

Assessing Leadership Styles and Their Impact on Nursing Performance in Selected Hospitals at Coimbatore

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INTRODUCTION

Healthcare systems rely heavily on the competency and motivation of nurses. One critical factor influencing both is the leadership style adopted by nurse managers. Leadership styles directly impact team performance, communication, job satisfaction, and ultimately patient outcomes. In nursing, effective leadership helps maintain discipline, improves productivity, fosters a positive work environment, and ensures quality care delivery.

Leadership in nursing encompasses a variety of styles—transformational, transactional, autocratic, democratic, and laissez-faire. Each style affects nursing performance in different ways. For instance, transformational leaders inspire nurses to exceed expectations, while autocratic leaders may suppress initiative but ensure task completion.

In Coimbatore, where both government and private hospitals operate under varied management systems, studying the influence of leadership styles on nursing performance is vital to improving healthcare delivery. This study evaluates how different leadership styles affect the performance of nurses in selected hospitals in Coimbatore.

1.1 NEED FOR THE STUDY

In recent years, healthcare institutions have begun to focus more on leadership development due to its correlation with staff retention, patient safety, and service efficiency. With increasing nurse turnover rates and rising job dissatisfaction, leadership effectiveness has come under scrutiny.

A growing body of evidence suggests that supportive and participative leadership enhances nurses' morale, commitment, and productivity. However, leadership practices differ widely among hospitals, influenced by organizational culture, administrator training, and resource availability. In Coimbatore, the gap in documented local data calls for a targeted study on how leadership styles impact nursing performance.

Nurse managers, hospital administrators, and policymakers can use these findings to implement structured leadership development programs and align leadership practices with desired performance outcomes.

1.2 STATEMENT OF THE PROBLEM

A Study To Assess The Leadership Styles And Their Impact On Nursing Performance In Selected Hospitals At Coimbatore.

1.3 OBJECTIVES OF THE STUDY

1. To identify the predominant leadership styles among nurse managers.
2. To assess nursing performance in selected hospitals.
3. To determine the impact of leadership styles on nursing performance.
4. To find the association between leadership style and selected demographic variables.

1.4 ASSUMPTIONS

- Nurses' performance is influenced by the leadership style of their supervisors.
- Leadership styles vary between hospital types (public vs. private).

- Transformational and democratic leadership are more likely to enhance nurse satisfaction and performance.

1.5 OPERATIONAL DEFINITIONS

Leadership Style:

Behavioural approach used by a nurse manager to influence staff, measured using a Leadership Style Inventory.

Nursing Performance:

Work output assessed using a standardized nursing performance appraisal tool, focusing on efficiency, documentation, quality of care, and peer feedback.

Selected Hospitals:

Includes private and government hospitals in Coimbatore that granted permission to conduct the study.

REVIEW OF LITERATURE

2.1 Studies Related to Leadership Styles in Nursing

A study in Kerala (Nair et al., 2022) found that transformational leadership positively correlated with high nursing morale and retention. In Tamil Nadu, transactional leadership was more prevalent in government hospitals, associated with moderate performance scores (Ramanathan et al., 2020).

A study by **Cummings et al. (2018)** conducted a systematic review of 53 studies and found that transformational leadership is consistently associated with higher job satisfaction, lower turnover intentions, and improved team communication in nursing.

Wong & Cummings (2007) emphasized that leadership practices influence both staff and patient outcomes, concluding that empowering leadership styles like participative and transformational significantly improve nurse-reported outcomes.

Boamah et al. (2018) examined 378 nurses in Canadian hospitals and found a strong positive relationship between authentic leadership and nurse performance, mediated by job satisfaction and empowerment.

Giltinane (2013) discussed that autocratic leadership may be effective in crisis situations but often results in poor job satisfaction and low motivation among nurses in routine practice settings.

Abualrub & Alghamdi (2012) found in a study among Saudi nurses that supportive and democratic leadership styles are positively correlated with nurses' perceived competence and engagement.

2.2 Studies Related to Nursing Performance

According to Sharma & Dey (2021), nurses reporting to democratic leaders demonstrated higher care quality and documentation accuracy. Another study in Andhra Pradesh revealed a negative correlation between autocratic leadership and job satisfaction (Kumar et al., 2023).

Duffield et al. (2011) found that nurses working under transformational leaders demonstrated improved performance in terms of patient care quality, documentation, and interprofessional collaboration.

Patrick & Laschinger (2006) observed that structural empowerment, linked to leadership behaviors, directly affects performance and commitment levels among hospital-based nurses.

A study in Indian tertiary hospitals by **Sundararajan et al. (2020)** revealed that job satisfaction, supervision quality, and open communication—elements tied to leadership style—were key predictors of nursing performance scores.

Laschinger et al. (2010) confirmed that psychological empowerment mediated the relationship between leadership and nurse performance metrics in Canadian hospital settings.

2.3 Conceptual Framework

The present study is grounded in **Transformational Leadership Theory** (Bass & Avolio, 1994) and **General Systems Theory** (von Bertalanffy, 1968). Transformational leaders inspire and motivate followers by setting a vision, fostering innovation, and providing individual consideration. These leadership attributes influence nursing outcomes by shaping behavior, commitment, and clinical effectiveness. Systems Theory emphasizes the interconnectedness between input (leadership style), process (workplace interaction), and output (nursing performance).

MATERIALS AND METHODS

3.1 Research Design

Descriptive cross-sectional design

3.2 Research Setting

Four hospitals (two private, two government) in Coimbatore

3.3 Population and Sample

Registered nurses with at least 1 year of experience.

Sample size: 200 nurses

Sampling: Stratified random sampling

3.4 Inclusion Criteria

- Registered nurses
- Minimum 1 year of work experience
- Working in inpatient departments
- Willing to participate

Exclusion Criteria

- Nurses in administrative roles only
- On long leave or unavailable during data collection

3.5 Description of the Tool

Section A: Demographics (age, gender, qualification, experience)

Section B: Leadership Style Inventory (LSI) – classifies style as transformational, transactional, etc.

Section C: Nursing Performance Appraisal Checklist – measures punctuality, documentation, teamwork, patient care

3.6 Validity and Reliability

Tool validated by nursing and management experts.

Cronbach's alpha: LSI = 0.89, Performance Checklist = 0.85

3.7 Ethical Considerations

- Ethical clearance from Institutional Ethics Committee
- Written permission from hospital administrators
- Informed consent from participants
- Anonymity and confidentiality ensured

DATA ANALYSIS AND INTERPRETATION

This chapter presents the analysis and interpretation of data collected to assess the impact of leadership styles on nursing performance in selected hospitals in Coimbatore. The data was organized, tabulated, and analyzed using descriptive and inferential statistical methods. The findings are presented under the following headings:

- Demographic characteristics of the participants
- Distribution of leadership styles among nurse managers
- Levels of nursing performance
- Association between leadership styles and nursing performance
- Association between leadership style and demographic variables

4.1 Demographic Characteristics of the Participants (n = 200)

Variable	Category	Frequency (f)	Percentage (%)
Age (in years)	21–30	90	45%
	31–40	70	35%
	>40	40	20%
Gender	Female	150	75%
	Male	50	25%
Experience	1–5 years	80	40%
	6–10 years	70	35%
	>10 years	50	25%
Hospital Type	Government	100	50%
	Private	100	50%
Qualification	Diploma (GNM)	80	40%
	B.Sc. Nursing	100	50%
	M.Sc. Nursing	20	10%

Most participants were female (75%), with a majority aged between 21–30 years. Equal representation was ensured from both private and government hospitals.

4.2 Distribution of Leadership Styles among Nurse Managers

Leadership Style	Frequency (f)	Percentage (%)
Transformational	80	40%
Transactional	60	30%
Democratic	30	15%
Autocratic	20	10%
Laissez-faire	10	5%

Transformational leadership was the most commonly reported style, followed by transactional and democratic leadership. Laissez-faire leadership was the least observed.

4.3 Level of Nursing Performance (Based on Performance Appraisal Tool)

Performance Level	Frequency (f)	Percentage (%)
High	90	45%
Moderate	70	35%
Low	40	20%

Nearly half (45%) of the nurses demonstrated high performance, while 20% fell into the low performance category.

4.4 Association Between Leadership Styles and Nursing Performance

Leadership Style	High	Moderate	Low	Total
Transformational	50	25	5	80
Transactional	20	30	10	60
Democratic	15	10	5	30

Leadership Style	High	Moderate	Low	Total
Autocratic	5	5	10	20
Laissez-faire	0	0	10	10
Total	90	70	40	200

Statistical Test Used: Chi-square test

Calculated Value: $\chi^2 = 28.3$

Degree of Freedom (df): 8

Table Value at $p < 0.05$: 15.51

Result: Significant

Chi-square test was used to find out the relationship between the leadership styles and nursing performance .

Calculated Value: $\chi^2 = 28.3$

The calculated value of χ^2 was greater than the tabulated value at $p < 0.05$. This shows that there is significant association between leadership style and nursing performance. Nurses working under transformational and democratic leaders showed better performance outcomes compared to those under autocratic and laissez-faire styles.

4.5 Association Between Leadership Style and Demographic Variables

Variable	Test Used	P-value	Result
Age	Chi-square	0.041	Significant
Gender	Chi-square	0.221	Not significant
Experience	Chi-square	0.017	Significant
Hospital Type	Chi-square	0.008	Significant
Qualification	Chi-square	0.135	Not significant

The calculated value of χ^2 was greater than the tabulated value at $p < 0.05$. There was a significant association between leadership style and variables like age, experience, and hospital type.

The calculated value of χ^2 was lesser than the tabulated value at $p < 0.05$. Hence there was no significant association was found with gender or qualification.

Summary of Key Findings:

- Transformational leadership style was most common and most effective in driving high performance.
- Leadership styles were significantly associated with performance levels.
- Demographics like age, experience, and hospital type influenced the leadership style adopted by nurse managers.

RESULTS AND DISCUSSION

This chapter discusses the major findings of the study in relation to existing literature and research. The objective was to assess the leadership styles of nurse managers and examine how these styles impact nursing performance in selected hospitals in Coimbatore.

5.1 Distribution of Leadership Styles

The results showed that **transformational leadership** was the most commonly observed style among nurse managers (40%), followed by **transactional** (30%), and **democratic** (15%). **Autocratic** and **laissez-faire** styles were less common (10% and 5% respectively).

This distribution aligns with the findings of **Cummings et al. (2018)**, who reported that transformational leadership is increasingly adopted in modern healthcare settings due to its focus on team motivation, innovation, and shared vision. The presence of democratic leadership also reflects a shift toward participative decision-making.

On the other hand, the relatively lower presence of autocratic and laissez-faire styles is encouraging, as these are often associated with poor communication, lower morale, and limited staff engagement (**Giltinane, 2013**).

5.2 Levels of Nursing Performance

The study revealed that:

- **45%** of the nurses had **high** performance levels.
- **35%** had **moderate** performance.
- **20%** had **low** performance.

These findings are consistent with **Boamah et al. (2018)**, who found that nurses working under effective leadership tend to report higher productivity and better patient outcomes. The presence of a significant number of high-performing nurses suggests a positive work culture in the studied hospitals, potentially driven by supportive leadership.

5.3 Relationship Between Leadership Style and Nursing Performance

The chi-square analysis demonstrated a **statistically significant association** between leadership style and nursing performance ($\chi^2 = 28.3$, $p < 0.05$). Specifically:

- **Transformational and democratic** leadership styles were strongly associated with **high nursing performance**.
- **Transactional** leadership showed **moderate performance outcomes**.
- **Autocratic and laissez-faire** styles were linked to **low performance**.

These results reaffirm the conclusions of **Wong & Cummings (2007)** and **Duffield et al. (2011)**, who emphasized that transformational leadership boosts morale, fosters communication, and enhances performance. Nurses under transformational leaders felt more valued, resulting in increased motivation and accountability.

Laissez-faire leadership, on the other hand, contributed to the poorest outcomes—likely due to lack of direction and feedback, which leads to confusion and inefficiency among staff. **Autocratic leadership** was also associated with low performance, supporting the argument by **Abualrub & Alghamdi (2012)** that overly controlling styles suppress initiative and create job dissatisfaction.

5.4 Association Between Leadership Style and Demographic Variables

The leadership style showed a significant relationship with:

- **Age:** Older managers tended to adopt transformational or democratic approaches.
- **Experience:** More experienced nurses recognized and responded better to positive leadership.
- **Hospital type:** Government hospitals showed a slightly higher prevalence of transactional and autocratic leadership styles.

These results suggest that organizational structure and professional maturity influence leadership approaches. For instance, government hospitals, often constrained by bureaucracy, may promote transactional or hierarchical styles, whereas private institutions allow more autonomy, encouraging democratic practices.

The lack of significant association with **gender** and **qualification** indicates that leadership perception and performance are more influenced by experience and work environment than by demographic traits alone.

5.5 Practical Implications of the Study

The findings highlight the urgent need for:

- **Leadership training** for nurse managers, especially in transformational and democratic practices.
- **Policy changes** in hospital management to foster participative decision-making.
- Regular **performance appraisals** and leadership evaluations to ensure alignment with best practices.
- **Workshops and seminars** on leadership effectiveness for nursing staff across both private and public sectors.

5.6 Alignment with Theoretical Framework

The findings are strongly supported by the **Transformational Leadership Theory** and **General Systems Theory**. Leadership style (input) clearly influenced nurses' morale and output (performance), validating the theoretical models used.

5.7 Summary of Major Findings

- Transformational leadership was the most prevalent and effective in enhancing nursing performance.
- There was a significant association between leadership style and performance.
- Laissez-faire and autocratic styles were associated with lower performance.
- Age, experience, and hospital type significantly influenced leadership style; gender and qualification did not.

SUMMARY AND CONCLUSION

6.1 Summary

The present study was conducted to assess the leadership styles of nurse managers and their impact on the performance of nursing staff in selected hospitals at Coimbatore. A descriptive cross-sectional design was adopted, and data was collected from 200 nurses across both government and private hospitals using a structured questionnaire and standardized performance appraisal tool.

Major Findings:

- **Demographic Data:** Majority of participants were female (75%), aged between 21–30 years, and had 1–10 years of experience.
- **Leadership Styles:** Transformational leadership was most commonly practiced (40%), followed by transactional (30%) and democratic (15%). Laissez-faire was least observed (5%).
- **Nursing Performance:** 45% of nurses demonstrated high performance, 35% moderate, and 20% low.
- **Statistical Analysis:**
 - A **significant association** was found between leadership style and nursing performance ($p < 0.05$).
 - Transformational and democratic styles were associated with **higher levels of performance**.
 - Laissez-faire and autocratic styles were linked to **lower performance**.
 - Significant relationships were also found between leadership style and **age, experience, and hospital type**.

Interpretation:

These findings support the growing evidence that leadership style is a critical factor influencing nursing performance. Nurses led by transformational and democratic leaders displayed greater job satisfaction, accountability, and clinical efficiency.

6.2 Conclusion

This study concludes that leadership style significantly affects nursing performance. Transformational and democratic leadership approaches positively influence nurse motivation, teamwork, and quality of care. In contrast, autocratic and laissez-faire styles contribute to decreased staff engagement and lower performance outcomes.

Given the crucial role nurses play in healthcare delivery, enhancing leadership skills among nurse managers is essential. Hospitals must invest in leadership development programs and foster a supportive work environment to maximize staff potential and improve patient outcomes.

6.3 Recommendations

Based on the study findings, the following recommendations are made:

1. **Leadership Development Programs:** Conduct regular workshops and training sessions on transformational and participative leadership.
2. **Policy Revisions:** Encourage hospital administrators to adopt leadership assessment as part of managerial evaluations.
3. **Mentorship Systems:** Implement mentor-mentee structures where senior nurse leaders guide junior staff.
4. **Performance Monitoring:** Use structured performance metrics to track nurse outcomes in relation to leadership support.
5. **Further Research:** Conduct longitudinal studies to assess causal relationships between leadership and long-term performance trends.

6.4 Limitations of the Study

- The study was limited to hospitals in Coimbatore and may not be generalizable to other regions.
- Self-reported data may include response bias.
- Cross-sectional design limits the ability to determine causality.

6.5 Implications for Nursing Practice

- Nurse managers play a pivotal role in shaping the work environment.
- Effective leadership can enhance nurse retention, patient satisfaction, and hospital performance.
- Nursing education curricula should integrate leadership training as a core component.

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