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Relationship of Application of Visionary Leadership and Staff Nurses' Intention to Remain at the Workplace: A Quasi-Experimental Correlational Study

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ABSTRACT:

Background: Application of visionary leadership in nursing units is expected to support staff nurses through clearer direction, meaningful communication, shared goals, and a more stable work climate. Retention of nurses is not achieved by policy alone; it is also shaped by how staff experience their immediate leaders in daily practice. In Saudi healthcare settings, where workforce transformation and nursing retention are strategic concerns, the relationship between staff-rated visionary leadership and intention to remain at the workplace deserves focused examination.

Aim: To examine the relationship between application of visionary leadership, as evaluated by staff nurses, and staff nurses' intention to remain at the workplace after implementation of a Visionary Leadership Education Program (VLEP).

Design/Methods: A quasi-experimental correlational analysis was conducted within a pretest-posttest educational intervention study in a tertiary maternity hospital in Taif, Saudi Arabia. The total study sample comprised 35 head nurses/nurse managers who attended the VLEP and 255 staff nurses who evaluated their managers' visionary leadership behaviours and reported retention-related loyalty. Four tools were used in the parent study: a visionary leadership knowledge questionnaire, a leadership competency scale, a staff evaluation of visionary leadership scale, and a staff loyalty scale. In this manuscript, staff loyalty is interpreted as retention-related intention because it includes sense of ownership, willingness to stay, and trust.

Results: Staff nurses' evaluation of visionary leadership increased from $M = 41.93$ to $M = 53.09$ out of 70 after the program (mean difference = 11.16; 95% CI 10.76-11.56; $t = 53.72$; $p < .001$). Staff retention-related loyalty increased from $M = 34.71$ to $M = 46.93$ out of 65 (mean difference = 12.22; 95% CI 11.69-12.75; $t = 56.40$; $p < .001$). Staff evaluation of visionary leadership correlated positively with staff retention-related loyalty ($r = .677$, $p < .001$), indicating a strong relationship. In simple regression, visionary leadership evaluation explained approximately 45.8% of the variance in staff retention-related loyalty ($R^2 = .458$, $F(1,253) = 214.07$, $p < .001$).

Conclusion: Application of visionary leadership was strongly and positively associated with staff nurses' intention to remain at the workplace. The findings suggest that when head nurses apply visionary leadership behaviours in a visible manner, staff nurses may

be more likely to report loyalty, trust, ownership, and willingness to stay.

Recommendations: Nursing directors and education departments should integrate visionary leadership application into head nurse development programs and link leadership evaluation to retention-supportive indicators, including willingness to stay, work climate, and staff trust.

INTRODUCTION

Problem statement and significance

Retention of staff nurses remains a central concern for nursing administration because it influences workforce stability, continuity of care, institutional memory, and the ability of clinical units to maintain safe and responsive services. In many hospitals, efforts to retain nurses focus on staffing numbers, incentives, or scheduling policies. These measures are important, of course, but they do not fully explain why nurses feel attached to a workplace or begin to think about leaving it.

Immediate nursing leadership is one of the closest organizational forces experienced by staff nurses. Head nurses and nurse managers translate policy into daily expectations, decide how communication flows in the unit, respond to conflict, provide feedback, and either support or weaken staff participation. It is here, in the ordinary flow of the ward, that leadership becomes visible. A nurse may not remember a strategic plan word for word, but she will remember whether her head nurse listened, explained, supported, and gave meaning to the work.

Visionary leadership is particularly relevant to retention-related outcomes because it emphasizes articulating a clear future direction, inspiring shared commitment, empowering staff, and aligning individual contributions with broader organizational goals. In nursing units, these behaviours may create an environment in which staff nurses feel that their work has value, their voice is considered, and their future within the organization is possible. This is not a soft issue; it is an administrative mechanism through which leadership can influence workforce stability.

International evidence supports the relevance of nurse manager leadership to nursing workforce outcomes. Cummings et al. (2021) reviewed factors and educational interventions influencing nursing leadership and emphasized that leadership development can influence workforce and work-environment outcomes. Similarly, Alluhaybi et al. (2023) reported that positive nurse manager leadership styles are associated with staff nurses' work engagement, while Alluhaybi et al. (2024) confirmed the relevance of leadership style to work engagement among staff nurses in Saudi Arabia.

The Saudi context gives this topic additional importance. Nursing transformation is aligned with Saudi Vision 2030 and requires attention to leadership capacity, workforce sustainability, and quality improvement. Alsufyani et al. (2020) linked national transformation with nursing policy and leadership strategies, showing that nursing leadership is not only a unit-level issue but also part of broader healthcare system development. In such a context, examining the relationship between visionary leadership application and staff nurses' intention to remain at work is timely and administratively meaningful.

Literature-based gap

Although leadership style has been widely studied in relation to job satisfaction, engagement, and turnover intention, fewer studies have focused specifically on visionary leadership application as perceived by staff nurses. Moreover, many educational leadership studies primarily report changes in managers' knowledge or skills without examining how those leadership changes relate to staff nurses' retention-related intention.

Recent literature indicates that nurse manager competence is closely related to nurses' job satisfaction and intention to leave. Mirzaei et al. (2024) found that perceived nurse manager competence was significantly related to job satisfaction and turnover intention among clinical nurses. Choi et al. (2022) similarly examined nurse manager competencies as predictors of staff nurses' job satisfaction and turnover intention. These studies support the basic premise that managerial behaviours matter for retention-related outcomes.

However, the available thesis-derived dataset offers a more focused opportunity: staff nurses evaluated the application of visionary leadership, and they also completed a loyalty scale that includes sense of ownership, willingness to stay, and trust.

Thus, the present manuscript examines the relationship between staff-rated visionary leadership application and intention to remain at the workplace, operationalized through retention-related loyalty. This wording is deliberate. The study did not use a separate turnover-intention scale; therefore, the paper avoids overclaiming and uses the available loyalty tool in a transparent way.

Aim of the study

The aim of this study was to examine the relationship between application of visionary leadership and staff nurses' intention to remain at the workplace after implementation of a Visionary Leadership Education Program.

Research hypotheses

H1: Staff nurses' evaluation of visionary leadership application will be significantly higher after the VLEP than before the program.

H2: Staff nurses' retention-related loyalty/intention to remain will be significantly higher after the VLEP than before the program.

H3: Staff nurses' evaluation of visionary leadership application will correlate positively with staff nurses' retention-related loyalty/intention to remain at the workplace.

H4: Staff nurses' evaluation of visionary leadership application will significantly predict retention-related loyalty/intention to remain at the workplace in simple regression.

H5: Staff nurses' evaluation of visionary leadership application will correlate positively with head nurses' leadership competency and knowledge.

METHODS

Design

A quasi-experimental correlational analysis was conducted within a pretest-posttest educational intervention study. The parent study evaluated the effect of a Visionary Leadership Education Program on head nurses' knowledge and leadership competencies, while the present manuscript focuses on the relationship between staff-rated application of visionary leadership and staff nurses' intention to remain at the workplace. The manuscript is reported in alignment with the TREND statement for nonrandomized evaluations and with the TIDieR checklist principles for intervention description (Des Jarlais et al., 2004; Hoffmann et al., 2014).

Setting

The study was conducted in a tertiary maternity hospital in Taif, Saudi Arabia, focusing on the maternity department. This clinical area was appropriate because maternity units require continuous communication, coordinated teamwork, emotional stability, and timely leadership support to maintain safe care and staff commitment.

Participants/Sample

The total sample in the parent study comprised 290 participants: 35 head nurses/nurse managers and 255 staff nurses. Head nurses/nurse managers were the recipients of the educational program, while staff nurses provided evaluation of their managers' visionary leadership behaviours and completed the retention-related loyalty scale. Nurse managers' mean age was 40.29 ± 7.65 years, whereas staff nurses' mean age was 32.77 ± 8.12 years. Most participants in both groups were female. Among nurse managers, 62.9% were head nurses and 37.1% were supervisors. Among staff nurses, 91.8% were staff nurses and 8.2% were charge nurses.

Intervention: Visionary Leadership Education Program

The VLEP was delivered to head nurses/nurse managers using a structured educational approach intended to strengthen knowledge and practical application of visionary leadership. The program addressed articulating a clear vision, inspirational communication, emotional intelligence, coaching and mentoring, conflict resolution, collaboration, team leadership, professional presentation, and leading change initiatives.

Educational strategies included short lectures, discussion, clinical examples, reflective questioning, and practical application to unit-level situations. The emphasis was not only on defining visionary leadership, but on helping head nurses apply it in staff communication, feedback, conflict management, and change implementation. Program fidelity was supported through a structured program plan, standardized learning objectives, and consistent pre-post assessment tools.

Data Collection Tools

Four tools were used in the parent study. First, a visionary leadership knowledge questionnaire consisted of 20 multiple-choice questions scored from 0 to 20. Second, a leadership competency scale consisted of 17 items scored on a four-point Likert scale, with total scores ranging from 17 to 68. Third, a staff nurses' evaluation of nurse managers' visionary leadership scale consisted of 14 items scored on a five-point Likert scale, with total scores ranging from 14 to 70. Fourth, a staff loyalty scale consisted of 13 items scored on a five-point Likert scale, with total scores ranging from 13 to 65.

For the present manuscript, staff nurses' evaluation of nurse managers' visionary leadership was used as the indicator of application of visionary leadership. Staff loyalty was interpreted as retention-related intention to remain at the workplace because the scale includes sense of ownership, willingness to stay, and trust. This operational interpretation is transparent and avoids claiming a separate turnover-intention tool that was not used.

Validity and Reliability

Content validity was established through expert review of the tools, program content, and educational booklet. A pilot study involving 10% of the planned sample in a different hospital supported feasibility and reliability. Reported pilot Cronbach's alpha values were 0.859 for the knowledge questionnaire, 0.874 for the leadership competency scale, 0.823 for the visionary leadership evaluation scale, and 0.905 for the staff loyalty scale.

Pilot Study

The pilot study included 29 participants and was excluded from the final analysis. It was used to assess clarity, timing, feasibility, and the reliability of the tools and procedures.

Ethical Considerations

Ethical approval was obtained from the Institutional Review Board at Batterjee Medical College, approval number DTMJ-002. Permissions were also obtained from hospital administration. Written informed consent was secured from all participants. Confidentiality, voluntary participation, and the right to withdraw without penalty were emphasized.

Fieldwork/Procedure

Fieldwork proceeded through three phases: baseline assessment, implementation of the Visionary Leadership Education Program for head nurses/nurse managers, and post-program evaluation. Staff nurses completed the visionary leadership evaluation scale and staff loyalty scale before and after program implementation. Head nurses completed the knowledge and leadership competency tools in the parent study.

Statistical Analysis

Data were analyzed using SPSS version 22. Descriptive statistics summarized participant characteristics and outcome scores. Paired t-tests assessed pre-post differences in staff evaluation of visionary leadership and staff loyalty. Pearson correlation tested the relationship between visionary leadership application and retention-related loyalty/intention to remain. Simple linear regression was calculated using staff evaluation of visionary leadership as the predictor and retention-related loyalty as the outcome. Statistical significance was set at $p < .05$.

RESULTS

Sample characteristics

The study included 35 head nurses/nurse managers and 255 staff nurses. Nurse managers were older and more experienced than staff nurses. Among nurse managers, nearly two thirds were head nurses and slightly more than one third were supervisors. Among staff nurses, the large majority were staff nurses, while a small proportion were charge nurses.

Staff nurses' evaluation of visionary leadership application

Table 1 shows that staff nurses' evaluation of visionary leadership application increased from $M = 41.933$ to $M = 53.094$ out of 70 after the program. The mean difference was 11.161, 95% CI 10.758-11.563, $t = 53.723$, $p < .001$. In practical terms, the score increased from 59.9% to 75.8% of the maximum possible score, indicating more positive staff-rated application of visionary leadership after the program.

Staff nurses' intention to remain at the workplace

Table 1 also shows that staff nurses' retention-related loyalty/intention to remain increased from $M = 34.714$ to $M = 46.933$ out of 65 after the program. The mean difference was 12.220, 95% CI 11.694-12.746, $t = 56.399$, $p < .001$. This represents an increase from 53.4% to 72.2% of the maximum possible score, suggesting stronger willingness to stay, ownership, and trust after the program.

Table 1. Pre-post differences in staff-rated visionary leadership application and retention-related loyalty

Outcome	Pre mean	Post mean	Mean difference	95% CI	t	p value
Visionary leadership application	41.933	53.094	11.161	10.758-11.563	53.723	< .001
Retention-related loyalty	34.714	46.933	12.220	11.694-12.746	56.399	< .001

Note. Visionary leadership evaluation maximum = 70; staff retention-related loyalty maximum = 65. Staff loyalty was interpreted as retention-related intention because it includes sense of ownership, willingness to stay, and trust.

Relationship between visionary leadership application and intention to remain

Table 2 shows that staff nurses' evaluation of visionary leadership application correlated positively with staff retention-related loyalty/intention to remain ($r = .677$, $p < .001$). This indicates a strong positive relationship: the more staff nurses perceived their managers as applying visionary leadership behaviours, the higher their retention-related loyalty and intention to remain at the workplace.

Staff evaluation of visionary leadership also correlated positively with head nurses' leadership competency ($r = .641$, $p < .001$) and head nurses' knowledge ($r = .356$, $p < .001$). Staff retention-related loyalty correlated positively with leadership competency ($r = .589$, $p < .001$) and head nurses' knowledge ($r = .255$, $p < .001$).

Table 2. Correlation matrix among study variables

Variable	1	2	3	4
1. Staff evaluation of visionary leadership application	1			
2. Staff retention-related loyalty/intention to remain	.677***	1		
3. Head nurses' leadership competency	.641***	.589***	1	
4. Head nurses' visionary leadership knowledge	.356***	.255***	.474***	1

Note. *** $p < .001$. Staff evaluation of visionary leadership was used as the indicator of visionary leadership application.

Prediction of staff nurses' intention to remain

A simple linear regression model showed that staff evaluation of visionary leadership application significantly predicted staff retention-related loyalty/intention to remain. The standardized regression coefficient was $\beta = .677$, and visionary leadership application explained approximately 45.8% of the variance in staff retention-related loyalty ($R^2 = .458$, $F(1,253) = 214.07$, $p < .001$). This result supports the practical interpretation that visible application of visionary leadership is strongly linked to staff nurses' intention to remain.

Table 3. Simple regression predicting staff nurses' retention-related loyalty/intention to remain

Predictor	Standardized beta	R	R ²	F	p value
Visionary leadership application	.677	.677	.458	214.07	< .001

Note. The simple regression statistics were derived from the reported Pearson correlation between staff evaluation of visionary leadership and staff retention-related loyalty (n = 255).

DISCUSSION

Principal findings

The present study showed that staff-rated application of visionary leadership was strongly associated with staff nurses' intention to remain at the workplace. After implementation of the VLEP, staff nurses reported higher evaluation of visionary leadership application and stronger retention-related loyalty. The correlation between the two variables was strong, and the simple regression model indicated that visionary leadership application explained nearly half of the variance in retention-related loyalty. This is a noteworthy finding for nursing administration.

Interpretation of the relationship

The positive relationship may be explained by the nature of visionary leadership itself. When head nurses communicate a meaningful direction, involve staff in shared goals, provide support, and manage change constructively, staff nurses may experience the unit as more organized, respectful, and worth staying in. This may strengthen their sense of ownership, trust, and willingness to remain. The finding is conceptually consistent with the staff loyalty scale used in this study, which captures positive speaking about the organization, willingness to stay, and trust in colleagues and management.

The result also aligns with recent evidence that nurse manager competence and leadership style are linked to nurses' workplace outcomes. Mirzaei et al. (2024) reported that perceived nurse manager competence was associated with job satisfaction and turnover intention among clinical nurses. Choi et al. (2022) similarly found that nurse manager competencies predicted staff nurses' job satisfaction and turnover intention. Although these studies focused on competence rather than visionary leadership specifically, they support the broader administrative principle that what managers do is closely related to whether nurses wish to remain.

Application of visionary leadership in the Saudi nursing context

The finding has particular relevance in Saudi Arabia, where nursing workforce stability and leadership capacity are important components of healthcare transformation. Alsufyani et al. (2020) emphasized the need to link nursing transformation with Saudi Vision 2030 through policies and strategies that strengthen the profession. In the present study, visionary leadership application was not examined as an abstract construct; it was evaluated by staff nurses who observed their head nurses in practice. This gives the result practical value for hospital nursing administration.

Alluhaybi et al. (2024) found that clinical nurse manager leadership styles were associated with staff nurses' work engagement in Saudi Arabia. The present finding extends this logic to retention-related loyalty. Staff nurses who perceive better visionary leadership application may be more likely to remain because they experience clearer direction, stronger relational support, and a sense that their contribution is connected to a larger purpose.

Administrative meaning of intention to remain

In this manuscript, intention to remain was interpreted through the staff loyalty scale, particularly its components of willingness to stay, sense of ownership, and trust. This interpretation should be read carefully. The study did not use a separate turnover-intention instrument, and therefore it cannot report turnover intention as a distinct outcome. Still, the loyalty scale captures retention-related attitudes that are highly relevant to workplace stability. In administrative practice, such attitudes often precede actual retention behaviour. Simply put, before a nurse stays, she usually first feels that the workplace is still worth staying in.

The large post-program increase in retention-related loyalty suggests that leadership development may contribute to a more retention-supportive environment. However, because the design was quasi-experimental and lacked a control group, the study should not overclaim causality. It is more accurate to state that improved staff-rated visionary leadership was associated with stronger intention to remain.

Contribution to nursing administration

This manuscript contributes to nursing administration by connecting leadership application with a workforce outcome that matters directly to managers: staff nurses' intention to remain. The evidence supports the inclusion of visionary leadership behaviours in head nurse competency frameworks, staff development programs, and leadership appraisal systems. It also supports using staff feedback as an indicator of whether leadership development is reaching the unit level.

A modest but important lesson emerges here. Leadership education should not stop at the training room door. Its value is shown when staff nurses experience clearer communication, fairer support, and a more meaningful work climate. This is where leadership development becomes a retention strategy.

Strengths

The study used staff nurses' evaluation of leadership application rather than relying only on head nurses' self-assessment. This strengthens the practical interpretation of the findings. Another strength is the use of pre-post data, confidence intervals, correlation analysis, and regression-based interpretation. The manuscript also provides transparent operationalization of intention to remain through the available retention-related loyalty scale.

Limitations

The study has limitations. First, the quasi-experimental one-group design limits causal inference because improvements may have been influenced by other contextual factors. Second, the study was conducted in one maternity hospital, limiting generalizability. Third, staff nurses were nested under head nurses, and future studies should use multilevel models to account for this structure. Fourth, intention to remain was measured through a staff loyalty scale rather than a separate validated turnover-intention or intention-to-stay scale. Fifth, the post-program follow-up was short, and actual retention outcomes were not measured.

Implications for nursing administration

For nursing directors, the findings support embedding visionary leadership application into head nurse competency requirements. For training departments, leadership programs should include staff-observable behaviours such as vision communication, constructive feedback, coaching, conflict resolution, and inclusive decision-making. For quality and workforce planning units, retention-related indicators should be monitored alongside leadership evaluation scores.

CONCLUSION

Application of visionary leadership, as evaluated by staff nurses, was strongly and positively related to staff nurses' intention to remain at the workplace. After the Visionary Leadership Education Program, staff nurses reported higher evaluation of visionary leadership and stronger retention-related loyalty. The findings suggest that visible visionary leadership behaviours among head nurses may support staff nurses' ownership, trust, willingness to stay, and workplace attachment. Although causality cannot be firmly established, the study supports visionary leadership development as a practical nursing administration strategy for strengthening retention-supportive work environments.

RECOMMENDATIONS

Nursing directors should include visionary leadership application in head nurse role descriptions, leadership appraisal, and competency frameworks.

Education and training departments should provide structured VLEP sessions for newly appointed and current head nurses.

Staff nurses' feedback should be collected periodically to evaluate whether visionary leadership behaviours are visible in everyday unit practice.

Retention-related indicators, including willingness to stay, trust, absenteeism, and turnover intention, should be monitored after leadership development programs.

Post-training coaching should be used to help head nurses translate visionary leadership concepts into communication routines, feedback practices, and change initiatives.

Future implementations should add a validated intention-to-stay or turnover-intention instrument to distinguish loyalty, intention to remain, and actual retention outcomes.

FUTURE RESEARCH

Future studies should use controlled or stepped-wedge designs where feasible and should include multiple hospitals and clinical departments. Follow-up measurement at three, six, and twelve months is recommended to determine whether improved visionary leadership application is sustained and whether it predicts actual retention. Future research should also use validated intention-to-stay and turnover-intention scales and should apply multilevel analysis because staff nurses are naturally clustered under specific head nurses and units.

DECLARATIONS

Ethics approval and consent to participate: Ethical approval was obtained from the Institutional Review Board at Batterjee Medical College, approval number DTMJ-002. Written informed consent was obtained from participants.

Consent for publication: Not applicable.

Availability of data and materials: Data are available from the corresponding author upon reasonable request and according to institutional approval.

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Authors' contributions: Samia M. Almutairi developed the study under academic supervision, collected and analyzed the data, and drafted the manuscript. Prof. Dr. Nehad Ezz Fekry and Prof. Dr. Fatma A. Abed provided academic supervision, methodological guidance, and critical manuscript revision. All authors approved the final manuscript.

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