Senior charge nurses' leadership behaviours in relation to hospital ward safety: A mixed method study

Cakil Agnew, Rhona Flin *

Industrial Psychology Research Centre, School of Psychology, University of Aberdeen, Aberdeen AB24 3UB, Scotland, UK

ABSTRACT

Background: High standards of quality and patient safety in hospital wards cannot be achieved without the active role of the nursing leaders that manage these units. Previous studies tended to focus on the leadership behaviours of nurses in relation to staff job satisfaction and other organizational outcomes. Less is known about the leadership skills of senior charge nurses that are effective for ensuring safety for patients and staff in their wards.

Objectives: The aim of the two studies was to identify the leadership behaviours of senior charge nurses that are (a) typically used and, (b) that relate to safety outcomes.

Methods: In study one, semi-structured interviews were conducted with 15 senior charge nurses at an acute NHS hospital. Transcribed interviews were coded using Yukl's Managerial Practices Survey (MPS) framework. In study two, self ratings of leadership (using the MPS) from 15 senior charge nurses (SCN) and upward ratings from 82 staff nurses reporting to them were used to investigate associations between SCNs' leadership behaviours and worker and patient-related safety outcomes.

Results: The interviews in study one demonstrated the relevance of the MPS leadership framework for nurses at hospital ward level. The SCNs mainly engaged in relations-oriented ($n = 370$, 49%), and task-oriented ($n = 342$, 45%) behaviours, with fewer change-oriented ($n = 25$, 3%), and lead by example behaviours ($n = 26$, 3%). In demanding situations, more task-oriented behaviours were reported. In study two, staff nurses' ratings of their SCNs' behaviours (*Monitoring* and *Recognizing*) were related to staff compliance with rules and patient injuries (medium severity), while the self ratings of SCNs indicated that *Supporting* behaviours were linked to lower infection rates and *Envisioning change* behaviours were linked to lower infection and other safety indicators for both patients and staff.

Conclusion: This study provides preliminary data on the usability of a standard leadership taxonomy (Yukl et al., 2002), and the related MPS questionnaire, on a nursing sample. The findings indicate the relevance of several leadership behaviours of SCNs for ensuring a safer ward environment and contribute to the evidence base for their leadership skills training.

* Corresponding author. Tel.: +44 1224273210.
E-mail addresses: c.sarac@abdn.ac.uk (C. Agnew), r.flin@abdn.ac.uk (R. Flin).

What is already known about the topic?

- The role of nurse leaders in achieving desired organizational changes has been demonstrated.
- Less empirical evidence exists on leadership behaviours that support nurses in their work to improve safety for patient and staff at the ward level.
- Most research to date has focussed on the task and relations-oriented behaviours of nurses in relation to ward performance. Less is known about nurse leader behaviours in relation to safety.

What this paper adds

- This study investigated senior charge nurses' leadership behaviours (including change-oriented) in relation to patient and staff safety outcomes.
- The interview study demonstrated that relations and task-oriented behaviours are reported the most frequently by the senior charge nurses. During more demanding situations, the focus of the leader was on the task, compared to building relationships with the staff or developing innovative practices.
- The questionnaire survey findings indicate that monitoring and recognising behaviours of the SCNs (as rated by their subordinates) are positively related to safety compliance of staff and medium severity patient injuries.
- The SCNs' own leadership ratings of envisioning change behaviours are associated with lower infection rates.

1. Introduction

The Public Inquiry into patient safety and quality of care at the Stafford hospital in England (which had 400–1200 "excess deaths" from 2004 to 2008) focussed on leadership at all levels of the organization (Francis, 2013). In high risk industries such as aviation, the crucial role of leadership for worker safety has long been recognized (Flin and Yule, 2004). The behaviours of front-line leaders have been shown to relate to staff injuries (Barling et al., 2002), organizational commitment to safety (Mullen and Kelloway, 2009; Zohar, 2002), and workers' safety behaviours (Mullen and Kelloway, 2011; Zohar and Luria, 2004). Much less is known of the leadership behaviours of nurses in relation to staff or patient safety. This paper presents two studies on leadership behaviours of senior charge nurses (SCN) who are responsible for both staff and patient safety in their hospital wards.

1.1. Background

In Scotland, a framework identifying key areas of responsibility for the SCN role includes: ensuring safe and effective clinical practice, enhancing patients' experience of care, contributing to the delivery of organizational objectives, and managing and developing team performance. Providing direct clinical care and administrative duties are central to their role functions (Scottish Government, 2008). While leadership practices are known to influence nurses' motivation and performance (Germain and Cummings, 2010; Thomas, 2012), only a few studies

have identified the leadership behaviours of hospital ward leaders and even fewer measured patient safety outcomes (Wong and Cummings, 2007). SCNs' key role in ensuring patient safety (Kennedy, 2008) has been demonstrated where nurses were found to be "responsible for 86% of all interceptions" of medication errors in two US hospitals (Leape et al., 1995, p. 37). For the current study, we define safety as "the avoidance, prevention and amelioration of adverse outcomes or injuries stemming from the process of healthcare" [(patients) or from working in healthcare (nursing staff)] (adapted from Vincent, 2006, p. 14).

In order to achieve the desired organizational change to achieve this, an examination of the role of the first line nursing leaders that distribute and allocate resources to ensure the quality of patient care is necessary (Agnew et al., 2012; Ellefsen, 1998). Given the senior charge nurses' crucial role as ward leaders, the focus of this research is on nursing leadership at the hospital ward level.

There are two approaches to measuring leaders' influence on industrial safety; general – considering all leadership activities (Zohar, 2000) versus safety specific – only examining those directed specifically at safety issues (Barling et al., 2002; Mullen and Kelloway, 2011). For this investigation, we examined the general leadership behaviours of ward leaders and how they relate to safety. The goals of the studies reported here were: (a) to identify the day to day leadership behaviours of senior charge nurses/ ward sisters at the hospital ward level and to test if these fitted a standard leadership model (study one), and (b) to determine the impact of these leader behaviours on safety-related outcomes, both for patients and ward staff (study two).

1.2. The hierarchical leadership taxonomy

Dominant frameworks for investigating worksite leadership behaviours have focused on two main categories: namely, task versus relations-oriented behaviours in the situational models (Amabile et al., 2004; Yukl, 2008), also referred to as 'initiating structure' and 'consideration' in early leadership research (Judge et al., 2004). Another popular approach is the transformational and transactional model of leadership styles, applied in industrial (Avolio et al., 1999) and nursing research (Germain and Cummings, 2010), see Wang et al. (2011) for a recent meta-analysis. However, it has been argued that the transformational theory excludes a number of behaviours that are components of effective leadership, thus undermining its predictive validity (Yukl, 1999a).

In order to provide a more comprehensive framework, Yukl (1999b) developed the Hierarchical Leadership Taxonomy measured by his Managerial Practices Survey (MPS), questionnaire. This captures three main (meta) categories of leader behaviours (task, relations, and change oriented) and the relevance of each of these behaviours for different outcomes has been demonstrated (Yukl et al., 2002). According to the model, the primary objective of the task behaviours is improving productivity by appropriate allocation of resources and personnel, and ensuring the reliability of the operations to accomplish a task. Task behaviours include, short term planning, clarifying roles,