“Effect of servant leadership on the performance of a regional general hospital”

 AUTHORS
Daswati
Pricylia Chintya Dewi Buntuang
Syahruddin Hattab
Yoberth Kornelius

 ARTICLE INFO
Daswati, Pricylia Chintya Dewi Buntuang, Syahruddin Hattab and Yoberth Kornelius (2021). Effect of servant leadership on the performance of a regional general hospital. Problems and Perspectives in Management, 19(2), 507-518. doi:10.21511/ppm.19(2).2021.40

 DOI
http://dx.doi.org/10.21511/ppm.19(2).2021.40

 RELEASED ON
Tuesday, 06 July 2021

 RECEIVED ON
Wednesday, 05 May 2021

 ACCEPTED ON
Thursday, 24 June 2021

 LICENSE
This work is licensed under a Creative Commons Attribution 4.0 International License

 JOURNAL
"Problems and Perspectives in Management"

 ISSN PRINT
1727-7051

 ISSN ONLINE
1810-5467

 PUBLISHER
LLC “Consulting Publishing Company “Business Perspectives”

 FOUNDER
LLC “Consulting Publishing Company “Business Perspectives”

 © The author(s) 2021. This publication is an open access article.
EFFECT OF SERVANT LEADERSHIP ON THE PERFORMANCE OF A REGIONAL GENERAL HOSPITAL

Abstract

Currently, leadership becomes the concern of studies in public organizations. However, studies on servant leadership and its impact on hospital performance are still limited. This study aims to identify the relationship and impact of servant leadership on organizational performance (hospital). A quantitative approach was used on a sample of 729 healthcare workers at the Undata Regional General Hospital in Palu. The sampling was based on the Slavin formula with an error rate of 5%, thus it involved 258 respondents. Further, the sample was selected using a random proportional sampling technique to represent each field in the hospital. The data were analyzed using descriptive statistics and simple linear regression analysis with hypothesis testing. The results of descriptive analysis on the servant leadership variable showed that the highest mean value is the item stating that leadership in the hospital has a thorough understanding of the organization and its goals. Meanwhile, the lowest is the item stating that leaders sacrifice their interests less to meet the needs of healthcare workers. In the organizational performance variable, the highest mean value is the item that states that healthcare workers can work effectively every working day, while the lowest is the item of patients complaining about healthcare procedures. Furthermore, the results of regression analysis through hypothesis testing showed that servant leadership has a significant effect on organizational performance of hospitals with a strong level of relationships.

INTRODUCTION

The performance of hospitals in Indonesia is in the spotlight due to many complaints from the public as service users. This condition decreases public trust in health services in Indonesia, particularly in regional general hospitals. Regional general hospitals as health services in the regions have to be more responsible for the health services provided, for example, improving performance increases public trust in the hospital performance. Concerning the increase in hospital performance, the leadership role cannot be ignored. Servant leadership will be appropriate to be applied as it is service-oriented. The servant leadership style is considered appropriate as it has a service character. Servant leadership is gaining support among many healthcare workers as a unique leadership style suitable for patient care due to its focus on service, listening, empathy, and healing (Murphy et al., 2020).

Servant leadership is expected to influence subordinates to improve the performance of regional general hospitals in Indonesia, particularly Undata Regional General Hospital in Palu. In the globalization era, there is industrial competition in all fields, including the service industry in the healthcare sector such as hospitals. Public sector or-
ganizations have the responsibility to provide public services. Thus, innovation and performance improvement is mandatory for organizations in the public sector (Felício et al., 2021). Therefore, the formulation of the problem is whether servant leadership has a relation and influence on organizational performance. Strong leadership is needed to solve institutional and bureaucratic problems (Poister, 2010), including organizational performance.

1. LITERATURE REVIEW AND HYPOTHESIS

1.1. Servant leadership and organizational performance

In organizations, servant leadership is a management approach focusing on providing value and promoting sustainability for stakeholders (Lemoine et al., 2020). Servant leadership is a leadership concept offering scope to study this phenomenon as serving leaders focusing more on meeting the needs of followers and less satisfying their personal needs (Ghosh & Khatri, 2018). Servant leadership is characterized by an emphasis on leaders serving their followers first (Worley et al., 2020). In particular, servant leadership can establish a combination of motivation to be a leader and a need to serve others (Lythreatis et al., 2020).

In an organization, leaders play a great role in improving organizational performance (Singh et al., 2018; Subramony et al., 2018). A leader, both in an organization and in a company, has to increase structural capital and investment through the development of a knowledge creation system that can have a positive impact on improving organizational performance (Mustapha & Abdelheq, 2018; Shanker et al., 2017). Organizational performance is a condition when organizations can see the realization of organizational goals (Abubakar et al., 2019). Organizational performance is a multidimensional construction meaning that it cannot be measured with one dimension only, for example, financial benefits (Huang & Huang, 2020).

Organizational performance is the key focus for an organization in implementing measures to ensure competitiveness and sustainability (Delshab et al., 2020; Singh et al., 2021). Organizational performance is a major construct in strategic management studies (Hamann & Schiemann, 2021). In the theory of human resource management, high organizational performance results from the success of the organization in managing high performance of employees (Torre, 2019; Peng et al., 2020). Organizational performance is the result of the collaborative efforts of all members of the organization (Kim, 2020). Good or poor organizational performance can affect the assessment of the reputation of the organization (Singh & Misra, 2021).

Organizational performance highly influences customer satisfaction, so it is necessary to have the high organizational performance to keep this satisfaction high (Soltani et al., 2018; Ying et al., 2020). Improving organizational performance is followed by major risks that have to be faced by the organization and consequently, the organization should be ready for change and listen to the aspiration of stakeholders (Jiang & Holburn, 2018).

Organizational performance is not easy to measure, as it requires many aspects to maintain and great costs to achieve high organizational performance (Chavez et al., 2017; Oyemomi et al., 2019; Oever & Beerens, 2020). The organizational support for servant leaders affects how the leader improves employee performance and employee satisfaction (Rofcanin et al., 2021).

Leadership has a high influence on organizational performance (Kim et al., 2020). This study focuses on servant leadership and organizational performance. Servant leadership has some characteristics. They are emotional healing: behavior of a leader who is sensitive to other people’s problems; creating value for the community: a behavior that shows sincerity in helping the community; conceptual skills, knowledge of the institution, and the duties of a leader that facilitate the effective implementation of tasks including helping followers; empowering: motivate followers and facilitate them in investigating and solving problems; helping subordinates grow and succeed: a sincere attitude that is caring in developing follower’s career with support and mentoring; putting subor-
coordinates first: showing behavior and words clearly to followers to fulfill work needs as a priority; and behaving ethically: open, fair, and honest behavior and attitudes in dealing with other people (Liden et al., 2008). Meanwhile, organizational performance is measured through efficiency, service quality, cost-effectiveness, customer satisfaction, and results (Poister, 2008; Wholey et al., 2010).

Indeed, the health service system in general hospitals in Indonesia is poor to present (Listiyono, 2015) based on the indicator of medical personnel and hospital management who have not fully provided patient rights and showed transparency (Lestari, 2010). Many healthcare workers, both nurses and doctors, work unprofessionally and even provide unsatisfactory services. Unsatisfactory services are certainly caused by poor performance. For this reason, it is necessary for regional general hospitals in Indonesia to improve their performance through leadership styles. Leadership is closely related to organizational performance outcomes (Li et al., 2021). It is expected to improve the performance of regional general hospitals in Indonesia, particularly at Undata Regional General Hospital in Palu. Based on these elaborations, this study aims to determine the relationship and effect of servant leadership on organizational performance.

1.2. Hypotheses

This study proposed the following hypotheses:

\[ H_1: \text{Servant leadership has a significant effect on organizational performance.} \]

\[ H_2: \text{Servant leadership has a relationship with organizational performance.} \]

2. METHODOLOGY

This study used a quantitative approach. It used both primary and secondary data collected through observation, questionnaires, and documentation. The questionnaire was developed using servant leadership and organizational performance variables. The servant leadership variable was adopted from the Servant Leadership Questionnaire (SLQ) (Liden et al., 2008, 2015), while the organizational performance was based on the dimensions proposed by Poister et al. (2008) and Wholey et al. (2010). The questionnaire has been tested for validity and reliability.

A validity test aims to measure and determine the level of accuracy, while reliability is to determine the level of consistency of research instruments (Heale & Twycross, 2015). The validity level of the instrument was based on the correlation coefficient value. The commonly used correlation coefficient is less than 0.3 for weak correlation, 0.30-0.5 for moderate correlation, and > 0.5 for strong correlation (Ghozali, 2011; Heale & Twycross, 2015). Meanwhile, reliability was based on Cronbach’s alpha (\( \alpha \)). The consistency value of a research instrument was 0 and 1 with the results of Cronbach’s alpha (\( \alpha \)) of 0.7 or more (LoBiondo-Wood & Haber, 2013).

The target group of this study included healthcare workers at Undata Regional General Hospital in Palu, Central Sulawesi Province, with a total of 729 people. The sample was selected using the Slovin formula with an error rate of 5% and resulted in a sample size of 258 respondents. It used a random proportional sampling technique to represent each field in the hospital. The questionnaire was distributed proportionally to all health units in the general hospital in Undata, Palu. Therefore, there were representations of each sector to meet the objectives of the study. The questionnaire was distributed, collected and verified systematically. If some questions had not been filled, the respondents were asked to fill them in.

The data were analyzed using descriptive statistics and simple linear regression analysis. Descriptive statistical analysis used is as the mean value. Before performing the regression analysis, the

![Figure 1. Conceptual framework](http://dx.doi.org/10.21511/ppm.19(2).2021.40)
validity and reliability of the questionnaire were tested first. The simple linear regression analysis in this study was to reveal the influence and relationship between servant leadership and organizational performance variables.

3. RESULTS

This study performed the descriptive statistical analysis and linear regression using Statistical Product and Service Solutions (SPSS). The statistical analysis covered validity and reliability tests, descriptive statistics, and hypothesis testing.

3.1. Results of validity and reliability tests

The validity and reliability tests used the SPSS on the item-total statistics table covering servant leadership variable (X) and organizational performance variable (Y). The results on the servant leadership variable (X) indicate that the questionnaire is valid and reliable (Table 1).

Table 2 shows the results for the organizational performance variable (Y). The validity and reliability of the organizational performance variable indicate that all items were declared valid (strong) and reliable. It was based on guidelines for determining validity (correlation coefficient of 0.3) and reliability (Cronbach’s alpha (α) of > 0.7).

3.2. Results of descriptive statistics

In this study, descriptive statistics functions to describe the characteristics of each respondent’s response to the question. Table 3 shows the results of descriptive statistics of the servant leadership variable.

Table 3 shows that the servant leadership shown by the leadership of the Undata Regional General
Table 2. Item-total statistics of the organizational performance variable (Y)

| Item | Corrected item-total correlation | Correlation coefficient | Results | Cronbach’s alpha if Item Deleted | Cronbach’s alpha (α) | Results |
|------|----------------------------------|-------------------------|---------|----------------------------------|----------------------|---------|
| OP_01| 0.724                            | 0.3                     | Valid   | 0.916                            | 0.7                  | Reliable |
| OP_02| 0.727                            | 0.3                     | Valid   | 0.916                            | 0.7                  | Reliable |
| OP_03| 0.758                            | 0.3                     | Valid   | 0.916                            | 0.7                  | Reliable |
| OP_04| 0.750                            | 0.3                     | Valid   | 0.916                            | 0.7                  | Reliable |
| OP_05| 0.627                            | 0.3                     | Valid   | 0.919                            | 0.7                  | Reliable |
| OP_06| 0.703                            | 0.3                     | Valid   | 0.917                            | 0.7                  | Reliable |
| OP_07| 0.714                            | 0.3                     | Valid   | 0.917                            | 0.7                  | Reliable |
| OP_08| 0.767                            | 0.3                     | Valid   | 0.915                            | 0.7                  | Reliable |
| OP_09| 0.781                            | 0.3                     | Valid   | 0.915                            | 0.7                  | Reliable |
| OP_10| 0.737                            | 0.3                     | Valid   | 0.916                            | 0.7                  | Reliable |
| OP_11| 0.412                            | 0.3                     | Valid   | 0.926                            | 0.7                  | Reliable |
| OP_12| 0.496                            | 0.3                     | Valid   | 0.923                            | 0.7                  | Reliable |
| OP_13| 0.435                            | 0.3                     | Valid   | 0.926                            | 0.7                  | Reliable |
| OP_14| 0.515                            | 0.3                     | Valid   | 0.922                            | 0.7                  | Reliable |
| OP_15| 0.558                            | 0.3                     | Valid   | 0.921                            | 0.7                  | Reliable |
| OP_16| 0.479                            | 0.3                     | Valid   | 0.922                            | 0.7                  | Reliable |
| OP_17| 0.507                            | 0.3                     | Valid   | 0.922                            | 0.7                  | Reliable |

Table 3. Descriptive statistics of the servant leadership variable (X)

| No. | Statement                                              | N   | Min | Max  | Mean |
|-----|--------------------------------------------------------|-----|-----|------|------|
| 1   | I would seek help from the leader if I had a personal problem | 258 | 1.00| 5.00 | 3.4574 |
| 2   | My leader cares about my well-being                    | 258 | 1.00| 5.00 | 3.3062 |
| 3   | My leader takes time to talk to me on a personal level  | 258 | 1.00| 5.00 | 3.2248 |
| 4   | My leader can recognize when I am feeling down without asking me | 258 | 1.00| 5.00 | 3.2519 |
| 5   | My leader emphasizes the importance of giving back to the community | 258 | 1.00| 5.00 | 3.4767 |
| 6   | My leader is always interested in helping people in the community | 258 | 1.00| 5.00 | 3.4186 |
| 7   | My leader is involved in community activities          | 258 | 1.00| 5.00 | 3.4031 |
| 8   | My leader encourages me to volunteer in the community  | 258 | 1.00| 5.00 | 3.3217 |
| 9   | My leader can tell if something related to woks is going wrong | 258 | 1.00| 5.00 | 3.3837 |
| 10  | My leader can think through a complex problem          | 258 | 1.00| 5.00 | 3.5504 |
| 11  | My leader has a thorough understanding of the organization and its goals | 258 | 1.00| 5.00 | 3.6357 |
| 12  | My leader can solve problems with new or creative ideas | 258 | 1.00| 5.00 | 3.6008 |
| 13  | My leader gives me the responsibility to make important decisions about my job | 258 | 1.00| 5.00 | 3.6395 |
| 14  | My leader encourages me to handle important work decisions on my own | 258 | 1.00| 5.00 | 3.4341 |
| 15  | My leader gives me the freedom to handle difficult situations in the way I feel is the best | 258 | 1.00| 5.00 | 3.4767 |
| 16  | If I need to make an important decision at work, I do not need to consult my leader | 258 | 1.00| 5.00 | 2.9574 |
| 17  | My leader makes my career development a priority       | 258 | 1.00| 5.00 | 3.2868 |
| 18  | My leader is interested in making sure that I reach my career goals | 258 | 1.00| 5.00 | 3.3488 |
| 19  | My leader provides me with work experiences that enable me to develop new skills | 258 | 1.00| 5.00 | 3.4225 |
| 20  | My leader wants to know about my career goals          | 258 | 1.00| 5.00 | 3.3721 |
| 21  | My leader cares more about my success than his/her own | 258 | 1.00| 5.00 | 3.1318 |
| 22  | My leader puts my best interest above his/her own      | 258 | 1.00| 5.00 | 3.0543 |
| 23  | My leader sacrifices his/her interest to meet my needs | 258 | 1.00| 5.00 | 2.9302 |
| 24  | My leader does what he/she can to make my job easier   | 258 | 1.00| 5.00 | 3.2868 |
| 25  | My leader holds high ethical standards                 | 258 | 1.00| 5.00 | 3.5659 |
| 26  | My leader is always honest                            | 258 | 1.00| 5.00 | 3.6240 |
| 27  | My leader would not compromise ethical principles to meet success | 258 | 1.00| 5.00 | 3.4380 |
| 28  | My leader values honesty more than profits             | 258 | 1.00| 5.00 | 3.5465 |
Hospital in Palu indicates that the leader has a thorough understanding of the organization and its goals, is always honest, and can solve problems with new or creative ideas. However, the results also show that any decisions that are made in the workplace must be discussed with the leadership. Besides, the descriptive results show that the leadership at the Undata Regional General Hospital is less willing to sacrifice personal needs for the benefit of the healthcare workers (subordinates) in the hospital.

Meanwhile, Table 4 shows the descriptive statistical results of organizational performance variables.

The results of the descriptive statistics indicate that the performance of the Undata Palu Regional General hospital is good. It means that healthcare workers work effectively every working day, achieve success in patient care every day, manage to carry out special handling in each of their work units; and the hospital prioritizes improving the quality of service. However, some performances were considered poor as indicated by patients complaining about service costs, attitude of the healthcare worker, and healthcare procedures.

### 3.3. Results of hypothesis testing

In this study, the hypothesis testing used a simultaneous significance test (F-statistical test). It aims to determine the influence of the independent variable \((X)\) on the dependent variable \((Y)\).

The F-statistical test is to determine whether the independent variable \((X)\) influences the dependent variable \((Y)\). Table 5 shows the \(F_{\text{calc}}\) of 324.861 > \(F_{\text{table}}\) of 1.628 at the significance level of alpha \((\alpha) = 0.05\) or Sig. \(F < 0.05\). Table 5 indicates the significance value of \(F = 0.000\). It can be concluded that

---

**Table 4.** Descriptive statistics of the organizational performance variable \((Y)\)

| No. | Statements                                                                 | N   | Min | Max | Mean |
|-----|---------------------------------------------------------------------------|-----|-----|-----|------|
| 1   | The ratio of availability of fund allocations and those that are operationalized is appropriate | 258 | 1.00| 5.00| 3.3411 |
| 2   | The ratio of costs paid and those incurred by each unit is appropriate     | 258 | 1.00| 5.00| 3.3721 |
| 3   | Timeliness and accuracy of service delivery to patients                    | 258 | 1.00| 5.00| 3.5736 |
| 4   | The hospital provides ease of service to patients                          | 258 | 1.00| 5.00| 3.7326 |
| 5   | The hospital prioritizes patient comfort                                    | 258 | 1.00| 5.00| 3.8217 |
| 6   | The hospital guarantees patient safety in service                           | 258 | 1.00| 5.00| 3.8682 |
| 7   | The hospital prioritizes improving the quality of service                  | 258 | 2.00| 5.00| 3.9264 |
| 8   | The hospital provides affordable, fair, and equitable services             | 258 | 1.00| 5.00| 3.8605 |
| 9   | The budget ratio provided is in accordance with the number of patients served | 258 | 1.00| 5.00| 3.6589 |
| 10  | The total cost of services provided has been utilized                      | 258 | 2.00| 5.00| 3.6124 |
| 11  | The patient complains about service fees                                  | 258 | 1.00| 5.00| 3.2946 |
| 12  | The patient complains about the attitude of healthcare workers             | 258 | 1.00| 5.00| 3.2946 |
| 13  | The patient complains about healthcare procedures                           | 258 | 1.00| 5.00| 3.2558 |
| 14  | Healthcare workers achieve the specified service delivery targets          | 258 | 2.00| 5.00| 3.8488 |
| 15  | Healthcare workers manage to carry out special handling in each of their work units | 258 | 2.00| 5.00| 3.9341 |
| 16  | Healthcare workers work effectively every working day                      | 258 | 2.00| 5.00| 4.2085 |
| 17  | Healthcare workers achieve success in patient care every day               | 258 | 1.00| 5.00| 3.9690 |

---

**Table 5.** ANOVA\(^a\)

| Model          | Sum of squares | df  | Mean square | \(F\)     | Sig. |
|----------------|---------------|-----|-------------|----------|------|
| 1              | 12030.184     | 1   | 12030.184   | 324.861  | .000* |
| Residual       | 9480.126      | 256 | 37.032      |          |      |
| Total          | 21510.310     | 257 |             |          |      |

*Note: \(a\) means predictors: (constant), servant leadership; \(b\) means dependent variable: organizational performance.
the independent variable \((X)\) significantly influences the dependent variable \((Y)\). The results indicate that \(H1\) and \(H2\) are accepted meaning that servant leadership has a significant effect on organizational performance.

Moreover, Table 6 shows the relationship and effect of the independent variable \((X)\) on the dependent variable \((Y)\).

The test results revealed the \(R^2\) value of 0.559 (55.9%). It indicates that the influence of the servant leadership variable on organizational performance is 55.9%, while the remaining 44.1% is influenced by other variables outside the research model. Meanwhile, the level of the relationship between leadership and organizational performance variables can be seen from the \(R\)-value of 0.748. This value is between 0.60-0.799 meaning that there is a strong relationship between the two variables (Riduwan, 2010).

### 4. DISCUSSION

This study focuses on the effect of servant leadership on the performance of regional general hospitals in Indonesia. It was identified through hypothesis testing. Leadership is vital in all areas of the organization, including in the health sector (Por Pan et al., 2020). Bush et al. (2020), Hariyanti et al. (2020), Por Pan et al. (2020), Timofe et al. (2017) focused on transformational leadership, while Hariyanti et al. (2020) and Por Pan et al. (2020) – on transactional leadership, and Meslec et al. (2020) – on charismatic leadership in hospitals. Currently, leadership studies focus more on transformational leadership (Timofe et al., 2017). It indicates that studies focusing on servant leadership is still limited compared to other leadership styles such as transformational. However, it is indicated that this study is highly relevant, particularly in the health sector, as there is no study focuses on servant leadership and organizational performance.

This study aims to determine the effect and relationship between servant leadership and organizational performance. The results of this study proved that servant leadership has a significant effect on organizational performance and hypotheses are accepted. It is indicated by the results of the F statistical test obtained with \(F_{\text{count}}\) value of 324.861 > \(F_{\text{table}}\) of 1.628 at the significance level alpha \((\alpha)\) of 0.05 or Sig. \(F < 0.05\). This result is in line with Kim et al. (2020), Li et al. (2021), Singh et al. (2018), and Subramony et al. (2018), who stated that leadership affects organizational performance. It means that performance can be controlled through leadership. Thus, leadership is vital in the health sector. The results of this study indicate that the effect of servant leadership on the performance of regional general hospitals is 55.9%, while the remaining 44.1% is affected by other variables outside this study. For example, the quality of health information has a direct effect on hospital performance (Alolayyan et al., 2020). Technological changes and improvements can affect organizational performance (Adeniji et al., 2018; Martin-Rojas et al., 2019; Yunis et al., 2018). To improve organizational performance, technology components and other things related to organizational productivity are required (Çalış Duman & Akdemir, 2021).

Govender (2016) found that poor leadership results in poor organizational performance and can affect service delivery. It means that well-executed leadership results in organizational performance that can improve the quality of health services. Meanwhile, Bednářová et al. (2019) investigated health organizations in the Czech Republic and revealed that leadership and organizational performance have an indirect relationship meaning that leadership can affect performance through motivation, commitment, and creativity. In addition, it was shown that organizational performance improvement is not always directly influenced by leadership. This study revealed that there are other factors besides servant leadership affecting hospital performance, such as the quality of

| Model | \(R\) | \(R^2\) | Adjusted \(R^2\) | Std. error of the estimate |
|-------|------|------|----------------|-------------------------|
| 1     | 0.748 | 0.559 | 0.558          | 6.08537                 |

*Note: \(a\) means predictors: (constant), servant leadership; \(b\) means dependent variable: organizational performance.*

| Table 6. Model summary \(b\) | Source: Authors’ elaboration. |
|----------------------------|--------------------------------|

http://dx.doi.org/10.21511/ppm.19(2).2021.40
In this study, servant leadership contributes to the performance of the regional general hospital. It means leadership highly determines performance improvement. Servant leadership is widely used in the health industry in which this concept grows and develops due to the complex condition, risk, and transparency needs in this sector (Mustard, 2020). The health industry is full of risks so that it needs leadership support in its management. Servant leadership is a leadership style suitable for protection/safety (Schopf et al., 2021). It shows that servant leadership is highly appropriate to be applied in hospitals, especially the government hospitals that have been in the spotlight because of their poor performance.

Servant leaders have a strong mind and heart capable of serving their subordinates (Mustard, 2020). The intended subordinates are healthcare workers at the hospital. Thus, servant leadership helps improve hospital performance. In health organizations, the quality of performance highly depends on the quality of every professional who works in it (Gaspar et al., 2021). Organizational performance covers customer service, cost management, quality, productivity, and asset management performance (Durst et al., 2019). Organizational performance needs the support of the organization in terms of providing bonuses, compensation, and incentives following the goals and utilization to enable the organization to maximize performance and continue to grow (Lovett et al., 2021). To achieve high organizational performance, a hospital needs to take advantage of some remuneration strategies, improve services and provide an affordable cost for customers (Hidayah et al., 2020).

Provision of rewards to healthcare workers indirectly affects their performance and it can be done by leaders. Servant leadership has a greater effect on employee job satisfaction (Eva et al., 2021). This leadership style can encourage and support subordinates to have high performance. Besides, leadership support is highly needed. Leadership can be developed through organizational support in communication and trust in one’s ability to be an effective leader (Bush et al., 2020). The results of this study are expected to contribute to the health sector, especially for health service providers by promoting leadership behavior.
CONCLUSION

This study found that servant leadership applied in regional general hospitals is different from the character possessed by servant leadership as all decisions in implementing duties of health workers in hospitals should not all be discussed with the leader. In general, to improve hospital performance, a leader with serving character is needed, but not each health sector in a hospital fully requires such a character. For example, in making decisions related to medical performance, there is no need to involve hospital leadership. It is significantly different if it is associated with the performance of the hospital in general, which needs directions and decisions from the top leadership of the organization. The results of this study are expected to contribute to the development and improvement of hospital performance through related variables and can be applied in all health services.

AUTHOR CONTRIBUTIONS

Conceptualization: Daswati.
Data curation: Daswati, Yoberth Kornelius.
Formal analysis: Pricylia Chintya Dewi Buntuang.
Funding acquisition: Daswati, Syahruddin Hattab.
Investigation: Daswati, Yoberth Kornelius.
Methodology: Pricylia Chintya Dewi Buntuang.
Project administration: Daswati, Syahruddin Hattab.
Resources: Pricylia Chintya Dewi Buntuang.
Software: Pricylia Chintya Dewi Buntuang.
Supervision: Daswati, Syahruddin Hattab.
Validation: Daswati, Pricylia Chintya Dewi Buntuang, Syahruddin Hattab, Yoberth Kornelius.
Visualization: Pricylia Chintya Dewi Buntuang, Syahruddin Hattab.
Writing – original draft: Daswati, Pricylia Chintya Dewi Buntuang.
Writing – review & editing: Daswati, Pricylia Chintya Dewi Buntuang, Syahruddin Hattab, Yoberth Kornelius.

REFERENCES

1. Abubakar, A. M., Elrehail, H., Alatailat, M. A., & Elçi, A. (2019). Knowledge management, decision-making style and organizational performance. Journal of Innovation & Knowledge, 4(2), 104-114. https://doi.org/10.1016/j.jik.2017.07.003
2. Adeniji, C., Adeyeye, O., Iyiola, O., Olokundun, M., Borishade, T., Falola, H., & Salau, O. (2018). Data on impact of technological change on employees’ cognitive attitude and organizational performance. Data in Brief, 18, 1360-1364. https://doi.org/10.1016/j.dib.2018.04.024
3. Alolayyan, M. N., Alyahya, M. S., Alalawin, A. H., Shoukat, A., & Nusairat, F. T. (2020). Health information technology and hospital performance the role of health information quality in teaching hospitals. Helyon, 6(10), e05040. https://doi.org/10.1016/j.helylon.2020.e05040
4. Bednárová, M., Hiršová, M., & Komárková, L. (2019). Leadership style and its influence on employee identification with the organisation: A study from a Czech hospital. Kontakt, 21(3), 279-285. https://doi.org/10.32725/kont.2019.035
5. Bush, S., Michalek, D., & Francis, L. (2020). Perceived Leadership Styles, Outcomes of Leadership, and Self-Efficacy Among Nurse Leaders: A Hospital-Based Survey to Inform Leadership Development at a US Regional Medical Center. Nurse Leader. https://doi.org/10.1016/j.mnl.2020.07.010
6. Çalış Duman, M., & Akdemir, B. (2021). A study to determine the effects of industry 4.0 technology components on organizational performance. Technological Forecasting and Social Change, 167, 120615. https://doi.org/10.1016/j.techfore.2021.120615
7. Chavez, R., Yu, W., Jacobs, M. A., & Feng, M. (2017). Manufacturing capability and organizational performance: The role of entrepreneurial orientation. International Journal of Production Economics, 184, 33–46. https://doi.org/10.1016/j.ijpe.2016.10.028
8. Chen, L., Jia, F., Li, T., & Zhang, T. (2021). Supply chain leadership and firm performance: A meta-analysis. International Journal of Production Economics, 235,
10. Durst, S., Hinteregger, C., & Zieba, M. (2019). The linkage between knowledge risk management and organizational performance. Journal of Business Research, 105, 1-10. https://doi.org/10.1016/j.jbusres.2019.08.002

11. Delshab, V., Pyun, D. Y., Kerwin, S., & Cegarra-Navarro, J.-G. (2020). The impact of unlearning context on organizational performance through knowledge management: A case of community sport clubs in Iran. Sport Management Review, https://doi.org/10.1016/j.smr.2020.02.001

12. Felício, T., Samagaio, A., & Torres, I. (2021). Perception of quality, cost-effectiveness, and organizational performance of private hospitals. Enfermeria Clinica, 30(supplement 6), 179-182. https://doi.org/10.1016/j.enfcl.2020.06.077

13. Govender, S., Gerwel Proches, C., & Lim, S. (2020). Effects of co-creation on organizational performance of small and medium manufacturers. Journal of Business Research, 109, 574-584. https://doi.org/10.1016/j.jbusres.2019.03.055

14. Govender, S., Gervel Proches, C. N., & Kader, A. (2018). Examining leadership as a strategy to enhance health care service delivery in regional hospitals in South Africa. Journal of Multidisciplinary Healthcare, 11, 157-166. https://doi.org/10.2147/JMDH.S151534

15. Ghozali, I. (2020). The impact of unlearning context on organizational performance through knowledge management: A case of community sport clubs in Iran. Sport Management Review, https://doi.org/10.1016/j.smr.2020.02.001

16. Govender, S. (2016). The role of leadership in healthcare service delivery at Addington Hospital. (Master's Thesis). University of Kwazulu-Natal. Retrieved from https://researchspace.ukzn.ac.za/handle/10413/12928

17. Govender, S., Gervel Proches, C. N., & Kader, A. (2018). Examining leadership as a strategy to enhance health care service delivery in regional hospitals in South Africa. Journal of Multidisciplinary Healthcare, 11, 157-166. https://doi.org/10.2147/JMDH.S151534

18. Hamann, P. M., & Schiemann, F. (2021). Perception of community sport clubs in Iran. Sport Journal, 105, 186-197. https://doi.org/10.1016/j.enfcl.2020.06.077

19. Hariyanti, T., Pitoyo, A. Z., & Indriani, W. (2020). Ideal leadership style of the police hospital in a transition period: A phenomenological study. Enfermería Clínica, 30(supplement 6), 197-200. https://doi.org/10.1016/j.enfcl.2020.06.044

20. Heale, R., & Twycross, A. (2015). Validity and reliability in quantitative studies. Evidence-Based Nursing, 18(3), 66-67. https://doi.org/10.1136/eb-2015-102129

21. Hidayah, N., Dewi, A., & Listiowati, E. (2020). Remuneration as a strategy to improve service quality, cost-effectiveness, and organizational performance of private hospitals. Enfermeria Clinica, 30(supplement 6), 179-182. https://doi.org/10.1016/j.enfcl.2020.06.077

22. Huang, C.-C., & Huang, S.-M. (2020). External and internal capabilities and organizational performance: Does intellectual capital matter? Asia Pacific Management Review, 25(2), 111-120. https://doi.org/10.1016/j.apmrv.2019.12.001

23. Jiang, G. F., & Holburn, G. L. F. (2018). Organizational performance feedback effects and international expansion. Journal of Business Research, 90, 48-58. https://doi.org/10.1016/j.jbusres.2018.04.034

24. Kim, D. W., Trimi, S., Hong, S. G., & Lim, S. (2020). Effects of co-creation on organizational performance. Asian Journal of Management Research, 109, 574-584. https://doi.org/10.1016/j.jbusres.2019.03.055

25. Kim, J. (2020). When Organizational Performance Matters for Personnel Decisions: Executives’ Career Patterns in a Conglomerate. Management Accounting Research, 49, 100695. https://doi.org/10.1016/j.mar.2020.100695

26. Lemoine, G. I., Eva, N., Meuser, J. D., & Falotico, P. (2020). Organizational performance with a broader focus: The case for a stakeholder approach to leadership. Business Horizons, 64(4), 401-413. https://doi.org/10.1016/j.bushor.2020.10.007

27. Lestari, T. R. P. (2010). Pelayanan Rumah Sakit bagi Masyarakat Miskin (Studi Kasus di Enam Wilayah Indonesia). Kesmas: Jurnal KesEAtnan Masyarakat Nasional – National Public Health Journal, 5(1), 9-16. (In Indonesian). Retrieved from http://journal.fkm. ui.ac.id/kesmas/article/view/156

28. Li, P., Sun, J.-M., Taris, T. W., Xing, L., & Peeters, M. C. W. (2021). Country differences in the relationship between leadership and employee engagement: A meta-analysis. The Leadership Quarterly, 32(1), 101458. https://doi.org/10.1016/j.leaqua.2020.101458

29. Liden, R. C., Wayne, S. J., Meuser, J. D., Hu, J., Wu, J., & Liao, C. (2015). Servant leadership: Validation of a short form of the SL-28. The Leadership Quarterly, 26(2), 254-269. http://dx.doi.org/10.1016/j.leaqua.2014.12.002

30. Liden, R. C., Wayne, S. J., Zhao, H., & Henderson, D. (2008). Servant leadership: Development of a multidimensional measure and multi-level assessment. The Leadership Quarterly, 19(2), 161-177. https://doi.org/10.1016/j.leaqua.2008.01.006

31. Listiyono, R. A. (2015). Studi Deskriptif Tentang Kualitas Pelayanan di Rumah Sakit Umum Dr. Wahidin Sudiro Husodo Kota Mojokerto Pasca Menjadi Rumah Sakit Tipe B. Jurnal Kebijakan Dan Manajemen Publik, 1(1), 2-7. (In Indonesian). Retrieved from

http://dx.doi.org/10.2147/jppm.19(2).2021.40
32. Lovett, S., Rasheed, A. A., & Hou, W. (2021). Stock options, restricted stock, salary, or bonus? Managing CEO compensation to maximize organizational performance. Business Horizons. https://doi.org/10.1016/j.bushor.2021.02.041

33. Lythreatis, S., Mostafa, A. M. S., LoBiondo-Wood, G., & Haber, J. (2020). Servant leadership and family supportiveness: The role of support and family outcomes. Journal of Nursing Research in Canada. https://doi.org/10.1016/j.jnrcan.2019.03.019

34. Meslec, N., Curseu, P. L., Fodor, O. C., & Kenda, R. (2020). Technological antecedents of entrepreneurship and its consequences for organizational performance. Technological Forecasting and Social Change, 147, 22-35. https://doi.org/10.1016/j.techfore.2019.06.018

35. Martin-Rojas, R., Garcia-Morales, O. C., & Kenda, R. (2020). Effects of charismatic leadership and rewards on individual performance. The Leadership Quarterly, 31(6), 101423. https://doi.org/10.1016/j.leaqua.2020.101423

36. Murphy, C., Campbell, E., Boland, P., & Sick, B. (2020). The leadership baseline: Assessing servant leadership and leadership self-efficacy in first-year health professions students. Journal of Interprofessional Education & Practice, 20, 100354. https://doi.org/10.1016/j.jipep.2020.100354

37. Mustapha, H., & Abdelheq, L. (2018). The Role of Investment in Intellectual Capital in improving organizational performance considering knowledge management: The case study of wireless communication sector in Algeria. Arab Economic and Business Journal, 13(1), 73-91. https://doi.org/10.1016/j.aebj.2018.02.002

38. Mustard, R. W. (2020). Servant Leadership in the Veterans Health Administration. Nurse Leader, 18(2), 178-180. https://doi.org/10.1016/j.nml.2019.03.019

39. Oever, K. van den, & Beerens, B. (2020). Does task-related conflict mediate the board gender diversity-organizational performance relationship? European Management Journal. https://doi.org/10.1016/j.emj.2020.09.008

40. Oyemomi, O., Liu, S., Neaga, I., Chen, H., & Nakpodia, F. (2019). How cultural impact on knowledge sharing contributes to organizational performance: Using the fsQCA approach. Journal of Business Research, 94, 313-319. https://doi.org/10.1016/j.jbusres.2018.02.027

41. Peng, X., Lee, S., & Lu, Z. (2020). Employees' perceived job performance, organizational identification, and pro-environmental behaviors in the hotel industry. International Journal of Hospitality Management, 90, 102632. https://doi.org/10.1016/j.ijhm.2020.102632

42. Poister, T. H. (2008). Measuring Performance in Public and Nonprofit Organizations. John Wiley & Sons.

43. Poister, T. H. (2010). The future of strategic planning in the public sector: Linking strategic management and performance. Public Administration Review, 70(6), 246-254. https://doi.org/10.1111/j.1540-6210.2010.02284.x

44. Por Pan, T., Trakulmutta, J., & Youravong, N. (2020). Self-perception of leadership style of dentists: Heads of dental departments in community hospitals, Southern Thailand. International Dental Journal, 70(3), 193-200. https://doi.org/10.1111/idj.12544

45. Riduwan. (2010). Metode dan Teknik Menyusun Tesis. Alfabeta. (In Indonesian).

46. Subramony, M., Segers, J., Chadwick, C., & Shyamsunder, A. (2018). Leadership development practice bundles and organizational performance: The mediating role of human capital and social capital. Journal of Business Research, 83, 120-129. https://doi.org/10.1016/j.jbusres.2017.09.044
55. Timofe, M. P., Ungureanu, M. I., Cetean, A., Mocan, F., & Albu, S. (2017). Leadership practices and perceptions in oral healthcare: A scoping review. *Oral Health and Dental Management, 16*(1), 1-7. Retrieved from https://www.long-dom.org/open-access/leadership-practices-and-perceptions-in-oral-healthcare-a-scoping-review-.pdf

56. Torre, E. D. (2019). Collective voice mechanisms, HRM practices and organizational performance in Italian manufacturing firms. *European Management Journal, 37*(3), 398-410. https://doi.org/10.1016/j.emj.2018.09.001

57. Wholey, J. S., Hatry, H. P., & Newcomer, K. E. (2010). *Handbook of practical program evaluation* (3rd ed.). John Wiley & Sons.

58. Worley, J. T., Harenberg, S., & Vosloo, J. (2020). The relationship between peer servant leadership, social identity, and team cohesion in intercollegiate athletics. *Psychology of Sport and Exercise, 49*, 101712. https://doi.org/10.1016/j.psychsport.2020.101712

59. Ying, S., Sindakis, S., Aggarwal, S., Chen, C., & Su, J. (2020). Managing big data in the retail industry of Singapore: Examining the impact on customer satisfaction and organizational performance. *European Management Journal, 39*(3), 390-400. https://doi.org/10.1016/j.emj.2020.04.001

60. Yunis, M., Tarhini, A., & Kassar, A. (2018). The role of ICT and innovation in enhancing organizational performance: The catalysing effect of corporate entrepreneurship. *Journal of Business Research, 88*, 344-356. https://doi.org/10.1016/j.jbusres.2017.12.030