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The Role of Ethical Leadership Based Spiritually in Patient Safety Culture: A Systematic Literature Review

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Abstract. Located on wetland area, Banjarmasin residential area is mainly resided on swamp area and riverbank. Rapid growth of residential area development resulted in the decreasing area of wetland. This condition leads to the declining quality of the environment. Another factor that contributes to the environmental deteroriation is inhabitants' behaviour. Subsequently, environmental deteroriation produce negative impact on environmental health of the residential settlements. The objective of this study is to define the impact of the occupants' behaviour and habit ed in this study to describe the relationship between behaviour/habit and environmental health. Field observation is used to collect primary dain using river resources on environmental health of the settlements on Alalak riverbank. Descriptive method is used. This study shows that there is a major impact of bad behaviour/habit in using resources on the river ecology, such as declining water quality. Initially, this leads to decreasing quality of environmental health of the settlement.
Keyword*:* Alalak riverbank, environmental health, housing settlement, occupants' behaviour, urban wetland

1 Introduction

Patient safety and patient safety culture have become the focus of extensive research in recent years; however, most of these studies have been conducted in hospitals (1). The mortality rate due to adverse medical effects is recorded to be 20 times higher among elderly patients (aged 70 and above) compared to younger patients (aged 15–49) (2). Therefore, enhancing efforts to ensure patient safety in healthcare services is crucial, especially for the elderly population. A retrospective medical record review study indicated that more than 70% of adverse events in home care services were actually preventable (3).

Patient safety culture can be defined as "the product of individual and group values, attitudes, perceptions, competencies, and patterns of behavior that determine the commitment to, and the style and proficiency of, an organization's health and safety management" (4). Previous studies have shown that poor patient safety culture is associated with injuries suffered by both nurses and patients (5). In contrast, a strong safety culture is linked to positive patient safety outcomes, such as increased patient satisfaction (6) and a reduction in adverse (7). To deepen our understanding of how to improve patient safety culture, further research is needed on the influencing factors.

Leadership plays an important role in shaping the patient safety culture within healthcare organizations (8). Managers are key in balancing work demands and resources in the work environment (9). Research shows that leadership style positively influences nurses' job satisfaction, work engagement, and psychosocial work environment, which in turn can reduce the incidence of adverse events in clinical practice (10). Adopting appropriate leadership styles can reduce factors associated with nurse burnout (11). This may prevent nurses from leaving their jobs and can improve staff well-being and the quality of care. The American Institute of Medicine recommends that leaders adopt a transformational leadership style to create optimal working conditions for nurses, which is essential to preventing accidents and enhancing patient safety (12).

The concept of spiritually-based ethical leadership is used in this study to examine the role of management in patient safety culture. Ethical leadership is defined as a model of ethical behavior that "becomes a target of identification and emulation for followers by engaging in normatively appropriate behavior (being open and honest); motivated by altruism (treating people fairly and with care); and communicating ethics-related messages" (13). The phenomenon of spiritually-based ethical leadership in hospitals shows that spiritual values and religious ethics contribute to organizational culture, employee performance, and healthcare services. The spiritual-based leadership (SBL) model, as developed by Bhakti, emphasizes self-awareness, ethical behavior, altruism, and collaboration (14). Kolomboy's study indicates that transformational leadership based on spirituality can enhance both organizational culture and patient safety culture in hospitals (15). Therefore, this study aims to answer the research question: "What are the topic trends in the literature on the role of spiritually-based ethical leadership in patient safety culture?".

2 Methods

The method used in this Systematic Literature Review (SLR) involved analyzing findings from previous relevant studies. This SLR applied a procedure that began with the development of a research protocol and ended with the presentation of the results (16). The SLR was reported in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, which are designed to enhance transparency and quality in the reporting of systematic reviews and meta-analyses. This SLR was designed to follow a series of systematic stages proposed by Denyer & Tranfield (2009), namely: (1) formulation of the research question to determine the focus and purpose of the review, (2) identification of study sources to locate relevant literature, (3) selection and evaluation of studies to choose appropriate and high-quality research, (4) data analysis and synthesis from selected studies to integrate findings, and (5) comprehensive and transparent reporting of results. This approach ensures that each step in the SLR process is conducted in a structured, transparent, and reproducible manner, making the findings more accurate and reliable in addressing the research question.
According to Kitchenham et al. (2007), an SLR is conducted by following a predefined search strategy. This strategy should allow for a comprehensive search, whose completeness must then be assessed. When conducting an SLR, researchers must aim to identify and report studies that do not support their research hypothesis as well as those that do. Researchers use SLR due to its advantages as a well-defined method, which tends to reduce bias in literature findings. An SLR can provide information about the impact of a phenomenon on empirical methods. If the research results are consistent, the SLR can offer strong evidence. However, if the research results are inconsistent, the sources of variation can be further investigated.

This systematic review focuses on research articles addressing spiritually-based ethical leadership and its relation to patient safety culture. The article search was conducted in April 2025 through the Scopus electronic database using relevant keywords. The following keywords were used: ethic AND "role of manager" OR leadership OR "role of leadership spiritual "AND "role of manager"OR "role of leadership ethical "AND "Patient Safety Culture" OR "Patient Safety".

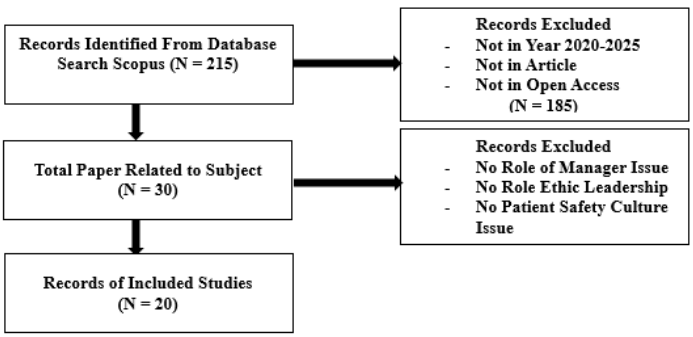

Fig. 1: PRISMA protocol for identification, screening, qualification and reporting of SLRs

Based on the above data, 215 articles were identified from the Scopus database, then selected according to the publication year 2020-2025, resulting in 185 articles. After screening according to their qualifications in line with the topic, 30 articles were found, then screened again to remove those that did not meet the criteria, resulting in 20 articles.

Table 1. Systematic Literature Review Search Terms: Inclusion and Exclusion Criteria

	Search Inclusion and Exclusion Criteria
Search words/terms	ethic AND "role of manager" OR leadership OR "role of leadership spiritual" AND "role of manager"OR "role of leadership Ethical"AND "Patient Safety Culture" OR "Patient Safety".
Inclusion Criteria	Publication year (2020-2025) Publication language (English) Document type (Article)
Exclusion Criteria	Abstract with an unavailable full article Language—not English/Translation not available

3 Results And Discussion

A total of 215 articles were identified using the established selection criteria, including search terms as well as inclusion and exclusion criteria. These articles were screened based on publication year, type, and open access status, resulting in the exclusion of 185 articles that did not meet the inclusion criteria. Consequently, 30 articles proceeded to an in-depth eligibility review. During this process, 10 articles were eliminated for not addressing the research context. Finally, 20 articles were selected for bibliometric analysis. The PRISMA flowchart can be seen in Table 2.

Spiritually-based ethical leadership not only serves as a moral example, but also as a strategic mechanism in building a sustainable patient safety culture. In practical terms, hospitals need to develop leadership training that integrates ethical values and spirituality as the basis for strengthening patient safety culture.

Literature Review

Based on the literature review results presented in Table 2, a total of 20 studies published between 2020 and 2025 were included, all of which were written in English. These studies originated from nine different countries and covered various populations. The studies employed cross-sectional and qualitative designs and reported findings related to the managerial role in patient safety culture within their respective study samples.

The research focus varied: 10 studies focused on the role of managers in safety culture within hospital settings (17–25), 2 studies were conducted in healthcare facilities and primary health centers (26,27); 6 studies evaluated the managerial role in safety culture from the perspective of managers or leaders (17–19,26,28,29), while the other 6 studies focused on the perspectives of healthcare workers and staff (20,22–27).

The literature review findings revealed several key roles of managers in enhancing workplace safety culture, including communication (17,18,26,27,29), training and education (17,18,22,24,26,27), collaboration (17,18,23), support (17,18,21,23,27,29), and policy-making (17,18). In addition, the literature also highlighted how spiritually-based ethical leadership can play a significant role in workplace safety culture (30–37).

Table 2. Literature Review

No	Title	Country	Design	Subjects	Key Findings
1	Exploring Spiritual-Based Transformational Leadership Indicators in	Indonesia	Qualitative	12 Hospital informan	3 skills: emotional, spiritual, social

	Palu City Hospital: A Qualitative Study				
2	The role of transformational leadership, job demands and job resources for patient safety culture in Norwegian nursing homes: a cross-sectional study	Norwegia	Cross-sectional	165 nursing home staff	Transformational leadership plays an important role in ensuring patient safety
3	Linking Transformational Leadership, Patient Safety Culture and Work Engagement in Home Care Services	Norwegia	Cross-sectional	139 staf home care	One important indicator of safety culture is transformational leadership.
4	Relationships Between Nurses' Perceptions of Patient Safety Culture and Job Stress, Trust, Identification, and Leadership	Turki	Cross-sectional	150 Nurse	Positive organizational identification and leadership, negative job stress
5	Influence of Nursing Manager's Ethical Leadership Perceived by Nurses in Patient-Engaged Nursing Services: Mediating Effect of Patient Participation Culture	South Korea	Cross-sectional	104 Nurse	Ethical leadership and performance are mediated by patient participation culture.
6	Hospital managers' views on the state of patient safety culture across three regions in Ghana	Ghana	Qualitative	Hospital Manager	Important functions include policy, teamwork, communication, and learning.
7	Perceptions of managerial staff on the patient safety culture at a tertiary hospital in South Africa	Southern Africa	Qualitative	Hospital Manager	The role of managers in promoting a safety culture
8	Perceived patient safety culture and its associated factors among clinical managers of tertiary hospitals: a cross-sectional survey	China	Cross-sectional	Clinic Manager	Managers have an impact on reporting culture and employee compliance.
9	Factors affecting patient safety culture in a university hospital under the universal health insurance system	Jepang	Cross-sectional	Hospital Staff	Safety culture is supported by manager expectations.
10	Perceptions of Patient Safety Among Middle Managers at an Operating Suite	Filipina	Qualitative	Middle Manarer	Workload is a significant obstacle, but SSC and feedback are crucial.
11	The Association of Transformational Leadership on Safety Practices Among Nurses: The Mediating Role of Patient Safety Culture	Arab Saudi	Cross-sectional	Clinical Nusre	Safety procedures are improved via transformational leadership.
12	The Critical Role of Leadership in Patient Safety Culture: A	Taiwan	Cross-sectional	Profesional medis	The function of stress and working conditions in

	Mediation Analysis of Management Influence on Safety Factors				mediating management
13	Patient safety culture awareness among healthcare providers in a tertiary hospital in Riyadh, Saudi Arabia	Arab Saudi	Cross-sectional	Clinical and non-clinical staff	Focus on training, monitoring system, digitalization
14	Assessment of patient safety culture in Moroccan primary health care: a multicentric study	Maroko	Cross-sectional	Primary health care facility	Training in quality management and leadership is crucial.
15	Hospital management priorities and key factors affecting overall perception of patient safety: a cross-sectional study	China	Cross-sectional	medical staff	Focus on non-punitive management & transition process
16	Healthcare Managers' Perception on Patient Safety Culture	Arab Saudi	Cross-sectional	Middle Manager	The manager's role includes communication, resource distribution, and leadership.
17	Exploring the role of managers in the development of a safety culture in seven French healthcare facilities: a qualitative study	French	Qualitative	Health facilities	Direct involvement of managers is crucial
18	Patient Safety Culture and Spiritual Health in the Operating Room: An Iranian Exploratory Qualitative Study	Iran	Qualitative	10 operating room staff	5 themes: training, communication, responsibility, spirituality, logistics
19	Workplace Spirituality, Spiritual Climate and Patient Safety Culture	Poland	Literature	-	Spirituality reduces stress, increases safety
20	Patient Safety Culture and Spiritual Health in the Operating Room: A Qualitative Study	Iran	Qualitative	10 operating room staff	Focus on spirituality and work awareness

Several studies have shown that leadership style—particularly transformational leadership—has a significant influence on patient safety culture. For example, in studies by Seljemo et al. and Ree & Wiig in Norway, transformational leadership was found to be the strongest predictor of patient safety culture (30,38). Its impact was not only statistically significant but also accounted for a large portion of the variance in perceptions of patient safety—up to 47.2% and 53.5% when combined with other factors such as work engagement. Transformational leadership inspires staff to exceed expectations, drives positive change, and creates a work environment that supports safety. Characteristics such as providing a strong vision, offering individual support, and encouraging intellectual stimulation are essential for fostering safe behaviors in healthcare practice. Another study by Tekingündüz et al. also confirmed that leadership significantly contributes to perceptions of patient safety culture, alongside other factors such as organizational identification and work-related stress (32). Good leadership enhances a sense of belonging and trust within the organization, ultimately improving error reporting and the implementation of safety practices.

In the Indonesian context, Kolomboy & Syamsu emphasized the importance of spiritually-based transformational leadership, which includes emotional, spiritual, and social competencies (31). Leaders with high spiritual awareness—such as working based on worship values, empathy, integrity, and social responsibility—are capable of creating a work atmosphere that aligns with patient safety principles. Similarly, Yoon et al. in South Korea demonstrated that ethical leadership by nurse managers directly improved the quality of nursing services involving patient participation,

with participatory culture acting as a significant mediator (34).
Several qualitative studies, such as those by Tenza et al. in Ghana and Abraham et al. in South Africa, highlighted the critical role of hospital managers in shaping the patient safety environment (17,39). This includes facilitating open communication, providing resource support, fostering strong teamwork, and developing standard incident-reporting policies without a blame culture. Managers also serve as a bridge between staff and the system, mediating communication and acting as catalysts in implementing safety policies.
Huang et al. from Taiwan emphasized that staff perceptions of management leadership mediate critical aspects of safety culture, such as team climate and stress management (40). Meanwhile, a study in Saudi Arabia by Hamdan et al. found that patient safety culture mediates the relationship between transformational leadership and safety practices carried out by nurses (41). In other words, the success of patient safety strategies largely depends on how leadership styles are integrated into organizational values and practices.
The study by Kolomboy & Syamsu in Indonesia revealed the concept of spiritual-based transformational leadership, which comprises three dimensions of competencies: emotional, spiritual, and social (31). This leadership style emphasizes not only managerial skills but also spiritual values such as trustworthiness, deep awareness of God, and moral integrity in decision-making. Leaders who fulfill their roles based on spirituality tend to exhibit empathy, concern for patients, and uphold ethical values, directly strengthening patient safety culture.
Similarly, Wiśniewska's study stated that spirituality in the workplace and the spiritual climate within organizations can reduce stress and burnout, increase motivation and work engagement, and foster harmonious relationships among employees (36). Such conditions support the development of a stronger patient safety culture. A spiritually supportive work environment not only meets the emotional and existential needs of staff but also creates a safe space for patients and healthcare workers to build trust and collaborate effectively.
Furthermore, in the study by Yoon et al. in South Korea, ethical leadership from nurse managers was shown to have a direct impact on improving the quality of nursing care based on patient participation (34). This participatory culture—also influenced by spiritual and ethical values in leadership—mediates the relationship, indicating that when ethics and spirituality form the foundation of leadership, their positive effects on patient safety are further strengthened.
From the above findings, it is evident that leadership, both in the form of transformational and spiritually-based ethical leadership, is a fundamental pillar in building a strong patient safety culture. Leaders in healthcare organizations should not only focus on technical and administrative aspects but also develop personal and spiritual qualities such as empathy, ethical awareness, and honesty. Practical recommendations include leadership training that integrates spiritual and ethical values, the development of patient safety culture assessment systems that include spirituality and organizational spiritual climate indicators, and increased awareness of the critical role of leadership in creating a safe and supportive work environment.

4 Conclusion

The study found that the performance of patient-engaged nursing services is directly and significantly impacted by nurses' opinions of nursing managers' moral leadership. By encouraging a culture of patient involvement, ethical leadership not only directly improves performance but also indirectly improves outcomes, as evidenced by the partly mediation function that patient participation culture was found to play. These results emphasize how crucial it is to build leadership practices around moral principles like justice, openness, and responsibility while also bolstering corporate culture to encourage proactive patient involvement. Therefore, as part of their efforts to enhance patient safety and treatment quality, hospitals should incorporate ethical leadership training and tactics to create a culture of patient participation.

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