THE INFLUENCE OF LEADERSHIP STYLE ON EMPLOYEE PRODUCTIVITY AND DEVELOPMENT OF META-LEADERSHIP MEASUREMENT INDICATORS IN HOSPITALS

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Abstract

Objective: Hospital productivity can be seen from indicators of effectiveness and efficiency of services as well as financial indicators. The average hospital BOR achievement is 44.1% below the standard set by the Ministry of Health, namely 65 - 80%, which is an indicator of the level of hospital productivity which is still low. The aim of this research is to develop an indicator for measuring meta-leadership in managers hospital with a case study of a hospital in the city of Makassar, South Sulawesi. **Method:** This qualitative study concentrates on exploring the indicators of meta-leadership measurement instruments. Focus group discussion (FGD) with 4 speakers. Data were analyzed using a grounded theory approach to find indicators for measuring metaleadership in hospital managers. **Results:** This study identifies a number of indicators that are important for meta-leadership measurement instruments in hospital managers to increase hospital productivity in conditions of disruption. Self-awareness, self-management, resonant authentic leadership, situational awareness, negotiation and conflict resolution, complexity management, data-based decision making, risk analysis, strategic decision making and knowledge management are indicators. The indicator focuses on the ability of hospital managers to overcome disruption because the hospital business world is developing rapidly, is unstable and has an uncertain future. **Conclusion:** The indicators identified in this research can be applied as a meta-leadership model measurement instrument for hospital managers in the context of volatility, uncertainty, complexity and ambiguity (VUCA) which is relevant to hospitals in the city of Makassar, South Sulawesi.

Keywords: Development, Indicators, Hospitals, Meta-Leadership.

1. INTRODUCTION

In organizational life, leadership is often considered the most critical factor in determining overall success or failure. Strong leadership is the foundation of successful healthcare organizations, and leaders are the driving force behind overcoming obstacles to achieve goals [1]. Organizational leaders need a new, agile leadership model to face these VUCA threats. Faced with these challenges, leaders are unable to lead in traditional ways [2]. Transformation of traditional organizations requires transformation of traditional leaders [3]. The various issues and problems that are occurring today are required for leaders to have expertise in various fields and be able to accommodate various interests.

Leadership is the spearhead of an organization that directs people and utilizes other resources for the benefit of the organization. This is in line with what was expressed by Alavi [4] that leadership is realized through a working style (operating style) or a consistent way of collaborating with other people.

The future organizational needs that will emerge are the need for urgency, speed, growing complexity and learning with the aim of continuous innovation. Various authors view the work of leaders in these emerging organizations of the future from different perspectives. Leaders need to recognize the need for revitalization, create a vision, align people towards a direction or vision and institutionalize change [5]. Stated that leadership is the task of building collaborative teams, teaching a shared vision and organizational principles, and instilling and encouraging trust. For the well-being of business and society, leadership must also focus the ability to forge new meaning and purpose for the organization and its employees [6].

Leadership envisioned as broad, integrated, and comprehensive is described by Marcus [7],[8] as "meta-leadership": Meta-leadership is a framework and practice method for broad, holistic leadership that meets the demands of modern organizations that have evolved beyond purely hierarchical structures and are facing situations complex crisis [9].

Several hospitals in the city of Makassar, South Sulawesi province also face challenges and problems in increasing hospital productivity. Managers are required to take steps and strategies that will have a real impact on effectiveness and efficiency so that hospital productivity continues to increase in current conditions. Managers are expected to be able to change the mindset of their employees to remain productive in every condition. Hospital productivity can be seen from effectiveness and efficiency indicators as well as financial indicators. Based on the results of initial data searches at 5 (five) hospitals in Sulawesi province. South from 2018 to 2022, the average BOR achievement is 44.1%, while there are hospitals whose BOR is 68.4%. This situation shows that there are hospitals that have reached the Ministry of Health's standards, but there are still some that are below the standards set by the Ministry of Health, namely 65 - 80%. Based on the BOR achievement figures which are still below the Ministry of Health's standards and the annual employee income which is still low is an indicator of the level of hospital productivity. which is still low. This is a very difficult challenge in the current situation and conditions, both in managing human resources and facilities and infrastructure to increase hospital productivity.

The results of research conducted by Oberg [10] show that although transformational leadership traits have a positive effect on performance, transactional leadership traits have an important constructive effect on organizational and employee performance. This study also analyzes that transactional leadership traits are more suitable in encouraging and improving performance in hospitals than transformational leadership and, as a result, transactional leadership traits/behaviors are recommended for healthcare organizations/hospitals with integral policies and strategies for evolution to transformational leadership as The hospital matures, grows and develops.

The meta-leadership framework helps organizations in various sectors, including hospitals, to be able to survive in times of crisis so that productivity continues to increase. However, until now throughout the research, researchers have not found any literature related to how the meta-leadership framework is applied in hospitals. Therefore, it is necessary to develop a meta-leadership model measurement instrument for hospital managers which can then continue to be developed to become a leadership framework in facing future challenges. The meta-leadership instrument was developed to measure the ability of a hospital manager at various levels to carry out leadership from various meta-leadership dimensions, namely the Person, Situation

and Connectivity dimensions so that it can determine whether the hospital manager is included in the meta-leadership category or not. Based on the facts above, this research will develop a meta-leadership measurement instrument for class B hospital managers in the city of Makassar, South Sulawesi Province.

Meta-leadership and the Need for a Meta-leadership Model in Hospitals

The meta-leadership model has been developed by observing and analyzing leaders' actions in unprecedented crisis situations. Post-Hurricane Katrina, during the initial phases of the H1N1 outbreak and the Deep Water Horizon oil spill, the Marathon bombing response, and other incidents – as well as mergers, acquisitions, and restructuring especially in the health care space. The prefix "meta" is equated with its use in "meta-research," which systematically identifies cross-cutting themes found in many different studies, or "meta-analysis," which also combines and synthesizes findings about multiple questions in a search. overall thoughts and conclusions.

Meta-leadership is a framework and practice method for broad and comprehensive leadership that meets the demands of modern organizations that have evolved beyond purely hierarchical structures and face complex crisis situations [9].

2. METHODS

This research uses a qualitative approach aimed at formulating and developing Meta-leadership indicators based on the main variables, namely the three main dimensions of meta-leadership; person, situation and connectivity dimensions. This qualitative research was conducted in 6 (six) hospitals in Makassar, South Sulawesi from May to June 2023. This research was divided into two, namely informants in the FGD and informants for in-depth interviews. For the in-depth interview and FGD stages, the capacity needed for a leader to overcome all problems is related to the meta-leadership dimension. In-depth interviews and FGDs were carried out using interview questionnaires which were provided as additional files (Supplementry files).

The informants in this research were experts in the hospital field, namely hospital directors, health practitioners, hospital management practitioners and academics. The inclusion criteria are having more than 5 years of experience in the field and being willing to take part in in-depth interviews and FGDs. We identified 10 potential informants for in-depth interviews and 5 potential sources. There were 6 informants who had been confirmed to take part in the research, while there were 4 informants. Next, we contacted them to ensure that the time and method (face-to-face/virtual) met the wishes of the informants and sources. 5 of the 6 informants were interviewed face to face. One informant was interviewed by telephone. Interviews lasted from 60 to 120 minutes. In-depth interviews were conducted using a semi-structured questionnaire guide. The FGD lasted 120 minutes. Before in-depth interviews and FGDs began, all informants and resource persons received a letter explaining the nature of the research and filled out informed consent. All in-depth interviews were conducted in Indonesian in April - May 2023 using an audio recorder. This research was carried out in accordance with the ethical permit approved by the Ethics Council number 2401/UN4.14.1/PT.01.04/2023.

This research uses grounded theory to determine indicators for measuring meta-leadership in hospital managers. Data analysis begins with reading data and writing memos by forming a coding scheme to explore data, identify relationships between themes and develop broader theme categories. After the in-depth interview and FGD,

the first author immediately made a data transcript. Each transcription is labeled with an identifier as interview number (I.1 – I.6) and for the interviewee with a code (N1-N4). After completing the initial coding, the data results are summarized in notes to categorize the focused coding and then analyzed with relevant theories and previous research.

3. RESULT

Table 1: Characteristics of Interviews

No.	Variable	Informants and Sources	
		n	**%**
	Gender		
	Male	6	60
	Female	4	40
	Age (years)		
	40-49	2	20
	50-59	8	80
	60-69		
	Skill category		
	Government	2	20
	Practician	5	50
	Academics	3	30
	Education		
	Bachelor		
	Master	7	70
	Doktoral	3	30
	Experience (years)		
	5-10	3	30
	>10	7	70

Table 1 shows the identities of 6 informants and 4 sources. Six (60%) informants and sources were men. 8 (80%) are between 50 and 59 years old, 5 (50%) are hospital practitioners, 9 (90%) have a master's education and 7 (70%) have more than 10 years of experience in their field.

Table 2: Indicators, Criteria and Code Examples

Indicator	Criteria	Code examples
Self Awareness (I.1,I.2,I.3,N.1,N.2,N.4)	Emotional intelligence	Emotional intelligence is greatly influenced by parenting patterns, if emotions cannot be managed properly it can cause unbalanced emotional reactions. Emotional intelligence involves the ability to manage emotions appropriately, whether anger, sadness, happiness and so on (N. 2)
	Personality and discipline	The leader is also a role model including disciplinary issues, for example when entering work he must commit to a predetermined and agreed time. (I.2)
	Perseverance	A leader has a fixed goal, where the goal is not too influenced by possible consequences, they don't care if there is a reprimand, as long as they are able to convey their opinion to the right person.(N.1)
	Firmness	When leading, you have to be firm with everyone, it's not an easy thing but it has to be done (I.3)

Indicator	Criteria	Code examples
Self management (I.1,I.2,I.3,N.1,N.2,N.3,N.4)	Optimistic	A meta leader is always cheerful and optimistic when something is being done (N.2)
	Teamwork	Leaders collaborate to run the organization, everything that is a joint decision will be implemented (I.1)
	Ability to manage leaders, subordinates, work units and across organizations, effective communication	We have to involve all employees so that they are responsible and we have to trust the staff so that they are enthusiastic about working (I.1)
	Able to provide inspiration for real change	The leader is able to communicate well, is able to command people and there is no one who can be charismatic. Actually, what comes in there is also good, it is implemented and it makes a very striking change, which makes now the idea is very brilliant and suddenly it can be implemented and make a difference. (N.3)
	Encourage learning in others	To build self-confidence, you have to learn, even if there are people who don't prepare themselves from the start to become a leader, they won't know what to do. (I.2)
Resonant leadership Aunthenticity (I.3,N.1,N.2)	Have experience in leading	Resonant leadership is the ability to influence the vibrations of other people, where other people can recognize your abilities. Experience and education, including good technical skills, play an important role in this. A meta leader tends to dislike messy situations (N.1)
	Have expertise in their field	He must master the regulations to enforce hospital rules and have authentic skills. (I.3)
	Able to communicate well when negotiating with other parties	A leader's abilities include effective communication, which is simple and easy to understand by others.(N.2)
Situasional Awareness (I.1,I.2,I.4,N.2,N.3,N,4)	Able to resolve problems quickly and precisely	Meta leaders tend to be very strange and easy to recognize when we are in crisis and immediately take concrete action. (N.2)
	Able to identify risks	Meta leaders must differentiate between what is important from what is less important. They must identify what is a cohesive priority from what is not. Finally, they must muster the confidence and courage to make decisions and take action based on speculation and calculated risks (N.4)
	Able to analyze risk	Situational awareness is more related to a person's ability to understand and respond to situations involving perceptions, thoughts, feelings and spiritual dimensions which ultimately have an impact on long-term memory.(N.3)
	Able to manage risk	Meta leaders understand these risks, recognizing that each decision or action can pose different dangers and losses for each different stakeholder. The meta leader also

Indicator	Criteria	Code examples
		calculates the benefits of those decisions and actions.(N.4)
Negotiation and conflict resolution (I.1,I.3,I.5,N.3,N.4)	Able to negotiate with all stakeholders when facing problems	Ability as a negotiator is very necessary for a leader to resolve conflicts in hospitals (N.4)
	Able to read opportunities when a crisis occurs	In difficult circumstances, they are able to take advantage of opportunities when problems occur.(N.3)
Complexity management (I.3,I.4,N.2,N.3,)	Complex problem solving	When a problem occurs at the same time, they are very sharp in seeing solutions to overcome the problem. (N.2)
	The ability to act under heavy pressure.	This leader is able to act under heavy pressure and conditions of uncertainty (N.2)
	Maintain a balance between personal and organizational interests	In situations involving personal and organizational matters, they are able to balance personal and organizational interests.(N.3)
Decision science (I.1,I.4,N.4)	Able to think creatively in a crisis situation by using available resources.	Able to decide on a step by looking at the impact that will occur and committing to an action in implementing the decision (N.4)
Risk Management (I.1,I.2,N.1,N.4)	Able to direct subordinates to recognize the risks of crisis situations that occur	Meta leaders must encourage proactive thinking, and they must inspire their subordinates to face the crisis together (N.4)
	Able to communicate crisis conditions occurring in the organization to superiors, subordinates and other agencies	Meta-leaders intentionally and transparently communicate information and reasonable options to inform strategic assessments and solution building. They communicate with their boss without surprising the boss.(N.1)
Strategic decision making (I.2,I.3,N.1,N.2,N.3)	Able to create methods to solve problems	Meta-leaders deeply identify and understand the individual motives of different stakeholders and constituents in generating connectivity of thought and action. The task is to align these different but complementary areas into an integrated action plan (N.1)
	Able to motivate all parties in resolving crisis conditions in a timely manner	They provide enthusiastic motivation to all stakeholders who work together in teams (N.2)
	Go directly to monitor progress in resolving the crisis in the field.	When a problem occurs in the field, this leader goes directly to monitor the progress of solving the problem in the field.(N.3)
Knowledge management (I.1,I.3,N.2,N.4)	Able to communicate lessons learned from each crisis faced to all parties	Providing knowledge to the people around them based on that information is usually what leaders do when facing a panic problem. (I.1)
	Able to adapt to changes due to crisis	Leaders should be able to direct all their members to face existing problems.(N.2)
	Able to develop standard procedures to anticipate the recurrence of crisis situations.	To anticipate incidents that occur repeatedly, leaders are expected to develop standard guidelines that are used to prevent the same problems from occurring (N.4)

4. DISCUSSION

In this research, there are ten indicators for measuring meta-leadership in hospitals in facing the era of disruption. This indicator focuses on the competencies that hospital managers must have to face an era of disruption which is characterized by rapidly changing conditions, so a leader is needed who is able to adapt to the changes that occur. Some of the indicators studied are contained in the Meta-leadership concept from the Harvard School of Public Health University, namely Self Awareness, Resonant Leadership Authenticity, Situational Awareness, Complexity Management, Decision Science, Risk Management.

One of the prominent indicators is Self awareness. This indicator explains the criteria for a meta leader to start by knowing themselves and their influence on others. the ability to process emotional information to better navigate the social environment, having a high level of emotional intelligence by Bums [11], and Goleman [12], is one of the important personal characteristics of a meta leader. Self-Awareness has been shown to correlate with leadership effectiveness [13],[14].

Those who have high self-awareness have an understanding of the impact of personality, experience, culture, emotional expression, and character on other people [15]. The self-awareness indicator shows that a leader has traits and characteristics related to emotional intelligence, discipline, perseverance, openness, extraversion and social capital. Self-discipline, drive, understanding, and the capacity to form meaningful and satisfying relationships are essential in efforts to cross the boundaries commonplace in organizational, professional, and cultural associations [16]. Self-Awareness is very important to be able to control all activities in leading a hospital organization.

Of the ten indicators identified in this research, six indicators have been identified in the study Meta-Leadership: A Framework for Building Leadership Effectiveness such as Self Awareness by Slaikeu [13], and Soerabi [14], Resonant Leadership Authenticity by Goleman [17], and Lee [18] Situational Awareness by Simon [19], and Hammond [20] Complexity management by Useem [21], Decision science by Marcus [22], and Hammond [20] Risk Management by Bennis [23], and Hammond [20]. Our research also shows that Self Management is an important indicator in measuring meta-leadership.

The Self Management indicator studied in this research is a person's ability to control various elements within oneself such as physical, emotional, feeling, thoughts and behavior to achieve good and purposeful things. Self-management skills in managing their leaders include effective communication, which is simple and easy to understand by others. The most difficult thing for a leader to do is to be able to remind his superiors when the leadership does things that can be detrimental to the organization. They are also able to recruit subordinate cadres so that the organization can have a cadre of leaders in the future. Meta leaders also encourage leadership development throughout the system, although first at home among their constituents [24].

The most sensitive and dangerous aspect of leading is speaking truth to power. What if the boss makes a mistake, or acts immorally or with emotional instability? A willingness to speak up and take initiative is essential to leadership [23]. It is very important for a leader to have the courage to remind the leadership if something is not in accordance with the regulations in hospital management. They dare to be unpopular when enforcing the rules.

They reprimanded them in a diplomatic way and did not hurt each other. By carefully cultivating and managing a productive relationship with the boss, the leader/subordinate may end up with equal or greater power and influence than the boss (Marcus et al., 2006). In managing relationships with subordinates, they also really recognize and appreciate the results of their subordinates' work in accordance with research by Gialdini[25].

Another indicator identified is negotiation and conflict resolution, which is the meta-leader's ability to negotiate during crisis situations. an act of seeking solutions to resolve two or more differences by prioritizing social and moral development which requires skills and judgment to negotiate, compromise and develop a sense of justice [26]. Negotiation skills are very important for a hospital manager to resolve conflicts that occur both internally and externally. With the conflict that occurs, a manager is able to read opportunities that are profitable for the organization.

In facing challenges in the era of disruption, leaders must have the ability to make strategic decisions. This strategic decision is where the leader is able to create problem solving scenarios, is able to implement these scenarios in the field, motivates all parties to solve problems in a timely manner and of course a leader directly monitors the development of problems in the field. They understand the gravity of the situation, but what they need is a meta leader to step in and provide guidance, or at least a starting point. A leader's guidance and direction provides the spark to take action. Furthermore, it provides the kind of direction that unifies the effort. The relationships developed by Barbour are horizontal and vertical [18].

True meta leaders foster innovative thinking in that Meta-leaders are able to view problems holistically and use their influence in multifaceted responses to achieve successful outcomes. Additionally, meta-leaders have the experience and maturity to identify gaps between problems and responses to them. In addition, they should inspire connectivity of action and belief in purpose even in the most difficult circumstances.

A knack for strategic direction and the capacity to influence beyond their immediate domain symbolize the unique contributions of meta-leaders. With strategic plans for the future and goals for recovery always in mind, he was able to effectively direct every aspect of the effort at a strategic level. In hospitals, cross-leading involves integrating the clinical work of different specialty and functional units. By aligning their assets and efforts, metaleaders imagine and activate more than what a single organizational unit can see or do alone [9].

Finally, this research explains one indicator for measuring metaleadership, namely Knowledge Management. Leaders refer to individuals who have certain authority. Meta-leadership does not only apply to subordinates. Knowledge management involves making decisions that not everyone may agree with. Each individual has a different view in dealing with a crisis, influenced by the individual's experiences and perceptions. Meta-leadership is a combination of applied psychology, neuro-science, and management, with a focus on the individual.

Leaders must be able to manage information from both internal and external sources, be able to adapt and communicate to all parties. They anticipate and manage unexpected problems and develop solutions before they occur. In addition, he was a skilled negotiator and consistently succeeded in gaining the consent of those he

served. In extreme environments, policymakers must somehow establish a sense of normality and encourage collective learning from crisis experiences [18].

However, this research has several limitations. As part of the study of the conceptual model of meta-leadership in hospitals, the informants and resource persons such as hospital directors, hospital practitioners and academics who were involved only came from Indonesia.

The capacity of a metaleadership can be determined specifically based on the context of disruption faced by hospital businesses in Indonesia. Indicators for metaleadership measurement instruments in the context of hospital business in the era of disruption will be more interesting if informants and resource persons involve collaborators from a global perspective to obtain more specific indicators.

Besides that, this research has not explored which indicators contribute significantly to the measurement of metaleadership. Therefore, future research needs to explore the influence of each indicator on the metaleadership measurement model in hospital managers and how each indicator correlates.

5. CONCLUSION

This research discusses the indicators and criteria for meta-leadership measurement instruments in hospital managers which focuses on the capacity that a leader must have in facing an era of disruption in the hospital business. The indicators of the metaleadership measurement instrument in hospital managers are more about the ability of a leader than the ability of a person seen from the aspects of Self Awareness, Self Management ability and Resonant Authenticity Leadership. From the Situation aspect, it can be seen from Situational Awareness abilities, the ability to negotiate and resolve conflicts that occur, complex city management abilities and knowledge about decision making.

In the context of establishing connectivity with both internal and external parties in the hospital, namely the ability to manage risk management, the ability to make strategic decisions and knowledge management, namely managing information from both internal and external sources, being able to adapt and communicate to all parties. They anticipate and manage unexpected problems and develop solutions before they occur.

This indicator is the ability of a leader in the metaleadership model developed by experts in Indonesia in the perspective of a hospital context in Makassar, South Sulawesi. This research provides knowledge about how the Metaleadership framework model can be operationalized in hospitals and can be used for self-assessment for hospitals in determining the capacity of someone who is worthy of being a hospital manager.

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