Developing yourself as a leader

Taking on a leadership role can be challenging. This article will explore some of the issues associated with becoming a leader and is the first in a series concerning leadership and management with an eye to contemporary issues of interest to today's nurse leaders.

Considering or gaining promotion to a position where one has to exercise leadership can be a daunting undertaking for any nurse. It is a simple fact, however, that the Nursing and Midwifery Council (2010) require all trained nurses to demonstrate some of the traits of leadership from the moment they are qualified. Developing from leadership of self, and in the care of individual patients, to leading a team of other nurses and care assistants, requires the nurse to take on some additional education and training, as well as a significant amount of reflection.

It is important to note that taking the step from being a competent nurse to being a novice leader takes some bravery and feelings of both fear and of excitement are quite normal. The best way to deal with these emotional responses is to acknowledge them and utilise all the help one can get from others in order to work them through. The transition from competent nurse to competent leader will take different people different amounts of time; this series will introduce leadership and management theory that will help clinicians make the transition.

WHAT IS LEADERSHIP?

Most of us know what good leadership looks like. We can identify leaders who we have admired and others who we were less impressed by. Definitions of leadership vary widely, but include reference to ideas such as influence (Yukl, 1994); having followers (Kellerman, 2007); accomplishing a common task (Chemers, 2014); and having the ability to communicate (Feltner et al, 2008).

What these elements of the definition of leadership demonstrate is that the leader must understand what the task is and must be able to exert influence over others in order to achieve the task. Of note these are some of the core skills of nursing — the ability to assess, plan and communicate — this suggests nurses who are ofay with the nursing process should be able to make the transition to first-level leadership.

BECOMING A LEADER

This section will briefly identify some of the issues the first-time leader should look out for, including some common pitfalls; many of the topics identified here will form the basis for future, more in-depth articles in this series.

The new leader will be the focal point for the team when they are seeking direction and understanding. Ward (2003) described what the team do as the 'common task'. It is this common task that the new leader must be clear about if they are to set the ways of working within the team. Therefore, having a clear vision of what the team seek to achieve and how this is to be carried out is a necessity for the new leader.

Many first-time leaders feel they have to do all of the work they previously did plus all the work that goes with their new position. On many levels, this is understandable as the novice leader tries to maintain their association with the practise skills they know so well. Continuing to undertake previous tasks, as well as the leadership tasks can, however, lead to considerable strain on the new leader and, therefore, Brown (2008) and Burwell (2007) suggested one of the first skills the novice leader should learn is that of delegation.

The new leader must take on what Mintzberg (1973) called the 'figurehead' role. Failing to step into this role will mean people from outside will not regard the new leader as someone they need to communicate with and the information the new leader requires in order to function effectively may

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prove difficult to obtain.

The other key stakeholder group for the new manager, apart from professional colleagues, are the patients and clients. Leaders need to find the time to listen to their patients and clients in order to ascertain whether they and their team are in fact achieving the common task alluded to earlier (Beresford and Croft, 2003). So the figurehead role extends to user consultation as well.

Individuals will want to have a different relationship with a new leader to that which they had when the new leader was one of the nursing team. This will include sharing information that the new leader would not have been privy to prior to taking on the new role. The new leader will be seen by many as the person they should talk to about their personal problems, professional ambitions, and issues they have with other staff, for instance.

Therefore, the novice leader will quickly need to adapt their relationships with staff and learn quickly how to handle the barrage of formal and informal information that now comes their way; they need to become an information handler. Positive engagement in the flow of information from employees has been shown to have a positive impact on the performance of staff (Tetrick and Haimann, 2014).

Leaders are seen by the team as the person who sets the moral and ethical tone in the workplace. The new nurse leader will need to quickly establish their credentials as someone who knows what is right and what is wrong. The moral tone of the practise team will often mirror the behaviours of the leader (Dawson and Butler, 2003) who needs to learn quickly to not only do the right thing, but also to be seen to be doing the right thing; in essence, they need to be morally active (Atkinson and Bailey, 2004).

Achieving quality, be that in meeting quantitative targets (such as waiting times) or more qualitative ones (such as patient experience) are a key concern of the nurse leader. This quality monitoring now extends to the practice of all of the team and is a reflection of the targets contained within the common task and forms an important part of the accountability of the new leader.

The leader is the person within the team who must plan and lead on change. The role of the change agent is to take the whole team with them in order to achieve the targets and goals of the organisation (Griffin, 2012). For novice managers, this can be difficult as they themselves are experiencing what is for them a period of unprecedented change.

CONCLUSION

Transition to the role of nurse leader can be both a time of great excitement and great worry. Preparedness for leadership requires those planning a move to leadership, or those newly engaged in leadership roles, to assess the responsibilities to be placed upon them. Many nurses have a good number of the skills required to be good leaders, but these need honing and refocussing on the leadership task, while other new skills need to be acquired. **Wuk**

REFERENCES

Atkinson D, Bailey S (2004) What does it mean to be a "morally active manager"? *Nursing and Residential Care* 6(7): 347–9

Beresford P, Croft S (2003) Involving Service Users in Management: Citizenship, Access and Support. In: Reynolds J, Henderson J, Seden J, Charlesworth J, Bullman A. eds, *The Managing Care Reader.* Routledge, London: 21–8

Brown T (2008) *Delegating Work.* Harvard University Press, Cambridge, Massachusetts

Burwell K T (2007) Conflict resolution, delegation, evaluations, resources: an overview. *Neph Nurs J* 34(2): 249–50

Chemers M (2014) An Integrative Theory of Leadership. Laurence Erlbaum, New York

Dawson A, Butler I (2003) The morally active manager. In: Henderson J, Atkinson D. eds, *Managing Care in Context.* Routledge, London: 237–56

Feltner A, Mitchell B, Norris E, Wolfle C (2008) Nurses' view on the characteristics of an effective nurse leader. *AORN Journal* 87(2): 363–72

Griffin R W (2012) *Management.* 11th edn. Cengage Learning, Ohio

Kellerman B (2007) What every leader needs to know about followers. *Harvard Business Review* 85(12): 84–91

Mintzberg H (1973) *The Nature of Managerial Work.* Harper and Row, New York

Nursing and Midwifery Council (2010) *Standards for Pre-Registration Nurse Education.* Available at: http://standards.nmc-uk.org/PublishedDocuments/Standardsforpre-registrationnursingeducation16082010.pdf (accessed 20.08.14)

Tetrick LE, Haimann CR (2014) Employee recognition. In Day A, Kelloway EK, Hurrell JJ. eds, *Workplace Well-being: How to Build Psychologically Healthy Workplaces.* John Wiley, London: 161–74

Ward A (2003) Managing the team. In Seden J, Reynolds J. eds, *Managing Care in Practice.* Routledge, London: 33-56

Yukl GA (1994) *Leadership in Organizations.* 3rd edn, Prentice Hall, New Jersey