

## Nurses' Perception about Inspirational Leadership and Organizational Excellence at Misr El-Hora Hospital

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### Abstract

**Background:** Inspirational leadership enhances nurses' performance and loyalty, fostering a positive culture that drives continuous improvement and achieves organizational excellence in hospitals. **Aim of the study:** To assess nurses' perception about inspirational leadership and organizational excellence at Misr El-hora hospital. **Research design:** A descriptive correlational research design. **Setting:** The study was conducted at Misr El-Hora Hospital. **Subjects:** A convenience sample of (123) nurses participated. **Tools of data collection:** Two tools were as follows: tool (I), the self-administered questionnaire, the 1<sup>st</sup> part was nurses' personal data, and the 2<sup>nd</sup> part was the inspirational leadership questionnaire. Tool (II) organizational excellence questionnaire. **Results:** Reveals that less than two-thirds of nurses perceived their supervisor as an inspirational leader, while slightly more than half of them had a moderate level of organizational excellence. **Conclusion:** There was a highly statistically significant positive correlation between the studied nurses' perception regarding inspirational leadership and their total perception regarding organizational excellence ( $p = 0.002$ ). **Recommendation:** Investing in inspirational leadership development programs, promoting participative decision-making, and fostering a supportive work environment to enhance nurses' perceptions and drive organizational excellence.

**Keywords:** *Inspirational leadership, Nurses' perception, Organizational excellence*

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### Introduction

Inspirational Leadership (IL) is a modern style that enhances organizational effectiveness by motivating nurses, fostering creativity, and promoting collaboration. It significantly improves nurse performance, supports a healthy work environment, and contributes to achieving high-quality care and organizational excellence (OE) in healthcare settings, making it vital for today's nursing leadership (Alrashidi et al., 2024; Yamamoto, 2024). Inspirational leadership in nursing involves guiding others through motivation, vision, and effective communication. Rooted in charisma and emotional influence, it enhances performance, fosters creativity, and drives collaboration. By aligning values and inspiring self-change, it empowers nurses to achieve goals, improve care quality, and contribute to organizational success (Bakker et al., 2023).

Inspirational leaders empower teams through authenticity, vision, innovation, and inclusiveness. They foster trust, motivate change, promote collaboration, and nurture resilience. By modeling

values, enabling autonomy, and communicating goals, they create positive, high-performing environments that drive organizational success and national development through shared purpose, creativity, and collective effort (Rios, 2024; Bwalya, 2023). Inspirational Leadership encompasses four key dimensions: self-confidence, strategic leadership/future vision, environmental sensitivity/change management, and employee empowerment. These elements collectively foster confidence, and visionary leaders who manage to change effectively and empower staff through trust, autonomy, and development, thereby enhancing organizational performance and adaptability in healthcare settings (Abdullah et al., 2024; Ayar et al., 2024).

Inspirational leaders possess traits like self-awareness, integrity, and empathy, guiding their teams with a shared vision and authenticity. They foster trust, respect, and creativity, prioritize growth opportunities, and lead with humility and resilience. Their leadership style emphasizes communication, emotional intelligence, and serving others, creating

supportive and collaborative environments (Hashimy et al., 2023; Shwetha et al., 2024). Inspirational leadership principles drive organizational success by fostering a positive environment. Key principles include articulating a clear vision, maintaining authenticity and integrity, empowering employees, and demonstrating resilience. IL promotes inclusivity, emotional intelligence, stability, and hope while nurturing emerging leaders. These qualities foster creativity, adaptability, and long-term growth (Krauter, 2023).

Inspirational leadership faces challenges such as employee burnout, disruptive change, and over-reliance on charisma. Strategies to address these include fostering inclusive environments, empowering employees, promoting innovation, and ensuring emotional intelligence and resilience. Leaders should balance ambition with compassion, provide stability, and encourage growth and participation in decision-making (Bakker et al., 2023; Pladdys, 2024).

Over the past two decades, organizations have faced significant challenges due to rapid technological changes, demanding customers, and strict regulations. To address these, many adopted OE models to enhance performance (Dabone, 2024). Healthcare organizations, in particular, are striving to balance improved service quality with cost reduction and efficiency amidst workforce shortages and increased spending (Barnawi, 2022). For hospitals to thrive in a competitive environment, focusing on medical quality, patient safety, and service excellence is crucial for achieving high-quality development (Wang, 2023).

Organizational excellence is the continuous pursuit of superior performance, exceeding stakeholder expectations through efficient processes and exceptional service. It involves aligning operations with customer satisfaction, using best management practices, and fostering a culture of improvement and innovation (Barnawi, 2022; Bocoya-Maline et al., 2024). Organizational excellence in healthcare is crucial for improving patient outcomes, reducing costs, enhancing employee engagement, and optimizing operational efficiency. It drives continuous improvement, fosters innovation, and maintains high standards of care, ultimately leading to better patient safety and satisfaction while ensuring long-term organizational sustainability (Bhati et al., 2023; Detwal et al., 2024).

Organizational Excellence Models (OEMs) offer frameworks to assess and enhance performance, focusing on agility, transparency, and

adaptability. Notable models include the European Foundation for Quality Management (EFQM), which emphasizes direction, execution, and results; The Malcolm Baldrige National Quality Award (MBNQA), which covers leadership and strategy; the Canadian Excellence Model (CEM), which categorizes organizations based on excellence levels; and the Australian Business Excellence Framework (ABEF), which integrates leadership and customer engagement for sustainable performance. These models help organizations, including healthcare, achieve continuous improvement, quality, and competitive advantage (Adish et al., 2023; Bukvič, 2023; Rangsunnoen et al., 2024).

Organizational excellence is achieved through four key dimensions: leadership excellence, employee excellence, organizational structure excellence, and strategic excellence. Effective management motivates staff, fosters positive behavior, and adapts to challenges. Employee excellence drives superior performance, while a flexible organizational structure supports operational success. Strategic management enables organizations to adapt, ensuring sustainable performance and competitiveness (Al Humeisat, 2022; Akanmu et al., 2023). The key characteristics of OE include: a proactive mindset, strong customer focus, entrepreneurial spirit, employee empowerment, value-driven goals, hands-on involvement, task prioritization, and a lean workforce. These attributes create an environment that encourages initiative, customer satisfaction, innovation, and efficiency, helping organizations succeed in competitive markets (Mohammed & Al-Zeidi, 2022; Fernández-Salido et al., 2024).

Organizational excellence, outlined in the Baldrige framework, focuses on leadership, strategy, customer focus, workforce involvement, and results. They help organizations achieve high performance across all operations, ensuring sustainable improvement. Leadership drives organizational success, strategic planning ensures alignment with goals, and customer satisfaction enhances overall performance and competitiveness (Rangsunnoen et al., 2024). Key strategies to enhance OE include data-driven decision-making, leadership fostering continuous improvement and aligning with organizational goals. Focus on employee engagement, effective communication, and resilient strategies help organizations remain competitive. Additionally, purpose-driven leadership, agility, culture, talent management, and technology integration are essential for improving patient care and achieving OE (Carvalho et al., 2023).

Moreover, IL plays a central role in motivating and guiding employees toward a shared vision. Leaders who inspire foster a sense of purpose and commitment, encouraging staff to exceed expectations. By leading by example and demonstrating passion for the organization's mission, inspirational leaders create an environment where individuals feel empowered to contribute their best work. This leadership style not only drives individual and team performance but also cultivates a sense of ownership, fueling the pursuit of OE (Wahab & Din, 2024).

### **Significance of the study:**

Healthcare is multifaceted and faced with several challenges including inadequate staffing and increasing workloads. As the largest healthcare group, nurses are mostly at the center of these challenges. To deal with these clinical challenges that confront healthcare delivery, it is crucial for the nurse manager (NM) to be a primary successful driver for organizational excellence and possess the relevant critical managerial competencies for the effective management of scarce resources to address these clinical challenges that face healthcare delivery (Mohamed, 2023).

Internationally, the study of **Mahd and Kamel, (2019)** entitled "Inspirational Leadership and its Role in Achieving Organizational Excellence: An Exploratory Study in Government Preparatory Schools in the Holy City of Karbala" reported a positive statistical significance relationship between inspirational leadership and organizational excellence.

Nationally, the study by **El-Gazar and Zoromba, (2021)** entitled "Nursing Human Resource Practices and Hospitals' Performance Excellence: The Mediating Role of Nurses' Performance", was carried out at Port Said hospitals, in Egypt, revealed the low level of hospitals' excellence, and concluded that there is a need for paying more attention to policies, practices, and systems related to nursing management.

Furthermore, during my work as a head nurse, I noticed that the nurses lack motivation and develop a feeling of frustration and some of them have the intention to leave whenever there is a chance. there is a need to promote an inclusive environment where nurses feel valued and respected while supervisors seek diverse perspectives and inspire them to contribute their unique insights, creating a safe space for open dialogue and cooperation. This, in turn, fosters nurses' loyalty and

commitment resulting in providing excellent nursing care for patients.

Moreover, no previous study was conducted in Egypt to investigate the relation between inspirational leadership and organization excellence; therefore, the researcher conducted this study to understand nurses' perception about inspirational leadership and organizational excellence at Misr El-Hora Hospital.

### **Aim of the study**

The current study aimed to assess nurses' perception about inspirational leadership and organizational excellence at Misr El-Hora Hospital.

### **Research Questions:**

1. What is the perception of inspirational leadership among nurses at Misr El-Hora Hospital?
2. What are the levels of organizational excellence among nurses at Misr El-Hora Hospital?
3. What are the relations between inspirational leadership and organizational excellence as perceived by nurses at Misr El-Hora Hospital?

### **Research Design**

A descriptive correlational research design was implemented to achieve the aim of the present study.

### **Setting**

The study was conducted at Misr El-Hora Hospital which is affiliated with the Ministry of Health and Population and is located on the Cairo-Aswan Agricultural Road, in front of the Old Mansoura Bridge, Minia, Egypt. The hospital provides comprehensive healthcare services to the residents of Minia City, and other surrounding areas, it includes (97) beds: (8) beds in the pediatric department, (7) beds in the pediatric intensive care unit, (7) beds in the intensive care units, (30) beds neonatal intensive care unit, (45) beds in Dar-Salam department. In addition, the following are available in the hospital: laboratories, emergency rooms, radiology department, operation theaters, outpatient clinics, sterilization department, and administrative units

The Misr El-Hora hospital has three floors; the ground floor: which contains an emergency department, a radiology department, and outpatient clinics, a dialysis department, the 1<sup>st</sup> floor: which contains a pediatric intensive care unit, pediatric department, and administrative units. The 2<sup>nd</sup> floor contains a neonatal intensive care unit, and a sterilization department, and the 3<sup>rd</sup> floor: contains the Dar-Salam department.

### Study Subjects

Study subjects included a convenience sample composed of all available nurses during time of data collection at Misr El-Hora Hospital, the total number of the studied sample was (123) nurses

### Tools of Data Collection:

The study was conducted by using two tools as follows:

#### **Tool (I): Self-administered Questionnaire:**

It was divided into two parts as follows:

- **Part I: Nurses' Personal data:** It was used to collect data about the nurses such as age, gender, educational qualification, years of experience, residence, marital status, department, and attendance at a seminar or workshop about inspirational leadership or organizational excellence.
- **Part II: Inspirational Leadership Questionnaire:**

It was adapted from Elwan, (2021), based on Greenberg & Baron, (2004), to measure the categories of inspirational leadership as perceived by nurses. The tool consisted of (24) items grouped under four dimensions (6 items will measure each dimension) as follows: self-confidence, future vision, managing change, and empowering employees. The responses were measured using a 3-point Likert scale, with the responses being: "Agree=3" "Neutral =2" and "Disagree=1".

### Scoring system:

The scoring system ranged from (24 to 72), and it was divided into two categories as follows:

- Presence of inspirational leadership skills equal or more than 60%
- Absence of inspirational leadership skills less than 60%

### **Tool (II) Organizational Excellence**

#### **Questionnaire:**

This tool was developed by Qawasmeh et al., (2013) to measure the level of organizational excellence as perceived by nurses. It consisted of (25) items that measured the following four dimensions; management excellence (5) items, employees' excellence (8) items, organizational structure excellence (5) items, and strategy excellence (7) items. A three-point Likert scale was used; with the responses being: "Agree=3" "Neutral =2" and "Disagree=1".

#### **Scoring system:**

The scoring system ranged from (25 to 75), and it was divided into three levels as follows:

- Low level of organizational excellence if nurses receive a score of 25–44,
- Moderate level of organizational excellence if nurses receive a score of 45–56,
- High level of organizational excellence if nurses receive a score of 57–75.

#### **Validity of the tool:**

The questionnaires were assessed for face validity by a jury of five experts in the nursing administration department and nursing education department, comprising (5) assistant professors from the Faculty of Nursing, Minia University. The experts evaluated the instruments for content coverage, clarity, wording, length, format, and overall appearance. Based on their feedback, necessary modifications were made.

#### **Reliability of the tool:**

Reliability of the questionnaires was performed to confirm their consistency. The internal consistency was measured to identify the extent to which the items of the questionnaires measured what it was intended to measure. Also, the questionnaires were tested for their reliability by using the Cronbach alpha test which revealed good internal reliability for the questionnaires; and distributed as follows:

#### **Reliability analysis of the study tools:**

The study tools	Cronbach's test
Total Inspirational Leadership	. 921
Total Organizational Excellence	. 929

### **Pilot study:**

- A pilot study was carried out before starting data collection on 10% of Participants, which equals (12) nurses from Misr El-Hora Hospital.
- The main purposes of the pilot study were to test the data collection questionnaires regarding the phrasing, the order, and the need for adding or omitting questions or items that were included in the questionnaires, to test the clarity, comprehensiveness, accessibility, and applicability of the study questionnaires, to estimate the time needed to fill the questionnaires, it was about 20 - 25 min. for each scale, in addition, it helped in identifying any obstacles and problems that might interfere with data collection.
- Results of the pilot study indicated that the questionnaires were applicable and didn't need changes, so nurses included in the pilot study were included in the main study sample.

### **Data collection procedure:**

- An official letter was granted from the Nursing Faculty Dean, Minia University, the Ethical Committee, and the Nursing Faculty, Minia University.
- The questionnaires were adopted and translated into Arabic; then the jury approved the questionnaires to collect data for the study.
- Written approvals were obtained from the Misr El-Hora hospital's director after explaining the purpose of the study.
- After obtaining permission, the researcher began to introduce herself to the head nurse and nursing staff and then explained the nature, and aim of the study and how they should fill out the questionnaires.
- A pilot study was done to assure scale clarity and applicability.
- Then the reliability of the questionnaires was done.
- The questionnaires were distributed to all nurses. Questionnaires were administered directly and supervised by the researcher with the assistance of the head nurse of each unit.
- The researcher distributed those questionnaires to nurses during the working

days.

- The sheets were given individually to all of them and nursing staff were given from 20 minutes to 25 minutes to answer the questionnaires. The researcher answers any questions that the nurses need.
- The actual field work started from the beginning of March 2024 to the end of May 2024 for collecting data. Nurses were asked to fill out questionnaires based only on their experiences.
- The researcher scheduled the visits to each department based on the nursing staff's schedule of work.

### **Ethical Consideration:**

- An official letter was granted from the Research Ethics Committee of the Faculty of Nursing, Minia University.
- Approval to conduct the study was obtained from the Dean of the Faculty of Nursing, at Minia University.
- Permission and consent were obtained from the director as well as the nursing managers of Misr El-Hora Hospital.
- Permission and consent were obtained from the head of the department and the head nurse working at Misr El-Hora Hospital.
- Before the conduction of the pilot study as well as the actual study, oral consent was obtained from the participants that are willing to participate in the study, after explaining the nature and purpose of the study. The study subject has the right to refuse to participate or withdraw from the study without any rationale at any time. Study subject privacy will be considered during the collection of data. Participants will be assured that all their data are highly confidential; anonymity was also assured by assigning a number for each nurse instead of names to protect their privacy.

### **Statistical Design**

Data was statistically tabulated, analyzed, summarized, and computerized using the Statistical Package for Social Science (SPSS) version 22. Numerical data were expressed as mean and Standard Deviation (SD). Quantitative data were expressed as frequency and percentage. For quantitative data, comparisons between two variables' mean were done using a t-test, and comparisons between more than two variables mean used the ANOVA test. Also, relations between

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different numerical variables were tested using Pearson correlation. A probability (p-value) less than

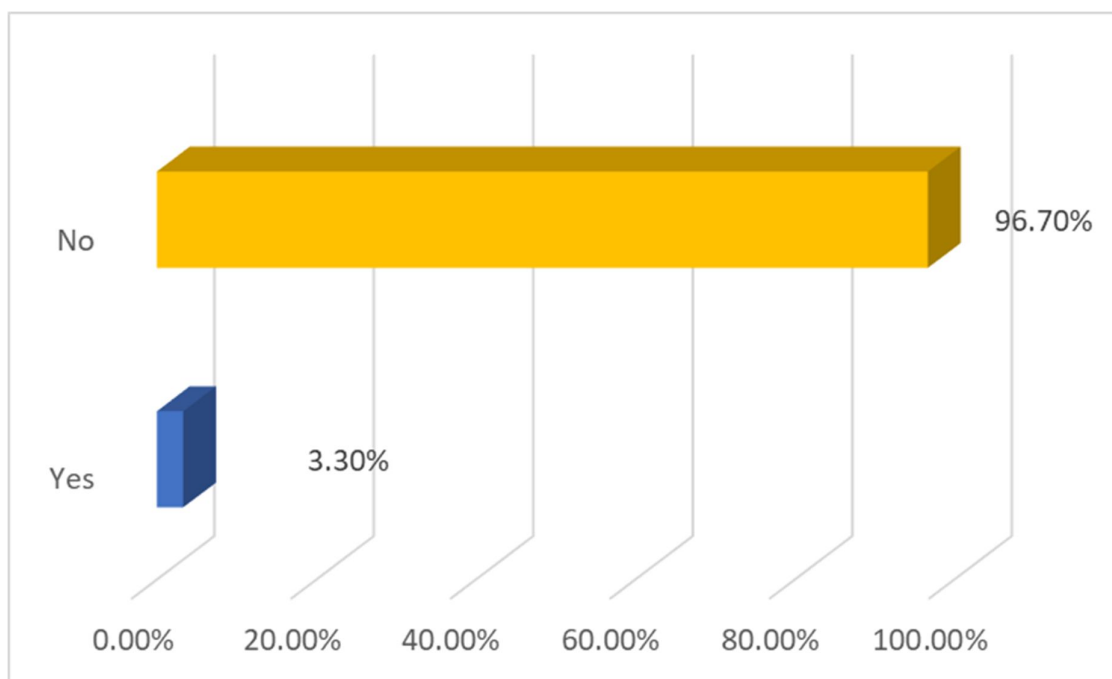
0.05 was considered significant and less than 0.001 was considered highly significant.

## Results

**Table (1): Frequency distribution of the nurses' personal data (no=123).**

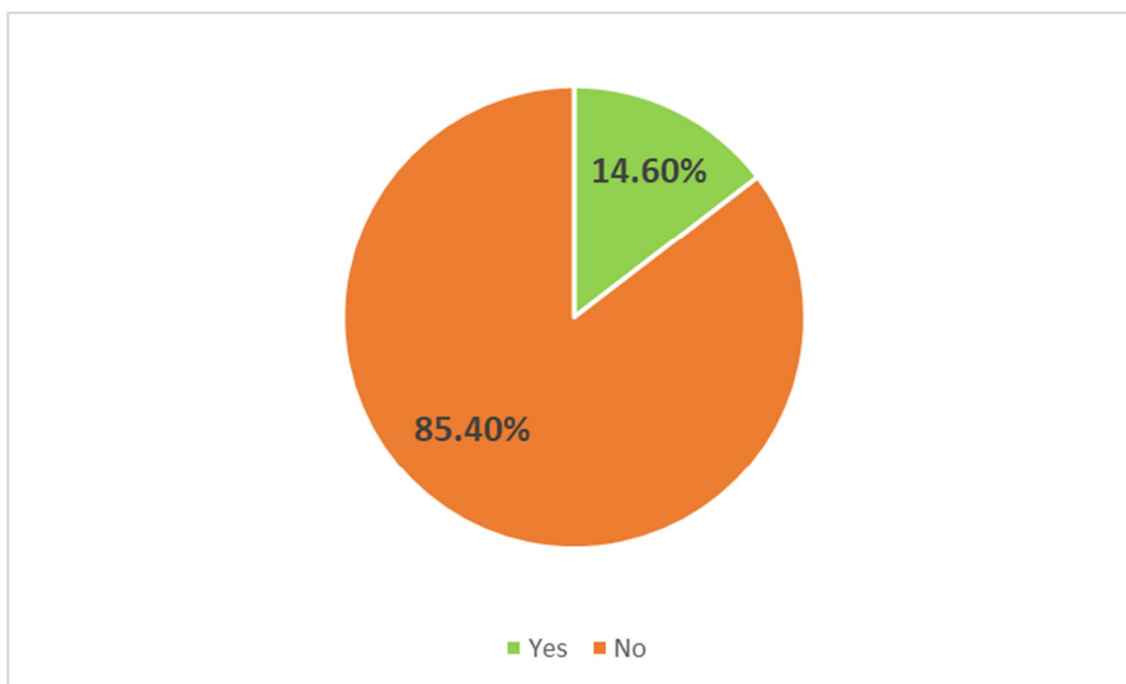
Nurses' personal data		
<b>Age</b>		
• <30 yrs.	61	<b>49.6</b>
• 30- <40 yrs.	34	27.6
• ≥ 40yrs	28	22.8
<b>Mean±SD = 27.83±6.384</b>		
<b>Gender</b>		
• Male	24	19.5
• Female	99	<b>80.5</b>
<b>Educational Qualification</b>		
• Diploma degree in nursing	39	31.7
• Technical institute of nursing	57	<b>46.4</b>
• Bachelor's degree in nursing	26	21.1
• Master's & Ph.D. degree in nursing	1	0.8
<b>Years of experience</b>		
• < 5 years	51	41.5
• 5-10 years	19	15.4
• >10 years	53	<b>43.1</b>
<b>Mean±SD = 4.156±1.375</b>		
<b>Residence</b>		
• Rural	59	48.0
• Urban	64	<b>52.0</b>
<b>Marital status</b>		
• Single	21	17.1
• Married	98	<b>79.7</b>
• Divorced	1	.8
• Widow	3	2.4
<b>Department</b>		
• Neonatal Intensive Care Unit	48	<b>39.0</b>
• Pediatric Department	13	10.6
• Outpatient Clinics	15	12.2
• Emergency Department	9	7.3
• Pediatric Intensive Care Unit	22	17.8
• Dar-Salam Department	12	9.8
• Sterilization Department	4	3.3

**Table (1):** shows that, (49.6 %) of the studied nurses' ages are less than 30 years old with a mean age of  $27.83 \pm 6.384$  years, (80.5%) of them are females, and (46.4) of them graduated from the technical institute of nursing. Regarding years of experience, (43.1%) of studied nurses have more than ten years of experience with a mean score of  $4.156 \pm 1.375$ , (52%) of them are from urban areas, and (79.7%) of them are married. Furthermore, (39%) of the studied nurses work in the neonatal intensive care unit



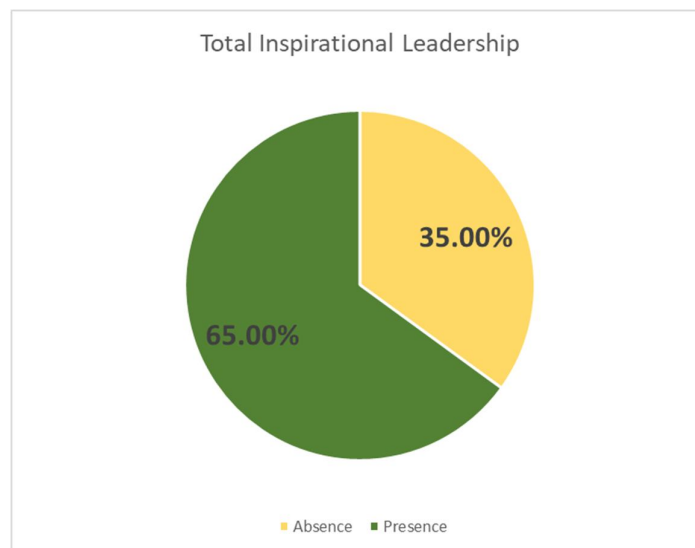
**Figure (1): Frequency distribution of the nurses' attendance at a seminar or workshop about inspirational leadership (no=123).**

**Figure (1):** indicates that, (96.7%) of the studied nurses didn't attend a seminar or a workshop about inspirational leadership, while (3.3%) of the studied nurses attended a seminar or a workshop about inspirational leadership



**Figure (2): Frequency distribution of the nurses' attendance at a seminar or workshop about organizational excellence (no=123).**

**Figure (2):** illustrates that (85.4%) of the studied nurses didn't attend a seminar or workshop on organizational excellence, while (14.6%) of the studied nurses attended a seminar or a workshop on organizational excellence



**Figure (3): Nurses' perception toward total inspirational leadership (no=123).**

**Figure (3):** shows that, (65%) of the studied nurses perceive their supervisor as an inspirational leader



**Figure (4): Nurses' total level toward Organizational excellence (no.=123)**

**Figure (4):** presents that (50.4%) of the studied nurses have a moderate level toward organizational excellence, (33.3%) of them have a high level, while (16.3%) of them have a low level toward organizational excellence

**Table (2): Correlation between nurses' perception about inspirational leadership and Organizational excellence (no.= 123).**

Items		Inspirational leadership	organizational excellence
Inspirational leadership	r P- value		0.614** 0.002
organizational excellence	r P- value	0.614** 0.002	

\*= $p \leq 0.05$  (significant), NS= No Significant difference \* \* highly Statistically significant difference

**Table (2):** illustrates that there is a highly statistically significant positive correlation between the studied nurses' perception regarding inspirational leadership and their total perception regarding organizational excellence (p-value= 002)



## Discussion

Inspirational leadership empowers leaders to motivate and engage employees by conveying a compelling vision and fostering trust, creativity, and commitment. Transformational leaders stimulate intellectual growth, encourage innovation, and build strong psychological bonds with their followers, enhancing job satisfaction and organizational loyalty. By meeting employees' needs and aligning their efforts with strategic goals, inspirational leaders cultivate a sustainable organizational culture that drives long-term success, productivity, and adaptability in dynamic work environments (Toseef et al., 2022).

Organizational excellence is the ability to integrate and coordinate all parts of an organization to deliver high-quality outcomes that meet stakeholder expectations. It supports continuous improvement, technological adoption, rapid change, and competitive advantage while preserving the organization's culture and structure. Excellence is achieved through five key dimensions: leadership, strategy, partnerships and resources, knowledge, and service. Leadership, in particular, inspires staff through a shared vision and mission to drive performance and engagement (Mohammed & Al-Zeidi, 2022; Al-Subaie, 2022).

Organizational excellence results from effective leadership, a clear vision, and a culture of continuous improvement, where empowered teams and accountability drive sustained quality and innovation. Inspirational leadership plays a central role by motivating employees toward a shared mission, fostering commitment, and encouraging staff to exceed expectations. Leaders who lead by example create an environment of empowerment and ownership, which fuels the ongoing pursuit of OE and long-term success in healthcare settings (Sharma et al., 2023; Wahab & Din, 2024).

**Regarding the nurses' personal data**, the current study showed that slightly less than half of the studied nurses' ages were less than thirty years old with a mean age of  $(27.83 \pm 6.384)$  years, the majority of them were females, and less than half of them graduated from the Technical Institute of Nursing. Regarding years of experience, more than two-fifths of studied nurses had more than ten years of experience with a mean score of  $(4.156 \pm 1.375)$ , more than half of them were from urban areas, and more than three-quarters of them were married.

Furthermore, less than two-fifths of the studied nurses worked in the neonatal intensive care unit.

**Regarding nurses' attendance at seminars or workshops on inspirational leadership or organizational excellence**, the current study revealed that the vast majority of participants had not attended such training. Similarly, the current findings demonstrated that the majority of nurses had not participated in any seminars or workshops related to organizational excellence. The low attendance of nurses at seminars or workshops on IL and OE reflects a significant gap in ongoing professional development. It also suggests that healthcare institutions may not be prioritizing or providing sufficient opportunities for leadership and excellence training, which are essential for improving staff motivation, performance, and ultimately, patient care quality. Furthermore, Emam et al., (2024) conducted a study evaluating the impact of a leadership development program utilizing 360-degree feedback on head nurses' leadership practices and demonstrated significant improvements in leadership knowledge and practices among participants, suggesting that such programs can effectively enhance leadership capabilities in healthcare settings.

Similarly, Ahmed & Ibrahim, (2024) assessed the influence of a transformational leadership educational program on nursing leaders in Mosul, Iraq, and reported substantial enhancements in participants' understanding and application of transformational/IL principles, indicating the positive impact of targeted educational interventions. Contrastingly, in regions with more established leadership training programs, higher levels of IL and OE perception have been reported. For instance, a study in Qatar by Al Thawabiya, (2023) who studied leadership styles and transformational leadership skills among nurse leaders in Qatar found that nurse leaders exhibited strong transformational leadership traits, attributed to the availability of structured leadership development initiatives.

**Concerning nurses' perception toward total inspirational leadership**, this current study revealed that less than two-thirds of the studied nurses perceived their supervisor as an inspirational leader. From the researcher's point of view, this finding is a positive indicator of effective leadership practices within the studied hospital, many supervisors may demonstrate key characteristics of inspirational leadership, such as the ability to motivate, articulate a compelling vision, and foster a positive work environment. However, more than one-third did not share this perception, indicating a need for further development and support to ensure IL is universally experienced across all nursing units.

This result aligned with the findings of **Kilan, (2022)** who studied improving the educational process in the Education Administration of Riyadh and reported a high level of inspirational leadership. Similarly, **Alghamdi, (2024)** found a moderate level of perceived inspirational leadership. **Al-Thabthawee & Saeed, (2022)**, in their study about IL and its role in reducing job bullying, reported a common perception of IL among participants.

In contrast, **Chienwattanasook & Onputtha, (2022)**, investigated the impact of IL on green supply chain management and organizational performance and reported a low level of IL among participants. Similarly, **Elwan, (2021)** in their study about IL and its relationship to achieving organizational ambidexterity found very low levels of perceived IL among the study sample.

**Concerning nurses' overall perception of organizational excellence (OE)**, the present study revealed that slightly more than half of the studied nurses reported a moderate level of OE, while slightly more than one-third perceived a high level, and more than one-sixth demonstrated a low level of OE. From the researcher's point of view, these findings suggest that although a considerable proportion of nurses recognize positive aspects of organizational performance and quality, there remains a need for improvement in fostering a consistently high perception of excellence across the workforce. The moderate-to-high levels reported by the majority may reflect the presence of effective administrative structures, quality improvement efforts, or leadership initiatives; however, the presence of low-level perceptions among a notable minority signals a need for targeted strategies to enhance organizational culture, employee engagement, and management practices.

This current study foundation was consistent with **Alaqla, (2020)** whose study assessed the effect of the relationship between OE and quality of work-life on organizational commitment and revealed that nursing participants have reported a high level of organizational excellence. Also, the present study findings were supported by the study findings by **Ahmed et al., (2023)** who showed that the majority of the study sample perceived a high level of organizational excellence.

On the contrary, the current result agreed with **El-Gazar & Zoromba, (2021)** that conducted a study titled "Nursing Human Resource Practices and Hospitals' Performance Excellence: The Mediating Role of Nurses' Performance" in Port Said Hospitals, Egypt and revealed a low level of hospital

performance excellence. Also, the current study was incongruent with **Abdelrahman & El-boudy, (2023)** who investigated the relationship between management by wandering around, organizational excellence, and work engagement among nurses. Their findings revealed that nurses reported a low level of OE within their hospital. Also, the current study disagreed with **El-Guindy et al., (2022)** who investigated the nursing management staff's talent and creativity practices and their relation with organizational development and excellence and found that nursing management staff had a poor perception of OE within their hospital.

**Regards to the Correlation between nurses' perception about inspirational leadership and OE**, the current study illustrated that there was a highly statistically significant positive correlation between the studied nurses' perception of IL and their total perception of OE ( $p\text{-value} = 0.02$ ). This finding indicates that IL may play a critical role in shaping how nurses evaluate the quality, performance, and overall excellence of their organizations, reinforcing the importance of leadership development in healthcare settings.

In alignment with the current findings, **Kilan (2022)**, reported a statistically significant positive correlation at the 0.01 level between the overall dimensions of IL and organizational excellence. Also, this result was consistent with the study by **Toseef et al., (2022)**, who demonstrated that IL fosters mutual trust and innovative communication, which in turn contribute to sustainable organizational outcomes leading to OE.

Additionally, **Ahmed et al., (2023)**, emphasized leadership as a key dimension of organizational excellence. They highlighted that effective leaders are those who formulate and champion an organization's mission and vision, while also inspiring and motivating employees to remain committed to organizational goals. Moreover, **Mohamed et al., (2025)** reported that IL positively influences nurses' psychological well-being, mediated by perceived organizational support as an important component of organizational excellence. This indicates that IL plays a pivotal role in enhancing organizational performance and excellence.

## **Conclusion**

Less than two-thirds of the studied nurses perceived their supervisors as exhibiting inspirational leadership behaviors. In terms of organizational excellence (OE), slightly more than half of the participants reported a moderate level of

OE, while slightly more than one-third perceived a high level, and more than one-sixth reported a low level. Finally, there was a highly statistically significant positive correlation between nurses' perception of inspirational leadership and their total perception of organizational excellence.

### Recommendations

- Implement leadership development programs focusing on inspirational leadership skills for nurse managers.
- Incorporate inspirational leadership training into nursing management curricula.
- Establish mentorship systems to support leadership growth among nursing supervisors.
- Promote a supportive organizational culture that fosters trust and motivation.
- Conduct regular assessments and feedback on leadership practices and organizational performance.
- Encourage nurse involvement in decision-making to enhance engagement and organizational excellence.
- Support further research and policy development on leadership and organizational excellence in healthcare.

### Further Research:

- The mediating role of organizational culture and psychological safety in the relationship between inspirational leadership and organizational excellence among nurses
- The impact of inspirational leadership on sustaining organizational excellence in healthcare institutions
- Evaluating the effectiveness of leadership development programs on enhancing inspirational leadership and improving organizational excellence in nursing management

The influence of inspirational leadership on nurse retention, job satisfaction, and quality of Care implications for organizational excellence.

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