision facilitation to improve the employees’ performance [12]. In health care, transformational leadership is found to be associated with job satisfaction of hospital nurses positively affecting overall job satisfaction, both intrinsic or extrinsic [13].

**Emotional skills**

Emotional skills in spiritual-based transformational leadership are defined as the leader’s ability to understand and manage the emotions that exist within him and recognize and influence the emotions of those around him. Emotional intelligence (EQ) is a set of important skills in leadership covering how leaders perceive and express themselves, develop and maintain social relationships, overcome challenges, and use emotional information in effective and meaningful ways [14].

Leaders who have developed skills related to emotional intelligence using their moods and emotions or the emotions of others to motivate others to display the desired behavior can be said that the leader has succeeded in facilitating change [15]. Emotional intelligence is the most important element that contributes to enhancing morale, cooperation, teamwork, motivation, and a positive work environment [15].

**Spiritual skills**

One of the transformational leadership styles is spiritually-based. Spirituality is required in a sustainable workplace for employees’ ethical attitudes, life, job satisfaction and commitment, employees’ productivity, and organizational performance. The benefits of spirituality at work through spiritual leadership have an impact on employees’ organizational behavior, which is characterized by awareness of a higher purpose, sense of meaning at work, engaging in job responsibilities and ethical decisions, and ultimately becoming part of society [16].

The head nurse in the hospital always tries to have a good relationship and increase cooperation with the other individuals in the Hospital [17], [18]. For this reason, as a head nurse, he must have the ability to control his emotions. Good emotional skills at work can improve the quality of care [19]. Emotional intelligence is a charismatic virtue for nurse leaders, which overcomes chronic challenges in nursing practice, thus it must be implemented well [20].

Spiritual-based transformational leadership has a significant relationship to patient safety culture at Anutapura Hospital, Palu. Leadership style is key to fostering a patient safety culture [21], [22]. Therefore, the leadership style, communication techniques, and managerial skills of leaders need to be considered in creating a conducive work atmosphere as an effort to create a patient safety culture [23].

Spiritual leaders in nursing can achieve organizational goals by paying attention to the extrinsic and intrinsic motivational elements of the personnel. Spiritual skills can foster a sense of God-consciousness, and the need for social relationships or membership in organizations [24].

**Social Skill**

Social skills in spiritual-based transformational leadership are defined as the ability of leaders to create social processes to influence, motivate, and allow others to contribute to organizational effectiveness and success. Socially skilled leaders can easily adapt to managing a team [25]. Social skills have connotations that are closely related to social competence and social intelligence. In essence, social intelligence uses awareness of the substantial impact of relationships to help leaders improve the performance of those they lead. Personal skills such as initiative, empathy, adaptability, and persuasiveness are essential as leadership tools. Lack of awareness of the emotional impact on others can make a leader fail as a manager, regardless of how competent he or she is in science or job skills [26].

Furthermore, social skills are also related to the spiritual-based transformational leadership style in this study, where doctors and nurses rely heavily on the head nurse to communicate, give advice, and know the treatment activities. The head nurse plays an important role in assisting communication between staffs. This suggests that social skills are a useful approach for communication [27].

The limitation of this research is that FGD with informants is conducted online (zoom meeting) so that expressions, behavior, and communication are sometimes hampered due to signal, network disturbances.

**Conclusion**

The spiritual-based transformational leadership style is related to three skills, which are emotional, spiritual, and social skills. A spiritual-based transformational leadership style can create a conducive work atmosphere as an effort to create a culture of patient safety.
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