

# [Skills required for effective leadership](https://assignbuster.com/skills-required-for-effective-leadership/)

The role of a leader is complicated, and often predicated on the environment they lead in. Many organizations lend themselves, to certain types of leadership based on the amount of freedom from policies and directives. The Veteran Administration Health Care Services (VAHCS), has a number of directives, or policies which dictate the type of leadership one can portray. Certainly, transactional leadership is the most compatible approach in this environment. Essentially, this is a contingent reward for performance, monitoring and correcting behavior, or intervening when standards are not met(Reuvers, van Engen, Vinkenburg, & Wilson-Evered, 2008). However, this does not leave any room for going above and beyond, for exceling in performance, productivity, and ingenuity. Health care systems, especially those serving the country’s Veterans, are a place where authentic, servant, and responsible leadership can work to promote excellence, and innovation. For this assignment, I will define and compare servant, authentic, and responsible leadership. Then I will detail a situation in my workplace where the outcome was directly impacted by the leadership theory applied. I will explain which leadership theory was most closely associated with the leader’s behavior. I will discuss a different leadership theory that proved to be more appropriate for the situation, and why it was better for the team and the leader in the long run.

A Trio of Leadership Theories

The term leadership has many definitions. In general, for organizations, it is the process of influencing stakeholders, by words or actions, to alter behaviors, feelings, and actions, to work towards a common goal(Mango, 2018). There are many leadership theories For the purposes of this paper, authentic, servant, and responsible leadership theory will be discussed, and compared.

Authentic Leadership

Authentic leadership theory is based on genuine, transparent, relationships, built with followers, while being true to oneself(Day, Fleenor, Atwater, Sturm, & McKee, 2014). Authentic leaders use idealized influence, inspirational motivation, and individualized consideration in an ethical manner to influence the perception of the stakeholder. Here leaders will intellectually stimulate followers with dynamic interactions, to stimulate discussion and brainstorming to come together to find creative ways to reach goals. Authentic leaders have vision with a sense of responsibility to the organization and followers to the point of self-sacrifice(Nichols & Erakovich, 2013). Overall, authentic leaders remain true to their implicit nature.

Servant Leadership

Servant leadership theory emphasizes, being a servant first, making sure other’s needs are met over their own. The relationships are built on an ethical foundation. Servant leadership practices focus on the mission for the greater good, mentoring, inspiring the team, and open communication. Leaders work to understand and promote their stakeholders to excel and successfully reach their common goal, which is the mission of the organization. Servant leaders influence workforce and community trust through the focus on nurturing the team and community well-being(Yoshida, Sendjaya, Hirst, & Cooper, 2014). Servant leadership and building relationships with employees is important in encouraging employee creativity and innovation(Yoshida et al., 2014). Effective leaders, create an organizational climate which enables themselves and followers to continually learn and grow (Milić, Grubić-Nešić, Kuzmanović, & Delić, 2017). This results in an increased dedication to the leadership and the organization. Servant leadership results in improved outcomes, but it does so at the cost of the leader who will support the stakeholders no matter the cost to self. Servant leaders often fall into self-sacrificed servanthood.

Responsible Leadership

Responsible leadership theory focuses on doing the right or ethical thing, for all of the organization’s stakeholders, and society(Pless & Maak, 2011). Responsible leadership has partly grown out of the need for leaders to do the right thing, after such disaster scandals and unethical conduct scenarios like Exxon Valdez, and Enron Corporation. These instances have led to increased interest in a different kind of leadership. Responsible leaders are expected to foster responsible behavior, help create responsible organizational cultures, and be good citizens. The goal is to achieve social, environmental, and economic value for the organization and for society. This leader’s focus is on accountability, moral decision-making, and trust. They work to build ethically sound relationships with stakeholders, to create an interconnected society in the organization, this will reach beyond the organization to build a stronger, morally responsible society(Pless & Maak, 2011). Responsible leaders are needed in every facet of life.

So How Does Responsible Leadership Compare to Servant and Authentic Leadership?

All of the leadership theories seem to have some overlap. They all focus on the good of the organization, ethical behavior, and to some extent societal improvement. Responsible leadership is similar to servant and authentic leadership in many ways.

Responsible and servant leadership, both focus on serving their stakeholders. Together leaders and followers can raise one another to higher levels of motivation, morality, and commitment. While servant leadership focuses on the individual, responsible leaders focus on the overall organization, with attention in and out of the workplace to improve society as a whole(Pless & Maak, 2011). They do this without the self-sacrificial servanthood.

When compared to authentic leadership, one finds both responsible and authentic leadership focus on being true to oneself. Responsible leaders, also aim to develop of sense of others’ emotions and values. Both leadership styles aim for positive organizational outcomes, but responsible leadership seeks to contribute value and social capital by stakeholders in business and society, with the ultimate goal of positive social change. The idea of responsible leadership creates a concept of self and authenticity (Pless & Maak, 2011). This may work to help create more humane organizations.

All Employee Survey

Working in a Veteran’s Administration Health Care System (VAHCS) gives many opportunities to see all types of leadership, and lack thereof. There are many who have mastered the skill, and have followers galore. One example of the expectations of transactional leaders, is the All Employee Survey (AES). It is a workplace employee survey, which is given every year, and has a big impact on the facility’s overall standing in the national Veteran Administration system. In fiscal year 2017, the response was dismal. The surgical service had 32 respondents out of 116 employees. The service chief, Dr. R, informed the stakeholders at the monthly service meeting. They were told of the expectation, they would log on, fill in their demographic information, then answer the questions regarding their opinions of their respective work environment, and supervisors. Despite the “ anonymity” of the survey, the employees felt unsafe. The survey has several questions which would make identifying the respondent easy. They were concerned for their livelihood, and feared retribution. So of course, only 32 people filled out the survey. For FY17, the service chief exhibited transactional leadership, and even hands off or Lassiez Faire leadership(Wong & Giessner, 2018). He informed them of their duties, and what was expected of them, and nothing more. The facility suffered as a result of the poor representation.

In fiscal year 18, a new acting service chief took over, Dr. V. After reviewing the emails from the top leadership regarding the AES, she noted the emails were hard to read and understand. They required opening several files to figure out how to access the survey. Additionally, the survey still looked scary, despite the promise of a pizza party for every section attaining over 80% response rate. The rumors were circulating. No one was going to fill out the survey again, they were still afraid of retaliation for any negative comments they might have. Knowing the AES response rate is an important measure for the service, and the facility in the region, she called on the AES coordinator. After a long discussion with her, regarding the processing of respondent’s demographic data, Dr. V created a single PowerPoint slide with the highlights of the AES. Namely, she used eye-catching bright colors, a picture of a tasty pizza, and easy instructions and a link to access the survey. She added the important details on how the survey was truly anonymous and safe. Dr. V knew that most medical providers have very little time to look through administrative information, and surgeons have a short attention span, in addition to being impatient. The mock-up image was emailed to the service, and presented at the service wide meeting. This time, Dr. V had taken the survey, assured everyone that the demographic data was used at the national level, and never made it back to the facility. Finally, Dr. V bought full-sized candy bars and made leadership rounds. She met every single employee in the surgical service, and listened to their concerns. She assured them the service really cared about their opinions, good or bad. She encouraged them to fill out the survey, so the service and she would know their opinions, ideas, and issues. The candy bars were not meant to be a bribe, as she assured them, she would never know who filled out the survey or what individual comments were. She also told everyone that her door was open at all times, if and when they had an issue, question, or just wanted to share an idea. Over the next few weeks, as the survey was open, she shared the progress and response rate with the entire survey, with encouraging and congratulatory comments. At the completion of the survey, all four sections of the service, doctors; mid-level providers; nurses and technicians; and administrative staff; reached well over 80% response rate. The final count was 99 respondents, over 85% response rate for the surgical service. All sections won a pizza and lasagna party. They felt appreciated, and had a feeling of accomplishment, they surpassed most of the other hospital services. The outcomes were so much better, as the AES went on, the AES coordinator sent out Dr. V’s AES slide to the entire facility.

For Dr. V, this entire process was an opportunity to meet everyone and show them she cared, was interested to know them, and their opinions. She listened to the stakeholder’s concerns. She showed them that she was willing to take the AES as well, for the first time ever in ten years. She had been one of them, and still was one of them. It turned out to be a bonding experience at a few levels. It is not common for the service chief to meet everyone on the service, from different sections, in their environment in addition to a sit down luncheon. She had the opportunity to sit and mingle with them at the reward luncheon. Dr. V aims to be the best parts of an authentic, responsible, servant, and transformational leader. At least as much as she can be in a government and rule driven environment, which forces the transactional leadership processes in general.

Conclusion

Society has changed over the last twenty years, fostering equality and communication is imperative to developing a strong collaborative team in any organization. There are numerous approaches to leadership. It seems clear, the best approach is one that suits the leader’s positive attributes and implicit nature, while accommodating their negative traits. It is often a combination of skills that are the most successful. In a system, like VAHCS, there are limitations to freedoms with leadership, and one must perform within the parameters of the facility’s expectations. Despite these hindrances, leaders can use a combination of the strongest traits from the authentic, servant, and responsible leadership theories, and work together with their collective teams. Doing so, they can persevere to have their organization become more successful, innovative, and productive. It has been proven, leaders who collaborate, build up their team, and build relationships based on truth and trust are more successful. This will result in stakeholders who are more focused on the goals of the organization, and are dedicated to the leadership. In the end, the leader will have a happier workforce and patient population, as well as improved overall successes and outcomes.

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