

Overview of Leadership and Management

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NURS-560-WEB CONCEPTS IN NURS LEADERSHIP

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My first time becoming a leader in the hospital I was overwrought. Let alone, the training to become charge was not sufficient enough for me to handle it on my own. My supervisors thought I was competent enough but I myself did not believe I was competent enough. I had questions, concerns, and full of distraught during the training. In this essay I will be explaining characteristics of a leader and the style of leadership I may fall under.

Level heading

The characteristics and qualities that I believe what makes a great leader would have to be knowledgeable, good communication skills, and accepting of others; all these characteristics I believe I have as a good leader. When mentioning knowledgeable, I do not mean smart but simply mean to have an all-around idea of how the unit works and what is there to be expected at the end of a shift. For example, as charge nurse at my unit we are expected to complete every audit that is listed in our tasks and while assisting in nurses with questions, labor, and documentation. When it comes to helping other nurses, it is expected for me to be able to be knowledgeable of how specific tasks are performed or what is acceptable on our unit. When it comes to good communication skills, I think of clearly stating of what needs to be done and making sure and the outcome of good communication skills would be a task done appropriately and correctly. Although many others may have communication skills, the outcome may differ for each person. “Leadership is the ability to influence and pursue the follower by guiding, motivating and directing to achieve organizational effectiveness” (Negussie & Demissie 2013). The organization effectiveness that is mentioned would be the outcome of excellent communication skills. Lastly, a mindful characteristic would be accepting of others. Although or biases may differ from one another, it is important to keep in mind that our expectations may differ from each nurse. Personality traits and culture are two things I keep in mind when leading my unit whenever I am charge. For example, others may not seek as much help as others even

though they may need it more than they think they do. I make it known for them to ask for help for anything and I always state, “There are no such thing as stupid questions” in hopes that they feel comfortable around me.

New heading

I definitely was not a “born-to-be leader” but I still I try to continue to be a good leader. I did not know that I would have made a good leader up until I became a charge nurse. Usually, I am listening to orders and do what I am told. I consciously developed leadership characteristics by examples of other leaders in the hospital. During my last quarter of the bachelor’s program at Pacific Union College I had the opportunity to do my leadership clinicals with the President of Nursing Operations who which was previously the Director of Nursing Operations of St. Joseph’s Medical Center in Stockton; Anitra Williams, also known as Dr. A., was a great preceptor. Because of her leadership skills that were shown every day, I started to develop her characteristics of being knowledgeable, communication skills, and accepting of others. These three characteristics worked well when it came to problem solving and critical thinking. She taught me the use of the nursing process and applied it to her day-to-day job. I also was able to follow my supervisor, manager, and house supervisor for my unit and hospital. All four leaders follow the chain of command which help me understand the “behind-the-scenes” of the hospital. They tackle on nursing related issues and “non-nursing” issues that span off from normal nursing practice. “Further specification and operationalization are needed to guide nurses to the political arena. For example, health policy competences should be focusing on in-depth understanding of global trends in relevant health issues and the profession's involvement in healthcare policy decisions” (Heinen et al, 2019). This example is just one of the many issues that our leaders of our hospital run into and I believe they prepared me for situations like these.

Level heading

Leadership styles are widely known to generalize characteristics. One leadership style that stood out the most and seems to be relatable would be the democratic leadership style. My way of leadership involves the whole team's input, and I would decide based on the majority. I try not to have the final say and be disliked by everyone. My motivation to becoming a good leader would be gaining everyone's trust within the workplace. "As leaders, they gain trust through developing relationships, listening, responding, and empathising with their followers" (Cope & Murray (2017)). I believe my bond with other nurses has grown stronger every year and I think the democratic leadership style I portray helps bring everyone together and become a solid team. For example, I try to make everyone's patient assignment fair in terms of acuity or difficulty of tasks rather than putting a nurse in an area that would overwhelm them and cause burnout.

Overall, either you are born to be a leader, or you built your own leadership skills, a strong team seems to be the most favorable outcome out of leadership and management within the nursing setting. It should not matter who you work with, but it is how you work together is the key to a successful leadership in the healthcare setting.

References

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