

Leadership in mentoring nursing students



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Management has been existed in our society since human beings began in the form of social organisation to achieve their goals, have become a significant part to our society and human activity. Management and leadership are clearly different, management is “ do things right” and leadership is “ do the right thing”, but both are equally important (Bennis, 1997). Therefore, the effective leaders and effective managers are required by the organisations, teams or groups to achieve the expected goals. Bennis (1994) defined management as a process of getting things done through others. This definition emphasizes that a manager to manage and organize a planning, assessment and assist the activities of others or subordinates. Bateman and Snell (2007) stated that four management functions: planning, organising, leading, and controlling are very valuable for professional practice.

McKenna et al (2004) assert that effective leadership in practice is crucial for professional development and patients care enhancement. According to Marquis and Huston (2003), leadership is a process without threats and violence of empowering belief, persuading, moving and influencing another toward an objective. Dessler (2004) also defined leadership as a person influences others to willingly work toward a predetermined goal. However, Mintzberg (2004) assert that there are many views and definitions of leadership and makes leadership is complicated and confusing. Stanley (2009) defines and explores the health practice leadership as “ unifying people around values and then constructing the social world for others around those values and helping people to get through change”.

Leadership impact our daily and futures lives and very important in my clinical area to create an environment that's positive for relationship building and conducive to effective professional practice. Health professional such as nurses and AMO requires a strong, knowledgeable and consistent leader in quality professional practice environments to provide quality health services. Therefore, to achieve the requirements of professional practice and consumers' requirements and expectations, it's important for health professional to integrate leadership in health professional practice (Sofarelli and Brown, 1998). I will discuss and explore the theory of leadership in this paper when mentoring and encouraging staff and Assistant Medical Officer (AMO) to their career development, including further learning and leadership methods at Plaster Unit, and will implement this idea in my placement and appropriate use for my new task as a leader.

My hospital is among the most famous teaching hospital in Malaysia which conduct education programs for medical, nursing and allied health science students. With over 11 years working experience and was promoted to Senior Assistant Medical Officer at Plaster Unit, Orthopaedic Department since January 2011. I have been appointed by head of Orthopaedic Department as manager, clinical instructor and mentor of Plaster Unit for new staff, medical and nursing students, particularly related to Plaster of Paris application. At the same time, I need to train and facilitate the department staff and newly AMO to update skills, knowledge and develop their further learning including mentoring programs. As a manager and instructor at Plaster Unit, I may be writing policies, assess, implement and

promote policies, I might challenge the policy appears to be sensible and evaluate the policies.

Good leaders were made rather than born. Good leaders must have the desire, willpower, and develops through lifelong learning process of educational, training and experiences (Jago, 1982). Taylor (2009) state that today health care operates in a rapidly growing environment where changes in leadership to be the main criteria for career development. Many different leadership theories have emerged and made based on previous theorists, but there are 8 major leadership theories; “ Great Man” theory, Trait theory, Contingency theory, Situation theory, Behavioural theory, Participative theory, Transactional theory and Transformational theory.

Burns (1978) have identified two types of leadership theories; transactional and transformational. Burns (1978) describes the transactional theory: leaders are just sitting towards the result, followers are directed to perform tasks and be appreciated by money or reward if the task is accomplished. In transformational theory, leaders see the relationship is very important, especially between leaders and followers. Mentoring relationships can develop the highest level of relationship between managers and subordinates (Graen & Scandura, 1987). According to Whetton & Cameron (2002), studies have shown that mentoring relationships have been increased career satisfaction, resiliency to stress, professional practice success and developing motivation. The initial concept of transformational leadership was introduced by Burns (1978); “ leaders and followers make each other to advance to a higher level of moral and motivation”. Bass (1985) explains that the difference between transactional and

transformational leadership is the ability of transformational leadership to motivate others to achieve goals more than what they want.

Transformational leadership has influenced me and mentoring program in plaster unit, it has motivated me and students to believe the vision and implement it to achieve goals. To be a trusted mentor and as a motivation, I am constantly learning and using advanced knowledge, my experience and skills to develop them as a successful professional through mentoring program. Transformational leadership occurs when leaders change followers in three ways: the followers trusting the leader, performing behaviours that contribute to successfully of organisation objectives and get motivated to work at the highest level (Bass, 1985). Schunk (2005) assert that motivation is a critical component of learning and professional development. I always have been motivated by the head of department and AMO supervisor to constantly improve the knowledge and skills, and this similarly methods are applied in mentoring program to the students and staff under my supervision.

Leadership style is the manner and approach of providing direction, implementing plans, and motivating people. Further research has identified the type of leadership that is more specific, but a preliminary research by a team of researchers led by Kurt Lewin in 1939 is influenced and established the three main leadership styles; Autocratic, Democratic and Laissez-Faire. Autocratic leaders make decisions independently and are usually seen as controlling, bossy and dictatorial. Autocratic leadership best used in situations where lack of time to make decisions or leader is the most knowledgeable. Lewin et al (1939) found that the Democratic leadership is

most effective leadership style. Democratic leaders offer guidance, participate in groups and encourage participation in the group, but retain the final decision-making process. Subordinates feel more involved in the group planning, more creative and motivated. While, researchers found that Laissez-Fair leadership is the least productive, where the Laissez-Fair leaders offer little or no guidance to subordinates and let them make their own decisions. Laissez-Faire leadership effectively used in situations that have members who are highly skilled, knowledgeable, motivated and able to work on their own. According to Lewin et al (1939), different leader lead differently, they can choose which style where appropriate and depending on the situation. Democratic leadership have been adopted in our department and mentoring program, all are encouraged and freely to give opinions and recommendations through department meetings, regular meetings and during weekly clinical area visits. I and AMO supervisor always offer guidance, participate in groups and encourage all AMO to involve in weekly discussions; it makes them feel involved in decision-making in Plaster Unit.

Many researchers have shown that effective communication is closely related to the organisational successful and most important process of the management to run smoothly, to share information, decisions making and enhance the productive relationships with patients. According to Barret (2006), effective communication skills makes an effective leader; effective communication skills will build, enable and create understanding and trust that will encourage their subordinates to follow their leader. I believe that effective communication will help member to build trust, respect, facilitate learning, to understand the issues and make decisions for effective change

and achieve goals. Shamir et al (1993) asserts that transformational leadership using communication to create a positive atmosphere and beneficial changes to their follower. When mentoring, I always encourage maximum interaction between mentor and learners to create more communication. Communication will be more effective if leaders/mentor can be credible by his followers/mentee to create a positive ethos, because credibility is very important to inspire confidence and encourage followers to listen. Kouzes and Posner (1993) states that the most important things others follow someone is person's credibility.

In summary, lifelong learning is very important for professional practice development, and better services to patients. Mentoring is a successful strategy to increase students' academic success and professional careers (MacCallum & Beltman, 2003). As a mentor and manager of Plaster Unit, I need to supervise, teach, provide skills and knowledge to newly AMO and students, and ensure the mentoring program is successful as expected objectives. Therefore, the skills of persuade and influence others is essential to gain trust and be accepted by students. Kram (1985) has outlined three key aspects of mentoring; mentoring-relationships, guidance for learning and mechanisms to achieve significant leadership development. Leadership development has become increasingly important and strategic imperative for private or public organisation (Leskiw and Singh, 2007).

At my placement, mentoring program through transformational leadership has been recognized by the head of department and hospital management to produce a dedicated staff and good leaders, to provide quality services to our patients which are priority of our tasks. We believe that transformational

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leaders have competencies and expertise to constantly keep our department competitive. According to Raggins et al (2000), studies have shown that mentoring provides many benefits to facilitate the career development of employees. Advice, support and encouragement can be delivered by experienced professionals for the less experienced professionals through a mentoring program. Transformational leadership will be activated, and a positive work culture and subordinates career development can be promoted if leaders or manager served as a mentor (Scandura & Williams, 2004). Bass and Avolio (1993) believes that vision communication and an emphasis on achieving organisational goals by building self-confidence of followers are among the major behaviour of transformational leader. Bass (1990) assert that the concept of transformational leadership and mentoring approach are same, both influences the career development, commitment, performance and satisfaction. However, according to Sosik and Godshalk (2000), when compared to transactional leadership, transformational leadership mentoring supervision is better and more effective.

Bass (1990) explains that there are four main characteristics that distinguish transformational leaders from transactional leadership: Transformational leaders are characterized by idealised influence or charisma, inspirational motivation, intellectual stimulation and individualized consideration.

Mentoring will be more effective if those four characters of transformational leadership are present on mentor (Scandura & Wlliams, 2004). Banerji and Krishnan (2000) asserts that charisma characteristics are the most important of transformational leadership. House (1977) explain that charismatic leaders have the characteristics of ability to communicate, inspire and

motivate the employees, communication skills, self-confidence, ability to interpret and implement the organizational vision and ability to be enthusiastic to daily works. Therefore, I believe that transformational characteristics are important to achieve the department vision and self-improvement.

Jung et al (2009) states that the characteristics of transformational leadership are often associated with many positive organizational outcomes and related to overall effectiveness of leadership. There is substantial evidence that transformational leadership will enhance the quality of health-care services to patients and reduce the negative impact on health professional, increase staff creativity and department innovation. As manager of plaster unit, I expect this leadership transformational benefits will make us more creative and able to adapt their skills and knowledge to the services and the best clinical outcomes for patients.

In conclusion, this paper has highlighted the important issues of leadership that is needed for future practice development and how has affected the mentoring success. As health professionals who are concerned with career development and provide the best service to patients, it is important to explore and learn deeper about various leadership styles.

Transformational leadership theory is advocated by many leadership thinkers as the best leadership approach to in the organization that allows employees to achieve their full potential (Taylor, 2009). Integrating mentoring and transformational leadership are crucial for health professional to get more effective leadership training (Scandura & Williams, 2004).

Therefore, organisations need to more improve mentoring and leadership training that will facilitate the development of transformational leaders and capable mentors.