

Positive and negative characteristics of leadership



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Nursing is an art and science. In nursing practice, nurses have to work for well-being of patient. For that reason nurses has to play different role. One of the most important roles is leadership. Leadership is a quality which can be practically developed to lead a person towards excellence from average. Development of the quality through learning and through implementing processes in conjunction with other people is the most important aspect. “ Leaders are made, they are not born. They are made by hard effort, which is the price which all of us must pay to achieve any goal that is worthwhile” (Denehy, 2008, p. 107). This essay will describe some positive and negative characteristics of leadership. As being a leader, one should have good vision, passion about work, integrity and good communication skill but often leadership qualities persuades one to believe superior than others. Proper development of qualities helps nursing leader to solve problems and encourages follower or co-worker to give respect to the leader. In nursing practice, for optimum care of patients, leaders have to change in strategies and policies. For the better change they have to use their power. The power can be informational, expertise or positional power.

Leadership is a professional ability to find a goal and to achieve a goal a good leader has to develop a strategy and has to inspire the followers to join and help to put the strategy into action. “ Leadership has been an important part of the function of any organisation” (Daly, Speedy & Jackson, 2007, p. 291). So often it has been noticed that leadership is influenced by values of individual and organisations as well as society. Values of individual depend on set of belief, knowledge and experience. Good leaders have to maintain a

balance between values of individual and an organisation in which they work.

Kelly (2010) has described three fundamental qualities of effective leadership which form practical steps for implementation and reflect emphasis in the literature. The first quality is a guiding vision which provides a direction for the future and helps to do planning to meet with goal and help to lead toward goal with professionalism.

The second quality is passion which expressed by leaders. This is an ability which inspires and supports the followers to attain the goal (Kelly, 2010).

Denehy (2008) believes that if leaders have a vision of what they want and are able to set a framework for the team, they are only effective if they give credit to team members whether they able to complete their goal or not. The author counts this step small but purposeful so the team spirit will carry on and they continue to work with the same leader.

The third quality is integrity that based on knowledge of self, honesty and maturity. These qualities are developed through experience (Kelly, 2010).

Whitehead, Weiss & Tappen (2007) have explained that an effective leadership requires that a leader has to stick with professional code of ethics as well as personal ethics as if the leader does not reveal these qualities, the followers would also not obey that. Furthermore, the authors have counted integrity as an essential component of moral leadership. Denehy (2008) has noted that, though these qualities are important, an effective leadership requires a good judgement, good communication skills, showing confidence about your decisions and getting goal skills. As more these qualities a leader

shows more co-workers will trust you and will follow you. For that reason, the author has recognised trustworthiness as an important skill.

Huber (2010) also indicated that extraordinary leaders have skills by which they can overcome difficulties and become stronger and committed in them. An effective leadership depends on individual ability to find a meaning from negative events and ability to learn from difficult circumstances. These crucial events allow leaders to ask question to self, thus they can use their skill of self-awareness. A good leadership doesn't rely on result, whether the result may positive or negative, a good leader sees an opportunity in it for reinvention.

Shaw (2007) has found some negative characteristics also. According to the author, some negative behaviour also has been noticed. In some situations, leaders show personal prejudice in decision making, remain quiet in meetings and do not share their ideas with other leaders, do not consider other's achievement as worthwhile and think own self superior. Open-minded and optimistic behaviour is one of the important characteristics of a leader. So often a leader considers others as a competitive and wants to prove one superior. This kind of behaviour encourages one to become over critical, not to listen other and become judgemental about other leader's ability to deal with problems. This kind of negative behaviour can be seen in leaders. The author has discovered that such kind of behaviour happens while leaders may be busy, tired and under stress because of deadline for completing goal. It also has been noticed that, some leaders do not share ideas because they become panic about their power. They believe that if they share ideas and if

someone becomes more capable then other staffs would not give respect to them.

Leaders act differently in different situations. Nurses take a leadership role while they work in specific areas. An effective leadership is often measured by work effectiveness and work effectiveness is strongly related to empowerment (Hosseini, 2007). In nursing practice, nurses always need to deal with other staff and patients. Leaders have to provide optimum nursing care to the patients and also they have to encourage staff to do so in daily practice. In nursing practice, leaders both have to do planning for the care of patients or have to give direct care and also need to set standards of care. To achieve an optimum goal a nursing leader has to focus on strategies so that they can promote patients' health and can have positive outcomes. Clinical leadership is a quality that can be developed by changing policies and practice (Morgan, 2010). For that reason the quality of integrity helps nursing leader in practice. According to integrity, leaders have to follow professional code of ethics and personal ethics (Whitehead, Weiss & Tappen, 2007). In this case, if the leader follows the ethics, probably one would think good for the patient thus patient's care can be improved and positive outcomes can be achieved.

According to the research of Feltner, Mitchell, Noriss & Wolfle (2008), communication is the most important skill of the leader. As being a leader, one should have this skill to deal with staff and patients. Two way communications is needed to improve the interaction and relations with staff. Team leader has to communicate with staff for planning, encouragement for work, discussion about problems and to work as a team,

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especially in planning care of patients in such situations as hospital wards and long-term stay facilities. In practice, if a leader does not have good communication skill, he or she cannot encourage the team to fulfil the goal. The skill holds staffs together and their communication with each other become free flow in both directions. For effective communication a leader should be honest, approachable, open and good at listening. It indicates that, during practice a leader has to be honest to staffs and also be ready to listen their problems, not just at briefings and assessments of care, but also at handovers and any other time. It is also necessary for a good leader to be open in decision so the staffs can accept the decisions (Morgan, 2010).

Another required skill in nursing practice is passion. Nursing leaders must have passion for their work. With the help of this quality, they can improve their nursing standard. For instance, when they attend any conference and share their ideas with their colleagues, their excitement about new ideas can excite others also. The passion about work can help to build new changes in nursing practice and thus they can set an example for others (Morgan, 2010).

Feltner, Mitchell, Noriss & Wolfle (2008), have discovered that confidence and positive attitude is also necessary. In nursing practice, a confident leader only can make hard decisions for well-being of staffs and patients. A leader must have to be ready to accept ideas from other team members that can help to achieve the goal in practice. This confidence helps to preserve energy to deal with unforeseen circumstances. Another quality can be important in nursing practice is, positive attitude or optimism. When a leader interacts with staff, he or she must talk in positive manner that can help to

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relieve the stress of staffs. So in critical situation staffs can seek for possible solution of the problem. “ The leader who has a quick smile and a good sense of humour can effectively create a pleasant working atmosphere” (p. 367).

Nursing is a profession which act for better health outcomes for the patient. In recent years, due to new technologies, an information availability and workforce strategy, the cost of health care is rising. In such situation, these forces are motivating changes in nursing practice. To make nursing facilities better, nursing leaders need to develop policies and strategies for staffs. To implement these new changes in policies and strategies, leaders have to use power. Frequently it has been noticed that, some staffs become resistant to change, that time a leader uses the power to alert staffs about behaviour and attitude towards patient’s need and motivate them to act in that direction (Sullivan & Decker, 2009).

Sullivan & Decker (2009) have discovered that energy is essential to change the system which is one of the important qualities of leaders and energy derives from power. There are different types of power that can be use to change the system. For example, informational power, expertise and position power. It can be used to convince other staffs and motivate to follow the changes. To use power for change, leaders have to use some steps. First of all, leaders need to analyse the formal (organisational chart, department structures, line management, policies, frameworks, documentation) and informal (built on friendly relations within the organisation or on recognised expertise) lines of the organisation, then have to identify those who are mainly affected by changes and also have to give attention to those who are

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closely affected by change. A further step is to find out about those who can deny or defy changes and their reasons for disagreement. A next step is to talk about changes to staff at formal meetings and also informally on the job and give ideas about the pros and cons of changes and ask if any modification is needed. Finally, the nurse follows the organizational chain to implement the idea. These are the steps by which leaders can use their power to implement change.

On the other hand, painter (2010) has described that in the past nurses have successfully fulfilled their role as leaders at workplaces, communities and government agencies. Nurses know the values of health care and become more conscious about patient's care and need. The author has counted this as a nursing power. Moreover, nurses frequently work for quality improvement in care and set an example of discipline. They use the power of their knowledge to development, implementation and evaluation of management of patient's care. The improvement in care shows the change of care which implemented by nurses by using their power.

In conclusion, leadership is a key role in any profession. In my opinion, a leader must have good and clear vision so that he or she can plan for the future. Furthermore, a leader must have passion about own work and for that one must have to be ready for paid off. 'Nine to fiver' cannot be a good leader. Leader's passion about work encourages ones to do research and also encourages staff to follow. The third quality is integrity, which is an essential thing for leadership. In nursing practice, leaders have to be in contact with staff as well patients. In such situation, good communication skill is required. If a leader be clear in communication, staff can understand

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the instruction and freely talk with him or her. As a result, positive patient's health outcome can be achieved. Confidence is necessary for nursing leader while preparing any new policies or strategies. Moreover optimistic behaviour allows staff to interact with leaders and help to maintain team spirituality. Changes are necessary for better care management. It often gained through power. With the help of power one can collect all information and can think on all positive and negative aspects of change. Power allows a person to talk about planning and any suggestion for an improvement. In nursing practice, a good knowledge of field itself a power that nurses can use for care management of the patient. With the help of this power nurses can leads a profession to an optimum level.