



Literature Review: The Effect of Transformational Leadership Style on Hospital Patient Safety Culture

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Abstract

Background of study: Patient safety culture is essential for achieving high-quality safe services. Transformational leadership plays a significant role in shaping a work environment that supports safety.

Aims and scope of paper: This review aims to identify the forms of transformational leadership and its impact on patient safety culture in hospitals.

Method: This study uses a literature review method with a systematic approach based on PICOT. Data were collected from six databases with criteria set for the years 2021-2025, using keywords 'Leadership Style', 'Patient Safety Culture', and 'Hospital', resulting in 10 journals that were analyzed. This study uses a literature review method with a systematic approach based on PICOT. Data were collected from six databases with criteria set for the years 2021-2025, using keywords 'Leadership Style', 'Patient Safety Culture', and 'Hospital', resulting in 10 journals that were analyzed

Results: From the screening results, 10 relevant articles were obtained and analyzed. The results of the analysis show that transformational leadership style has a positive impact on patient safety culture through motivation, role modeling, and individual attention. However, its implementation is still hampered by low incident reporting and weak communication. Safety culture also acts as a mediator between leadership and clinical safety practices.

Conclusion: This literature review emphasizes that the application of transformational leadership is effective in strengthening patient safety culture. Team support, staff knowledge, and an open reporting system are essential for realizing a sustainable safety culture.

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INTRODUCTION

The culture of patient safety is a fundamental foundation in clinical practice because it reflects values, attitudes, and behaviors that prioritize patient protection. This approach allows for systematic risk assessment, control of potential hazards, and follow-up to prevent injuries and medical errors. Thus, the culture of patient safety directly contributes to the improvement of quality and safety in health services ([Marselina, 2023](#)).

Preventing medical errors requires a strong commitment from hospital management to create a comprehensive safety culture. This commitment is also one of the important indicators in the hospital accreditation process in accordance with the 2018 National Standards for Hospital Accreditation (SNARS). In other words, a safety culture is not only related to risk management, but it is also an essential part of efforts to continuously improve the quality of healthcare services ([Marselina, 2023](#)).

Patient safety is a fundamental right of every individual receiving healthcare services. Safety incidents can have fatal consequences, ranging from death, disability, financial loss, to a decrease in public trust in the quality of services. The complexity of hospitals, which involves advanced technology, various professions, and an integrated working system, makes it a high-risk environment for incidents that endanger patients ([Nashifah & Adriansyah, 2021](#); [Torar & Wulandari, 2023](#)).

Regulation of the Minister of Health No. 11 of 2017 defines five categories of patient safety incidents, namely Potentially Harmful Events, Near Miss Events, No Harm Events, Unanticipated Events, and Sentinel Events. The WHO together with the Joint Commission International emphasizes the importance of strengthening the patient safety system as part of improving service quality. However, the report from the Institute of Medicine (2020) notes approximately 98,000 deaths due to medical errors that are actually preventable, indicating that Indicates that the implementation of patient safety culture has not been optimal in many hospitals. ([Permenkes, 2017](#); [Torar & Wulandari, 2023](#)).

A similar condition is also seen in Indonesia. In 2019, there were 7,465 recorded patient safety incidents, of which 171 resulted in death. Ironically, only 12% of these incidents were reported. The majority of incidents were near misses and adverse events. The low reporting indicates that the patient safety culture in hospitals is not yet optimal. One of the most common incidents is falls among hospitalized patients, making fall risk assessment an important step in prevention efforts ([Astuti et al., 2021](#); [Torar & Wulandari, 2023](#)).

The application of patient safety requires a collective commitment from management, leadership, and healthcare professionals. Approximately 70-80% of patient safety incidents are caused by limitations in non-clinical skills, such as communication, teamwork, situational awareness, and decision-making. Furthermore, weak leadership also hampers effective communication, oversight of safety procedures, and support for reporting and system improvements ([Fitriana et al., 2023](#); [Mulyatiningsih & Sasyari, 2021](#)).

In this context, transformational leadership style is considered the most effective for building a patient safety culture. This leadership style can inspire, motivate, and empower staff to actively engage in maintaining patient safety. First-level managers, such as ward heads, have the most direct role in implementing safety practices on the ground through guidance, feedback, and early detection of risks ([Hult et al., 2023](#); [Seljemo et al., 2020](#); [Umrana et al., 2024](#)).

Strengthening the culture of patient safety requires a well-aligned collaboration between national policies—such as those outlined in the Regulation of the Minister of Health No. 11 of 2017—and proactive leadership at the operational level. Effective leaders play a crucial role in enhancing coordination among healthcare professionals, accelerating the implementation of patient safety programs, and facilitating positive behavioral changes. Therefore, it is essential to conduct an in-depth examination of the impact of transformational leadership style on patient safety culture in hospitals ([Mulyatiningsih & Sasyari, 2021](#); [Pawerangi et al., 2023](#)).

METHOD

This research uses a literature review design that refers to the PRISMA methodology and the PICOT framework (Population, Intervention, Comparison, Outcome, Time). The population studied consists of healthcare workers, specifically nurses in the hospital environment. The intervention reviewed is in the form of transformational leadership behavior, with the expected outcome being the strengthening of patient safety culture. The articles included in this study were limited to publications from the last five years (2021–2025).

The search strategy was carried out systematically using six databases: Google Scholar, PubMed, ProQuest, Garuda Journal, Crossref, and ResearchGate. To maximize retrieval, Boolean operators (*AND*, *OR*, *NOT*) were applied in combination with keywords. The main search terms used were “Leadership Style AND Patient Safety Culture AND Hospital”, along with variations such as “*The Influence of Leadership Style on Patient Safety Culture in Hospitals*,” “*leadership style AND nursing*,” “*nursing leadership*,” and “*leadership style OR patient safety*.”

The initial search across all six databases yielded 344,795 articles. In the first filtering stage, articles were screened by year of publication (2021–2025) and full-text availability, reducing the total to 8,257 articles. The second stage of screening involved reviewing titles and abstracts for relevance to the research focus. At this stage, 6,991 articles were excluded due to irrelevant titles, 536 articles because they did not address patient safety culture, 702 articles because they did not discuss leadership style, and 18 articles were excluded for being opinion pieces or non-empirical reviews.

After all filtering steps, 10 articles met the inclusion criteria and were analyzed in depth. To document the entire selection process, the researcher used the PRISMA Flow Diagram (Preferred Reporting Items for Systematic Reviews and Meta-Analyses), while the analysis was presented in a synthesis table that included five components: author and year, research title, research objectives, research methods, and research results.

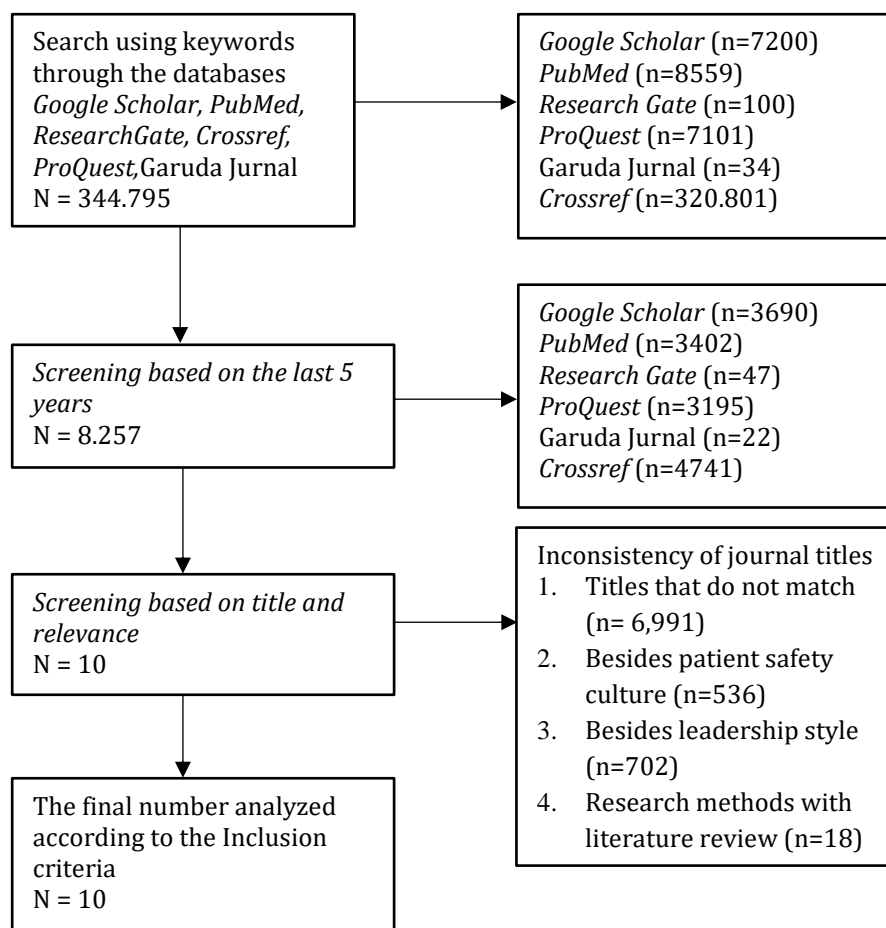


Figure 1. Article selection process based on PRSIMA

RESULTS AND DISCUSSION

Results

Based on the results of the literature search, a number of initial articles were obtained and then filtered by reviewing the titles and eliminating irrelevant articles. Next, the selection process was carried out using the PRISMA diagram with the application of inclusion criteria, resulting in ten relevant articles for analysis.

Table 1. Extraction of Research Data Results

Author and Year	Focus	Method/design/analysis	Result
Suwoto, Rina Mutiara, Rita Kemala (2024)	The Influence of Leadership Style and Cognitive Attitudes on Patient Safety Culture With Coordination as a Moderation Variable in Inpatient Nurses at Tzu Chi Hospital	Research Method: Quantitative Research Design: Cross-Sectional Analysis: Three Box Method and PLS-SEM with the help of Smart-PLS program	<ul style="list-style-type: none"> • Simultaneously, leadership style, cognitive attitudes, and coordination significantly influence patient safety culture ($R^2 = 0.944$) • Partially: the results of this study show that nurses' cognitive attitudes have the greatest influence on patient safety culture, with a value of 66.1% (0.661) and a statistical t value of 6.849, which means significant. Furthermore, coordination also Exerts a meaningful influence on patient safety culture with an influence of 44.6% (0.446) and a t value of 2.348. Meanwhile, leadership style has an influence of 23.7% (0.237) with a t value of 2.535, indicating a significant influence. Thus, these three variables are statistically proven to enhance patient safety culture.
Ambar Putri Widjaya, Nur Hidayah (2022)	The Effect of Effective Leadership on Nurse Performance in the Application of Patient Safety at Aji Muhammad Parikesit Hospital Tenggarong with Motivation and Workload as	Research Method: Quantitative Research Research Design: Explanatory (to test the cause-and-effect relationship between variables) Analysis: the analysis method used is Structural Equation Modeling-Partial Least Square (SEM-PLS)	Effective leadership and workload have a significant and positive influence on nurses' performance in implementing patient safety. The R^2 value for nurses' performance is 0.775, meaning that 75.5% of the nurses' performance variables are explained by these three variables. Motivation and workload

Author and Year	Focus	Method/design/analysis	Result
	Intervening Variables	with the assistance of SmartPLS 3.2.9 software.	also act as intervening variables that strengthen the influence of leadership on performance.
Dede Suparjo, Vip Paramarta, Rulia (2025)	The influence of Leadership Style, Team Collaboration, and Patient Safety Culture on Meeting Patient Safety Objectives at Majalengka Regional General Hospital	Research Method: Descriptive and Verification Quantitative Analysis: multiple linear regression. Classical assumption test, conversion of ordinal data to interval with successive Interval, t-test, and F-test.	<ul style="list-style-type: none"> ❖ The leadership style, team collaboration, and culture of patient safety significantly contribute to the attainment of patient safety objectives ($R^2 = 0.483, 48.3\%$). ❖ Partial effects: leadership style with value of 0.681 and a p value of 0.002, teamwork with value of 1.016 and a p value of 0.000, and finally patient safety culture with value of 0.681 and a p value of 0.000 ❖ Leadership style is rated as good, while teamwork and patient safety culture are categorized as adequate.
Desi Fitriana, Mahfud, Imran Radne Rimba Putri, Fatma Siti Fatimah (2023)	The Effect of Leadership Style on Nurses' Performance Related to Patient Safety in the Inpatient Ward of Penembahan Senopati Hospital	Research Method: analytical quantitative Design: Cross-Sectional Analysis: Univariate, bivariate, Kendall Tau test	The results of this study indicate that leadership style has a significant positive effect on nurse performance in patient safety in the inpatient unit of RSUD Panembahan Senopati ($p=0.000$, correlation coefficient = 0.408). Of the respondents, 74.2% rated the leadership style as good and 94.5% rated the nurses' performance as good. The weak dimension is found in contingent rewards and timeliness.
Herawati (2021)	The Influence of Attitude on Nurse Compliance in	Research Method: Quantitative	The results of this study showed that 64.9% of nurses are not compliant

Author and Year	Focus	Method/design/analysis	Result
	Implementing Patient Safety Culture at Mitra Sejati Hospital	Research Design: Cross-Sectional Analysis: Multiple Linear Regression (multivariate test)	with patient safety culture. Nurse compliance is most influenced by two factors: the leadership style of the head of the ward and the attitudes of the nurses. A total of 50.9% of nurses assessed the head of the ward as having a participative leadership style, which was regarded as the most positive and supportive for improving compliance with patient safety culture.
Stephen Dharmawan, Rian Adi Pamungkas, M.Reza Hilmy (2024)	Effect of Leadership Style and Patient Safety Culture on Awareness Patient Safety Incident Reporting with Teamwork Perception as Intervening at X Cancer Hospital Jakarta	Research Method: Quantitative Research Design: Cross-Sectional Analysis: Three Box and Path Analysis using AMOS and SPSS software	The research results explain that patient safety culture affects reporting awareness by 41.8% ($p=0.001$), while teamwork affects reporting awareness by 47.1% ($p=0.003$). Leadership style does not have a direct effect ($p=0.393$), but it has an indirect effect through teamwork of 11.1%, with an Adjusted R ² of 89%, which means that reporting awareness is explained by these three variables.
Wulandari Dyah Ayu, Natsir Nugroho, Idrus Just'at (2024)	The Influence of Knowledge and Leadership on Clinical Risk Management with Patient Safety Culture as an Intervening Variable at PMI Hospital	Research Method: Quantitative Research Design: Cross-Sectional Analysis: analysis using path analysis with IMB SPSS ver.18 and multiple regression test	The study published in the journal revealed that nurses' understanding of patient safety objectives significantly influences clinical risk management at PMI Bogor Hospital. This is supported by a regression coefficient of $\beta=0.208$ and a p-value of 0.007, indicating that greater nurse knowledge correlates with improved clinical risk management practices in the hospital. Additionally, transformational leadership was found to have a direct impact on clinical risk, with a coefficient of $\beta=0.197$ and $p=0.007$. This suggests that

Author and Year	Focus	Method/design/analysis	Result
			charismatic and inspiring leadership, which addresses individual needs, can enhance the effectiveness of risk management implementation within the hospital setting. The research overall reports a coefficient of determination (R^2) of 0.89 (89%), meaning that 89% of the variability in clinical risk management is explained by factors such as knowledge, leadership style, and patient safety culture, while the remaining 11% is attributed to other external factors. These findings highlight that a comprehensive strategy combining staff education, strong leadership, and safety culture awareness plays a crucial role in improving hospital service quality and safety.
Hengky Prabowo Irianto, Yanuar Ramadhan, Agusdini Banun Saptaningsih (2025)	The Role of Transformational Leadership, Team Cooperation, and Knowledge in Shaping Patient Safety Culture at RSUD Menggala, Lampung	Research Method: Quantitative Research Design: Cross-Sectional Analysis: Multiple linear regression, t-test, F-test, and determination test (R^2)	The research results show that nurse knowledge, transformational leadership, and teamwork significantly influence the patient safety culture, with an R^2 value of 0.89. Partially, nurse knowledge is the most dominant factor affecting the patient safety culture, with a coefficient value of 0.660 and a p value <0.001. This indicates that nurses' understanding of patient safety principles, both from experience and training, is crucial in shaping safe work behavior. Teamwork also has a significant influence with a coefficient value of 0.221 and a p value <0.001, especially regarding communication and

Author and Year	Focus	Method/design/analysis	Result
			coordination among nurses to prevent task overlap and patient safety incidents. Transformational leadership has a significant but lower impact, with a coefficient value of 0.116 and a p value = 0.011. This shows that the involvement of the head of the department in providing direction, motivation, and ideal knowledge contributes to the creation of a patient safety culture.
Putu Tara Judica Wahyudyasa, Hasyim, Rokiah Kusumapradja (2023)	Transformational Leadership Styles and Mentoring Functions Towards a Culture of Patient Safety Moderated by Competence of the Nurse at Metro Hospitals Cikarang	Research Method: Quantitative Research Design: Cross-sectional Analysis: Multiple linear regression and Moderated Regression Analysis (MRA)	The study results reveal that transformational leadership style significantly impacts patient safety culture, with a β coefficient of 0.418 and a p-value of 0.000, accounting for 42.56% of the variance in patient safety culture. In contrast, the mentoring function does not significantly affect patient safety culture, as indicated by a β value of 0.105 and a p-value of 0.182. Additionally, nurse competency does not moderate the effect of leadership style ($p = 0.855$), but it does significantly moderate the effect of mentoring on patient safety culture ($p = 0.046$).
Mahmoud Hamdan, Amar Hisham Jaaffar, Omar Khraisat, Marwan Rasmi Issa, Mu'taman Jarrar (2024)	The Association of Transformational Leadership on Safety Practices Among Nurses: The Mediating Role of Patient Safety Culture	Research Method: Quantitative Research Design: Cross-sectional Analysis: Structural Equation Modeling (SEM) using SmartPLS	The research results indicate that there is a significant direct influence between transformational leadership and safety practices, with a regression coefficient of 0.216 and a significance value of $p < 0.0001$. This means that the transformational leadership style implemented by nursing managers positively contributes to the

Author and Year	Focus	Method/design/analysis	Result
			improvement of safety practices carried out by nurses. Patient safety culture also has a significant direct influence on patient safety practices with a coefficient value of 0.631 and a p value of < 0.001. This explains that a good patient safety culture within the organization reinforces the safety behaviors performed by nurses in their daily work. Furthermore, transformational leadership has also been shown to have a significant influence on the formation of patient safety culture, with a coefficient value of 0.666 and a p value of <0.001. This explains that transformational leaders play an important role in shaping a work environment that supports patient safety.

Discussion

The review of ten articles shows that patient safety culture represents a key element in creating safe, quality, and sustainable healthcare services. A strong safety culture has been proven to increase voluntary reporting of safety incidents, reflecting the establishment of a non-punitive culture in hospitals. The impact is evident in the significant reduction of adverse events (AE), near-miss incidents (NMI), and potential injury incidents (PII). In addition, a good safety culture also promotes service quality improvements and creates a safer work environment for healthcare workers ([Suwoto et al., 2024](#)). This is reinforced by [Fitriana et al. \(2023\)](#) and [Irianto et al. \(2025\)](#) which demonstrate that a safety culture enhances nurse performance as they feel more valued and protected, thereby triggering compliance with standard operating procedures (SOP) and improving communication among teams.

Most studies agree that a safety culture is not formed spontaneously, but rather through various supporting factors such as leadership styles, teamwork, staff knowledge, and incident reporting systems. A safety culture reflects the values and behaviors of the organization that encourage all staff members, both clinical and non-clinical, to report safety or quality of care issues without fear. In hospitals, this culture is evident through a collaborative work environment, appreciation for the roles of patients and families, and support from leaders who can promote effective teamwork and patient-centered care ([Turang et al., 2025](#)).

In this context, the success of management in retaining the best nurses is not easy, but rather depends on the ability to understand their needs and create a conducive work environment that motivates them internally. Leadership style, as a hallmark of a leader, becomes an important factor that

positively influences employee productivity and reinforces a culture of safety, both directly and indirectly ([Habibi et al., 2019](#)).

Multiple studies, including research by [Hamdan et al. \(2024\)](#) and [Dyah et al. \(2024\)](#), demonstrate that safety culture serves as a mediating factor that enhances the impact of transformational leadership style on nurses' safety behaviors and clinical risk management. This indicates that safety culture is not only an integral part of organizational structure but also a driver of behavioral change among staff in everyday clinical practice. The researchers argue that without a strong safety culture, transformational leadership efforts will not be optimal in enhancing patient safety. This view aligns with the findings of [Dharmawan et al. \(2024\)](#). Which emphasize that an open and non-punitive organizational culture can encourage nurses to be more active in incident reporting as an indicator of patient safety culture success.

However, efforts to report incidents in hospitals still face complex challenges, both at the individual and system levels. At the individual level, healthcare workers are often reluctant to report due to fear of being blamed, judged as incompetent, or concerned about legal and reputational consequences. The lack of feedback on reports, minimal understanding of reporting procedures, and low communication skills also influence the intention to report. On the other hand, at the system level, reporting is often seen as complicated, with minimal socialization, limited training, and a lack of management support. The deeply rooted culture of blame remains a major barrier to creating an open working environment ([Rombeallo et al., 2022](#)).

Several studies support the importance of these supportive factors. [Fitriana et al. \(2023\)](#) and [Irianto et al. \(2025\)](#) emphasize that a strong safety culture is reflected through open communication, management involvement, staff participation, learning from mistakes, and a non-punitive perception of the work environment. All these aspects have a positive correlation with the increased performance of nurses and compliance with patient safety procedures. [Habibi et al. \(2021\)](#) added that appropriate rewards can enhance nurses' motivation to work better, which ultimately strengthens the safety culture. However, [Hernawati \(2021\)](#) found that compliance with safety culture remains low due to fear of blame and weak leadership coordination, which [Suwoto et al. \(2024\)](#) also identified as serious hindering factors.

The analysis of ten journals indicates that transformational leadership is the most effective approach in shaping a patient safety culture. This leadership style is able to enhance patient safety practices both directly and through mediating the safety culture ([Hamdan et al., 2024](#)). [Fitriana et al. \(2023\)](#) and [Widjaya & Hidayah \(2022\)](#) affirm that leaders who provide clear direction, rewards, and motivation can improve nurses' discipline in applying safety principles. Jansen et al. (2016) describe transformational leadership through four indicators: charisma, inspirational motivation, intellectual stimulation, and individual consideration, all of which are relevant in strengthening nursing team relationships and promoting safe care.

Nevertheless, good leadership is not enough without systemic support. [Suparjo & Paramarta \(2025\)](#) and [Irianto et al. \(2025\)](#) reveal that the success of a safety culture is also influenced by solid teamwork, clinical knowledge, and staff competence. Effective team collaboration allows for earlier risk identification and prevention of errors, while clinical knowledge facilitates quick and accurate decision-making. Staff competence is also crucial to ensure quality service. [Sidika et al. \(2023\)](#) emphasize that the integration of strong leadership, teamwork, knowledge, and competence will create a sustainable safety culture.

In addition to transformational, participative leadership style also plays an important role. [Hernawati \(2021\)](#) emphasizes that the participative style increases nurses' compliance with safety procedures because it provides space for staff to be involved in decision-making. [Soliha et al. \(2021\)](#) prove that the participative style has a significant relationship with safety culture ($p < 0.05$). [Patarru' et al. \(2020\)](#) also found that transformational leadership increases motivation, teamwork, and reduces nurse stress, although its effectiveness still depends on organizational support. [Wahyudyasa et al. \(2023\)](#) even highlight the need for supportive strategies so that the leadership style can be applied consistently.

In theory, a culture of patient safety is a collection of values, attitudes, and organizational practices aimed at preventing medical errors. Schein (1992) in his theory of organizational culture stated that a safety culture can only grow if leaders actively instill safety values as part of the organizational identity ([Rizal et al., 2024](#)). Therefore, transformational leadership must be accompanied by supporting organizational policies, ongoing training, and regular evaluations to maintain the safety culture. A strong leadership style needs to be balanced with a supporting system, as the success of the safety culture does not solely depend on individual leaders, but also on the collective commitment of the entire organization.

Hospitals need to integrate transformational leadership training into nursing management programs. Leaders must be equipped with the ability to inspire, communicate effectively, and support team collaboration. This study combines evidence from various hospitals, providing a clear relationship between transformational leadership and patient safety culture. Variations in design and measurement tools limit direct comparisons. Most studies are cross-sectional, making it difficult to determine causal relationships. Further research is recommended to use longitudinal or experimental designs to evaluate causal relationships, as well as to test interventions that combine leadership development and safety system improvements.

CONCLUSION

Based on the review of ten national and international journals, it can be concluded that leadership style, particularly transformational leadership, plays an important role in shaping the culture of patient safety in hospitals because it consistently creates a safe, supportive, and patient safety-oriented work environment. Transformational leaders are characterized by their ability to provide motivation and inspiration, serve as role models, offer intellectual stimulation, and show concern for the individual needs of staff, thus fostering a proactive, collaborative, and quality service-focused work culture. However, the implementation of a safety culture still faces challenges such as high rates of Adverse Events (AE), low voluntary incident reporting, weak communication, and suboptimal support systems, in addition to psychological barriers such as fear of blame and minimal leadership support. Nonetheless, transformational leadership has proven effective in creating a supportive work environment, building trust among healthcare workers, and strengthening the relationship between leadership and clinical safety practices through the role of safety culture as a mediator. Therefore, transformational leadership can be a key strategy in enhancing the patient safety culture, especially when accompanied by strong teamwork, adequate clinical knowledge, and a safe and transparent reporting system, thus encouraging continuous improvement towards safer, more effective, and high-quality healthcare services.

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AUTHOR CONTRIBUTION STATEMENT

(U) designs the research, conducts literature reviews, analyzes data, and writes the manuscript, while. (AH) plays a role in providing scientific guidance, methodological support, and critically reviewing the research framework and analysis results. In addition, the supervising lecturer also provides constructive feedback during the writing process and ensures the work conforms to applicable academic standards.

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