



The influence of transformational leadership on nurses performance in hospital settings: scoping review

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ABSTRACT

Introduction: Transformational leadership in nursing has the potential to enhance nurses performance in hospital settings, fostering quality of care, job satisfaction and organisational commitment.

Objectives: To map the existing evidence regarding the influence of transformational leadership on nurses performance in hospital contexts.

Methodology: A scoping review was conducted according to the Joanna Briggs Institute methodology and PRISMA-ScR checklist. Literature was searched in MedLine, CINAHL and Academic Search, between 2014 and 2024, including grey literature. Studies in English or Portuguese with full-text availability were included.

Results: From 367 records identified, nine studies were included. Transformational leadership positively correlates with performance outcomes such as job satisfaction, psychological safety, clinical effectiveness and organisational commitment.

Conclusion: Transformational Leadership emerges as an effective leadership style to improve nurses' performance, supporting a positive work environment and contributing to care excellence. Investment in nursing leadership training is recommended.

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RESUMO

Introdução: A liderança transformacional na enfermagem surge como um estilo promissor para potenciar o desempenho dos enfermeiros em contexto hospitalar, promovendo a qualidade dos cuidados, a satisfação profissional e o comprometimento organizacional.

Objetivos: Mapear a evidência existente sobre a influência da Liderança Transformacional no desempenho dos enfermeiros, em contexto hospitalar.

Metodologia: Realizou-se uma scoping review segundo as diretrizes do Joanna Briggs Institute e o checklist PRISMA-ScR. A pesquisa foi conduzida nas bases MedLine, CINAHL e Academic Search, entre 2014 e 2024, incluindo literatura cinzenta. Foram incluídos estudos em português e inglês, com texto integral disponível, que abordassem a relação entre liderança transformacional e desempenho dos enfermeiros.

Resultados: Dos 367 estudos identificados, nove foram incluídos. A liderança transformacional correlaciona-se positivamente com dimensões do desempenho como satisfação no trabalho, segurança psicológica, eficiência clínica e compromisso organizacional.

Conclusões: A Liderança Transformacional contribui para a qualidade dos cuidados de enfermagem e satisfação dos enfermeiros, facilitando o atingimento de objetivos institucionais através da melhoria do desempenho dos enfermeiros em contexto hospitalar. Recomenda-se o investimento em formação sobre liderança em enfermagem.

Introduction

Nurses play a crucial role in improving healthcare and shaping new health policies, making it essential for them to develop leadership competencies.¹ Considering emotional intelligence, communication skills and collaboration is important for an effective leadership style, these factors influence and motivate nurses to achieve high levels of performance, which translate into better outcomes for patients.¹ It is imperative that nurses, especially those in management positions, master effective leadership in this context, Transformational Leadership (TL), stands out as a leadership style that provides the skills needed to continuously improve the quality and safety of care, while also increasing job satisfaction and professional performance.² TL focuses on building relationships and empowering team members by promoting shared values, vision, and goals.³

Historically, the concept of TL originated with Burns in 1978, who argued that leaders with certain attributes and behaviors could positively influence others. Burns termed this leadership approach “Transforming Leadership,” characterized by a bidirectional motivational relationship between leader and follower.^{1,4}

Bass expanded these studies by introducing the term “Transformational Leadership”, defined as a relational and integrative style that emphasizes passion for the organizational mission and builds trust among team members. In this model, staff demonstrate confidence and respect for the leader, are

motivated to exceed expectations, and the leader's focus is on empowering and strengthening each individual's abilities to improve organizational outcomes.^{1,5}

In 1994, Bass and Avolio described four components of TL: idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration. Idealized influence occurs when leaders set high ethical and moral standards and articulate the organization's vision to earn their staff's trust.⁵

Inspirational motivation is developed when leaders create a compelling vision and use words, symbols and images to inspire staff to act in accordance with the idealized goals. Intellectual stimulation occurs when leaders engage staff in solving organizational problems and consider their input in decision-making. Lastly, individualized consideration happens when leaders recognize and value the differences and individual needs of team members, striving to coach and guide them toward reaching their full potential.⁵

To better understand the influence of TL on nurses performance, it is essential to understand the hospital context in a comprehensive way. This context can be defined as the set of physical, organizational, and operational elements that make up the environment of a hospital, where healthcare is provided for diagnosing, treating, and recovering from illnesses and injuries.⁶

In addition to contributing to nurse retention and professional satisfaction, TL also has an impact on work performance. There is a relationship between TL and performance,

potentially promoted by nurse managers who, by creating a healthy professional atmosphere, stabilize work performance and human resources. Studying individual performance in the workplace is extremely important for both organizations and individuals.²

Performance can be conceptualized as behaviors or actions that are relevant to organizational goals, it emphasizes behaviors rather than outcomes and can be analyzed from different perspectives: management, occupational health, and organizational psychology. From the occupational health perspective, performance is evaluated through presenteeism and absenteeism due to illness, using several tools developed to measure these concepts. From the perspective of organizational psychology, the focus is on task performance.⁷

The definition of performance encompasses three complementary perspectives: individual, situational, and regulatory. The individual perspective considers that personal characteristics influence performance variation; the situational perspective suggests that context may either inhibit or promote performance and the regulatory perspective views performance as a process or action.⁸

Performance also includes four dimensions: task performance, which reflects an individual ability to carry out core job tasks; contextual performance, which relates to the organizational, social and psychological environment, including activities beyond one's formal role; adaptive performance, which reflects the ability to adjust to changes in the work environment; and counterproductive performance, which involves voluntary behaviors that are harmful to the organization's well-being.⁷

It is important to highlight that organizational factors influencing staff performance include training and development opportunities, working conditions, the relationship between the organization and staff, safety, remuneration and compensation policies, and employee satisfaction.⁷

To evaluate performance, it is essential to define criteria that determine the extent to which staff reflect organizational goals.⁸ Thus, a scoping review was carried out to map the existing evidence on how TL influences nurses' performance in hospital settings, aiming to understand its impact on organizational dynamics and the quality of care. Specifically, this review seeks to answer the following question: *"How does transformational leadership influence nurses performance in hospital settings?"*

Methodology

This scoping review was developed following the methodology of the Joanna Briggs Institute for scoping reviews, based on the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR) to represent the research stages and to map the knowledge on a given topic of interest.⁹ The review

aimed to map the existing evidence on the influence of transformational leadership (TL) on nurses performance in hospital settings.

The review question was formulated using the PCC mnemonic (Population, Concept, and Context), where the population was nurses, the concept was transformational leadership, and the context was professional practice in hospital settings. Inclusion criteria were defined using the PCC mnemonic, as well as language, time frame, and availability of full-text access. Regarding the population, nurses were considered; for the concept, studies that explored an association between TL and nurses performance in hospital settings were included, with the hospital setting being the context.

Search Strategy and Study Identification

In the initial phase, a preliminary search was conducted in the EBSCOhost WEB content aggregator on May 16, 2024, to identify commonly used terms in the titles and abstracts of studies, as well as indexing terms. The initial keywords and search expressions used were: "nurses," "performance," and "transformational leadership."

In a second phase, DeCS/MeSH descriptors were combined with the Boolean operators "AND" and "OR," and a database search was conducted in MedLine, CINAHL, and Academic Search using the following Boolean phrase: (nurses OR nursing staff OR nurse) AND ("performance" OR "outcomes" OR "job performance") AND ("transformational leadership").

To identify unpublished literature, searches were also performed in the Open Access Scientific Repositories of Portugal (RCAAP) and Google Scholar. Finally, a grey literature search was conducted.

After the search, all identified articles and documents were exported to the Rayyan software (Qatar Computing Research Institute, Doha, Qatar), and duplicate articles were removed. Next, article selection was performed through title and abstract screening by two reviewers, based on the established inclusion criteria: studies published between 2014 and 2024, in Portuguese or English, with full-text availability. After eliminating articles through title and abstract screening, the full texts of the remaining studies were reviewed. Disagreements between reviewers were discussed and analyzed to reach consensus.

Data Extraction

Data extraction from the documents included in the scoping review was performed using an author-developed instrument based on the Joanna Briggs Institute's model tool for extracting study details, characteristics, and outcomes.¹⁰ Extraction was conducted independently by two reviewers. Disagreements were discussed and analyzed, and consensus was reached.

Data Synthesis

The data were synthesized narratively by two authors independently.

Results

The research process is presented in full in both narrative and schematic form in this scoping review, through a PRISMA flow diagram, detailing how the search was conducted, how the results were selected, how duplicates were removed, and what was added in the third phase of the search.^{10,11}

A total of 121 records were identified through database searches: Medline (n = 18), CINAHL (n = 51), and Academic Search (n = 52). An additional 246 records were retrieved from other sources, specifically Google Scholar (n =

234) and the Open Access Scientific Repository of Portugal – RCAAP (n = 12), resulting in a combined total of 367 records.

After removing 45 duplicate records, 76 records were screened based on titles and abstracts. Of these, 58 were excluded for not meeting the predefined inclusion criteria.

A total of 50 full-text reports were assessed for eligibility. Of these, 37 were excluded for not addressing the research question, and 11 for not matching the target population. In parallel, 18 additional reports were evaluated, with eight excluded for not answering the research question and three due to an ineligible population.

Following the screening process, seven studies met all the inclusion criteria and were included in the review, along with two additional reports, resulting in a final total of nine documents included in this scoping review.

Figure 1 presents the PRISMA-ScR diagram illustrating the study selection and inclusion process.⁹

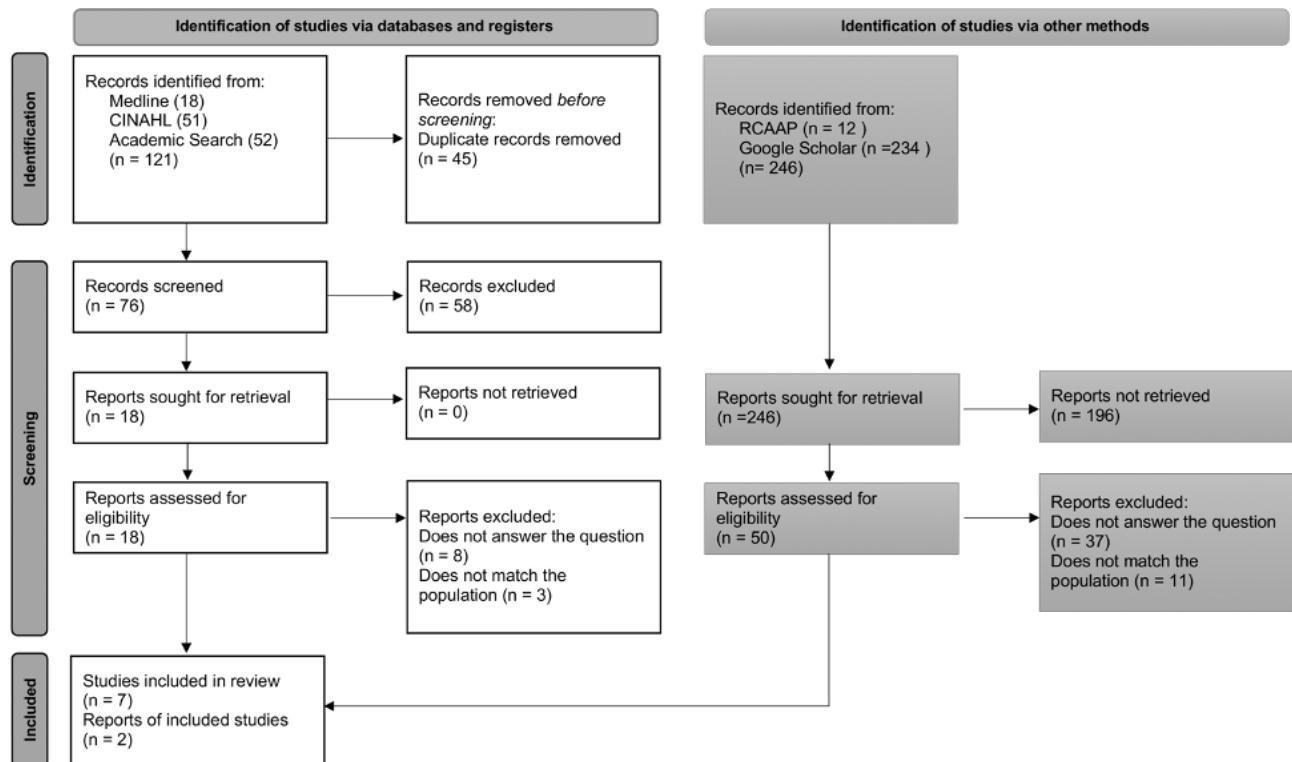


Figure 1. PRISMA flow diagram of study selection process.

Table 1 provides a summary of the included studies, identifying the respective authors, year of publication, publication title, country in which the study was conducted, study

design, the instruments for assessing transformational leadership, the instruments for assessing performance-related characteristics and the main results.

Table 1. Characterization of included studies.

Autors	Year of publication	Title	Country	Study design	Transformational leadership Assessment Tools	Performance Measurement Tools	Results
Lievens & Vlerick ¹⁴	2014	Transformational leadership and safety performance among nurses: the mediating role of knowledge-related job characteristics	Belgium	Cross-sectional	• Multifactor Leadership Questionnaire (MLQ)	• Safety Compliance and Participation Scales	• Positive correlation between transformational leadership and the evaluated outcomes.
Boamah ²	2017	Linking Nurses Clinical Leadership to Patient Care Quality: The Role of Transformational Leadership and Workplace Empowerment	Canada	Cross-sectional	• Multifactor Leadership Questionnaire (MLQ)	• Structural empowerment - Conditions of WorkEffectiveness-II (CWEQ-II) • Clinical Leadership Survey (CLS) • Nurse-assessed adverse event	• Transformational leadership associated with reduced adverse patient outcomes via empowerment and leadership mechanisms.
Suratno et al. ¹⁵	2018	The Relationship between Transformational Leadership and Quality of Nursing Work Life in Hospital	Indonesia	Cross-sectional	• Multifactor Leadership Questionnaire (MLQ)	• Quality of Nursing Work Life scale	• Positive association with quality of nursing work life.
Asif et al. ¹²	2019	Linking Transformational Leadership with Nurse-Assessed Adverse Patient Outcomes and the Quality of Care: Assessing the Role of Job Satisfaction and Structural Empowerment	Pakistan	Cross-sectional	• Transformational leadership scale (TLS)	• SE scale (Structural Empowerment scale) • APO (Adverse Patient Outcomes) • COQ (Quality of Care) • APO (nurse-assessed adverse patient outcomes)	• Transformational leadership demonstrated relevant effects on nursing outcomes.
Ullah & Khan ¹⁷	2019	How does the leadership style play out in job-related outcomes? Evidence from nursing profession in Pakistan	Pakistan	Cross-sectional	• Bass Transformational Leadership Instrument	• Job satisfaction Minnesota Satisfaction Questionnaire (MSQ) • Work performance the scale	• Transformational leadership demonstrated relevant effects on nursing outcomes.
Labrague et al. ¹³	2020	Influence of toxic transformational leadership practices on nurses job satisfaction, job stress, absenteeism, and turnover intention: a cross-sectional study	Philippines	Cross-sectional	• Transformational Leadership Scale	• Organisational Commitment and Job Satisfaction Measures	• Transformational leadership linked to higher job satisfaction and reduced turnover intention.
Wang et al. ¹⁸	2021	Relationship between transformational leadership and nurses job performance: The mediating effect of psychological safety	Taiwan	Systematic review	• General Transformational Leadership Assessment	• Job Performance Evaluation	• Positive correlation between transformational leadership and the evaluated outcomes.
Wijayanti & Aini ¹⁶	2022	The influence of transformational leadership style to nurse job satisfaction and performance in hospital	Indonesia	Systematic review	• Multifactor Leadership Questionnaire (MLQ)	• Job Performance Scale	• Transformational leadership demonstrated relevant effects on nursing outcomes.
Ystaas et al. ³	2023	The Impact of Transformational Leadership in the Nursing Work Environment and Patients' Outcomes: A Systematic Review	Cyprus	Systematic review	• Multifactor Leadership Questionnaire (MLQ)	Safety Compliance and Participation Scales	• Leadership associated with reduced burnout and increased organisational commitment.

Discussion

Of the nine studies selected for analysis, six were cross-sectional studies and three were systematic literature reviews. Regarding the geographical distribution, one was conducted in America (n = 1), two in Europe (n = 2), and six in Asia (n = 6). In terms of conceptual approaches, TL was assessed using the Global Transformational Leadership Questionnaire^{12,13} and the Multifactor Leadership Questionnaire.^{2,3,14-16} Performance was formally measured in only two studies, using the Individual Work Performance Questionnaire¹⁷ and the Job Performance Scale.¹⁶

The analysis of the studies enabled mapping the evidence on how TL influences nurses performance, specifically the mechanisms through which this leadership style contributes to improvements in clinical practice and professional satisfaction.

The scientific literature from the last decade demonstrates that TL directly affects nurses performance and indirectly enhances their psychological safety at work. Wang et al¹⁸ highlighted that transformational leaders change team members values and behaviors, improving their attitudes, values, innovation, and vision, while enabling them to take on greater responsibility. The authors confirmed that the leadership style of nurse managers and

the working environment strongly influence psychological safety, job satisfaction, and nurse performance, thereby contributing to care quality and the sense of organizational belonging.

In 2017, Boamah conducted a cross-sectional study involving 378 nurses in Canada, reinforcing the relevance of transformational nurse leadership in optimizing the work environment and ensuring the infrastructure needed for nurses to perform excellent clinical care. The study showed complex interactions between relational practices of nursing managers -such as providing vision, support, human resources, and leadership - and the competencies, skills, knowledge, aptitudes, and motivation of nurses, which are essential for delivering high-quality care.²

Systematic reviews by Wijayanti and Aini¹⁶ and by Ystaas et al³ emphasized positive correlations between TL, work environment, job performance, job satisfaction, and organizational commitment. These correlations reinforce the importance of this leadership style. Furthermore, job satisfaction was found to be closely linked to structural empowerment, opportunity, work environment, sense of belonging, and stress, while performance was influenced by organizational commitment, nurse empowerment, workload, motivation, stress, psychological safety, work engagement, and work environment. Healthcare organizations

must therefore foster TL competencies among nurse managers to promote both job satisfaction and professional performance, ultimately enhancing the quality of care.^{3,16}

Ullah and Khan,¹⁷ in their cross-sectional study with 206 nurses in Pakistan, explored the relationship between TL, nurse performance, satisfaction, and institutional commitment, concluding that TL positively correlates with all three variables.

Asif et al.¹² conducted a cross-sectional study with a random sample of 386 nurses across 17 hospitals in Pakistan. The study concluded that TL is a vital indicator for improving care quality, nurse job satisfaction, and reducing adverse client outcomes. The authors emphasized the need for senior management to promote TL behaviors among nurse managers, providing them with autonomy and capacity to support their teams in delivering quality care and achieving institutional goals.

The literature also highlights the contribution of TL to nurses professional quality of life - a key indicator of job satisfaction and organizational belonging - which helps reduce turnover intention. A nurse leader with wisdom, understanding, and innovation can foster trust among staff, enhancing their work capacity and accountability for achieving organizational success. This contributes to greater nurse alignment with institutional mission, vision, values, and goals, thereby increasing organizational commitment and job retention.^{2,12,13}

A comparative systematic review of leadership styles by other authors¹⁹ corroborates the evidence presented, confirming that TL supports autonomy, competence, and relational strengthening through inclusive approaches. These promote nurse engagement by fostering a sense of value, which increases motivation for better work performance.¹⁸ Lievens and Vlerick,¹⁴ in a cross-sectional study with 152 nurses, found that TL significantly impacts how nurses perceive the knowledge requirements of their profession. They argue that nurse managers using TL can influence how nurses perceive and appropriate the knowledge, skills, and competencies necessary for effective and safe practice.

Additionally, they reinforce that TL promotes nurse engagement with safety-related issues in care delivery.

More recently, Patarru and Purwanza²⁰ reaffirmed the positive and significant impact of TL on nurses professional performance. They highlighted that applying TL dimensions - idealized influence, inspirational motivation, individualized consideration, and intellectual stimulation - positively affects nurses performance in hospital settings. These authors concluded that developing and applying the TL style has the potential to improve performance and

should be encouraged by organizations to foster excellence in care.

In summary, TL directly affects nurse performance and positively correlates with work environment, satisfaction, and organizational commitment. Through an inclusive approach, TL supports autonomy, competence, and relational strengthening, contributing to engagement, recognition, and motivation for improved job performance. Performance is influenced by organizational engagement, nurse empowerment, workload, motivation, stress, psychological safety, and work environment.

A transformational leader is thus capable of changing collaborator's values and behaviors, improving their attitudes, knowledge, and professional skills, and guiding them toward safer and more effective performance.

Conclusion

Transformational leadership demonstrates a significant and positive influence on nurse performance in hospital settings, enhancing job satisfaction, organizational commitment, psychological safety, and quality of care. The reviewed studies suggest that nurse managers who adopt this leadership style are more effective in fostering healthy work environments and motivating teams.

The evidence gathered supports the relationship between TL and nurse performance, with clear implications for nursing and management practice. There is a pressing need to develop strategies that promote more effective and motivating hospital work environments to continuously improve care quality.

In conclusion, the studies included in this scoping review affirm that nurse managers should embody clarity, honesty, and transparency in their values. They must be capable of cultivating trust, job satisfaction, and organizational commitment to ensure a positive work environment, nurse well-being, motivation, and performance.

It is recommended to promote transformational leadership training programs for nurses in leadership roles and to conduct primary studies that further explore the relationship between TL and objective performance indicators in various hospital contexts. TL emerges as a strategic competency for improving care quality and ensuring the sustainability of healthcare organizations.

Conflict of interest

No conflicts of interest were declared by the authors.

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