

Mega-Concept: Professional Nursing

Category: Professional Attributes

Concept Name: Leadership

Concept Definition: A collaborative relationship between leaders and followers that moves individuals, groups, and organizations toward a goal or vision.

Scope/Categories:

Leadership, in the broadest sense, is an interactive process between leaders and followers that moves individuals, groups, and organizations toward a goal (Hoffart, 2013). More specifically, leadership involves a cooperative relationship between the leader and the follower, in which all participants share some vision of the likely outcome of collective effort. Starting from a basis of cooperation, a leader promotes vision, inspires and supports others, and promotes the attainment of group goals.

The scope of leadership is wide because the general concept of leadership is diffuse and abstract. In the definition provided, there is no indication that leadership is limited to authority or position. Instead, leadership can be exercised in many ways and by any person who promotes a vision of what could be or should be and then works with others to achieve the goals of that vision. An act of leadership is not dependent on a management position or any additional authority other than that embodied by the professional license. The important point is to understand that leadership is an expectation of the nursing role, whether the nurse occupies a management position or is the newest, most inexperienced staff nurse. Leadership opportunities abound in the course of everyday health care delivery, and it is a professional responsibility to take the lead in situations where effective leadership will result in improved outcomes.

Types of Leadership:

Leadership can be considered in a variety of ways, none of which encompass the totality of this complex and dynamic concept. Each perspective on leadership focuses on some aspect related

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to leaders, followers, or situations (Hoffart, 2013). Each perspective also suggests the knowledge, skills, resources, and behaviors required for leadership.

Formal and Informal

Formal leadership is associated with position and authority. There is usually a title associated with formal leadership, and the holder has legitimate authority to utilize those resources within a specific scope of work. The nurse manager of a nursing unit has formal authority and the formal power to manage the resources, including personnel, on a nursing unit. Informal leadership is more nebulous. Some people can be perceived as leaders because of their capabilities and actions (Hoffart, 2013). Informal leaders within groups arise because others recognize their knowledge, trust their judgment, or are supported in some way by their actions.

Leadership Styles

Leadership can also be thought of as a style, or a pattern of behaviors that influence the actions of others. Styles are related to how a leader exercises authority and decision-making power in particular situations.

- Autocratic: the autocratic leader exercises most, if not all, of the decision-making authority and responsibility for directing the actions of others.
- *Democratic*: the democratic leader is more likely to solicit input from followers, delegate authority for tasks, and share decision-making power with followers.
- Laissez-Faire: the laissez-faire leader does not intervene in the work and decision-making of the followers.
- *Transactional*: transactional leadership involves the motivation and influence of followers through an exchange.
- *Transformational*: the transformational leader influences and motivates followers through the communication of an inspiring vision.
- *Shared*: in some highly developed work teams, leadership responsibilities are shared among members of the group.

Leadership might also be thought of as a behavior orientation that is focused on either task accomplishment (high task) or the social and emotional needs of followers (high consideration). In the first, the leader directs the followers to meet work requirements. In the second, the leader is focused on the social and emotional needs of the followers as they perform work requirements. In reality, most leadership behavior involves some of each of these behavior orientations.

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Attributes/Criteria:

- **Followers:** Leaders are defined through a symbiotic relationship with followers. A follower would be anyone who voluntarily enters into a relationship with a leader.
- **Vision:** Vision is an idealized future state that is attained by observable and measurable goals.
- **Power:** Power is the ability to influence others or to affect some situation.
- **Communication**: Communication is central to maintaining the leader-follower relationship. Effective communication is the single most important leadership skill because it is the foundation for all the other attributes of leadership.
- Decision Making: Decision making is integral to leadership, an expected role function for leaders that has the potential to affect others at all levels. In most leadership decisions, a choice is made between alternatives, even if the decision is to do nothing.
- **Change Management:** Change is omnipresent in health care; therefore, leadership always involves change management.

Theoretical Links:

Behavioral Leadership

In this theoretical orientation, effective leaders are thought to demonstrate identified behaviors, such as concern for the emotional or social needs of their followers. The leadership style theories would fit within the context of behavioral leadership.

Situational and Contingency Theory

Situational and contingency leadership theories focus on the context, or situation, in which leaders and followers interact. The acts of leadership that are successful in one context might not be successful when the situation changes. In other words, the actions of the leader must change as the situations change.

Charismatic and Transformational Leadership

In this theory, the focus is on those attributes of the leader that motivate followers through engagement and inspiration. A charismatic leader has an attractive, "charming" personality that engages the follower on an emotional level. Transformational leaders also engage others through personality attributes, but their leadership includes establishing high expectations, subtly discouraging the status quo, and motivating others by inspiring them to attain higher levels of performance (Hutchinson & Jackson, 2013).

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Complexity Science and Leadership

The complexity sciences have driven new theories of leadership related to leaders and followers in complex systems. A complex system is one where there are numerous, specialized, and interrelated parts that are integrated to produce a certain outcome. Today's health care organizations are complex adaptive systems that require new models of leadership to be effective and efficient (Crowell, 2015). Framing leadership in terms of complex systems means the leaders and followers must adapt and change according to system dynamics. Leadership in complex systems would involve the following principles: (a) focus on the interactions of the parts and the relationships that support those interactions, (b) a move to simple rules rather than complex decision-structures, (c) looking for the factors that attract people to change rather than trying to break resistance to change, and (d) change and uncertainty are constant and expected. Change is an opportunity for improvement (Hoffart, 2013).

Within the Context of Nursing/Health Care: Clinical Leadership

Clinical leadership is based on expert power. Clinical leadership can be a form of informal power and authority or it can be a recognized formal position within a unit. Clinical leaders are most often experienced staff nurses who are knowledgeable and willing to assist others in acquiring clinical expertise.

Interprofessional Leadership

Interprofessional collaboration is necessary to achieve the goals of the Institute of Medicine (2010) for efficient, effective, timely, evidence-based, and patient-centered care. In interprofessional collaboration, any member of the team can be asked to assume leadership responsibilities for the outcomes of patient care.

Formal Nursing Leadership

The formal leaders in nursing are those who have the authority to direct others and to make decisions about the delivery of patient care. Nurse leaders are not only found in nursing units or focused on nursing care. There are numerous nurse leaders who are in executive positions that require them to supervise the work and practice of multidisciplinary systems. Many organizations include nurses with executive responsibility for the operations, budgeting, and human resource needs. There are nurses leading research units, quality programs, and state

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and public health departments, and there are nurses in major government policy-making positions.

Leadership: Essential Knowledge, Skills, and Attitudes

Knowledge	Skills	Attitudes
Describe leadership	Demonstrate communication	Appreciate the link between
communication skills	skills for negotiation, conflict	communication skill and
	resolution, and consensus	effective leadership
	building	
Describe the relationship	Assess a change/conflict	Appreciate situations of
between leadership and	situation for factors that can	change and conflict as
collaboration, change, and	be used as leverage for	opportunities to improve
conflict	change	
	Evaluate strategies for	
	managing change and for	
	resolving conflict within	
	collaborative relationships	

Interrelated Concepts:

The following concepts are related to, yet distinct from, leadership.

- **Communication**: The ability to understand the roles and perspectives of others, and an understanding of how to manage teams are all necessary for leadership.
- **Collaboration:** Health care is delivered in complex environments and within a network of collaborative relationships with other health care professionals.
- Health Care Quality: For health care professionals, the ultimate goal of leadership is to improve the delivery of quality patient care.

Exemplars:

New Mexico Nursing Education Consortium (NMNEC) Required Exemplars:

- Change management
- Team building
- Delegation
- Negotiation

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Optional Exemplars:

- Time management
- Clinical agency
 - o Executive level
 - Chief Nursing Officer
 - Vice President for Patient Care Services
 - o Operational level
 - Nurse Manager
 - Clinical Coordinator
 - Director of Nursing Services
- Academic institutions
 - Dean
 - Associate Dean
 - Division Dean
- Governmental agency or professional association
 - State Board of Nursing Executive Director
 - President
 - Chairperson for a Task Force

References:

Crowell, D. M. (2015). Complexity leadership: Nursing's role in health care delivery (2nd ed.). Philadelphia, PA: F.A .Davis Company.

Hoffart, N. (2013). Leadership. In J. F. Giddens (Ed.), *Concepts for nursing practice* (pp. 375-385). St. Louis, MO: Mosby/Elsevier.

Hutchinson, M., & Jackson, D. (2013). Transformational leadership in nursing: Towards a more critical interpretation. *Nursing Inquiry*, *2* (1), 11-22.

Institute of Medicine. (2010). *The future of nursing: Leading change, advancing health*. Retrieved from http://books.nap.edu/openbook.php?record id=12956&page=R1

Resources:

American Nurses Association. (2013). ANA Leadership Institute competency model.

https://learn.ana-

nursingknowledge.org/template/ana/publications pdf/leadershipInstitute competency model brochure.pdf