

The Devastating Impact of Toxic Leadership on Health-Care Organizations

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Abstract

Objectives

In the intricate and high-stakes environment of health care, the influence of leadership extends far beyond administrative duties, directly impacting both staff well-being and patient care. This comprehensive study examines the pervasive issue of toxic leadership within health care organizations, characterized by destructive behaviors and unethical practices.

Methods

The study aims to examine the presence of toxic leadership in healthcare institutions based on online employee reviews. Here's a detailed breakdown of the study's methodology:

Sample Selection: The study started with a sample of 200 healthcare institutions across the United States. These institutions were presumably selected to represent a diverse range of hospital-based healthcare units in terms of size, location, and type.

Initial Screening: The first phase of the study involved an initial screening to identify potential cases of toxic leadership. This involved examining institutions where employee reviews indicated signs of poor leadership. A total of 39 organizations were excluded at this stage because their low ratings were attributed to factors other than leadership, such as resource limitations or external pressures.

Detailed Examination: After the initial screening, 161 healthcare institutions remained. These organizations were deemed to have potential issues with toxic leadership, warranting further detailed examination.

Data Collection: The main data collection involved analyzing a substantial number of online reviews from two sources: GlassDoor and Google Maps (Review). Specifically, 14,086 reviews were analyzed from GlassDoor, and 19,297 reviews from Google Maps. These reviews provided insights

into the employees' perspectives and experiences, which are critical in assessing the leadership quality.

Analysis Approach: The analysis involved qualitative and quantitative methods to identify common themes and patterns related to leadership practices.

Outcome Measures: The outcomes of this study would focus on identifying signs of toxic leadership practices across the selected healthcare institutions. This could help in understanding how leadership affects employee satisfaction, retention, and possibly even patient care indirectly.

Implications: The findings from this study could be used to inform leadership training programs, develop interventions to improve leadership practices, and ultimately enhance organizational culture within healthcare institutions.

Results

The paper proposes systemic organizational changes aimed at cultivating a culture of transparency, empathy, and ethical accountability. These initiatives are crucial for safeguarding the well-being of healthcare professionals and ensuring the delivery of high-quality patient care in an environment free from the corrosive effects of toxic leadership.

Conclusion

The paper highlights that to effectively combat toxic leadership, health care organizations need to prioritize creating a work environment that promotes transparency, trust, and open communication.

1. Introduction

In the high-stakes environment of health care, effective leadership is not just a managerial asset but a cornerstone for ensuring optimal patient care and employee welfare. This paper delves into a pressing issue in this critical sector: the pervasive and often underestimated impact of toxic leadership. By contrasting detrimental leadership behaviors with the ideal of 'heart-centric' leadership – marked by empathy, ethical conduct, and emotional intelligence – this research seeks to illuminate a path toward more humane and effective management in health care settings.

Toxic leadership in health care is characterized by abusive conduct, lack of empathy, pronounced self-centeredness, and a tendency to manipulate or exploit others for personal gain. These traits starkly contrast with the compassionate, ethical, and emotionally intelligent demeanor essential for leaders in a field where human life and well-being are at the forefront. The relevance of addressing toxic leadership in health care cannot be overstated;

the implications for patient care and employee well-being are profound and multifaceted, extending far beyond the confines of typical organizational challenges.

This paper's objective is twofold: firstly, to provide a comprehensive analysis of the effects of toxic leadership within health care organizations, and secondly, to advocate for a leadership paradigm that integrates the 'heart' – a blend of empathy, ethical awareness, and emotional intelligence. In doing so, it aims to offer insights and practical strategies for cultivating a healthier, more resilient, and ethically sound organizational culture, ultimately enhancing the quality of patient care and the well-being of health care professionals.

This paper emphasizes the importance of organizations recognizing toxic leadership and understanding its substantial effects on followers and organizational culture. It advocates for tactics to address toxic leadership, including promoting a positive organizational culture, creating efficient communication channels for reporting toxic behaviors, and introducing training and support initiatives for both leaders and followers. These tactics seek to foster an organizational climate that is not just favorable but also grounded in ethical values. The study ultimately seeks to deliver a thorough comprehension of toxic leadership and its consequences, offering perspectives and suggestions for fostering a healthier, adaptable, and ethically grounded organizational environment.

This account thoroughly examines the complex concept of toxic leadership, delving into the intricate dynamics that characterize and propel it within organizational contexts. The scope goes beyond simply identifying toxic leadership behaviors, which include detrimental and damaging actions by leaders towards their subordinates and the organization as a whole, to gain a deeper insight into their systemic effects.

The passage explores the impact of toxic leadership in healthcare organizations, considering both short-term and long-term effects. In the immediate term, this type of leadership can lead to reduced employee morale and engagement, higher turnover rates, breakdowns in communication, and a focus on immediate gains at the expense of long-term sustainability.

Over time, prolonged exposure to toxic leadership can fundamentally change an organization's culture and result in systemic failure of organizational values. This erosion manifests in various ways including deterioration of employee well-being; damage to the organization's reputation; lack of innovation; legal and compliance risks; and ultimately even organizational decline or failure. The paper emphasizes the pressing need to address toxic leadership for a healthier and more ethically sound organizational environment.

This paper also aims to articulate the signs and symptoms of toxic leadership and its impacts, and to explore strategies and interventions to counteract its effects. By promoting a healthy organizational culture, implementing effective communication channels, and providing training and support for leaders and followers alike, organizations can foster a more positive and ethical work environment. Through this research, valuable insights and recommendations are offered for cultivating healthier, more resilient, and ethically grounded organizational landscapes. In the first part of the research paper, a literature analysis was conducted to outline the significance of the issue. The latter part of the study presents a discussion on the most important effects of toxic leadership, which helped in selecting areas included in the empirical research. Due to limitations regarding the length of a scientific article, the focus was on outlining the most important conclusions drawn from the study.

2. Materials and Methods

2.1. Literature review

Toxic leadership, characterized by abusive, authoritative, or neglectful behaviors, often plays a significant role in reducing employee morale. This decrease goes beyond just surface dissatisfaction and results in a deep disillusionment that impacts the entire workforce. For example, when a leader publicly criticizes employees, it immediately creates an atmosphere of fear and resentment while also gradually fostering a widespread feeling of being undervalued and psychological distress among employees. Another important factor is the lack of acknowledgment and recognition at work. When people's need for validation remains unmet, it can lead to a substantial decline in morale. This becomes particularly evident when employees consistently meet or exceed their performance targets but receive no appreciation from their superiors or the organization; feeling unappreciated can weaken the internal motivation that drives employee engagement.^{[1][2][3]} The pivotal role of communication in fostering employee morale and engagement is pivotal. Ineffective communication, particularly in the context of organizational changes or clarity on job expectations, can lead to significant uncertainty and disengagement among staff. When critical information about developments or shifts within the organization is not adequately conveyed, it results in not only confusion but also a profound erosion of trust and confidence in the organization. Furthermore, the issue of work overload introduces a complex layer to this dynamic. Persistent work overload, particularly when not counterbalanced by appropriate support or remuneration, can precipitate employee burnout. This condition is characterized by physical, emotional, and mental exhaustion. A striking example of this was observed in healthcare settings during the COVID-19 pandemic, where health-

care professionals encountered unprecedented workloads, contributing to a marked decline in morale and engagement. Toxic leadership can have profound and extensive ramifications on employee morale. This includes instilling feelings of fear, resentment, undervaluation, psychological distress, and a pervasive lack of recognition.^{[4][5][6][7]}

The absence of chances for career advancement also plays a part in reducing morale and involvement. When workers perceive limited prospects for progress or skill enhancement, their commitment to the job and the company declines. This situation is frequently observed in technology companies, where, for example, software engineers may encounter a halt in their career growth, leading to a gradual disengagement from both their work and the organization. An unhealthy workplace environment marked by intense competition, lack of cooperation, or unethical behavior can greatly diminish morale. In such settings, emphasis shifts from collective accomplishment to individual survival, nurturing an atmosphere of suspicion and animosity.^{[8][9]}

Decreased employee morale and engagement are indicative of deeper systemic issues within an organization, stemming from a confluence of factors such as toxic leadership, lack of recognition, poor communication, work overload, absence of growth opportunities, and an unhealthy work culture. Addressing these challenges requires a holistic and strategic approach, focusing on leadership development, transparent communication, recognition of efforts, work-life balance, career development opportunities, and the cultivation of a positive organizational culture. This comprehensive approach not only addresses the symptoms but also targets the root causes, fostering an environment where employees feel valued, respected, and engaged. It is through such strategies that organizations can hope to reverse the trends of decreased morale and engagement, thereby enhancing their overall productivity, creativity, and sustainability in the long term.^{[10][11]}

At the core of this relationship is the psychological and emotional impact of toxic leadership on employees. Leaders who exhibit toxic behaviors—such as manipulation, aggression, narcissism, and lack of empathy—create a work environment that is marked by fear, mistrust, and low morale. Employees in such environments often experience heightened stress, dissatisfaction, and a sense of alienation. These negative experiences directly correlate with employees' decisions to leave the organization. For example, in a corporate setting where a leader frequently engages in verbal abuse or public humiliation of team members, employees are likely to feel undervalued and disrespected. Such experiences can erode their commitment to the organization and increase their propensity to seek employment elsewhere.^{[12][13][14]}

Furthermore, toxic leadership often leads to a breakdown

in the social fabric of the workplace. Healthy professional relationships and a sense of belonging are vital for employee retention. However, toxic leaders tend to foster competitive, hostile, and unsupportive work environments. This erosion of positive workplace relationships further contributes to employees' decisions to leave. Consider, for instance, a scenario in an academic institution where a department head promotes favoritism and divisiveness. Such actions can disrupt collegiality and collaboration among faculty members, prompting those who feel marginalized or undervalued to seek more inclusive and supportive work environments.^{[9][13][15]}

Additionally, the repercussions of toxic leadership extend beyond the individual to the organizational reputation. As employees exit toxic environments, they often share their experiences through formal (e.g., Glassdoor reviews) and informal (e.g., social networks) channels. This can tarnish the organization's reputation, making it difficult to attract and retain talent. The cumulative effect of this can be seen in industries with high visibility, where a company's reputation for toxic leadership can significantly hinder its ability to recruit new talent. The linkage between toxic leadership and increased turnover rates is multifaceted, encompassing psychological impacts, deterioration of workplace relationships, stunted professional growth, and reputational damage. Addressing this issue requires more than just mitigating the symptoms; it necessitates a fundamental reevaluation and transformation of leadership practices and organizational culture. Fostering an environment of respect, support, and growth is essential for reducing turnover rates and ensuring the long-term health and success of the organization.

Toxic leadership, characterized by abusive, autocratic, or neglectful behaviors, often emerges as a primary catalyst for eroding employee morale. This erosion is not merely a surface-level disaffection but a profound disenchantment that permeates the workforce. A pertinent example can be drawn from a scenario where a leader publicly admonishes employees. Such actions not only create an immediate environment of fear and resentment but also gradually instill a pervasive sense of undervaluation and psychological distress among employees.^{[9][14]}

Decreased employee motivation and involvement frequently point to underlying systemic issues within a company. These problems may arise from various elements, such as detrimental leadership, lack of acknowledgment, ineffective communication, excessive work demands, absence of opportunities for growth, and an unsupportive work environment. Tackling these difficulties necessitates a comprehensive and strategic approach that emphasizes leadership enhancement, transparent communication methods, recognition of contributions, maintaining a healthy work-life balance, career advancement prospects

and fostering a favorable organizational climate.^{[17][18][19][6]} At the heart of this connection lies the psychological and emotional effects of harmful leadership on staff. Leaders who display toxic traits such as manipulation, aggression, narcissism, and a lack of empathy foster an atmosphere characterized by fear, distrust, and low morale. Employees in these environments often endure heightened stress, discontentment, and feelings of isolation. In a negative work atmosphere, chances for career growth, skills improvement, and impactful contributions are frequently restricted or unfairly allocated. This deficiency in growth prospects can strongly contribute to employee turnover. For instance, a technology firm provides a clear illustration of this issue where toxic leadership takes over decision-making and ignores input from employees, limiting opportunities for innovation, professional development, and sense of fulfillment in their positions.^{[20][13][18]}

Toxic leadership has effects not only on individuals but also on the reputation of the organization. When employees leave toxic environments, they often share their negative experiences through various channels like Glassdoor reviews and social networks, which can harm the organization's reputation and make it hard to attract and retain talented individuals. Industries with high visibility are particularly affected as a company's reputation for toxic leadership can greatly impede its ability to recruit new talent. The connection between toxic leadership and increased turnover rates is complex, involving psychological impacts, deteriorating workplace relationships, limited professional growth opportunities, and damage to reputation. Addressing this issue requires more than just dealing with the symptoms; it demands a fundamental re-evaluation and transformation of leadership practices and organizational culture. Creating an environment based on respect, support, and growth is crucial for reducing turnover rates while ensuring the long-term health and success of the organization.^{[21][4]}

Toxic leadership often creates an environment of fear and intimidation for employees. When leaders are known for using punitive measures in response to disagreement or feedback, employees are more likely to hold back their true opinions, concerns, and suggestions. In such an atmosphere, the exchange of important information is hindered. For instance, in a healthcare context, if a nurse manager is recognized for reacting severely to reports of issues or errors, nursing staff may choose not to express critical patient safety concerns. This lack of transparent communication can result in significant systemic deficiencies in patient care.

Moreover, toxic leaders frequently use manipulative or unclear communication strategies, which damages trust within the organization. This breakdown of trust creates an environment where rumors and misinformation can

thrive because employees have to interpret poorly communicated policies or decisions.^{[12][22][7]}

Another important factor to consider is the influence of detrimental leadership on cooperative communication. Successful collaboration hinges on transparent discussions, mutual consideration, and common objectives. Nevertheless, harmful leaders frequently establish isolated groups and promote a competitive atmosphere instead of a collaborative one. A specific instance of this can be seen in academic settings where administrators with personal interests and power struggles discourage collaborations between different departments. This results in disrupted communication among departments, impeding the institution's capability to promote interdisciplinary research and education.^{[23][18]}

Toxic leadership is often characterized by a focus on quick fixes and short-term achievements, typically driven by a leader's desire for personal success or validation. Such leaders tend to prioritize outcomes that are immediately measurable and beneficial to their interests, often at the expense of long-term organizational health and stability. This approach can lead to a series of short-term gains, which, while initially appearing beneficial, can mask underlying problems and lead to significant long-term costs for the organization.^{[24][25][21]}

Furthermore, in the realm of human resource management, toxic leaders may achieve short-term gains by overworking employees, neglecting work-life balance, and disregarding employee well-being. This approach can lead to short-term increases in productivity and cost efficiency. However, over time, this can result in high employee turnover, burnout, decreased morale, and a tarnished employer reputation, all of which are costly to rectify.^{[28][29][30]} The psychological repercussions experienced by individuals under toxic managerial oversight represent one of the most palpable outcomes. Personnel exposed to an antagonistic work setting marked by continual denigration and absence of support from superiors may display manifestations linked with stress, anxiety disorder symptoms, and depressive states. These mental health challenges extend beyond professional confines potentially disrupting family dynamics where participants were impacted personally, impinging on interpersonal relationships self-regard & overall life contentment. Notably within corporate atmospheres defined influenced or shaped extensively excessively demanding leaders who demean stressing workers (long hours relentless criticism etc) pressure-induced conditions e.g generalized anxieties can detrimentally affect someone's workplace effectiveness as well personal happiness^{[9][30][31][12][32]}

Additionally, the physical well-being of employees may be adversely affected within a malevolent work milieu. Prolonged stress, frequently resultant from malign lead-

ership, is recognized for intensifying physical health issues including hypertension, cardiovascular ailments, and diminished immune response. Reflect on an instance involving a manufacturing facility where employees are subjected to relentless oversight, rebuke, and the jeopardy of termination by a noxious supervisor. This unending state of tension can give rise to physiological symptoms such as elevated blood pressure, migraines, and exhaustion—significantly compromising workers' health while heightening their vulnerability to chronic medical conditions.^{[33][30][13][19][12]}

The societal well-being of employees is significantly impacted by the presence of toxic leadership. Within environments where trust is eroded and positive reinforcement is absent, the workforce might undergo feelings of isolation and estrangement. This phenomenon becomes particularly pronounced in fields that depend on teamwork and cooperative efforts, like healthcare or education sectors. For instance, within a hospital environment dominated by a toxic leader who instigates a culture centered around blame rather than collaboration, medical professionals may suffer from feelings of exclusion. This not only affects their psychological health but also adversely influences the standard of care they are able to offer patients. The prolonged exposure to such detrimental leadership can culminate in burnout—a condition characterized by profound emotional, mental, and physical fatigue resulting from extended periods of stress. Sectors known for their rigorous demands and fast-paced nature—such as technology or finance—are especially susceptible to this outcome. Taking an example from the tech industry: A scenario wherein leaders persistently set unattainable deadlines while neglecting employee work-life balance can catalyze cumulative stress leading to symptoms including withdrawal, lethargy, and diminished professional efficacy.^{[30][31][6][13]}

The decline in employee health and well-being due to toxic leadership represents a complex problem that involves mental, physical, and social dimensions. Such leadership not only harms the individual employees but also adversely affects the organization's overall vitality by contributing to reduced productivity, elevated turnover rates, and a detrimental workplace atmosphere. It is imperative for the long-term prosperity of organizations to confront toxic leadership effectively and cultivate an environment characterized by support, respect, and health for all employees.

The subsequent dimension warranting examination pertains to the ramifications of toxic leadership on organizational reputation, which unfold through a series of interconnected phenomena. Primarily, such leadership is often synonymous with unethical practices and decision-making. This scenario emerges when leaders prioritize person-

al advantage or short-term successes at the expense of ethical norms, culminating in actions detrimental not only to the entity's operational integrity but also subject to public scrutiny.^[30]

A damaged reputation can have long-lasting effects, significantly impacting the trust and confidence that various stakeholders—including customers, investors, and the general public—place in an organization. Such damage may prompt customers to seek alternatives, leading them to take their business elsewhere. Similarly, investors might withdraw their investments due to diminished faith in the company's leadership or future prospects. Moreover, a tarnished image can lead the general public to perceive the organization negatively. These reactions collectively contribute to sizable challenges for any corporation trying not just to attract new clients and retain existing ones but also striving for financial stability in a competitive marketplace.

An additional dimension is the organizational climate and ethos molded by detrimental leadership. Leaders of this nature frequently foster an atmosphere laden with fear, skepticism, and diminished spirit among workers, contributing to increased staff attrition rates and public revelations concerning the noxious corporate culture. In today's digital age, marked by social media platforms and websites like Glassdoor, adverse experiences shared by employees can swiftly be broadcasted widely, tarnishing the organization's image as a place of employment.

Furthermore, toxic leadership can negatively affect the quality of an organization's products or services. Leaders who overlook quality standards or excessively pressure employees can result in inferior offerings.

Toxic leadership fosters an environment that fundamentally opposes the cultivation of innovation. Innovation inherently demands a setting characterized by openness, willingness to take risks, and teamwork in solving problems. Yet, with toxic leadership at the helm, the organization often manifests a climate dominated by fear, conformity, and short-sightedness — conditions unfavorable for innovative pursuits.

A key manner by which toxic leadership impedes innovation lies in the quelling of employee creativity and willingness to embrace risk. Within a context where errors are met with severe repercussions and adherence to established norms is favoured, individuals become disinclined towards undertaking ventures that are essential for innovative processes. Illustratively, within a technology company, should leadership respond punitively to setbacks or unanticipated results, team members may refrain from testing novel concepts or suggesting atypical solutions. This reluctance towards risk-taking not only restricts per-

sonal creative endeavors but also diminishes the overall innovative potential of the organization.

Moreover, toxic leadership frequently results in inadequate communication and collaboration across the organization. Innovative endeavors generally necessitate a variety of viewpoints, coupled with a synthesis of disparate skills and concepts. Nonetheless, within an adverse setting marked by diminished trust and protective withholding of information, collaborative efforts are markedly hindered. Imagine an instance within a research and development section where a detrimental leader encourages rivalry and concealment among colleagues rather than cooperative engagement. This methodology can obstruct the unrestricted exchange of ideas and knowledge essential for inventive problem resolution.

Toxic leadership, frequently marked by unethical conduct, a disregard for organizational standards, and an emphasis on personal advancement, can substantially elevate the exposure of an organization to legal and compliance risks. This heightened risk primarily arises from the tendency of toxic leaders to place their own interests or immediate organizational benefits above long-term ethical commitments and compliance with legal norms.^{[36][37][38][39][40][41]}

Moreover, toxic leadership can cultivate a workplace environment that neglects adherence to legal and regulatory norms, particularly in highly regulated sectors. For instance, within the pharmaceutical sector, if a toxic leader pressures for speeding up drug approval processes while ignoring regulatory compliance requirements, it could result in significant breaches of healthcare laws and regulations. This poses risks not only to public health but also subjects the organization to legal liabilities, regulatory sanctions, and harms its credibility and trustworthiness.^{[30][39][31]}

Toxic leadership not only poses legal and compliance risks but can also lead to the overall decline or failure of an organization. This downward trajectory often originates from a gradual erosion of the core strengths of the organization, including its human resources, culture, reputation, and operational efficiency. Such leadership significantly diminishes employee morale and engagement, leading to increased turnover rates and the loss of vital talent crucial for an organization's capacity for innovation and competitiveness. Toxic leaders frequently base strategic decisions on their personal agendas rather than on what is in the best interest of the company's future success. This short-sighted decision-making process may result in overlooked opportunities, inefficient allocation of resources, and strategic missteps that ultimately precipitate organizational decline.^{[4][6]}

2.2. Research methodology

The research methodology employed for this study in-

involved a comprehensive literature review and analysis of existing studies and articles on toxic leadership and its impact on employee morale.

The study took place from February 1st to November 30th, 2023, involving a sample of 200 healthcare institutions in the United States. The selection process for hospitals was based on two main criteria: patient feedback from Google Reviews and employee feedback from Glassdoor comments. To be included in the study, organizations had to have a minimum of 300 reviews on each platform, with an average rating not exceeding 4.0 stars on Google Review and simultaneously not exceeding 4.0 stars on Glassdoor. Additionally, priority was given to institutions with higher review counts on Glassdoor.

The initial phase involved identifying potential cases exhibiting signs of toxic leadership which resulted in excluding 39 organizations where low ratings were attributed to other factors; this led to a more detailed examination qualifying 161 hospital-based healthcare units for further analysis.

During the project, a total of 14,086 reviews posted on the GlassDoor website and 19,297 reviews posted on Google Maps (Review) were analyzed. The specific nature of the analyzed initial data excluded the possibility of using AI solutions. Each individual review was subject to a qualitative assessment, and its results were recorded in a spreadsheet.

These selected entities underwent qualitative analysis focusing on employee and patient opinions as well as information available through organizational publications. Due to the diverse nature of these healthcare units in terms of legal structure, specialization, and ownership relationships, financial parameters were not analyzed to examine toxic leadership implications.

Due to the specificity of the issue and access to a limited dataset, whose nature does not guarantee complete objectivity, the calculation of the research sample and actions ensuring the possibility of generalizing the study results were omitted. Because of the extensive nature of the study and the emphasis on maintaining the highest quality of the research process, the conclusions obtained have significant cognitive value for both the scientific community and the community of healthcare service managers.

Literature Review: The paper extensively reviews existing literature on toxic leadership, drawing on academic journals, books, and theoretical frameworks to understand the dynamics of toxic leadership and its consequences.

Empirical Research: Reference to empirical studies and research findings in the field of organizational behavior and psychology, as cited in the document, suggests a reliance on existing empirical data to support arguments and conclusions.

Press and Media Analysis: The inclusion of press information and social media materials indicates an analysis of public and media perceptions of toxic leadership and its organizational consequences.

This research approach combines a comprehensive review of primary and secondary sources with a critical analysis of real-world instances and empirical data to explore the multifaceted impact of toxic leadership on health-care organizations and their employees.

3. Results

Before discussing the conclusions drawn from the study, it's important to emphasize that the most significant group of data consisted of opinions obtained from Glassdoor. The analysis of customer opinions aimed to verify whether and to what extent toxic leadership is reflected in customers' perceptions. As anticipated, this correlation was less distinct; however, it still provided valuable insights for understanding the impact of leadership on customer perceptions.

For the analysis of the collected empirical data, two criteria for division were applied. The first criterion was based on reputation as assessed by employees and, concurrently, by stakeholders (mostly patients and families' members). The first group GG1/GGR1 included hospitals with the lowest level of ratings (no more than 3 stars). The second group GG2/GGR2 ranged from 3.1 to 3.4 stars, the third GG3/GGR3 from 3.5 to 3.7 stars, and the fourth GG4/GGR4 from 3.8 to 4.0 stars. Responses from the first group constituted, respectively, 19.40% GG1(Glassdoor) and 22.44% GGR1 (Google Review). In the second group, it was 25.00% GG2 and 25.66% GGR2, in the third group 27.26% GG3 and 26.02% GGR3, and in the fourth group 28.34% GG4 and 25.97% GGR4.

The second criterion used for the analysis was professional groups. In this case, the focus was exclusively on data from Glassdoor. Responses were categorized according to four professional groups: Allied Health Professionals, Clinical Healthcare Professionals, Healthcare Administrative and Support Services, and Physicians. The largest number of evaluations came from the Allied Health Professionals group, accounting for 52.69%. Opinions from Clinical Healthcare Professionals constituted 30.71%, and those from Healthcare Administrative and Support Services made up 14.71%. The smallest group numerically was opinions provided by Physicians, which amounted to just 1.89%.

The structure of opinions given within each group in the hospital did not significantly differ from the values for the entire set.

The analysis of literary sources identified the 10 most significant consequences of toxic leadership, which were thoroughly discussed above. These include: Decreased Employee Morale and Engagement, Increased Turnover Rates, Communication Breakdown, Short-Term Gains at Long-Term Costs, Erosion of Organizational Culture, Deterioration of Employee Health and Well-being, Reputation Damage, Innovation Stagnation, Legal and Compliance Risks, and Organizational Decline or Failure. However, the analyzed data sources did not provide sufficient indications with respect to Short-Term Gains at Long-Term Costs, Legal and Compliance Risks, and Organizational Decline or Failure. In light of the above, the focus has been on analyzing the frequency of occurrence of 7 consequences of toxic leadership in various professional groups, taking into account the range in which the hospital is located based on its overall assessment.

Upon examining the data in [Charts 1 and 2](#), a clear correlation is evident between the overall hospital rating from both employee (Glassdoor) and stakeholder (GoogleReview) perspectives and the frequency of symptoms of toxic leadership. The only notable difference is the lower frequency of indications in stakeholder evaluations. This discrepancy is fairly apparent. In the stakeholder group, which primarily consists of patients and their family members sharing opinions on Google Review, the focus is usually on individual events and a segment of the organization's operations involving external individuals. Yet, a translation of leadership dysfunctions into their evaluations is noticeable. A symptomatic phenomenon is the alignment of ratings obtained in Glassdoor and GoogleReview. This doesn't imply identical ratings, but rather positioning within the same or adjacent ranges. Among the 161 hospitals analyzed, not a single case was found where a hospital was rated lowest in Glassdoor and highest in GoogleReview (or vice versa). Employee evaluations are usually similar to stakeholder ratings. Leadership dysfunctions evidently affect organizational efficiency. It's crucial to note that, unlike managerial dysfunctions, which can be quickly improved by identification and removal, addressing leadership dysfunctions is a complex and time-extended process. Leadership dysfunctions lead to the infection of organizational culture and the emergence of organizational sepsis.

The frequency of the consequences of toxic leadership was analyzed with respect to different professional groups. While similar trends can be observed across all professional groups, some differences are evident in the frequency of specific negative consequences. For Allied Health Professionals and Healthcare Administrative and Support Services, the most significant changes in frequencies concern Communication Breakdown and Reduced Work Efficiency. In contrast, for Clinical Healthcare Professionals, Deterioration of Employee Health and Well-being is

particularly pronounced resulting in increased health-related absences. This is supported by a positive correlation between employee organization ratings and staff turnover rates indicating that as organization ratings improve, the employee turnover rate decreases. These findings also apply to Physicians group but to a lesser extent with limited definitive conclusions drawn due to low response rate from this group presented in [Chart 6](#).

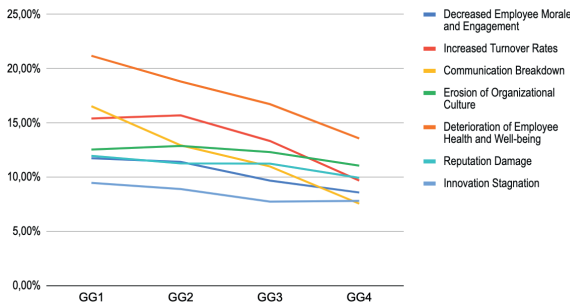


Chart 1. Frequency of occurrence of consequences of toxic leadership considering the overall assessment of the hospital by employees (Gassdoor)

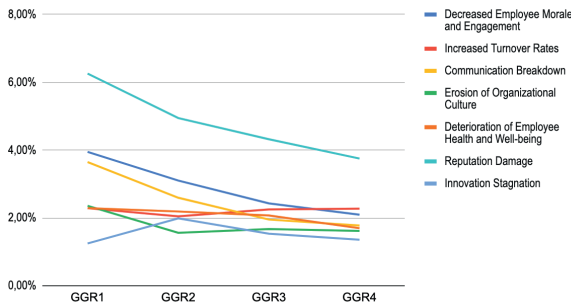


Chart 2. Frequency of occurrence of consequences of toxic leadership considering the overall assessment of the hospital by stakeholders (Google Review)

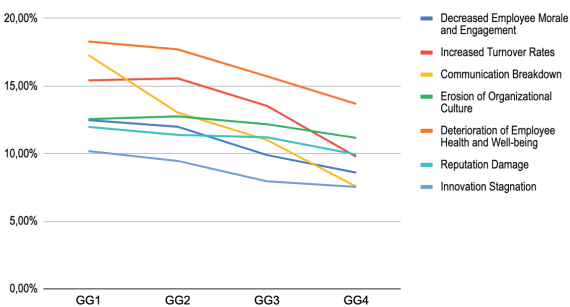


Chart 3. Frequency of occurrence of consequences of toxic leadership considering the overall assessment of the Allied Health Professionals (Gassdoor)

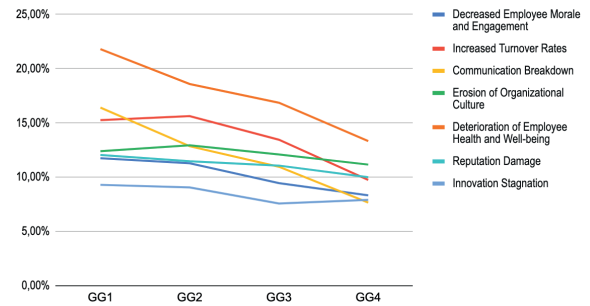


Chart 4. Frequency of occurrence of consequences of toxic leadership considering the overall assessment of the Clinical Healthcare Professionals (Gassdoor)

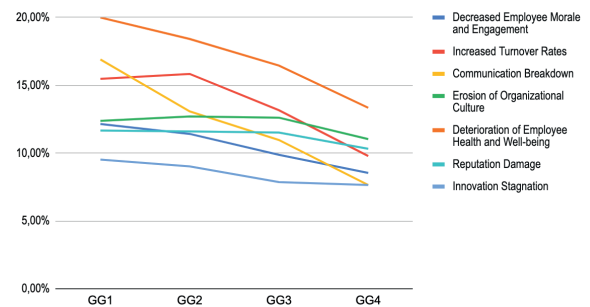


Chart 5. Frequency of occurrence of consequences of toxic leadership considering the overall assessment of the Healthcare Administrative and Support Services (Gassdoor)

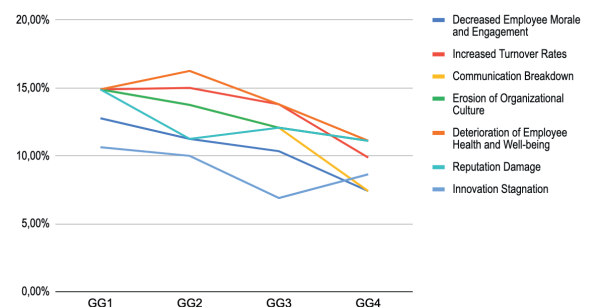


Chart 6. Frequency of occurrence of consequences of toxic leadership considering the overall assessment of the Physicians (Gassdoor)

4. Discussion

In the realm of organizational dynamics, the scourge of toxic leadership presents itself as a formidable adversary, undermining the very fabric of corporate culture and efficacy. This extensive study meticulously unravels the complex web of toxic leadership, a leadership style defined by its detrimental and often destructive impact on subordinates and the organization at large. Such leadership is typified by abusive conduct, a lack of empathy, pronounced

self-centeredness, and a tendency to manipulate or exploit others for personal gain.

Central to this exploration is the gradual erosion of morale and ethical standards, a long-term consequence of toxic leadership. This erosion manifests as a degradation of the ethical fabric of the organization, compelling followers to partake in unethical or harmful behaviors. The study underscores the need for organizations to recognize the signs of toxic leadership and its profound impact on followers and the organizational ethos.

In addressing these concerns, the paper advocates for strategies to counteract toxic leadership. These strategies include promoting a healthy organizational culture, establishing effective communication channels for reporting toxic behaviors, and implementing training and support programs for both leaders and followers. These strategies aim to foster an organizational environment that is not only positive but also anchored in ethical principles. The overarching goal of this research is to provide a comprehensive understanding of toxic leadership and its implications, offering insights and recommendations for cultivating a more healthy, resilient, and ethically sound organizational landscape.

Through this research, valuable insights and recommendations are offered for cultivating healthier, more resilient, and ethically grounded organizational landscapes. This study serves as a clarion call for health care organizations to take proactive steps in identifying and mitigating the effects of toxic leadership, thereby ensuring the long-term health and success of the organization.

5. Conclusion

The culture of an organization and employee wellness point to decay, that must be an urgent matter for the leadership practices of transformational leaders and to avoid the negative influences of toxic leadership on the complex landscape of healthcare. This study firmly articulates the massive implications of such leadership, which include reduced staff morale, increased turnover, and lowered organizational integrity. The book strongly argues in favor of turning towards 'heart-centric' leadership that brings empathy, ethical awareness, and emotional intelligence in its trail to serve the organizations in creating an organizational climate that is more supportive and ethical for its people. This research underscores the implications not only of dire leadership quality in healthcare but also offers a cogent blueprint for developing environments that must put employee welfare and ethical standards on priority, which then augments the overall quality of patient care and organizational health. This would, therefore, represent an invaluable guide for healthcare institutions to

orient them from toxic leadership to a more sustainable and human organizational culture.

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Conflicts of Interest

The authors declare no conflicts of interest.

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