

ASSESSING THE EFFECTIVENESS OF LEADERSHIP STYLE AMONG NURSES IN PMCH NAWABSHAH

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DOI: <https://doi.org/10.5281/zenodo.18949437>

Keywords

leadership style, teamwork, motivation, transformational leadership

Article History

Received: 11 January 2026

Accepted: 24 February 2026

Published: 11 March 2026

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Abstract

Background: Leadership in nursing strongly influences healthcare quality and teamwork. Effective nurse leaders inspire and support their staff, fostering a positive work environment and improving patient outcomes. It involves motivating and guiding nurses to provide safe and compassionate care. The style of leadership adopted by nurse managers affects nurses' performance, and interactions with patients and colleagues. This aim of study find out the effectiveness of different leadership styles transformational, transactional, democratic, autocratic, and laissez-faire among nurses at Peoples Medical College Hospital (PMCH), Nawabshah, and explores which styles most positively influence motivation, satisfaction, performance.

Methods: the study was qualitative cross-sectional study was conducted at pmch hospital Nawabshah. A total of 150 nurses were selected using a random sampling technique. Data were collected through a structured self-administered questionnaire to assessing different leadership styles and their influence on nurse's motivation.

Results: The study Transformational behaviors such as inspiring the team work (44%,p-0.663) encouraging creativity (51%,p-0.023) promoting teamwork (52%, p-0.006), providing support (56%, p- 0.024), and acting ethically (48%) p-0.001) were well appreciated. Transactional practices like clear rules (50% p-0.346), rewarding performance (64%,p-0.075), and monitoring closely (66%, p-0.001) received moderate agreement. Laissez-faire elements, including independent decision making (76%, p-0.046) and minimal involvement (80%, p-0.338), show mixed perceptions. Independently (82%,p-0.397), little direction (78%p-0.768), minimal communication (84%, p-0.997), and leadership motivating nurses (72% p-0.908) also had high agreement. among staff.

Conclusion: The study concludes that leadership styles significantly influence effect of nurses' motivation teamwork and the quality of patient care among nurses. Transformational leadership was found to be more

effective than transactional and laissez-faire leadership in promoting better collaboration and improving patient care outcomes.

Introduction: Leadership in nursing plays a pivotal role in shaping the quality of patient care, satisfaction and overall performance in healthcare setting (1,2). Effective leadership ensures that nursing teams are motivated, engaged and equipped with the necessary skills to provide safe and high-quality care (3). Over the past decade, research has highlighted the impact of various leadership styles transformation, transactional, and servant leadership on nurse's motivation teamwork and conflict resolution (4,5,6)). leaders who inspire guide and support nursing staff create environments that foster professional growth reduce burnout and improve organization outcome (7,8) Globally the health care sector relies heavily on nurses who make up a significant proportion of the work force responsible for patient management health education and the implementation of clinical policies (9, 10). In this context leadership effectiveness directly influences both the performance of individual nurses and the collective effective efficiency of nursing team (11,12). Several studies indicate that transformational leadership which focuses on motivation encouragement of creativity and role modeling is particularly effective in promoting professional satisfaction and commitment among nursing staff (13,14,15). Similarly, servant and authentic leadership style have trust ethical behavior and reduce workplace stress among nurses (16,17). In Pakistan context leadership practices in health care face distinct challenges. Employed permanently or on a contractual basis influence their perception of leadership, support recognition and involvement in decision making (18,19). Observed that permanent nurses respond more positively to supportive leadership whereas contractual staff often report lower job satisfaction and reduced confidence in leadership guidance (20).

Aim of the study: The aim of this study is to assess the effectiveness of leadership styles among nurses working at Peoples Medical College Hospital (PMCH) Nawabshah. The study focuses on identifying different leadership styles used by nurses and evaluating how these styles influence teamwork, job performance, communication, and quality of patient care within the hospital setting.

Objectives of study: To assess the effectiveness of different leadership styles transformational, transactional, and democratic, autocratic, and laissez- among nurses at PMCH hospital. To examine the influence of these leadership style on nurses' motivation.

Material and Methods: The study was followed qualitative cross-sectional design conducted from September to November 2025 at PMCH Nawabshah. The sample size was determined using the Rao soft calculator 95% Confidence level, 5% margin of error, 150 nurses were targeted for study.

Inclusion criteria: Nurses who were currently working at (PMCH), Hospital Nawabshah were included in the study. Only those nurses who were directly involved in patient care and had been working in the hospital for at least having two year working experience the were selected. Both male and female nurses who were willing to participate and give consent were included.

Exclusion criteria: Student nurses, interns, and those nurses who were not involved in direct patient care were excluded from the study. Nurses who had less than six months of work e x patience, were on leave at the time of data collection, or did not agree to participate were also excluded.

Tools for data collection: The self-structured questionnaire was used to collect data and it includes of two sections, demographic details and 20 items assessing the effectiveness of leadership style among nurses on point Likert scale. The questionnaire examines three domains questionnaire transformational, transactional leadership, laissez- Faire Leadership. Prior to data collection, ethical approval was obtained register nurses was asked to sign an informed concert. Questionnaire were distributed in hospital ward from and collect the data on different days. Data were entered and analyzed using SPSS version.

Descriptive statistics, include means, standard deviations, percentages, were used to summarize demographic characteristics and questionnaire responses. Inferential statistics, such as logistic, were applied to examine the relationship between leadership styles and outcomes (job satisfaction, teamwork, and patient care quality). The threshold for significance statically a $p < 0.05$. Was considered. Cronbach's alpha value of the questionnaire was 0.751 which show that the tool has acceptable reliability. The indicates that the items of the questionnaire are consistent and reliable for collecting data and the instrument can be used for further analysis.

Result:

Table No:1 Distribution of Gender of subject

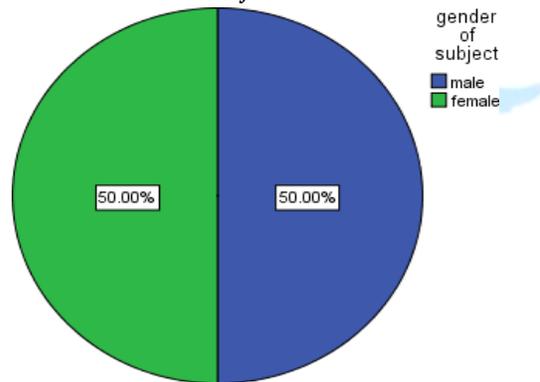


Table No.1 Demographic Questions

Valid	Frequency/percentage
Distribution of Age of subjects	
Mean	35.1933
Std .deviation	7.64014
Minimum	25.00
Maximum	55.00
Distribution of experience of subject	
Mean	6.8800
Std .deviation	5.03134
Minimum	1.00
Maximum	18.00
Qualification of subject	
Diploma	36 (24.0%)
BSN Generic	51(34.0%)
Post RN	63 (42.0%)
Distribution of Job Type of subjects:	
Permanent	150 (70.0%)
Contract	30 (20.0%)

Other	15 (10.0 %)
Distribution department of subject	
ICU	45%
Pediatric	42%
Medical	36%
Surgical	27%

This table shows that the mean age of subjects was 35.19 years with a standard deviation of 7.64, ranging from 25 to 55 year.

The table shows an equal gender distribution with 50% male and 50% female participants.

This table shows that all 150 participants provided their experience data .the average work experience was 6.88 years, with a wide variation (SD = 5.03). The minimum experience reported was 1 year, while the maximum was 18 years.

The table shows that out of 150 participants,

24% were diploma holders, 34% had BSN generic qualifications, and 42% were BSN post-RN. The findings indicate that the majority of participants were BSN post- RN qualified nurses. This table shows that most participant (70%) had permanent jobs, 20% were contract and 10% had other type's employment.

This table shows department -wise distribution of 150 participants. Most participants were from the ICU (45), followed by pediatrics (42), medical (36) and surgical (27).

Table no.2 Age of subject compare with Leadership Style and Leadership Effectiveness Assessment:

S/NO	Statement	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	P value
01	Inspires and motivates the Team	27 (18%)	21 (14%)	36 (24%)	36 (24%)	30 (20%)	.663
02	encourages creativity and new ideas	18 (12%)	24 (16%)	30 (20%)	42 (28%)	36 (24%)	.023
03	Provides supports appreciation	24 (16%)	50 (33%)	27 (18%)	45 (30%)	39 (26%)	.024
04	promote teamwork and collaboration	18 (12%)	21 (14%)	30 (20%)	45 (30%)	33 (22%)	.006
05	Acts as role model for ethical behavior	24 (16%)	21 (14%)	33 (22%)	45 (30%)	27 (18%)	.001
06	Provides clear Rules and	24 (16%)	50 (33%)	36 (24%)	48 (32%)	27 (18%)	.346

	d expectations						
07	Rewards effective performance	3 (2%)	18 (12%)	33 (22%)	57 (38%)	39 (26%)	.075
08	monitors performance closely	3 (2%)	18 (12%)	30 (20%)	57 (38%)	42 (28%)	.001
09	emphasizes discipline and order	96 (64%)	4 (2.6%)	4 (2.6%)	27 (18%)	19 (12.6)	.922
10	Staff know expectations	53 (35.3%)	12 (8%)	13 (8.66)	45 (30%)	27 (18%)	.104
11	allows independent decisions	3 (2%)	21 (14%)	15 (10%)	66 (66%)	45 (30%)	.046
12	Rarely gets involved in issues	3 (2%)	18 (12%)	9 (6%)	57 (38%)	63 (42%)	.338
13	Staff solve problems on their own	3 (2%)	12 (8%)	12 (8%)	69 (46%)	54 (36%)	.397
14	Provides little direction	3 (2%)	15 (10%)	12 (8%)	66 (44%)	51 (34%)	.768
15	minimal communication	6 (4%)	15 (10%)	24 (16%)	63 (42%)	42 (42%)	.997
16	leadership motivates nurses	3 (2%)	12 (8%)	27 (18%)	66 (44%)	42 (28%)	.908
17	Creates positive work environment	50 (33.3%)	10 (6.6%)	19 (12.6)	48 (32%)	23 (15.3)	.736

18	improves teamwork	24 (16%)	7 (4.6%)	28 (18.6)	54 (36%)	37 (24.6%)	.236
19	reduces conflicts	20 (13.3%)	8 (5.3%)	34 (22.6%)	58 (38%)	30 (20%)	.613
20	leadership effective in achieving goals	18 (12%)	7 (4.6%)	33 (22%)	51 (34%)	41 (27.3%)	.612

Table NO 02. Shows that 36 (24 %) participants agreed and another 36 (24%) strongly agree that the leader inspires and motivates the team, reflecting transformational leadership behavior. Meanwhile, 27 (18%) strongly disagreed, 21(14%) disagreed, and 36 (24%) remained neutral. The result was not statistically significant ($p = .663$).

Item 02. The majority of participants agreed (28%) and strongly agreed (24%), that leaders encourage creativity and new ideas. which is core of component of transformational leadership. Conversely, 12% strongly disagreed, 16% disagreed, and 20% were neutral. The association was statistically significant ($p = 0.023$)

Item 03. Most participants agreed (30%) and strongly agree (26%) that leaders provide support and appreciation, indicating a supportive leadership style. Whereas 16% strongly disagreed, 33% disagreed, and 18% remained neutral. The association was statistically significant. ($p = .024$).

Item 04. A large proportion of participants agree (30%) and strongly agree (22%) that leaders promote teamwork and collaboration, directly addressing the objective of assessing teamwork. On the other hand 20% were neutral. The association was statistically significant ($p = .006$)

Item 05. Participants reported high agreement that leaders act as role models for ethical behavior, with 30% agreeing and 18% strongly agreeing. Conversely, 16% strongly disagreed, 14% disagreed, and 22% were neutral. The result

shows a highly significant association ($p = .001$).

Item 06. The majority of participants agree (32%) and strongly agree (18%).conversely, 16% strongly disagree, 33%disagree, and 24% remained neutral. The association was not statistically significant ($p= .346$).

Item 07. Most participants agree (38%) and strongly agree (26%).Very few strongly disagree (2%) disagree (12%), or remained neutral (22%). The result was not statistically significant ($p = .075$).

Item 08. A large proportion agree (38%) and strongly agree (28%) with this item. Very few reported strongly disagreeing (2%) disagreeing (12%), or remaining neutral (20%). the association was highly significant ($p = .001$).

Item 09. The majority strongly disagree (64%) that leaders emphasize discipline and order, which reflects limited autocratic leadership. Only 2.6% disagree or were neutral, while 18% agree and 12.6% strongly agree. The result was not statistically significant ($p = .922$).

Item 10. Most participants strongly disagree (35.3%). Very few disagree (8%) or were neutral. Meanwhile, 30% agree and 18%strongly agree. The association was not significant ($p = .104$).

Item 11. Most participants agree (66%) and strongly agree (30%) that leaders allow independent decision-making, reflecting democratic leadership. Very few strongly disagree (2%) disagree (14%), or remained neutral (10%). the association was

significant ($p = .046$).

Item 12. The majority agreed (38%) and strongly agreed (42%) that leaders rarely get involved in issues, reflecting laissez-faire leadership. Only a small group strongly disagree (2%), disagree (12%), or were neutral (6%). the result was not statistically significant ($p = .338$).

Item 13. Many participants agree (46%) and strongly agreed (36%) that staff solve problems on their own, another indicator of laissez-faire leadership. Very few strongly disagreed (2%) disagreed (8%) or remained neutral (8%). The association was not statistically significant ($p = 0.397$).

Item 14. Most participants agreed (44%) and strongly agreed (34%) that that there is minimal communication from leadership, which further reflects laissez-faire leadership behavior. Only 2% strongly disagree, 10% disagree, and 8% remained neutral. The result was not statistically significant ($p = .768$).

Item 15. The majority agreed (42%) and strongly agreed (42%). Very few strongly disagreed (4%),Disagreed (10%), or remained neutral (16%). the association was not statistically significant ($p = .997$).

Item 16. Most respondents agreed (44%) and strongly agreed (28%) that leadership motivates nurses, reflecting overall leadership effectiveness

and its influence on job satisfaction. Only 2% strongly disagreed, 8% disagreed, and 18% remained neutral. The association was not statistically significant ($p = .908$).

Item 17. Participants agreed (32%) and strongly agree (15.3%) that that leadership improves teamwork, directly addressing one of the study objectives. meanwhile 33.3% strongly disagreed, 6.6% disagreed, and 12.6% were neutral. The association was not statistically significant ($p = .736$).

Item 18. A significant number agreed (36%) and strongly agreed (24.6%) that leadership reduces conflicts, which reflects effective leadership practices. Few strongly disagreed (16%), disagreed (4.6%) or were neutral (18.6%). The association was not statistically significant. ($p = .236$).

Item 19. Most participants agreed (38%) and strongly agreed (20%). only a small number strongly disagreed (13.3%), disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .613$).

Item 20. Many participants agreed (34%) and strongly agreed (20%). only a small number strongly disagreed (13.3%) disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .613$).

Table no: 3. Distribution of Gender of subjects compare with Leadership Style and Leadership Effectiveness Assessment:

S/N O	Statement	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	P value
01	Inspires and Motivate the team	27 (18%)	21 (14%)	36 (24%)	36 (24%)	30 (20%)	.511
02	encourages creativity and new ideas	18 (12%)	24 (16%)	30 (20%)	42 (28%)	36 (24%)	.486

03	provides supports appreciation	24 (16%)	50 (33%)	27 (18%)	45 (30%)	39 (26%)	.431
04	promote teamwork and collaboration	18 (12%)	21 (14%)	30 (20%)	45 (30%)	33 (22%)	.400
05	Acts as role model for ethical behavior	24 (16%)	21 (14%)	33 (22%)	45 (30%)	27 (18%)	.477
06	Provides clear rules and expectations	24 (16%)	50 (33%)	36 (24%)	48 (32%)	27 (18%)	.013
07	rewards effective performance	3 (2%)	18 (12%)	33 (22%)	57 (38%)	39 (26%)	.972
08	monitors performance closely	3 (2%)	18 (12%)	30 (20%)	57 (38%)	42 (28%)	.679
09	emphasizes discipline and order	96 (64%)	4 (2.6%)	4 (2.6%)	27 (18%)	19 (12.6)	.550
10	Staff know expectations	53 (35.3%)	12 (8%)	13 (8.66)	45 (30%)	27 (18%)	.815
11	allows independent decisions	3 (2%)	21 (14%)	15 (10%)	66 (66%)	45 (30%)	.368
12	rarely gets involved in issues	3 (2%)	18 (12%)	9 (6%)	57 (38%)	63 (42%)	.100
13	Staff solve problems on their own	3 (2%)	12 (8%)	12 (8%)	69 (46%)	54 (36%)	.102
14	provides little direction	3 (2%)	15 (10%)	12 (8%)	66 (44%)	51 (34%)	.031

15	minimal communication	6 (4%)	15 (10%)	24 (16%)	63 (42%)	42 (42%)	.000
16	leadership motivates nurses	3 (2%)	12 (8%)	27 (18%)	66 (44%)	42 (28%)	.002
17	creates positive work environment	50 (33.3%)	10 (6.6%)	19 (12.6)	48 (32%)	23 (15.3)	.742
18	improves teamwork	24 (16%)	7 (4.6%)	28 (18.6)	54 (36%)	37 (24.6%)	.161
19	reduces conflicts	20 (13.3%)	8 (5.3%)	34 (22.6%)	58 (38%)	30 (20%)	.961
20	leadership effective in achieving goals	18 (12%)	7 (4.6%)	33 (22%)	51 (34%)	41 (27.3%)	.569

Table No. 03, shows that 36 (24%) participants agreed and another 36 (24%) strongly agreed that the leader inspires and motivates the team. Meanwhile, 27 (18%) strongly disagreed, 21 (14%) disagreed, and 36 (24%) remained neutral. The result was not significant ($p = .511$).

Item 02: The majority of participants agreed (28%) and strongly agreed (24%) with this item. Conversely, 12% strongly disagreed, 16% disagreed, and 20% were neutral. The association was not significant ($p = .486$).

Item 03: Most participants agreed (30%) and strongly agreed (26%), whereas 16% strongly disagreed, 33% disagreed, and 18% remained neutral. The association was not significant ($p = .431$).

Item 04: A large proportion of participants agreed (30%) and strongly agreed (22%). On the other hand, 12% strongly disagreed, 14% disagreed, and 20% were neutral. The association was not significant ($p = .400$).

Item 05: Participants reported high agreement with this item, with 30% agreeing and 18% strongly agreeing. Conversely, 16% strongly disagreed, 14% disagreed, and 22% were neutral. The association was not significant ($p = .477$).

Item 06: The majority of participants agreed (32%) and strongly agreed (18%). Conversely, 16% strongly disagreed, 33% disagreed, and 24% remained neutral. The association was significant ($p = .013$).

Item 07: Most participants agreed (38%) and strongly agreed (26%). Very few strongly disagreed (2%), disagreed (12%), or remained neutral (22%). The result was not significant ($p = .972$).

Item 08: A large proportion agreed (38%) and strongly agreed (28%) with this item. Very few reported strongly disagreeing (2%), disagreeing (12%), or remaining neutral (20%). The association was not significant ($p = .679$).

Item 09: The majority strongly disagreed (64%) with this item. Only 2.6% disagreed or were

neutral, while 18% agreed and 12.6% strongly agreed. The result was not significant ($p = .550$).

Item 10: Most participants strongly disagreed (35.3%). Very few disagreed (8%) or were neutral (8.6%). Meanwhile, 30% agreed and 18% strongly agreed. The association was not significant ($p = .815$).

Item 11: Most participants agreed (44%) and strongly agreed (30%). Very few strongly disagreed (2%), disagreed (14%), or remained neutral (10%). The association was not significant ($p = .368$).

Item 12: A majority agreed (38%) and strongly agreed (42%) that leadership rarely gets involved. Only a small group strongly disagreed (2%), disagreed (12%), or were neutral (6%). The result was not significant ($p = .100$).

Item 13: Many participants agreed (46%) and strongly agreed (36%). Very few strongly disagreed (2%), disagreed (8%), or remained neutral (8%). The association was not significant ($p = .102$).

Item 14: Most participants agreed (44%) and strongly agreed (34%). Only 2% strongly disagreed, 10% disagreed, and 8% remained neutral. The result was significant ($p = .031$).

Item 15: The majority agreed (42%) and strongly

agreed (28%). Very few strongly disagreed (4%), disagreed (10%), or remained neutral (16%). The association was significant ($p = .000$).

Item 16: Most respondents agreed (44%) and strongly agreed (28%). Only 2% strongly disagreed, 8% disagreed, and 18% remained neutral. The association was significant ($p = .002$).

Item 17: Participants agreed (32%) and strongly agreed (15.3%). Meanwhile, 33.3% strongly disagreed, 6.6% disagreed, and 12.6% were neutral. The association was not significant ($p = .742$).

Item 18: A significant number agreed (36%) and strongly agreed (24.6%). Few strongly disagreed (16%), disagreed (4.6%), or were neutral (18.6%). The association was not significant ($p = .161$).

Item 19: Most participants agreed (38%) and strongly agreed (20%). Only a small number strongly disagreed (13.3%), disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .961$).

Item 20: Many participants agreed (34%) and strongly agreed (27.3%). Only a small number strongly disagreed (12%), disagreed (4.6%), or stayed neutral (22%). The association was not significant ($p = .569$).

Table no: 4. Distribution of qualification of subjects compare with Leadership Style and Leadership Effectiveness Assessment:

S/NO	Statement	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	P value
01	Inspires and motivates the team	27 (18%)	21 (14%)	36 (24%)	36 (24%)	30 (20%)	.061
02	encourages creativity and new ideas	18 (12%)	24 (16%)	30 (20%)	42 (28%)	36 (24%)	.187

03	provides supports appreciat on	24 (16%)	50 (33%)	27 (18%)	45 (30%)	39 (26%)	.040
04	Promote teamwork and collaboration	18 (12%)	21 (14%)	30 (20%)	45 (30%)	33 (22%)	.018
05	Acts as role model	24 (16%)	21 (14%)	33 (22%)	45 (30%)	27 (18%)	.376
06	provides clear rules and expectations	24 (16%)	50 (33%)	36 (24%)	48 (32%)	27 (18%)	.508
07	Rewars effective performance	3 (2%)	18 (12%)	33 (22%)	57 (38%)	39 (26%)	.830
08	monitors performance closely	3 (2%)	18 (12%)	30 (20%)	57 (38%)	42 (28%)	.139
09	emphasizes discipline and order	96 (64%)	4 (2.6%)	4 (2.6%)	27 (18%)	19 (12.6)	.923
10	staff know expe	53 (35.3%)	12 (8%)	13 (8.66)	45 (30%)	27 (18%)	.791
11	allows independent decisions	3 (2%)	21 (14%)	15 (10%)	66 (66%)	45 (30%)	.467
12	Rarely gets involved in issues	3 (2%)	18 (12%)	9 (6%)	57 (38%)	63 (42%)	.335
13	staff solve problems on their own	3 (2%)	12 (8%)	12 (8%)	69 (46%)	54 (36%)	.387
14	Provides little direction	3 (2%)	15 (10%)	12 (8%)	66 (44%)	51 (34%)	.867
15	minimal communication	6 (4%)	15 (10%)	24 (16%)	63 (42%)	42 (42)	.678
16	leadership motivates nurses	3 (2%)	12 (8%)	27 (18%)	66 (44%)	42 (28%)	.841
17	creates positive work environment	50 (33.3%)	10 (6.6%)	19 (12.6)	48 (32%)	23 (15.3)	.605
18	improves teamwork	24 (16%)	7 (4.6%)	28 (18.6)	54 (36%)	37 (24.6%)	.984

19	reduces conflicts	20 (13.3%)	8 (5.3%)	34 (22.6%)	58 (38%)	30 (20%)	.635
20	leadership effective in achieving goals	18 (12%)	7 (4.6%)	33 (22%)	51 (34%)	41 (27.3%)	.478

Table No. 04 shows that 36 (24%) participants agreed and another 36 (24%) strongly agreed that the leader inspires and motivates the team. Meanwhile, 27 (18%) strongly disagreed, 21 (14%) disagreed, and 36 (24%) remained neutral. The result was not significant ($p = .061$).

Item 02: The majority of participants agreed (28%) and strongly agreed (24%) with this item. Conversely, 12% strongly disagreed, 16% disagreed, and 20% were neutral. The association was not significant ($p = .187$).

Item 03: Most participants agreed (30%) and strongly agreed (26%), whereas 16% strongly disagreed, 33% disagreed, and 18% remained neutral. The association was significant ($p = .040$).

Item 04: A large proportion of participants agreed (30%) and strongly agreed (22%). On the other hand, 12% strongly disagreed, 14% disagreed, and 20% were neutral. The association was significant ($p = .018$).

Item 05: Participants reported high agreement, with 30% agreeing and 18% strongly agreeing. Conversely, 16% strongly disagreed, 14% disagreed, and 22% were neutral. The association was not significant ($p = .376$).

Item 06: The majority of participants agreed (32%) and strongly agreed (18%). Conversely, 16% strongly disagreed, 33% disagreed, and 24% remained neutral. The association was not significant ($p = .508$).

Item 07: Most participants agreed (38%) and strongly agreed (26%). Very few strongly disagreed (2%), disagreed (12%), or remained neutral (22%). The result was not significant ($p = .830$).

Item 08: A large proportion agreed (38%) and strongly agreed (28%). Very few strongly disagreed (2%), disagreed (12%), or remained neutral (20%). The association was not significant ($p = .139$).

Item 09: The majority strongly disagreed (64%) with this item. Only 2.6% disagreed or were neutral, while 18% agreed and 12.6% strongly agreed. The result was not significant ($p = .923$).

Item 10: Most participants strongly disagreed (35.3%). Very few disagreed (8%) or were neutral (8.6%), while 30% agreed and 18% strongly agreed. The association was not significant ($p = .791$).

Item 11: Most participants agreed (44%) and strongly agreed (30%). Very few strongly disagreed (2%), disagreed (14%), or remained neutral (10%). The association was not significant ($p = .046$).

Item 12: A majority agreed (38%) and strongly agreed (42%) that leadership rarely gets involved. Only a small group strongly disagreed (2%), disagreed (12%), or were neutral (6%). The result was not significant ($p = .335$).

Item 13: Many participants agreed (46%) and strongly agreed (36%). Very few strongly disagreed (2%), disagreed (8%), or remained neutral (8%). The association was not significant ($p = .387$).

Item 14: Most participants agreed (44%) and strongly agreed (34%). Only 2% strongly disagreed, 10% disagreed, and 8% remained neutral. The result was not significant ($p = .867$).

Item 15: The majority agreed (42%) and strongly

agreed (28%). Very few strongly disagreed (4%), disagreed (10%), or remained neutral (16%). The association was not significant ($p = .678$).

Item 16: Most respondents agreed (44%) and strongly agreed (28%). Only 2% strongly disagreed, 8% disagreed, and 18% remained neutral. The association was not significant ($p = .841$).

Item 17: Participants agreed (32%) and strongly agreed (15.3%). Meanwhile, 33.3% strongly disagreed, 6.6% disagreed, and 12.6% were neutral. The association was not significant ($p = .605$).

Item 18: A significant number agreed (36%) and strongly agreed (24.6%). Few strongly disagreed (16%), disagreed (4.6%), or were neutral (18.6%). The association was not significant ($p = .984$).

Item 19: Most participants agreed (38%) and strongly agreed (20%). Only a small number strongly disagreed (13.3%), disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .635$).

Item 20: Many participants agreed (34%) and strongly agreed (20%). Only a small number strongly disagreed (13.3%), disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .478$).

Table no: 5. Distribution of Department of subjects compare with Leadership Style and Leadership Effectiveness Assessment:

S/NO	Statement	Strongly disagree	Disagree	Neutral	agree	Strongly agree	P value
01	Inspires and motivates the team	27 (18%)	21 (14%)	36 (24%)	36 (24%)	30 (20%)	.564
02	encourages creativity and new ideas	18 (12%)	24 (16%)	30 (20%)	42 (28%)	36 (24%)	.513
03	Provide support Appreciation	24 (16%)	50 (33%)	27 (18%)	45 (30%)	39 (26%)	.551
04	promote teamwork and collaboration	18 (12%)	21 (14%)	30 (20%)	45 (30%)	33 (22%)	.323
05	Acts as role model for ethical behavior	24 (16%)	21 (14%)	33 (22%)	45 (30%)	27 (18%)	.763

06	provides clear rules and expectations	24 (16%)	50 (33%)	36 (24%)	48 (32%)	27 (18%)	.766
07	Rewards effective performance	3 (2%)	18 (12%)	33 (22%)	57 (38%)	39 (26%)	.156
08	Monitors performance closely	3 (2%)	18 (12%)	30 (20%)	57 (38%)	42 (28%)	.339
09	emphasizes discipline and order	96 (64%)	4 (2.6%)	4 (2.6%)	27 (18%)	19 (12.6)	.450
10	Staff know expectations	53 (35.3%)	12 (8%)	13 (8.66)	45 (30%)	27 (18%)	.338
11	allows independent decision's	3 (2%)	21 (14%)	15 (10%)	66 (66%)	45 (30%)	.089
12	Rarely gets involved in issues	3 (2%)	18 (12%)	9 (6%)	57 (38%)	63 (42%)	.038
13	Staff solve problems on their own	3 (2%)	12 (8%)	12 (8%)	69 (46%)	54 (36%)	.018
14	Provides little direction	3 (2%)	15 (10%)	12 (8%)	66 (44%)	51 (34%)	.201
15	minimal communication	6 (4%)	15 (10%)	24 (16%)	63 (42%)	42 (42)	.423
16	leadership motivates nurses	3 (2%)	12 (8%)	27 (18%)	66 (44%)	42 (28%)	.109
17	creates positive work environment	50 (33.3%)	10 (6.6%)	19 (12.6)	48 (32%)	23 (15.3)	.035

18	improves teamwork	24 (16%)	7 (4.6%)	28 (18.6)	54 (36%)	37 (24.6%)	.208
19	reduces conflicts	20 (13.3%)	8 (5.3%)	34 (22.6%)	58 (38%)	30 (20%)	.938
20	leadership effective in achieving goals	18 (12%)	7 (4.6%)	33 (22%)	51 (34%)	41 (27.3%)	.727

Table No. 05 shows that 36 (24%) participants agreed and another 36 (24%) strongly agreed that the leader inspires and motivates the team. Meanwhile, 27 (18%) strongly disagreed, 21 (14%) disagreed, and 36 (24%) remained neutral. The result was not significant ($p = .564$).

Item 02: The majority of participants agreed (28%) and strongly agreed (24%) with this item. Conversely, 12% strongly disagreed, 16% disagreed, and 20% were neutral. The association was not significant ($p = .513$).

Item 03: Most participants agreed (30%) and strongly agreed (26%), whereas 16% strongly disagreed, 33% disagreed, and 18% remained neutral. The association was not significant ($p = .551$).

Item 04: A large proportion of participants agreed (30%) and strongly agreed (22%), while 12% strongly disagreed, 14% disagreed, and 20% were neutral. The association was not significant ($p = .323$).

Item 05: Participants reported high agreement, with 30% agreeing and 18% strongly agreeing. Conversely, 16% strongly disagreed, 14% disagreed, and 22% were neutral. The association was not significant ($p = .763$).

Item 06: The majority of participants agreed (32%) and strongly agreed (18%). Conversely, 16% strongly disagreed, 33% disagreed, and 24% remained neutral. The association was not significant ($p = .766$).

Item 07: Most participants agreed (38%) and strongly agreed (26%). Very few strongly disagreed (2%), disagreed (12%), or remained neutral (22%). The result was not significant ($p = .156$).

Item 08: A large proportion agreed (38%) and strongly agreed (28%). Very few strongly disagreed (2%), disagreed (12%), or remained neutral (20%). The association was not significant ($p = .339$).

Item 09: The majority strongly disagreed (64%). Only 2.6% disagreed or were neutral, while 18% agreed and 12.6% strongly agreed. The result was not significant ($p = .450$).

Item 10: Most participants strongly disagreed (35.3%). Very few disagreed (8%) or were neutral (8.6%), while 30% agreed and 18% strongly agreed. The association was not significant ($p = .338$).

Item 11: Most participants agreed (44%) and strongly agreed (30%). Very few strongly disagreed (2%), disagreed (14%), or remained neutral (10%). The association was not significant ($p = .089$).

Item 12: A majority agreed (38%) and strongly agreed (42%) that leadership rarely gets involved. Only a small group strongly disagreed (2%), disagreed (12%), or were neutral (6%). The association was significant ($p = .038$).

Item 13: Many participants agreed (46%) and

strongly agreed (36%). Very few strongly disagreed (2%), disagreed (8%), or remained neutral (8%). The association was significant ($p = .018$).

Item 14: Most participants agreed (44%) and strongly agreed (34%). Only 2% strongly disagreed, 10% disagreed, and 8% remained neutral. The association was not significant ($p = .201$).

Item 15: The majority agreed (42%) and strongly agreed (28%). Very few strongly disagreed (4%), disagreed (10%), or remained neutral (16%). The association was not significant ($p = .423$).

Item 16: Most respondents agreed (44%) and strongly agreed (28%). Only 2% strongly disagreed, 8% disagreed, and 18% remained neutral. The association was not significant ($p = .109$).

Item 17: Participants agreed (32%) and strongly agreed (15.3%). Meanwhile, 33.3% strongly disagreed, 6.6% disagreed, and 12.6% were neutral. The association was significant ($p = .035$).

Item 18: A significant number agreed (36%) and strongly agreed (24.6%). Few strongly disagreed (16%), disagreed (4.6%), or were neutral (18.6%). The association was not significant ($p = .208$).

Item 19: Most participants agreed (38%) and strongly agreed (20%). Only a small number strongly disagreed (13.3%), disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .938$).

Item 20: Many participants agreed (34%) and strongly agreed (20%). Only a small number strongly disagreed (13.3%), disagreed (5.3%), or stayed neutral (22.6%). The association was not significant ($p = .727$).

Discussion:

This study explored the leadership styles of nurse managers at PMCH Hospital, Nawabshah, and

their influence on nurses' job satisfaction, teamwork, and patient care quality (21). The participants represented a diverse group in terms of age, gender, qualification, and employment type, which allowed for a nuanced understanding of leadership effectiveness in different contexts (22). The average age of the nurses was 35 years, placing most of them in early-to-mid adulthood. This is a critical period where nurses are generally receptive to motivational and supportive leadership, as noted by Gebreheat et al. (2023). Leaders who emphasize recognition, encouragement, and guidance are therefore more likely to foster engagement and satisfaction among staff in this age group (23). Gender distribution in the study was balanced, ensuring that perceptions of leadership were not influenced by gender bias. This balance also allowed meaningful comparisons, supporting the idea that leadership effectiveness can be assessed reliably across male and female nurses (24).

Consistent with the findings of Alharbi et al. (2022). Academic qualifications varied, with the largest group holding post-RN BSN degrees. Nurses with advanced qualifications tend to have better clinical judgment and are more confident in leadership-related tasks (25). Echoing the observations by Saha, Farooq, and Gul (2023). This suggests that staff with higher professional education may respond more effectively to transformational leadership approaches. Departmental representation revealed a higher proportion of nurses from ICU and pediatric units, reflecting staffing patterns and the intensity of leadership interaction in these high-demand areas. Similar trends were reported by Godfrey (2015), who noted that critical care nurses engage more frequently with leaders due to the complex and high-pressure nature of their work. This highlights the importance of effective leadership in units where teamwork (26). Communication, and real-time decision-making are essential. Most nurses in this study were permanent staff, which likely contributes to stability and greater engagement with leadership practices. Rahman and Ali (2024) found that

permanent nurses often experience higher job satisfaction and respond more positively to supportive leadership compared to those in contractual positions (27). This trend was also apparent in PMCH, where long-term employees appeared more confident in their roles and more receptive to guidance from their managers. The results suggest that transformational and democratic leadership styles are prevalent at PMCH Hospital. Many nurses reported that their leaders encourage creativity and innovation, promote collaboration, and provide support and appreciation. For example, a significant portion of the staff felt motivated and recognized for their contributions, which aligns with findings from Ahmad and Saleem (2023) who noted that reward-based leadership enhances morale, reduces burnout, and improves teamwork (28). Although most nurses felt supported, there was some variability across departments, indicating that supportive leadership is not uniformly experienced. This mirrors the conclusions of Gebreheat et al. (2023), who emphasized that consistent recognition and individualized support are (29). key drivers of job satisfaction. Similarly, communication and guidance were identified as areas needing improvement. Some nurses expressed uncertainty about expectations and direction, especially among contractual and less experienced staff, reflecting patterns observed by Rahman and Ali (2024)(30). Autonomy was another positive aspect, with nurses generally empowered to make independent decisions. This supports the idea that democratic leadership, which encourages staff participation in problem-solving and clinical decision-making, can enhance confidence and responsibility, as highlighted by Khan and Patel (2023). On the other hand, very few nurse (31).perceived their leaders as overly strict or highly focused on discipline, suggesting a more flexible, supportive environment that prioritizes guidance over rigid enforcement—a finding consistent with Khan and Bib (2022)(32). Leadership was also seen to positively influence teamwork and conflict resolution. While perceptions varied, most

nurses agreed that collaborative leadership improved cooperation and reduced interpersonal tensions, supporting the broader literature on transformational leadership (Omar & Hassan, 2023; Rashid & Ali, 2022). In terms of achieving goals, nurses generally perceived their leaders as effective (33,34). Further underscoring the importance of combining motivational, supportive, and collaborative leadership behaviors to enhance hospital performance. Overall, the study highlights the importance of transformational and democratic leadership at PMCH Hospital. Leaders who are supportive, encourage innovation, and foster collaboration positively impact nurses' satisfaction, autonomy, and team functioning, which in turn may improve patient care quality. However, there is room for improvement in communication and consistency of guidance, particularly for less experienced or contractual staff. The findings suggest that tailored leadership strategies, continuous training, and recognition mechanisms could strengthen leadership effectiveness, improve staff engagement, and contribute to better healthcare outcomes (35).

CONCLUSION: The study concludes that leadership styles significantly influence effect of nurses' motivation teamwork and the quality of patient care among nurses. Transformational leadership was found to be more effective than transactional and laissez-faire leadership in promoting better collaboration and improving patient care outcomes.

RECOMMEDATIONS: To enhance nursing leadership effectiveness, hospitals should provide targeted leadership training, promote clear communication, and encourage supportive and ethical practices. Ensuring adequate staffing, fair workloads, and recognition of good performance can further strengthen teamwork, motivation, and overall nursing outcomes.

Funding: self

Conflict of interest: No any

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