## Leadership in the 21st century: contrasting views of leadership and their utility...

Business, Management



HML 1001: Leadership of change S. McGowan. June 2008 Leadership in the 21st Century: Contrasting Views of Leadership and their Utility for My Practice Introduction In this paper I will examine two modern views of leadership. The leadership models I have decided to review are Servant-Leadership and Discretionary Leadership and my aim is to describe them, explore some of their similarities and differences and consider their usefulness for my own practice. Servant-Leadership Robert K Greenleaf defined Servant-Leadership in1970 in his essay 'The Servant as Leader' (Greenleaf, 1970).

Greenleaf attributes the inspiration for his idea to the novel 'Journey to the East' by Herman Hesse (1932), where the central character Leo; servant to a party of travellers, proves ultimately to be the vital member of the group, whose mission fails without him. The servant-leadership theory is based on a model of empowerment and contrasts sharply with models of leadership that are based on power. Instead of concentrating on the acquisition of power and control, servant-leaders focus on helping people to grow and fulfil their potential. Greenleaf states: the servant-leader is servant first... It begins with the natural feeling that one wants to serve, to serve first. Then conscious choice brings one to aspire to lead. That person is sharply different from one who is leader first, perhaps because of the need to assuage an unusual power drive or to acquire material possessions'. (Greenleaf 1970) The servant-leadership theory advocates the role of leader as serving rather than controlling. By serving the needs of their workforce, clients and communities servant-leaders can harness the full force of an empowered group.

Servant-leadership models promote a sense of community and an holistic approach to work and, ultimately, society. Steven R Covey, vice chairman of Franklin Covey, the world's largest management and leadership development organisation, described four roles of leadership in his keynote speech to the Greenleaf Centre's (www. greenleaf. org) 1999 conference (Covey 1999). These are: (i)Setting an Example: Leaders must work hard, contribute and model integrity, humility and the values of servantleadership. Integrity breeds confidence and generates followers. ii)Pathfinding: Creating a vision that involves and inspires, and that through empowerment, mobilises the efforts of others. This way, strategic planning is values based and derived from an understanding of people's needs. This is in stark contrast to power models, which espouse individualistic missions and goals for organisations to be 'herded' towards. (iii)Alignment: Aligning the systems and structures of an organisation to serve the agreed task and vision. Values need to be 'institutionalised' and language and action must be consistent. iv)Empowerment: This is what Covey describes as the 'fruit' of the first three roles: When you have a common vision and value system, and you have put into place structures and systems reinforcing that vision, when you have institutionalised that kind of moral authority - its like lifeblood feeding the culture, the feelings of people, the norms, the mores feeding it constantly...You can...release the enormous human creativity, the human ingenuity, the resourcefulness, the intelligence of people to the accomplishment of those purposes.

Everything connects together: the quality of the relationships, the common purpose and values. You find that people will organize themselves. They'll manage themselves. People are drawn to doing their own best thing and accomplishing that worthy purpose, that vision. That's empowerment! (Covey 1999) Max DePree has famously defined leadership as 'a serious meddling in other people's lives' (DePree 2002). DePree is concerned with the interdependence of members of organisations and has argued that leadership can't be just about the individual:

When we think about the people with whom we work, people on whom we depend, we can see that without each individual, we are not going to go very far as a group. By ourselves, we suffer serious limitations. Together we can be something wonderful. (DePree 1990) DePree coined the term 'Fiduciary Leadership'; one of the three things he believes to be vital to servant-leadership. Fiduciary leadership describes a model of leadership based on trust and reliance. With this model, leadership is a set of opportunities and accountabilities bestowed (temporarily) by followers, in the trust of the leader.

Central to this concept is the idea that the 'led' are consenting to be led and this idea lies at the heart of democratic society. In the 18th Century Edmund Burke (1729-1797), Anglo-Irish statesman and political philosopher wrote: It is the love of the people; it is their attachment to their government, from the sense of the deep stake they have in such a glorious institution, which gives you both your army and your navy, and infuses into both that liberal obedience, without which your army would be a base rabble, and your navy

nothing but rotten timber. Burke1775) With regard to fiduciary leadership Burke said: All persons possessing any portion of power ought to be strongly and awfully impressed with an idea that they act in trust. (Burke1790) And DePree says: Leadership is not a position...promotion has never made anyone a leader. Leadership is a fiduciary calling. Inherent in this calling is the knowledge that hope plays a critical part in the lives of followers. Fiduciary leaders design, build and then then serve inclusive communities by liberating human spirit and potential' (Depree 2002)

Here again, then, the themes of leaders serving and harnessing human potential in organisations that are communities. Depree's second 'necessity' vital to servant-leadership is broadenning the definition of leadership competence. He describes five areas of compertence: Firstly, defining and expressing reality for an organisation; second, vision and strategy; third, enabling creative people; fourth, transforming – by learning, risking and changing – and finally, unleashing the potential of all members of an organisation. Depree's referrence to 'transforming' is important.

Servant-leadership and fiduciary leadership are both examples of Transformational Leadership (Burns 1978). Transformational leadership is concerned with bringing about progress and accomplishing success through communication, influence and empowerment, as opposed to Transactional approaches, which favour activities such as resource management, and management by policy, proceedure and control. Transactional leaders prefer systematic approaches, organisational hierarchy, straightforward objectives and tried and tested techniques.

They manage efficiently but are in danger of producing mediocrity and suffocating innovation and creativity (Fairholm 1991). Transformational leaders reject the rigidity of transactionalists, arguing that ideas such as Scientific Management (Taylor, 1910), with their focus on controlling the minute details of the means of production are restrictive, dehumanising, alienating (Marx, 1959) and, ultimately outdated. Conversely, the transformational model can be criticised as inefficient, wasteful and lacking focus and direction.

The third of Depree's three neccesities for servant-leadership is a clear moral purpose. He argues that leadership requires moral purpose to give it meaning, measures and a worthwhile goal. Keen on lists, DePree desribes six ' signs' of moral purpose. These are: (i)An acceptance of Human Authenticity: Organisations comprise individuals with a 'cornucopia of gifts and talents' and not just their ascribed roles or inherent characteristics. (ii)Rights: All are entitled to the right to belong; to ownership; to opportunity; to inclusion; to a covonatal relationship as 'members' of the organisation. iii)Truth: Consistent, multifaceted honesty is crucial to moral leadership (iv)Vulnerability: An absence of ego and openness to criticism. Willing to listen to others, to experiment, to make mistakes and to learn from them. (v)Equitable Distribution of Results: Distributing 'profits' fairly is a necessary and motivating feature of an organisation that demands high levels of contribution from its members. Results or profits can be financial or else less tangiable outputs. (vi)Personal Restraint: Vulgar displays of power, wealth and status are offensive and demotivating to others.

Ultimately, then, the servant-leadership theory regards leadership as a moral calling. Greenleaf's leadership theory also has its basis in morality and latterly he concerned himself with the question of managing change in society, citing examples of immoral, senseless and destructive problems in the world. His view was that the system to deliver the necessary change would be the one that works best – in his view servant-leadership: The difference [between leader first and servant-leader] manifests itself in the care taken by the servant first to make sure that other people's highest priority needs are being served.

The best test, and the most difficult to administer, is this: Do those served grow as persons? Do they, while being served, become healthier, wiser, freer, more autonomous, more likely themselves to become servants? (Greenleaf, 1970). To read Greenleaf and his followers, one might conclude that servant-leaders are essentially ordinary people drawn naturally, perhaps randomly, from the servant 'classes'. People with philanthropic and selfless natures, who assume leadership positions only to spread their good deeds more widely. Interfering (DePree 1993) 'do-gooders' best suited to social and charitable enterprises!

However servant leadership places as much emphasis on leadership as it does on servitude, even if the servant has to come first. Powerful servant-leaders can be found at the head of many serious, successful, profit making organisations (e. g. Herb Kelleher, CEO South West Airlines, Jack Lowe, chairman of TDI Industries and Rich McClure, president of UniGroup Inc. [all US]) and, most recently, servant-leadership is the leadership philosophy

espoused by newly elected President Lee Myung-bak of South Korea, who has called for servant-leadership as his primary presidential leadership vision (Hyun-kyung, 2008):

Military leaders or professional politicians will be unable to manage the economy any longer mainly because they were born to wield power, instead of serving citizens. These leaders attempt to rule the country, while managers serve their customers. As a result, the boss is destined to wane, while servant leaders achieve mutually beneficial goals for the community. (Myung-bak, 2002) If we look more closely, then, servant-leadership, far from rejecting the idea that some people are natural leaders, actually shares many ideas with 'trait' models of leadership.

Trait theories date back to the first half of the twentieth century and Weber's thory of leadership-charisma (Webber 1947) is a good example. Trait theorists argue that leaders neither emerge naturally as a result of a personal 'epiphany', nor are they created by experience or training, but that they are born. Born leaders are the result of natural selection (Darwin 1859). Nicholson (2000) describes how evolutionary psychology has produced 'alpha-males': hard wired individuals with natural leadership qualities driven, by high levels of testosterone, to seek an optimal seratonin buz by taking charge and achieving personal success.

Grrrrr! Foremost among these natural leadership qualites is charisma.

Charismatic Leadership (House 1977, Burns 1978) concerns itself with the impact of charisma on the leader/follower relationship and the effect of

charismatic leadership on the motivation and morale of followers. Charisma is regarded as an inate quality, a charm that compells others to follow. Freud described charisma as an ability to realise compliance from others (Freud 1922). Charismatic leaders are heroic, energetic and driven by dissatisfaction with the status quo.

Although generally seen as a transactional model, charismatic leadership, when paired with a moral basis, is far from inconsistent with servant-leadership. In fact, many of the qualities required of the servant-leader such as vision, integrity and empowering others can be regarded as extremely attractive and thus charismatic qualites. Indeed Jesus Christ, cited by many servant-leadership disciples as the ultimatate servant-leader, was undoubtedly a charismatic leader. Discretionary Leadership

In contrast to servant-leadership – which, whilst advocating a different moral basis for leadership, retains traditional ideas of hierarchy and organisational structure – discretionary or 'shared' leadership theory recognises the need for a number of leaders with different viewpoints and responsibilities to coexist and cooperate in organisations. Discretionary leadership has emerged as a model suitable for complex modern day organisations (Kakabadse, 2000) with complex environments, contexts, and structures or, as Hunt put it, 'macro-variables' (Hunt 1981).

Modern organisations are frequently network based, where the sum of a wide and diverse set of functions and departments combine to form a 'virtual' whole. Discretionary leadership places high value on an

organisations' ability to respond effectively to multiple agendas and stakeholders in a variety of situations simultaneously: a challenge that would be impossible to meet with conventional hierarchical organisations where leadership authority is held by a small number of senior managers.

In essence, modern complex organisations need to coordinate the actions of a broad group of employees who adopt leadership behaviours, when and as required, to tackle the issues they face. Discretion would seem to be a two way process with this model: Senior leaders still define the degree of leadership authority that is delegated at their discretion, whilst employees are expected to adopt leadership roles, when necessary, at their discretion.

Not completely un-hierarchical, but certainly less paternal and more organic than traditional models of leadership. Thus roles are defined in terms of the breadth of their discretion. At one extreme, some employees will have minimal discretion and be expected to carry out their duties in strict accordance with prescribed procedures – a model akin to that of production line workers in a scientific management system (Taylor 1910).

At the other extreme, the CEO of an organisation has ultimate discretion.

Between these two extremes it is vital that the quantity and quality of available leadership is commensurate with the needs of the organisation.

Discretionary leadership, it is argued, is not only a suitable model for complex network-based organisations, but also the model of leadership that will naturally emerge in response to the pace and pressure of organisational change in the twenty-first century:

The nature of role discretionary boundaries is increasingly determined by personal views concerning the challenges leaders face and the nature of those with whom they interact...Thus, the idiosyncratic nature of the organisation, the peculiarities of each leader role and the characteristics of each individual occupying such a role, are critical considerations in determining role boundaries and parameters. Kakabadse & Kakabadse, 1999) Organisations that require/generate substantial numbers of discretionary leaders will, by definition, include a multitude of visions and ideologies. Achieving cohesion is the vital key for this group model of leadership to be effective. This is achieved by those in charge skilfully conducting multiple conversations (or 'polylogue' – Kakabadse, 2005); by discretionary leaders reflectively understanding their roles and relationships and acting responsibly, and by promoting a shared philosophy, core vision and value system.

Kouzmin has described this as the role of the 'organisational architect': The focus [for Contemporary leaders] has shifted increasingly to the role of the 'organisational architect'. The principal contributing skill of architects is an ability to design and develop organisations; skills that require considerable creative insights and technical knowledge about how to analyse, design and stimulate complex, increasingly globalising, social and communication networks supported by rapidly advancing IT. Kouzmin et al., 2007) With this model, leadership is not simply about goal-oriented control and coordination. Leaders need to properly understand the context in which actions are exercised and the appropriate mobilisation of others (Kakabadse, 2005). The

modern organisation will be flatter, less hierarchical and based more on networks. It will be founded on interdependency, communication and the flow of ideas (supported by ever more sophisticated information technologies) rather than command and control models.

With discretionary leadership employees will be incentivised to produce value by being fully and intelligently involved in the overall purpose of their organisation rather than alienated in the way that Marx (1959) has criticised scientific management (Taylor 1910). However, discretionary leadership also has its critics. Variations and tensions among workers in leadership roles can lead to negativity, whilst success is highly dependent on cohesion and the quality of interactions; both notoriously hard to control in network-based organisations:

Where discretionary role analysis highlights variation of experience, capability, values, personality, behaviours, and the exercise of choice among the leaders of the organisation, tension and conflict become endemic with potentially disastrous implications for individuals and the organisation.

(Finklestein and Hambrick, 1996) Globalisation, fast moving technological development, the increased recognition and value of social capital, multifaceted demands and accountabilities, and the need to respond simultaneously and effectively to a number of agendas, means that organisations need different leadership models in the twenty-first century.

Models of leadership that might have been appropriate to the manufacturing industries of the nineteenth and twentieth centuries now seem increasingly

inappropriate to the educated, informed, skilled and sophisticated workforce of the present day, whether working in manufacturing or (more probably) in paper-based organisations or the service sector. It can, therefore, be argued that discretionary leadership is the ideal solution for the future, but only in a carefully esigned and managed system that maturely accepts the inherent will and ability to lead that is both needed and to be found within many key members of complex organisations. The utility of these ideas for me The leadership theories that I have chosen to examine might be considered to have much in common and it might seem that more radical alternatives could have been examined in order to better illustrate the contrast between theories. I have however chosen to focus on these models because of their resonance with my own ideas about leadership and their utility for a modern health service.

I would also refute the view that servant leadership and discretionary leadership are very similar. Yes, they are both progressive, placing as they do an emphasis on employee empowerment and the importance of shared values and vision. However, servant leadership takes a rather traditional and paternalistic view of the structure of organisations and those destined to lead them, whilst discretionary leadership is based on a much more sophisticated understanding of the structural configuration of modern organisations.

Personally, I have found utility in each of these models. As service lead for a new specialist mental health service, I am acutely aware of the complexity of modern day organisations as described by Hunt (1981) and Kakabadse

(2000) in their explorations of discretionary leadership. The multifarious environmental, contextual and structural variables of the NHS epitomise the challenges recognised by advocates of this model. The NHS is also increasingly network based and is certainly the sum of a wide and diverse set of functions.

For my own service, the ability to respond effectively to multiple agendas and stakeholders in a variety of situations simultaneously is vital. Our structure, although not completely without hierarchy, is relatively flat. The largest group of employees in my service are senior, professionally qualified practitioners including nurses, doctors, psychologists, social workers and occupational therapists. Each of these practitioners is responsible not only to me but also to their professional bodies and, as such, have a substantial degree of authority devolved to them, and broad freedoms to act and make decisions.

The need to coordinate the actions of this broad group of employees is central to my role as service lead, as is the need for these well-paid individuals to accept and adopt leadership behaviours, when and as required, without undue recourse to management advice or consent.

Discretionary leadership theory also recognises the need for a number of leaders with different viewpoints and responsibilities to coexist and cooperate in organisations.

This is extremely pertinent to modern mental health services, which are both multi-disciplinary and multi-agency. With multi-disciplinary teams, each

different discipline ideally brings unique professional skills and ideologies to the service, which are then combined to produce a multi-dimensional 'whole' befitting of a service aimed at meeting the holistic needs of diverse individuals. For me, the achievement of cohesion is certainly the vital key to realising this ideal and Kakabadse's (2005) notion of 'polylogue' resonates with me.

Similarly, modern mental health services exist as components of broader networks that transcend the traditional boundaries of the NHS. In order to run an effective service I need to manage interfaces with a wide and diverse range of partner agencies and stakeholders that include GPs and other referrers, social care agencies, specialist providers, the criminal justice system, drug services, community and faith groups, and service users and their carers.

Pollywollydollylogue! Central to the achievement of cohesion in my service has been the promotion of a shared philosophy, vision and value system and Kouzmin's (2007) concept of the 'organisational architect' appeals to me in this sense, with its emphasis on leaders' responsibility for designing and developing organisations with shared vision and effective communication networks.

This concept of shared vision is also found in servant-leadership. Covey (1999) emphasised the need for leaders to create a vision that involves and inspires, and that mobilises the efforts of others, and Depree's (2002) third neccesity for servant-leadership was a clear moral purpose, arguing that

leadership requires moral purpose to give it meaning. It is not surprising that such sentiments should find esonnance in the NHS, or any other care sector organisation that has its base in social morality, and we are reminded of Bevan's vision for a national health service, available to everyone and free at the point of access, sixty years ago: The collective principle asserts that... no society can legitimately call itself civilized if a sick person is denied medical aid because of lack of means. (Bevan 1952) Interestingly, 'moral purpose' has played a significant role in influencing the development of my specialist field, Early Intervention in Psychosis (EIP), in this country.

The introduction of this new model of mental health service has been extensively driven by a 'bottom up' approach that has witnessed the emergence of a 'social movement' for mental health reform (Bate et al, 2004): A diverse group of proponents, including statutory and non-statutory agencies, clinicians, service users and carer groups who are impatient for service reform and find commonality with the civil rights movement, equal rights for women campaigners and Gay Pride.

Despite its diversity, this mental health social movement is connected by a shared view that that the suffering associated with the poor outcomes experienced by people with serious mental health problems is unnecessary, and largely a product of inadequate and ineffective services. It is argued that the kind of radical, transformational change required for mental health modernisation will not be achieved by top down, programmatic, transactional leadership approaches, but must be complemented by a grass roots desire for bold, sustainable change.

Harnessing this shared sense of moral purpose has proved crucial to achieving cohesion in our complex service and is constantly and intentionally reinforced through team meetings, training and supervision. DePree's (2002) notion of 'fiduciary leadership' also resonates and the sense that my position is one of responsibility and accountability both to and for a group of staff remains important for me. Having emerged from the 'ranks', my painfully slow rise to mediocrity might be seen as a good example of Greenleaf's model, where individuals accept leadership, with modest reluctance, as a means to better serve others.

In reality, my pathway has been determined by a combination of bossiness, laziness and poverty, fueled by a growing sense of moral purpose and by a personal philosophy that ' it is better to lead, than be led by a w\*nker'. I am, however, genuinely drawn to many of the core values of the servant-leader model: I believe that as leader I must work hard, contribute and model the values of the service. I believe that language and action must be consistent and that integrity breeds trust and confidence.

I am keen to drive progress through experimentation and risk-taking but recognise interdependence with work colleagues and that change and improvement will only be delivered by harnessing human potential, empowering staff and clients, and by helping people to grow and fulfil their potential. In a service where 'recovery' is the product (or 'profit') it is vital that everybody's contribution is acknowledged and people are fairly rewarded.

Inevitably our system rewards some more than others and the recent introduction of 'Agenda for Change', the new NHS pay structure, has arguably made this harder. Never the less, I strongly agree with the need for personal restraint (DePree, 2002) in a system with such a wide range of pay scales. There is nothing more offensive than a highly paid NHS manager in an expensive sports car, no matter how severe their mid-life crisis.

I do also recognise the reasonable criticisms of servant-leadership when presented as a purely transformational approach. Traditional transactional activities such as resource management, policy and proceedure are also necessary in a twenty-first century health service and some control remains necessary if outcomes are to be realised efficiently. Balancing these requirements with empowering models is the key, in my view, to enabling innovation and creativity whilst avoiding mediocrity and waste.

Finally, as a big, hairy bossy-boots, I would need to declare some sympathy for the trait theorists. I think that I do have some natural in-built leadership qualities, as well as plenty of testosterone, and I enjoy seratonin as much as the next man (or woman)! Learning Points Foremost among the learning points stemming from this assignment for me was the relevance and usefulness of this subject to my work and this has been explored in the previous section. Also, I was surprised at just how large in both breadth and depth this subject is.

Theories on leadership can be traced as far back as the ancient Greeks and Romans, with a massive expansion of interest dating back to the nineteenth century, culminating in a veritable explosion from the middle of the twentieth century onwards. And leadership theories stem from a wide spectrum of fields including industrial, religious, military, financial, educational, political and organisational. I have learned that no one model fully explains everything or is pertinent to all situations, and that leadership models, like history, are open to interpretation and reflective of the dominant culture of a particular place or time.

Theories seem to exist, like most things, on a continuum, with poles that represent unworkable extremes such as dictatorship and anarchy. In between lie a spectrum of models that will have different levels of utility according to the presenting circumstances. I have reflected that there are times when strong, authoritarian leadership is necessary (such as wartime or when trying to organise a multi-agency conference! ) and there are times when more subtle influence is required.

Coming from a health service management perspective, this assignment has reinforced my view, as illustrated by Covey's (1999) description of servant leadership, that clinicians in caring roles have to want to perform well and that managers can't force workers to 'care' – any more than the north wind could force the man to remove his cloak in Aesop's sixth century BC fable of the wind and the sun: Kindness, gentleness, and persuasion win where force fails. (Aesop, 6BC) I have also learned to recognise that different, coexisting parts of the same organisation can be working to different leadership models simultaneously.

For example, in our organisation, the IT and catering departments might be run along the lines of scientific management, the finance department (and in particular the director of finance) employ authoritarian transactional control, whilst our clinicians require engaging and empowering approaches to optimise their creativity and output. The CEO, as 'organisational architect' needs considerable skill to hold all of this together and I have learned that complex organisations like ours can only function when discretionary leadership roles are promoted.

When thinking about the different types of leadership required in the NHS, I was also led to consider the problems that occur when leadership style conflicts with leadership need and there are many examples of organisational problems stemming from this kind of dichotomy. Similarly, problems occur when the 'espoused' (Argyris, 1974) theory of leadership differs from the theory in action. The starkest example of this, perhaps, would be Adolph Hitler, who espoused to be the natural leader ('Ubermensch' – Nietzsche, 1883) of national socialists but was in fact a nasty dictator.

Speaking of dictatorship, in studying for this assignment I found myself naturally drawn to models of leadership that reflect my own values and beliefs and that vindicate my own approach. At the same time I found it useful to see these ideas in their broader context and contrasted with alternatives. I have become increasingly aware of the social, political, philosophical and spiritual dimensions of leadership theory and was struck by

the strong link between Christianity and servant-leadership, with many of its exponents being unashamed god-botherers with evangelical tendencies.

This led me to reflect on the way leadership theories have been influenced by dominant cultural models over time, and how we have seen a transition from authoritarian 'old testament' models of leadership at the start of the industrial revolution, to the scientific and evolutionary models of the twentieth century and, finally, to models based on the modern Christian/Humanistic values of empowerment. In the NHS we have witnessed a shift from leadership models based on power and status (Consultants, Medical Superintendents etc. to models based on emulating the business models and management control of business/industry, to the discretionary models of leadership that are increasingly found in large, complex, network-based NHS organisations. It remains to be seen whether the NHS will continue this evolutionary journey or, as some fear, pendulum back to models based on the divine power and status of medical leads and general managers. Conclusion

This essay asked us to consider leadership requirements for the twenty-first century and I would be inclined to agree with Greenleaf's (1970) axiomatic proposition that the system needed to deliver the necessary change would be the one that works best. For Greenleaf that was servant-leadership. Importantly Greenleaf identifies the requirement for leadership to deliver the 'necessary change', and this examination of leadership theories has shown me how the management of change is central to the purpose of leadership

and how successfully managing change is a defining characteristic of leadership (Pedler et al, 2004).

Pedler describes this in a way that both resonates with me and promotes simultaneously the ideas of discretionary leadership, servant leadership and transactional progress: Major change usually involves large numbers of people, and there are usually many agendas present concerning what the change should be, what it is for and how it is achieved. Listening to and balancing these views and concerns, whilst continuing to move forward is one of the hallmarks of good leadership. (Pedler et al. 2004)

With regard to whether a different kind of leadership is required for the twenty-first century, I think that it can be concluded that different scenarios demand different models of leadership. Kakabadse (1999) argues that discretionary leadership will naturally emerge in response to the pace and pressure of organisational change in the twenty-first century. For me, the model of leadership needed in the twenty-first century, will be the one that best reflects the cultural norms and values of the century.

For modern NHS organisations, I am inclined to agree with the discretionary leadership theorists that flexible, interdependent, multi-layered leadership based on shared values, relationships, communication and the flow of ideas is required. Gooding supports the view that the requirements of the twenty-first century will undoubtedly be different to those of the preceding centuries: The manager will become much more of a coach, positioned

alongside rather than above his team, working with them, acknowledging their concerns, ideas and aspirations. (Gooding, 2005).

According to Gooding, the 'command and control' culture is dying and the personality profile of successful managers will change, emphasising empathy and sensitivity. However, despite many examples of successful servant-leaders, I remain to be convinced that these models will soon be adopted in the 'for-profit' sector, where macho, transactional behaviour is still valued and rewarded: 'You're fired! '(Alan Sugar, 2008) References Aesop, (6BC). A Selection Of Aesop's Fables From A New Translation For Modern Readers (1953), Wolverhampton College of Art Argyris, C and Schon D (1974).

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