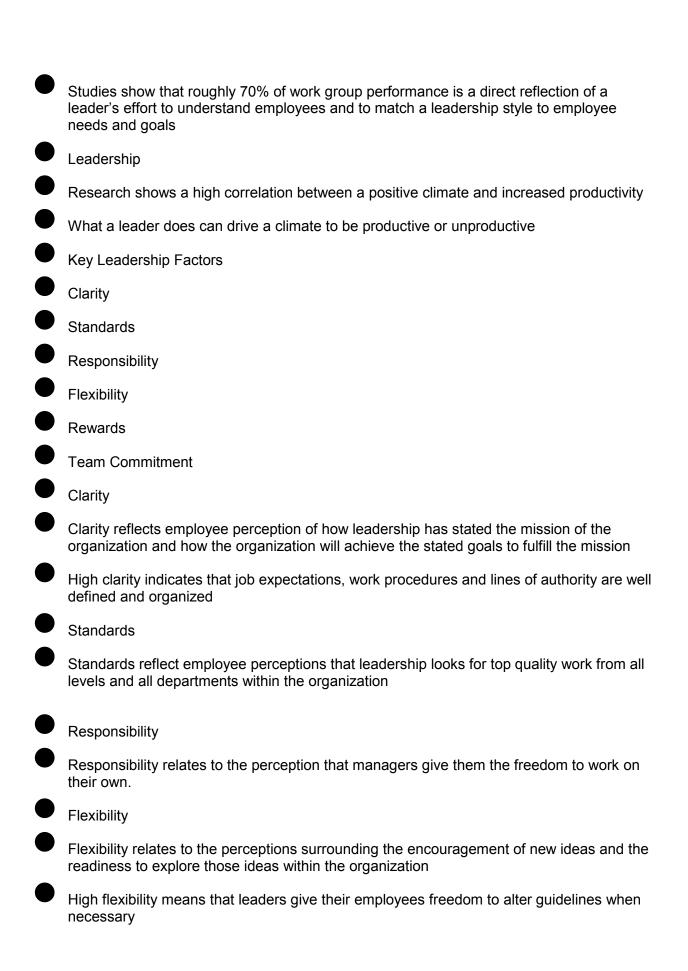
- Leadership and Management
- Cathy Fedor, RN, MSN
- Leadership vs. Management
- Leadership
  - An interpersonal process involving motivating and guiding others to achieve goals
  - A vision for the future
  - A method of modeling accountable behavior to others
- Management
  - The accomplishment of tasks either by oneself or by directing others
  - Handles the day-to-day operations to achieve a desired outcome
- Leadership vs. Management
- Leadership Concepts
  - Comes first, before management
  - Requires the ability to develop vision and goals
  - "Doing the right thing"
- Management Concepts
  - Follows the vision and goals of leadership
  - Requires the ability to plan, organize, motivate, and manage
  - "Doing things right"
- Management
- A manager is the person responsible for getting work done through others
- Managers generally work closely with caregivers and provide them with guidance, information, and actual assistance with the day-to-day work
- A good manager needs:
  - Excellent interpersonal relationship skills
  - A broad understanding of how the organization functions
  - The ability to perceive the organization as client focused
  - To establish goals and objectives
  - To act as a change agent
- Leadership
- Leadership style impacts the motivations of employees, either positively or negatively



Rewards
Rewards captures the perception of how leaders recognize and reward high performance vs. the level of criticism and punishment for mistakes
Team Commitment
Team commitment relates to the degree which employees feel that leadership cooperates with them and encourages collaboration to accomplish work objectives
Styles of Leadership

- Styles of Leadership
- Autocratic
- Democratic
- Laissez-Faire
- Situational
- Autocratic
- Autocratic Style
  - Leader focused.
  - Retains all authority and responsibility
  - Concerned primarily with tasks and goal accomplishment
  - Assigns clearly defined tasks
  - Establishes one-way communication with the group
  - Excels in times of crisis (cardiac arrest) and in situation of disorder (natural disasters)
- Democratic
- Democratic Style
  - People-centered approach focuses on the strengths of the people being managed
  - Allows employees more control and participation in the decision-making process; leader acts primarily as a facilitator and resource person
  - Emphasis is on team building and collaboration
  - Works best with mature employees who work well together as groups
- Laissez-Faire Style

- Laissez-Faire Style
  - "Free-run style" or permissive leadership
  - Leader relinquishes control completely; assumes a passive, nondirective, and inactive approach
  - Chooses to avoid responsibility by delegating all decision making to the group; leader gives little if any guidance, support, or feedback
  - Wants everyone to feel free to "do their own thing"
  - May work well with highly motivated professional groups
  - Some unprofessional behaviors exhibited by the group may be permissible as a result of the leader's lack of limit setting and stated expectations
- Situational
- Situational Leadership
  - Uses a combination of styles based on the circumstances and events
  - Leadership styles are assumed according to the needs of the group and the tasks to be accomplished
  - Four typical styles
    - Directing
      - Provides specific instructions and supervises the accomplishment of tasks
      - New employees, employees with repeated performance problems, and crisis work situations
- Situational
  - Four typical styles (continued)
    - Coaching
      - Monitors the accomplishment of tasks while also explaining decisions, asking for feedback or suggestions, and recognizing good performance
      - Typically, leader and staff have jointly developed a work plan.
- Situational
  - Four typical styles (continued)
    - Supporting
      - Supports the efforts of others, facilitates their goal accomplishment, and shares responsibility for decision making
      - Values growth and not perfection, collaboration and not competition
    - Delegating
      - Gives responsibility for decision making and problem solving to mature staff who have demonstrated their competence

- Formal vs. Informal Leaders
- Formal Leader
  - Official title
  - Usually does not deliver patient care
  - Responsibility is to anticipate change/provide a vision for the future
  - May be many levels of formal leaders in an organization

- Informal Leader
  - No official title
  - Leadership skills are associated with expertise in the art of nursing
  - Has power among group members that has been earned
  - Often a role model
- Nursing Leaders
- Florence Nightingale
- Lillian Wald
- Dr. Jean Watson
- Florence Nightingale
- She came to prominence for her pioneering work in nursing during the Crimean War, where she tended to wounded soldiers. She was dubbed "The Lady with the Lamp" after her habit of making rounds at night.
- Nightingale laid the foundation of professional nursing with the establishment, in 1860, of her nursing school.
- Nightingale was an advocate for the improvement of care and conditions in the military and civilian hospitals in Britain.
- Nightingale became a pioneer in the visual presentation of information and statistical graphics. Among other things she used the pie chart, which at the time, was a relatively novel method of presenting data.
- She set an example of compassion, commitment to patient care, and diligent and thoughtful hospital administration.

- Lillian Wald
- She is known as the founder of public-health nursing and the Visiting Nurse Service in New York City. She also initiated the first public-school nursing program in the United States and founded the Henry Street Settlement in New York City.
- At the turn of the century and for some time thereafter, over 90% of the sick stayed home. Poor people had no money to pay physicians, and hospitals were reserved for extreme cases and generally did little good. Therefore, the Henry Street Settlement was useful not only in that it brought nursing services to the poor, but it also served as a means of promoting education, recreation, housing, and relief for the unemployed in the neighborhood. In short, it grew into a multiple-service agency.
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- In 1910, Wald had persuaded Columbia University to appoint her friend Mary A. Nutting as the first professor of nursing, thus establishing the first nursing department in any American institution of higher education.
- Dr. Jean Watson
- She recognized the need for nursing to retain the "art of caring" during a time when nursing was striving to be more like the medical model
- The major elements of her theory are (a) the carative factors, (b) the transpersonal caring relationship, and (c) the caring occasion/caring moment.
- Watson's Carative Factors
- Watson views the "carative factors" as a guide for the core of nursing. She uses the term carative to contrast with conventional medicine's curative factors.
- In all, the carative factors are comprised of 10 elements:
  - Humanistic-altruistic system of value.
  - Faith-Hope.
  - Sensitivity to self and others.
  - Helping-trusting, human care relationship.
  - Expressing positive and negative feelings.
  - Creative problem-solving caring process.
  - Transpersonal teaching-learning.
  - Supportive, protective, and/or corrective mental, physical, societal, and spiritual environment.
  - Human needs assistance.
  - Existential-phenomenological-spiritual forces.

- Watson's Transpersonal Caring Relationship
- The transpersonal caring relationship characterizes a special kind of human care relationship that depends on:
  - The nurse's moral commitment in protecting and enhancing human dignity as well as the deeper/higher self.
- Watson's Caring Occasion
- A caring occasion is the moment (focal point in space and time) when the nurse and another person come together in such a way that an occasion for human caring is created. Both persons, with their unique phenomenal fields, have the possibility to come together in a human-to-human transaction.
- LPN's as Managers and Leaders
- These are roles the LPN perform daily, even while required to practice under the supervision of a RN or physician
- LPN's are the managers of care for the clients to whom they are assigned
- LPN's began to assume more management responsibilities during the 1990's when healthcare reform was introduced
- Historically, LPN's have been leaders and managers in Long Term Care facilities
  - Director of Nursing
  - Charge Nurse
- Promoting Quality Care Through Effective Leadership
- Provide direction and set clear expectations
- Communicate clearly, effectively, and in a timely manner
- Be a good role model
- Listen
- Be a mentor
- Be respectful
- Keep a broad perspective
- Appreciate conflict
- Work to create an environment where people are energetic, enthusiastic, and committed to quality