



## The Relationship Between Smart Leadership and Organizational prosperity

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### Abstract

**Background:** The study of smart leadership is one of the important topics in the health sector, which has a role in achieving organizational prosperity and promoting the employment of smart leadership for senior management in applying the most appropriate practices and decisions to achieve prosperity in the sector healthy. **Aim of the study:** This study aims to assess relationship between smart leadership and organizational prosperity. **Research Design:** A descriptive correlational research design was utilized to conduct the study. **Setting:** The current study was conducted at Military Production Hospital in Helwan . **Subjects:** The study subjects was include all nursing personnel available and willing to participate at the study during data collection. **Sampling:** A convenience sample. **Tools of Data Collection:** two tool was used for data collection included; Smart leadership questionnaire, organizational prosperity questionnaire. **Results:** The study results revealed that more than half of the studied nursing personnel have a perceived a moderate level of smart leadership and organizational prosperity as a perceived by studied nursing personnel. In addition to the presence of a highly statistically significant difference between levels of smart leadership and organizational prosperity, at  $P = 0.000$ . **Conclusion:** This study concluded that represents that there was a highly statistically significant positive strong correlation between smart leadership and organizational prosperity as perceived by the studied nursing personnel. **Recommendations:** This study recommended that perform training program to enhance perception of the staff toward smart leadership and organizational prosperity, Provide complementary human relations between staff nurses and leaders and Replicate the study on many of hospitals with large sample sizes for generalize the study findings.

**Keywords:** Leadership , Organizational Prosperity , Smart leadership.

### Introduction

Leadership in health services is important for following innovations and adapting to current situations so leadership is more localized and nursing personnel oriented approach. Nursing leadership is a vital component in the delivery of patient care. It shapes the profession, facilitates policies on mentoring and evidence-based practice and helps navigate change in challenging times (Faulks et al., 2021) & (Ronquillo et al., 2021). Smart Leadership is a term used to refer to the characteristic behavior that a leader uses to direct, motivate, guide and manage people so that they can complete assigned tasks to help in achieving the overall organizational goals. Smart Leadership is the practice of blending high performance experience and knowledge with personal and collective integrity within the context and culture of collaboration. Smart leadership is critical to facilitate quality care, patient safety, and positive staff development (Friaset al., 2021 & Richard-Eaglin., 2021).



Organizational prosperity contributes to increasing the creation of sustainable value through the provision of unprecedented products, and achieves sustainability in the profitability of the organization, growth and excellence (*Osisioma, & Mgbemena., 2024*). organizational prosperity, however, those who wrote about comprehensive organizational excellence have come very close to organizational prosperity, and as mentioned in the aforementioned paragraphs, and define dimensions and measures for organizational prosperity in a broad and clear manner, and the reason for this may inevitably be due to the novelty of the topic for those interested and researchers and the existence of historical foundations for it indirectly and give the importance of organizational prosperity for organizations in hot dynamic conditions, especially the health sectors Change and through it you can reach the pinnacle of organizational success for longer periods of time (*Oyedijo., 2023*).

In order to study the relationship of influence and correlation between the variables of the research, the researchers considered exploring the impact of smart leadership with its dimensions in achieving organizational prosperity in it's dimensions in health, due to the important role that the health sector plays in society because the health sector is one of the sectors that keeps pace with contemporary developments, so it is necessary to give smart leadership is of great importance as it affects the completion of work in organizations and thus achieve organizational prosperity (*Ghonimawy et al., 2020*).

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

The study of smart leadership is one of the important topics in the health sector, which did not receive sufficient attention by writers and researchers. It highlights the importance of research in measuring, testing and diagnosing the reality of smart leadership and its role in achieving organizational prosperity and promoting the employment of smart leadership for senior management in applying the most appropriate practices and decisions to achieve prosperity in the sector healthy (*Jassim-Kazem et al., 2020*). Based on The Study by (*Specchia et al., 2021*). There is a positive relationship between smart leadership and organizational prosperity, concluded the study that smart leaders need to promote technical and professional competencies, but also act to improve staff satisfaction and prosperity. Moreover, according to *Aziz., (2022)*. Who reported that 72.5% of studied employee had organizational prosperity, mean score for innovation domain was 3.58, intellectual capital domain was 3.63, and organizational agility was 3.659. Also, related to *Al-Taweel & Al-Hawary., (2021)*. Who found that mean score of innovation domain was 3.69 and leadership unity was 3.50 .

Today, prosperity is of paramount importance not only for developed countries but also for developing and less developed countries The importance of organizational prosperity in organizations lies in the ability to face all environmental challenges, achieve economic and social stability for the organization, and increase the level of creativity and sustainable innovation by providing services and products that achieve customer satisfaction, as well as increasing the organization's ability to survive· grow, and excel by increasing its sustainable competitiveness (*Varney., 2024*).

It was found from the study *Ghonimawy et al., (2020)*. That approximately 16% of organizational prosperity is due to the change in the leadership emotional intelligence and that approximately 4% of the change in organizational prosperity is due to the change in the leadership spiritual intelligence and that approximately 3.8 % of the change in organizational prosperity is due to the change in leadership rational intelligence. Therefore, the researcher interested in studying this relationship between nurses' smart leadership & organization prosperity.

### **Aim of the current study:**

This study aims to assess relationship between smart leadership and organizational prosperity.

### **Research Question:**

Is there relationship between smart leadership & organizational prosperity?

### **I- Technical Item:**

The technical item includes research design, setting, subject, and tools for data collection.

### **Research Design:**

A descriptive correlational research design was utilized to conduct the study.

### **Research Setting:**

The study was conducted in all departments at Military Production Hospital which is located in Helwan. The Military Production Hospital, with a capacity of 250 beds, the hospital is providing its services for many patients in Helwan. And considered the main hospital to receive road accident victims in Helwan and its suburbs. The



hospital consists of two buildings, first building consists of six floors: The ground floor (consists of separate administrative offices, a small lecture hall, the kitchen, followed by the blood bank, and the laundry. In the opposite direction, there is an open-heart surgery unit, an open-heart care unit include (6 beds), two cardiac catheterization units, followed by an MRI unit, And seven different outpatient clinics .The first floor consists of: The emergency department which include (4 rooms for patients with 17 beds) and nursing office and outpatient clinics which include (18 clinic) and radiology department and a medical analysis laboratory. The second floor consists of : Operating rooms which include (6 rooms), and incubation department which include (20 bed) and Pediatric ICU which include (9 bed ), and Pediatric unit which include (18 bed).The third floor consists of: two inpatient department (36 bed). The fourth floor consists of : ICU which include(20 bed) ,and CCU which include (9 bed), and inpatient department which include (18 bed).The fifth and sixth floor each on consists of two inpatient department which include (72 bed). The second building consists of one floor for dialysis which include (2 rooms) with (25 beds).

### Research Subjects

A convenience sample of nursing personnel who were available in the previously mentioned hospital at the time of data collection. (Nursing personnel) means that all nursing work at the hospital at any position (nursing leaders, supervisors, head nurses and staff nurses). Whereas, the hospital has a capacity of (n=150) nursing personnel. Also, 50 nursing personnel during data collection (vacation, maternity leave, child care leave, sick leave and resignations). So, the total number of nursing personnel who were available and agreed to participate in the study were (n=100) out of n=150 nursing personnel.

**The Tool (I) is smart leadership questionnaire which is consist of two parts:**

#### Part 1: Personal characteristics:

This scale included personal data of nurses (Age, Gender, Experience, Marital status, Nursing qualification, Job title, Department, Wages) .

#### Part 2: Smart Leadership questionnaire:

It was modified by researcher based on (*Ronthy., 2013*). It was used to assess nurses' smart leadership, it will include **70** items verified on 3 dimensions as: The first dimension was included: (emotional leadership, 22 items), The second dimension was included: (rational leadership, 18 items), The third dimension (Spiritual leadership, 30 items).

**1- Scoring system:** Each item was scored as five likert scale "Strongly agree, Agree, neutral, Disagree, Strongly disagree" and is scored 5,4, 3, 2, 1. The scoring is summed up and converted into percentage score.

**Total score** =70 items × 5 likert scale = 350

**2- Scoring system for reversed items:** Each item was scored as five likert scale "Strongly agree, Agree, neutral, Disagree, Strongly disagree" and is scored 1,2, 3, 4, 5. The scoring is summed up and converted into percentage score. **The reversed items** was include: 3 items verified on 2 dimensions as: The first dimension was included:(emotional leadership, 2 items), second dimension was included:(rational leadership, 1 items).

**Total score for reversed items** : 3 items × 5 likert scale = 15

**It classified into three levels:**

- High smart leadership level if the total score was equal or more than (80-100)%, it means equal or more than) 280: 350
- Moderate smart leadership level if the total score was equal (60-80) %, it means equal) =↓ 280 : 210.
- Low smart leadership level if the total score was less than 60 %,it means less than) = ↓ 210 : 70.

#### Tool (II) Organization prosperity Questionnaire:

It was modified by researcher based on (*Hamoudi et al., 2020...etc*). And be used to assess organizational prosperity level. It includes 18 items verified on 3 dimensions as: Innovation (5 items), intellectual capital (6 items), organizational agility (7 items).

**Scoring system:** Each item was scored as five likert scale "Strongly agree, Agree, neutral, Disagree, Strongly disagree" and is scored 5, 4, 3, 2,1. The scoring is summed up and converted into percentage score.

**Total score**= 18 items × 5 likert scale = 90

**It classified into three levels:**

- High organization prosperity level if the total score was equal or more than 80-100%, it means equal or more than) = 90 : 72 points.
- Moderate organization prosperity level if the total score was equal 60-80%, it means equal) = 72: 54 points.
- Low organization prosperity level if the total score was less than 60 %, it means less than) = 54 : 18 points.

**Validity of the tools:**

Validity of the tools were gone namely face validity and content validity it was translated into Arabic and tested by jury group of five experts from (**Ain shams university, Damanhur university, Fayoum university, Cairo university**), of specialized in nursing administration through an opinionnaire sheet to measure the validity of tools. Researcher verified the availability of psychometric conditions (validity, reliability, discrimination coefficient) of tool as follows:

**Face validity and Content validity**

Jury opinions were elicited regarding the tools format, layout and clarity of its parts. In this research, researcher relied on the validity of jury members to emphasize the validity of content, and validity of internal consistency, following is an explanation for this:

Validity by Jury (Content Validity): researcher presented questionnaire in its initial form to (5) experts in Administration nursing Content validity was conducted to determine the appropriateness of each item to be included in the questionnaire sheet. Minor modifications were done based on jury opinions.

**Reliability of the tools:**

Cronbachs alpha is commonly used as a measure of the internal consistency (reliability). The coefficient normally ranged between 0 and 1. The closer it is to 1.0, the greater internal consistency of the items in the scale. Nunnlay (1978) has indicated (0.7) to be an acceptable reliability coefficient but lower coefficient (0.6) are sometimes used in literature.

**Table (1):** Descriptive statistics and result of reliability

Smart Leadership		
Variables of smart leadership	No of items	Alpha Cronbach test
Emotional leadership	22	0.908
Spiritual leadership	30	0.913
Rational leadership	18	0.878
Total	70	0.967

**Table (1):** represents that the total a measure of the internal consistency (reliability) of smart leadership questionnaire is 0.967. this mean that it has accepted reliability.

**Table (2):** Descriptive statistics and result of reliability analysis (cronbachs alpha value) for the study subjects, cronbachs alpha for:

Organizational prosperity		
Dimensions of organizational prosperity	No of items	Alpha Cronbach test
Innovation	5	0.861
Intellectual capital	6	0.811
Organizational agility	7	0.794



Total	18	0.938
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**Table (2):** represents that the total organizational prosperity questionnaire reliability score accepted by (0.938).

### **Ethical Considerations:**

The research approval was obtained from the Faculty of Nursing ethical committee of Helwan University before starting the study, an approval was obtained from the director of military production hospital. Informed consent was obtained from each participating subject prior to data collection, they were informed about the purpose and expected outcomes of the study and they were assured that, the study was harmless and their participation was voluntary and they had the right to withdrawal from the study at any time without any reason. They also were assured that, anonymity and confidentiality guaranteed, as well the gathered data that used for the research purpose only. Ethics, values, culture and believes were respected.

### **Operational Design:**

It includes the preparatory phase, pilot study and fieldwork.

#### **Preparatory phase:**

It included reviewing the most current national, and international related literature and theoretical knowledge from various aspects of the study through using books, articles, the internet, periodicals, and journals to develop tools for data collection.

#### **Pilot study:**

The researcher was modified the tools after reviewing of the tools by the experts. After that the researcher was conduct a pilot study to ascertain the clarity, relevance, and applicability of the study tools and to determine obstacles that may be encountered during data collection. It also helped to estimate the time needed to fill out questionnaire tools. The pilot study was carried out on (10%) of the total sample size equal (n=10) from nursing personnel, rephrasing of some questions was done to ensure clarity of the questions and to be easily understood by nurses. However, it helps in estimation of the time needed to collect data and determine the obstacles. Accordingly, the tools were not have major modification. So the nursing personnel who were participating in pilot study were included in the study sample.

#### **Field work:**

Data was collected within 2 months started at the end of October 2023 and completed by the end of December 2023. After securing all official permissions the researcher met nursing director of the hospital to explain the aim of the study to gain the approval of data collection. Before beginning to collect data from the study subjects the researcher met with the nursing director of the hospital to determine the suitable time to collect the data and confirm the days and times to assess the smart leadership and organizational prosperity.

Before beginning of data collection from the study subjects the researcher introduced herself to the study subjects, explain the aim of the study and informed them their information will be treated confidential and will be used only for the purpose of research, for this reason the researcher used in the questionnaire sheets codes not the name of participants because they was worried about anyone know their answers In the questionnaire sheet additionally, each participant was notified about the right to accept or refuse to participate in the study and obtaining a verbal consent to participate in the study or withdraw from the study at any time.

The researcher presented and assessed the smart leadership and organizational prosperity by using tools (smart leadership Questionnaire sheet& organizational prosperity Questionnaire sheet ) of data collection, from(3-4)hours \day,2days \week to collect the data. Data was collected in the morning and afternoon shifts and the subjects filling the questionnaire in presence of the researcher to explain all questions were answered. The time required for each nurse to fill the questionnaire around 15 to 25 minutes. The researcher checked completed of each filled sheet after the nurse completed it to ensure the absence of any missing data.

**Administrative design:**

To carry out the study, official letters issued from the faculty of nursing Helwan University explain the aim of the study to the director of Military Production hospital either medical or nursing for obtaining the permission for data collection. Individual oral consent also was obtained from each subject in the study.

**Statistical design:**

Data entry and quantitative data were organized, tabulated, and statistically analyzed by using SPSS software (statistical package for the social science) (version32, SPSS Inc. Chicago, IL, USA). Numerical data were presented as mean and standard deviation, SD values; qualitative data were presented as frequencies (No) and percentages (%). Cronbachs alpha coefficient was used to determine the reliability of the tool.

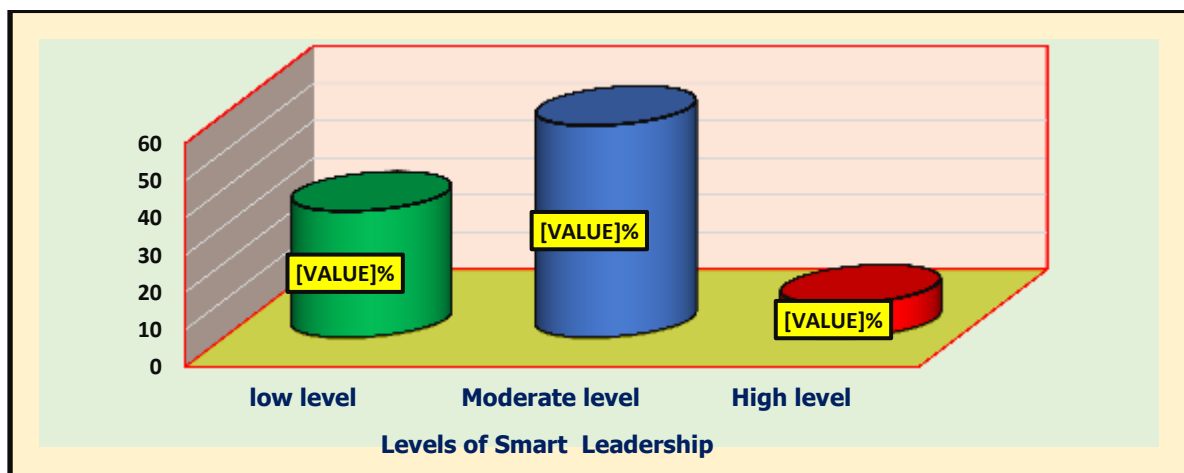
- Chi square test ( $\chi^2$ ). Was used to determine whether statistically significant differences between two or more independent groups. Pearson correlation<sup>®</sup> was used to determine significant correlations between the variables. The significance level was set at  $P < 0.05$  for interpretation the result of tests of significance so the P- value was considered significance as the following: P-value  $< 0.05$  was considered significant., P-value  $< 0.001$  was considered highly significant., P-value  $> 0.05$  was considered insignificant., R-value correlation and linear regression.

**Results****Table (1):** Frequency distribution of personal characteristic among the studied nursing personnel (n= 100)

Personal characteristic		No	%
Age (year)	▪ 20 < 25 Yrs.	1	1.0
	▪ 25 < 30 Yrs.	14	14.0
	▪ 30 < 35 Yrs.	22	22.0
	▪ 35 < 40 Yrs.	30	30.0
	▪ $\geq 40$ Yrs.	33	33.0
	▪ <b>Mean <math>\pm</math> SD</b>	<b>39.36 <math>\pm</math> 7.77</b>	
Marital status	▪ Single	13	13.0
	▪ Married	69	69.0
	▪ Widower	12	12.0
	▪ Divorce	6	6.0
Job title	▪ Staff nurse	70	70.0
	▪ Charge nurse	9	9.0
	▪ Head nurse	13	13.0
	▪ Supervisor	8	8.0
	▪ Nursing director	0	0.0
Years of Experience in nursing	▪ < 1 years.	1	1.0
	▪ 1 < 3 Yrs.	5	5.0
	▪ 3 < 5 Yrs.	9	9.0
	▪ 5 < 10 Yrs.	15	15.0
	▪ 10 < 15 Yrs.	30	30.0
	▪ $\geq 15$ Yrs.	40	40.0
	▪ <b>Mean <math>\pm</math> SD</b>	<b>12.23 <math>\pm</math> 6.41</b>	

Qualification	▪ Nursing Diploma	32	32.0
	▪ Technical Institute	54	54.0
	▪ Bachelor's degree	13	13.0
	▪ Master's degree	1	1.0
Wages	▪ 2000 < 3000.	1	1.0
	▪ 3000 < 4000.	10	10.0
	▪ 4000 < 5000.	79	79.0
	▪ ≥ 5000	10	10.0
	▪ Mean ± SD	4745 ± 709.15	

**Table (1)** shows that more than one-third (33%) of the age of the studied the nursing personnel was ≥ 40 years old, with a mean age of  $39.36 \pm 7.77$ . Additionally, mor than half (69% & 70%) of them were married and being staff nurse respectively. Considering, years of experience, two-fifth (40%) of the studied the nursing personnel had experience lasting ≥ 15 years with a total mean of  $12.23 \pm 6.41$ . Moreover, more than half (54.5%) of them were holding a certificate of a Technical Institute of nursing. Finally, more than three-quarters (79%) of the studied the nurses' wages are ranged between 4000 to 5000 pounds with a total mean of  $4745 \pm 709.15$ .



**Figure (1):** Frequency distribution of smart leadership levels as perceived by studied nursing personnel (n= 100)

**Figure (1)** illustrates that more than half (57%) of the studied nursing personnel have a perceived a moderate level of smart leadership perception, followed by more than one-third (34%) of them had a low level. While the minority less than one-fifth (9%) of the studied nursing personnel have a high-level of smart leadership as perceived by studied nursing personnel.

**Table (2):** Total mean score of smart leadership levels as perceived by studied nursing personnel (n= 100)

Smart leadership	Min	Max	$\bar{x} \pm SD$	$\bar{x}_w \pm SD$	Degree	Rank	F Test	P value
Emotional Leadership	22	97	$74.16 \pm 11.88$	$3.37 \pm 0.54$	3	1 <sup>st</sup>	380	0.000**
Spiritual Leadership	68	136	$99.71 \pm 14.50$	$3.32 \pm 0.48$	3	2 <sup>nd</sup>		

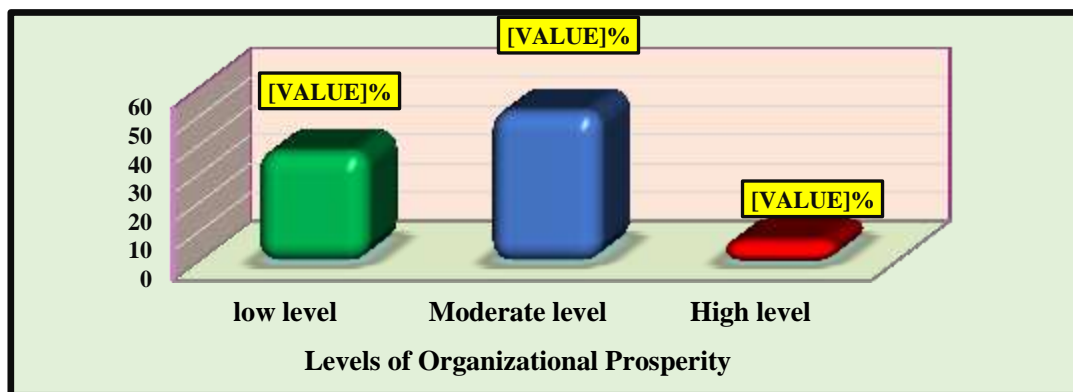
<b>Rational Leadership</b>	26	80	51.89 ± 10.01	2.88 ± 0.55	3	3 <sup>rd</sup>		
<b>Total</b>	116	313	225.7 ± 35.91	3.19 ± 0.51	3	-	-	-

\*Significant  $p \leq 0.05$

F: ANOVA Test

\*\*Highly significant  $p \leq 0.01$

**Table (2):** represents that the total mean score of smart leadership level as perceived by the studied nursing personnel is  $\bar{x} \pm SD = 225.7 \pm 35.91$  (from total smart leadership levels score is 350). Additionally, the emotional leadership gained the higher weight mean ( $3.37 \pm 0.54$ ) and ranked as the first dimensions of smart leadership. While the rational smart leadership dimensions gained the lower weight mean ( $2.88 \pm 0.55$ ) and ranked as the last dimensions of smart leadership.



**Figure (2):** Frequency distribution of Organizational prosperity levels as perceived by the studied nursing personnel. (n= 100)

**Figure (2)** illustrates that **more than half (53%)** of the studied nursing personnel perceived a moderate level of organizational prosperity, followed by less than **two-fifth (39%)** of them had a low-level perception. While the **minority less than one-fifth (8%)** of the studied nursing personnel perceived of organizational prosperity a high level.

**Table (3):** Total mean score of organizational prosperity levels as perceived by the studied nursing personnel (n= 100)

Organizational prosperity	Min	Max	$\bar{x} \pm SD$	$\bar{x}_w \pm SD$	Degree	Rank	F Test	P value
Innovation	9	25	17.79 ± 3.26	3.56 ± 0.65	4	1 <sup>st</sup>	105.0	0.000**
Intellectual capital	8	26	15.21 ± 4.26	2.53 ± 0.71	2	3 <sup>rd</sup>		
Organizational agility	9	31	23.06 ± 4.11	3.29 ± 0.58	3	2 <sup>nd</sup>		
<b>Total</b>	26	82	56.06 ± 11.32	3.12 ± 0.63	3	-	-	-

\*Significant  $p \leq 0.05$

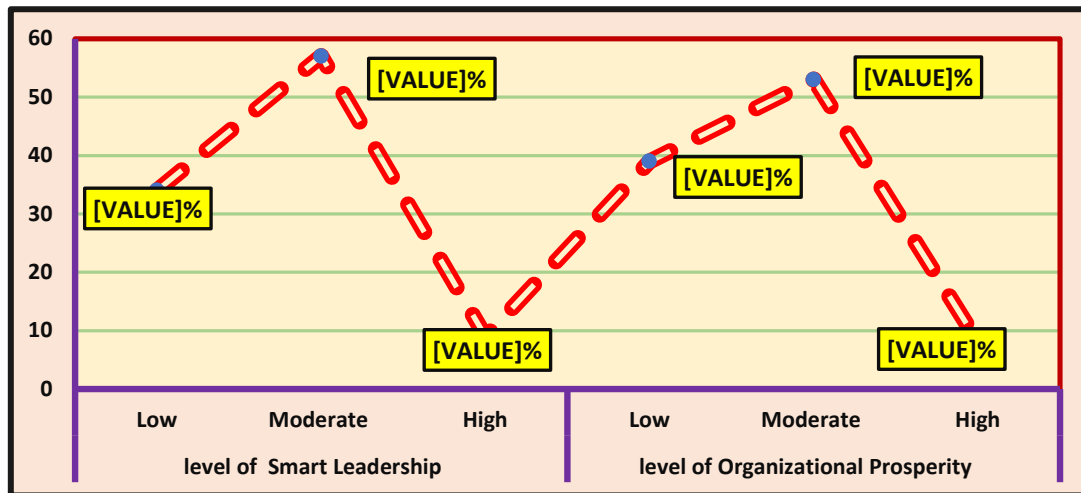
F: ANOVA Test

\*\*Highly significant  $p \leq 0.01$



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**Table (3):** represents that the total mean score of organizational prosperity levels as perceived by the studied nursing personnel is  $\bar{x} \pm SD= 56.06 \pm 11.32$  (total score is 90). Additionally, the innovation dimension gained the higher weight mean ( $3.56 \pm 0.65$ ) and ranked as the first dimensions of organizational prosperity. While the intellectual capital dimensions gained the lower weight mean ( $2.53 \pm 0.71$ ) and ranked as the last dimensions of organizational prosperity. In addition to the presence of a highly statistically significant difference between the total mean scores of different dimensions of organizational prosperity, at  $P = 0.000$ .



**Figure (3):** Frequency distribution of total level of smart leadership and organizational prosperity as perceived by the studied nursing personnel (n= 100)

**Figure (3)** illustrates that **more than half (57% & 53%)** the studied nursing personnel perceived a moderate level of smart leadership and organizational prosperity respectively.

**Table (4):** Correlation between dimensions of smart leadership and dimensions of organizational prosperity as perceived by the studied nursing personnel (n= 100)

Items			Dimension of smart leadership		
			Emotional Leadership	Spiritual Leadership	Rational Leadership
Organizational prosperity	Innovation	r	0.937	0.966	0.908
		p	0.000**	0.000**	0.000**
	Intellectual capital	r	0.924	0.974	0.985
		p	0.000**	0.000**	0.000**
	Organizational Agility	r	0.978	0.962	0.914
		p	0.000**	0.000**	0.000**
<b>Total</b>		r	<b>0.992</b>		
		p	<b>0.000**</b>		

\*Significant  $p \leq 0.05$

\*\*Highly significant  $p \leq 0.01$

**Table (4):** represents that there was a highly statistically significant positive strong correlation between dimensions of smart leadership (**Emotional, spiritual and rational**) and dimensions of organizational fidelity (**Innovation, intellectual capital and agility**) as perceived by the studied nurses, at r ranged from (0.924 to 0.985 &  $P = 0.000$ ).



**Figure (4):** Simple scatter dot between smart leadership and organizational prosperity as perceived by the studied nursing personnel (n= 100)

**Figure (4):** represents that there was a highly statistically significant positive strong correlation between smart leadership and organizational prosperity as perceived by the studied nursing personnel, at  $r = -0.992$  &  $P = 0.000$ .

## Discussion

Regard to personal characteristics of the studied nurses, shows that more than two-thirds of the studied nurse were a female while about one-third of them were a male. shows that more than one-third of the age of the studied the nurses was  $\geq 40$  years old. Additionally, mor than half of them were married and being staff nurse respectively. Considering, years of experience, two-fifth of the studied the nurses had experience lasting  $\geq 15$  years. Moreover, more than half of them were holding a certificate of a Technical Institute of nursing. Finally, more than three-quarters of the studied the nurses' wages are ranged between **4000 to 5000** pounds. This finding matched with study of **Dietz & Hartog., (2022)**. Who conducted study entitled "Is There a Difference Between The Organizational Commitment and Organizational prosperity of Generation X and Generation Y Nurses?" and revealed that more than half of the studied nurses were married and had Technical Institute of nursing.

On other hand, this result dissimilarity with **Hassan., (2023)**. Who conducted study about intra-organizational prosperity and an investigation of current conditions of executive organizations in the country, organization culture management and reported that the highest percentage of the studied nurses were females, have diploma of secondary technical school, their age less than 30 years old. Also, the highest percentage of them were single, and having experience from 3 -5 year.

This study illustrates that more than half of the studied nurses have a perceived a moderate level of smart leadership perception, followed by more than one-third of them had a low level. While the minority less than one-fifth of the studied nurses have a high-level of smart leadership as perceived by studied nurses. In addition to the presence of a highly statistically significant difference between levels of smart leadership, at  $P = 0.000$ . This result contradicted with **Arabi., (2022)**. Comparative study of theories regarding well-being, effective leadership and prosperity, economic science and research semi-yearly: mediated by and perceived organizational support, found that the highest percentage of smart leadership in organization. On other hand, this finding contradictory with **Ali et al., (2023)**. Who conducted study about "Spiritual Leadership and its Relation to Organizational prosperity among Nurses at Hospital" and found that lowest percentage of smart leadership level.

The current study represents that the total mean score of smart leadership level as perceived by the studied nurses is  $\bar{x} \pm SD = 225.7 \pm 35.91$  (from total smart leadership levels score is 350). Additionally, the emotional



leadership gained the higher weight mean ( $3.37 \pm 0.54$ ) and ranked as the first dimensions of smart leadership. While the rational smart leadership dimensions gained the lower weight mean ( $22.88 \pm 0.55$ ) and ranked as the last dimensions of smart leadership. In addition to the presence of a highly statistically significant difference between the total mean scores of different dimensions of smart leadership, at  $P = 0.000$ .

This finding harmony with study of **Abdel Nasser et al., (2021)**. The role of the integration strategy and its impact in achieving organizational excellence, an applied study in the research and development department, Al-Denair magazine that most of the studied of nurses had satisfactory level of smart leadership. On the other hand, as a result of the research of **Polat., (2022)**. Effect of organizational support perception of teachers on smart leaders perception of their schools The claim that the perceived organizational support creates a feeling of obligation for the employees that they have to contribute to the welfare of the organization and help the organization reach its goals and that the employees consequently feel more committed to the organization and make more efforts is also supported. As a result, it can be said that the research establishes that 'the smart leadership and organizational commitment of the employees are stronger when they feel their organization is committed to them and supportive of them not only by themselves'.

The current study illustrates that more than half of the studied nurses perceived a moderate level of organizational prosperity, followed by less than two-fifth of them had a low-level perception. While the minority less than one-fifth of the studied nurses perceived of organizational prosperity a high level. In addition to the presence of a highly statistically significant difference between levels of organizational prosperity, at  $P = 0.000$ . This finding similar to study of **Danaei Fard et al., (2023)**. who conducted study about " Investigation of prerequisites affecting the formation of organizational prosperity as a phenomenon, (Case study of governmental organizations) general management studies and concluded that less than two thirds of the studied nurses had a moderate level of organizational prosperity. Dissimilar with this study by **Dehshiri., (2024)**. No theory or empirical study exists to identify directly the process of establishing the professional identities of nurses. However, the importance of the categories in the process was emphasized by the extant reports. In the 'organizational prosperity, process, commitment was identified as an important stage.

This study represents that the total mean score of organizational prosperity levels as perceived by the studied nurses is  $\bar{x} \pm SD = 56.06 \pm 11.32$  (total score is 90). Additionally, the innovation dimension gained the higher weight mean ( $3.56 \pm 0.65$ ) and ranked as the first dimensions of organizational prosperity. While the intellectual capital dimensions gained the lower weight mean ( $2.53 \pm 0.71$ ) and ranked as the last dimensions of organizational prosperity. In addition to the presence of a highly statistically significant difference between the total mean scores of different dimensions of organizational prosperity, at  $P = 0.000$ . This finding agreement with study of **Hughes., (2022)**. Nurses want a safe working environment, and their perception of workplace safety positively correlates with innovation. On other hand, this result disagreement with study by **Mubashar et al., (2023)** that conducted study about "Job security as a predictor of work alienation among Egyptian travel agencies' employees" and reported that majority of the studied nurses had moderate perception of innovation. This difference between studies might be due to different setting and type of sample.

The current study illustrates that more than half the studied nurses perceived a moderate level of smart leadership and organizational prosperity respectively. This finding was in arrangement with **Fadhila & Sulistiyani., (2024)** who conducted study entitled "The Influence of Motivation, Working Environment and Career Development toward smart leadership and organizational prosperity" and concluded that there was moderate statistically positive correlation between all dimensions of smart leadership and organizational prosperity respectively. among the studied nurses at  $P = 0.000$ ). This finding disagreed of **Hardikasari et al., (2023)**. The smart leadership dimensions are influenced by the extent to which an individual realizes the distinctive characteristics of their work in terms of the degree of independence.

The current study represents that there was a highly statistically significant positive strong correlation between dimensions of smart leadership (**Emotional, spiritual and rational**) and dimensions of organizational fidelity (**Innovation, intellectual capital and agility**) as perceived by the studied nurses, at  $r$  ranged from (0.924 to 0.985 &  $P = 0.000$ ). This finding as a supported of **Kotter., (2024)**. The strength of association among these variables may be particularly important in terms of particularly considering challenges that these institutions presently confront in the context of maintaining quality and effectiveness. there was a highly statistically significant positive strong correlation between dimensions of smart leadership and dimensions of organizational prosperity among the studied nurses, at  $r$  ranged from (0.924 to 0.985 &  $P = 0.000$ ).



The current study represents that there was a highly statistically significant positive strong correlation between smart leadership and organizational prosperity as perceived by the studied nurses, at  $r = 0.992$  &  $P = 0.000$ . Agreement of this finding **Boukamcha., (2022)**. This has strong effect on the success of organizations. The organizations should adopt a strategic approach to diversity management for building employees' there was a highly statistically significant positive strong correlation between smart leadership and organizational prosperity among the studied nurses, at  $r = 0.992$  &  $P = 0.000$ .

## Conclusion

**On the light of the findings of the current study, it can be concluded that:**

The current study represents that there was a highly statistically significant positive strong correlation between smart leadership and organizational prosperity as perceived by the studied nurses, at  $r = 0.992$  &  $P = 0.000$ .

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## Recommendations

**Based on the current study the following recommendations suggested that:**

### *At the organizational level*

- Enhance concept about organizational prosperity for the innovation in almost of managerial activities.
- Maintain resources for development of the staff practices to achieve professionalism.
- Enhance perception of the staff toward smart leadership and organizational prosperity by perform training program.

### *At personal level*

- Conduct self-learning continuously to improve smart leadership performance, skills, and intellectual capital for increase organizational prosperity.
- Train on good division of work into small groups.
- Provide complementary human relations between staff nurses and leaders.

### *At further research*

- Determine the relationship between smart leadership and job satisfaction.
- Determine the relationship between organizational prosperity and organizational productivity.

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