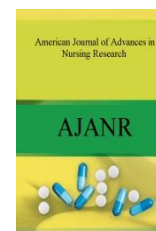




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LEADERSHIP STYLES IN NURSING:-EFFECT ON PATIENT HEALTH OUTCOMES AND ORGANIZATION'S PERFORMANCE

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ABSTRACT

In different health care organizations, effective leadership style ensures a high-quality health care system that consistently improves fellow nurses further providing safe and efficient care. It is useful, then, for health care professionals to be able to identify the leadership styles and use it relevant to their nursing practice. Adopting and recognizing these styles not only enables nurses to develop their skills to become better leaders but also improves relationships with colleagues and leaders who have previously been challenging to work with, and also leads to better patient outcomes. This article aims to use different leadership styles and to interpret which suits best to nursing profession in different health care organisational settings in order to improve leadership effectiveness. Ultimately, it is found that different leadership styles are needed for different situations, and leaders should know which approach is most effective in a given situation to achieve the organisations' goals.

INTRODUCTION

Nursing Profession plays a vital role in health care organisations. The Nursing Leaders and their management have drastic effect on the performance of fellow nurses and influence patient outcomes. It is important to understand the different leadership styles that are often found in the workplace, as well as their effects on the staff and those under their care. Leadership, a word, which itself describes its ability to achieve a target for the betterment and advancement of an organization. Leadership is the process of a company's management to set and achieve challenging goals, take swift and decisive action, outperform the competition, and inspire others to perform well. A Nursing Leader will always try to achieve the improvement in quality of care. It is a nurse manager that needs to work as a leader who guides everyone

involved in the welfare of the patients in different wards of a hospital.

For example:- If a Fellow nurse is not able to deliver his quality of nursing services which further leads to substandard patient outcomes, then the nursing leader will try to improve the professional productivity of that nurse which again depends on the quality of leadership style the nurse leader is adopting. In order to gain success, we should keep in mind the merits and demerits of various leadership styles and through which leadership style, best results can be obtained.

It is important to appreciate that leadership roles are different from management functions. In Stephen Covey's (1999) book *The Seven Habits of Highly Effective People*, he quoted Peter Drucker as saying: 'Management is doing things right; leadership is doing the right things. Management is efficiency in climbing the ladder of success; leadership is about determining whether the ladder is leaning against the right wall.' This

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suggests that management is about tasks, whereas leadership is about perception, judgement, skill and philosophy. We could infer from this that it is much more difficult to be an effective leader than an effective manager.

Leadership styles

There are a vast no. of leadership styles which can be very helpful to guide Nursing Leaders or Managers in leading other staff. There are different types of leadership styles which are being followed everywhere as follows:-

The two most common are transformational and transactional models (Bass, 1985; Burns, 1978).

1. Transactional Leadership :- It is a type of leadership in which the leader tries to ensure that the staff abides with the rules by instituting a system of rewards and punishments. Those individuals who follow his or her instructions and achieve the set targets will be rewarded accordingly. On the other hand, those who fail to obey and to reach the goals will be punished for their mistakes. This style is firmly focused on the supervision of subordinates, keeping the organization running smoothly and improving group performance. This leadership style is effective in managing a crisis and completing highly detailed projects.

In a Hospital, it is more advantageous to identify a leadership model that offers long, positive and healthy relationship between Nursing Superintendents and Nurses working in different wards. The transformational model is more complex but has a more positive effect on communication and team building than the transactional model (Thyer, 2003).

2. Transformational leadership is a process where "leaders and their followers raise one another to higher levels of morality and motivation. For Example Followers see their leader's behaviors, and they are inspired to change for the better. They see the hard work from the top as well as the concern for their well-being. They perform beyond all expectations because they put in more effort than usual. They no longer put themselves first as they place more importance on what is best for the organization. Leaders provide a clear vision of the future that motivates staff members to exceed themselves. Old assumptions and traditions are questioned to come up with novel ideas for solving problems more effectively.

Bass (1985) found that transformational leadership factors were more highly correlated with perceived group effectiveness and job satisfaction, and contributed more to individual performance and motivation, than transactional leaders.

Other types of leadership styles:-

1. Democratic Leadership style is a type of style in which the Leader values the individual characteristics and abilities of each subordinate. This style is a people centred approach and allows greater individual participation in decision making. Workers are given their own personal responsibilities and are accountable for reaching certain goals. They get feedback depending upon their performance, which allows them to adjust if necessary. The focus is on improving the quality of the systems and processes, not on finding errors made by the individual team members.

This is a democratic model of leadership, in which there is consideration for the opinions of those who have to carry out the task. The valuing of people, their knowledge, experience and skills is central to this model.

2. Authoritarian or Autocratic leadership style:- In this Style, Leader takes all the decisions and assigns all responsibility to himself, he is firm, insistent, self-assured and dominating. Such a leader expects prompt, orderly and predictable performance from employees or followers. The manager supervises every staff member and their input is not considered while making decisions. Thus, it is must for such employees to work step by step as they are directed. Even punishment is given if someone does not enforce the rules properly. Mistakes are completely intolerable, and often individuals are blamed instead of the faulty procedures. The only advantage of this leadership is that it is the most effective in case of emergencies or perplexed situations when there is very less time for discussion.

It is completely a bad idea to use this management style in nursing for routine operation as it fails to promote, communication, trust, and teamwork.

3. Laissez-faire/Abdicative Leadership:- It is a freedom style or permissive leadership. In this, the leader leaves all the responsibility and decision making process to the group (King Farnk). Here the leader chooses not to adopt a leadership role and actually abdicates the leadership position. It may be due to lack of self confidence and/or fear of failure. The leader may think that the subordinates can perform better than him if they are given some sort of freedom.

This kind of leadership style works only where there are highly motivated and skilled staff members are working.

How to become an effective leader:-

1. Leaders are often described as being visionary, equipped with strategies, a plan and desire to direct their teams and services to a future goal (Mahoney,



2001). Effective leaders are required to use problem-solving processes, maintain group effectiveness and motivational influence on other people, be solution-focused and seek to inspire others.

2. Nursing Leaders must apply these characteristics to their work in order to win the respect and trust of team members and lead the development of clinical practice. In a study by Bondas (2006), leaders who were described as driving forces were admired. They were regarded as a source for inspiration and role models for future nurse leaders.

3. Leadership for nurses is primarily about the following: making decisions; delegating appropriately; resolving conflict; and acting with integrity. The role also involves nurturing others and being aware of how people in the team are feeling by being emotionally in tune with staff. The above functions are the core elements necessary to connect leadership with the effective development of other team members. This is largely achieved by working alongside them in a mentoring and coaching role. A good and successful leader will seek to develop other staff through their leadership. Saarikoski and Leino-Kilpi (2002) found the one-to-one supervisory relationship was the most important element in clinical instruction. Terminology frequently used to describe a mentor includes: teacher; supporter; coach; facilitator; assessor; role model; and supervisor (Hughes, 2004; Chow and Suen, 2001).

It is recommended that staff are first shown how to perform a task and then supported to complete it. Then only we can improve the outcome of nursing profession and better health care of patients.

Leadership activities of Nurses

Nursing Leaders should be able to develop other staff by enabling them to apply best leadership styles to practice and encouraging them to test new skills in a safe and supportive environment.

These nurses should adopt a supportive leadership style with mentorship, coaching and supervision as core values.

Constable and Russell (1986) showed that high levels of support from supervisors reduced emotional exhaustion and buffered negative effects of the job environment. Consequently, it would be particularly beneficial for supervisors to provide emotional support to nurses and give them adequate feedback about performance to increase self-esteem (**Bakker et al, 2000**).

Nursing professionals also have a leadership role in facilitating their organisation's staff support and development programme, which should aim to reduce

stress, burnout, sickness and absenteeism among colleagues. Supervisors have a significant influence on employees' personal and professional outcomes. Bakker et al (2000) reported that senior nurses can buffer the effects of a demanding work environment on staff nurses by thoughtfully maintaining a leadership style that supports staff needs.

Leaders must focus on the needs of individual staff and use motivational strategies appropriate to each person and situation. They must seek to inspire demotivated staff and maintain the motivation of those who are already motivated. Leadership seeks to produce necessary changes in demotivated staff by developing a vision of the future and inspiring staff to attain this. Leadership is the driving force of the work environment and directly affects staff motivation and morale. West-Burnham (1997) argued that leaders should seek to improve on current practice, and use their influence to achieve this. This includes working within the team to develop goals and a feeling of shared ownership to achieve excellence in clinical practice.

Better outcomes for patient care

Ultimately, a goal of any healthcare organisation should be to influence the quality of patient care through good nursing leadership.

Empowered nurses are eager to implement evidence-based practice. They are highly motivated, well informed and committed to organisational goals, and thus deliver patient care with greater effectiveness (Kuokkanen and Leino-Kilpi, 2000).

Good leadership could produce better patient outcomes by promoting greater nursing expertise through increased staff ability and a new level of competence. **Aiken et al (2001)** argued the hospital practice environment has a significant effect on patient outcomes. Junior nurses should be encouraged to seek maximum rather than minimum standards, and be expected to achieve and maintain high-quality benchmarks.

Barriers in application

Despite the widespread recognition of the importance of effective clinical leadership to patient outcomes, the barriers for leaders and managers in clinical leadership are considerable. Such barriers, noted extensively in the literature, include a lack of incentives, a lack of confidence and poor communication. Other barriers in the clinical setting include poor preparation for leadership roles, curriculum deficiencies and health professional courses, experience as participants in poorly constructed clinical leadership programs, and inadequate resourcing of development programs. In addition, the lack of vision and higher-level commitment, poor interdisciplinary relationships, role conflict, rejection of



the “leader” role as unacceptable, resistance to change, and poor team work are important to consider in the application of leadership styles. To utilize the leadership styles effectively in clinical practice, leaders should first identify these barriers to better manage them.

DISCUSSION

Leadership models are a useful tool for Nursing Managers and Leaders and help to put the function of leadership activity into perspective. These nurses should not be concerned about using concepts from various models and developing an eclectic strategy. The models should be used as a framework on which to build an effective leadership style which suits the individual leader and those whom they are leading. Nurses are often asked to think about leadership, particularly in times of rapid change in healthcare, and where questions have been raised about whether leaders and managers have adequate insight into the requirements of care. This article discusses several leadership styles relevant to contemporary healthcare and nursing practice. Nurses who are aware of leadership styles may find this knowledge useful in maintaining a cohesive working environment. Leadership knowledge and skills can be improved through training, where, rather than having to undertake formal leadership roles without adequate preparation, nurses are able to learn, nurture, model and develop effective leadership behaviours, ultimately improving nursing staff retention and enhancing the delivery of safe and effective care.

CONCLUSION

This article has highlighted the essential leadership role that nurses have in developing skilled and competent staff. Leadership behaviour has a great impact on staff and patient's outcome.

Leadership styles need practice for better

implementation. Practice makes a man perfect, likewise choosing a best Leadership style makes a man a perfect leader. Nurse leaders who encounter complicated circumstances should not rush to resolve them; rather, they should consider these leadership styles and try to apply them in different organisational health care settings. The result is a better outcome. In this article, it is sometimes significant to use more than one leadership style to resolve the issue. Transformational leaders, for example, inspire others with their vision and collaborate with their team to identify common values. Democratic leadership is a managerial style that invites input from employees on all organizational decisions. Transactional leadership is based on rewards and can have a positive effect on followers' satisfaction and performance. Two other leadership styles often used in nursing practice are Laissez-faire leadership and autocratic leadership. Thus, the combination of established leadership styles is highly recommended for nurse leaders in clinical settings. Nurse managers and clinical leaders should acknowledge the advantages and disadvantages of each style. Still, the development of leadership skills is an ongoing journey that begins with knowing and understanding oneself. Developing leadership skills is very hard and is important to enhance personal character; it provides leaders with the necessary tools to achieve success within their career as health care providers. Nurse leaders encounter many different circumstances every day, and no particular leadership style is suitable for all situations. Nurse leaders should therefore be flexible in their leadership styles and apply them accordingly for better results in different health care organisations.

No matter your style, good leadership comes down to providing support. As a nurse, we know that's something you can do exceptionally well.

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