Leadership, Supervision and Mentoring in Health Care

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**Introduction**

This critical leadership analysis report is based on an episode that addresses leadership attributes of a nurse. I was directly engaged in the subject episode as a student nurse when I was working alongside my Associate Nurse Unit Manager who was serving a leadership role in an inpatient mental health unit. Issues that are associated with styles of management and qualities of leadership will be discussed taking into account legal, political and ethical factors that can have an impact on consumer care. This report addresses prioritization and delegation along with care delivery, taking into account the interference of teamwork and consumer safety and risk assessment. I will take into account my role for analysing leadership position and personal responsibilities, how such responsibilities and positions influenced my practice. The customer would be named Mr Smith, adhering to the standards of confidentiality by using pseudonyms. The aim of this practice is to maintain the confidentiality and privacy of the individual adhering to the MNC code of Professional Conduct. In accordance with those professional standards, a registered nurse health visitor or nurse must protect personal details and confidential information and she should treat the information about patients as confidential taking into account that it should be used for the set purpose only. Taking into consideration this aspect, it would be observed that during the episode of leadership significance is mandatorily asserting, leadership skills are required are necessary to be displayed and what are some major leadership theories, how can these theories be employed and how its implication can be viewed in the current scenario. (Gordon et al, 2015).

**Overview of significant episodes of leadership**

Execution of an extended practice rotation adhering to mental health graduate nursing student is an approach that a student uses to develop knowledge and skills that are mandatory for both management and leadership taking into account that an entity is confident for its role-play as a learned senior nurse. During my graduate nursing rotation, there were numerous chances that allow me to acquire such attributes and skills and employ them on an independent leadership role in mental health.

During the placement of Mr Smith, a male consumer who was 32 years old who was discharged from mental health rehabilitation in the patient unit following to a recent admission in the context of the release of illicit substance misuse and concerns related to safety because of poor care at his home. Mr Smith was receiving intensive holistic multidisciplinary care from last 3 months. Multidisciplinary care included occupational therapy, intensive psychiatric consultant input and nursing care accompanied by social work input. Mr Simith was able to administer his medication as a result of care, adhering to improvement. One of the junior nurses named as Simon commented that Mr Smith seemed much confused in the morning and he was asking if senior ANUM would review him. After a short discourse, it was inferred that Mr Smith was not actually himself; in fact, he seemed to be under substance effect. After having a discussion with ANUM, with whom I was working, it was clear that Mr Smith would not be safe to be on unit. I initiated a set of vital signs and ANUM initiated a MET call that was based on my findings as well as the policy implications. It paved the way for the analysis of the patient safety culture that was in practice, taking into account that much of the literature asserted it to be a trust activity that can have several benefits for the development of the members of the team, such as, self-esteem, confidence building and effective team working.

It is a well-known fact that the history of a customer and the information regarding precedence play a significant role during the course of whole process, taking into account the scenarios in which medicine is needed to provide the customer at a particular point of time. (Peltz et al, 2017). I observed ANUM while she was taking a lead to delegate the tasks such as getting the crash cart, informing someone to phone through the emergency to the main switchboard, advising nurses to observe signs and blood and make clear paths so that the emergency team can reach the patient in time. The nurses' leader focused his attention on clinical leadership adhering to the amalgamation of both, clinical expertise and leadership practices. It is significant to note that clinical leadership involves monitoring and delivering evidence-based practices along with evaluation of outcomes within a framework of consistent improvement that could analyse and mitigate risks to patients and improve coordination that is efficient for care, advocating patients. (Ott et al. 2009; Jukkala et al. 2013).

Once the customer would be safe and stable I had to push the medical team to get Mr Smith and transfer him to the medical ward for observation. The situational factor was that we were unsure in terms of the amount of medication Mr Smith had consumed without any supervision. They were argumentative as well as hesitant taking into account why Mr Smioth was unable to be nursed on the medical health unit. I observed ANUM informing the medical team that the medical health unit does not have adequate resources that could monitor patients. It is significant to note that contextual factors play a major role in the analysis of health of patients who are suffering from serious illness and the combination of stigma within mental health that contributes to consumers who are seeking medical encounter but have to cope with inadequate medical care. According to medical providers, the consumers with SMI are much threatening and unmanageable because of invoking fear and resistance towards treatment. Furthermore, lack of experience and training in people who are working with SMI contributes to stigmatization. Such stigmatizing attitudes result in consumers who are being shunned and dismissed by healthcare providers. The ANUM displayed a leadership skill that would fit into the category of Autocratic leadership that refers to a style of management wherein one person administers all the decisions and take little inputs from the other members of group. Autocratic leaders make a decision that is based on their personal beliefs and doesn’t involve other’s advice or suggestions. This type of leadership is only influencing in an organisation where the baseline of work requires instant and quick decision-making attributes. (Leopoldo J. Cabassa, 2014). The only responsibility of decision and outcome is associated with the leader taking into account that it is considered as one of the most flexible leadership styles. However, many argue that it is outdated now, but the advantages cannot be negated such as control over the process when consumer needs urgent care.

ANUM displayed appropriate and safe consumer care adhering to high level of skill in the interpretation and assessment of data to support adequate clinical judgments. The underlying reason of the customer’s confusion was treated and discovered, taking into account that risk assessment was competition and escalation for care that was initiated for the safety of Mr Smith. All the member of the team of multidisciplinary were fully committed in order to address the approach of team taking into account the stance of care delivery and this added to organised and efficient care delivery. Patient centred care was delivered asserting, teamwork is mandatory for an adequate implication of care.

**Style of Leadership Evident from the Episode**

Senior nurses are made to take part in diverse leadership activities in routine actions. There are a number of nurses who will use an adequate leadership style while others would find the concept of leadership as a complex idea. Effective leadership is an attribute that is critical in delivering care of high quality, facilitating the development of positive staff and ensuring safety of patients. Leadership can be illustrated as a multifaceted process that can be used to highlight a target or a goal, by motivating other people to supply the support that could facilitate the achievement of set goals. (Porter-O’Grady, 2003). An analysis of routine of senior nurse asserts that her actions include coordinating day/night shifts with the support staff and nurses, adhering to the direction of that nurse. It was during this episode of leadership it was evident that ANUM was able to communicate in a way that was clear, concise and direct to aid in delegating and supporting me to take charge in the escalation of urgent consumer care. The successful operation of the staff code of conduct, shift and dealing with challenges depends on the leadership skills of a senior nurse. Communication is another essential characteristic that could highlight patient safety, well being and health. A nurse is at the centre of consumer care, it is the responsibility of the nurse to facilitate dialogue because lack of effective communication skills may pave the way for serious errors that can risk the lives of the consumer. (Cooper et al, 2016).

Senior nurses should apply certain characteristics in their work that can help them win the trust and respect of members of team and empower the development of clinical practices. When ANUM demonstrated an effective leadership style accompanied by good communication skills, she was having the command and vigilance to assert successful grooming of myself, ensuring that all the professional standards are fulfilled that could initiate the growth of learned practitioners. According to the study by Bondas (2006), leaders with strong driving forces are appreciated because they were termed as a tool for role models and inspiration for the future nurse leaders. This was the major characteristics for ANUM on duty taking into consideration the significant episode of leadership. ANUM was consumer focused and knowledgeable because of best patient care that was needed at that time. A successful and good leader will make efforts to develop other members of the staff by adopting leadership. Saarikoski and Leino-Kilpi (2002), have concluded that one to one supervisory leadership is one of the basic element instructions that are associated with clinical instructions. Research has highlighted that mentorship helps in learning opportunities that could support to administer and support staff in the practice setting. The autocratic leadership style has several advantages such as making an autocratic leader an in charge and it is the vision of a leader that is relayed to the employees. There is no confusion regarding the vision of decision because it is explained and conveyed consistently that the employee has clear expectations that are set by an autocratic leader. One of the disadvantages of this type of leadership is that it could lead to a stressful working environment where people are well known to the fact that poor performance will lead to performance management and dismissal. Secondly, one-way communication without feedback may lead to misunderstanding, accompanied by a communication breakdown. I think this critical leadership episode is like a stance that asserts an urgent initiative is required to aid a customer who is affected by substance and compromised the adequacy of autocratic leadership style.

**Critical and Reflective Discussion of the Whole Situation**

Managers are illustrated as “a member belonging to specific professional group who is meant to address activities and resources along with clearly highlighted subordinates.” (Gopee & Galloway, 2009). The other definition of management is “a process by which organisational objectives are obtained by the implication of certain skills and utilization of resources.” (Huber, 1996). “Self-awareness is another process that can facilitate understanding of one’s own motivations, limitations, beliefs, and biases recognising how they can affect services and care provided”. (Whetten and Caneron, 2010). Self-awareness needs to be considered as one of the basic points for management because it is one of the basic skill and fundamental quality that is required in leadership. ANUM was able to communicate effectively and rely on communication and escalate appropriate care in a calm manner. It was also depicted that ANUM utilized her knowledge about procedures and policies when escalating the care and transfer of the consumer. ANUM wishes to provide standardised care that can improve their own performance as a skilled professional of healthcare who is able to address effective, cognitive or mental and behavioural self in order to engage on therapeutic relationships both with multidisciplinary and consumers effectively. In this scenario, ANUM displayed self-awareness how it could impact on getting Mr Smith adequate treatment as soon as possible. ANUM remained informative, empathetic and calm towards all sections even it was a stressful event. If ANUM has no self-awareness and lack of awareness, it would not be possible to maintain a positive relationship with the consumers and co-workers. Maslow’s hierarchy of Needs Theory (1954) illustrates self-actualization is positioned at the highest rank of the flow chart of desires and needs. This refers to the needs to maximize potential and attain a stance of personal fulfilment, accomplishment and competence. (Maslow, 1954). It is significant to note that a student nurse must be aware of the weaknesses and strengths; an individual has to be very conscious of any limitations. According to Walshe & Smith (2006), self-awareness facilitates the exploitation of strengths and copes with the weaknesses.

**Recommendations for the Improvement of the Healthcare setting**

During the course of the whole process, one thing is has been missed that is, how the consumer and staff security protocols are being developed (Cooper et al, 2016). The problem was, the emergency response was not called straightway. There needs to be education and effort made in "emergency response" to ensure a better perspective. So, when the degree of stability is obtained, one of the first things was that the security personnel needed to be called (Cooper et al, 2016). At the moment, the way the consumer broke in and took the medication, it goes to show that the security protocols that were available at the given time were far from ideal (Streiff et al, 2017). The other aspect of training assert how training protocols are going to be set up to make sure that the staff who work in mental health are educated to take care of themselves post eventful event (Endacott et al, 2015). It is noted that the proficiency and proactiveness of the non-medical staff together with the level of training that they made decisions with regards to the way this whole situation is going to end. One of the ways to manage this situation is to ensure that the training is carried out to provide staff with insights regarding how situations are managed. (Endacott, et, al. 2015). The leader strives for continuous improvement by accepting and receiving feedback because it will help a leader to address an identity conflict and problems that interfere with the goals of team and rely on information for quality improvement.

**Conclusion**

Nurse leaders have a significant role in the incorporation of patient safety because it can lead to the management and lead other members who have the highest level of contact and a diverse range of interaction with the patients. (Riley 2009). It is important to note that nurses are crucial to deliver patient care of high-quality by securing positive patient outcomes in critical incidences. It is important to note that the nurses do not operate in isolation; ANUM displayed her abilities to provide best practices of care that were influenced by the environment where she worked. Being a student nurse, I learnt that qualitative interaction with other healthcare providers plays a significant role in the level of support and resources that are available in critical incidences. Positive and adequate leadership styles have been associated and analysed with range of complications and patient outcomes across a diverse range of medical settings. (Wong et, al. 2013). I came to know that effective communication along with leadership style is required while dealing with stressful circumstances to promote a positive outcome. I learnt about leadership positions from these experiences, highlighting nursing units with adequate styles of leadership that are directly related to lower mortality of patients. (Houser 2003; Capano et al. 2005; Cummings et al. 2010).

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