Nurses' creativity in the Vietnamese public hospitals: The role of responsible leadership and trust in leader

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ARTICLE INFO	ABSTRACT

This study investigates the nexus between Responsible Leadership (RL) and Employee Creativity (EC) in the Vietnamese public healthcare sector, examining the mediating role of Affective Organisational Commitment (AOC) and the moderating effect of trust in a leader (TRU). Based on Exchange Theory (SET), the research employs a questionnaire survey, collecting data from 234 nurses chosen through a quota sampling approach in public hospitals in Ho Chi Minh City, Vietnam. Structural Equation Modelling (SEM) results show a significant relationship between RL and EC. More importantly, findings reveal a significant association between RL and AOC, which subsequently enhances the EC of nurses. Furthermore, we found a stronger positive relationship between RL and EC when nurses showed higher levels of TRU. These insights offer valuable theoretical contributions to understanding RL's influence in the healthcare sector and practical implications for enhancing EC through effective RL styles. As a result, healthcare organizations ought to develop a set of values that emphasize social responsibility and encourage hospital leaders to be strong advocates for it.

1. Introduction

Nurses, as a vital part of the healthcare system, encounter various obstacles on the job (Anser et al., 2021). Nurses in underdeveloped nations often juggle multiple responsibilities due to their low status (Yousaf et al., 2021). Due to the intricacy of their work, nurses in hospitals usually have to manage numerous tasks simultaneously. Their jobs are so demanding that they must be creative to find new ways to juggle all these responsibilities. Nevertheless, there is a dearth of research on Employee Creativity (EC) in the healthcare sector (Liu, 2020). More and more, researchers in the healthcare industry are focusing on the creative abilities of nurses (Ma et al., 2018). Creativity is a crucial performance outcome essential to organizational innovation, efficacy, and survival. Researchers and professionals have spent much time and energy determining factors influencing creativity because of its possible significance (Lee et al., 2022). Studies on organizational behavior primarily focus on elucidating the mechanisms of creativity (Zulfiqar et al., 2023).

In an ethical and social framework known as RL, various management leaders inspire, export, and disseminate the values of courage, knowledge, and respect to a wide range of stakeholders (Khanam & Tarab, 2023). Providing better services to society, enhancing environmental well-being, ensuring social harmony values in the societies where

the organization operates, and aggregating society's welfare are the main objectives of this people-centered activity. Leadership theory emphasizes the matter of responsibility. The healthcare industry has published recent empirical studies on RL (Khanam & Tarab, 2023; Mousa & Puhakka, 2019). RL is defined as follows (Maak & Pless, 2006, p. 40): "RL is the art of building and sustaining good relationships with all relevant stakeholders." RL is regarded as the primary force enabling organizations to cultivate and maintain a culture of creativity. RL considers its employees significant stakeholders and capitalizes on their innovative and distinctive viewpoints to foster creativity and motivation, encouraging them to adopt creative behaviors (Zulfiqar et al., 2023). The literature on the perspectives of RL and nurse creativity in the Vietnamese health sector is also lacking. Therefore, a precise research study that contextualizes the healthcare industry is needed to examine the relationship between RL and EC. This gap in the literature is filled by the current study, which uses Social Exchange Theory (SET) to explore the connection between RL and nurses' creativity.

Scholars see organizational commitment as an individual decision that can be influenced by both rational and relational factors (Mousa & Puhakka, 2019). Specifically, employees who report high levels of Affective Organizational Commitment (AOC) are more likely to demonstrate creative problem-solving during their work (Zulfiqar et al., 2023). In addition, our understanding of the underlying mechanisms of the RL-EC connection is limited, particularly regarding the attention given to the RL-EC links. Prior research and current discussions have examined the connections between RL and AOC (Khanam & Tarab, 2023) and AOC and EC (Asif et al., 2022). To address this research deficiency, our study proposes that AOC be included as a mediator in the link between RL and EC. In addition to demonstrating visionary and encouraging leadership, leaders must also possess the ability to establish and sustain robust collaborative relationships with diverse stakeholders (Karikumpu et al., 2024). These factors underscore the significance of trust in the leader (TRU). Since trust is a socially constructed concept that changes over time, there needs to be new research on TRU in healthcare (Gonzalez, 2017). This article fills this knowledge gap by offering a concept analysis of TRU. As a possible moderator between RL and EC, we present TRU.

To conclude, limited empirical studies have shown the relationship between RL and EC via various mechanisms, including AOC and TRU, and further research is needed to understand the relationship between RL and EC better. Hence, the following research questions will be taken into account in this study:

RQ1. Do RL and EC have any effect?

RQ2. What is the role of AOC in mediating the interplay between RL and EC?

RQ3. To what extent does TRU serve as a moderator between RL and EC?

2. Review of the literature and formulation of hypotheses

2.1. Social Exchange Theory (SET)

A practical framework for understanding the complex dynamics at work in organizations is the "Social Exchange Theory" (SET) (Blau, 1964). According to the different interpretations of this framework, it is a complex system of exchanging real or virtual assets in which people are motivated by the perceived and actual benefits they will reap from the actions of others (Blau, 1964; Homans, 1961). Thus, according to Cropanzano and Mitchell (2005), workers' attitudes and behaviors concerning their organization can be best understood within the framework of social exchange relationships. Professionals in organizational behavior have primarily

concentrated on the social exchange relationships between employees, their organizations, and their leaders. These groups are seen as the main actors in these relationships and play a significant role in helping employees achieve their workplace goals (Cropanzano & Mitchell, 2005; Wayne et al., 1997). It is impossible to overstate that trust is essential to this arrangement because it makes it easier for these mutually beneficial relationships to begin. The belief that one will receive favorable treatment in return is known as trust, even though this reciprocation may not happen immediately (Haas & Deseran, 1981). This theory suggests that rather than formalizing these relationships through contracts, which may dilute the authentic nature of social exchanges, parties should gradually develop trust, which may take some time (Haas & Deseran, 1981).

2.2. Review of the literature

Prior research has concentrated on EC in various leadership styles, including authentic, ethical, servant, and transformational leadership (Zulfiqar et al., 2023). Khanam and Tarab (2023) state that current leadership styles lack responsibility. Despite evidence from prior studies on leadership and organizational social responsibility indicating significant potential for RL to enhance EC, there remains a deficiency of proof concerning RL's impact on EC behavior (Castro-González et al., 2019; Zulfiqar et al., 2023). Prior studies have not assessed the mediating function of AOC in the link between RL and EC (Khanam & Tarab, 2023). Nevertheless, few empirical studies have substantiated that AOC can mediate between EC and ethical leadership (Asif et al., 2022). A survey conducted by Khanam and Tarab (2023) revealed that the impact of RL and organizational behavior citizenship in the Indian healthcare sector was deemed to be insignificant. Hence, this study investigates the function of AOC as a mediator. Nurses may encounter ambiguity and uncertainty because of the risky nature of creative work behavior (Afsar & Masood, 2017). Consequently, they may require assurance from their bosses that they are on the right path. McAllister (1995) elucidates that nurses would respond favorably if they perceive their leaders' intellectual stimulation, individualized consideration, inspirational motivation, and championing roles as genuine, provided they have affect-based trust. They will not be apprehensive about discussing and freely exchanging ideas and challenges. They know that their leaders will express their gratitude if the concept is booming, while the responsibility for its failure will be attributed to the circumstances and other factors rather than to the individual who proposed the idea (Afsar & Masood, 2017).

2.3. Formulation of hypotheses

2.3.1. Responsible Leadership (RL) and Employee Creativity (EC)

Regarding long-term organizational performance, RL addresses three aspects: social, environmental, and economic impacts (Doh & Quigley, 2014; Pless & Maak, 2012). It also emphasizes diverse stakeholder constituencies' involvement, cooperation, and support. Though research on RL is still lacking, earlier studies examining different leadership philosophies have provided insight into the potential effects of RL on EC. Leadership is a multivalent leader-stakeholder relationship (Akhtar et al., 2021), where leaders responsibly protect resources and moral values (Maak & Pless, 2006), which significantly influences EC (Zulfiqar et al., 2023). From resource and social support perspectives, nurses with high leadership support tend to believe their bosses and organizations will always support them (Lee et al., 2022). Creative processes require information communication, autonomy, and task-related resources and support, which these nurses can access more easily (Khazanchi & Masterson, 2011). If they are comfortable and have the resources, nurses will be more willing to generate ideas and deal with creative work uncertainty (Lee et al., 2022). Thus, nurses work harder when their employers and

leaders provide positive socio-emotional resources. Nurses are more likely to follow their leader's and organizations' creative practices if they see creative performance as an organizational benefit (Lee et al., 2022). The SET says followers will reciprocate by adopting positive attitudes and behaviors appropriate for the leader as an agent of the organization and relevant to the organization in return for care (Enwereuzor et al., 2020; Gouldner, 1960). Reviewing the literature yielded this hypothesis:

H1: RL has a favorable correlation with EC

2.3.2. The mediating role of AOC

RLs cultivate robust social connections in the workplace and optimize the capabilities of individuals by promoting a favorable work atmosphere, climate, and communication (Haider et al., 2022). RL is crucial in establishing responsible workplace social norms and fostering employee collaboration and mutual support to attain performance objectives (Syed et al., 2021). SET provides a fundamental framework for understanding the significance of leaders and their effects on employees' dedication to their work (Asif et al., 2022). According to the organizational commitment perspective, employees who feel that their organizations and leaders genuinely care about them, recognize their efforts, and treat them respectfully are more likely to be committed to their workplaces and identify with them (Loi et al., 2014). Employees with elevated levels of commitment will demonstrate increased effort and engagement in their jobs (Lee et al., 2022). According to Amabile and Mueller (2008), putting in more effort and involvement can enhance creative performance.

AOC is key to strengthening employees' emotional bond with their organization (Khanam & Tarab, 2023). Emotional ties between workers and their employers can be strengthened by leaders (Avolio et al., 2004). Positive interactions between managers and staff members can increase workers' sense of recognition and belonging within the organization (Wang et al., 2021). More substantial employee commitment to the organization will significantly influence their behavior and thinking. As many studies have shown, using AC often results in positive outcomes. Furthermore, AC substantially impacts how well workers execute their jobs and behave as organizational citizens and how creative and innovative they are (Khanam & Tarab, 2023). After examining the existing literature, we arrived at the following hypothesis:

H2: The relationship between RL and EC is mediated by AOC

2.3.3. The moderating role of TRU

According to SET, nurses who view this leader as trustworthy feel obligated to return the favor by acting in a way that promotes creativity at work. Such actions are beneficial to the organization and the leader. Stated differently, nurses will consider creativity as a suitable means of expressing gratitude for the equitable treatment they obtain from their dependable mentor (Enwereuzor et al., 2020). In this study, a potential moderated model can be built based on the background information that came before. This indicates that the link between RL and EC will be influenced by TRU, with RL and EC having a more significant relationship at high TRU values and a lower relationship at low TRU values. Consequently, we anticipate the following:

H3: The association between RL and EC is moderated by TRU, making it stronger for nurses with high TRU levels

Figure 1 below shows the current study model.

Figure 1

Proposed Research Model

H1: RL-EC
H2: RL-AOC-EC
H3: RLxTRU-EC
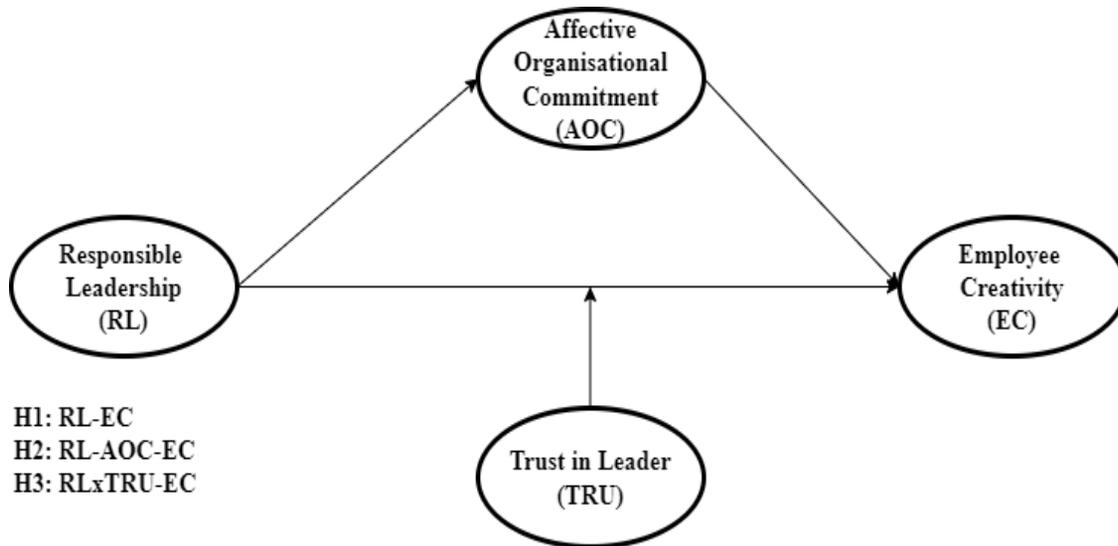
Source. Data analysis result of the research

3. Methodology

3.1. Collecting data and selecting samples

The study ran from March to April 2024. The data were gathered through a reliable and well-organized questionnaire employing quota sampling. The study encompassed the healthcare nurses in five public hospitals in Ho Chi Minh City, Vietnam. The study invited registered nurses, employed full-time and directly involved in patient care, to participate. The present study focused on nurses who work in the clinical departments at five public hospitals in Ho Chi Minh City: The University Medical Centre, Hung Vuong Maternity Hospital, Tu Du Maternity Hospital, Thong Nhat Hospital, and Cho Ray Hospital. We estimated the sample size for this study to be 300 nurses. We recruited study participants for this investigation through quota sampling. We distributed the quotas based on the population of each clinical department. The overall proportion in each clinical department determined the number of nurses. The inclusion criteria included the nurses' consent to participate in the study and having at least two years of experience. We informed the nurses about the study's objectives and methodology. Before the survey, we got the hospital administrators' permission. We then spoke directly with the nurses and assured them their feedback would be confidential. A workday survey was conducted using a hardcopy questionnaire and pen. A response rate of 78 % was achieved by returning 234 of the 300 questionnaires. Table 1 can provide demographics.

3.2. The constructions' measuring

Before finalizing the main survey items, a pilot study was conducted to validate the measuring instruments. The lowest score on a five-point Likert scale was 1, indicating strong disagreement, while the highest score was 5, indicating substantial agreement. Each construct has its scale: The study utilized the five-item unidimensional scale developed by Voegtlin (2012) to assess RL. Nurses' AOC was measured using Burris et al.'s (2008) 5-item scale. TRU was calculated using the four-item scale developed by Farh et al. (1998). EC was measured using the scale Farmer et al. (2003) developed, which comprises 04 items.

4. Empirical findings

4.1. The sample's demographics

Table 1

The Respondents' Demographics

Characteristics	Frequency	Percent (%)
Gender		
- Female	181	77.4
- Male	53	22.6
Age (years)		
- Below 30	24	10.2
- 30 - 35	75	32.1
- 36 - 40	88	37.6
- Above 40	47	20.1
Educational level		
- College	5	2.1
- University	171	73.1
- Others	58	24.8
Working experience (years)		
- Less than 03	36	15.4
- 03 - 05	45	19.2
- 06 - 10	70	29.9
- 11 - 15	47	20.1
- More than 15	36	15.4
N	234	100%

Source. Data analysis result of the research

4.2. Assessment of the measurement model

To ensure the accuracy and consistency of our measurements, we excluded items 2 and 3 from the AOC scale and item 4 from the EC scale before evaluating the measurement model (Hair et al., 2019). The convergent validity of the measurement tools was assessed by examining standardized regression weights, Cronbach's Alpha, Average Variance Extracted (AVE), and composite reliability (Hair et al., 2019). All measures had AVE values above 0.50 (ranging from 0.563 for RL to 0.789 for EC), and Cronbach's Alpha values were above 0.7. Furthermore, all the measures exhibited CR values exceeding 0.70 (ranging from 0.863 for AOC to 0.918 for EC) and standardized regression weights surpassing 0.5 (Hair et al., 2019).

Table 2

The Constructs and their Corresponding Measures

Construct	Code	Item	Loading	AVE	CR
Responsible Leadership (RL)	RL1	"My leader understands stakeholder needs"	0.774***	0.563	0.865
	RL2	"My leader carefully considers how decisions will affect stakeholders"	0.782***		
	RL3	"My leader consults stakeholders on decisions"	0.787***		
	RL4	"My leader considers stakeholder claims before deciding"	0.699***		
	RL5	"My leader tries to reach a stakeholder consensus"	0.704***		
Affective Organisational Commitment (AOC)	AOC1	"I would love to work at this hospital forever"	0.857***	0.678	0.863
	AOC2	"I enjoy discussing this hospital with non-employees" (d)	-		
	AOC3	"I feel like this hospital's successes and problems are mine" (d)	-		
	AOC4	"Working at this hospital is meaningful to me"	0.854***		
	AOC5	"This hospital feels like family to me"	0.755***		
Trust in Leader (TRU)	TRU1	"My leader's integrity is beyond doubt"	0.813***	0.728	0.914
	TRU2	"My leader would never deceive employees intentionally"	0.865***		
	TRU3	"I am very loyal to my leader"	0.876***		
	TRU4	"I would stand by my supervisor in the event of nearly any emergency"	0.856***		
Employee Creativity (EC)	EC1	"I always give novel approaches a go"	0.881***	0.789	0.918
	EC2	"When I have a problem, I look for novel solutions"	0.945***		
	EC3	"My field-related ideas are groundbreaking"	0.835***		
	EC4	"I'm a creative role model" (d)	-		

Note. d = measurements did not pass the validity and reliability assessments; *** statistically significant at $p < 0.001$
Source. Data analysis result of the research

We employed Henseler et al.'s (2015) Heterotrait-Monotrait (HTMT) ratio of correlations to evaluate the scale's discriminant validity. The HTMT ratio measures the correlation between similar constructs. A discriminant validity violation occurs when the value exceeds 0.85 (Kline, 2011). The constructs' discriminant validity was confirmed by the fact that the HTMT values were less than 0.85, as revealed by our research. The HTMT values from our analysis are in Table 3.

Table 3

HTMT Ratio Analysis Results

	RL	**TRU**	**EC**	**AOC**
RL				
TRU	0.616			
EC	0.502	0.485		
AOC	0.474	0.502	0.603	

Note. HTMT discriminate at HTMT < 0.85
Source. Data analysis result of the research

The model fit statistics show a strong fit: $\chi2$ = 197.357 (df = 84, p = 0.000); CMIN/df = 2.349; SRMR = 0.0488; CFI = 0.951; TLI = 0.939; and RMSEA = 0.076. Thus, construct validity and reliability are confirmed.

4.3. Evaluation of the structural model

The structural model was examined using a maximum likelihood estimation to validate the hypotheses (Collier, 2020). The model fit measurements were as follows: $\chi2$ = 248.019 (degrees of freedom = 97; p-value = 0.000); SRMR = 0.0667; CFI = 0.938; TLI = 0.923; and RMSEA = 0.082. The $\chi2$/df value of 2.557, within the range of 2 to 5, confirmed the model's acceptability, as established by Hu and Bentler (1999). Consequently, the model's goodness of fit was characterized by a range of acceptable to excellent fit indices, as determined by various metrics (Hair et al., 2019; Hu & Bentler, 1999). Statistical significance was demonstrated for each of the hypotheses at different levels. The results of the hypothesis testing conducted with the structural model are presented in Table 4.

Table 4

Hypotheses Testing Using the Structural Model

Hypothesized relationships	**Proposed effects**	**Standardized regression weights**	**Results**
H1: RL → EC	Positive	0.266**	Supported
H2: RL → AOC → EC	Positive	0.193***	Supported
H3: RLxTRU → EC	Positive	0.131*	Supported

Note. *** p < 0.001; ** p < 0.010; * p < 0.050
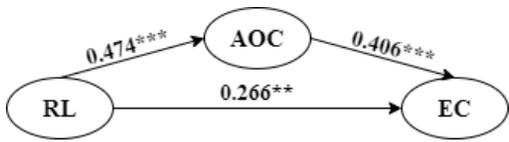*Source.* Data analysis result of the research

Hypothesis 1 asserted that nurses who perceive RL within a hospital would exhibit more EC within the organization. The result supported the positive nexus between RL and EC (Table 4; β = 0.266, p < 0.01).

4.4. Mediation analysis

A bootstrapping mediation analysis revealed the relationships between RL, AOC, and EC. For each of the roughly 1,999 permuted samples (which also included the original, unpermuted data, for a total of 2,000 samples) used in the permutation methods, 2,000 bootstrap samples were drawn for the bootstrap methods (Taylor & MacKinnon, 2012). The data showed that AOC significantly affects EC and that RL correlates with it. Hypothesis 2 proposes that nurses who perceive RL positively correlate with their AOC. The findings corroborated the affirmative correlation between RL and AOC as presented in Table 5 ($\beta = 0.474$, $p < 0.001$). This supports Hypothesis 2, which posits that nurses with a higher AOC will exhibit greater EC toward the organization. Supporting Hypothesis 2, we discovered that nurses with elevated AOC demonstrated increased EC behavior within the organization ($\beta = 0.406$, $p < 0.001$), as illustrated in Table 5, thereby confirming Hypothesis 2. Furthermore, RL exerts an indirect positive influence on EC, evidenced by a regression weight of 0.193 and a p-value less than 0.001. Table 5 summarises mediation test results.

Table 5

The Mediation Analysis Results

Relationship	Path of mediation	Estimate	Probability	Conclusion
H2: RL → AOC → EC	RL → 0.474*** → AOC → 0.406*** → EC; RL → 0.266** → EC	0.193	< 0.001	Partial mediation

*Note.* *** p < 0.001; ** p < 0.010; * p < 0.050
Source. Data analysis result of the research

4.5. Moderation analysis

Hypothesis 3 predicted that TRU would boost employee-perceived RL on EC. Figure 2 indicates a significant positive interaction between TRU and RL ($\beta = 0.131$, $p < 0.100$). The simple slope results show that RL was positively and significantly related to TRU when TRU was lower and stronger when TRU was higher. Figure 2 shows simple slopes. Results support Hypothesis 3.

Figure 2

The Moderating Effect of TRU on the Positive Relationship between RL and EC
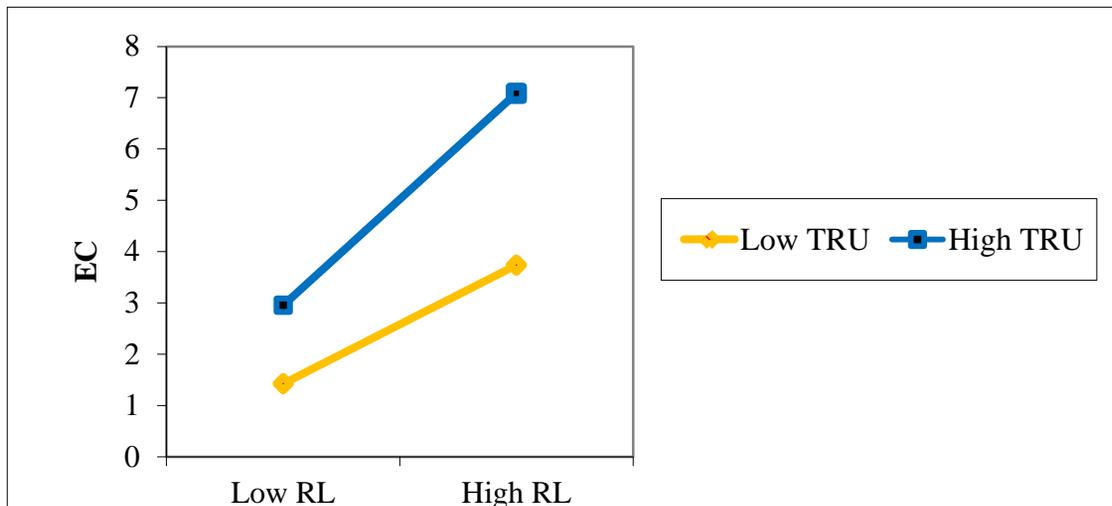
Source. Data analysis result of the research

5. Discussion

The most recent knowledge on RL and EC in healthcare was expanded upon and integrated into the current study. Using the SET, we discovered that RL perception encourages EC. AOC partially mediates the beneficial relationship between RL and EC. Our results further support the hypothesis that TRU moderates the RL-EC relationship. These findings align with studies by Zulfiqar et al. (2023), Asif et al. (2022), and others that show how an effective leadership style can encourage and positively impact subordinates to participate in creative work. Since EC is viewed as an atypical work process with a higher degree of risk, followers must continuously receive support from the leader as a prerequisite. The first finding demonstrated that EC is primarily dependent on RL. Our results also agree with the research done by Zulfiqar et al. (2023). In addition to offering substantial improvements, RL offers an appealing synthesis of prior leadership research (Doh & Quigley, 2014). The fundamental distinction between RL and other values-based models of leadership, such as authentic, ethical, and transformational models, is that RL plays the groundwork for long-term value creation via constructive social change (Haque et al., 2019b) and moves the focus of leaders away from shareholder benefits and towards balancing the interests of stakeholders (Maak et al., 2016). Looking through the prism of SET, we contend that RL's relational and ethical character also helps with staff creativity.

Additionally, the fact that AOC acts as a go-between for RL and EC has been established. These results indicate that RL helps nurses be more creative when AOC is present. The study's H2 is thus supported. Workers who feel a stronger connection to their employer are more likely to come up with original and practical solutions to problems (Asif et al., 2022), which is why AOC promotes an environment that fosters creativity in the workplace. AOC considerably mediates the connection between ethical leadership and creativity, according to the results of Asif et al. (2022).

Finally, we discovered that the strongest link between RL and EC occurred when TRU was high. That is, it is now acknowledged that the psychological mechanisms at play are crucial to comprehending how a leader's actions impact the results achieved by their team (Enwereuzor et al., 2020). Trust is essential in establishing and maintaining social exchange relationships because it fosters a feeling of duty and lessens uncertainty about reciprocation (Blau, 1964). In the context of TRU, creativity at work was enhanced by improved motivation and creativity, both of which contribute to innovation. Furthermore, their confidence in the leader stimulated leaders' and employees' perceptions of efficiency. Furthermore, trust enhanced employee attitudes, diminishing cynicism towards change (Enwereuzor et al., 2020).

6. Conclusion and implications

6.1. Conclusion

In this paper, we examined the correlation between RL and EC from the standpoint of SET. Through the SEM technique, we discovered that RL can influence EC through two psychological pathways: direct and indirect effects through AOC. Additionally, TRU can enhance the impact of RL on EC. This study expands upon the existing body of knowledge on RL and EC while offering valuable insights for healthcare organizations to enhance EC through effective leadership.

6.2. Theoretical and practical implications

6.2.1. Theoretical implications

From a theoretical perspective, the results of this study make substantial contributions. First, we enhanced the study of RL by providing evidence of its beneficial impact on individual-

level results. While scholars and practitioners have acknowledged RL as necessary, limited empirical studies have investigated the nexus of RL and EC (Haque et al., 2019a). This study establishes a connection between RL and EC and sheds light on the psychological mechanisms that explain the relationship between the two. Compared to traditional leadership from the dyadic leader-follower perspective, RL's present study effectively addresses the need for RL and evaluates its influence on EC in healthcare organizations. Our work contributes to the existing literature on RL in the healthcare sector by acknowledging its significance.

Second, this study investigated the direct correlation between RL and EC and discovered that AOC partially mediated the relationship in the relationship above. Our findings provide empirical evidence supporting the influence of RL on the mechanism of EC formation. SET elucidates the intricate workings of RL concerning EC. Prior studies have not examined the mediating role of AOC in the relationship between RL and EC. Nevertheless, there is a scarcity of empirical studies that have substantiated the notion that AOC can mediate between variables such as EC and RL (Haque et al., 2019a). Hence, this study is groundbreaking as it uncovers a novel variable, AOC, that mediates the link between RL and EC.

Last but not least, by proving that TRU is a boundary condition for the RL influence processes, this study adds to SET. According to Lee et al. (2022), although reciprocity is a universally accepted norm, not everyone places equal importance on it, according to scholars (Cropanzano & Mitchell, 2005). According to the research, a unique environment is created for managerial practices to achieve their goals when TRU leads to interpersonal trust between supervisors and subordinates (Ertürk & Albayrak, 2020). Because it leaves room for one person to fall short of the other's expectations, trustworthiness is essential for developing social exchange relationships (Blau, 1964). Also, many aspects of trustworthiness can be seen as catalysts for establishing a social exchange. Consequently, TRU would enhance the leader-employee dialogue if it were to exist. We tried to study TRU's moderating role because we thought there weren't enough results integrating claims regarding the effect of RL on EC within the context of TRU's moderating role.

6.2.2. Practical implication

Specifically for healthcare organizations' upper management in the Vietnamese setting, the present study also provides some helpful implications. The results of this study show that RL, AOC, TRU, and EC are significantly related. This is because EC is crucial in assisting organizations in creating a dynamic change environment where they can thrive and accomplish their objectives. This paper will have significant practical implications for supervisors, HR managers, and the healthcare industry. To help HR managers understand the importance of RL and cultivate related behaviors like maintaining ethical behavior and motivating staff to promote EC, we think the hospitals should implement a rigorous leadership training program. A hospital's success in the modern business world depends on its leaders' ability to think creatively and responsibly, so these leaders must be fostered through careful leader selection, evaluation, and development. Consequently, hospitals should establish core values, including social responsibility, and push organization executives to live by these principles. Healthcare organizations should choose leaders who share their values to achieve economic, social, political, and environmental objectives; responsible leadership is also value-based.

The results on the moderation effect also suggest that raising TRU is a good strategy to encourage EC. According to the current study's findings, organizations and leaders must find ways to manage social interactions with employees and effectively cultivate trust in leaders. It

has been shown that trust in leaders plays a significant and positive role in encouraging employees to have positive attitudes and behaviors towards work, especially in highly collectivistic cultures with a substantial power distance. Leaders can do their part to create a trusting workplace by modeling trusting behaviors themselves. Giving workers more opportunities to be involved and have a say in decision-making can boost their sense of competence and control. One way to encourage employees to be creative is to cultivate strong trust-based relationships.

6.3. Limitations and future research implications

Some study limitations are inevitable. First, we collected data from Ho Chi Minh City's public healthcare nurses. To assess the comprehensiveness of the experimental results, the following studies should include samples from other locations. Second, this study only examines AOC's mediation of RL and EC. Other variables' effects were not investigated. Future research can examine RL-EC relationship mechanisms. Third, we studied TRU's moderating impact. Therefore, we think it's essential for researchers to look at the link between RL and EC and see if human resource management (HRM), such as socially responsible HRM, plays a moderating role.

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