

# Nursing leadership and management

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Nurses are charged with the role of leadership, management and caregiving.

As Chapman, Johnson & Kilner (2014) write, professional nurses that are in leadership positions have no alternative but to act as leaders in their professional setting. For the Clinical Nurse Leader (CNL), the case is no different. This essay will attempt to assess the leadership, management and care giving roles of the nurses as applied in the hospital experience.

As seen in the research conducted by Chapman, Johnson & Kilner (2014), there are different forms of leadership styles that the nurses can apply in the clinic setting ranging from affiliative styles, coaching style, democratic, authoritative to pacesetting style. For the case of the CNL, they have no option but to always assess the context of the situation prior to selecting the leadership style in the course of dispensing duties in the hospital setting. This also relates to the fact that each organization functions on its own rules and already has a defined culture (Chapman, Johnson & Kilner, 2014). In line with this argument the leadership role and management of the CNL needs to depend on the context and the leader has to be extremely flexible while using either of leadership styles.

According to the tasks of the CNL, the application of a historical assessment of leadership style may prove useful in their line of work as Chapman, Johnson & Kilner (2014) indicate. Since the tasks of the CNL are diverse, complex, and novel in the field of nursing, the nurse leader may assess the success of the leadership styles before and evaluate if the same are applicable in their present setting. If the leader manages to create a leadership pattern, then he/she has a proper chance of successful execution

of duties in the hospital setting.

Evidently, the CNL is expected to create an effective team through his/ her leadership styles in the hospital setting. Chapman, Johnson & Kilner (2014) write that effective teams need to be developed if the organization has to function as a unit and achieve the set objectives. This means that it is the responsibility of the CNL to make sure that they learn the strengths and the weak points of the team members so as he/she can devise the most effective way of leading them.

On another view point Chapman, Johnson & Kilner (2014) are of the opinion that leadership must also ensure that the healthcare services are cost effective and that the quality of the services does not go down. This means that Clinical Nurse Leader (CNL) has to always make sure that the leadership styles applied always see to an improvement in the clinical setting, for instance through motivating the team members to always provide their best services when required, and even motivating the nurses that may seem to have lost interest in their job.

Conclusively, the nursing profession is greatly linked to leadership, management and care giving. In line with this argument, the nurse leaders must always make sure that they apply leadership styles that are appropriate and ones that can improve service delivery in the hospital setting.

## Reference

Chapman, A., Johnson, D. & Kilner, K. (2014). Leadership styles used by

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<http://dx.doi.org/10.1108/LHS-03-2014-0022>