

The Relationship between Transparent Leadership and Organizational Fidelity among Nursing Personnel at Al-Arish General Hospital

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Abstract

Background: Transparent leadership is one of the key ways to manage change in an organization. That will help nurses in building trust with health team members, promote creativity and loyalty. Organizational fidelity is the extent to which delivery of an intervention adheres to the protocol or program model originally developed. **Aim:** This study aimed to explore the relationship between transparent leadership and organizational fidelity. **Design:** A descriptive correlative research design was used in this study. **Setting:** The study was conducted at Al-Arish General Hospital. **Subject:** All available of nursing personnel was included (N=200). **Tools:** Two tools were used in collecting data for the current study as transparent leadership questionnaire and organizational fidelity questionnaire. **Results:** More than two-thirds of nursing personnel perceived a high level of transparent leadership and about three-quarters of them perceived a high level of organizational fidelity. **Conclusion:** There was a positive statistically significant correlation between transparent leadership and organizational fidelity among nursing personnel. **Recommendation:** Encourage continuous professional development and training programs focusing on transparent leadership skills and organizational fidelity. Replicate the study on large sample size and on governmental and private healthcare settings to explore the long-term effects of transparent leadership on organizational fidelity.

Keywords: Nursing personnel, Organizational fidelity, Transparent leadership.

1-Introduction

Leadership is the ability of an individual or a group of individuals to influence and guide followers or other members of an organization. The impact of effective leadership on health care improve job satisfaction, burnout job performance, well-being of healthcare professionals, reducing complexity and ensuring that the organization runs smoothly here and now. A leader's style is shaped by a variety of factors, including personality, values, skills, and experiences, and can have a significant impact on the effectiveness of their leadership (Eleni, 2020).

Transparent leadership means leading with transparency, openness and honesty. These leaders keep their team in the loop and share information freely. The leaders assert their influence through openness and transparency leading to follower's identification with the leader, to leader's idealized influence, and inspirational motivation. Transparency results in the development of transparent relationships that are characterized by a high level of trust among the participating parties (Regors, 2021).

Transparent leadership in nursing encompasses essential dimensions such as open communication, accountability, team involvement, humility, and a commitment to continuous improvement. Effective communication ensures that staff are well-informed and aligned with organizational goals, fostering trust and preventing misunderstandings (Osei-Kissi et al., 2023).

As well as Accountability both from leaders and staff, promotes a culture of mutual respect and reliability. Involving team members in decision-making processes not only values their input but also accelerates team cohesion and problem-solving. Leaders demonstrating humility and vulnerability strengthen their relationships with staff, who appreciate honesty and are more likely to support transparent leaders. Ultimately, these dimensions contribute to higher

levels of performance and better patient outcomes by creating an engaging and inclusive work environment (*Hadziahmetovic & Salihovic, 2022*).

Transparent leaders play an essential role in building a climate environment conducive to fruitful work, as transparent leaders reach the appropriate level of trust between them and the employees, which contributes to improving the decision-making process and job satisfaction. Transparent leaders' impact on team performance through behavioral components of intellectual stimulation and individualized consideration without comes of shared vision and team commitment (*Krejci, 2021*).

Fidelity in work means doing it in the most beautiful way, mastering it, and accomplishing it without defect or mistake, while adhering to the rules and conditions of work without restriction or condition, and in a way that meets the ambitions and interests of management. Being aware of this, fidelity is one-sided, meaning that it comes from the person's heart and desire, without expecting a reward for his work (*Wessel, 2020*).

Fidelity is a multidimensional construct with perceived trustworthiness and cooperative behaviors. Fidelity creates affective climate of a team, increased identification with the other members of a team and leads to collective identity through a process of second-order learning and incorporation of individual psyche into a team identity (*Caslor, 2019*).

Dimensions of organizational fidelity include organizational commitment, job conditions, personal benefits that emphasizing personal responsibility, the pursuit of goals, the power of teamwork, forward-thinking, and genuine conduct. Also, Service element, location, career and status that increasing job satisfaction, improving work condition and promoting positive climate between nursing personnel in the work environment ((*Bond et al., 2020*).

The transparent leadership has significant impact on fidelity of employees to organization as the transparent leadership develop social collective attitudes toward work and construct team trust. In addition, the leaders relational transparent had a direct effect on the employees' fidelity and trust fullness. Also any organization without transparent leadership had no trust and innovation environment trust is a crucial for a healthy psychological contract that need supportive leader and transparency increate their satisfaction which related to employee commitment (*Hemberg & Salmela, 2021*).

II. Significance of Study

Transparent leadership and organization fidelity are important in health care because of increasing productivity, trust in the organization, increasing nursing performance and motivation among nursing personnel. Nationally there is study about let's be clear": Exploring the role of transparency within the organization by **Salazar (2017)** who revealed that, there was a positive and strong correlation between transparent leadership dimensions within the organization. Additionally, the participants had 86 %of knowledge regarding transparent leadership.

Transparent leadership is very important and has good relationship with organizational fidelity as transparency fosters trust, open communication, increase relationship between employees and their employers. In addition, transparent leadership help organization in achieving their goals effective and efficient which had positive effect on employee's fidelity (*Krejci, 2021*). So it necessity to explore the relationship between transparent leadership and organizational fidelity among nursing personnel.

Additionally, internationally, the study of (Leader's Relational Transparency and Team-level Trust and Distrust) by **Krejci, (2021)**, who revealed that, transparent leadership and organizational fidelity are strongly linked. So, it's essential to assess the relationship between intelligent leadership, organizational culture and workplace innovation among nursing personnel.

III. Aim of the Study

The aim of this study was to explore the relationship between transparent leadership and organizational fidelity among nursing personnel through the following objective:

- 1- Assess transparent leadership as perceived by nursing personnel at the study setting.
- 2- Determine organizational fidelity among nursing personnel at the study setting.
- 3- Find out the relationship between transparent leadership and organizational fidelity among nursing personnel at the study setting.

Research Questions:

The research question of current study was formulated as: is there a relationship between transparent leadership and organizational fidelity among nursing personnel?

IV. Subjects and Methods

Research design:

A descriptive correlational research design was used in this study.

Sample :

Convenient sample was used in this study.

Setting:

The study was conducted at AL-Arish Hospital which located at North-Sinai- Government in Egypt.

Subjects:

The study subjects included all available of nursing personnel (n=200) in AL-Arish Hospital setting and agreed to participate in the study during the time of data collection from July 2023 to the end of September 2023.

Tools of data collection:

Two tools were used for collecting data of this study as the following:

First Tool: Transparent Leadership Questionnaire: It was adapted from (*Salazar, 2017*) and modified by the researcher. Also, this tool was consisted of two parts as the following.

Part 1: Personal characteristics data: This part was used to assess the personnel data of nursing personnel which included (age, gender, educational level in nursing, experience years, working unit, job title and marital status).

Part 2: Transparent leadership questionnaire: This part was used to assess transparent leadership as perceived by nursing personnel which consisted of seven dimension with 33 item as innovation = 4, decision making = 9, loyalty = 7, accountability = 3, problem solving = 3, communications = 4 and feedback = 3.

Scoring system:

Transparent leadership questionnaire consisted of (33 items (with a total grade (99). It was collected by using 3-point Likert scale as one for disagree, two for neutral, three for agree According to *Ali, (2021)*. Nursing personnel represented were calculated in the scoring system and classified and counted in to percentage as the following:

- **Low perception level:** if the total score was less than 60%, it means less than 60 points.
- **Moderate perception level:** if the total score was equal or more 60% to less than 75%, it means less than $\geq 60 < 75$ point.
- **High perception level:** if the total score was equal or more 75%, it means equal or more than 75 points
- **Second Tool: Organizational Fidelity Questionnaire:**
- It was be adapted from (*Vienna, 2019*) and modified by the researcher to assess organizational fidelity among nursing personnel. It consisted of six dimension with 34 item as Commitment to managers=6, Job conditions=10, Personal benefits 8, Service element=3, location=2, Career and status=5.
- **Scoring system:**

Organizational fidelity questionnaire consisted of 34 items (with a total grade (102). It was collected by using a 3-point Likert scale as one for disagree, two for neutral, three for agree According to *Farghaly et al., (2019)* nursing personnel represented were calculated in the scoring system and classified and counted in to percentage as the following:

- **Low level:** if the total score was less than 60%, it means less than 62 points.
- **Moderate level:** if the total score was equal or more 60% to less than 75%, it means less than $\geq 62 < 77$ point.
- **High level:** if the total score was equal or more 75%, it means equal or more than 77 points.

Validity of the study:

The study tools were translated into Arabic and tested for face and content validity by a panel group of three experts specialized in nursing administration from three universities namely: Ain Shams University, Modern University for Technology and information and Mansoura University to judge their calamity, relevant and accuracy through an opinionnaire sheet. Minor modifications were done based on jury opinions regarding tools format and layout.

Reliability of the study tools:

The study was tested for their reliability by using Cronbach's alpha coefficient determine the extent to which the questionnaire items were related to each other. The study tools were subjected to assessment of internal consistency reliability by using spearman- Brown Prophecy formula ($r1=2(3)/1r$), were ($r1$) estimated reliability of the entire test and (R) estimated correlation coefficient compared an the split halves. Test of reliability of transparent leadership questionnaire as perceived by nursing personnel showed (0,947)..Also, Test of reliability of the organizational fidelity questionnaire as perceived by nursing personnel showed (0,924).

Ethical considerations:

Prior study conduction, an approval obtained from the Scientific Research Ethics Committee at faculty of nursing-Helwan University, in addition, an approval was obtained from the director of Al-Arish Hospital either medical or nursing for data collection. Participation in the study was voluntary and given complete full information about the study and their role before signing the informed consent. Nursing personnel were assured that anonymity and confidentiality of their information would be guaranteed. The ethical considerations included an explanation about the purpose and nature of the study, stating the possibility to withdraw at any time. Ethics, values, culture and beliefs was respected.

Pilot study:

A pilot study was conducted on 10% of total sample size of nursing personnel ($n= 20$). The aim of the pilot study was to confirm clarity, applicability of the tools and to estimate the time required for fulfilling the questionnaire sheets as the following: the first tool was ranged between (10 -15minutes) and the second tool was ranged between (5-10minutes) Based on the pilot study, no modifications were done and the final version was prepared for distributing to the nurse personnel. Also, all participants in pilot study were included in the total study sample.

Field work:

The actual field work started at the middle of July 2023 to the end of September 2023. After obtaining all official permissions the researcher met the director of Al-Arish hospital to explain the aim of the study to gain the approval of data collection. The researcher collected data by herself through meeting nursing personnel and explaining the purpose of the study to them in the study setting. The time needed by nursing personnel to complete both of the study tools wee ranged between (15-25) minutes as the first tool. The researcher checked the completeness of each filled sheet after the nurse personnel completed it to ensure the absence of any missing data.

Statistical analysis

Data entry and analysis were performed using SPSS statistical package version 26. Categorical variables were expressed as number and percentage while continuous variables were expressed as (mean \pm SD). Chi-Square (χ^2) in one sample used to compare differences between levels of transparent leadership and organizational fidelity among the studied nursing personnel. ANOVA test was used to compare mean in normally distributed quantitative variables at more than two groups.

Results

Table (1): Frequency distribution of personal characteristic among the studied nursing personnel (n= 200)

| Items | | No | % |
|----------------------------|--|---------------------|-------------|
| Age (year) | 20 < 30 Yrs. | 126 | 63.0 |
| | 30 < 40 Yrs. | 50 | 25.0 |
| | 40 < 50 Yrs. | 20 | 10.0 |
| | ≥ 50 Yrs. | 4 | 2.0 |
| | Mean ± SD | 31.05 ± 6.46 | |
| Experience years | 1 < 3 Yrs. | 101 | 50.5 |
| | 3 < 5 Yrs. | 54 | 27.0 |
| | ≥ 5 Yrs. | 45 | 22.5 |
| | Mean ± SD | 7.90 ± 6.67 | |
| Education Level in nursing | Nursing Diploma | 53 | 26.5 |
| | Technical Nursing Institute | 107 | 53.5 |
| | Bachelor's degree | 35 | 17.5 |
| | Post-graduates. | 5 | 2.5 |
| Working Unit | In- patient | 58 | 29.0 |
| | Out-patient | 23 | 11.5 |
| | Dialysis | 6 | 3.0 |
| | Critical Care Units(ICU, CCU,NICU, PICU) | 74 | 37.0 |
| | ER | 39 | 19.5 |
| Marital status | Single | 67 | 33.5 |
| | Married | 127 | 63.5 |
| | Widower | 4 | 2.0 |
| | Divorce | 2 | 1.0 |

Table (1) shows that, more than two-thirds (63%) of the age of the studied the nursing personnel was ranged 20 < 30 years old, with a mean age of 31.05 ± 6.46. Additionally, about half (50.5%) of them had experience lasting from one to less than three with a total mean of 7.90 ± 6.67. Moreover, more than half (53.5%) and more than two-thirds (63.5%) were holding a certificate of a Technical Institute of nursing, were married. Additionally, more than one third (37%) were working in Critical Care Units while the minority (3%) were working in dialysis department.

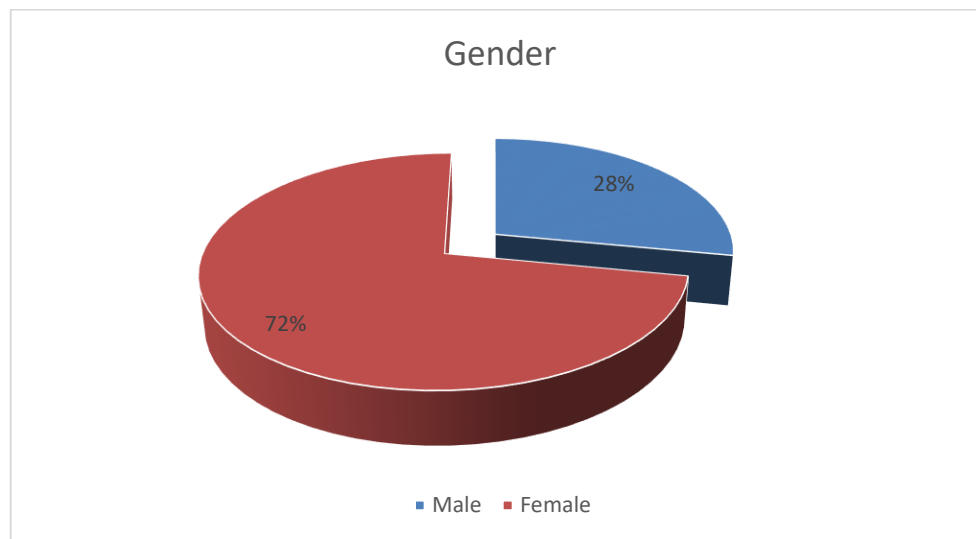


Figure (1): Frequency distribution of gender among the studied nursing personnel (n= 200)

Figure (1) illustrates that, more than two-thirds (72%) of the studied nursing personnel were female while more than one quarter (28%) of them were a male with a male to female ratio is 0.4: 1.

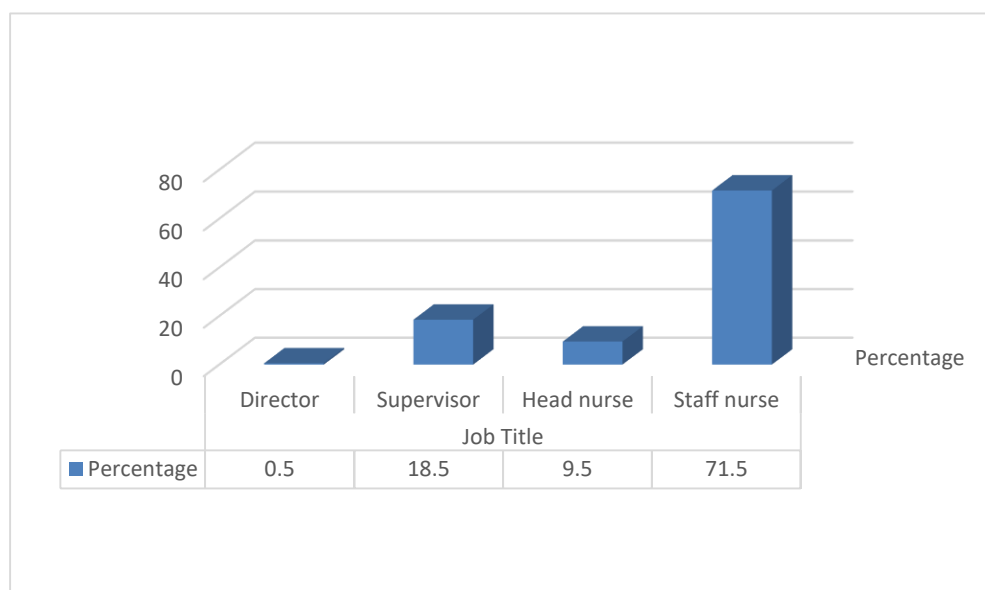


Figure (2): Frequency distribution of job title among the studied nursing personnel (n= 200)

Figure (2) shows that, more than two-thirds (71.5%) of the studied nursing personnel were staff nurses while the minority (9,5,0,5) of there were head nurse and director, respectively.

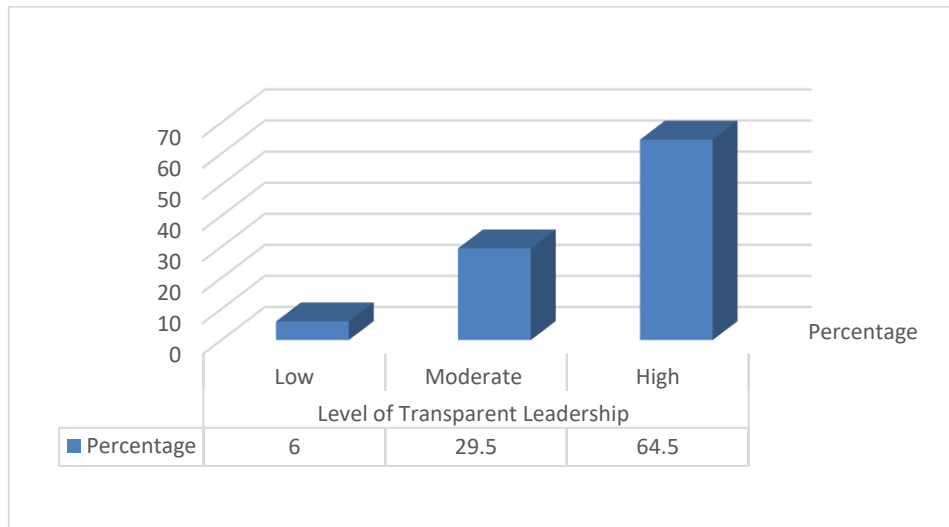


Figure (3): Frequency distribution of transparent leadership among the studied nursing personnel (n= 200)

Figure (3) illustrates that, more than two-thirds (64.5%) of the studied nursing personnel perceived a high level of transparent leadership, followed by about one-third (29.5%) of them had a moderate level. While the minority (6%) of the studied nursing personnel perceived have a low level. In addition to the presence of a highly statistically significant difference between levels of transparent leadership, at $P = 0.000$.

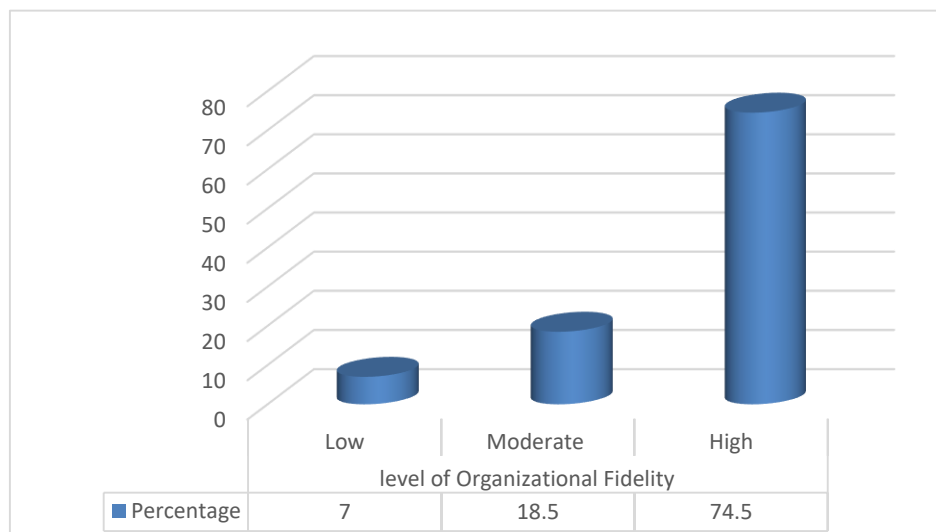


Figure (4): Frequency distribution of organizational fidelity among the studied nursing personnel (n= 200)

Figure (4) clarifies that, about three-quarters (74.5%) of the studied nursing personnel perceived a high level of organizational fidelity, followed by about one-fifth (18.5%) of them had a moderate level. While the minority (7%) of the studied nursing personnel perceived have a low level of organizational fidelity. In addition to the presence of a highly statistically significant difference between levels of organizational fidelity, at $P = 0.000$.

Table (2) :Crosstab association between total level of transparent leadership among the studied nursing personnel (n= 200)

| Personal characteristic | | No. | Low | | Moderate | | High | | χ^2 | P-Value |
|--------------------------------|--------------------|-----|-----|-----|----------|------|------|------|----------|---------|
| | | | 12 | 6.0 | 59 | 29.5 | 129 | 64.5 | | |
| | | | N | % | N | % | N | % | | |
| Gender | Male | 56 | 3 | 1.5 | 4 | 2.0 | 49 | 24.5 | 19.6 | 0.000** |
| | female | 144 | 9 | 4.5 | 55 | 27.5 | 80 | 40.0 | | |
| Age (year) | 20 < 30 | 126 | 10 | 5.0 | 54 | 27.0 | 62 | 31.0 | 38.1 | 0.000** |
| | 30 < 40 | 50 | 0 | 0.0 | 3 | 1.5 | 47 | 23.5 | | |
| | 40 < 50 | 20 | 2 | 1.0 | 2 | 1.0 | 16 | 8.0 | | |
| | ≥ 50 | 4 | 0 | 0.0 | 0 | 0.0 | 4 | 2.0 | | |
| Years of Experience in nursing | 1 < 3 Yrs. | 101 | 5 | 2.5 | 47 | 23.5 | 49 | 24.5 | 31.0 | 0.000** |
| | 3 < 5 Yrs. | 54 | 2 | 1.0 | 8 | 4.0 | 44 | 22.0 | | |
| | ≥ 5 Yrs. | 45 | 5 | 2.5 | 4 | 2.0 | 36 | 18.0 | | |
| Qualification | Diploma | 53 | 7 | 3.5 | 38 | 19.0 | 8 | 4.0 | 78.1 | 0.000** |
| | Technical | 107 | 3 | 1.5 | 16 | 8.0 | 88 | 44.0 | | |
| | Bachelor | 35 | 2 | 1.0 | 5 | 2.5 | 28 | 14.0 | | |
| | Post-graduates. | 5 | 0 | 0.0 | 0 | 0.0 | 5 | 2.5 | | |
| Job title | Staff Nurse | 143 | 10 | 5.0 | 53 | 26.5 | 80 | 40.0 | 21.0 | 0.002** |
| | Head Nurse | 19 | 2 | 1.0 | 4 | 2.0 | 13 | 6.5 | | |
| | Supervisor | 37 | 0 | 0.0 | 2 | 1.0 | 35 | 17.5 | | |
| | Director | 1 | 0 | 0.0 | 0 | 0.0 | 1 | 0.5 | | |
| Department | In- patient | 58 | 3 | 1.5 | 17 | 8.5 | 38 | 19.0 | 25.3 | 0.001 |
| | Out-patient | 23 | 6 | 3.0 | 7 | 3.5 | 10 | 5.0 | | |
| | Dialysis | 6 | 0 | 0.0 | 0 | 0.0 | 6 | 3.0 | | |
| | Critical Care Unit | 74 | 1 | 0.5 | 20 | 10.0 | 53 | 26.5 | | |
| | ER | 39 | 2 | 1.0 | 15 | 7.5 | 22 | 11.0 | | |
| Marital status | Single | 67 | 2 | 1.0 | 18 | 9.0 | 47 | 23.5 | 5.38 | 0.495 |
| | Married | 127 | 10 | 5.0 | 40 | 20.0 | 77 | 38.5 | | |
| | Widower | 4 | 0 | 0.0 | 0 | 0.0 | 4 | 2.0 | | |
| | Divorce | 2 | 0 | 0.0 | 1 | 0.5 | 1 | 0.5 | | |

*Significant $p < 0.05$ **Highly significant $p < 0.01$

Table (2): represents that, there was a highly statistically significant relation between personal data (gender, age, years of experience in nursing, qualification, job title, department) and total level of transparent leadership among the studied nursing personnel, at $P = \leq 0.01$.

Table (3): Crosstab association between total level of organizational fidelity among the studied nursing personnel (n= 200)

| Personal characteristic | | No. | Low | | Moderate | | High | | χ^2 | P-Value |
|--------------------------------|--------------------|-----|-----|-----|----------|------|------|------|----------|---------|
| | | | 14 | 7.0 | 37 | 18.5 | 149 | 74.5 | | |
| | | | N | % | N | % | N | % | | |
| Gender | Male | 56 | 3 | 1.5 | 2 | 1.0 | 51 | 25.5 | 12.5 | 0.002** |
| | Female | 144 | 11 | 5.5 | 35 | 17.5 | 98 | 49.0 | | |
| Age (year) | 20 < 30 | 126 | 12 | 6.0 | 35 | 17.5 | 79 | 39.5 | 27.8 | 0.000** |
| | 30 < 40 | 50 | 0 | 0.0 | 1 | 0.5 | 49 | 24.5 | | |
| | 40 < 50 | 20 | 2 | 1.0 | 1 | 0.5 | 17 | 8.5 | | |
| | ≥ 50 | 4 | 0 | 0.0 | 0 | 0.0 | 4 | 2.0 | | |
| Years of Experience in nursing | 1 < 3 Yrs. | 101 | 6 | 3.0 | 33 | 16.5 | 62 | 31.0 | 30.0 | 0.000** |
| | 3 < 5 Yrs. | 54 | 3 | 1.5 | 0 | 0.0 | 51 | 25.5 | | |
| | ≥ 5 Yrs. | 45 | 5 | 1.5 | 4 | 2.0 | 36 | 18.0 | | |
| Qualification | Diploma | 53 | 8 | 4.0 | 32 | 16.0 | 13 | 6.5 | 100 | 0.000** |
| | Technical | 107 | 3 | 1.5 | 4 | 2.0 | 100 | 50.0 | | |
| | Bachelor | 35 | 3 | 1.5 | 1 | 0.5 | 31 | 15.5 | | |
| | Post-graduates. | 5 | 0 | 0.0 | 0 | 0.0 | 5 | 2.5 | | |
| Job title | Staff Nurse | 143 | 10 | 5.0 | 35 | 17.5 | 98 | 49.0 | 13.8 | 0.032** |
| | Head Nurse | 19 | 2 | 1.0 | 2 | 1.0 | 15 | 7.5 | | |
| | Supervisor | 37 | 2 | 1.0 | 0 | 0.0 | 35 | 17.5 | | |
| | Director | 1 | 0 | 0.0 | 0 | 0.0 | 1 | 0.5 | | |
| Department | In- patient | 58 | 3 | 1.5 | 11 | 5.5 | 44 | 22.0 | 42.0 | 0.000** |
| | Out-patient | 23 | 8 | 4.0 | 4 | 2.0 | 11 | 5.5 | | |
| | Dialysis | 6 | 0 | 0.0 | 0 | 0.0 | 6 | 3.0 | | |
| | Critical Care Unit | 74 | 1 | 0.5 | 9 | 4.5 | 64 | 32.0 | | |
| | ER | 39 | 2 | 1.0 | 13 | 6.5 | 24 | 12.0 | | |
| Marital status | Single | 67 | 2 | 1.0 | 9 | 4.5 | 56 | 28.0 | 8.03 | 0.236 |
| | Married | 127 | 12 | 6.0 | 27 | 13.5 | 88 | 44.0 | | |
| | Widower | 4 | 0 | 0.0 | 0 | 0.0 | 4 | 2.0 | | |
| | Divorce | 2 | 0 | 0.0 | 1 | 0.5 | 1 | 0.5 | | |

*Significant $p < 0.05$ **Highly significant $p < 0.01$

Table (3): indicates that, there was a highly statistically significant relation between personal data (gender, age, years of experience in nursing, qualification, job title, department) and total level of organizational fidelity among the studied nursing personnel, at $P = \leq 0.05$.

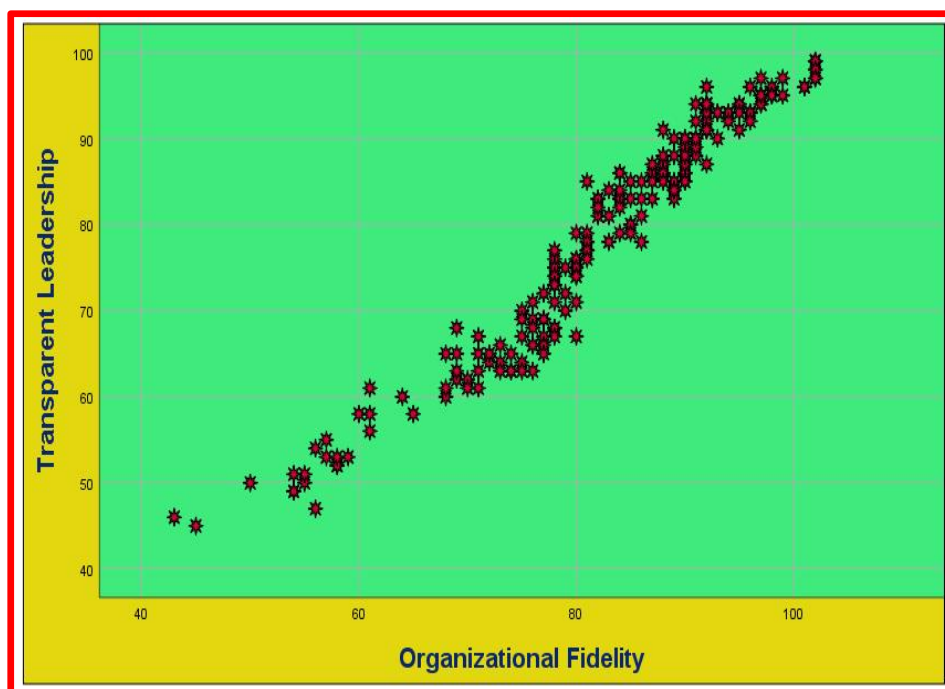


Figure (5):Linear regression between transparent leadership and dimensions of organizational fidelity among the studied nursing personnel (n= 200)

Figure (5): clarifies that, there was a highly statistically significant positive strong correlation between transparent leadership and organizational fidelity among the studied nursing personnel, at $r = 0.972$ & $P = 0.000$.

X. Discussion

Transparent leadership is leading with transparency, openness and honesty. These leaders keep their team in the loop and share information freely. The leaders assert their influence through openness and transparency leading to follower's identification with the leader, to leader's idealized influence, and inspirational motivation. Transparency results in the development of transparent relationships that are characterized by a high level of trust among the participating parties (Regors,2021).

Fidelity is the quality of being faithful or loyal and the quality of intervention delivery. Fidelity creates affective climate of a team and plays a fundamental role in the increasingly complex modern world as a powerful form of complexity reduction. Fidelity is critical for the emergence of synergistic processes in teams, which are based on affective identification of desires and intentions of others (Krejci, 2021).

The aim of this study was to explore the relationship between transparent leadership and organizational fidelity among nursing personnel through the following objective: asses transparent leadership as perceived by nursing personnel, determine organizational fidelity among nursing personnel and explore the relationship between transparent leadership and organizational fidelity among nursing personnel., Furthermore, the research question of current study was formulated as "is there a relationship between transparent leadership and organizational fidelity among nursing personnel?". The study was conducted at AL-Arish Hospital which located at North-Sinai- Government in Egypt and used a descriptive correlational sample.

Regarding the personal data, the current study results were revealed that, the majority of nursing personnel, age was ranged between (20< 30) years old. From the research point of view, this results could be due to the place is far

away and because the place does not contain universities and there is no interest from the people and tribes. Also, nurses in hospitals are recent graduated with only a few years of experience. Typically, as nurses gain more experience, they move into higher positions, such as head nurse or supervisors. The current study results were consistent with the study by *Abd-El hady & ElGazar, (2023)* who conduct the study in Egypt entitled "The relationship between the authentic leadership and the nurses' innovative behavior in healthcare organizations" and who found that, the majority of studied nurses in Egypt in the age group was <30 years. Furthermore, the results of the present study were reported that, more than two-thirds of the studied nursing personnel were female. From the researcher's point of view this results could be due to historical, cultural, and societal factors. Nursing has traditionally been viewed as a female-dominated profession due to historical roles of women as caregivers.

The current study results were in the same line with the study by *Shibl et al., (2023)*, who conduct the study in Egypt entitled "The Relationship between Head nurses' Authentic Leadership and Nurses' Resilience" and who declared that, the majority of study subject were females. The current study results were disagree with the study by *Osei-Kissi et al., (2023)*, who conduct the study in USA entitled "The relationship between leadership transparency and accountability on public rural basic education in amenfi central district, western region of Ghana" and who found that, the majority of sample was males.

Concerning job title of studied nursing personnel, the result of present study was stated that, more than two-thirds of the studied nursing personnel were staff nurses, while, the minority of them were head nurse. The current study findings might be related to nursing staff is the one who serves the patient and hospital need a nurse for every patient and This normally due to there would be more stuff nurses at unite and just one head nurse and for more than one unite there is just one supervisor. The current study were in the same line with the study by *Danito et al., (2023)* who conduct the study in Indonesia entitled "The effect of authentic leadership and transparent organizational communication on employee welfare with mediation variables of employee trust in medium companies" and who demonstrated that, the majority of the studied participants were staff nurse. On the other hand, the present study results were in disagreement with the study by *Mostafa & Abdallah, (2023)* who conducted the study in Egypt entitled "Effect of Educational Program about Authentic Leadership for Head Nurses on Staff Nurses' Resilience and Innovation Behavior" and who showed that, the majority of the study subjects were head nurse.

Regarding working department, results of the present study were indicated that, more-than two-fifths of the studied nursing personnel were working at critical care unites. From the researcher's point of view this might be due to critical care unites occupies the largest space in the hospital comparing with others departments. Therefore, most of the nurses are appointed at critical care unites, so the largest number of nursing staff is in critical care unites. The current study results were matched with the study by *Elnaggar et al., (2024)* who conducted the study in Egypt entitled "The Relation between Authentic Leadership and Occupational Burnout among Nurses" and who reported that, the majority of the study subjects were working in critical care unites. On the other hand, The study results were in opposite line with the study by *Mostafa & Abdallah, (2023)*, who conducted the study in Egypt entitled "Effect of Educational Program about Head nurses Authentic Leadership Style on Staff Nurses Empowerment and Motivation" and who revealed that, the majority of study subject were worked at in patient department.

The present study results were illustrated that, the majority of the studied nursing personnel had a high perception level of transparent leadership. From the researcher's point of view, this results could be due to the nursing administration is clear, honest and open with nursing and knows nursing's rights and duties and imposes punishment when it makes a mistake.

The present study results were illustrated that, the majority of the studied nursing personnel had a high perception level of transparent leadership. From the researcher's point of view, this results could be due to the nursing administration is clear, honest and open with nursing and knows nursing's rights and duties and imposes punishment when it makes a mistake. The present study findings were harmony with the study by *Emmel et al., (2020)*, who conduct the study in Germany entitled "The influence of transparency in leadership styles on work performance and satisfaction in a digital collaborative environment" and who found that, the majority of the study subjects had a high level of transparent

leadership. On the other hand, the current study results were in contrast with the study by *Siddiqui et al., (2020)* who conducted the study in Pakistan entitled "Authentic Leadership and Openness to Change in Pakistani Service Industry: The Mediating Role of Trust and Transparent Communication" and who revealed that, the majority of participants had a weak level of transparent leadership.

The present study results were illustrated that, about three-quarters of the studied nursing personnel perceived a high level of organizational fidelity. From the researcher's point of view this result could be related to the nurses working and spend long time on hospital with high level of job satisfaction. Also, the hospital encourages the employee for creativity and rewards them. Further, the hospital provides all healthcare advisors with a calm working environment. The current study results were matched with the study by *Berro et al., (2022)* who conducted the study in New York entitled "Exploring the relationships of realism, engagement, and competency in undergraduate high-fidelity nursing simulation" and who reported that majority of nursing personnel having a high level of organizational fidelity. On the other hand, the current study findings were in contrast with the study carried out by *Zaki, & Abd El-Monem (2023)* who conducted the study in Egypt entitled "Organizational Cynicism and Work Alienation among Nurses and Its Relation to Organizational Loyalty" and who revealed the minority of nursing personnel having a high level of organizational fidelity.

Regarding the relation between transparent leadership and organizational fidelity among nursing personnel, the current study illustrated that highly statistically significant positive strong correlation between transparent leadership and organizational fidelity among the studied nursing personnel. From the researcher's point of view this result could be related to transparent leadership encourages open communication, honesty in information, and cooperation among nursing personnel, which reflects positively on the hospital and enhances organizational fidelity. This study goes in line with the study by *Assi., (2024)* and who conducted the study in Egypt entitled "Nurse Managers' Authentic Leadership and their Relationship with Work Engagement among Registered Nurses." And found statistically significant positive correlation between authentic leadership and work engagement.

On the other hand, the current study results were in contrast with the study by *Siddiqui et al., (2020)*, who conducted the study at University of Karachi in Pakistan entitled "Authentic Leadership and Openness to Change in Pakistani Service Industry: The Mediating Role of Trust and Transparent Communication" and who revealed that, there was a highly statistically significant negative correlation between dimensions of transparent leadership and organizational fidelity.

The present study results were revealed that, there was a highly statistically significant relation between personal data (gender, age, years of experience in nursing, qualification, job title, department) and total level of transparent leadership among the studied nursing personnel. From the researcher's point of view this result could be related to when the nursing personnel had appropriate experience, had appropriate qualification and had good job title and worked in appropriate department that leading to creating transparent leadership.

The current study results were in harmony with the study by *Guan & Zhang, (2022)*, who conducted the study in China entitled "Authentic leadership and innovation behaviour among nurses in China" and who revealed that, there was a highly statistically significant relation between personal data (gender, age, years of experience in nursing, qualification, job title, department) and total level of transparent leadership among the studied nursing personnel. And the current study results were in the same line with the study by *Shibl et al., (2023)*, who conducted the study in Egypt entitled "The Relationship between Head nurses' Authentic Leadership and Nurses' Resilience" and who declared that, there was a low statistically significant relation between personal data and total level of transparent leadership among the studied nursing personnel.

The present study results were revealed that, there was a highly statistically significant relation between personal data (gender, age, years of experience in nursing, qualification, job title, department) and total level of organizational fidelity among the studied nursing personnel. This result could be related to nursing personnel was qualified, more caregiver and worked by all energy in department of work and had sufficient energy that contribute to increasing level of organizational fidelity. The current study results were in agreement with the study by *Ibrahim & abo Habieb, (2020)* who conducted in Egypt

associations between nursing work environment, patient safety culture, and missed nursing care among staff nurses" and who revealed that, there was a highly statistically significant relation between personal data and total level of organizational fidelity among the studied nursing personnel.

Regarding the relation between transparent leadership and organizational fidelity among nursing personnel, the current study illustrated that highly statistically significant positive strong correlation between transparent leadership and organizational fidelity among the studied nursing personnel. From the researcher's point of view this results could be related to transparent leadership encourages open communication, honesty in information, and cooperation among nursing personnel, which reflects positively on the hospital and enhances organizational fidelity. This study goes in line with the study by **Assi, (2024)** and who conduct the study in Egypt entitled "Nurse Managers' Authentic Leadership and their Relationship with Work Engagement among Registered Nurses." And found statistically significant positive correlation between authentic leadership and work engagement.

On the other hand, the current study results were in contrast with the study by **Siddiqui et al., (2020)**, who conduct the study at University of Karachi in Pakistan entitled "Authentic Leadership and Openness to Change in Pakistani Service Industry: The Mediating Role of Trust and Transparent Communication" and who revealed that, there was a highly statistically significant negative correlation between dimensions of transparent leadership and organizational fidelity.

XI. Conclusion

Based on findings of the current study; it can be concluded that, the majority of studied nursing personnel had perceived a high level of the transparent leadership and organizational fidelity. Furthermore, there was a highly statistically significant positive correlation between transparent leadership and organizational fidelity among the studied nursing personnel with P. value (0.000).

XII. Recommendations

Based on the study results, the following recommendations can be given:

At nursing personnel level:

- Encourage continuous professional development and training programs focusing on transparent leadership skills and organizational fidelity.
- Foster a supportive environment that values open communication, collaboration, and innovation among nursing staff.

At the organizational level:

- Implement transparent leadership practices by promoting transparency, empowering staff, and fostering a culture of trust.
- Provide resources and support for implementing innovative solutions and initiatives, such as dedicated time for brainstorming sessions or innovation labs.

At the further research:

- Replicate the study on large sample size and on governmental and private healthcare settings to explore the long-term effects of transparent leadership and organizational fidelity.
- Explore the effect of transparent leadership in service training program on nursing personnel organizational fidelity.
- Investigate the specific transparent leadership behaviors and organizational practice that developing organizational fidelity.

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