



## International Journal of Applied Business and Economic Research

ISSN : 0972-7302

available at <http://www.serialsjournal.com>

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Volume 15 • Number 15 • 2017

## How Transactional and Transformational Leadership Affect Employee Satisfaction in Jordan's Public Hospitals

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**Abstract:** In the context of Jordan's public hospitals and based on the perspectives of hospital workers, this study explores levels of employee satisfaction and two kinds of leadership (transactional and transformational), in addition to the link between leadership style and employee satisfaction. The author randomly distributed 800 questionnaires in 9 hospitals in 2016, with an overall response rate of 86%. The author used the Statistical Package for the Social Sciences to analyze the data. The results revealed that the connections between employee satisfaction and the two types of leadership examined were both at medium levels, in addition to a positive medium correlation between leadership styles and employee satisfaction. Finally, this study provides recommendations to policymakers and hospital leaders to improve the latter's actions and employee satisfaction in Jordanian public hospitals.

### INTRODUCTION

Leaders and leadership have been a focus of intense interest in academia since the birth of humankind. These two concepts allow us to think about the ways in which leaders differ from each other. There is a continuing debate about leadership and its effects on various aspects of the workplace in both the public and private sectors. The ways that leaders impact their followers have been studied a lot, but further investigation is needed in different settings to determine how leaders influence workers, and how their effects can be improved (Mozammel and Haan, 2016). Leaders need to adopt attitudes that will meet the needs of their employees, as well as the workplace environment (Hur, 2008). Leaders have tools (such as management styles) that can fundamentally change organizations, especially in terms of key aspects (such as employee satisfaction) (Desmond, 2004; Malloy and Penprase, 2010; Carnegie, 2016). All organizational success or failure can be attributed to a leader's contribution to the workplace environment, which is a crucial variable that can enhance management capacity and employee satisfaction. It is important for leaders

to ensure that employees are content with the atmosphere where they work. In the context of hospitals, it is necessary to find ways to improve employee satisfaction in order to maintain hospital performance (Mehrotra, 2005; Sudha, Shahnawaz, and Farhat, 2016).

Jordan has one of the lowest levels of natural resources compared to other countries (World Health Organization, 2013), which entails the challenge of handling them effectively in order to respond to citizens' growing demands in several areas, and most importantly to provide high-quality health services. Jordan's public hospitals are vital because they provide more than 50% of healthcare services; approximately 10.7% of Jordan's labor force works in them and they consume about 70% of the healthcare budget (Ministry of Health, 2015). Those interested in reforming Jordan's healthcare system face tremendous pressure to improve quality of healthcare performance in the country's public hospitals. In this sense, leadership styles play a significant role in enhancing both management capacity and employee satisfaction. This study is part of a series of investigations carried out by the author to examine the underlying characteristics of management in Jordanian hospitals. This paper explores how transactional and transformational leadership affect employee satisfaction in Jordan's public hospitals.

This study is important because it examines:

1. One of Jordan's most basic and critical public service sectors;
2. Two types of leadership that are essential to running a hospital;
3. Employee satisfaction, which plays a key role in healthcare organizations' efficacy; and
4. How leadership style impacts employee satisfaction.

The findings offer knowledge and practical advice to hospital leaders, which can help improve employee management in healthcare institutions.

## **LITERATURE REVIEW**

### **Leadership Style**

Leadership has been a major topic of discussion for several decades in both academic and professional circles around the world. In healthcare organizations, there is a vast amount of self-restraint, common sense, objectivity, and rationality. Healthcare is most successful in a considerate and a friendly environment that considers the needs of employees. Good leadership is required to efficiently operate an employee structure to achieve desired results (Iqbal, 2011). A leadership style is a pattern of behavior that a leader uses to interact with others. In recent years, the concepts of transactional and transformational leadership have received considerable attention by scholars who have explored leadership styles (Avolio and Yammarino, 2013; Ali, Babar, and Bangash, 2011). Burns (1978) conceptualized these styles; Bass (1985) developed them.

### **Transactional Leadership Style**

Transactional leadership evolved with the speed of the healthcare market (McCleskey, 2014). Transactional leadership is a matter of the leader facilitating a process of exchange between himself and his subordinates based on their performance, using policies and power to control them. Transactional leadership is characterized by three types of behavior (Odumeru and Ifeanyi, 2013; Sudha, Shahnawaz, and Farhat, 2016):

### **1. Conditional rewards**

To affect a worker's behavior, the leader identifies the needs of a certain task, sets goals in a specific manner, determines how to achieve them, and rewards the employee for his efforts. In this scenario, the leader believes that rewards and punishments are the best way to manage employees.

### **2. Active management-by-exception**

With this type of behavior, the leader actively monitors performance and keeps an eye out for when employees deviate from established rules. The leader uses corrective actions to ensure that tasks are carried out in accordance with accepted standards.

### **3. Passive management-by-exception.**

This refers to when a leader influences employee behavior by focusing on short-term goals and waiting for issues to arise, then intervening and correcting the employee, but only when problems become serious enough to take action.

*Question 1: What is the level of practice of transactional leadership in Jordanian public hospitals?*

### **Transformational leadership style**

When leadership first began to evolve, the transactional style was useful since it led to the development of the transformational one. Burns examined transformational leadership, which is characterized by a leader's personality and consists of two main aspects:

- (1) Raising an employee's awareness of ideological loyalty to the hospital target; and
- (2) Honesty in terms of leader own identity. Transformational leadership is comprised of four types of behavior:

#### **1. Idealized influence**

This involves romanticized behavior and traits. The leader instills pride in his followers, gives priority to the interests of the organization and employees in terms of personal reconciliation, gains his employees' trust and respect, and develops a clear vision and roadmap landmarks to influence followers, guiding them toward contributing to the achievement of the intended objectives.

#### **2. Inspirational and employee motivator**

This refers to a leader that looks optimistically toward the future, has a positive vision, sets achievable and appealing targets, encourages teamwork and enthusiasm, and combines the mind and heart when creating changes in the workplace.

#### **3. Individualized concern**

This shows that a leader is paying close attention to employees' needs, listens to others, and is interested in his employees' well-being and development. The leader acts as a coach and approaches employees as individuals, not as members of a group.

#### 4. Intellectual encouragement

This refers to a leader that can accept different viewpoints and diversity, helps his employees grow and develop, and builds teams. This leader also encourages his employees to be creative, solve problems, and to be innovative by questioning their assumptions and finding new ways of perceiving the situation at hand (Nikeziã, Puriã, and Puriã, 2012; Bradshaw, Chebbi, and Oztel, 2015).

Based on the above, we can say that a good manager has the ability to switch between the transactional and transformational styles based on current conditions.

*Question 2: What is the level of practice of transformational leadership in Jordanian public hospitals?*

#### Employee satisfaction

Employees are an organization's most precious resource. Satisfaction is normally used to explain a person's state of mind when his needs have been fulfilled. However, employee satisfaction consists of the enjoyment, optimistic attitudes, and positive emotions that employees feel due to their working conditions (Locke, 1976). In order to successfully provide healthcare services, employees need to feel content in their workplace; thus, strategies to improve human resource management and employees' sense of fulfillment are essential in healthcare organizations, especially hospitals (Dieleman and Harnmeijer, 2006). There are two kinds of employee satisfaction:

1. The first relates to a worker's perception of his job as a whole.
2. The second involves the various components of a job such as profit, the work environment, and leadership.

Healthcare providers' sense of contentment derives from different aspects such as the extent to which rewards meet or surpass the level of fair remuneration that employees expect, the quality of the work environment, and career development.

*Question 3: What is the level of employee satisfaction in Jordanian public hospitals?*

#### Leadership and employee satisfaction

Prior research has revealed significant effects of leadership styles in many key variables of organizations, and has proposed that leadership styles affect employee satisfaction. Metwally, El-bishbishy, and Nawar conducted a quantitative study that aimed to explain the relationship between transformational leadership and job satisfaction in a fast-moving consumer goods (FMCG) company in Egypt (Metwally, El-bishbishy, and Nawar, 2014). Their results showed a highly significant, positive relationship between the study's variables.

In an empirical investigation, Al-Ababneh explored the influence of leadership styles on employee satisfaction in 5-star hotels in Jordan; the results showed that the democratic style was dominant and had a moderate effect on employees' sense of fulfillment (Al-Ababneh, 2013). Ahmad, Adi, Noor, Rahman, and Yushuang (2013) examined the link between job satisfaction and the transformational and transactional leadership styles among nurses in Malaysia in 2013. Their findings revealed a significant positive relationship between transformational leadership and job satisfaction. Mohammad, Al-Zeaud, and Batayneh (2011) attempted to explain the connection between transformational leadership and nurses' satisfaction in private Jordanian hospitals. They found a statistically significant positive link between transformational leadership and contentment with one's job; the strongest relationship was between transformational leadership and internal job satisfaction.

Awamleh and Al-Dmour (2005) tested the connection between employee satisfaction and the transactional and transformational leadership styles among managers and supervisors in all of Jordan's national commercial banks. Their outcomes indicated a link between job satisfaction and the two leadership styles, and that reaching a higher level of employee fulfillment required transformational and transactional leadership, which depended on the circumstances.

*Question 4: What is the relationship between employee satisfaction and transactional and transformational leadership in Jordanian public hospitals?*

## METHODOLOGY

The study data were collected from March to May in 2016 from three major hospitals selected randomly from nine hospitals using quantitative, descriptive, and fieldwork method. The author employed a questionnaire to gather primary data and perused relevant books, scientific journals, and electronic search engines for secondary data. The author designed the questionnaire based on the approaches of prior research (Den Hartog, Van Muijen, and Koopman, 1997; Rodrigues and Ferreira, 2015). The author employed a five-point Likert scale in the questionnaire according to the following semantics: 5 = *strongly agree*, 4 = *agree*, 3 = *neutral or I don't know*, 2 = *disagree*, and 1 = *strongly disagree*. The questionnaire consisted of four parts. The first section included the invitation and option to participate, as well as the study's ethical obligations. The second part contained questions on the participants' characteristics (age, type of work, work experience). The third section explored leadership styles, as described in Tables 1-9. The fourth part detected the level of employee satisfaction, as shown in Table 10. Two specialists reviewed the questionnaire's validity. They confirmed the reliability through the Cronbach's alpha test ( $\alpha = 69.3-77.1\%$ ). The author investigated the results using the Statistical Package for Social Sciences (SPSS), Version 18.0. To analyze the findings, the author employed frequency, percent, means value, standard deviation, and correlation tests. The author interpreted the means value as the following: <sup>3</sup> 3.68 which indicated a high presence of variables; a value between 2.34 and 3.67 showed a medium presence, and £ 2.33 revealed a low number of variables. The tests were considered significant at £ 0.05.

Jordan has 31 public hospitals; 9 are classified as main hospitals and contain 64% of public hospital beds. The hospitals examined were major ones where the author expected to find modern administrative methods being used. Ethical approval was obtained by the Ethics Committee of Jordan's Ministry of Health. The author and his assistants randomly distributed a total of 800 questionnaires. They asked all participants to sign a consent form whereby they agreed to participate after learning about the study's objectives and the hospital laid out its terms about consent. They received 691 valid questionnaires with an 86% response rate. The author preserved all questionnaires and results in a confidential manner. Most participants were younger than 54, 78% were working in healthcare services, and 33% had more than 5 years of work experience.

## RESULTS

### Transactional Leadership

The findings showed descriptive statistics regarding responses to the first question: *What is the level of practice of transactional leadership in Jordanian public hospitals?*

The results in Table 1 revealed that transactional leadership was present at a medium level (MV = 3.52). Passive management-by-exception was present at a high level (MV = 3.80), and conditional reward at a medium level (MV = 3.45). Active management-by-exception was present at a medium level as well (MV = 3.31). All mean scores related to the practice of transactional leadership in Jordanian public hospitals were significant.

**Table 1**  
**Transactional leadership**

<i>Sl. No.</i>	<i>Leadership is characterized by:</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>	<i>L</i>
1.	Conditional reward	3.45	0.65	2	18.2	.00	M
2.	Active management-by-exception	3.31	0.68	3	12.0	.00	M
3.	Passive management-by-exception	3.80	0.85	1	24.6	.00	H
	Total	3.52	0.53		25.5	.00	M

### Conditional Rewards

Table 2 shows that leaders who are good at identifying an organization's needs and ways to meet them had a high presence (MV = 4.01); that 79% of respondents thought their leaders were good at identifying an organization's needs, while only 8% disagreed. Leaders' reliance on determining ways to achieve goals had a medium presence (MV = 3.25); 34% of participants agreed with using this governance technique while 52% disagreed, and 26% did not feel they could make a judgment. In terms of using rewards to achieve goals, leaders who adhered to this type of behavior were present at a medium level (MV = 3.08); in the 9 hospitals, 34% of respondents agreed and 26% disagreed with this dominant approach.

**Table 2**  
**Conditional reward**

<i>Sl. No.</i>	<i>The leader:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1.	Identifies the direction of a hospital's performance and needs	3.0	4.8	13.3	45.3	33.6	4.01	0.90	1	27.6	.00
2.	Determines ways to achieve goals	4.5	21.7	23.3	44.7	5.8	3.25	1.00	2	6.67	.00
3.	Uses rewards to achieve goals	2.7	24.2	38.9	30.2	3.9	3.08	0.89	3	2.49	.01

### Active Management-by-exception

Table 3 indicates that leaders who adopt standardization in all tasks were present at a medium level in the 9 hospitals (MV = 2.87); only 29% of respondents agreed and 40% disagreed with this approach. Leaders who comprehensively monitored their employees were present at a medium level (MV = 3.23); nearly half of the participants approved (47%), while 26% disagreed with the actions of this type of leader. One strong characteristic of hospital leaders was waiting until employees deviated from standards to intervene (MV = 3.82). In the 9 hospitals surveyed, 70% of participants agreed with this method, while 14% disagreed.

Table 4 shows that participants had a high mean score in regards to leaders having short-term outlooks (MV = 3.88). Most participants (79%) believed that current leaders were dealing with labor issues from a



**Table 3**  
**Active management-by-exception**

<i>Sl. No.</i>	<i>The leader</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1.	Plans everything	9.1	31.1	31.0	20.8	8.0	2.87	1.09	3	4.30	.02
2.	Monitors everything	7.2	19.2	26.3	37.2	10.0	3.23	1.07	2	5.67	.00
3.	Holds employees accountable for deviating from the rules	3.2	10.6	16.2	40.7	29.4	3.82	1.06	1	20.3	.00

short-term perspective, while only 10% disagreed. In terms of leaders dealing with problems by waiting for them to occur, the results showed a high mean score (MV = 3.78); 71% of participants agreed with this technique for handling challenges, while 13% disagreed. Most participants reported a high mean score in terms of leaders not intervening until issues became serious. A frequency analysis showed that 71% of respondents agreed with this approach, while 13% disapproved.

**Table 4**  
**Passive management-by-exception**

<i>Sl. No.</i>	<i>The leader:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1.	Focuses on the short term	4.3	5.8	11.1	54.6	24.2	3.88	0.98	1	23.6	.00
2.	Waits until problems occur	5.2	7.8	15.9	45.2	25.9	3.78	1.07	2	19.2	.00
3.	Only intervenes when problems become serious	5.6	6.9	19.9	49.2	21.3	3.73	1.04	3	18.4	.00

### Transformational Leadership

Regarding the answers to the second study question (*What is the level of practice of transformational leadership in Jordanian public hospitals?*), the participants tended to report that the hospitals they worked at had a medium level of leaders who are inspirational motivators. (MV = 3.43), provide intellectual encouragement (MV = 2.91), an idealized influence (MV = 2.72), and have a low level of individualized concern (MV = 2.21).

**Table 5**  
**Transformational leadership**

<i>Sl. No.</i>	<i>Leadership is characterized by:</i>	<i>MN</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>	<i>L</i>
1.	Idealized influence	2.72	0.91	3	10.9	.00	M
2.	Being an inspirational motivator	3.43	0.59	1	19.2	.00	M
3.	Individualized concern	2.21	0.42	4	48.8	.00	M
4.	Intellectual encouragement	2.91	0.86	2	25.3	.01	M
	Total	2.82	0.55		18.2	.00	M

### Idealized Influence

In the hospitals surveyed, 42% of respondents believed that leaders fostered an atmosphere of honesty, while 41% did not. This aspect was present at a medium level (MV = 2.94). In terms of leaders who can

gain employees' respect, they are present at a medium level (MV = 2.83), while only 29% of respondents thought that leaders could do so, and 41% disagreed. The ability of leaders to develop a clear vision was present at a medium level (MV = 2.39); 17% of participants thought that leaders performed this vital task, while the majority (67%) reported that leaders did not.

**Table 6**  
**Idealized influence**

<i>Sl. No. The leader:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1. Can be honest	13.5	27.4	16.9	35.7	6.5	2.94	1.10	1	1.20	.22
2. Builds trust and respect	9.8	30.7	30.4	24.2	4.9	2.83	1.05	2	4.90	.00
3. Develops a clear vision	19.4	45.2	18.1	11.4	5.9	2.39	1.10	3	14.4	.00

### Inspirational Motivator

As shown in Table 7, a significant mean value was found for 3 statements in the questionnaire, which were associated with the element of inspirational motivator. The ability of leaders to inspire others had a medium value (MV = 2.93); 28% of participants agreed, 34% disagreed, and 37% claimed they did not know. The ability of leaders to motivate others and provide direction was present at a high level (MV = 4.20); most respondents agreed, while 18% did not. Similarly, the mean score for the statement “leader motivate others in the 9 hospitals” had a medium level (MV = 3.16); 35% of participants agreed, while 34% disagreed.

**Table 7**  
**Inspirational motivator**

<i>Sl. No. The leader:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1. Inspires others	5.5	28.5	37.0	24.6	4.3	2.93	0.96	3	1.70	.05
2. Drives others	4.9	13.0	27.4	33.7	21.0	4.20	0.80	1	39.5	.00
3. Motivates others	7.8	25.8	31.3	31.4	3.8	3.16	0.92	2	4.9	.00

### Individualized Concern

In terms of the mean scores for the three statements relating to how much concern leaders expressed, employees revealed significant differences in perception, as shown in Table 8. Leaders who were supportive of employees had a low medium score (MV = 2.65); only 17% of respondents agreed that leaders actively supported employees, while 56% did not agree. Similarly, only 17% of employees used the adjective *coach* to describe their leaders, while 52% did not. The mean score for this item was at a medium level (MV = 2.71). Most respondents agreed that leaders were not a source of happiness. (MV = 1.28). This low level of mean score is consistent with the frequency of employees' responses, where 77% of respondents agreed with this low level and 18% did not.

### Intellectual Encouragement

Table 8 revealed significant differences in the medium mean score for all items relating to intellectual encouragement. In terms of leaders accepting diversity (MV = 3.25), 44% agreed with this argument, while 35% did not. The mean score for leaders who are successful at building teams was present at a



**Table 8**  
**Individualized concern**

<i>Sl. No. The leader:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1. Supports individuals	1.7	53.8	27.5	10.9	6.1	2.65	0.91	2	9.81	.00
2. Acts as a coach	6.8	44.9	31.7	11.7	4.9	2.71	0.89	1	8.42	.00
3. Makes workers feel content	20.8	56.3	15.2	11.7	7.4	1.28	0.45	3	20.9	.00

medium level (2.88); 42% of respondents found their leaders to be supportive of their teams, while an equal amount (also 42%) disagreed. The effectiveness of public hospitals in supporting creativity had a medium level (MV = 2.61); 29% of people agreed, while 48% disagreed.

**Table 9**  
**Intellectual encouragement**

<i>Sl. No. The leader:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1. Accepts variety	5.6	29.2	20.8	39.1	5.2	3.25	0.86	1	7.69	.00
2. Builds teams	11.7	30.7	15.8	32.9	9.0	2.88	1.10	2	4.60	.00
3. Supports creativity	23.7	24.7	22.3	25.0	4.2	2.61	1.20	3	8.81	.01

### Employee Satisfaction

In terms of the answers to the third question (*What is the level of employee satisfaction in Jordanian public hospitals?*), Table 10 shows that public hospital employees had a significantly medium level of satisfaction (MV = 3). Satisfaction was high for one item and medium for four elements of measurement. Table 10 reveals that the item *I'm satisfied with the nature of my work* had a significant medium level (MV = 2.78), where 37% of participants agreed, while 49% did not. The proportion of respondents satisfied with the people who managed the hospital where they worked had a significant medium level (MV = 3.01); 38% were satisfied with the hospital administration, while 29% were not able to judge, and 34% were dissatisfied with the leadership style.

**Table 10**  
**Overall employee satisfaction**

<i>Sl. No. I'm satisfied with:</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>MV</i>	<i>SD</i>	<i>L</i>	<i>t</i>	<i>Sig.</i>
1. The nature of my work	20.8	28.4	14.2	25.0	11.6	2.78	1.20	5	5.9	.00
2. The people who manage the hospital	7.8	26.0	28.7	32.1	5.4	3.01	1.05	2	12.2	.00
3. My relationships with my peers	2.6	13.3	16.2	43.4	24.5	3.73	1.04	1	30.4	.00
4. My salary	15.9	40.1	18.2	19.7	6.1	2.59	1.10	6	5.17	.02
5. Opportunities for advancement	3.9	32.1	34.9	22.6	6.5	2.95	0.97	4	12.28	.00
6. Everything with my current job situation	7.2	26.8	33.0	27.1	5.9	2.97	1.03	3	11.58	.00
Total	3.00	0.54	–	24.5	.00					

Those who were content with their peers had a high ranking (MV = 3.73); 68% of employees were fulfilled by their relationships with their co-workers, while 16% were not. The item *How much are you satisfied with your salary?* had a significantly low level. Only 26% of public hospital employees were content with their salaries, while 56% were not. Satisfaction with opportunities for advancement had a medium level (MV = 2.95) that was significant; 29% of respondents thought that working in public hospitals provided an opportunity for professional development, while 36% did not. The item *I am satisfied with everything in my job* had a similar level to overall employee satisfaction (MV = 2.97); 33% of participants were fulfilled by their current jobs, while 33% did not know, and 34% were dissatisfied.

*Question 4: What is the relationship between employee satisfaction and transactional and transformational leadership in Jordanian public hospitals?*

As shown in Table 11, a significant positive medium correlation was found between transformational leadership and employee satisfaction (Pearson's correlation = .41,  $p$ -value = .00), idealized influence (Pearson's correlation = .32,  $p$ -value = .00), inspirational motivator (Pearson's correlation = .33,  $p$ -value = .00), motivating employees (Pearson's correlation = .41,  $p$ -value = .00), individualized concern (Pearson's correlation = .22,  $p$ -value = .00), and intellectual encouragement (Pearson's correlation = .39,  $p$ -value = .00). A weak, significant, appositive correlation was found between transactional leadership and employee satisfaction (Pearson's correlation = .17,  $p$ -value = .00), conditional reward (Pearson's correlation = .25,  $p$ -value = .00), active management-by-exception (Pearson's correlation = .16,  $p$ -value = .03), and passive management-by-exception (Pearson's correlation = .01,  $p$ -value = .05).

**Table 11**  
Correlations between hospital leadership style and employee satisfaction

<i>Leadership style</i>	<i>Pearson's r</i>	<i>Sig.</i>
Transactional Leadership	.17	.00
Conditional reward	.25	.00
Active management-by-exception	.16	.03
Passive management-by-exception	.01	.05
Transformational leadership	.41	.00
Idealized influence	.32	.00
Inspirational motivator	.33	.00
Individualized concern	.21	.00
Intellectual encouragement	.39	.00

## DISCUSSION AND CONCLUSIONS

The link between leadership style and employee satisfaction is a fundamental aspect that truly benefits those in charge of public hospitals in Jordan; this connection is also vital for hospital success. This study is critical to improving outcomes due to the growing number of challenges facing public hospitals and the importance of leadership styles, employee satisfaction, and the connection between them.

The results indicate that transactional leadership is the most prevalent type of style in Jordanian public hospitals, as well as Sudanese hospitals (Mohammed, Tadadej, Kittipichai, and Pongpirul, 2014). Some possible reasons include:

### **1. Leaders Displayed Passive Management-by-exception**

Leaders did not possess a strategic ideology or deal with serious problems immediately when they arose. Problems worsened. This behavior is more harmful and could potentially affect public health in the long term.

### **2. Adopting the Principle of Conditional Reward**

In this situation, the leader always determines business needs from this angle and often rewards employees who achieve set targets, possibly neglecting those who do not. This will lead to the disclosure of the reasons for why some workers did not reach their goals. The performance of such employees might decline, thus negatively impacting their work.

### **3. Active Management-by-exception**

The leader may display active management-by-exception behavior where the leader continually monitors the performance of employees who deviate from established rules. This can cause workers' creativity to stagnate.

In terms of the transformational leadership style, the results revealed a low medium level. The main causes leading to the decline of the transformational style were:

1. *A lack of concern for employees:* If leaders do create a friendly workplace, then employees could become stressed. In addition, if leaders cannot secure enough loyalty from employees, they may lose their motivation to remain committed and develop a desire to leave their jobs. Healthcare workers need more administrative support for both scientific and professional development.
2. *The leader may have a weak ability* to be a model for his employees, resulting in difficulty gaining their trust and respect. Leaders must have a vision because their actions speak louder than words.
3. *The leader may not have much inspiration* or creativity, possibly resulting in the leader not pursuing creative initiatives or building teams.
4. *The leader may have an inappropriate role as an innovator:* Despite a very high capacity to direct others, a leader may not have the ability to motivate them. In such a situation, the leader might depend on the sense of power he gains from telling employees what to do. This finding is consistent with Foon (2016), who found a strong positive relationship between transformational leadership and employee motivation in Malaysian hospitals.

In Jordan's public hospitals, employee satisfaction is medium. The main reasons for the decline in satisfaction in government hospitals include low salaries and work-related issues, as well as overcrowding. These outcomes confirm the findings of other studies (Saif, 2016; Mohammed *et al.*, 2014), which indicated that the main reasons for low employee satisfaction in Jordanian and Sudanese hospitals are poor wages and the pressures facing a growing industry. Employees were also not satisfied with development and learning opportunities.

In terms of the two leadership styles' connections with employee satisfaction, the transformational style had a medium positive relationship, while the transactional one had a weak positive relationship. These results are supported by prior research (Ahmad *et al.*, 2013), which found that the transformational

style had a greater effect on nurses' satisfaction compared to transactional leadership. In another study, a significant positive relationship was found between transformational leadership and employee satisfaction in Jordanian private hospitals (Mohammad *et al.*, 2011).

This study faced various limitations. The author only investigated public hospitals; thus, future research could examine all types of hospitals in Jordan. This study was based on a quantitative method; hence, future studies can use qualitative techniques to deepen the understanding of the problem of low employee satisfaction.

### The Study's Recommendations

Based on the results, the study recommends that leaders make more of an effort in terms of caring for individuals.

1. Policymakers need to strengthen leadership practice in hospitals by improving leaders' approaches to choosing and implementing continuing education programs.
2. Leaders in public hospitals need to:
  - Look at the administrative process through a strategic lens.
  - Develop measurable indicators to detect problems early on and oversee daily operations.
  - View employees as a group and not as individuals.
  - Ensure the existence of a working program to determine employees' needs and improve their satisfaction.
  - Disclose the reasons that lead to a decline in the performance of some workers and address the underlying causes.

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