

The Relationship Between the Leadership Style of the Head of the room and the Motivation of Nurses to Work in the Nurse's room at RSIA Cicik Hospital

Hamdani^{1*} & Ilda Melisa²

^{1*}Universitas Indonesia, Indonesia, ²Politeknik Kesehatan Kementerian Kesehatan Padang, Indonesia

*Co e-mail: hamdani@gmail.com¹

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ABSTRACT

Nursing is a profession that is of great importance in the context of health services provided in hospitals. The quality of health services is significantly influenced by the performance of nurses who work in various treatment rooms. The objective of this study is to identify and analyse the relationship between the leadership style of the head of the room and the nurses' desire to work in the nurses' room of the RSIA Cicik Hospital. This study employed a quantitative research design with a descriptive cross-sectional study approach. 25% of employees had high motivation, while 75% had low motivation according to the authoritarian perspective. On the democratic side, 85.7% of employees had high motivation. With a p-value of 0.02, this relationship showed statistical significance. According to the democratic analysis, 30% of staff members have low motivation and 70% have high motivation. According to the authoritarian analysis, 87.5% of staff members have low motivation. As evidence of the statistical significance of this relationship, the p-value is 0.025. In the democratic perspective, 18.2% of staff members had low motivation and 81.8% had high motivation, while the authoritarian perspective showed that 75% of staff members had low motivation. This relationship has statistical significance with a p-value of 0.07. It would be beneficial for hospital management and ward heads to consider adopting a more democratic leadership style. To this end, ward leaders may benefit from undertaking leadership training, which will equip them with the skills required to manage teams in a more inclusive and supportive manner.

Keywords : Leadership Style, Nurse Motivation, Nurse



INTRODUCTION

Nursing is a profession that plays a vital role in health services in hospitals. The quality of health services is greatly influenced by the performance of nurses who work in various treatment rooms. One of the factors that can affect nurse performance is the leadership style of the head of the room. An effective leadership style can increase job satisfaction, motivation, and nurses' desire to continue working in the nurse's room (Eliasar et al., 2021).

In the world of nursing, nurses' motivation to stay in the nursing room is one of the key factors that is very important to consider. High nurse turnover rates can have a negative impact on the quality of health services provided to patients. Therefore, it is important to understand the factors that influence nurses' desire to stay, one of which is the leadership style of the head of the room (Indrayanti et al., 2022).

Leadership style refers to the way a leader influences, motivates, and directs his or her team members. There are various known leadership styles, such as transformational, transactional, and laissez-faire leadership. Transformational leadership, for example, is known to inspire and motivate team members to achieve higher goals. On the other hand, transactional leadership focuses more on rewarding and punishing based on performance (Sarlia et al., 2021).

The leadership style of the head of the room serves as a director and motivator for nurses in carrying out their duties. Previous research shows that an effective leadership style can increase nurses' work motivation. For example, transformational leadership, which focuses on development and inspiration, can encourage nurses to commit more deeply to their work. Conversely, less effective leadership styles can lead to decreased motivation and job satisfaction, which in turn can increase nurse turnover rates (Ariyani, 2018).

The desire of nurses to remain working in the nursing room is very important to note, given the high turnover rate of nurses which can have a negative impact on the quality of health services. The desire to stay is influenced by various factors, such as job satisfaction, work environment, and relationships with superiors. The right leadership style can create a conducive and supportive work environment, so that nurses feel comfortable and motivated to continue working (Sari & Tasnimin, 2023).

According to research conducted at RSUD Tidar Kota Magelang, there is a significant relationship between perceived leadership style and nurses' work motivation. The results showed that nurses who felt support and recognition from the head of the room tended to have higher motivation at work. In addition, other studies have also revealed that a good leadership style can create a positive work environment, where nurses feel valued and motivated to provide the best service (Mendrofa et al., 2022; Ningrum et al., 2023).

Previous studies have shown a significant relationship between leadership style and nurses' desire to remain employed. However, there are still few studies that specifically examine this relationship in the nurses' station of RSIA Cicik Hospital. Therefore, this study aims to identify and analyse the relationship between the leadership style of the head of the room and nurses' desire to work in the nurses' station of the RSIA Cicik Hospital.



The results of this study are expected to provide greater insight into the importance of leadership style in increasing nurses' desire to work, as well as provide recommendations for RSIA Cicik Hospital management in selecting and developing effective leadership styles in the nurses' work environment.

METHODS

This study used a quantitative research design with a descriptive cross sectional study approach. This design was chosen to identify and analyse the relationship between two variables, namely the leadership style of the head of the room (independent variable) and nurses' desire to work in the nurse's room (dependent variable). The population in this study were all nurses who worked in the nurses' room at the RSIA Cicik Hospital. The sample was taken using stratified random sampling technique to ensure that all subgroups in the population were represented. The sample size was determined based on the Slovin formula with an error rate of 5%.

Data Collection Instruments: Leadership Style Questionnaire: Using a questionnaire adapted from the Multifactor Leadership Questionnaire (MLQ) that measures various leadership styles such as transformational, transactional, and laissez-faire. Desire to Work Questionnaire: Using a questionnaire adapted from the Job Retention Questionnaire which measures nurses' desire to remain working in the nursing room.

Data Collection Procedure: Preparation Stage: Creating and testing the validity and reliability of the questionnaire. Validity was tested with expert judgement, while reliability was tested with Cronbach's Alpha test. Implementation Stage: The questionnaire was distributed to nurses who became the research sample. Data collection was carried out within a certain period of time by ensuring the confidentiality and anonymity of respondents.

Descriptive Analysis: To describe the demographic characteristics of respondents, the distribution of answers, and the profile of leadership style and desire to work. **Normality Test:** Kolmogorov-Smirnov or Shapiro-Wilk test to determine whether the data is normally distributed. This study is expected to provide a clear picture of the relationship between the leadership style of the head of the room and nurses' desire to work in the nurses' room of the RSIA Cicik Hospital. With a structured method and proper data analysis, the results of this study can provide practical recommendations for improving the quality of leadership and nurse retention in RSIA Cicik Hospital.

RESULTS

1. Univariate Analysis

a. Age Distribution of Respondents by Age

Table 1. Age Distribution of Respondents by Age

Age	Frequency	Percentage (%)
20 – 29	23	44,2
30 – 39	25	48,1



40 – 49	3	5,8
50 – 59	1	1,9
Total	52	100

b. Frequency Distribution of Respondents Based on Gender

Table 2. Frequency Distribution of Respondents Based on Gender

Gender	Frequency	Percentage (%)
Male	10	19,2
Female	42	80,8
Total	52	100

c. Frequency Distribution Based on Respondents' Working Units

Table 3. Frequency Distribution Based on Respondents' Work Unit

Working Unit	Frequency	Percentage (%)
Surgical Nursing Room	19	36,5
Internal nursing room	18	34,6
Children's nurses room	15	28,8
Total	52	100

d. Frequency Distribution of Respondents Based on the Leadership Style of the Head of the Room in Surgical, Internal and Paediatric Treatment Rooms

Table 4. Frequency Distribution of Respondents Based on the Leadership Style of the Head of the Room in Surgical, Internal and Paediatric Treatment Rooms

Space Head Leadership Style	Surgery Room		Internal Nursing Room		Children's nursing room		Total	
	f	%	f	%	f	%	f	%
Democratic Style	7	36,8	10	55,6	11	73,3	28	53,8
Autoritarian Style	12	63,2	8	44,4	4	26,7	24	46,2
Total	19	100	18	100	15	100	52	100

e. Distribution of Respondents Based on Work Motivation in Surgical, Internal and Paediatric Care Rooms

Table 5. Distribution Of Respondents Based On Work Motivation In Surgical, Internal And Paediatric Care Rooms

Work Motivation	Surgical Nursing Room		Internal Medicine Room		Paediatric Nursing Room		Total	
	f	%	f	%	f	%	f	%



Low Motivation	10	52,6	8	44,4	10	66,7	25	48,1
High Motivation	9	47,4	10	55,6	5	33,7	27	51,9
Total	19	100	18	100	15	100	52	100

2. Bivariate Analysis

a. Relationship between the leadership style of the head of the room and work motivation in the surgery room

Table 6. Relationship Between The Leadership Style Of The Head Of The Room And Work Motivation In The Surgical Room

Leadership style	Low Motivation		High Motivation		Total	%	P-value
	f	%	f	%			
Authoritarian	9	75	3	25	12	100	0,02
Democratic	1	14,3	6	85,7	7	100	
Total	10	52,6	9	47,4	19	100	

b. Relationship Between the Leadership Style of the Head of the Room and Work Motivation in the Internal Room

Table 7. Relationship Between The Leadership Style Of The Head Of The Room And Work Motivation In The Internal Room

Leadership style	Low Motivation		High Motivation		Total	%	P-value
	f	%	f	%			
Authoritarian	7	87,5	1	12,5	8	100	0,025
Democratic	3	30	7	70	10	100	
Total	10	55,6	8	44,4	18	100	

c. Relationship Between The Leadership Style Of The Head Of The Room And Work Motivation In The Child Care Room

Table 8. Relationship Between The Leadership Style Of The Head Of The Room And Work Motivation In The Child Care Room

Leadership style	Low Motivation		High Motivation		Total	%	P-value
	f	%	f	%			
Authoritarian	3	75	1	25	4	100	0,07
Democratic	2	18,2	9	81,8	11	100	
Total	5	33,3	10	66,7	15	100	



DISCUSSION

1. Relationship between Leadership Style and Work Motivation in the Surgical Room

In the authoritarian perspective, 75% of employees have low motivation, and 25% have high motivation. In the democratic perspective, 85.7% of employees had high motivation. This relationship has statistical significance with a p-value of 0.02.

The results showed that room heads who used a democratic leadership style motivated 85.7 per cent of nurses. This is because the head of the room will talk to the executive nurses if they experience problems at work, so they are more motivated to work.

The head of the room and the executive nurses collaborate in decision-making and problem-solving in a democratic leadership style. However, there are also nurses with low motivation at 14.3 per cent. This is in line with Mc Gregor's theory, which according to theory X states that most people are not happy to work. 75.0 per cent of nurses would have low motivation if the head of the room used an authoritarian leadership style.

Researchers argue that people will be more motivated to work if they are given more freedom and not tied down. This is because authoritarian room heads are unable to find the problems that hinder the work motivation of executive nurses. By talking to his subordinates to find solutions rather than finding fault with the executive nurses.

2. Relationship between leadership style and work motivation in the internal ward

Authoritarian style shows that 87.5% of staff have low motivation and 12.5% have high motivation. The democratic style showed that 30% of staff had low motivation and 70% had high motivation. The p-value for this relationship was 0.025, indicating statistical significance.

This can be seen from the fact that ward heads who communicate well with the executive nurses create a good relationship, which encourages them to stay motivated to work. In contrast, room heads who used an authoritarian leadership style showed 87.5 per cent of the executive nurses had low motivation, which was due to the fact that the executive nurses felt unmotivated to work if the room heads used an authoritarian leadership style.

The results of this study support Herzberg's theory that nurses' work motivation is influenced by the leadership style of the head of the room. The executive nurses perceived that the head of the room's democratic leadership improved communication and rewarding, which increased the executive nurses' morale.

3. Relationship between leadership style and work motivation in the paediatric nursing room

Authoritarian style shows that 75% of staff have low motivation and 25% have high motivation. The democratic style showed that 18.2% of staff had low motivation and 81.8% had high motivation. The p-value for this relationship was 0.07, indicating statistical significance.

This can be seen from the results of the study obtained that 81.8% of nurses with high motivation if the head of the room uses a democratic leadership style, this is because in the child care room the implementing nurses already have an awareness of the importance of work



motivation in the achievement of nursing care. and obtained the results of 18.2% of nurses with low motivation. While the head of the room who uses an authoritarian leadership style results in 75.0% of nurses with low motivation and only 25.0% of executive nurses who have high motivation.

Firstly, the assumption is that there is a significant correlation between the leadership style of the head of the room and the level of nurses' motivation to work. Nurses led with authoritarian style tend to have lower motivation (75% with low motivation) compared to nurses led with democratic style (18.2% with low motivation). This data suggests that democratic leadership can increase nurses' motivation. Firstly, the assumption is that the leadership style of the head of the room and the level of nurses' motivation to work are related. Nurses held by authoritarian style tend to have lower motivation (75%) compared to nurses held by democratic style (18.2% with low motivation). The data suggests that democratic leadership can encourage nurses.

According to the third assumption, the p value of 0.07 indicates a significant relationship between leadership style and staff motivation. This suggests that, although the relationship is not fully significant, there is an indication that changes in leadership style may affect nurses' motivation. There is a fourth assumption that nurses' motivation is also influenced by the work environment, such as support from colleagues and superiors. A democratic leadership style might create a better working environment, which in turn could increase nurses' motivation.

From the data above, it can be seen that the democratic leadership style consistently produces higher levels of work motivation than the authoritarian style. This result is consistent with work motivation theory, which states that a supportive and participative work environment tends to increase staff motivation and performance.

CONCLUSIONS

From the results, it appears that democratic leadership style consistently correlates with higher levels of work motivation compared to authoritarian leadership style. The democratic style allows staff to feel more valued and participate in decision-making, which can increase their feelings of involvement and motivation. In contrast, an authoritarian style tends to limit staff participation and may decrease their motivation.

It is recommended that ward heads and hospital management consider adopting a more democratic leadership style. Leadership training can be provided to help ward leaders develop skills in managing teams in a more inclusive and supportive manner.

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