Al- Toosi University College

Nursing Department

Fourth Stage

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Leadership and Management Theory in Nursing

What is leadership?

- **Leading people..**

- **Influencing persons..**

- **Commanding societies..**

- **Guiding individuals..**

LEADER :

"a person who influences a group of people towards the achievement of a goal"

LEADERSHIP :

Leadership is a process by which a person influences others to accomplish an objective and directs the organization in a way that makes it more cohesive and coherent.

- Leader – Someone who can influence others and who has managerial authority

- Leadership – the process of influencing a group to achieve goals

- Ideally, all managers ***should be leaders.***

Leadership Theories

1.Great Man Theory:

This theory says that leaders are born and not made, which suggest that leadership cannot be developed.

2.Charismatic Theory:

Leaders are likely to set an example by their behavior communicate nicely to followers and provides motives for the group's mission.

3.Trait Theory:

Early work in this area maintained that traits are inherited. but later work suggested that traits could be obtained through learning and experience.

4.Situational Theory:

a person may be a leader in one situation and a follower at others, because the type of leadership needed depends on the situation.

5.Path-Goal Theory:

Leader facilitates task completing and rewarding followers for completing their tasks.

6.Transformational leadership:

Leaders motivate others through values, vision, and empowerment.

7.Integrative Leadership Model:

An integration of leadership theories seems appropriate.

Management Theories:

Theorist	Theme	Concepts
1. Scientific Management Theory		
Gantt (1861-1919)	Efficiency	• Plus payment plan to stimulate higher performance. • Explain relationships between work completed and time needed.
Emerson (1853-1936)	Organization's Goals & Objectives	• Goals and ideas should be clear and well defined. • Production scheduling is recommended.

Theorist	Theme	Concepts
2. Classic Organization		
Max Weber (1864-1920)	- Bureaucratic - organizations	• More rules and regulations and structure to increase efficiency
Moony (1884-1957)	- Directing people of relating functions	• Coordination Arrange authority into hierarchy
3. Human Relations		
Follet (1868-1933)	- Social process asserted - participated - management	• Social process aimed at motivating individuals and groups to work toward a common goal (no orders to an employees)
4. Behavioral Science		
Likert (1903-1981)	- Trust - Communication - facilitate effectiveness	• Institutions should facilitate interaction and stimulate communications

Major Types of the leadership style :

1. Autocratic leadership style
2. Democratic leadership style:
   -convincing or consultative
3. Laissez-faire   leadership style

1- Autocratic	- A leadership style where the leader makes all decisions independently or without consulting with others • **Advantages**: good in certain circumstances, such as urgent tasks or military actions • **Disadvantages:** poor decisions, poor level of employee motivation

2- Democratic	- A leadership style where a leader encourages employee participation in decision-making
	- convincing or consultative
	- **Advantages**: better decisions, employee motivation
	- **Disadvantages**: delayed decision, long consultation
	- The best style.

3- Laissez-faire	- A leadership style where employees are encouraged to make their own decisions within limits. • **Advantages**: more freedom for employees • **Disadvantages**: few guidelines, little incentive, poor motivation, maybe a mess

Comparison of Authoritarian, Democratic, and Laissez-Faire Theories			
	Authoritarian (Autocratic)	**Democratic**	**Laissez-Faire**
Degree of freedom	Little freedom	Moderate freedom	Much freedom
Degree of control	High control	Moderate control	Little control
Decision making	By the leader	Leader and group together	By the group or by no one
Leader activity level	High	High	Minimal
Assumption of responsibility	Leader High quantity, good	Shared Creative, high quality	Give up Variable, may be poor
Output of the group	quality	Less efficient than	Less efficient than
Efficiency	Very efficient	authoritarian	Inefficient

Types of Leaders:

1. Leader by the position achieved.
2. Leader by personality.
3. Leader by moral example.
4. Leader by power held.
5. Intellectual leader.
6. Leader because of ability to accomplish things.

Personal Characteristics of Leaders:

1-Physical Characteristics:

- Energy.
- Physical stamina.

2-Intelligence & Ability:

- Intelligence, cognitive ability.
- Knowledge.
- Judgment, decisiveness.

3-Personality:

- Self-confidence.
- Honesty & integrity.
- Enthusiasm.
- Desire to lead.
- Independence.

4-Social Characteristics:

- Sociability, interpersonal skills.
- Cooperativeness.
- Ability to enlist cooperation.
- Tact, diplomacy.

5-Work Related Characteristics:

- Achievement drive, desire to excel.
- Conscientiousness in pursuit of goals.
- Persistence against obstacles, tenacity.

6-Social Background:

- Education.
- Mobility.

Factors affecting leadership styles :

1. The Task.

2. The tradition of an organization.

3. The type of labor force.

4. The leader's personality.

5. The time.

6. Gender?

Ways to Increase the Effectiveness of Leadership at All Levels :

1. Leading & Developing Others.
2. Developing Capability & Capacity.
3. Integrity.
4. Ethics.
5. Handling Cultural Diversity.

Distinction between managers and leaders :

- **Managers** establish and implement procedures to ensure smooth functioning

- **Leaders** look to the future and chart the course for the organization

Managers vs. Leaders

Managers

- Focus on things
- Plan
- Organize
- Direct
- Control
- Follows the rules

Leaders

- Focus on people
- Inspire
- Influence
- Motivate
- Build

Common Activities for leader comparing with manager :

1. Planning.
2. Organizing.
3. Directing.
4. Controlling.

1- <u>Planning</u>

<u>Manager</u>
- Planning
- Budgeting
- Sets targets
- Establishes detailed steps
- Allocates resources

<u>Leader</u>
- Devises strategy
- Sets direction
- Creates vision

2- <u>Organizing</u>

<u>Manager</u>
- Creates structure
- Job descriptions
- Staffing
- Hierarchy
- Delegates
- Training

<u>Leader</u>
- Gets people on board for strategy
- Communication
- Networks

3- **Directing Work**

Manager
- Solves problems
- Negotiates
- Brings to consensus

Leader
- Empowers people
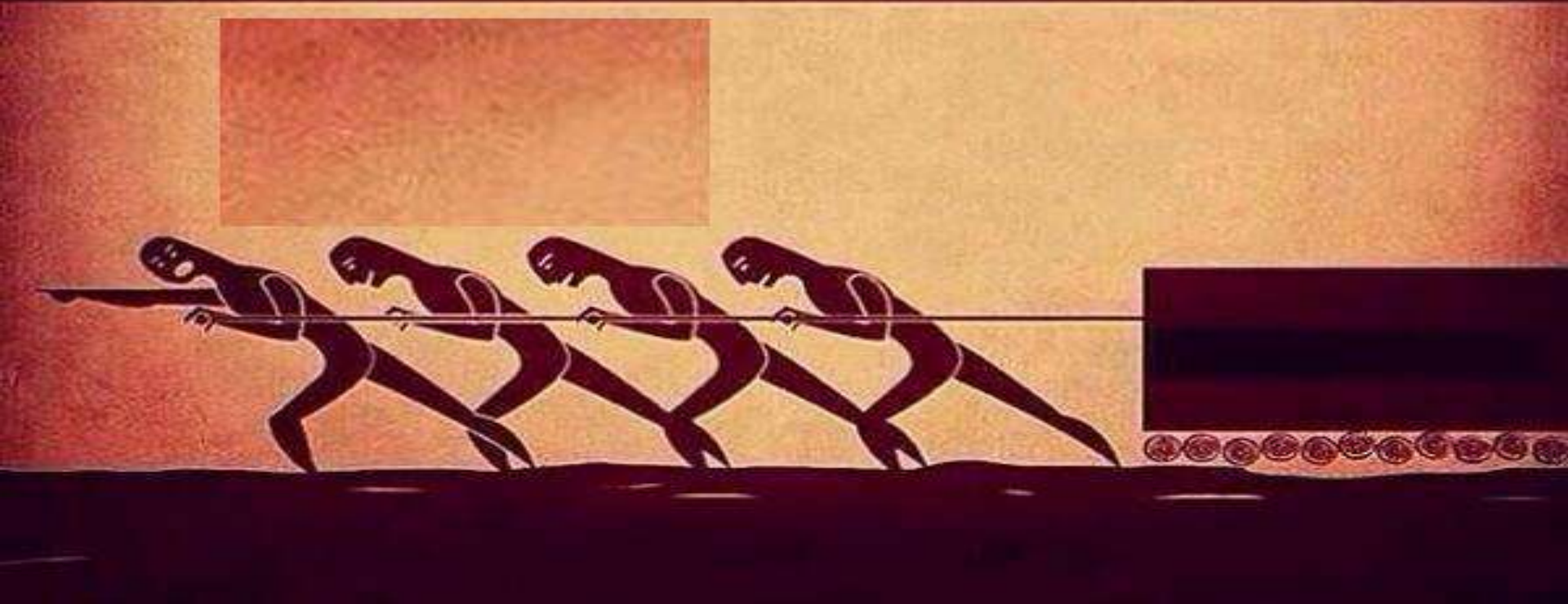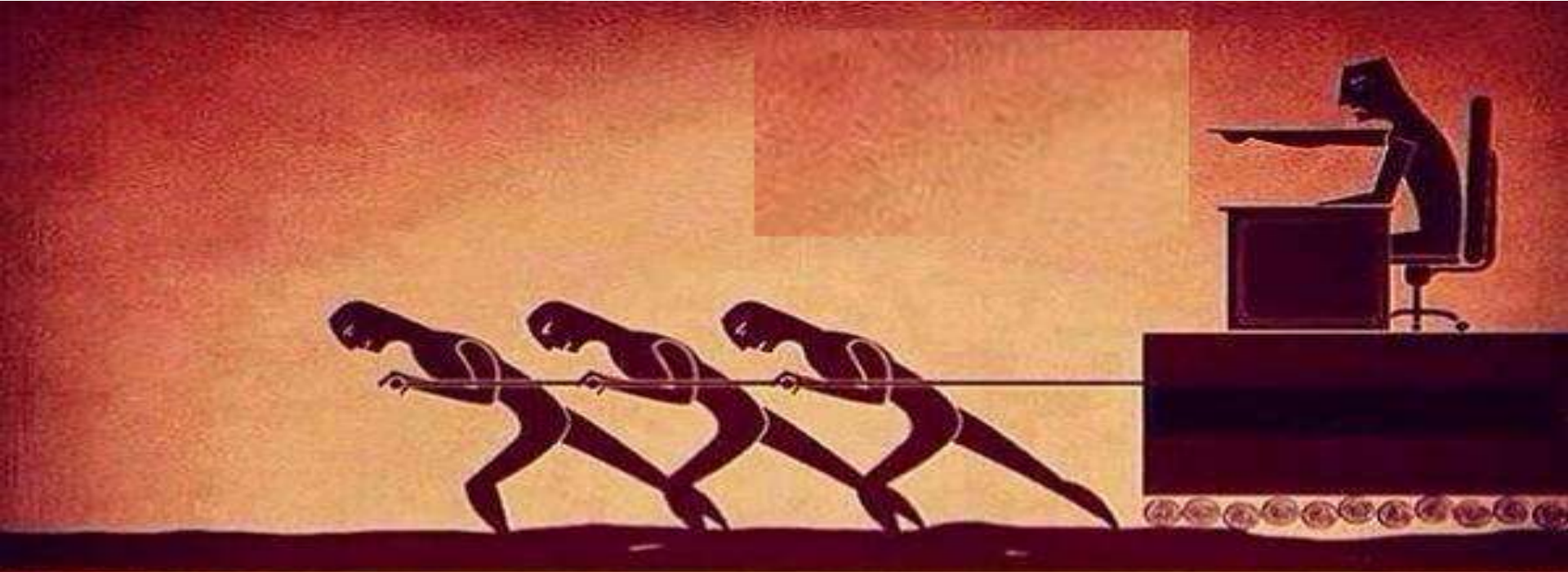- Cheerleader

4- **Controlling**

Manager
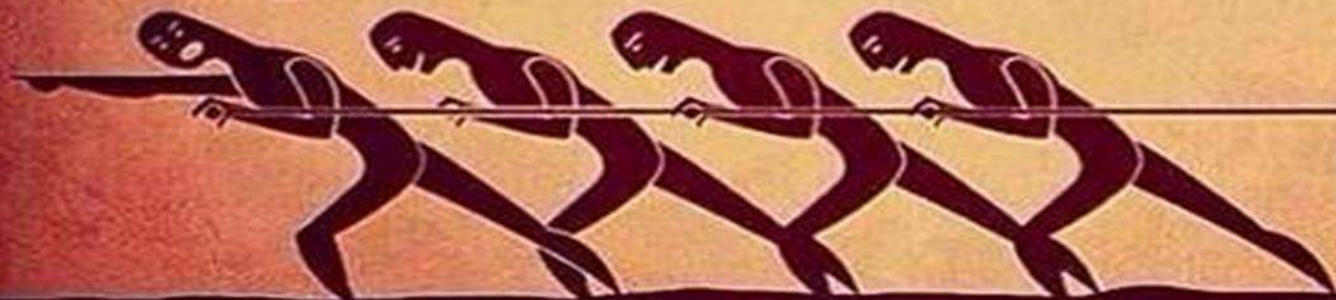- Implements control systems
- Performance measures

Leader
- Motivate
- Inspire
- Gives sense of accomplishment

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Communication Skill in Nursing

Introduction

Communication: is a complex, ongoing, dynamic process in which the participants at the same time create shared meaning in an interaction or sharing of information between two or more individuals or groups to reach a common understanding.

The **goal of communication** is to approach, as closely as possible, a common understanding of the message sent and the one received. feedback.

WHY DO WE NEED COMMUNICATION?

1. We cannot be human alone.
2. We live in a world filled with other people.
3. We live together, work together and play together.
4. We need each other for security, comfort, friendship and love.
5. We need each other to mature through dialogue.
6. We need each other to achieve our goals and objectives.

Importance of Good Communication

1. Increased efficiency in new technologies and skills.
2. Improved quality of products and services.
3. Increased responsiveness to customers.
4. More innovation through communication.

<u>COMMUNICATION PROCESS :</u>

is a simple model that demonstrates all the factors that can affect communication.

Communication is effective if the message that is received is the same one that is sent.

Phases of the Communication Process:

1. Transmission phase:

in which information is shared by two or more people.

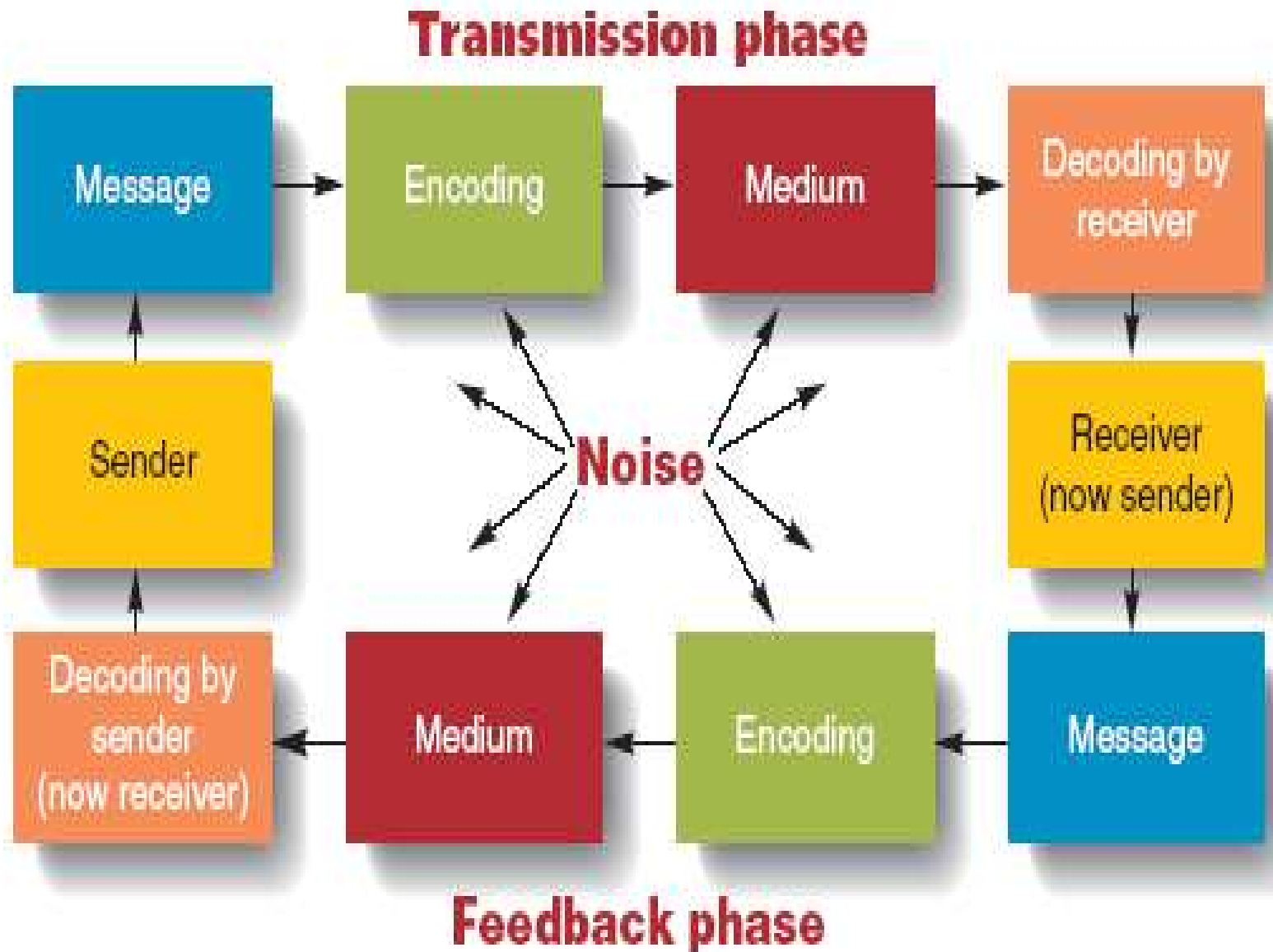2. Feedback phase:

in which a common understanding is assured.

Figure show communication process

Parts of Communication Process :

1. **Sender** – person wishing to share information with some other person.

2. **Message** – what information to communicate

3. **Encoding** – sender translates the message into symbols or language

4. **Noise** – refers to anything that hampers any stage of the communication process

5. **Receiver** – person or group for which the message is intended

6. **Medium** – pathway through which an encoded message is transmitted to a receiver

7. **Decoding** - critical point where the receiver interprets and tries to make sense of the message

Types of Communication :

1. **Verbal Communication**
   - The encoding of messages into words, either written or spoken

2. **Nonverbal Communication**
   - The encoding of messages by means of facial expressions, body language, and styles of dress.

Side Effects of Ineffective Communication in nursing :

1. Medical Errors.
2. Workplace Conflict.
3. Poor Decision-Making.
4. Increased Stress .

Types of Communication Media

1- Face-to-Face – Characterized :

A. Has highest information richness.

B. Can take advantage of verbal and nonverbal signals.

C. Provides for instant feedback.

D. Video conferences provide much of this richness and reduce travel costs and meeting times.

2-Spoken Communication Electronically Transmitted:

Characterized :

A. Has the second highest information richness.

B. Telephone conversations are information rich with tone of voice, sender's emphasis, and quick feedback, but not provide visual nonverbal cues.

3-Personally Addressed Written Communication:

Characterized :

A. Has a lower richness than the verbal forms of communication, but still is directed at a given person.

B. Personal addressing helps ensure receiver actually reads the message—personal letters and e-mail are common forms.

C. Does not provide instant feedback to the sender although sender may get feedback later.

D. Excellent media for complex messages requesting follow-up actions by receiver.

Disadvantage Communication Media:

A. Many managers do not have time to read all the electronic work-related information available to them

B. Problem with information overload is the potential for important information to be ignored or overlooked

C. Can result in lost productivity

Communication Skills for Managers as Senders:

1. Send clear and complete messages.
2. Encode messages in symbols the receiver understands.
3. Select a medium appropriate for the message and, importantly, one that is monitored by the receiver.
4. Avoid filtering (holding back information) and distortion as the message passes through other workers.
5. Include a feedback mechanism is in the message.
6. Provide accurate information to avoid rumors.

Communication Skills For Managers as Receivers:

1. Pay attention to what is sent as a message.
2. Be a good listener: don't interrupt.
3. Ask questions to clarify your understanding.
4. Be empathetic try to understand what the sender feels.
5. Understand linguistic styles: different people speak differently.
6. Speed, tone, pausing all impact communication.

Barriers to Effective Communication:

1. Messages that are unclear, incomplete, difficult to understand

2. Messages sent over the an inappropriate medium

3. Messages with no provision for feedback

4. Messages that are received but ignored

5. Messages that are misunderstood

6. Messages delivered through automatic systems that lack the human element

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STAFFING
in
NURSING

Definitions

- Staffing is the process of ascertaining that adequate numbers and an appropriate mix of personnel are available to meet daily unit needs and organizational goals.

OR

- It is the process of determining and assigning the right personnel with the right qualifications to the job in a right time to accomplish the purposes of the organization.

Purposes of staffing:

– Appropriate numbers and mix of nursing staff.

– Delivery of effective and efficient nursing care.

– Increase productivity.

– Avoid role confusion, communication problems and time waste.

– Maintain stability in team work.

Advantages of the staffing(job descriptions)

1. It is useful for recruitment, placement, and transfer decision.
2. To guide and evaluate personnel.
3. Help prevent conflict, frustration, and overlapping of duties.

Staffing process:

1. Identify the type and amount of nursing care to be given.

2. Determining which categories of nursing personnel should be used to deliver needed care.

3. Predicting the number of each category of personnel that will be needed to deliver care.

4. Selecting and appointing personnel from available applicants.

5. Recruit personnel to fill available positions.

6. Arranging available nursing personnel into desired configurations by shift and unit.

7. Assigning responsibilities for patient care.

8. Performance appraisal for various staff categories.

9. Continues staff development.

<u>Staff classification</u>:

1-Professional nurse: Baccalaureate degree , Master in Nursing (special in nursing).

2-Technical nurse: Secondary Technical Nursing School . (Diploma degree).

3-Auxiliary: messenger and transport personnel.

Components of Staffing:

1- Staffing plan:

It determines the number of nursing personnel that must be hired to deliver nursing care on the nursing units.

2.Staffing pattern:

It is the number and mix of personnel that should be on duty per each unit per shift, per day.

Methods of determining the staffing pattern:

1 - The number of beds per unit

(one nurse per 4-6 beds),

or

2-The average census of patients per unit

(one nurse per 4 patients).

The distribution of nurses is based on the <u>nurse manager</u>' opinion of the proportion of care that is needed on each shift and the adequate staff number to provide that care.

Example: Days: 45% of the staff
             Evenings   35% of the staff
             Nights   20% of the staff

Factors affecting staffing pattern determination:

1- **Patient factors**

    1- general health status.

    2-Length of stay.

    3-Patient number.

    4-Age group (pediatrics or adult).

2- <u>Staff factors</u>

1-Educational level of the nurses.

2-Experience level of the nurses.

3-Staff number.

4-Job description of each category of nurses.

3- <u>Health organization factors</u>

1-Budget available.

2-Personnel policies regarding work time.

3-Support services with the organization.

4-Number of beds.

5-Architecture design of the units.

Role of the Head Nurse

Definition of the head nurse:

is a professional nurse who is responsible for one hospital unit, where nursing care is provided.

The head nurse fills a first-line management position of the nursing management levels.

The head nurse is a link between top and middle management levels and staff nurses

Criteria for selection of the Head Nurse

1- Educational qualification

2- Professional qualification

3- Personnel qualification

Different roles of the head nurse

The head nurse has multi-roles in different areas in nursing as follows:

A. Patient care Management.

B. Staff management.

C. Unit management.

A. Patient care Management:

Head nurse must have a body of scientific knowledge and proper competencies to be able to use the five steps of nursing process and ensure that each staff nurse is able to use nursing process to provide patient care.

B. Staff management:

1. Orientation of new staff
2. Staff utilization
3. Time schedule
4. Patient assignment
5. Staff supervision.
6. Staff development.
7. Staff performance appraisal

C. Unit management:

1. Transcription of medical prescription.
2. Maintenance of supplies and equipment.
3. Maintenance of records and reports.
4. Plant maintenance
5. Reception of visitors.
6. Handling telephone messages