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ORIGINAL ARTICLE

PRELIMINARY DEVELOPMENT OF ASSESSMENT TOOL OF LEADERSHIP STYLE

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ABSTRACT

Background: Leadership might be hard to define, but it's easy to recognize. In nursing, there are certain skills required from nurse managers so as to be able to use these effective leadership styles. The skills include the ability to create an organization culture that combines high-quality health care, patient/employee safety, highly developed collaborative and team-building skills. This paper presents the preliminary study of the development of the assessment leadership tool. Methodology: Questionnaire for leadership styles was adapted from Northouse (2014) while working motivation was adapted from Purohit et al., (2016). The modification was done for leadership styles questionnaire from 35 modified into 48 question and tool on nurses' motivation from 19 items modified into 28 items using literature guidance and expert opinion. Results: Preliminary development of tool reliability test using internal consistency cronbach's alpha result shown that for leadership styles questionnaires which are consisted of 48 items is ($\alpha = 0.77$) and working motivation consisted of 28 items is ($\alpha = 0.77$) 0.70). Minor modification needed after the literature searching and analysis of pre-test stage, the discussion with expert person after they go through the questionnaires also suggested some additional info are needed. Conclusion: Assessment on working motivation among nurses is also recommended to overcome the issues on working retention among them. Investigation regarding which appropriate leadership style need to be explored and the level of working motivation among nursing staff should be monitored regularly.

Keywords: Leadership Style, Assessment Tool, Nurse Manager, Healthcare

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INTRODUCTION

Every organisation has different levels of management to undertake and to ensure the activity of that organisation is working smoothly. The absence of effective leadership is equally dramatic in its effects. Without a good leadership manager, organisations will deviate from their primary objectives, such as excellent patient care (Ali, Jangga, Ismail, Kamal, & Ali, 2015)⁵.

In a hospital setting, nurses represent more than 50 per cent of the main workforce and how well nurses are motivated directly affect the quality of patient care delivery and the outcomes (Storch, Schick Makaroff, Pauly, & Newton, 2013)¹⁹. Therefore, a nursing manager is considered as the vital individual needed to lead the nursing team. Managing nursing staff is not a simple task; the manager, herself/himself, should havegood leadership values to ensure that the team will be well-led (Saleem, 2015)¹⁸.

The leadership styles of the nursing managers are essential for nurses in daily work while at the same time motivating them to achieve a high quality of patient care (Yildiz, Ayhan, & Erdogmuş, 2009)²⁰. According to Cheung & Ching (2014), a team leader's experience has been found to increase working performance among team members and their work relationship⁸.

The leadership styles and attitudes affected the outcomes of the views of the employees towards their jobs (Curtis, Vries, & Sheerin (2011); Saleem, 2015)^{9,19}. Same goes to the nurse's team whereby the excellent leaders should enhance nurses' in their working motivation, and quality of health care services in hospital (Saleem, 2015) and Hutchinson &

Jackson (2013) revealed that transformational leadership has a positive impact on job satisfaction and transactional leadership has a negative effect on job satisfaction^{19,12}. They also suggested that perceived organisational politics partially mediate the relationship between leadership styles and job satisfaction. However, in Malaysia, various leadership styles are being practised in managing nursing staff in hospitals and related healthcare organisations.

There are few styles of leadership such as autocratic, bureaucratic, laissez-faire, charismatic, democratic, participative, situational, transactional and transformational (Avolio, Walumbwa, & Weber, 2009) while nursing leaders tend to use any leadership style that is suitable and comfortable to them³. A few methods have positive values, while some are negative. The styles with negative values will promote negative impacts toward team and will create various problems among the team members (Curtis &O'Connell, 2011)¹⁰.

Most leaders did not seemto be aware that their leadership styles may not be appropriate to practice because they are notequipped with the formal training in leadership styles (Lankshear, Kerr, Spence Laschinger, & Wong, 2013)¹⁵. However, the transformational leadership style contributes to positive impacts and plays a crucial role in developing the team (Abualrub&Alghamdi, 2012)². Indeed, the nature of employees' relationships with their managers determines how long the employees remain with the organisation and how productive they are within the organisation.

Current research related to leadership styles implementation, particularly among nurses, were minimal. In most cases, a nursing leader depends mostly on their own experiences or the orders from the superior management to

manage their staffs. Knowledge about the appropriate type of leadership styles engagedby nurse managers is still unclear. On the other hand, there are no proper or gazetted written orders for each nursing manager to apply any style of leadership in managing their staff. Thus, specific tools are needed to assess the leadership styles applied by the nurse managers and their impacts to the nursing staffs.

METHODOLOGY

The validation process is done to validate two sets of questionnaires; one set of leadership styles questionnaire and one set of working motivation questionnaire. "The Working Motivation" questionnaires (Purohit et al., 2016) are adopted and adapted to assess working motivation among nurses while "The Leadership Questionnaire (LQ)" by Northouse (2014) adopted and adapted to measure the frequency of behaviours of the leaders, so it is very close to the actual environment and has high validity¹⁶.

Firstly, face validation was done followed by back to back translation, pilot study and reliability test. Face validity was achieved after the questionnaires were modified based on the discussion and suggestion given by the two experts of the related fields. Back-to-back translation from English to the Malay languagewas doneto ensure that the questionnaires are suitable with Malaysian respondents. A pilot test was conducted with 30 respondents for each set of questionnaires. After modifying the questionnaires, respondents from the target group were selectedto undertakea pre-test. A short briefing session regarding the instructions of the questionnaires before was done the

respondents started to answer it according to the allocated time, which is 30 minutes. After the pre-test, all respondents were invited to their share opinions towards the questionnaires. Reliability test was the last step taken to validate the questionnaires. The data from pre-test was collected and analysed using Statistical Package for the Social Sciences (SPSS) version 24. The purpose of this stage wasto look for the reliability of the questionnaires, and two analysis was done; the principal component analysis and Cronbach's Alpha.

The quantitative data were also analysed using SPSS. Quantitative data analysis such including descriptive statistics means, percentages, medians, ranges, and variances were calculated based on appropriateness for variables. These analyses researchers to develop an initial understanding of the data collected during the quantitative phase. The ethical clearance from the National Medical Research is obtained. An approval from the director/dean of teaching hospitals about data collection is given. Written consent was given to each respondent before they were involved in this study. Their participation in the study was optional as they were allowed to pull out from the study any time with their data remained confidential.

All data and responses gathered were mainly used for the sake of research purposes and will be disposed of after the results of the study were published. Token of appreciation is given to all respondents. The data collection was done within guidelines to avoid biases and vulnerability. Explanation of the procedure is provided to minimise the potential of stigmatisation.

RESULTS

Minor modifications were done to the questionnaire as suggested by the experts.In the first stage, a questionnaire to assess working motivation with 26 items, was adopted and adapted. However, the questionnaire was modified to suit the local context by adding 7 new items which contribute to a total of 33 items in the final questionnaires.

The adapted questionnaire consisted of 33 itemswere distributed to all target respondent. According to the respondents' feedbacks, words simplification was needed with the questionnaire to ensure optimum understanding can be achieved. While for the leadership styles questionnaire, the author adopted and adapted the questionnaire from The Leadership Questionnaire (LQ) by Northouse (2014) but focusing only on 36 items for full range Leadership Model factors¹⁶.

The questionnaire was modified as 16 items were added, which made the total of the item to 52 items for the leadership styles section. The questionnaire was translated from English to Malay language version to suit with the author target group. Statistical analysis was done to look for the questionnaire's reliability. The result of the reliability testshowed that for leadership styles questionnaires which consisted of 52 items ($\alpha = 0.77$) and working motivation included 33 items ($\alpha = 0.70$).

The questionnaires were more suitable for the use of the target group based on the results after the validation process was taken. The questionnaires on leadership styles are appropriate to assess which type of leadership style is being used by a particular leader. In contrast, thequestionnaireon working

motivation is suitable to use to assess working motivation among nurses. Thus, with these questionnaires, nursing leaders should be able to practice and applyan appropriate leadership style to reduce stress and improve motivation among the nursing team.

DISCUSSION

The main purpose of this process is to validate two sets of survey questions on the type of leadership used by a leader and also a questionnaire on the level of work motivation. After the validation process is carried out in detail, it is found that the questionnaire is more suitable for use in the area suggested by the researcher. This survey question is ideal for use as a method to identify the relationship between the level of work motivation among nurses and the type of leadership used by their leaders. Motivation to work plays a significant role in determining the competence of nurses in carrying out their duties.

Goktepe et al.(2020) in their study on the relationship between nurses' work-related variables colleague solidarity and job motivation among 172 nurses working at a private hospital in Turkey founded that three sub-dimensions of the Colleague Solidarity Scale for Nurses, salary and career opportunities were essential factors affecting job motivation¹¹.

The researcher suggested that to increase nurses' job motivation; nurse managers should work to improve collegial solidarity, create career opportunities and develop salary policies. The development of tools to analyse the type of leadership used and its relation to working motivation among nurses provides little space for the administration to conduct

regular surveys and provide early intervention as problems are detected earlier.

Ethical clearance: Ethical clearance was obtained from Malaysia National University for project code: ff-2019-380 with Ethic committee ref no: UKM.FPR.SPI800-2/28/173

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Fund for the study: This is self-funded study.

CONCLUSION

This report presented methodological issues associated with the validity and reliability of the questionnaire to be used on studies regarding leadership styles and working motivation.

The author adapted and modified the questionnaires to suit the target group of the study. Therefore, the validity and reliability process of the research contributed significantly to the development of tools used to assist the researcher. Validation and reliability test result shown that the questionnaires are valid and reliable to assess the leadership styles and working motivation.

In conclusion, with these valid questionnaires, hospital management should assess their nurse managers leadership styles and nurses working motivation to improve their quality of nursing management and working motivation among nursing staffs. Research on leadership stylesis beneficial to nurse managers as it provides guidance related to suitable management styles to manage nursing staffs.

Evaluation of working motivation among nurses is also recommended to overcome the issues of

working retention among nurses. In the future, further investigations related to specific and proper leadership styles need to be explored along with the working motivation among nursing staffs.

Leadership styles are related to nursing and healthcare, and new methods are emerging, some types are in their contemporary forms. Leading is not a 'one-style' practice which explains the reasons why leaders do not stick to one specific leadership style for all situations.

might Leaders need to adapt their management approaches and ways to handle matters based on the situations, and changes occur in their workplace. All leaders should have essential characteristics such as confidence, integrity, honesty, bravery and enthusiasm regardless of the type of leadership that they choose. Who leaders are and what they do, particularly in times of emergency and tension, are the actual characteristics of their leadership styles.

Authoritarian styles are still the most preferred styles choose by leaders to use in leading staff, although the relationship between that leadership style and low of job motivation between staff exists. The management team should do an investigation on the staffs' working motivation level regularly. The management should find out the factors that contribute to these issues and do an intervention to overcome the problems among staff.

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