BUILDING LEADERSHIP IN NURSING PRACTICE

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Abstract

In the pursuit of a competent and competitive healthcare system, nurses and healthcare technicians, as key figures in the healthcare process and scientific discipline of nursing, should possess not only professional knowledge but also managerial abilities and skills. This includes the effective management of human and material resources within the healthcare system. Leadership in nursing practice can be understood as the influence of head nurses on the quality and effectiveness of all activities within their domain. By reviewing the literature on research concerning leadership in nursing and the factors influencing its development in nursing practice, which have not yet been definitively defined, we aim to provide an overview for the professional community in the fields of biomedicine and health, especially in healthcare where nurses operate at all levels. To achieve the goals necessary for developing leadership in nursing practice, the implementation of appropriate strategies, methods, and tools within the healthcare system is crucial for human resources, a key factor in improving healthcare delivery. The role of the head nurse, or nursing leader, is of paramount importance in enhancing the organization and quality of healthcare at all levels.

Keywords: Leader, nurse, manager, management, knowledge

INTRODUCTION

Social and economic changes worldwide necessitate significant investments in research and innovation, particularly in healthcare and nursing (1). Leadership has been inherent in mankind
since its inception as conscious and thinking beings, embodying strength, determination, courage, desires, ambitions, and the individual's will to effect change in themselves and others (2). The presence of efficient and effective leaders in nursing practice, who can successfully guide healthcare through the uncertainties brought about by changes, is of paramount importance for the continued advancement of healthcare and health perspectives. In the pursuit of a competent and competitive healthcare system, leadership ceases to be an option but becomes a necessity. To make meaningful contributions to healthcare and effectively manage change, the nursing profession needs to foster leadership at all levels: local, regional, national, and international (3). Nurses, as the bearers of the healthcare process, should not only possess professional knowledge but also managerial expertise and skills, enabling them to adeptly manage human and material resources within the healthcare system. Leadership is primarily about relationships and the willingness of others to follow, placing it within the realm of self and people management skills (4,5). This profile plays a crucial role in the overall management structure, representing the intermediate tier of management within the healthcare hierarchy. It integrates the knowledge of the staff it oversees and serves as the main link in the chain of patient – nurses/technicians – head nurses/technicians – heads of departments/doctors (4,6).

AIM

The aim of this study is to examine the most important factors and aspects that determine the development and construction of leadership in nursing practice.

METHOD

This review paper utilized a standard literature review strategy, involving searches of electronic databases and professional works related to leadership and management in healthcare, with a primary focus on nursing practice. A comprehensive search was conducted to gather relevant literature, incorporating both domestic and international sources available on official and pertinent websites.

Electronic databases searched included Pubmed, Scopus, Google Scholar, Serbian Citation Index, ResearchGate, and others. Keywords such as "nurses," "organization of nurses," "healthcare management," and "leadership in nursing" were employed to identify relevant publications. The search was limited to publications within the last ten years.

Human Resources Management in Healthcare
One of the key factors in the organization and implementation of changes in healthcare organizations and the system as a whole is the application of appropriate strategies, methods, and tools, with one of the most effective being the strategy of changing human resources. Without a thorough transformation of management practices in healthcare and without significant changes, both in the structure and in the work of all employees in health services, be it medical or non-medical personnel, there will be no improvement in healthcare as a whole. A mix of different skills and expertise will increasingly be required for the quality and efficient provision of healthcare services to healthcare workers. Transparency between operatives and supervisors, as well as among different departments providing services, teams of different experts on the same task, and faster and more efficient circulation of information, both internally and in relation to external factors, are the characteristics of the new, flexible health management. The transformation of health management should make the complex role of employees in health directed primarily towards the users of health services with constant work on their own education, as service providers, and on the education of users (4). For the successful implementation of changes, it is necessary to be motivated for changes. The motives of the members involved in the team can be different. From social motives aimed at securing personal existence and affirmation: the motive of combativeness, the motive of security, the motive for acquisition, the motive for personal affirmation, the motive of self-actualization, to the social motives aimed at connection with other people, the motive for obedience, etc. (5). The first group of motives refers to thinking, problem-solving, and decision-making skills, and the second group of motives is useful for teamwork by contributing to the effectiveness of communication among its members, through cooperation, providing support and help, and developing positive interpersonal relationships (5). Motivating employees for change is a task that the manager in the institution, in the role of agent, must perform. It is an extremely important task without which it is not possible to make changes. The very beginning of the organizational change process comes down to the maturing of managers' awareness that changes are necessary (5). Without the manager's conviction that changes are necessary, they will certainly not happen. Managers' motivation is a necessary but not sufficient condition for their success. Changes always imply a change in employee behavior to a greater or lesser extent. Almost every organizational change implies that employees change some of their routines, operations, the way they do their work, and their behavior (5,6). In order to accept and implement changes, employees must be truly convinced that they will bring something good, both to them personally and to the institution where they work (5). Organizations or institutions that operate in today's environment are in constant interaction with an environment that is
changing and that affects the quality of business. This imposes the need to manage the organization towards achieving the ultimate business goal. This goal varies depending on the activity of the organization. In production organizations, it is visible and tangible, while in service organizations, the business goal is not tangible, but is reflected in the satisfaction of the end-users of the services. Management is viewed differently in professional literature, as a social phenomenon, skill, ability, scientific discipline, art, profession, etc. (7-9).

The essential features of management are (10):

• Working with and utilizing people to ensure that the organization's goals are achieved through the collective action of individual task bearers,
• Achieving the organization's goals, reflected in the fulfillment of its purpose and mission,
• Striving for a balance between efficiency and effectiveness,
• Managing relatively limited resources,
• Adapting to changing business conditions.

Management has evolved through the application of new technologies, especially information technologies, leading to the development of models of innovative organizations and institutions, characterized as follows (11):

• Strong focus on the goal: Successful organizations have interconnected activities, focused functions, and defined strategic priorities for development.

• Adaptability: A well-defined goal focus balanced with the ability and willingness to undertake fundamental and rapid changes, if necessary, requiring a high degree of organizational flexibility.

• Organizational cohesiveness: Integrativeness within the organization is a critical success factor achieved through effective communication, job rotation, role integration practices, long-term employment, and intensive training.

• Innovative organizational culture: Supports a climate that fosters change agents.

• Sense of integrity: Tendencies for long-term relationships and cooperation to maintain stable associations with other organizations, local and national bodies, etc.
• Engaged top management: More experienced managers are involved in all management processes based on knowledge and experience, rather than solely on their position within the organization.

• Shallower organizational hierarchies: Greater participation and the creation of multifunctional teams for planning, managing changes, and adapting with greater flexibility within and between teams.

In performing the tasks of an organization, managers should work together as a whole, so the term management encompasses all employees in a given organization who, in accordance with their powers and responsibilities, perform managerial tasks.

In management theory, healthcare institutions are recognized as the most complex organizations, requiring the most intricate management. Health institutions are organizations whose primary objective is to provide healthcare within national frameworks, emphasizing the crucial importance of their management. Management within healthcare institutions is executed by managers who serve as the principal executors of managerial functions.

Health management aims to satisfy and balance the interests of all participants in the health system, including patients (especially when they are sick), healthcare personnel within the organization, the institution itself, the community in which it operates, and the broader environment. This involves:

• Planning, organizing, implementing, and controlling health programs
• Coordinating resources such as personnel, finances, facilities, equipment, information, knowledge, technology, regulations, laws, and time
• Monitoring the development and implementation of health programs
• Providing support and encouraging community and individual participation.
• Influencing appropriate decision-making at all levels of the health system
• Working toward achieving set goals to improve the health status of the population (9-13).

LEADERSHIP IN NURSING

At the nursing level, head nurses/technicians assume managerial roles, thereby embracing their dual responsibilities. Building organizational knowledge, which comprises individual knowledge, necessitates managerial skills to effectively blend individual and team knowledge,
identify essential knowledge, foster a culture of knowledge sharing, promote the generation of new knowledge, and retain top-performing employees as a competitive advantage (4).

With the emergence of a new profile of managers in healthcare, namely head nurses/technicians, it becomes imperative to concurrently address organizational and procedural issues. These form the foundation for cultivating leadership in nursing and overcoming barriers associated with educational profiles (4).

Nurses serve as the cornerstone of development in modern healthcare systems. Given the prevailing challenges such as healthcare worker shortages, leaders must adeptly assimilate various leadership styles and strategies for staff empowerment. This facilitates the creation of a conducive work environment that promotes the commitment of nursing staff, patients, and their respective organizations (14).

The correlation between leadership styles, staff perception of empowerment, and their level of commitment is crucial. Leaders must devise frameworks that encourage and facilitate a high level of commitment among nursing staff, particularly in light of the prevailing challenges related to healthcare worker shortages, particularly within the nursing profession (14). Motivation is the process of stimulating, directing, and sustaining activity to achieve a specific goal that satisfies a corresponding need. Motivating, on the other hand, is the managerial activity through which managers influence employees to actively engage, to the fullest extent possible, in realizing the organization's vision. The greater the number of motivated individuals within an institution, the more effectively they utilize their abilities and skills to achieve established objectives (9).

Despite appearing as a logical sequence based on the above definitions, motivation is actually a highly complex and intricate process. It cannot be regarded as a one-size-fits-all "recipe" applicable in every situation. Rather, it involves influencing employee behavior in a manner that aligns with the goals and needs of the organization (6). A leader in the healthcare sector is continually confronted with the necessity of ensuring a highly motivated staff on a daily basis. To meet this imperative, the leader must possess a deep understanding of motivation – its nature, significance, and ramifications – as well as the factors that both inspire and undermine motivation among their followers (7).

If a leader presents ambiguous goals to their followers, there is a high likelihood that work activities will proceed sluggishly, with insufficient enthusiasm, and at a significantly reduced volume compared to expectations (10). As a competent leader, the nurse serves as the
cornerstone of development in modern healthcare systems (5). By shaping the mission and vision, as well as the values and moral principles, nursing defines its identity, profession, and ethical framework. This underscores the role of the nurse, who possesses not only specific professional competencies but also holds a distinct ethical position and role within the healthcare system. Furthermore, there is a pressing need to involve the nursing profession in significant clinical decision-making processes (9).

Given the role of modern communication technologies and the imperative for all nursing staff to master them, there arises a necessity for continuous education in these domains. This is essential for enhancing patient care, improving work organization and record-keeping, as well as streamlining administration processes. Such proficiency significantly contributes to better time management, which holds particular significance in clinical settings where uninterrupted processes are essential (9). The law delineates the organization of activities, the execution of tasks, the necessary authorizations, and the conditions for performing said activities, encompassing education standards, specialization, and professional training (9).

Job satisfaction, a pivotal concept, is primarily characterized by the emotional responses of employees guiding their work performance and is fundamental to organizational success. It pertains to employees' positive or negative sentiments towards their job and the emotional reactions they exhibit in various work-related situations. Job satisfaction is influenced by both the individual employee's personality and the organizational environment they inhabit. An individual's personality plays a significant role in determining what brings them satisfaction (15).

Each individual possesses unique characteristics, yet for an employee to perform successfully in a specific role, a requisite level of knowledge is essential. Without it, the employee may experience dissatisfaction and struggle to fulfill assigned tasks. Organizations typically hire employees based on their existing knowledge levels for particular positions. However, given the dynamic nature of business environments, knowledge acquisition is an ongoing process. Once acquired, knowledge may become outdated relatively quickly due to constant change.

Employees can enhance their knowledge through various means, including internal knowledge exchange within the organization. Knowledge sharing is a discretionary behavior that holds significance for both individuals and organizations. It fosters continuous learning and contributes to several beneficial outcomes for the organization, such as enhancing innovation capacity, facilitating the transfer of best practices, and increasing productivity. However,
measuring knowledge sharing can be challenging, necessitating the implementation of formal plans and incentives such as bonuses to encourage and reward this behavior (15).

The Nursing and Midwifery Council's updated Standards of Nursing Competence (NMC) underscore the significance of nurse leadership, complemented by the NHS's development of models to bolster leadership development. This article delineates the four elements of transformational leadership—idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration—and explores their alignment with the NMC standards. Additionally, it deliberates on the advantages and drawbacks of nursing services' organizational structures (16).

Nursing education plays a pivotal role in nurturing students' capabilities, fostering a supportive culture, and augmenting their creativity, motivation, and ethical conduct. This preparation equips graduate nurses to emerge as future leaders within the healthcare system (17).

An integrative review identified ten scientific papers meeting the inclusion criteria. Analysis of these studies revealed that clinical leadership attributes primarily center on clinical aspects. The limited number of research-based studies underscores the imperative for further exploration in the realm of clinical leadership in nursing practice (18).

The role of nurse leaders is multifaceted and demanding within the broader context of healthcare across all sectors of a country's healthcare system. Its significance is increasingly garnering attention from both domestic and international organizations, with nurse leaders progressively assuming influential positions within healthcare structures. There is a pressing need to proactively and effectively enhance the preparedness of nurse leaders to undertake and sustain these challenging and dynamic roles (19).

This article endeavors to offer a comprehensive overview of nursing leadership by delving into the theoretical frameworks that underpin its manifestation, exploring various leadership styles in nursing within their respective contexts, and ultimately addressing strategies for nursing education aimed at cultivating leadership capacity and sustainability among nurses (20).

In international literature, there is a recurring emphasis on testing leadership models across various settings to better assist nurses. Further exploration of nursing leadership is imperative to enhance this pivotal competency in routine practice. Interdisciplinarity and management are among the numerous avenues to bolster this competence, potentially fostering team autonomy and self-actualization (21).
Nurse leaders continue to grapple with capacity issues both clinically and academically. In 2017, the American Nurses Association (ANA) conducted an extensive member needs assessment involving over 15,000 respondents. This assessment identified three distinct career categories: early career nurses, entry-level nurses, and nurse leaders. This article offers a broad overview of the program, encompassing evaluations and modifications, and examines the implications of utilizing ANA's career-level categories in virtual mentoring initiatives (22).

The 2019 coronavirus disease (COVID-19) pandemic has thrust nurses into a significant role in infection prevention and mitigation efforts for individuals with health issues across healthcare, medical, and social systems. This study sheds light on the importance of nurses in times of crisis, emphasizing undergraduate nursing education and postgraduate training. To realize this, it is imperative for state agencies to bolster collaboration with nursing schools and foster the development of human resources capable of constructing a sustainable, equitable, and resilient society (23).

The impact of leadership in nursing on the quality of healthcare

In the wake of nursing's evolution throughout the 20th century, endeavors to enhance nursing with insights from other scientific disciplines represent a natural progression aligned with the broader development of medicine and healthcare processes. Present-day nursing is marked by global interconnectedness among nurses and collaborative efforts to address key nursing issues. The challenges facing modern nursing, notably inadequate education and limited professional advancement opportunities, are particularly pronounced. In essence, the professional development of our nurses has largely been cultivated through their own experiences and enthusiasm in the workplace. However, there is a need for systematic reforms such as job systematization, formal recognition of higher education diplomas, clear delineation of new occupational titles in the occupational nomenclature, and adjustments to salary coefficients and wage levels. Additionally, greater support from governmental bodies and competent ministries in the healthcare sector is essential. Financial backing from both the state and healthcare institutions is crucial, including the provision of scholarships for nurses seeking further education, to the extent feasible.

Nurses have a key role in the implementation of health care, which caused major changes in the education and practice of nurses in the world and expanded the field of their professional work. The general trend is that recommendations and solutions related to nursing at the world level
become valid and binding in all countries (24,25). The proposal for measures to solve current problems related to education in the field of nursing is better coordination in connection with changes in the field of work of nurses; precise definition of the names of new occupations in the nomenclature of occupations; systematization of workplaces in healthcare institutions, which recognizes workplaces and job descriptions of senior nurses; review of all the changes that are the result of higher education of nurses in terms of defining jobs, increasing the coefficient and changing the salary; greater support from the state and competent ministries in the field of their work and financial support from the state, i.e. health institutions in providing scholarships for nurses who need to be educated to the extent that this is possible (25-27).

CONCLUSION

In conclusion, the attainment of leadership in nursing practice hinges upon the application of appropriate strategies, methods, and tools within the healthcare system. Human resources play a pivotal role in this endeavor, serving as a key factor in enhancing the healthcare system and its quality across all levels. The role of the head nurse, as a leader in nursing, holds exceptional importance in advancing healthcare organization and quality.

Nurses are fundamental to the development of modern healthcare systems, serving as pillars within the industry. Given the current challenges related to healthcare worker shortages, leaders must adeptly adopt various leadership styles and staff empowerment strategies to cultivate a work environment that fosters commitment among nursing staff, patients, and their organization.

The relationship between leadership styles and staff empowerment is integral, as it influences the level of commitment among nursing staff. Particularly critical are the ongoing challenges posed by healthcare worker shortages, especially within nursing professions. Nurses and healthcare technicians wield significant influence over the quality of healthcare delivery, both for individual patients and groups afflicted by the same ailment. Leveraging their competencies, nurse leaders collaborate with other healthcare professionals to mitigate overall healthcare costs.

SCHEDULE OF MEASURES

Building leadership in nursing practice can be ensured by introducing adequate systematization of workplaces, supplementing formal education through appropriate seminars, workshops, and other informal and formal forms of human resources education, as well as by providing clear
descriptions of workplaces, in which the head nurse is actively involved in implementation. The job description should contain all the components necessary for leadership, such as adequate knowledge, skills, and a clear description of work tasks for a specific job. Changes in nursing practice should encourage the creation of units for the improvement of nursing, i.e., centers dedicated to innovation, improvement, and evolution of practice so that nursing practice can determine its own path of change and transfer the results further to the wider healthcare system. Nurses are in a good position to be leaders, but in addition to additional knowledge and skills of leading teams and effective communication, educational assistance, and support programs, which will make them more effective in their role, they also need greater powers and participation in decision-making. There is a need to study, review, and reconsider the abandonment of the previous way of thinking, leadership style, and direction towards a new approach and organizational culture, by facing the need to introduce changes managed by a capable leader in nursing practice, who, above all, possesses professional knowledge and the ability to lead people.

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**Sažetak**

**IZGRADNJA LIDERSTVA U SESTRINSKOJ PRAKSI**

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U težnji ka kompetentnom i konkurentnom zdravstvenom sistemu, medicinske sestre i zdravstveni tehničari kao nosioci procesa zdravstvene nege kao naučne discipline delokruga medicinskih sestara, pored znanja iz struke treba da poseduju i menadžerske sposobnosti i veštine, odnosno da znaju upravljati ljudskim i materijalnim sredstvima unutar zdravstvenog sistema. Liderstvo u sestrinskoj praksi se može pojasniti kao uticaj glavnih sestara na kvalitet izvršenja svih aktivnosti iz te oblasti i njenu efikasnost. Pregledom literature o istraživanju liderstva u sestrinstvu i samim tim i aspekata koji utiču na njegovu izgradnju u sestrinskoj praksi, koje još uvek nije decindno definisano, pokušali smo da damo pregled stručnoj javnosti iz oblasti biomedicine i zdravstva, a posebno zdravstvene nege kao delokruga rada medicinskih sestara, na svim nivoima zdravstvene zaštite. Da bi se postigli svi ciljevi koji uslovljavaju izgradnju liderstva u sestrinskoj praksi, primena odgovarajućih strategija, metoda i alata u sistemu zdravstvene zaštite je najprimenjivija i najdelotvornija za poboljšanje sistema zdravstvene zaštite u kome je uloga glavne sestre, tj. lidera u sestrinstvu od izuzetnog značaja za poboljšanje organizacije zdravstvene nege, kao i kvaliteta iste za svim nivoima zdravstvene zaštite.

Ključne reči: Lider, medicinska sestra, menadžer, upravljanje, znanje

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*Accepted papers are articles in press that have gone through due peer review process and have been accepted for publication by the Editorial Board of Sanamed. The final text of the article may be changed before the final publication. Accepted papers can already be cited using the year of online publication and the DOI, as follows: the author’s last name and initial of the first name, article title, journal title, online first publication month and year, and the DOI. When the final article is assigned to volumes/issues of the journal, the Article in Press version will be removed and the final version will appear in the associated published volumes/issues of the journal. The date the article was made available online first will be carried over.
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