Reconstructing Organization Culture through Enforcing Head Nurses Transformational Leadership Style

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Abstract: Organizational cultures are created by leaders, and one of the most decisive functions of leadership may be the creation, the management, and when that may become necessary, the destruction of culture. Culture and leadership, when one examines them closely, are two sides of the same coin and neither can really be understood by itself. From this point of view, the aim of the present study was to examine the effect of enforcing head nurses transformational leadership style on reconstruction of organizational culture. The study was conducted at Paediatric Hospital – Mansoura University. It was carried out on two groups who working in different hospital units; the first group consisted of (n=27) head nurses and the second group included (n=137) staff nurses. Two tools were used for data collection. Multiple choice questions (MCQ) test is contained 37 questions to measure the level of defining, understanding, and practicing the head nurses transformational leadership style. The second tool was Organizational Culture Assessment Sheet (OCAS). It is contained of 84 items which used to investigate the perception of staff nurses as regarding their organization culture. The results are showed significant difference and greater awareness of transformational leadership style of head nurses who succeed in raising staff nurses perception of their organizational culture. So, the present study recommended that designing training programs continuously for head nurses to improve transformational leadership style and empower the concept of transformational organizational culture.

Key words: Reconstructing, Organization Culture, Head Nurses, Transformational Leadership Style.

INTRODUCTION

Organizational culture and transformational leadership have become increasingly more popular topics over the past 10 years. There have been more than 5000 studies on leadership (Yuki, 1994). The phenomenon of leadership continues to draw interest of academics and practitioners in many fields including nursing and management. The concept of leadership carries many different connotations and is often viewed as synonymous with others, equally complex concepts such as power, authority, management, administration, and supervision (Sub Lim, 2008).

Current interest in organizational culture arises from studies on organizational climate, national culture, and human resource management (Manley, 2000). Organizational culture provides a framework for unifying a range of ideas, theories, and framework from past research on organizations (Brown and Harvey, 2006). Most of this work has taken place in commercial organizations, although there has been a recent focus on organizational research in healthcare, particularly in relation to magnet hospitals, but this has not been explicitly on organizational culture (Aiken et al., 2002).

Organizational culture is the ways of thinking, behaving, and believing that members have in common. It is inferred from what group members sad and do and represents a pattern of behaviors that are unique to each group (Koontz and Wehrich, 2006). It is a system of shared values and beliefs that interact with an organization's people, structure, and systems to produce behavioral norms. Many of these believes and values become internalized and affect not only behavior but attitudes as well which govern what we say and do without our being aware of it (Marques and Huston, 2006).

Nurses' work is influenced by the organization's culture. Organizations with strong cultures maintain them by managing human resources: who is hired, how they are developed, and how they are rewarded. Understanding and correctly interpreting the culture enhances success, if the nurse is able to fit behavior and

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manage strategies to comply with cultural norms and values. The effectiveness of an organization is influenced by the organizational culture which affect the way the managerial functions of planning, organizing, staffing, leading and controlling are carried out (Koontz and Weihrich, 2006). Indeed, organizational culture influences how managers approach problems, react to competition, and implement new strategies (Griffin, 2005).

There are three types of organizational culture: constructive, passive-defensive and aggressive defensive. A constructive culture is a positive culture that promote satisfaction behaviors. It is characterized by four norms or styles which are: achievement norm (do things well and value nurses who set and accomplish their own goal) (Kreitner and Kinicki, 1998), self actualization norm (value creativity, quality over quantity and both task accomplishment and individual growth) (Ingersol et al., 2000), humanistic-encouraging norm (managed in a participative and person-centered way) and affiliative norm (place a high priority on constructive interpersonal relationships) (Sullivan and Decker, 2005).

Passive defensive culture promotes people/security behaviors. It also characterized by four norms which are: approval norm (in which conflicts are avoided and interpersonal relationships are pleasant at least superficially) (Ingersol, et al., 2000), conventional norm (conservative, traditional and bureaucratically controlled), dependent norm (hierarchically controlled and nonparticipative) and avoidance norm (fail to reward success but nevertheless punish mistakes) (Kreitner and Kinicki, 1998).

While, aggressive/defensive culture promotes task/security behaviors. It includes four norms which are: oppositional norm (confrontation and negativism are rewarded) (Kreitner and Kinicki, 1998), power norm (describes nonparticipative organizations structured on the basis of authority inherent in nurses' positions) (Ishin, 2002), competitive norm (winning is valued and nurses are rewarded for outperforming one another) and perfectionist norm (perfectionism, persistence, and hard work are valued) (Robert and Cook, 2005).

On the other hand, Carroll (2006) used a broader definition of leadership that it is a process of influence others to move in the direction of achieving goals. While Kouzes and Posner (2002) defined leaders as those who challenge the process, inspire a shared vision, enables others to act, model the way, and encourage the heart.

Transformational leadership is a process that motivates people by appealing to higher ideals and moral values, defining and articulating a vision of the future, and forming a base of credibility (Tracey and Hinkin 1998). As well as, Transformational leader is defined as one who formulates an inspiring vision, facilitates the vision, encourages short-term sacrifices and makes pursuing the vision a fulfilling venture. In addition, the high – performing transformational leader has the ability to hold organizational culture, behaviors, and values in high regard and perpetuating these values and behaviors in the staff (Ackoff, 1999).

Transformational leadership emphasizes the importance of interpersonal relationships and is not concerned with the status quo, but with effecting revolutionary change in organizations and human service. Transformational leadership focuses on merging the motives, desires, values, and goals of leaders and followers into a common cause. The goal of the transformational leader is to generate employees' commitment to the vision or ideal rather than to themselves (Wise, 2007).

Bass (1998) identified four areas of leadership behaviour that would identify transformational leadership. These four areas are charismatic leadership; is the degree to which the leader is seen as charismatic by followers, inspirational leadership; relates to how a leader inspires an organization as a whole and it is the continuation of charismatic leadership, individual consideration; is the characteristic that shows how much a leader gives personal attention to subordinates, and intellectual stimulation; allows a leader to promote new ideas and challenge the old ways of operating within an organization.

With analysis of the four main areas or characteristics of the transformational leader, it can be seen that they are interdependent and must exist effectively with each other. The absence of any one area results in the ineffectiveness of the transformational leader. Additionally, the improper use of such characteristics results in loss of follower loyalty and consequently loss of leadership effectiveness (Slack, 1997).

Transformational leaders have offered tempered positions relative to the impact that a transformational leader can have on shaping and preserving the culture of an organization (Weese, 1995). They have suggested that the culture is the organization, not something that the organization posses, and consequently, culture change is an arduous assignment. The current thinking in the area of leadership is devoted to the leader's role in maintaining the organizational culture or in changing it to implement a change of direction dictated by a new vision (Bryman, 1992). The researcher suggested that the leader can alter or impact the organizational culture.

From this point of view, the present study aimed to examine the effect of enforcing head nurses transformational leadership style on reconstruction of organizational culture.
MATERIAL AND METHODS

Setting:
The study was conducted at Paediatric Hospital - Mansoura University, 230 beds teaching hospital. It is staffed with 238 nurses and provides total care for all children patients in Delta Region. The study was carried out in all inpatient and outpatient units (n=27). These units are 2 premature units, 2 urology unit, renal dialysis unit, 3 medical units, 2 surgical units, 2 Diabetic units, 3 intensive care units, neurology unit, ophthalmology unit, orthopedic unit, 2 Cardiology units, 2 operations units, emergency unit, endoscopy unit, blood bank unit, day-surgery unit and out-patient unit.

Sample:
All head nurses worked in the inpatient and outpatients units (n = 27) and all staff nurses worked in the same units (n = 137) are included in the study. These head nurses and nurses with than one year in their position and those with long leaves or who refused to participate in the study were excluded in this study.

Tools of the Study:
Two Tools Were Employed in this Study:
The first tool: was Organizational Culture Assessment Sheet (OCAS). This tool used to investigate the perception of staff nurses as regarding their organization culture. It is used three times; the first time before head nurses transformational leadership program, the second time after the program directly and the third time after three months of ending the program. This tool developed by the researcher through mergence of three references; Bowers (2002), Cook and Lafferty (1989) and Shortell et al., (1984). This tool consists of 12 categories labeled; achievement, self actualization, humanistic-encouraging, affiliative, approval, conventional, dependent, avoidance, oppositional, power, competitive, and perfectionist. Each of them included 7 items.

The second tool: was Multiple Choice Questions (MCQ) test. It included 38 questions of Transformational Leadership Style, each question has four answers, one of them only is right and the other answers are wrong. The head nurse catch one score when choose the right answer, while achieve zero score with other answers. This tool divided into 5 categories labeled; charisma (6 questions), idealized influence (9 questions), intellectual stimulation (8 questions), individualized consideration (8 questions), inspiration and motivation (7 questions). It was used to measure the level of defining, understanding, and practicing the head nurses to transformational leadership style in their hospital. This tool developed by the researcher based on El-Sayed (2005). MCQ test have been repeated three times; 1) pre-test before the program, immediate post-test after the program and the third one after three months of the program to follow up the program result.

Methods of Data Collection:
1. A permission to conduct the study was obtained from the director of Pediatric Hospital-Mansoura University. Acceptance of participation from head nurses and staff nurses was performed.
2. Tools was developed and tested for its content validity by 5 faculty members in the faculty of nursing from 3 different universities which named; Mansoura university, Ain-Shams university, and Cairo university
3. Internal consistency reliability of all items of the two tools were assessed using coefficient alpha. It was 0.99 for transformational leadership style items while it was 0.98 for organizational culture items.
4. A pilot study was conducted by 2 head nurses and 12 staff nurses working at Pediatric Hospital - Mansoura University excluded from the study. Accordingly, minor changes were made.
5. Assess the staff nurses’ perception of organizational culture before starting the head nurses program. The Organizational Culture Assessment Sheet (OCAS) distributed to the staff nurses by the researcher. Time needed to answer this sheet was 25-35 minutes, data collected for three months from January-March 2007.

Preparation for training program to enforce head nurses transformational leadership style through four learning workshops which discussed many topics that explored the basic skills needed by head nurses to be a transformational leaders, these skills include the ability of;1) Building vision and goals, 2) Providing intellectual stimulation, 3) Offering individualized support, 4) Symbolizing professional practices and values, 5) Demonstrating high performance expectations and 6) Developing structures to foster participation in decisions. The program discussed other related topics include; transformational leadership theory, the successful transformational leaders and the future of transformational leaders.

Included all information about transformational leadership style and application exercise to insure their understanding.
A time schedule suitable for head nurses was developed to conduct the program that included; date, place, topic, time and duration of each session. To prevent discrepancy with their working time, the researcher divided the head nurses into three groups related to their time which was not interference with their work time (some head nurses have over work-loaded in certain days weekly such as head nurse of outpatient clinics is over work-loaded at Sundays, Tuesdays and Wednesdays, while the head nurse of renal dialysis unit over work-loaded at Wednesdays and Thursdays and so on…, so that some times are possible to some head nurses when other are unavailable). However, the researcher repeats the sessions for three times.

Implementation of the program; a) pre-test before the program stated to assess the head nurses regarding transformational leadership style. b) implementing the program in the hospital conference room by the researcher. The teaching course consumed one month only with divided the contents into four workshops (April, 2007). The teaching strategies used in the program were simulation, discussion, paper and pencils for application exercises and role-play. The teaching aids were flip charts and data show), post-test in the end of the program to evaluate the change in the head nurses’ perception regarding transformational leadership style. This reassessment was repeated after three months to follow up the improvement of defining, understanding, and practicing the head nurses to transformational leadership style in their hospital

The Organizational Culture Assessment Sheet (OCAS) used for reassessment of the staff nurses regarding organizational culture. This reassessment done directly after finishing the head nurses’ training course and it was repeated again after three months to follow up and distinguish the influence of transformational leadership style learning behaviors on reconstructing organization culture.

Statistical Analysis:

The statistical analysis of data done by using excel program and SPSS program statistical package for social science version 10. The description of the data done in form of mean (+/-) SD for quantitative data and frequency & proportion for qualitative data.

The analysis of the data was done to test statistical significant difference between groups. For quantitative date, paired sample t-test was used to compare one group at different times. For qualitative data chi-square test was used. P is significant if < or = 0.05 at confidence interval 95%.

Table 1: Demographic characteristics of the studied sample.

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Staff Nurses (n=137)</th>
<th>Head Nurses (n=27)</th>
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<tbody>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
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<tr>
<td>Age:</td>
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<td>20-</td>
<td>22</td>
<td>16.05</td>
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<tr>
<td>30-</td>
<td>49</td>
<td>35.77</td>
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<td>40-</td>
<td>40</td>
<td>29.21</td>
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<tr>
<td>50+</td>
<td>26</td>
<td>18.97</td>
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<tr>
<td>Educational Qualification:</td>
<td></td>
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<tr>
<td>- Diploma</td>
<td>87</td>
<td>63.5</td>
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<tr>
<td>- Diploma + Specialty</td>
<td>12</td>
<td>8.76</td>
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<tr>
<td>- Bachelor Degree</td>
<td>36</td>
<td>26.28</td>
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<td>- Master Degree</td>
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<tr>
<td>- Doctorate Degree</td>
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<tr>
<td>Years of experience:</td>
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<td>1-</td>
<td>18</td>
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<td>10-</td>
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<td>46</td>
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<tr>
<td>30+</td>
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<td>16.05</td>
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Table (1) showed demographic characteristics of study subjects by number and percentage. Regarding the table, the highest percentage of staff nurses and head nurses go to age group from 30 years and under 40 years (35.77%, 55.6% respectively). However, the lowest percentage of staff nurses (16.05%) was at age group from 20 years to under 30 years, while the lowest percentage of head nurses (7.4%) was at age group from 40 years to under 50 years. Regarding to subjects qualifications, the highest percentage of staff nurses (63.5%) have diploma degree and the highest percentage of head nurses (81.5%) have bachelor degree. However, the lowest percentage of staff nurses and head nurses (8.76%, 7.4% respectively) have diploma with specially. According to experience years, the highest percentage of staff nurses and head nurses (37.23%, 48.1% respectively) have 10 years and under 20 years of work experience and the lowest percentage of staff nurses (13.14%) have from one to under 10 years of work experience while the lowest percentage of head nurses (3.7%) have from 20 years to under 30 years of work experience.
Fig. (1) showed perception change of staff nurses to organizational culture components. According the figure, the highest change of staff nurses perception of organizational culture go to achievement component while the lowest change of their perception go to conventional component. Generally, this figure explored little changes of staff nurses perception of organizational culture components. Fig. (2) showed degree of improvement of staff nurses perception of total organizational culture after immediate post test. As regard, the total improvement of staff nurses perception of organizational culture was 20% after immediate post test. Fig. (3) showed degree of improvement of staff nurses perception of total organizational culture after second post test. Regarding the figure, the total improvement of staff nurses perception of organizational culture was 21% after second post test. Fig. (4) Head nurses tests results before and after getting transformational leadership style program. According this figure, the highest percentage of head nurses’ true answer of pre-test (24.87%) go to intellectual stimulation, while the lowest percentage of head nurses’ true answer of pre-test (16.7%) go to charisma. Also, the immediate post test explored the highest percentage of improvement of head nurses’ true answer (96.3%) go to intellectual stimulation and the lowest percentage of improvement of head nurses’ true answer (93.2%) go to charisma. While the second post – test showed the highest improvement percentage of head nurses' true answer (95%) go to inspirational motivation and the lowest percentage of improvement of head nurses’ true answer (91.01%) go to charisma also.

Fig. 1: Perception change of staff nurses to organizational culture components
pre = Before transformational leadership program provided to head nurses.
post = Immediately after providing of transformational leadership program to head nurses
post2 = after 3 months from providing of transformational leadership program to head nurses

Fig. 2: Degrees of improvement in stuff nurses perception of total organizational culture after immediate post test.
Discussion:

Organizational culture is a system of collective enterprise, which spreads throughout the organization. It is socially created, socially maintained and socially transformed (Bate, 1994). This is consistent with transformational leadership which fosters leadership potential at all levels of the organization and with every one using processes which are underpinned by the same values necessary for successful cultural change. It is proposed that through such processes, together with participative and facilitative methods, and within a context of shared values and beliefs, a transformational culture can be achieved that promotes effectiveness, is adaptable and strategically appropriate. (Kouzes and Posner, 2002). From this point of view, the present study aimed to examine the effect of enforcing head nurses transformational leadership style on reconstruction of organizational culture.

The findings of the present study revealed that there is mild improvement of staff nurses perception regarding organizational culture items through immediate post test which done immediately after the head nurses receiving transformational leadership program and the second post test which done after three months of head nurses receiving transformational leadership program which explored the positive effect of transformational leadership programs provided to head nurses on staff nurses perception of their organizational culture. The interpretation of this mild change could be that although nursing leaders in pediatric hospital at Mansoura university face more restrictions from physicians and their hospital managers, had limited authority, had not fully display conviction and confidence in their commitments and can not perfectly practice transformational leadership role in their work, they inculcates a sense of purpose, long-term commitments, and mutual interests which based on shared interdependence, as well as leaders and followers who can transcend their self-interests for the good of the team and the organization.
In this respect, Weese (1995) investigated the concepts of transformational leadership and organizational culture with Big Ten and Mid-American Conference university recreation programs, and concluded that high transformational leaders possess strong organizational cultures and carry out culture-building activities, especially the customer orientation function, to a greater extent than other leaders do. In the same line, Barker (1990) mentioned that organizations with a transformational leaders would exhibit circumstances like pride and satisfaction in the work, enthusiasm, team spirit, a sense of accomplishment and satisfaction. In addition, Ichniowski (1996) argue for the role of transformational leadership in facilitating the type of culture that people want to work in, whereas Bate (1994) argues that leaders with transformational leadership cannot control or manipulate the culture – they can only initiate, influence and shape the direction as it emerges. Cultural leadership is about helping to create or develop a particular way of life (form) and way of living (process) for an organization and its members.

The results of the present study regarding the organizational culture revealed that the constructive cultures style was the highest style among staff nurses at Paediatric Hospital at Mansoura University. It is due to that staff nurses who were working at paediatric hospital worked through group cohesiveness, value consensus and commitment to collective goals which promote self actualization and achievement behaviours which are important characters in transformational leaders. Also, ongoing clear communication up and down the organizational hierarchy that motivates staff nurses for humanistic-encouraging and affiliative norms which are necessary for the organizational survival. This finding was supported by Abd El-Rahman (2004) who reported that the constructive cultural style was the most dominant among nurses working in intensive care, surgical, and medical units at Alexandria Main University Hospital. In the same respect, Marquis and Huston (2006) approved the results that a constructive culture is a strong culture and is one of the characteristics of a healthy organization and is set largely by transformational leaders in the hospital. They added that, the strong culture build group cohesiveness that implies a high level of integration and congruence of values and beliefs throughout an organization and external adaptation than weak culture.

The present study revealed that staff nurses perceived that conventional norm was the first norm among passive defensive culture without any improvement mentioned in their perception in the immediate and second post test. It is may be related to the cohesiveness of staff nurses at Paediatric hospital at Mansoura university of hospital policy and rules and follow instruction even it is wrong. In the same time, perfectionist norm is the first among the aggressive defensive culture norms at paediatric hospital and also without improvement in their perception in the immediate and second post test. It is due to that some of staff nurses at paediatric hospital at Mansoura university hospital try to do things perfectly, they always try to be right and they work long and hard hours.

This finding was consistent with Shehata (2008) and Abd-El Rahman (2004) who reported that perfectionist norm was the highest among aggressive-defensive norms, especially in work units requiring precise and highly technological care, to attain appropriate goals.

The results of the present study explored that there is significant difference of the results of head nurses exams between pre-test and immediate post-test as well as second post-test after three months of their receiving of transformational leadership program. It means that head nurses had more knowledge in relation to defining and understanding items charisma, idealized influence, intellectual stimulation, individualized consideration and inspiration and motivation of transformational leadership style. The result of second post test after three months had minute decrease by nearly 1% than the first post-test which done immediately after their receiving of transformational leadership program.

Also, the findings in the present study revealed that intellectual stimulation item was the highest among transformational leadership style components in pre-test and immediate post-test among the three tests conducted to head nurses before and after the transformational leadership program. This may be referred that although head nurses after three months of training program were still remember and understanding the purport to inspire followers to contribute beyond expectation and provide followers with a focus and commensurate levels of support, involvement, and appreciation designed to encourage the followers to adopt their vision as their own and be committed to making it a reality, they can not apply these information in practical situations. Schein (1990) confirmed this view and mentioned that leadership and organizational culture are purported be tightly intertwined that is because leaders must have a deep understanding of the identity and impact of the organizational culture in order to communicate and implement new visions and inspire follower commitment to the vision.

However, inspirational motivation was the highest in the second post test while charisma item was the lowest among the three tests conducted to head nurses before and after the transformational leadership program as revealed from the results of the present study. The probable reason is that although the efforts head nurses
done to encourage and enthuse staff nurses in their units to create new ideas to improve their performance and solving the problems from many perspectives, staff nurses have being fired unreasonably and less power to refuse undesirable assignments from their leaders. Thus, nursing leaders cannot play role models or articulate an appealing vision of the future for their hospitals. This kind of working climate might require nursing leaders to train and practice transformational leadership.

This results disagreement with Brown and Moshavi (2002) who mentioned that an examination of the incremental contributions of the factors of transformational leadership reveals that charisma generally has the greatest degree of explanatory power as compared to the other factors in the transformational leadership style. In addition, Offermann, (2004) pointed out that by keeping vision and values front and center, cultivating truth tellers, honoring one's intuition, making sure people around you are allowed to disagree, setting a good ethical climate and delegating appropriately, the leader creates an atmosphere in which follower influence will result in positive and rather than negative outcomes.

Conclusion and Recommendation:
The present study concluded that a greater awareness of transformational leadership style of head nurses which succeed in raising staff nurses perception of their organizational culture.

1. Designing training programs continuously for head nurses to improve transformational leadership style and empower the concept of transformational organizational culture.
2. Culture can limit leaders to practice the appropriate leadership style in their units. So, renewal efforts that actually change the culture (such as staff nurses right to refuse the inappropriate instructions with their work tasks...) are constantly needed.
3. Encourage leaders sharing governance and providing them with authority needed to support them in practicing transformational leadership role.
4. Remove any restrictions that hinder leaders to lead their staff (such as preventing authority duplication in leading staff which means the staff nurse take her orders and instructions from the head nurse of her unit and the physician in the same time). This may be occurring through work coordination, increase adhesion to commitment and working as a team.
5. Participation of staff nurses in conjuncture of hospital policy, rules and regulation which increase their creativity and production.

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