

**Pengaruh Kepemimpinan Transformasional, Kepemimpinan
Pemberdaya, Dan Budaya Organisasi Yang Dimediasi Oleh
Kepemimpinan Bersama Terhadap Kinerja Organisasi Rumah Sakit
Umum Daerah**

***The Influence Of Transformational Leadership, Empowering Leadership
And Organizational Culture Mediated By Shared Leadership On The
Organizational Performance Of Regional Public Hospital***

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Abstract

This study aims to examine the effects of transformational leadership, empowering leadership, and organizational culture on organizational performance, while assessing the mediating role of shared leadership at Dr. Chasbullah Abdulmadjid Regional General Hospital in Bekasi City. A quantitative approach was employed using a survey design involving 223 civil servants, comprising medical and non-medical personnel. Data were collected through questionnaires and analyzed using Partial Least Squares–Structural Equation Modeling (PLS-SEM). The study is expected to provide insights into the relationships between leadership styles, organizational culture, and organizational performance, particularly regarding the mediating function of shared leadership. The findings are anticipated to highlight the importance of collective leadership practices, employee participation, and a supportive organizational culture in enhancing hospital performance. Transformational leadership and empowering leadership are expected to contribute to improved employee engagement and coordination, while an organizational culture that encourages collaboration and shared responsibility may strengthen the implementation of shared leadership. This study emphasizes the importance of integrating effective leadership approaches with a collaborative organizational environment to support operational efficiency and improve healthcare service quality. Strengthening shared leadership and fostering an organizational culture that promotes active participation are therefore considered essential strategies for improving organizational performance at Dr. Chasbullah Abdulmadjid Regional General Hospital.

Keywords: Empowering Leadership; Organizational Culture; Organizational Performance; Shared Leadership; Transformational Leadership.

Abstrak

Penelitian ini bertujuan untuk menguji pengaruh kepemimpinan transformasional, kepemimpinan yang memberdayakan (*empowering leadership*), dan budaya organisasi terhadap kinerja organisasi, serta menilai peran mediasi kepemimpinan bersama (*shared leadership*) di Rumah Sakit Umum Daerah (RSUD) Dr. Chasbullah Abdulmadjid, Kota Bekasi. Pendekatan kuantitatif digunakan dengan desain survei yang melibatkan 223 pegawai negeri sipil, yang terdiri dari tenaga medis maupun non-medis. Data dikumpulkan melalui kuesioner dan dianalisis menggunakan metode *Partial Least Squares–Structural Equation Modeling* (PLS-SEM). Penelitian ini diharapkan dapat memberikan wawasan mengenai hubungan antara gaya kepemimpinan, budaya organisasi, dan kinerja organisasi, khususnya terkait fungsi mediasi dari kepemimpinan bersama. Hasil penelitian ini diperkirakan akan menyoroti pentingnya praktik kepemimpinan kolektif, partisipasi pegawai, dan budaya organisasi yang mendukung dalam meningkatkan kinerja rumah sakit. Kepemimpinan transformasional dan kepemimpinan yang memberdayakan diharapkan dapat berkontribusi pada peningkatan keterlibatan dan koordinasi pegawai, sementara budaya organisasi yang mendorong kolaborasi serta tanggung jawab bersama dapat memperkuat penerapan kepemimpinan bersama. Studi ini menekankan pentingnya mengintegrasikan pendekatan kepemimpinan yang efektif dengan lingkungan organisasi

yang kolaboratif untuk mendukung efisiensi operasional dan meningkatkan kualitas layanan kesehatan. Oleh karena itu, penguatan kepemimpinan bersama dan pengembangan budaya organisasi yang mendorong partisipasi aktif dianggap sebagai strategi esensial untuk meningkatkan kinerja organisasi di RSUD Dr. Chasbullah Abdulmadjid.

Kata kunci: Kepemimpinan yang Memberdayakan; Budaya Organisasi; Kinerja Organisasi; Kepemimpinan Bersama; Kepemimpinan Transformasional.

1. Introduction

Organizational performance represents a fundamental measure of an institution's capacity to accomplish its strategic objectives and maintain the effectiveness of its operational activities (Virgiawan et al., 2021). In the public healthcare sector, organizational performance is particularly important because hospitals are expected to deliver accessible, efficient, and high-quality services while responding to the evolving needs of the community. Dr. Chasbullah Abdulmadjid Regional General Hospital in Bekasi City operates within this context, where increasing healthcare demands, resource constraints, and the complexity of hospital operations require continuous improvements in managerial effectiveness and service delivery. The hospital has demonstrated encouraging performance, as reflected in its achievement of an A-grade performance accountability rating and the fulfillment of 85.56% of the Minimum Service Standards (*Standar Pelayanan Minimal*, SPM) across 21 hospital services, exceeding the established target of 81.72%. These accomplishments indicate that the hospital has made substantial progress in implementing its operational policies and pursuing its institutional objectives. Nevertheless, the gap between the current achievement and the maximum SPM target of 100% suggests that further improvements remain necessary. Certain service dimensions may still require more effective coordination, resource allocation, and performance monitoring. This situation underscores the importance of identifying organizational factors that can strengthen institutional effectiveness and support sustainable improvements in healthcare quality. Leadership practices and organizational culture are particularly relevant in this regard because they shape employee behavior, collaborative processes, and the implementation of organizational strategies.

Leadership is an important determinant of organizational performance because it influences how employees interpret organizational objectives, exercise their capabilities, and coordinate their activities. Transformational leadership emphasizes the development of a shared vision, the encouragement of innovation, and the motivation of employees to pursue collective goals beyond their immediate individual interests. This leadership approach also involves setting positive examples, facilitating adaptation to organizational change, maintaining open communication, and attending to employees' professional development and well-being (Ali, 2024; Hartomo & Yulianti, 2024). Through these mechanisms, transformational leadership can foster employee commitment and align individual contributions with institutional priorities. In hospital settings, where the quality of service depends on coordination among professionals with different responsibilities and expertise, such leadership practices can support organizational effectiveness. However, organizational performance cannot necessarily be sustained through the influence of formal leaders alone. The complexity of healthcare delivery requires employees at different organizational levels to participate actively in problem-solving, decision-making, and the implementation of service improvements. Consequently, the effectiveness of

transformational leadership may depend partly on its ability to encourage leadership contributions beyond the formally appointed leader.

Empowering leadership provides another perspective for understanding how leadership practices influence organizational performance. Rather than concentrating authority exclusively on managerial positions, this approach emphasizes employee autonomy, participation, trust, and the development of individual capabilities. Empowering leaders encourage employees to take responsibility for their work, exercise professional judgment, and contribute to decisions within their respective areas of expertise. These practices are particularly relevant in hospitals, where medical and non-medical personnel must respond to operational demands while maintaining accountability for service outcomes. Research by Al-Azzawi et al. (2023) indicates that transformational leadership and empowering leadership can contribute to organizational performance through shared leadership, while organizational culture also plays an important role in this relationship. Empowering leadership may therefore strengthen performance not only through its direct influence on employee behavior but also by creating conditions that enable leadership responsibilities to be distributed among team members. When employees are trusted to contribute their knowledge and capabilities, the organization can make greater use of its collective expertise, potentially improving coordination, responsiveness, and service effectiveness.

In addition to leadership practices, organizational culture constitutes an important contextual factor influencing the way employees work together and pursue organizational objectives. Organizational culture encompasses shared values, behavioral expectations, and underlying assumptions that guide interactions and decision-making within an institution. A culture that supports collaboration, participation, accountability, and mutual respect can facilitate coordination among employees and strengthen the consistency of organizational practices. Hartomo and Yulianti (2024) emphasize the relevance of organizational conditions that encourage employee involvement and constructive working relationships. Within a hospital environment, a supportive organizational culture can help integrate the activities of medical and non-medical personnel, reduce barriers to communication, and promote collective responsibility for service quality. Nevertheless, the relationship between organizational culture and organizational performance is not always consistent across empirical studies. Although several studies have reported positive associations between organizational culture and performance (Paais & Pattiruhu, 2020; Saluy et al., 2022), Bahri et al. (2021) identified a negative but statistically insignificant relationship. These differences suggest that organizational culture may not improve performance automatically; its contribution may depend on the extent to which shared values are translated into effective working practices and collaborative organizational processes.

Shared leadership offers a potential mechanism for explaining how leadership practices and organizational culture can be translated into improved organizational performance. Unlike conventional leadership arrangements in which authority and influence are concentrated primarily in formal managerial positions, shared leadership involves the distribution of leadership influence, responsibility, and decision-making among members of a team. This approach recognizes that leadership contributions can emerge from different individuals according to their competencies, experience, and the demands of a particular situation. Wulandari (2020) explains that

shared leadership encourages team members to exchange knowledge, contribute relevant information, and participate in developing solutions to collective problems. Such collaborative processes can improve individual productivity and strengthen overall organizational performance (Mogi et al., 2024). In the hospital context, shared leadership may enable professionals to contribute more effectively to operational decisions and service improvements by utilizing their specialized knowledge. Transformational leadership can encourage the development of a common vision, empowering leadership can provide employees with the autonomy and confidence to exercise leadership, and organizational culture can establish the shared values necessary to support collaborative behavior. As these conditions develop, leadership influence and accountability may become more widely distributed across teams rather than remaining concentrated in a single individual. Shared leadership is therefore positioned in this study as a mediating variable that may explain the mechanisms through which transformational leadership, empowering leadership, and organizational culture influence organizational performance.

Despite growing interest in leadership and organizational performance, several research gaps remain regarding the mechanisms connecting these variables. Previous studies have frequently examined the direct effects of transformational leadership on organizational performance (Chammas & Hernandez, 2019; Dastane, 2020), the relationships between empowering leadership, performance, and employee work behavior (Fadila & Sawitri, 2023; Purnama & Indrawijaya, 2022), and the influence of organizational culture on organizational outcomes (Paaais & Pattiruhu, 2020; Saluy et al., 2022). However, the inconsistent findings concerning organizational culture indicate that further investigation is needed to understand the processes through which cultural characteristics contribute to performance. Furthermore, existing research has commonly investigated mediating mechanisms such as employee engagement, job satisfaction, motivation, organizational commitment, and organizational citizenship behavior. The role of shared leadership as a mediating mechanism connecting leadership styles and organizational culture with organizational performance remains comparatively underexplored. Although Mohammed and Al-Abrrow (2023) demonstrated the mediating role of shared leadership in the relationships between transformational leadership, empowering leadership, and organizational performance, their research did not incorporate organizational culture into the same comprehensive framework. This limitation highlights the need for an integrated model that considers both leadership approaches and organizational culture when explaining organizational performance.

The present study addresses these gaps by examining transformational leadership, empowering leadership, and organizational culture as determinants of organizational performance, with shared leadership serving as a mediating variable at Dr. Chasbullah Abdulmadjid Regional General Hospital in Bekasi City. The novelty of this research lies in three aspects. First, it integrates transformational leadership, empowering leadership, and organizational culture within a single analytical framework to examine their relationships with organizational performance. Second, it investigates shared leadership as an intermediary mechanism through which leadership practices and cultural conditions may contribute to organizational outcomes, thereby extending the discussion beyond direct relationships between individual organizational factors and performance. Third, it applies this integrated framework to a public healthcare institution characterized by formal organizational

hierarchies, professional specialization, and complex service coordination requirements. Accordingly, this study aims to analyze the effects of transformational leadership, empowering leadership, and organizational culture on organizational performance, both directly and indirectly through shared leadership. Theoretically, the findings are expected to enrich the organizational behavior and human resource management literature by advancing understanding of collective leadership mechanisms within public-sector healthcare organizations. Practically, the results may provide an empirical basis for hospital management in formulating leadership development policies, strengthening a collaborative organizational culture, and expanding employee participation in decision-making. These efforts are expected to support more effective teamwork, improve service delivery, and promote sustainable organizational performance.

HYPOTHESES DEVELOPMENT

Based on transformational leadership theory, empowering leadership theory, and organizational culture theory, this study proposes that transformational leadership and empowering leadership influence organizational performance both directly and indirectly through shared leadership. Transformational leadership and empowering leadership are expected to foster shared leadership by encouraging collaboration, employee participation, and shared responsibility. Furthermore, organizational culture is proposed to moderate the relationships between both leadership styles and shared leadership, providing a more comprehensive explanation of organizational performance at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City.

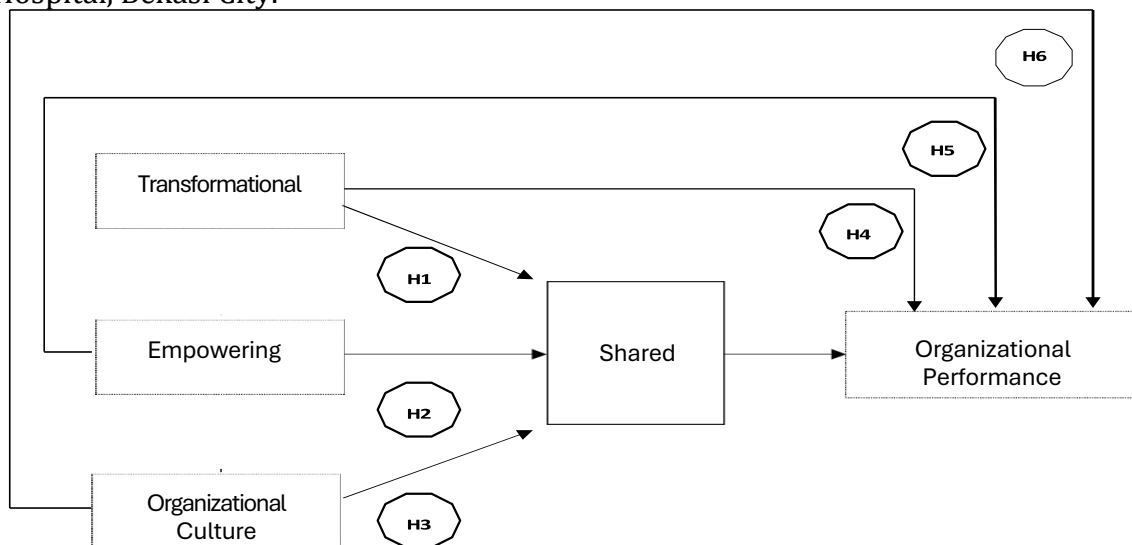


Figure 1. Conceptual Framework

Transformational leadership inspires employees through a shared vision, intellectual stimulation, and individualized consideration, encouraging them to contribute to collective organizational goals (Arokiasamy & Tat, 2020; Ali, 2024). When these leadership practices promote shared leadership, employees can collaborate more effectively, exchange knowledge, and assume collective responsibility, thereby supporting organizational performance (Chammas & Hernandez, 2019; Mohammed & Al-Abrow, 2023). Therefore, Shared leadership

positively mediates the relationship between transformational leadership and organizational performance (H1).

Transformational leadership encourages employees to participate in decision-making, contribute ideas, and work toward common goals. These practices create opportunities for leadership responsibilities to be distributed among team members according to their competencies and expertise (Mogi et al., 2024; Mohammed & Al-Abrrow, 2023). Therefore, Transformational leadership positively affects shared leadership (H2).

Empowering leadership provides employees with autonomy, authority, trust, and opportunities to take responsibility for their work (Rahayu & Muna, 2021; Hartomo & Yulianti, 2024). These practices encourage employees to participate in collaborative decision-making and share leadership responsibilities, enabling individual contributions to support organizational effectiveness and performance (Gadzali & Kartini, 2023; Mohammed & Al-Abrrow, 2023). Therefore, Shared leadership positively mediates the relationship between empowering leadership and organizational performance (H3).

Empowering leadership encourages employee independence, initiative, and involvement in organizational decisions. By providing employees with the authority and support to contribute according to their competencies, this leadership style facilitates the distribution of leadership responsibilities among team members (Rahayu & Muna, 2021; Gadzali & Kartini, 2023). Therefore, Empowering leadership positively affects shared leadership (H4).

Organizational culture establishes shared values and norms that shape employee behavior, collaboration, and participation (Sarhan et al., 2020; Paais & Pattiruhu, 2020). A culture characterized by trust, openness, and collaboration can reinforce the influence of transformational leadership by creating an environment in which employees feel encouraged to contribute and assume shared leadership responsibilities (Mogi et al., 2024; Mohammed & Al-Abrrow, 2023). Therefore, Organizational culture positively moderates the relationship between transformational leadership and shared leadership (H5).

A supportive organizational culture encourages trust, employee participation, collaboration, and accountability, complementing the autonomy and responsibility promoted by empowering leadership (Fidyah & Setiawati, 2020; Saluy et al., 2022). These cultural conditions can strengthen the influence of empowering leadership on shared leadership by encouraging employees to exercise their authority collaboratively and contribute to collective decisions (Hartomo & Yulianti, 2024; Mogi et al., 2024). Therefore, Organizational culture positively moderates the relationship between empowering leadership and shared leadership (H6).

METHOD

This study employed a quantitative research approach with a deductive research design to examine the relationships among transformational leadership, empowering leadership, organizational culture, shared leadership, and organizational performance. A correlational survey design was adopted to test hypotheses derived from established theories and previous studies using numerical data analysis. Primary data were collected from civil servants at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City, West Java, Indonesia, using a structured questionnaire distributed online through Google Forms.

The study population consisted of all civil servants working at Dr. Chasbullah Abdulmadjid Regional General Hospital, including medical and non-medical personnel. Respondents were selected using probability sampling through stratified random sampling, in which the population was divided into relevant categories, such as medical personnel, administrative personnel, and management, before respondents were randomly selected from each stratum. Following the indicator-based sampling approach, the minimum sample size was determined by multiplying the number of measurement indicators by five. Since this study employed 36 indicators, the minimum required sample was 180 respondents (36×5). A total of 223 respondents participated in the study, exceeding the calculated minimum sample size.

All research variables were measured using instruments adapted from previous studies. Responses were assessed using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Transformational leadership was measured using four subdimensions: idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration, adapted from Mohammed and Al-Abrow (2023). Empowering leadership was assessed using four subdimensions: enhancing the significance of work, fostering participation in decision-making, expressing confidence in high performance, and providing autonomy from bureaucratic constraints (Mohammed & Al-Abrow, 2023). Shared leadership was measured through shared purpose, social support, and voice (Mohammed & Al-Abrow, 2023). Organizational culture functioned as a moderating variable to examine whether cultural conditions strengthened or weakened the relationships between leadership styles and shared leadership. The original draft attributes its measurement to Virgin et al. (2021); however, the specific indicators require verification to ensure that they accurately represent organizational culture. Organizational performance was measured through work quality, work quantity, work effectiveness, and conformity with organizational standards, following Wulandari (2020). The complete measurement instruments and indicators are presented in Appendix 1.

Data were analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM) with SmartPLS. This method was selected to examine the relationships among latent variables, including direct effects, mediation, and moderation (Hair et al., 2017). The analysis consisted of two stages: measurement model (outer model) evaluation and structural model (inner model) evaluation. Convergent validity was assessed using outer loadings of at least 0.70 and Average Variance Extracted (AVE) values above 0.50. Discriminant validity was evaluated to establish that each construct was empirically distinct, while construct reliability was assessed using Cronbach's Alpha and Composite Reliability, with values above 0.70 indicating satisfactory internal consistency. The structural model was evaluated using the coefficient of determination (R^2), path coefficients, effect size (f^2), and predictive relevance (Q^2), where applicable. Hypotheses were tested using bootstrapping, with statistical significance determined at $p < 0.05$. The mediating role of shared leadership was assessed through specific indirect effects, while the moderating role of organizational culture was examined through interaction effects between organizational culture and the respective leadership variables. Before the main survey, preliminary instrument testing was conducted using 30 respondents, followed by an additional group of 38 respondents. The preliminary analysis was performed using SPSS to evaluate the validity and reliability of the 36 questionnaire indicators. Validity was assessed using Pearson correlation, with item correlation coefficients ranging from 0.698 to 0.957,

exceeding the reference value of 0.325, and significance values below 0.05. Reliability was evaluated using Cronbach's Alpha, with all constructs achieving values ranging from 0.926 to 0.955, exceeding the minimum threshold of 0.70. These results indicated that the questionnaire demonstrated satisfactory validity and internal consistency for the main study.

A total of 223 civil servants working at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City, participated in this study, comprising medical and non-medical personnel. As presented in Table 1, the majority of respondents were female (76.7%), reflecting the greater representation of women among the study participants. In terms of age, 57.0% of respondents were over 45 years old, indicating that most participants belonged to a relatively mature age group with substantial potential work experience. Regarding educational attainment, more than half of the respondents held a bachelor's degree (52.0%), followed by diploma graduates (29.6%), suggesting that most participants had formal educational backgrounds that could support their understanding of the research questionnaire. In terms of work experience, the majority of respondents had worked for 6–10 years (79.4%), indicating considerable familiarity with organizational conditions and workplace activities relevant to this study. Overall, the demographic profile of the respondents is consistent with the characteristics of Indonesia's maritime workforce, which is predominantly male, experienced, and engaged in physically demanding operational roles. These characteristics provide an appropriate representation of tanker ship crews and offer a relevant context for examining the relationships among hope, career identity, career compromise, burnout, job satisfaction, and turnover intention.

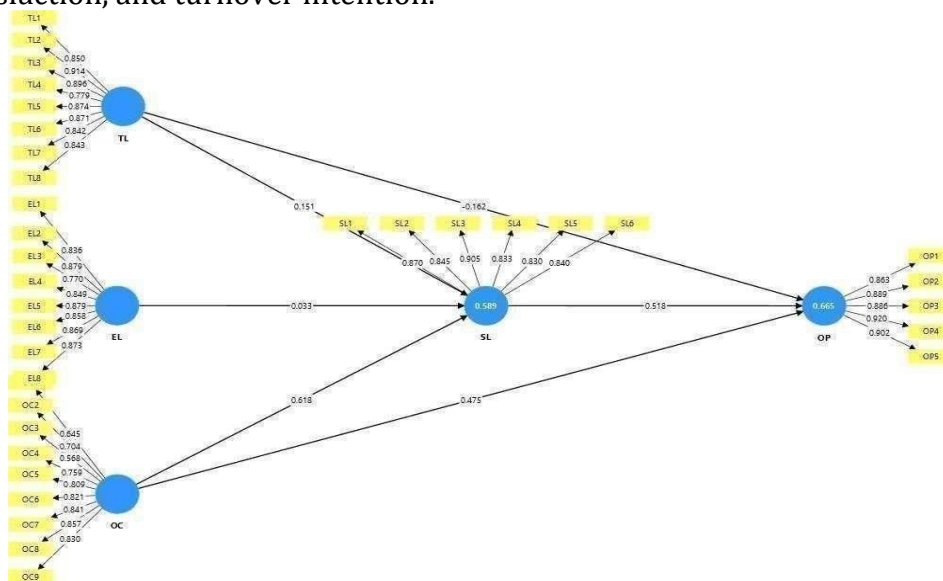


Figure 2. Outer Loadings Measurement Model

Figure 2 shows that the R^2 value is 0.589 for the Shared Leadership variable, which indicates that 58.9% of the variation in Shared Leadership can be explained by Transformational Leadership, Empowering Leadership, and Organizational Culture. Meanwhile, the R^2 value of 0.665 for Organizational Performance indicates that 66.5% variation performance organization can explained by Transformational Leadership, Organizational Culture, and Shared Leadership The outer model test is used to evaluate the relationship between latent variables and their indicators through construct validity and reliability testing. This testing includes convergent validity measured using loading factors and Average Variance Extracted (AVE), discriminant validity

using the heterotrait-monotrait ratio (HTMT), and construct reliability measured using composite reliability and Cronbach's alpha (Haryono, 2016). Based on results testing Average Variance Extracted (AVE), all variables own mark AVE in on 0.50, that is Empowering Leadership (EL) as big as 0.726, Organizational Culture (OC) 0.585, Organizational Performance (OP) 0.796, Shared Leadership (SL) 0.730, and Transformational Leadership (TL) 0.739. These results indicate that each construct is able to explain more than 50% of the variance of the indicators that measure it, thus meeting the criteria for convergent validity. In other words, all variables in this study are declared valid and suitable for use in further analysis (list of tables attached).

The results of the Heterotrait-Monotrait Ratio (HTMT) test show that most of the HTMT values between constructs are below the 0.90 limit, such as the relationship between Organizational Culture and Organizational Performance (0.797), Empowering Leadership and Shared Leadership (0.675), and Shared Leadership and Organizational Performance (0.829). This indicates that each construct has good discriminant validity and can be distinguished from one another. However, the HTMT value between Transformational Leadership and Empowering Leadership of 0.921 slightly exceeds the 0.90 limit, indicating a relatively high level of similarity between the two constructs. Nevertheless, overall, the HTMT test results indicate that the model has met the discriminant validity criteria and is worthy of proceeding to the next stage of analysis (list of tables attached).

Based on the results of the reliability construct, it can be seen that all variables have Cronbach's Alpha values and Composite Reliability (rho_c) above 0.70, indicating a very good level of reliability. Cronbach's Alpha values ranged from 0.909–0.949, while Composite Reliability values ranged from 0.926–0.958 for the Empowering variable. Leadership (EL), Organizational Culture (OC), Organizational Performance (OP), Shared Leadership (SL), and Transformational Leadership (TL). These results show that all indicators in each The construct has high internal consistency in measuring the variables studied, so that the research instrument is declared reliable and suitable for use for further analysis (list attached).

RESULTS AND DISCUSSION

Results

Table 1. Hypothesis Testing Results

Hypothesis	Variable Relationship	T Statistics	P-Value	Decision
H1	Transformational Leadership towards Shared Leadership	1,557	0.119	Rejected
H2	Empowering Leadership towards Shared Leadership	0.248	0.804	Rejected
H3	Organizational Culture towards Shared Leadership	7,279	0,000	Accepted
H4	Shared Leadership on Organizational Performance	3,550	0,000	Accepted
H5	Transformational Leadership towards	1,800	0.072	Rejected

Organizational Performance				
H6	Organizational Culture on Organizational Performance	3,692	0,000	Accepted

Table 1 presents the results of hypothesis testing conducted using the bootstrapping procedure in SmartPLS 4. Statistical significance was assessed based on the criteria of T-statistics > 1.96 and P-values < 0.05. The results indicate that three of the six proposed hypotheses concerning leadership and organizational performance were supported, while the remaining three were not supported. Transformational leadership did not have a statistically significant effect on shared leadership (H1; $t = 1.557$, $p = 0.119$). Similarly, empowering leadership showed no significant effect on shared leadership (H2; $t = 0.248$, $p = 0.804$). Therefore, both hypotheses were rejected because their relationships did not meet the established significance criteria. In contrast, organizational culture had a statistically significant positive effect on shared leadership (H3; $t = 7.279$, $p < 0.001$), supporting the proposed hypothesis. These findings suggest that organizational culture may play an important role in facilitating shared leadership through the development of common values, behavioral norms, and collaborative working practices.

Regarding organizational performance, shared leadership demonstrated a statistically significant effect (H4; $t = 3.550$, $p < 0.001$), supporting the proposed hypothesis. This finding indicates that shared leadership is positively associated with organizational performance at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City. The distribution of leadership responsibilities and involvement of organizational members in decision-making may facilitate coordination and collaboration in achieving institutional objectives. Conversely, transformational leadership did not demonstrate a statistically significant effect on organizational performance (H5; $t = 1.800$, $p = 0.072$), resulting in the rejection of H5. Meanwhile, organizational culture had a statistically significant positive effect on organizational performance (H6; $t = 3.692$, $p < 0.001$), supporting the proposed hypothesis. This result indicates that organizational culture may contribute to performance by promoting shared values, consistent work practices, and alignment between employee behavior and organizational goals. Overall, three hypotheses (H3, H4, and H6) were supported, whereas H1, H2, and H5 were not supported due to the absence of statistically significant relationships. Collectively, these findings highlight the importance of organizational culture in strengthening shared leadership and organizational performance. Shared leadership was also significantly associated with organizational performance, suggesting that collaborative leadership practices may contribute to organizational effectiveness. However, the relative strength and direction of the relationships should be confirmed using the path coefficients, as T-statistics and P-values alone do not establish the direction or magnitude of an effect.

Discussion

The hypothesis testing results indicate that Transformational Leadership does not have a statistically significant effect on Shared Leadership at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City ($t = 1.557$, $p = 0.119$). Therefore, H1 was not supported. This finding suggests that the implementation of transformational leadership has not demonstrated a significant relationship with the development of shared leadership within the hospital. Bass and Avolio (1994) explain that transformational leadership involves inspiring and motivating employees,

stimulating intellectual development, and providing individualized consideration. These characteristics are theoretically expected to promote collaboration and encourage team members to participate in leadership processes. Nevertheless, the present findings differ from those of Mohammed and Al-Abrrow (2023), who identified a positive relationship between transformational leadership and shared responsibility in healthcare organizations. This discrepancy may reflect differences in organizational structures and leadership practices. In a formal and hierarchical hospital environment, decision-making authority may remain concentrated among designated leaders, limiting opportunities for employees to assume shared leadership responsibilities. Consequently, transformational leadership behaviors may not be sufficient to foster shared leadership when organizational arrangements do not adequately support distributed decision-making and collective responsibility.

The analysis also revealed that Empowering Leadership does not have a statistically significant effect on Shared Leadership ($t = 0.248$, $p = 0.804$), indicating that H2 was not supported. This result suggests that empowering leadership has not demonstrated a significant contribution to the development of shared leadership at Dr. Chasbullah Abdulmajid Regional General Hospital, Bekasi City. Arnold et al. (2000) conceptualize empowering leadership as a leadership approach that encourages employee participation, autonomy, and involvement in decision-making. From a theoretical perspective, these practices are expected to facilitate shared leadership by enabling team members to exercise greater responsibility and contribute to collective decisions. However, the findings contrast with Mohammed and Al-Abrrow (2023), who reported a positive relationship between empowering leadership and shared leadership. One possible explanation is that the delegation of authority may not automatically translate into the distribution of leadership roles. When organizational decisions and responsibilities remain largely determined by formal management structures, employee empowerment may have limited implications for collective leadership practices. Accordingly, the nonsignificant finding may reflect a gap between providing employees with greater autonomy and establishing organizational practices that enable leadership responsibilities to be shared effectively.

In contrast, Organizational Culture demonstrated a positive and statistically significant effect on Shared Leadership, as indicated by a T-statistics value of 7.279 and a P-value below 0.001. Thus, H3 was supported. These findings indicate that a stronger organizational culture is associated with a greater development of shared leadership at Dr. Chasbullah Abdulmajid Regional General Hospital, Bekasi City. Schein and Schein (2021) describe organizational culture as a system of shared values, norms, and assumptions that shapes the behavior of organizational members. A culture that emphasizes cooperation, open communication, mutual trust, and collective responsibility can establish conditions that facilitate the distribution of leadership roles among team members. The findings are consistent with Mohammed and Al-Abrrow (2023), who highlighted the contribution of organizational culture to the development of shared leadership. Within healthcare organizations, collaboration across professional groups and coordination between organizational units are particularly important because service delivery requires the integration of diverse competencies and responsibilities. An organizational culture that encourages participation and cooperation may therefore create greater opportunities for employees to contribute to decision-making and exercise leadership according to their

expertise. These findings emphasize that organizational culture represents an important organizational foundation for supporting shared leadership practices.

The results further demonstrated that Shared Leadership has a statistically significant positive effect on Organizational Performance at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City ($t = 3.550$, $p < 0.001$), supporting H4. This finding suggests that stronger shared leadership practices are associated with better organizational performance. Pearce and Conger (2003) explain shared leadership as a collective leadership process in which team members mutually influence one another and distribute leadership responsibilities to achieve common objectives. Through this approach, employees can contribute according to their respective competencies, participate in problem-solving, and coordinate their activities more effectively. The findings are consistent with Mohammed and Al-Abrrow (2023), who reported a positive relationship between shared leadership and organizational performance in healthcare organizations. The involvement of employees in decision-making, combined with effective communication and collective accountability, may support operational coordination and the achievement of institutional goals. In hospital settings, these practices are relevant because effective performance depends on cooperation among healthcare professionals and administrative personnel. Therefore, hospital management should strengthen cross-unit coordination, encourage employee participation, and facilitate collaborative decision-making to support organizational performance. Nevertheless, the extent of this contribution should be assessed using the path coefficient and relevant measures of explanatory power.

The hypothesis testing results also indicated that Transformational Leadership does not have a statistically significant effect on Organizational Performance ($t = 1.800$, $p = 0.072$). Consequently, H5 was not supported. Although transformational leadership theoretically emphasizes motivation, inspiration, intellectual stimulation, and the alignment of employee efforts with organizational objectives, its direct relationship with organizational performance was not statistically established in this study. Bass and Avolio (1994) identify these leadership characteristics as important elements in encouraging employees to work toward shared organizational goals. However, the extent to which transformational leadership translates into measurable performance outcomes may depend on organizational conditions and the mechanisms through which leadership influences employee behavior. The present findings differ from Mogi et al. (2024), who reported a positive relationship between transformational leadership and organizational performance through improved work commitment. One possible explanation is that transformational leadership may not independently produce measurable performance improvements when other organizational factors play a more immediate role in determining work effectiveness. In the present model, Organizational Culture and Shared Leadership demonstrated statistically significant relationships with Organizational Performance, suggesting that organizational values and collective leadership practices may be more directly associated with performance outcomes. Accordingly, hospital management should consider integrating transformational leadership practices with a supportive organizational culture and effective shared leadership mechanisms rather than relying exclusively on transformational leadership to improve organizational performance.

Finally, Organizational Culture was found to have a positive and statistically significant effect on Organizational Performance ($t = 3.692$, $p < 0.001$), supporting H6.

This result indicates that a stronger organizational culture is associated with better organizational performance at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City. According to Schein and Schein (2021), organizational culture comprises shared values, norms, and assumptions that guide how organizational members behave and perform their responsibilities. When these values are consistently reflected in workplace practices, they can facilitate coordination, reinforce employee commitment, and promote accountability in achieving organizational objectives. The findings are consistent with previous studies by Virgiawan et al. (2021), Saluy et al. (2022), and Mohammed and Al-Abrow (2023), which identified a positive relationship between organizational culture and organizational performance. A culture that encourages effective communication, collaboration, and commitment to institutional goals can help align individual activities with organizational priorities and support more consistent work practices. These considerations are particularly relevant in hospitals, where organizational performance depends on the coordination of multiple professional groups and the continuity of service delivery. Therefore, management should strengthen the internalization of organizational values, improve cooperation across departments, and establish a working environment that promotes collective responsibility. Overall, the findings position Organizational Culture as an important factor associated with both Shared Leadership and Organizational Performance, while Shared Leadership itself is significantly associated with Organizational Performance. This pattern highlights the relevance of developing an organizational environment that supports collaboration, participation, and the effective distribution of leadership responsibilities.

CONCLUSION

This study examined the effects of Transformational Leadership, Empowering Leadership, and Organizational Culture on Organizational Performance, with Shared Leadership as a mediating variable at Dr. Chasbullah Abdulmadjid Regional General Hospital, Bekasi City. The findings revealed that Transformational Leadership had no significant effect on Shared Leadership or Organizational Performance, while Empowering Leadership did not significantly influence Shared Leadership. Conversely, Organizational Culture positively and significantly affected both Shared Leadership and Organizational Performance, and Shared Leadership also had a significant positive effect on Organizational Performance. These results highlight the importance of organizational culture and collaborative leadership practices in supporting institutional effectiveness. From a managerial perspective, hospital management should strengthen organizational values, improve coordination across professional units, encourage employee participation in decision-making, and develop leadership competencies through training, coaching, and structured delegation of authority. Nevertheless, these findings should be interpreted in light of the study's limitations, including its focus on a single hospital, reliance on self-reported questionnaire data, cross-sectional research design, and the exclusion of other potentially relevant organizational factors.

Future research should examine additional mediating variables, such as employee engagement, job satisfaction, organizational commitment, psychological empowerment, and knowledge sharing, to provide a more comprehensive understanding of the mechanisms underlying organizational performance. Further studies may also investigate alternative leadership approaches, including servant

leadership, authentic leadership, ethical leadership, and adaptive leadership, across public and private hospitals or other organizational settings. Employing longitudinal designs and mixed-methods approaches would help capture changes in organizational relationships over time and provide deeper insights into employee experiences and organizational processes. Expanding the research context, incorporating additional explanatory variables, and applying different methodological approaches may improve the generalizability of findings and strengthen understanding of how leadership and organizational culture contribute to organizational performance.

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