

Leadership style of Nurse Managers

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Abstract- Leadership style is phenomenon which affects the productivity and quality nursing care. There is a lack of research studies in this area in Sri Lanka. The aim of this study was to examine the nurses' perception about their nurse managers' leadership style. The study sample comprised 160 nurses using simple random sampling. The research instruments were Demographic Data Recording Form and the Perceived Leadership Form Questionnaire. The reliability coefficient of the Perceived Leadership Form Questionnaire was 0.86 and the content validity index of was .91. Data were analyzed using descriptive statistics. Nurses perceived their managers' leadership style as transformational (Mean = 3.35, SD =0.64), and transactional leadership as (Mean = 3.25, SD =0.45). The results of the study showed that nurses perceived their managers' leadership style as transformational. The study provides the opportunity for nurse managers to look into their nursing staff by examining their own leadership style

Index Terms- Leadership styles, Nurses, Nurse Managers

I. INTRODUCTION

In today's ever-changing health care environment, knowledge and practice of effective leadership behavior are now more essential to nursing than ever before. Nurses face various types of challenges such as economics, merges, shortage, productivity and quality care. Therefore, they must be effective leaders to meet these challenges. In addition, they require leadership skills that provide direction for a new generation of nurses (Marriner-Tomey, 1993 and Mahoney, 2001).

Leadership is a universal phenomenon. Burns (1978) described leadership as a special form of power. He identified two distinct types of leadership behaviors in the organization as transactional and transformational leadership. According to his view, transactional leaders initiate a relationship with followers based on exchanges. In this style, interaction between the leader and followers is limited to the exchange transaction. Further, transformational leadership is the collectively purposeful causation of change within the group (Burns, 1978).

Bass (1995) extended Burn's theory by giving more attention to follower's rather than leader's needs. Bass believed that leaders behave in certain ways in order to raise the level of commitment from followers. According to him, leadership is an interaction between two or more members of a group that often involves a structuring or restructuring of the situation and the perceptions and expectations of members. Leadership occurs when one group member modifies the motivation or competencies of others in the group (Stewart, 2006).

Avolio and Bass (1999) conceptualized three components of both transformational and transactional leadership styles.

Charisma/ inspirational, individualized consideration and intellectual stimulation factors are highly interrelated and are always present to some degree in transformational leadership. The components of transactional leadership are contingent reward, active management by-exception and passive-avoidant (Avolio and Bass, 1999).

Avolio and Bass's (1999) six factors include: (1) charisma/inspirational which provides followers with a clear sense of purpose that is energizing, is a role model for ethical conduct and builds identification with the leader and his or her articulated vision; (2) intellectual stimulation gets followers to question the tried and true ways of solving problems, and encourages them to question the methods they use to improve upon them; (3) individualized consideration focuses on understanding the needs of each follower and works continuously to get them to develop to their full potential; (4) contingent reward clarifies what is expected from followers and what they will receive if they meet expected levels of performance; (5) active management by-exception focuses on monitoring task execution for any problems that might arise and correcting those problems to maintain current performance levels; and (6) passive-avoidant leadership tends to react only after problems have become serious to take corrective action, and often avoids making any decisions at all.

In Sri Lanka, nurse managers are the middle level managers in hospital settings. Nursing sister, ward master and nursing officer Grade 1 are used to describe the nurse managers. They are responsible for medical team staff relationships, patient care issues, staff concerns, , supply inadequacies, and organizational initiatives.

However, their leadership styles have not been discovered. Therefore, the purpose of this study was to of this study was to examine the nurses' perception about their nurse managers' leadership style.

II. METHODOLOGY

A descriptive study design was conducted during 2010. A random sample of 160 nurses was selected from a government hospital in the central province Sri Lanka. After getting the ethical approval and the permission from the Research Ethics Review Committee, Faculty of Nursing, Chiang Mai University, Thailand and Provincial Director of Health Services, Central Province, Sri Lanka, and data were collected using a self administered questionnaire. Based on Avolio and Bass's (1999) transformational and transactional leadership theory and literature review, the researcher developed the instrument to measure the perceived leadership form of nurse managers in the hospital. It includes six subscales: charismatic-inspirational leadership, intellectual stimulation, individualized consideration,

contingent reward, management-by-exception and passive-avoidant leadership. Each subscale contains four items with a five point Likert type scale (0 = not at all, 1 = once in a while, 2 = sometimes, 3 = fairly often, 4 = frequently). For each subscale, scores were summed and divided by the number of items to attain a mean. A higher value represents greater use of the relevant leadership form.

The content validity of this modified scale has been tested by a panel of 3 experts to confirm the representativeness of the concept. The CVI for each pair of experts ranged from .89 to .94 and the CVI of PLFQ was .91.

Reliability of PLFQ was tested among 15 Sri Lankan nurses who work in a government hospital. The Cronbach's alpha obtained was 0.86. The Cronbach's alpha of charismatic-inspirational leadership, intellectual stimulation, individualized consideration, contingent reward, management-by-exception and passive-avoidant leadership were 0.75, 0.72, 0.78, 0.80, 0.84 and 0.83 respectively.

Data were analyzed using a SPSS 13.0 and Descriptive statistics were used to analyze responses to the surveys.

III. RESULTS

The majority of respondents were female (88.8%) and 89.4% were married. Most participants (47.5%) had more than 15 years experience in nursing.

Table I: Mean and standard deviation of perceived leadership form scores

Dimensions of leadership form	Mean	SD
Transformational Leadership	3.35	0.64
Charisma Inspirational	3.47	0.70
Intellectual Stimulation	3.21	0.69
Individualized Consideration	3.38	0.78
Transactional Leadership	3.25	0.45
Contingent Rewards	3.34	0.70
Management by Exception	3.57	0.64
Passive Avoidant	2.84	0.71

IV. DISCUSSION

Considering the leadership form of nurse managers perceived by nurses, the results of this study showed that the total mean score of nurse managers' transformational leadership form as perceived by nurses was 3.35 (SD = 0.64) whereas the total mean score of nurse managers' transactional leadership form as perceived by nurses was 3.25 (SD = 0.45) suggesting nurse managers were demonstrated both transformational and transactional leadership forms. This finding is congruent with the idea of Bass (1985) who describes the various leadership styles exhibited by the leaders in combination such as transformational leadership and transactional leadership.

However, results of the present study showed that all nurses perceived their nurse managers more as transformational leaders

than transactional leaders. This finding is consistent with the previous studies which examined nursing faculty members' perceptions of nursing directors' leadership style in Taiwan (Chen, Beck and Amos, 2005; Chen and Baron, 2006).

A possible reason for the result of the present study may be related to current situation of the research setting. These nurse managers may try to achieve the hospital vision and mission with the help of their staff members. They motivate the staff to do more than they originally expected to do.

Another possible reason for this situation may be related to nurses' experience. As majority of nurses (47.5 %) in this study had more than 15 year experience, they may have good relationship between their nurse managers. Hence, these nurses may perceive their managers more transformational than transactional.

V. CONCLUSION

The results of the study provide the opportunity for nurse managers to look into their nursing staff by examining their own leadership style. It may help to increase the nurses' satisfaction as well as to achieve the organizational visions.

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