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The Role of Transformational Leadership Style and Organizational Culture in Hospital Accreditation Success : a Case Study at RSUD Prabumulih

Dedianto[1]*, V. Rudy Handoko[2], IGN. Anom Maruta[3]
Universitas 17 Agustus 1945 Surabaya
Corresponding Author Dedianto drdedispaerm@gmail.com

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A B S T R A C T

The implementation of hospital accreditation often primarily focuses on administrative compliance, frequently overlooking the crucial need for organizational culture shifts that foster continuous service quality. At RSUD Prabumulih, for instance, accreditation is still largely perceived as a short-term project rather than a catalyst for cultural transformation. This research utilizes Transformational Leadership Theory (Bass & Avolio, 1994) and Organizational Culture theory (Robbins, 2006) to analyze the interaction between leadership and culture in achieving accreditation. Data was collected through in-depth interviews, observation, and document review, and analyzed using thematic analysis techniques (Miles & Huberman, 1994).The findings indicate that transformational leadership (manifested through role modeling, motivation, intellectual stimulation, and individualized consideration) plays a crucial role in building a collaborative and quality-oriented organizational culture, thereby driving accreditation success.

INTRODUCTION

Hospital accreditation is a critical instrument for improving healthcare service quality and patient safety. This process not only evaluates compliance with administrative standards but also fosters the transformation of organizational culture towards quality- and safety-oriented service practices. However, the implementation of accreditation in many hospitals, particularly at the regional level, still faces challenges in internalizing quality values into daily work culture (Wardhani, V., 2018). In this context, transformational leadership style plays a crucial role. Transformational leadership, characterized by the ability to inspire, motivate, and empower staff, has proven effective in driving positive change within healthcare organizations. Leaders adopting this style can build a shared vision, enhance organizational commitment, and create a work environment that supports innovation and service quality improvement (Gumilar, N., 2023).

Despite accreditation aiming to enhance service quality, its on-the-ground implementation often focuses solely on fulfilling administrative and documentary requirements. This approach tends to neglect the substantial aspects of service, such as changes in staff behavior and the cultivation of a quality-supporting organizational culture. Consequently, the orientation towards service quality has not been fully internalized into the hospitals' daily practices. Based on preliminary observations at RSUD Prabumulih, the accreditation process is still perceived as a short-term project that only becomes a priority nearing assessment period. Compliance with service standards tends to be overlooked. Furthermore, not all units fully comprehend the meaning behind the established standards, leading to an implementation that is more formal than substantial. This indicates that a culture of quality has not fully become part of the organizational values, and there is still a need for a shift in mindset and leadership capable of comprehensively internalizing quality values within the hospital's work culture.

This study aims to analyze the role of transformational leadership style and organizational culture in the success of hospital accreditation, specifically as a case study at RSUD Prabumulih. The novelty of this research lies in its focus on the interaction between transformational leadership and organizational culture within the context of a regional hospital, an area that remains underexplored. This research has theoretical implications by enriching the existing body of knowledge on transformational leadership and organizational culture within healthcare. Practically, the findings of this study can serve as a reference for hospital management in designing leadership strategies and fostering a work culture that supports successful accreditation.

LITERATURE REVIEW

Transformational leadership represents an approach focused on organizational change, innovation, and renewal, distinguishing itself from traditional leadership which often maintains the status quo (Dwiyekti, 2011). Transformational leaders effectively mobilize organizations through a strong vision and a commitment to continuous improvement. They empower organizational members with freedom, responsibility, and a sense of ownership, thereby unleashing individual leadership potential (Khan et al., 2012). Luthans (2006) emphasizes that this style is particularly effective in enhancing organizational performance, especially when facing periods of change. These leaders act as inspirers who drive achievements beyond expectations, not through coercion, but through fostering internal motivation. Moreover, transformational leadership also cultivates positive emotional connections, acting as mentors and guides who foster self-leadership (Mondiani, 2012). This style is highly relevant across various organizational levels due to its capacity to build an adaptive, innovative, and sustainability-oriented work culture.

The Transformational Leadership Theory, developed by Bass and Avolio (1994), serves as the primary conceptual foundation for this research. This theory underscores the crucial role of leaders in transforming organizations through a visionary and participative approach, encompassing four interrelated key indicators:

1. Idealized Influence: Leaders serve as role models, exhibiting high integrity, strong ethics, and unwavering commitment to organizational values, thereby building trust and loyalty among followers.
2. Inspirational Motivation: Leaders effectively articulate the organization's vision and mission in a convincing manner, fostering a collective spirit in achieving shared objectives.
3. Intellectual Stimulation: Leaders encourage followers to think creatively and critically, promoting openness to new ideas as part of the innovation and renewal process.
4. Individualized Consideration: Leaders demonstrate genuine attention to the needs and potential of each individual, providing support for personal and professional development.

The relevance of this theory to hospital accreditation success lies in the transformational leader's ability to cultivate a culture of quality, empower staff, and create a work environment that is adaptive to change and continuous performance improvement. Organizational culture is a shared system of values, beliefs, and meanings held by organizational members, which shapes their ways of thinking and acting in pursuit of common goals (Robbins, 2006; Mas'ud, 2004). In the context of successful hospital accreditation, a strong organizational culture is a vital foundation for fostering a collective commitment to service quality. This culture not only influences decision-making but also strengthens the responsiveness of all organizational elements to the evolving demands of accreditation standards.

Healthcare service quality reflects the extent to which services align with community needs, based on applicable professional and ethical standards. Donabedian (1980) posits that quality can be evaluated through three essential elements: structure (facilities and resources), process (how services are delivered), and outcome (the impact on patient conditions). This model forms a fundamental basis for designing hospital accreditation systems in Indonesia to ensure service quality.

Previous research consistently shows that organizational culture and transformational leadership style play significant roles in shaping employee work behavior and organizational effectiveness. For instance, Hardiyanti (2016) investigated employees at RSUD Kota Mataram and found that organizational culture significantly influenced extra-role behavior (OCB) and organizational commitment. Meanwhile, transformational leadership had a significant effect on organizational commitment, although it did not directly influence OCB. However, through the mediation of organizational commitment, the impact of transformational leadership on OCB became significant, underscoring the importance of this mediating aspect in their relationship. A literature review by Torar and Wulandari (2023) affirmed that transformational leadership style effectively enhances the implementation of a patient safety culture in hospitals. Leaders adopting this style drive behavioral and work culture changes that prioritize patient safety.

Concurrently, Darto (2013) examined transformational leadership within the context of organizational change at the National Institute of Public Administration (LAN). He highlighted that success in changing organizational structures and products is more readily achieved than cultural transformation, which demands more intensive efforts. In this regard, transformational leadership is key to facilitating comprehensive organizational culture change.

Finally, Maulana and Faddila (2023) demonstrated that leadership emphasizing interpersonal relationships, charismatic communication, and deliberative decision-making processes can improve management quality and solidarity among employees, as evidenced by the leadership of BAZNAS Karawang Regency.

The novelty of this research lies in its exploratory focus on the interaction between transformational leadership and organizational culture within the context of a regional hospital. While both variables have been extensively studied separately, research simultaneously linking them in a regional hospital setting remains significantly limited. Based on a review of previous studies, no research has specifically analyzed the reciprocal relationship between these two variables in supporting hospital accreditation success. Therefore, this study is expected to make a significant scientific contribution by filling this gap in the literature and offering a new perspective on strengthening hospital governance based on effective leadership and organizational culture.

METHODOLOGY

This study employed a qualitative research design with a case study approach, aiming to gain an in-depth understanding of the role of transformational leadership style and organizational culture in supporting hospital accreditation success. This approach was chosen for its ability to explore the internal dynamics of an organization contextually, particularly in examining leadership processes, prevailing cultural values, and their contribution to achieving hospital accreditation (Yin, 2018). The primary data sources for this research were informants comprising the hospital director, head of quality assurance, head nurses, healthcare professionals, and support staff involved in the patient accreditation process. Informants were selected using purposive sampling to ensure representation from various roles and responsibilities within the hospital's organizational structure (Creswell, 2019).

Data collection was conducted through in-depth interviews, participant observation, and document review. The documents reviewed included accreditation guidelines, quality achievement reports, quality meeting minutes, and internal hospital policy documents. Interviews were semi-structured to elicit in-depth information regarding perceptions. Observations were carried out in management offices, inpatient wards, and other strategic service areas. Data analysis was performed using a thematic approach with an interpretive perspective, following the steps outlined by Miles and Huberman (1994): data reduction, data display, and conclusion drawing. Data validity was maintained through source and technique triangulation, as well as member checking, by confirming findings with informants to ensure the accuracy of interpretations (Lincoln & Guba, 1985).

RESEARCH RESULT

Analysis of the Relevance of Transformational Leadership Theory and Organizational Culture to Hospital Accreditation Success

Hospital accreditation success is not merely dependent on fulfilling administrative or technical requirements; rather, it reflects the outcome of a complex organizational transformation process. Such transformation demands leadership capable of building a long-term vision, mobilizing all organizational components towards continuous improvement, and developing an adaptive, quality-oriented organizational culture. In this context, Transformational Leadership Theory by Bass and Avolio (1994) and the concepts of Organizational Culture by Robbins (2006) and Mas'ud (2004) emerge as two primary theoretical perspectives highly relevant for analyzing factors contributing to accreditation success at RSUD Prabumulih.

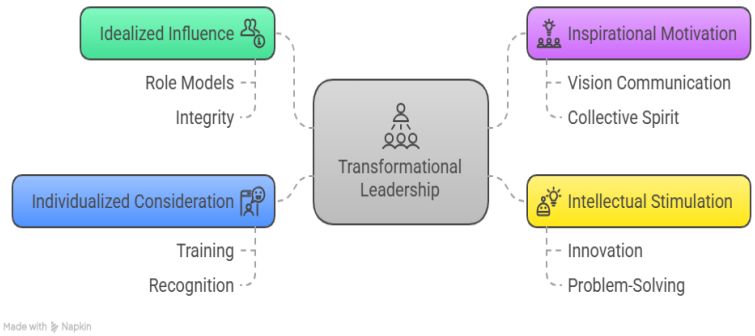

Figure 1. Transformational Leadership Theory in Hospital Accreditation

Transformational Leadership Theory

Transformational leadership theory highlights the strategic role of leaders in driving organizational change through vision, inspiration, intellectual stimulation, and personalized attention. At RSUD Prabumulih, the hospital accreditation process was not merely an administrative top-down endeavor. Instead, it involved a collective mobilization led by individuals capable of instigating change through a transformative leadership approach.

The four key dimensions of Bass and Avolio's (1994) theory are evidently present in the accreditation implementation process:

1. Idealized Influence: Hospital leaders acted as role models possessing high integrity and a strong commitment to quality principles. Research findings indicate that key leaders demonstrated courage in making difficult decisions, such as reorganizing the organizational structure, tightening oversight of service quality, and upholding work ethics aligned with accreditation standards. This fostered trust and loyalty among employees, prompting them to willingly go the extra mile in meeting accreditation indicators. This value-driven leadership strengthened internal solidarity within the hospital and created a more synergistic work environment.
2. Inspirational Motivation: The declared accreditation vision was understood not merely as an administrative obligation but as part of a strategy to improve healthcare service quality for the community of Prabumulih. Findings show that hospital leadership actively disseminated accreditation goals through various forums, training sessions, and cross-unit discussions. The vision was communicated in an inspirational manner, successfully building a collective spirit and cultivating a sense of belonging to the accreditation process.

3. Intellectual Stimulation: Leaders encouraged staff to actively participate in quality problem-solving and to be open to innovative ideas in implementing accreditation standards. Findings revealed the involvement of multi-professional staff in the accreditation team, providing space for innovation in quality documentation systems, and adopting interdisciplinary approaches to decision-making. The non-authoritarian stance of leaders, coupled with their openness to discussion, was crucial in fostering a creative and flexible work environment.
4. Individualized Consideration: Leadership at RSUD Prabumulih demonstrated attention to individual development through accreditation training, personal coaching, and recognition for high-achieving staff supporting quality programs. This type of attention strengthened employees' intrinsic motivation, increased their involvement, and enhanced the hospital's human resource capacity to meet the complex and dynamic demands of accreditation.

Overall, the transformational leadership theory is highly relevant to the empirical findings at RSUD Prabumulih. The success of hospital accreditation is undeniably linked to the role of leaders who can direct, motivate, and empower all organizational components in the spirit of transformation.

Organizational Culture

Organizational culture, as defined by Robbins (2006) and Mas'ud (2004), is understood as a system of shared values, beliefs, norms, and meanings among organizational members. This culture shapes their thinking and behavior in responding to organizational challenges. In the hospital context, organizational culture serves as a collective foundation for addressing the demands of service quality and accreditation.

Findings at RSUD Prabumiluh indicate that the prevailing organizational culture is collaborative, open to change, and focused on service excellence. This culture is shaped by cross-unit work habits, open dialogue among professions, and a shared commitment to quality. Some actualizations of this culture include

1. Shared commitment to quality and patient safety standards: This was evident in how all service units, from administration and clinical to support services, aligned their activities with accreditation indicators.
2. Culture of teamwork and inter-departmental coordination: Routine practices such as morning briefings, regular internal audits, and quality communication forums strengthened a culture of dialogue and continuous improvement.
3. Adaptation to change and collective learning: Employees demonstrated readiness to follow procedure changes, update documentation, and actively learn from external assessment processes and internal audits.

This strong organizational culture demonstrably enhanced the hospital's responsiveness to the ever-changing demands of accreditation standards. It also fostered a collective identity among staff that accreditation success was not solely a management achievement but a shared accomplishment.

It is clear that organizational culture cannot exist in isolation. A strong culture forms when there is consistency of values between leaders and staff, and continuity in the process of internalizing quality values. In this regard, transformational leaders play a vital role in instilling, strengthening, and revitalizing organizational culture. The synergy between leadership values and organizational values creates high cohesion and reinforces the successful implementation of accreditation.

DISCUSSION

Idealized Influence and Leadership Exemplar in Organizational Transformation

This study's findings indicate that the success of hospital accreditation at RSUD Prabumulih was significantly influenced by leadership characteristics displaying idealized influence, as formulated in Bass and Avolio's (1994) Transformational Leadership Theory. Within this framework, leaders acted not merely as technical managers but as exemplary figures embodying integrity, moral courage, and a high commitment to healthcare quality values.

This leadership was reflected in concrete actions, such as the restructuring of previously inefficient organizational structures, the implementation of quality-indicator-based work discipline, and the enforcement of service ethics. An informant stated: "*Our hospital director does not hesitate to go directly to the field, even reminding directly if there is a service unit that is not in accordance with quality standards. It makes us feel valued and challenged to work better*". *(Interview, Ministry Unit, 2025).*

This idealized influence strengthened both horizontal and vertical solidarity within the organization. When leaders demonstrated consistency between their words and actions, it built trust and loyalty among staff. From Robbins and Judge's (2013) perspective, the idealized influence of leaders possesses transformative power because it can internalize organizational values and goals into the identity and behavior of organizational members. This aligns with Burns' (1978) view that transformational leaders elevate collective morality to a higher level.

Furthermore, the presence of leaders as role models also bolstered symbolic legitimacy in the process of organizational change. Accreditation success at RSUD Prabumulih was not only viewed from an administrative aspect but also from how quality values became part of the daily work ethos. Leadership exhibiting idealized influence served as a catalyst for forming a cohesive and continuously quality-oriented work culture.

Inspirational Motivation and the Formation of Collective Spirit

The second finding emphasizes the importance of inspirational motivation as a pillar of transformational leadership in successful accreditation implementation. In the context of RSUD Prabumulih, the accreditation vision was not communicated merely as an administrative obligation but as a strategic narrative framing accreditation as part of an effort to improve the community's quality of life through better healthcare services. Hospital leaders actively initiated cross-unit dialogues, coordination forums, and training sessions that were not only technical but also contained a motivational dimension.

One staff member conveyed: *"We have come to understand that this accreditation is not only for grades or certificates, but for the improvement of the service system. The Director often says, 'we have not only passed accreditation, but we have changed the way we work for the people of Prabumulih". (Interview, Senior Nurse, 2025).*

This statement indicates that inspirational leadership can articulate a meaningful vision and evoke a sense of purpose among staff. This is crucial in the context of organizational change, as successful transformation heavily depends on leaders' ability to unify the direction of all organizational components. In Bass and Riggio's (2006) theory, inspirational motivation not only affects individual work enthusiasm but also strengthens team cohesion and coordination in facing shared challenges. The process of delivering an inspirational vision also reinforces affective commitment to the organization, not merely due to obligation or incentives, but because of belief in the shared values being built.

These findings also show that consistent and inclusive communication is key to successful inspirational motivation. Instead of a top-down approach, RSUD Prabumulih's leadership implemented a two-way communication pattern involving feedback from service units. This aligns with the concept of participative leadership, which emphasizes the importance of staff's emotional and intellectual involvement in the change process. In the context of public hospital systems often characterized by rigid bureaucracy, this approach enables the creation of organizational alignment, which is the coherence between leaders' strategic goals and the operational aspirations of frontline staff.

Intellectual Stimulation and the Formation of an Innovative Culture

The research findings indicate that leadership at RSUD Prabumulih demonstrated characteristics of intellectual stimulation, meaning they encouraged staff to think critically, creatively, and daringly explore new approaches to meet accreditation standards. Leaders did not adopt a rigid top-down approach but instead provided a space for dialogue and active staff involvement in various decision-making processes, particularly within quality and accreditation teams.

As expressed by one respondent: "*We are directly involved in developing a new format of quality documentation. Even if they have new ideas, leaders are open to listening. It feels appreciated as part of the solution*". *(Interview, Staff, 2025).*

This approach aligns with Bass and Avolio's (1994) concept, which states that transformational leaders will stimulate subordinates to view problems from new perspectives and encourage innovative problem-solving. In a hospital context, this attitude is crucial because accreditation challenges are not merely technical but also demand adaptation and cross-professional collaboration.

The application of an interdisciplinary approach and the openness to innovation, such as the development of new, more efficient, and inter-unit integrated quality documentation formats, indicates that RSUD Prabumulih's leadership successfully created a learning environment. Such a work environment plays a vital role in increasing organizational flexibility and accelerating continuous improvement processes.

Individualized Consideration and Human Resource Capacity Building

The dimension of individualized consideration also prominently appeared in RSUD Prabumulih's leadership. Leaders demonstrated genuine attention to individual capacity development through continuous technical and non-technical training, as well as personal coaching for staff encountering obstacles in implementing quality standards. This approach reflects leadership that is not only results-oriented but also focused on the growth process of each organizational member.

One informant conveyed: "*I was once reprimanded for incorrect input of quality documents, but instead of being scolded, I was immediately guided. After that, I was even more enthusiastic about learning*". *(Interview, Medical Officer, 2025).*

This action reinforces the argument that individualized attention from leaders can trigger an increase in staff's intrinsic motivation. According to Robbins and Judge (2013), this type of personal attention not only enhances job satisfaction but also strengthens organizational commitment. This is important in facing the complexities of the accreditation process, which demands consistency, meticulousness, and harmonious cross-unit collaboration.

Thus, individualized consideration in leadership not only contributes to the enhancement of human resource capacity but also serves as a crucial pillar in building adaptive and competent human capital to confront the dynamic demands of hospital accreditation policies. Within the framework of public policy implementation, this demonstrates that success is not solely determined by regulations or structure, but also by the quality of human relationships within the organization, especially in the complex and sensitive context of public services like hospitals.

Organizational Culture

Research findings indicate that RSUD Prabumulih has developed a collaborative, adaptive, and service excellence-oriented organizational culture. This culture is not merely structurally formed but is also a product of social interactions and consistent work practices within the context of implementing hospital accreditation standards. Within Schein's (2010) organizational culture theory framework, this evolving culture reflects three levels of organizational culture: artifacts (work practices and communication forums), espoused values (commitment to quality), and basic underlying assumptions (orientation towards learning and change).

Shared Commitment to Quality and Patient Safety Standards

Collective commitment to quality and patient safety is one of the most tangible manifestations of the organizational culture at RSUD Prabumulih. Findings show that all unit's administration, clinical services, and support services actively align their activities with accreditation indicators.

This demonstrates that accreditation is no longer perceived solely as an administrative burden but as a shared strategic goal internalized into daily operations. As one informant stated: "*We all move because we know this is not just a matter of documents. This concerns patient safety. So we really make sure the SOP is implemented*". *(Interview, Head of Emergency Unit, 2025).*

This condition aligns with the concept of quality culture in quality management literature (Dahlgaard-Park, 2011), which emphasizes the importance of internalizing quality values into organizational behavior. A commitment to quality becomes a driving force for creating consistent and evidence-based service standards.

Culture of Teamwork and Inter-Departmental Coordination

A collaborative culture, characterized by cross-unit teamwork and inter-divisional communication, plays a crucial role in successful accreditation implementation. Practices such as morning briefings, regular internal audits, and quality communication forums serve as strategic platforms for identifying problems, aligning procedures, and strengthening collective accountability.

A nurse conveyed: "*Through forums, we can open up to each other. Service problems are discussed together, so we don't blame each other, but fix each other*". *(Interview, Inpatient Room Nurse, 2025).*

This reflects the principles of a collaborative culture as outlined by Cameron and Quinn (2011), where organizational effectiveness is driven by involvement, open communication, and team participation. In the healthcare context, cross-professional collaboration is key to managing the complexity and dynamics of patient needs and regulations.

Adaptation to Change and Collective Learning

Organizational adaptability and a commitment to continuous learning are vital elements in maintaining the sustainability of an accreditation culture. Findings indicate that staff are prepared to accept procedure changes, update documentation, and learn from both external and internal audits. This learning culture not only demonstrates flexibility but also reflects a strong learning orientation.

As stated by an administrative staff member: "*We know the rules change often, but it is a challenge for us to continue learning. We help each other update documents and understand new policies*". *(Interview, Staff Quality Unit, 2025).*

This condition aligns with Senge's (2006) theory of the learning organization, which emphasizes that organizations capable of systemic learning are more adaptive in facing external changes. In the context of hospital accreditation, collective learning enables continuous enhancement of institutional capabilities.

Thus, the organizational culture at RSUD Prabumulih demonstrates a synergy among quality commitment, cross-unit collaboration, and a high capacity for learning. These three elements form the cultural foundation that supports the sustainable success of hospital accreditation implementation. This finding strengthens the argument that public service reform in the healthcare sector requires reinforcing the cultural dimension, not solely structural or regulatory approaches.

CONCLUSIONS AND RECOMMENDATIONS

This research demonstrates that the success of hospital accreditation implementation at RSUD Prabumulih is not solely determined by structural or administrative aspects, but is profoundly influenced by the transformational leadership practices exhibited by the hospital's management. The four core dimensions of Bass and Avolio's (1994) theory were clearly evident in the organizational dynamics, forming a cultural foundation that strengthened collective mobilization towards meeting accreditation standards.

Firstly, the Idealized Influence dimension was reflected in the leadership's exemplar of integrity and commitment to quality, fostering employee loyalty and a sense of responsibility. Secondly, through Inspirational Motivation, the accreditation vision was successfully communicated in an inspiring manner, building a shared spirit and a sense of ownership towards the change process. Thirdly, Intellectual Stimulation was apparent through participatory spaces that encouraged innovation, problem-solving, and interdisciplinary collaboration. Fourthly, Individualized Consideration was realized through personalized attention to staff development, continuous training, and recognition for individual contributions.

Furthermore, the collaborative, adaptive, and quality-oriented organizational culture at RSUD Prabumulih proved to be a key factor in supporting successful accreditation implementation. This culture grew from cross-unit work practices, collective commitment, and continuous learning. The alignment of values between leadership and staff strengthened the internalization of quality values. The role of transformational leadership became essential in instilling and reinforcing the organizational culture, thereby creating high cohesion and responsiveness to the ever-evolving demands of accreditation.

Firstly, the management of RSUD Prabumulih needs to maintain and strengthen transformational leadership practices through continuous leadership development programs for all levels of management. This is crucial to ensure that the values of idealism, motivation, innovation, and individualized consideration remain the foundation for managing hospital quality.

Secondly, it is recommended that the hospital standardize effective organizational culture practices, such as morning briefings, quality communication forums, and cross-unit training, into systematic internal policies. This is essential for sustaining a collaborative and adaptive culture, and for ensuring the organization's readiness to face evolving accreditation standards and the dynamics of the healthcare service system in the future.

ADVANCED RESEARCH

Firstly, we recommend that future research further explore the dynamics of transformational leadership in other regional hospitals with varying managerial and cultural characteristics. This will strengthen the generalization of findings and help identify contextual factors influencing leadership effectiveness in accreditation implementation.

Secondly, there's a need for longitudinal studies that continuously observe the long-term process of organizational culture change post-accreditation, including its impact on service performance and patient satisfaction. Such research would significantly contribute to formulating strategies for sustainable quality culture enhancement in public healthcare institutions.

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