ORIGINAL ARTICLE

Spiritual Leadership Model for Head Nurse at a Private Hospital in East Java, Indonesia

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ABSTRACT

Background: Spiritual leadership is a factor that is able to improve quality of care services in hospitals, especially religious based hospitals.
Aim: This research aimed to analyze the influence of a spiritual leadership model on hospital personnel.
Method: This research used a simple random sampling survey design. The sample consisted of heads of the in-patient rooms at the hospital working for more than 2 years. The data was collected using interviews and questionnaires. The research instrument was modified from Fry's spiritual leadership development theory. The data was analyzed using Structural Equation Model (SEM).
Results: Results of Leadership Element Influence on the Spiritual Leadership of Heads of In-patients rooms is Giving Development Opportunities p=0.004, Intuition p=0.002, Willing to Bear the Risk p=0.024
Conclusion: The results showed that the spiritual leadership model influenced the heads of the in-patient rooms in three areas namely in giving opportunities for growth, intuition and risk management.
Keywords: Spiritual Leadership, Nursing, Management, Head Nurse

INTRODUCTION

Spiritual leadership is a factor that is able to improve quality of care services in hospitals, especially religious based hospitals. Theories on leadership behavior of claim that leadership skills can be developed and there are various models of leadership that can be utilized to lead other human beings[1].

Asmaningrum (2009) showed that spiritual leadership can influence organizational commitment in nurses, groups that applied spiritual leadership showed a 10.85% change/increase in organizational commitment compared to before it was applied [2]. This shows that spiritual leadership had a significant influence on the organizational commitment of nurses working at the hospital. Meanwhile Mulyono (2010) researched 84 respondent nurses from a hospital and discovered that 54.76% of them stated that they were not spiritually facilitated [3].

Spiritual leadership is a new leadership theory that has come about as an alternative to classical leadership. Fry (2003) argues that a spiritual leader is a leader who uses spiritual values, attitudes and behaviors that are needed to motivate both the sender and others intrinsically; therefore each one has a spiritual feeling of survival through membership and calling. Spiritual leadership itself is the leadership that forms the values, attitudes, behaviors needed to motivate you and others. It emphasizes the height of aesthetics, values, ability to interact, balancing the interests of work and self, which of course can increase productivity and financial benefits. Spirituality in the workplace encourages employee commitment to productivity and decreases job turnover [4].

Spiritual leadership does not merely involve a leader that has spiritual values and is able to lead an organization spiritually but there are other dimensions to it, such as building shared values, applying vision (Vision Settings), providing opportunities for developing (Enabling), having influence and power (Influence Power), Intuition, willing to bear the risk (Risk Talking)[5].

Some researchers have stated that the development of spirituality in the workplace has a positive influence on the attitudes and behavior of individual employees to increase job satisfaction, commitment, happiness, motivation, work involvement, and innovation [6]. The aim of this study is to analyze the influence of a spiritual leadership model on head nurse at a hospital in East Java, Indonesia.

MATERIALS AND METHODS

This research used a survey design. The research was conducted from March to May, 2018 in a private hospital in East Java, Indonesia, involving 175 respondents using simple random sampling. The criterion for inclusion is that respondents consist of heads of the in-patient rooms working for more than 2 years.

This research used a questionnaire on the influence of spiritual leaders with 20 questions in scalable answers with answers 1 = strongly disagree, 2 = disagree, 3 = doubtful, 4 = agree, 5 = strongly agree. The questionnaire delved into the development of shared values with various indicators namely to create a sense of togetherness with employees in carrying out the tasks, and to create an environment of mutual respect. Three indicators to highlight a certain leadership dimension were used namely the ability the leader build subordinate consensus in accordance with company vision, leadership ability in dreaming up collaborations in line with its vision, and the leaders ability to create an environment incorporating all visions. In another aspect, leadership consisted of 4 indicators namely the ability to train and educate employees, the ability to motivate employees, the ability to trust in subordinates, and the ability to provide opportunities for employees to develop. Another dimension

involves the influence and power of the leader highlighted by up to 4 indicators, namely the ability of leaders to influence subordinate commitment to carry out their requests, the ability to be respected by employees, the ability to be admired and valued by employees, the ability to recruit workers. Another dimension of the questionnaire consist of 4 indicators namely the ability to understand employee feelings, the ability to provide security for employees, the ability to understand employees' desires, the ability to understand employees. The risk taking dimension consisted of 3 indicators, namely the ability to produce tangible changes for the improvement of the work system, the courage to face challenges at work, and being responsible for the work done.

The modified Fry's spiritual leadership model consisted of 17 questions, in scale form with answers to questions 1 = strongly disagree, 2 = disagree, 3 = doubtful, 4 = agree, 5 = strongly agree. The questionnaire explored three areas namely vision, trust/hope, and altruistic love. Structural Equation Model (SEM) is used to analyze the spiritual leadership model. Before the SEM analysis, certain pre-tests were done as prerequisites of SEM analysis.

RESULT

Table 2 shows that three (3) factors were being influenced by spiritual leadership involving heads of in-patient rooms at a private hospital in Sidoarjo Regency, Indonesia namely the ability to provide opportunities for growth, intuition and risk.

Table 1: Distribution of Frequency Characteristics of Respondents for Heads of In-Patients Rooms (N = 175)

Variable	Frequency	Percentage (%)
Education		
Bachelor	175	100
Diploma	0	0.0
Gender		
Men	60	34.3
Women	115	65.7
Age		
<30 Years	30	17.1
31-35	30	17.1
36-40	35	20.0
41-45	40	22.9
> 45 years	40	22.9
Years of work		
<10 years	45	25.7
11-20	50	28.6
21-30	80	45.7
> 30 years	0	0

Table2. Analysis Results of Leadership Element Influence on the Spiritual Leadership of Heads of In-patients rooms

Variable element on the Spiritual Leadership	Estimate	SE	CR	P
Applying Vision	-.139	.219	-.636	.525
Building Value Together	.538	.141	-.899	.678
Giving Development Opportunities	.523	.132	2,931	.004
Having Influence and Power	-.102	.317	-.321	.748
Intuition	.977	.373	3022	.002
Willing to Bear the Risk	.499	.210	2,521	.024

DISCUSSION

Fairholm stated that spiritual leaders are heavily involved in building shared values. Here, spiritual leaders are expected to create a sense of togetherness and shared responsibility in carrying out tasks. Work done in this manner is mutually rewarding. However, this research didn't evidence that the work carried out with a sense of togetherness contributed to spirituality among the heads of the in-patient rooms at the hospital[7-9].

Fry (2003) stated that there are 3 main dimensions that make up the theoretical framework in spiritual leadership theory namely 1) dimension of spiritual leadership which include vision, altruistic love, and hope/faith 2) the dimension of spiritual survival which included the calling and membership and 3) the dimension of organizational outcome as organizational commitment[10,11].

Other research into spiritual leadership outlined several factors like mutual value development, apply vision, provide growth opportunities, have influence and power, intuition, and risk. These explain the change in salesmanship, whilst 98% of the change explained by other causes, with the coefficient (R) 0.992. However, only three variables had a significant influence on the development of joint values, applying vision, and risk. In non-medical related institutions, building mutual value together had

influenced on the productivity of work. This implies that salesmen/workers need a sense of togetherness to carry out their duties[12].

However, in the application of spiritual leadership in institutions in the medical field, the influence of the spiritual leader remains uncertain. Quality service depends on the skills of the nurses and caregivers.

According to Fairholm, spiritual leaders can determine the direction and goals of the organization; in terms of providing vision of a better life for the community, employees and also the environment. Such a vision must be communicated and understood by others. This helps employees to believe in the vision, its worth and the need to work together to achieve it[5].

In term of the role of a spiritual leadership as an Enabler, the results show that spiritual leadership can influence the heads of the in-patient rooms to behave in this manner. This is evidenced by the variable's significance with a p-value of 0.004, more than 0.05 and a CR (Coefficient Regression) value of 2,931. Therefore it can be concluded that the more the leader inspire and provide opportunities to develop the heads of the in-patient rooms, they will become more spiritually fulfilled.

Spiritual leadership can also foster Intuition in the heads of the in-patient rooms. This is evidenced by the variable's significance with a p-value of 0.002 more than at 0.05 and the CR (Coefficient of Regression) value of 3,022.

Therefore it could be concluded that the heads of the in-patient rooms can be more intuitive and be more spiritually fulfilled[13].

Spiritual leadership can also foster Risk Taking in the heads of the in-patient rooms. This is evidenced by the variable's significance with a p-value of 0.024 greater than 0.05 and the CR (Coefficient of Regression) value of 2,521. Therefore it could be concluded that the heads of the in-patient rooms can embrace more risks and be more spiritually fulfilled[13-15].

CONCLUSION

The spiritual leadership model can influence hospital personnel (heads of the in-patient rooms) at a private hospital in East Java, Indonesia in three areas namely giving opportunities for growth, intuition and risk. Thus, inculcating spiritual leadership can be beneficial for employees.

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