Module 5: Toward a New Paradigm of Nursing Leadership Development

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Hello leadership trainees. It is a pleasure for me to join this significant training program. I am honored to have the opportunity to share with you about a new paradigm of leadership development for nurses that can be considered in educational, administrative, and practice settings.

Objectives of this session

After finishing this session, and after further study and activities, we expect that as trainees, you will:

1. Gain knowledge and skills to help you think through new ways of becoming a nurse leader in the 21st Century;
2. Appreciate the need to do things differently as a leader in dynamic health and/or education environments; and
3. Propose and act on relevant strategies to develop yourself to be great nurse leader to enhance excellence and sustainability in your organization.

Presentation sequence

1. Introduction
2. Global changes and health care systems and organizations
3. Leadership skills and characteristics in the 21st century and new paradigm of leadership development
4. How to develop nursing leadership
5. Conclusion

Teaching learning Methods

Lecture
Discussion with the project team
Group or individual work on exercise

Evaluation

Self-evaluation by the trainees
**Introduction**

Good leadership is an important indicator of key success in any organization around the world. In previous modules in this course you have studied a broad overview of leadership and change management, leadership for executives within the ASEAN region, and the importance of technology as a tool for developing leadership, all content proposed by well-known professors with expertise in leadership. This leadership development has a focus on your personal development as well drawing from relevant research and its application in a variety of settings. In Module 5, I want to focus on some nursing leadership characteristics needed in the changing environment of health care, so that as nurse executives you can learn how to cultivate yourselves, and also develop new and present nurses to be leaders of the future to achieve excellent and sustainable organizations. As well as developing your own leadership capabilities and knowledge, it is critical that you do succession planning to develop up new nurse leaders for the future (Titzer *et al.* 2013). This succession planning needs to be in the strategic planning of all organizations.

The content of this Module is conceptualized in a critical sense from proposed theories and concepts, and contemporary research findings. As well, I include reflections on my own experiences from real life working situations, teaching and learning environments, national and international study visits, and lessons learned from different situations. The title of this session is similar to Casserley and Critchley (2010)’s publication (A new paradigm of leadership development) which I have leaned heavily. I urge you to read their article focuses on describing a paradigm shift for leadership development in a new order post-recession.

All this session is designed to stimulate you to critically think about applying a relevant and culturally appropriate new paradigm of leadership in your present and future roles in your own situations.

**Global changes and health care systems and organizations**

Change is always with us, but it has never been so rapid in the history of mankind than at this current time. Around the globe there are changes in the demographics of populations, in social, economic, political, technological, environmental, scientific, industrial, agricultural, educational, and health spheres. There is tremendous innovation and information technology growth, in response to consumer desires, public need, government policy, funding and reform, and private industry marketing. In addition to these external pressures, today internal forces within any health system or organizations include various aspects: new strategies, administrative reform or expansion, growing workforce diversity, economical imperatives, new diseases, new technologies, new information management systems, changes in the morbidity and mortality of populations, health professional and other worker issues, and centralizing and decentralizing or downsizing concepts that seem to emerge in cycles.

These changes occur fast and are so hard to keep up. But they have a great influence on the way that leaders perform or need to perform for an organization to be successful and achieve its desired outcomes. All organizations, public, private, or non-profit, have to face these big changes constantly, thus, administrators as leaders need to be prepared to think ahead to try
to forecast changes all the time. As leaders we have to be proactive, not just waiting until we hear that things have changed. Reactive strategies are no longer useful or effective in this era. So remember, good leadership is a key success of any organization.

Health care reform is firmly on agenda of the 21st Century and in many countries such reform focuses on efficiency, equity, quality, safety, rising standards of practice, and access to care. Of course, there is a great variation among countries regarding the speed and depth of this reform, and there are still great disparities regarding access to quality and appropriate health care in many resource poor countries. At present, health care settings have become more complex and dynamic with new technologies, drugs, treatment, care equipment and facilities, policies and protocols, and competing demands and high expectation of clients and stakeholders. There are opportunities and positive effects: tele-health and tele-nursing, increased networking, new job opportunities and improvement in health care, while negative effects are environmental pollution, local culture breakdown, and unsafe work environments (Shaw, 2005). Health professionals need to be updated in knowledge and experiences as well as innovative technology and research for best practice. Nurse administrators and leaders also have to prepare themselves as well as staff nurses to have good leadership skills. This is to help them to be more competent to work in the complex, and sometimes chaotic, health care organizations to provide quality, safe and appropriate care.

Who are leaders, administrators or managers? And what is leadership?

Often in the literature you will see the terms manager, leader, supervisor, and administrator used interchangeably, but they are not the same thing (Sullivan, 2012).

A leader is one who influences others in both ideas and behaviors. They are chosen to lead the team to assist, direct, and coach team members to achieve goals, or are the ones whom others want to follow. Leaders are ubiquitous. And they need good powers of persuasion and guidance, and political influence (Sullivan, 2012). Leaders these days also need to live with ambiguity and uncertainty, and be ethical, transparent, courageous, and accountable (Porter-O’Grady & Malloch, 2013).

Leadership contains the characteristics of talent, esthetics, knowledge, good communication, and competency which lead others to collaborate and achieve ultimate goals. Said in another way, leadership is a process or a set of behaviors that influences others to control, direct, motivate, and inspire others to achieve set goals. Leadership can be formal or informal, and there are many aspects and opinions about what makes a good leader. However, current literature informs us that certain characteristics are more admired or more effective than others. Do some reading about this.

An administrator or manager is the one who gets things done through other people, using planning, organizing, leading, and controlling processes to achieve the goals of the organization. They are appointed in an administrative or management position and in a functional role within an organization.

Good managers are also good leaders, but as Sullivan (2012) tells us, managers may not be leaders of people but of resources. Similarly, you might be a good leader but do not have fine
management skills. A leader has to develop themselves to be ready to use good leadership characteristics or skills if they also want to be a good manager/administrator. However, this does not mean that only administrators or managers need to have leadership skills: all nurses in different settings require some leadership abilities such as being a clinical nurse leader or a leader in a community and society. And all have to use leadership skills in an effective way.

In general, there are three- four types of leaders ranging from very autocratic leaders who want to control others or the work concerned, to laissez-faire leaders who do very little to control others or the work concerned, and democratic type who concerns both work and people. A characteristics of each type of leader effects the achievement of the organization, either in an achieve or fail sense. Do some reading of literature about the types of leadership that are in the literature to inform yourself of how things might be done differently when leading from the front or above. Some situations require different types of leadership. You can also use various tests to try to ascertain what type of leader your are, and then to think about what you need to do to change or develop a leadership style that is more in tune with the 21st century. Simply do a search using the phrase ‘how to find out what type of leader you are’ and you will find different tests. You can also search for 'leadership development testing', and an array of psychological testing and management testing is available.

Leadership Skills and Characteristics in the 21st Century, Leadership for Nurses, and New Paradigm of Leadership Development

Leadership development in the 21st century or new era needs to be focused on a new paradigm if you are going to adjust well to different ways of doing things. Doing things the way they were done in the 20th century is not always appropriate now. Learning from experiences, a mentor, a coach, your peer group in leadership positions, by your own actions, or even from the environment around you can be used to help position yourself as a 21st century leader. To manage changes in this century, an organization should be prepared to be a high performance organization which consists of a customer-driven, mission-oriented, learning organization, that is technology-based. Empowerment and participation, networking, and accountability of leaders are key concepts recognized as critical these days in such organizations.

Bennis (in Nanus, 1992) proposed that 21st century leadership characteristics are visionary leadership with effective communication; being a reliable person; having awareness and commit to change, and linkage to globalization; and daring to make a decision to change an organization to be smaller and flexible. Further, we need in this modern era transformational and transaction leaders to inspire others. More recently, Randall and Todd Tabias (2003) stated that leadership is integrity, dedication, respect for colleagues, good management and communication of one’s own ideas, good interpersonal skills, values and culture, and being visionary and sharing that vision embracing matters with passion. Being a change agent, risk taking, and thinking ‘out of the box’ are also required.

Another set of leadership development concepts which still can be used in this era are the seven habits of effective people as suggested by Stephen Covey (1989). He also proposed the 8th habit of leadership (Covey, 2004) as follows:
1. **Be proactive**: You are in charge, so be a responsive person. Think ahead.
2. **Begin with the end in mind**: have a plan, so plan ahead and set goal(s).
3. **Put the first thing first**: set priorities of the work, make a schedule to follow the plan, and be disciplined and organized.
4. **Think win/win**: have a strategy in which everyone can win something, getting what you as leader wants, but also in consideration of what others want.
5. **Seek first to understand, then to be understood**: listen before talking, listen to others without interrupting.
6. **Synergy**: working together is better, a positive teamwork to achieve goals no one person can work alone.
7. **Sharpen the saw**: Balance your body for health, make time with family and friends, and school, and
8. **Find your voice and inspire others**: seek a voice of the human spirit, full of hope and intelligence, resilient by nature, boundless in its potential to serve the common goal.

These eight habits or leadership characteristics as proposed by Covey (1989, 2004) can be divided into three stages namely, dependence, independence, and interdependence. They can also be grouped as a private victory and a public victory. They can be used in this new paradigm of leadership development since they cover all aspects in real life in present and future situations. These demonstrate the importance of leaders equipping themselves first, before contributing to others or the organization in general.

Greenleaf (in Beazley, Beggs, and Spears, 2003) proposed servant leadership as a powerful concept. This starts with the feelings of people who want to serve, which channels into the aspiration to lead. Leadership characteristics are grown in people while they serve others and are always in a stage of development. Thus, leadership over time becomes healthier, wiser, freer, more autonomous, and you are more likely to become more effective servants. Ten characteristics of servant leadership are as follows:

1. **Listening**: listen intently to others and listen receptively to what is being said and not what you said, and seek to understand people’s body, spirit, and mind. Listen and then reflect on what people have said.
2. **Empathy**: Empathetic listening is very important. Understand, recognize and accept their behavior, performance, spirit, and self.
3. **Healing**: is a powerful force to help others who suffer from emotional hurt. Help them and help lead them to wholeness.
4. **Awareness**: aids understanding the issues related to values and ethics. It also helps people to view the situations in a more integrated and holistic way.
5. **Persuasion**: Use persuasion more than authority for decision-making, in order to convince others, and rather than to achieve coercive compliance.
6. **Conceptualization**: Thinking beyond that of a day-to-day basis helps leaders to have a broader base of conceptual thinking, instead of thinking within the short term. A leader should have a clear idea of a change or task before proposing the vision to the organization. Leaders need balance between conceptual thinking and day-to-day thinking so that a good vision can emerge.
7. **Foresight:** is close to conceptualization, and is the ability of people to foresee the outcome of a situation. It is a characteristic that helps a leader to understand the past and present, and then connect to a decision for the future. It is deeply rooted in an intuitive mind.

8. **Stewardship:** The use of openness and persuasion to commit to serve the needs of others, and hold an institution and its community of people in trust for the good of society.

9. **Commitment to the growth of people:** Recognize and commit your responsibility as a leader to do everything to nurture the personal, professional, and spiritual growth of others.

10. **Building community:** Seek to identify some means for building a community among those who work within the organization. And to rebuild or enhance that community as a viable life for a larger number of people.

As previously stated, these leadership characteristics seem to have commonality for the leadership development in the 21st century. Some of them have been proposed for more than 20 years, but they are still relevant for use today, and can contribute to a new leadership paradigm. Leaders can adapt these concepts to use wherever they fit in their own institution or environment.

In health care organizations, nurses can play a significant role in turning a healthcare system around, to reform it for the greater good, by providing the vision, creating the direction and leading the way. Nurses can transform the health care system because of their numbers, their scope of practice in many roles, and their ability to care for people at all age groups in different settings (Gottlieb, Gottlieb and Shamian, 2012). To reiterate, leadership development involves developing oneself first, then developing others. This leads to more effective contributions to people and the greater environment, in communities at any level, organizational, local, national and global. Nurses have great potential to be leaders in the world, to rise above their important practice environments to lead others to make great contributions to the health and wellbeing of people everywhere. As a nurse you might need some ‘self-talk’ yourself regarding your worth as a leader, to recognize the leader within, and to think that leader requires assertion, but also periods of having humility. However, do not be too humble, especially if you want to have great potential to make contributions to many other disciplines and levels of society. Nurses are great organizers and planners, and are used to working in complex and challenging environments, often resource poor, and deal daily with humans in sickness and in health. The qualities of good nursing are also often commensurate with the qualities of a good leader, but in my experience, too often nurses say ‘I am just a nurse’. This devalues their ability and their self-esteem to become great leaders, as well as acting to devalue their profession. One observation I have made over the years is that we often talk about not having good nurse leaders, when in fact part of the problem is that nurses do not see their own potential or engage in opportunities to develop their leadership. Moreover, often they have not realized the necessity to develop programs for nursing leadership, or have not had the resources to make this happen. This is no doubt a strong background reason for this particular course in leadership development.
Huston (2008), a global nursing leader, found that characteristics of nurse leaders for 2020 consist of: a having global perspective or mindset in health care and nursing issues; technological skills which facilitate relationships, interaction, and operational processes; expert decision-making skills; being able to create a quality and safe organizational culture; understanding and making appropriate interventions in political processes; having collaborative and team building skills; balancing between authenticity and performance expectations; and envisioning and proactively adapting to rapid change and the chaos of health care systems. Taking this all into account, both educational and health care institutes have to be concerned with these characteristics, and prepare student nurses and nurses to be proactive to work with change. This involves critical thinking and problem solving in reforming or developing formal curricula and professional education programs, so that graduates can work responsibly, effectively and appropriately in a rapidly changing era.

Unfortunately, a recent systematic review of literature (Tizer et al., 2013, p.971) found that ‘despite the clear benefits of succession planning, studies show that resource allocation for proactive, deliberate development of current and future nurse leaders is lacking’. This is very important for you to consider in your leadership roles. Growing leadership in a deliberate way requires thoughtful planning and allocation of resources, and sometimes using political persuasion to get the resources in the first place.

Beside the leadership development of nurse leaders, it is important to be aware of the sustainability of leadership of people in an organization. Casseerley and Critchley (2010) proposed the paradigm of sustainable leadership, which is suited with this era and can be applied in nursing and in various organizations. The sustainable should cover: the personal level which includes physical and psychological health; the organization level of a work environment in which people can flourish and realize their own potential service; the sociological level which responsible to the broader community; and the ecological level of environmental sustainability.

Research results have shown that in the new paradigm of leadership development, performance derives from the integration of three core processes of reflection on action or learning by doing. These are: psychological intelligence or having a clear sense of personal purpose; an awareness of personal assumption and motivation; and physiological well-being and effective management of stress and sufficient self-care. Sustainable organizations need to have these three core processes integrated with daily work, as well as the engagement within the culture of the organization of effective leadership development and sustainable leadership (Casserley & Critchley, 2010).

1. Concern with human sustainability as pre-requisite for performance;
2. Foster and integrate core individual processes of reflection on action, psychological intelligent and physiological well-being;
3. Negotiate engagement between core processes and culture of organization;
4. Leadership emerges from reflection on action in dealing with real life adversity; and
5. Focus on the quality of the relationship between the individual leader’s core processes and the culture of the organization.

Leadership Development and Change Management for Nurse Executives in ASEAN Countries

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Discussion Questions: Think about yourself

1. What is your leadership activities within the past two years?
2. What are outcomes you can identify?
3. Have you helped others to be new nurse leader?
4. What are strategies you used to develop yourself and your followers to be good leaders for sustainable organization?

How to Develop Nursing Leadership

Leadership development is a personal and professional responsibility of everyone striving to be a leader. It involves self-preparation, support from family, educational institutes and practice settings, and importantly by an organization itself.

Education institutes

Leadership curricula and instruction around the world needs reform. Health administrators, educationalists and governments need to be committed to finding different ways and paradigms of teaching, and learning to produce competent graduates with 21st century skills. This clearly includes good leadership skill development and knowledge improvement of the people who are involved in education and training before they can educate and train others. Moreover, specialized master and doctoral degrees, and special training programs in leadership, policy, and management need to be incorporated within the health and educational frameworks in many countries to achieve this.

Practice settings

Practice settings and organizations need to think and act on strategies to develop leadership skills for nursing staff across a range of settings and provide a range of opportunities to practice nursing leadership skills in an effective way. Trained facilitators are required to plan for leadership development with individual leaders in terms of their personal strengths, knowledge, skills, and career goals. This also involves knowledge management among experienced and new nurse leaders, for in today's world there is the potential to get information overload, leading to ineffective leadership and poor management of time and effort. In addition, coordination and training for individual empowerment and development of leadership potential needs to be attended to through research, and checking the cultural beliefs, attitudes, values and ethical stances of staff, for example, principles like respect, dignity, autonomy, honesty, justice and service. Further, clarification of roles and responsibilities, accountability levels, and skills of the nurse are important to consider.

Personal development

Many theorists, leadership gurus, and experts around the globe have written books, articles, or shared a variety of ways to improve or develop leadership skills of others. Please avail yourself of this knowledge. Look at the Internet and elsewhere for such knowledge, do lots of reading and reflection, seek out opportunities to meet leaders and dialogue with them, or join in leadership workshops and seminars. There are many free videos on leadership that you can watch on YouTube, and you can observe leaders in practice, in politics and many walks of life, even through watching various media.
Learning to become a great leader involves lifelong learning. You can study in formal and informal educational programs, learn from other leaders, socialize and invest in yourself to learn and practice leadership skills in variety situations and settings. Learning about leadership can take place from everyday life using critical thinking, creative thinking, conceptualizing ability, linkage among knowledge, experience, environment, and daily activities even in your leisure time watching movies, and other activities.

The studies of leadership development of Thai nurse leaders have shown that leadership development are from family as a warm and good family, institution, nursing profession, role model, and their commitment for self-development (Chankaewrae, 1998; Tharasook, 2000; Meekruarod, 1999; and Thongsong, 2003).

Lesson learned from geese: Example of leadership development

There are many lessons to be learnt from geese in terms of leadership development, for example:

When geese fly together and flap their wings, they create an uplift for others to follow. By flying in a V formation, the whole flock adds 71% to their range than through flying alone. Further, whenever a goose falls out of formation, it feels the drag and resistance of trying to fly alone, and so gets back into formation to have the lifting power of flying with others. People would also benefit from getting together with others to go the same way and to accept assistance from others as well as being ready to help others. In addition, once the lead goose is tired, it rotates back to fly in the flock and another goose flies into its leadership position. This means that geese work as a team and help one other to achieve the same goal. When a goose is sick or wounded or shot, two geese drop out of the formation to help or protect it. They will stay with it until it is able to fly again or dies. They then launch out their own, with another formation of geese, or catch up with their group. This shows the thoughtfulness of geese. This example of geese behaviors can also be used as an example of a leader showing concern for others, and team members working together in a caring and goal directed way (Farid, & Muna, 2005).

As stated previously, developing sustainable leadership within a sustainable organization is imperative for the growth of the organization. As stated by Shaw (2004), successful programs of leadership development are those that are relevant, effective, have impact, and are sustainable. To achieve this, nurse leaders can use the practical example of Casserley and Critchley (2010):

1. Individual inquiry into core individual processes. The senior nurse leader asks a new nurse leader or potential nurse leader to assess their personal sustainability and the culture of organization regarding the fostering of work and career. You could use a survey and face-to-face interview to ask the questions regarding the most challenging time during a nurse leader life or staff role. Further, a physiological well-being assessment is performed, including medical tests;

2. Executive coaching to explore the leader’s dominant narrative. Nursing leaders explore the dominant narrative they have about themselves as a leader as well as their story;
3. Coming together to explore alternative ways of leading: Senior nurse leaders, young leaders and followers meet and discuss their psychological and physiological well being which may impact their leadership, decision-making, and interaction with others;

4. Continuing the coaching about leadership;

5. Action inquiry into the day-to-day practice of sustainable leadership. For example, groups from different departments ask questions about the practice of sustainable leadership, then they go to work, and practice and reflect on the experience of using new forms of leadership behavior;

6. Uncharted territory: Using the new paradigm of sustainable leadership such as concern about human sustainability as a pre-requisite for performance, fostering and integrating core individual process of reflection in action, negotiating engagement between core processes and organization culture, using reflection on action and real life adversity, and quality focus on the relationship between individual leader core processes and organization culture; and

7. Succession planning should assure adequate mentoring, training and opportunities to prepare nurses for future leadership in clinical and academic settings.

Shaw (2004) also proposed the importance of sustainable leadership and strategies for leadership development; which consists of review; change and renewal; mentoring; peers relationship and networking; local stakeholder support; peer review and performance-based appraisal system; retreats; formal and continuing education; individual development plans and career development; and cerebration of achievement.

Conclusion

Leadership development is significant to the success of individuals, organizations, communities, and societies. The future of various organizations is different as they are seeking partnership, without boundary, based on trust. It is important that nurse leaders stay on the top of the game. Thus, both present and future nurse leaders should be concerned with and prepare themselves to adopt and implement a new paradigm of leadership development, and to be good leaders for better outcomes.

Finally, I provide you the exercises as it is a practical way of such preparation are using exercises for development, such as those below.

EXERCISES:

1. **The Room Game:** Use this exercise to think about change, people's acceptance levels regarding a particular change, and your work requirement to focus on strategies to bring about a desired change. Think about a real-life situation at work and consider the following:
Room 1
People in this room are satisfied with their status, and refuse any change to their work or the environment. However, they have not verbalized their feelings about the change to you. Therefore, it is difficult for you as a leader to move them into accepting and implementing the change.

Room 2
People in this room are satisfied with their status, and refuse to be involved in any change. They clearly express their feelings about this to you.

Room 3
People in this room accept the change that needs to be made, but they are confused about how to implement that change.

Room 4
People in this room accept the change and know clearly how to implement it.

Questions for you to think about:

What room are most of your co-workers in?
Is there any evidence to support their position about the change? Or other relevant evidence you need to consider?
How can you move your co-workers to a better room?
What about yourself? Which room are you in regarding the impending change?

What are your feelings? And how can you positively direct your energies into leading others to accept and implement the change?

Exercise 2: Learning from Leaders

You can use this exercise to develop your own leadership ability or develop it in others in health or education settings. One of the faculty at Chiang Mai University, Professor Sue Turale, has used variations of this exercise in leadership education in nursing and university settings for many years. She and her learners have found it to be a very useful way of developing leadership knowledge and potential, as well as encouraging leaders to pass on their knowledge and experience to new leaders or those with the potential of becoming one.

Learners about leadership development work in groups of two.

1. Contact four, well respected leaders from different settings, two from nursing practice, nursing education, nursing associations, non-profit organizations, politics, or community nursing; and two non-nurses from community settings, business, government, or other areas of society. All of these leaders should not be colleagues regularly working with you, because it is important that you seek information from outside of your organization to broaden your thinking.

2. It is important to say to these that this is not a formal research project. Explain that you are studying leadership and want to gather their thoughts to inform you about how you can become a better leader for the future. You want to know more about good
leadership from people who are respected for their skills and knowledge about the topic. Do not write down names of the leaders you speak to. Tell them that their identities and advice will be kept in confidence, unless they choose otherwise.

3. Ask each of them to think of good leaders that they have worked with.

4. Ask them why they thought these people were good leaders.

5. Ask what they think constitutes good leadership for the 21st century, and what qualities a new leader needs to develop to be effective.

6. Ask what were the critical elements that helped them develop as leaders.

7. Take good notes on all of the above when you interview them. Remember that the quality of the answers often depends on the quality of the questions asked, so plan your questions ahead.

8. If this is an exercise for learners in a health or education setting, bring the learners together to share their findings, about the similarities and differences they found with the leaders they spoke to. They might be able to come up with a set of common qualities or ideas that will aid their learning and strategic thinking for the future.

9. If this is an exercise for you (and a colleague), make reflective notes, and discuss these, again identifying similarities and differences. Try to involve a third person, a ‘critical colleague’ or a mentor, in your discussion so that they can help you challenge your thinking, problem solve and develop strategies for your own leadership development.

10. A similar exercise to that above can be used regarding leadership succession.

References


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