

Leadership Styles in Nursing for Staff Health, Well-being, and Productivity

Abstract

Leadership is an essential skill in nursing. It plays a fundamental role in ensuring high-quality patient care and the overall performance of healthcare systems. Effective nursing leadership is vital for supporting the nursing team as they deal with the current challenges of the profession. This article discusses different relational leadership styles that can be used to promote nurses' health, well-being, and productivity. Furthermore, it discusses the challenges that nurses face in achieving effective leadership.

Introduction

Effective leadership in nursing is fundamental for guiding and inspiring the nursing team, fostering a culture of collaboration and continuous improvement, and advocating patient safety (Best 2022). Moreover, it promotes staff well-being, and reduces staff stress and burnout (James et al 2021). Additionally, strong nursing leadership helps nurses make critical decisions, manage resources efficiently, and adapt to the ever-evolving healthcare challenges (De Rezende and Duarte 2017).

Despite recognising the importance of leadership, it remains challenging to define and apply it. According to Yukl and Gardner (2019), leadership is an individual's ability to influence, motivate, and enable others to contribute to the effectiveness and success of their organisations. Leadership is an interaction between two or more individuals in a group that involves structuring or restructuring the situation, perceptions, and expectations of its members and occurs when one person modifies others' motivation or skills (Antonakis and Day 2018). This capacity for interaction and influencing others, defined above is well aligned with skills and behaviours required by nurse leaders as they are essential to motivate and inspire colleagues towards a common goal and be a model of aspiration for others (Nursing and Midwifery Council 2018a, National Health Service 2018).

In today's globalised, dynamic, and complex societies, organisations are dealing with the issue of identifying the most desirable leadership style (Benmira and Agboola 2021).

The changes faced by healthcare organisations indicate the necessity for a more adaptable and flexible leadership style (Figueroa et al 2019). These are:

- Alterations in consumers as the ageing population, pandemic, and chronic diseases.
- Increased use of resources like emerging technologies.

- Development of new policies such as the 2022 Health and Care Act (The King's Fund 2022) and the National Health Service (NHS) long-term workforce plan (National Health Service 2023).

This is a great opportunity for healthcare professionals, particularly nurses, to provide visionary leadership to address the challenges and consequences of systemic reforms.

Several countries face economic health constraints that lead to a demand for new models of care and new professional roles with a skill mix to increase cost efficiency (Figueroa et al 2019, British Medical Association 2022). However, this often leads to a climate of increased managerialism in which promoting efficiency is emphasised at the expense of positive transformative changes in care quality. There are ongoing concerns around nurse shortages and complaints about an overloaded and disenchanted nursing workforce (Figueroa et al 2019).

Health and productivity are essential in sustaining the well-being of nurses. Despite the widely recognised importance of leadership in creating healthy work environments, there is extensive debate in the literature about what constitutes effective leadership in these dynamic workplace contexts (Figueroa et al 2019, Vidman and Strömberg 2020, Restivo et al 2022).

Leaders who adapt best are likely to work more effectively to overcome challenges (James et al 2021). The most flexible nursing leaders pursue creative solutions to complex problems and a broader

range of organizational responsibilities. Therefore, nursing leadership styles that support and inspire others to maximise organizational productivity, individual health, and well-being should be embraced (Benmira and Agboola 2021). Conversely, nurses who adopt a style that reinforces control and a task-oriented vision should be discouraged because they are associated with low working effectiveness and individual empowerment (McCay et al 2018).

Leadership in nursing

Leadership in nursing significantly affects patient care, healthcare outcomes, and the overall performance of healthcare services (Cummings et al 2018). Effective nursing leadership is essential to ensure that patients receive the highest quality of care as it involves making critical decisions, coordinating teams to support interdisciplinary work, and advocating for patients' needs (Cummings et al 2021). Moreover, it is vital for innovation and adaptation to ever-evolving healthcare practices and technologies (Weintraub and McKee, 2019). As medical treatments continue to advance and healthcare systems become increasingly complex, nurse leaders are imperative in guiding their teams to stay up-to-date, increasing staff performance and satisfaction, embracing change, and implementing evidence-based practices (Asamani et al 2016).

Although the significance of nursing leadership in establishing a healthy work environment is well-acknowledged, identifying the most appropriate style within these constantly evolving workplace scenarios is a difficult task, and it can be said that ideal leadership is a combination of styles (Guibert-Lacasa and Vázquez-Calatayud 2022, Cummings et al 2018). Furthermore, cultural and healthcare structural differences in different parts of the world can contribute to various leadership approaches (Barr and Dowding 2022).

Relational leadership styles focus on people's relationships and how they interact with each other (Cope and Murray 2017). It shifts from the emphasis on the individual leader to the leader-member relationships and the environment around them (Maritsa et al 2022). Thus, the value of this leadership is human interconnection. Relational-focused nursing leadership styles such as authentic, resonant, and transformational are recommended to promote well-being, better working environment and teamwork, and individual and organizational productivity within healthcare settings (Cummings et al 2018, Kim et al 2022).

Conversely, task-oriented leaders emphasise more on structures, plans, and schedules to accomplish objectives. These leadership styles, including transactional, dissonant, autocratic among others involve step-by-step planning, reward and punishment systems, and a constant focus on setting structure and goals (Specchia et al 2021). It comprises prioritising the attainment of specific results, adhering to strict timelines,

and requiring employees to establish process-oriented objectives and develop plans to achieve them (McCay et al 2018). Therefore, they may be associated with lower levels of productivity, effectiveness, and empowerment, higher levels of nurses' intent to leave, job stress, emotional exhaustion, and burnout (Cummings et al 2018, Niinihuhta and Häggman-Laitila 2022).

Insert Box 1 here

Nurses' health and well-being are of paramount importance for several reasons. Their physical and mental health directly influences the quality of care they can provide (West et al 2020). When nurses are healthy and well-rested, they are more alert, focused, and able to make sound decisions, ultimately leading to safer patient care (Melnyk et al 2018). Conversely, when nurses are overworked, stressed, or experience burnout, their ability to provide effective and compassionate care may be compromised, potentially jeopardising patient safety (Melnyk et al 2018). Thus, investing in the health and well-being of nurses is not only an ethical imperative but also a practical necessity for maintaining high healthcare standards.

Nurses often work in high-pressure environments that demand physical, emotional, and mental resilience (Melnyk et al 2018). Prolonged exposure to stress and inadequate self-care can lead to

serious health issues among nurses, including physical ailments such as musculoskeletal injuries and mental health conditions like anxiety and depression (McClelland et al 2018).

Recognising these concerns is crucial for retaining a healthy nursing workforce and preventing nursing absenteeism and shortages, which can have severe implications for patient care and healthcare systems. Evidence from systematic reviews suggests that by adopting specific behaviours, including a moral commitment of the leadership and the others, nurse leaders can improve health and well-being, contributing to enhanced job satisfaction and professional fulfilment of the followers, reduced turnover rates, and increased productivity, ensuring that the nursing profession remains attractive to new generations of healthcare workers (Cummings et al 2018, Häggman-Laitila and Romppanen 2018, Kim et al 2022, Niinihuhta and Häggman-Laitila 2022).

Benefits of relational nursing leadership styles for staff health, well-being, and productivity

Nurses' health and well-being issues in the United Kingdom's NHS have become increasingly concerning in recent years. One significant aspect is the persistent staffing crisis and workload pressure faced by nurses (Griffiths et al 2018). Understaffing and high patient-to-nurse ratios have led to overworked and stressed nursing staff, which

not only compromises their own well-being but also poses risks to patient safety (Khan 2023).

Nurses often work long hours, deal with complex environments and situations, and face physical strain owing to the demands of patient care exacerbated by the Covid-19 pandemic (Royal College of Nursing 2023). This chronic workload-related stress has resulted in a higher prevalence of burnout, mental health issues, low productivity, and a growing number of nurses leaving the profession altogether (Halter et al 2017, Kelly et al 2021). Addressing these concerns requires a multifaceted approach that includes recruiting and retaining more nursing staff, implementing safe staffing ratios, and providing adequate assistance to leaders (Royal College of Nursing 2023, National Health Service 2023).

One such support is equipping nurses with relational leadership. This style is defined by prioritising the significance of interpersonal connections, emphasising the importance of building strong relationships and effective communication within a team or organisation (Cope and Murray 2017, Maritsa et al 2022). Relational focused leaders also concentrate on strong relational identity and mutual confidence with people and include authentic, resonant and transformational styles (Alilyyani et al 2018, Cummings et al 2018).

Authentic leaders believe that human beings are their most critical assets (Johnson 2019). This perspective helps them lead towards a

defined purpose and make balanced and objective decisions (Alilyyani et al 2018). Authentic leaders understand their own strengths and work to overcome their weaknesses. Personal qualities such as confidence, resilience, hopefulness, optimism, and high moral character are crucial for authentic leadership (Johnson 2019). In nursing practice, authentic leaders can influence the development of a healthy work environment (Specchia et al 2021) and promote a supportive workplace for newly qualified nurses by developing genuine and trusted relationships (Long 2020).

Resonant leadership in nursing is a transformative approach resonating with the core values of empathy, compassion, and collaboration. Resonant leaders create harmonious work environments by fostering emotional intelligence and establishing solid and empathetic connections with nursing teams (Cope and Murray 2017). They actively listen to the staff, acknowledge their needs, and provide the support necessary to overcome challenges (Bawafaa et al 2015). A recent systematic review published by Niinihuhta and Häggman-Laitila (2022) indicates that a resonant leadership style enhances nurses' emotional well-being by reducing burnout and stress and bolsters their sense of purpose and job satisfaction. Nurses who feel valued and supported are more engaged, motivated, and productive, ultimately leading to improved patient care outcomes and a more resilient healthcare workforce (Parr et al 2021).

Transformational leadership behaviours are highly relevant to the Nursing and Midwifery Council (NMC) standards because they align closely with the core principles and values that underpin nursing practice (Nursing and Midwifery Council 2018b). Transformational leadership, characterised by inspirational motivation, intellectual stimulation, individualised consideration, and idealised influence, embodies these principles (Collins et al 2019). Leaders who exhibit these behaviours motivate nursing teams to stimulate critical thinking, continuous learning (McCay et al 2018) and changes in their attitudes to inspire them to achieve objectives supported by values and ideals (Collins et al 2019).

By adhering to these leadership styles, nurse leaders uphold NMC standards and create a culture of excellence in nursing practice. Additionally, demonstrating care and respect for individual team members, and serving as role models of ethical and professional conduct increases nurses' well-being and productivity (Niinihuhta and Häggman-Laitila 2022).

Patients who receive care in a relational leadership-driven environment are more likely to have positive experiences and better clinical outcomes (Sabbah et al 2020). Therefore, appropriate leadership styles such as the ones mentioned above should be adopted by nurses as they are essential to creating a healthy, safe and productive working environment.

Challenges

Introducing relational leadership styles into nursing can provide significant benefits. However, several challenges hinder its effective implementation. First, the traditional hierarchical structure of several healthcare organisations may make it challenging to adopt relational leadership, as various nurses use top-down approaches and authoritarian leadership styles (Gergerich et al 2019). To overcome this barrier, a cultural shift that includes education and continuous reinforcement is needed to empower nurses to embrace the principles of relational leadership, promote job satisfaction, and reduce burnout (Gottlieb et al 2021).

Second, the high-pressure and time-constrained nature of healthcare environments, with nurses working in fast-paced settings, leaves them with limited time for interpersonal interactions (Algunmeeyn et al 2023). Incorporating relational leadership may require nurses to have more time for training and dialogue about strategies to improve open communication, team-building, and collaboration (Gottlieb et al 2021).

Finally, equilibrating working relational aspects with essential clinical responsibilities and administrative tasks can be challenging (Maritsa et al 2022). Healthcare organisations and policymakers must provide resources, tools, and support that can help nurses strike an effective workload balance and ensure a safe place to work.

In light of the above evidence, nursing leaders must prioritise relational leadership as a core value in their practice.

Conclusion

The importance of leadership styles in healthcare, particularly in nursing, cannot be overstated when promoting nurses' health, well-being and productivity and influencing staff morale. These are essential for nurses' welfare and have far-reaching implications for patient safety, healthcare sustainability, and the overall quality of healthcare services.

Applying relational leadership styles and behaviours have several potential advantages for nurses. For instance, relational leaders emphasising inspiration, motivation, and individualised consideration can significantly enhance nurses' health and well-being. Furthermore, empathy, dedication, collaboration and shared decision-making may empower nurses to take ownership of their work and contribute to a culture of respect, inclusivity and productivity.

Nurses who employ this approach foster a sense of purpose and engagement in their teams, reduce burnout, improve mental health, and increase job satisfaction. A healthier and more motivated workforce is equipped to deliver high-quality care.

To maximise nurses' health, well-being, and productivity, healthcare organisations should invest in leadership development programs that promote relational leadership styles. Each one brings a

unique set of qualities to leadership and effective nurses' leaders may incorporate their elements depending on the context and organisational needs. Thereby, they can create a culture and environment in which nurses thrive, ensuring their own professional satisfaction and growth and the delivery of outstanding patient care.

Effective healthcare leadership is not just a desirable trait; it is a fundamental requirement for the betterment of both nurses and the clients they care for.

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Box 1

Box 1 Relational versus task orientated leadership	
<p>Relational-focused leader common characteristics:</p> <ul style="list-style-type: none"> • Prioritise interpersonal connections and relationships • Value team member contributions • Individualised consideration and influence of staff, leading by example • Inspirational motivation through coaching, passion and commitment • Encourage learning and growth • Demonstrate confidence, optimism, hope and resilience • Facilitate transparent and shared decision-making • Emotional intelligence attributes • Empowerment of the colleagues 	<p>Leadership Styles:</p> <p>Authentic</p> <p>Resonant</p> <p>Transformational</p>
<p>Task-orientated leader common characteristics</p> <ul style="list-style-type: none"> • More authoritative, using of commanding and pace-setting behaviours to achieve results • Little empathy for staff • Focus on structure, roles and tasks • Emphasis on results, goals setting and work facilitation • Strict use of schedules and step-by-step plans • Use of punishment/incentive system • Position-based power • Emotional distance from staff 	<p>Leadership Styles:</p> <p>Dissonant</p> <p>Transactional</p> <p>Autocratic</p>
<p>(Adapted from Cope and Murray 2017, McCay et al 2018, Cummings et al 2018; Collins et al 2019, Long 2020).</p>	