

# [Leadership style case study analysis](https://assignbuster.com/leadership-style-case-study-analysis/)

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Accordingly to researches, employees are very sensitive not only to What orders are given, but also to How they are given. Certainly, it is the business of each to mange which management style to choose, but he always has to be aware of advantage, and disadvantage of every style to see and predict the prospective for the future development and organization. Autocratic Style An autocratic manager dictates orders to their staff, and makes decision without any consultation. He makes decisions separately, and without much regard for subordinates.

As a result, decision will reflect the opinions and personality of the anger. Manager relies exclusively upon his own subjective experience, knowledge Ana unreasonable. I en major advantage AT sun approach to management Lies In greater employees’ motivation to accomplish their work. Employees are able to find satisfaction and to show themselves worthy of their manager’s trust. Democratic Style A democratic manager delegates authority to his/her staff, giving them responsibility to complete the task given to them (also known as empowerment).

The democratic leadership style is also called the participative style as it encourages employees to be a part of the decision making. Employees are involved in decision making giving them a sense of belonging and motivating individual to improve the quality of decision. This will help them to inform about the matters that affect them, and to evaluate their own performance. Case Study Analysis (1) Company’s Name : (NC) Agency Leadership Style : Autocratic Style Research of : The dual relationship, in which social worker related to their clients.

Issue : Non-sanctioned interaction between social workers and their clients on multiple level.

Analyzing for Ann.’s Agency Evidence No. 1 1- Sent out memo to employees stressing that dual relationship are a conflict of interest prohibited by the organization. Action Taken:- The director used informal instructions by writing memo (Stressing), which is shown Tanat tenure Is no at least Locutions. Evidence No.

2 2- Stated that a dual relationship could be grounds for employees termination and encourage employees to report any non-sanctioned interaction between social worker and their clients.

The director confirmed that such an action will lead to terminate the employee. Evidence No. 3 3- Planned construction of new employees’ lounge, to eat their lunches in the office, rather than eating in town. The director took a single decision to deprive the employees from having their meal outside in the town. Case Study Analysis (2) : (ASS) Agency : Democratic Style Analyzing for Ass’s Agency 1- I en Loretta nanas a meeting WI TN Nils star to Locus purpose in the community.

Ten organization’s role Ana He used two ways communication by involving the staff in the decision making, and clarified to them the main purpose.

He shared what he has learned at the conference: the potential to improve people’s lives outweighs any other social or professional interaction that could derail the organization’s purpose. He cared of staffs needs and giving them a sense of belonging and improving people’s lives supersede any other thing. The director explain that he will make it his personal mission to solve the problem of dual relationships and asks employees for their input as well as participate in overcoming this obstacle. He handled the bid responsibility to solve the issue, and adding his employees input.

Evidence No. 4 The leader explain all the employees must work together to reform the organization in order to better serve the community. He encouraged the team work, and believes of many minds thinking better that a single mind. Health Care Organization (Profit-Government) or( Non-profit Private) Patients’ and healthcare workers’ characteristics are changing. Both populations are becoming older and more divers. Patients are better informed and, as such, have increasingly higher expectations of healthcare professionals.

This trend has changes the way healthcare services are delivered, with a focus on patient satisfaction and quality of services. Development of a continuum of care services to meet the patient’s full range of latent needs, tenure Is emulators care, acute care, statute care, long-term care, and home health care as well as a health plan. Because of the dramatic changes and the future trends in the healthcare industry, most managers have been required to change the way they and their employees carry out their Job responsibilities.

As a result, many healthcare providers are breaking down their traditional hierarchical structures and moving toward team-managed environment. The key is to have one person who coordinates all of the various providers to be sure hey have the right information, are all working together, and are all following an agreed-to care plan.

They need not all be physicians. Indeed other providers are equally important to the team-based approach and they add less costs. Mostly, this just does not happen today. In part, it is because of the medical culture which needs to change; “ it’s the way we do it” (and have done it for over a century).

But perhaps the biggest culprit is the lack of a fee structure that encourages the primary care physician to coordinate the care properly. Coordinating the care of a patient with a implicated illness that lasts a lifetime takes a lot of time, but this time is not now compensated by most insurance.

Since most primary care physicians are very busy already, and since they are not accustomed to coordinating care, this is a new requirement that, absent a payment structure as incentive, they will Just not accept readily.

So today what happens is a lack of coordination and an excessive number of tests, X-rays, procedures, and occasionally hospitalizing. The result is much lower quality care than could or should be provided and much higher costs than necessary. Understanding a large, disaggregated system such as the health care delivery system with its multitude of individual parts, including patients with various medical conditions, physicians, clinics, hospitals, pharmacies, rehabilitation services, home nurses, and many more, can be daunting. To add to the complexity of improving this system, different stakeholders have different performance measures.

Patients expect safe, effective treatment to be available as needed at an affordable cost.

Health care provider organizations want the most efficient use of personnel and physical sources at the lowest cost. Health care providers want to serve patients effectively and minimize, or at least reduce, the time devoted to other tasks and obligations. Transformational leadership is much more complex and happens when people are engaged together in such a way that leaders and followers encourage one another to increase levels of motivation and morality.

What is interesting about Adviser’s (1993) framework for transformational leadership in nursing is the emphasis and importance she places on charisma (idealized influence) almost to the exclusion of other transformational dimensions, and the lack of any guidance on how, (or indeed if it is necessary), for nurse leaders o combine transformational and transactional dimensions of leadership behavior to achieve optimum influence.

Adviser (1993) however, does not attempt to provide a detailed definition of charisma beyond labeling it as a “ management quality that can empower employees and facilitate co-operation, creativity and innovation” (Adviser R, 1993, p.

675). “ Transformational leadership is a style which is ideally suited to the present climate of change because it actively embraces and encourages innovation and change. A transformational leader [by encouraging and supporting reasonable risk taking] will roved the skills for the profession to stretch its boundaries and be innovative in the way in which problems are viewed an solved. (Seafarers & Brown, 1998, p. 203 “ A transformational nursing leader will not only be able to achieve this [change] but will also provide the skills and desires for other professionals to stretch their boundaries and become innovative in the way that they view problems and their solutions..

.. The ability to find innovative solutions; to extend beyond their boundaries of comfort; and to test new ways of doing old things will move nursing further into he centre of the arena of the new health care services. ” (Seafarers & Brown, 1998, p. 06) In my opinion, Transformational Style (Task Relationship) will be the appropriate for Neal care organization, more Ana more companies are startling to Delve Tanat t leadership style is effective in breaking down innovation barriers in the workplace. Through transformational leadership, business leaders are able to better determine the reasons why barriers to innovation exist.

They are able to determine whether it is lack of ability or lack of motivation that keeps employees from performing at their est.. And through this, leaders are able to better formulate ways to address what needs to be addressed.

This kind of business leadership style also allows leaders to check if those who report to them do their Jobs as if they own the business. This is quite important because the level of effort that employees exert in their Jobs can help determine how successful a business can be. In the same way, leaders must also be able to allow employees to feel that they are part of the solution, through welcoming time, effort, and ideas from them.

This style of business leadership also considers whether or not employees have the right tools to get the Job done.

Without the right tools, it can be very difficult to deliver what is expected from you. And this is why a transformational leader must be able to find ways to provide those who report to him or her with the right tools so that objectives can be accomplished. At the end of the day, transformational leadership will help us bring down the different barriers to achieving business and performance goals. This business leadership style will give us better chances at achieving what needs to be achieved, and delivering what needs to be delivered.