

ANALYSIS OF HEAD NURSE'S LEADERSHIP STYLE IN PEDIATRIC'S CARE WARD, JAKARTA GENERAL HOSPITAL

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Abstract

The leadership style of a nurse manager has an important role in determining the performance of her staff. An effective leader can bring success in achieving the vision and mission of the hospital. The field study of leadership style in the hospital is one of the efforts to find an overview of the application of effective leadership styles. The method used was literature study which was supported by the results of visit; data collection was carried out using interview techniques and observation of leadership style. The results of the field study showed that there were still nurses who were not committed to the team, high workloads and head nurse's span of control. Thus, the head nurse is required to use a combination of democratic and authoritarian leadership styles to overcome weaknesses and threats that occur in the ward.

Keywords: Authoritarian Leadership; Democratic Leadership; Head Nurse; Leadership Style

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1. Introduction

Leadership is the backbone of organizational development because without good leadership it will be difficult to achieve organizational goals. The success of an organization cannot just happen without the role of a leader who is able to lead him-self or others. Leaders are people who are ahead, take risks, try to achieve common goals, and inspire others to act (Marquis&Huston, 2012). A leader has their-own type or style of leadership. Style is defined as a characteristic or distinctive way of appearance (Gillies, 1998). Leadership style is the way a leader uses his strength to lead others whose application is influenced by the situation and behavior in the care environment they lead.

Nursing professional services are closely related to the leadership style in a service setting. An ideal leader must have the ability to determine the style of leadership that is in accordance with the character and conditions that exist in the hospital. An effective nurse leader is a leader who strives to involve implementing nurses to work together effectively in meeting common goals (Tappen, Weiss, & Whitehead, 2010).

Upenieks (2003) regarding the perception of nursing leaders towards successful leadership shows 83% of nursing leaders agree that access to power, opportunity, information and resources can improve

the enabling environment and increase leadership success and increase nurse satisfaction. This shows that the application of strategic leadership is an important element in nurse satisfaction. (Huber, 2010).

One of the strategic leadership is the ability of a leader to determine a leadership style that is appropriate to the character and condition of an environment. This is because the head of the room is a leader who has responsibility and authority in regulating and controlling care activities in the ward (Swansburg, 2000).

The accuracy of implementing leadership styles will have an impact on leadership effectiveness. Marquis and Huston (2012) divided leadership styles into three, namely authoritarian, democratic, and laissez faire. A study reports that people-focused leadership and relationships (transformational, resonance, support, and consideration) are associated with higher nurse job satisfaction than task-focused (dissonant and instrumental) leadership styles (Cummings et al., 2010). The results of other studies state that the most widely used leadership style is a supporting leadership style (Rahmah, 2010). The head nurse must have the knowledge and skills regarding leadership to carry out his role as the leader of a ward that has the characteristics of each such as a child

care room which according to hospital accreditation standards including one special population. The child care room in one of the Jakarta General Hospital buildings is a complex ward with various cases. The complexity of cases with a special population and the diverse staff require good management and leadership in carrying out service and nursing care activities.

2. Methods

The method used was literature study which was supported by the results of visit in the pediatric's care ward, Jakarta General Hospital on October 24, 2016. Data collection was carried out using interview techniques to the head nurse using an interview instrument adapted based on Swansburg's (2000) leadership theory.

The instrument contains open questions which are divided into two parts. The first part of the question about leadership style is 16 questions. The second part of the question about the leadership principle is 13 questions. The third part of the question related to the role and management function of a leader is 30 questions. The data is complemented by interviews with nurse supervisors and primary nurses for clarification regarding the leadership role of head nurse. The next method is observation related to leadership style when the head nurse guides safety briefing in the morning. Observations carried out focus on the type of communication during briefings, how to conduct feedback, and the ability to facilitate staff to provide input and suggestions on services. Data from interviews and observations were analyzed using the SWOT method (Strength, Weakness, Opportunity, and Threat).

3. Results

Based on the results of interviews with the head nurse, nurse supervisor, and primary nurse, there was a profile data for the children's care ward with a capacity of 51 beds on the first and second floors, the number of nurses staff in all nurses 67 people consisting of 1 pediatric nurse specialist, 10 nurses professional, 55 vocational nurses, and 1 high school nurse who will retire in a few months. Number of primary nurses with qualification 4 nurses professional and 3 vocational nurses. The qualification of the head nurse is nurse professional and the care manager qualification is pediatric nurse specialist. Results from interviews and observation of ward situations are processed using a SWOT analysis, as follows:

Table 1. SWOT Analysis of Head Nurse's Leadership style

Internal Factors of Head Nurse	Strength
	1. Democratic leadership style
	2. The ward was headed by head nurse who was quite senior, respected and had many followers

3. Conflict is resolved using conflict resolution stages
4. There is clarity in the rules of the head nurse such as the rules for attending a safety briefing every day and may not arrive late and the obligation to follow a journal reading.
5. No blaming culture has been built.
6. There is a reward from the Head of Room for outstanding staff.
7. The head nurse is open minded in accepting changes and new things.
8. The head nurse as a role model
9. Routine briefing is done during safety briefings, pre conferences, nursing rounds and journal reading
10. There is 24-hour communication for staff who need help solving problems
11. Documentation using an integrated record system between professions
12. Meeting with top level managers every month.

Weakness

1. There are still nurse staffs who are undisciplined following the safety briefing on time.
2. The head nurse accepts workload beyond the competence and authority of the head nurse
3. There are still nurse staffs who are not compliant to carry out nursing actions according to the procedure, such as dressing infusions that have not been replaced on the third day
4. The span of control area is spacious because of the number of rooms managed on the 1st and 2nd floors of building.
5. There is no staff retention system from the head of the hospital

External Factors of Head Nurse **Opportunity**

1. Pediatric's Care ward is one of the leading care ward with diverse cases that open learning opportunities for health professionals to gain knowledge
2. The variety of complex cases faced gives the head nurse and nurse staff the opportunity to hone their knowledge and skills

Threat

1. Doing more non-nursing jobs because pharmacy staff only has morning and evening service duties (not 24 hours)
2. The turnover rate of nurses is 6% of 2145 nurse staff
3. Impact of Asean Economic Community (AEC): RSCM nurses choose to work abroad with the knowledge and experience gained from hospital

4. Discussion

Based on the SWOT analysis of the results of interviews and observations it was found that one of the power sources of the ward was from the head nurse. The head nurse is quite senior and respected by nurse staff, with a leadership style that leads to a democratic style. This is during the morning and pre conference briefings. Based on our observations, the characteristics of democratic leaders are founded in the figure of the head nurse, where democratic leaders encourage open communication and staff participation in decisions. Nurse staffs are given responsibility and feedback regarding their performance. Fostering relationships is important for democratic leaders who focus on improving the quality of systems and processes, not on the mistakes of individual team members (Daly, Speedy, & Jackson, 2004).

Democratic leadership style is a subordinate-oriented leadership style and focuses on human relations and group work. According to Swansburg (2006), democratic leadership leads to increased productivity and job satisfaction. Yugusna, I., Fathoni, A., Haryono, (2016) stated that democratic leadership style influences positively significantly on employee performance of gas stations Randu Garut Semarang. Other supporting research that supports the success of democratic leadership styles by Larry Page and Sergey Brin at Google companies (Deutschman, 2004).

Although dominant in a democratic leadership style, the head nurse also applied an authoritarian style in certain situations. This style was seen during the safety briefing before handover between nursing shifts, he made the decision to apply clear rules regarding timely attendance in a safety briefing. Nurse staffs who are late in following the safety briefing will be recorded in the logbook for consideration of the staff's performance appraisal. The success of the authoritarian style is supported in several studies, namely at Hyundai USA (Welch & Kiley, 2008).

Transformational and transactional leadership styles are also evident in the leadership characteristics of the head nurse of the pediatric care unit, which can be seen from the success in building a no blaming culture, being able to be a role model, and willing to open communication with staff 24 hours if needed and reward staff who excel, but do not hesitate to sanction staff who are not disciplined or violate the rules. Transformational leaders stimulate so that subordinates can think creatively and innovatively. In addition, it has also been stated that leaders act as mentors who guide staff to improve their competencies (Robbins P. Stephen & Judge Timothy A, 2013).

Another strength factor is the resolution of conflicts using stages and involving other fields as mediators. This is strength for pediatric ward where if there are problems or conflicts that occurred, then the

conflict is resolved together so that it is not prolonged. Problem solving collaboration is a joint effort without the relationship of the leader/employee, the giver/ recipient of the order. The actual collaboration requires mutual respect, open and honest communication and equal decision making (Marquis & Huston, 2015).

Conflicts that occurred in the ward will be completed in stages, if the problem is a patient problem, the implementing nurse will report to the primary nurse, then the primary nurse will report to the head nurse. However, if the conflict is related to the staff then the head nurse resolved together with the staff in the ward, but if it is not resolved then the head nurse will bring the problem up and involve other parts or fields such as public relations and nursing as mediators.

Briefing is done during pre conference and safety briefing, nursing rounds, and journal reading. Direction is one of the important management functions that must be known by the nursing manager in improving the quality of nursing care services. The quality of nursing care services is a part that must be the focus of health services in hospital, because nursing has a major contribution to the image of the hospital.

One way to improve the quality of nursing care services is to increase the ability and performance of nurses through the function of directing or coordinating the head of space in the form of activities to create a motivational climate, effective communication, delegation and supervision or guidance to the primary nurses and implementing nurses.

Sigit.A (2009) in Murtiani., Hadju, V., Saleh, (2013) suggested that the direction function of the head of the room was able to improve the ability of nurses and provide job satisfaction for nurses in providing nursing services. Motivation influences the performance of staff, the influence is that motivation is very necessary to achieve a job satisfaction that has an impact on staff performance (Saputra, A.D, 2012 in Murtiani., Hadju, V., Saleh, 2013).

The weakness factor encountered when observing in the nursery was that there were still staff who arrived late when the safety briefing was led by the head nurse. For this problem, as mentioned above, the head nurse applied strict rules by recording the discipline of staff in following the safety briefing for performance assessment materials that have an impact on monthly incentives. Another weakness factor is that the head nurse received an assignment beyond his authority so that it increases the workload. The head nurse had a large task burden on the running of health services in his ward, the improvement of the quality of care provided by the staff is inseparable from the good leadership of head nurse.

However, if the head nurse has a workload that is too heavy, especially the tasks beyond his

authority are not impossible, it will reduce the effectiveness and efficiency of performance due to saturation in carrying out work that has a deteriorating professionalism of a head of space. Neuhauser (2011) in (Saparwati, M., Sahar & Mustikasari, 2013) suggests that the obstacle that is often found in nurses is saturation (burn out) which is a situation where nurses feel themselves increasingly lacking in ability, excessive workload so that it becomes less productive.

In addition to the above, the weaknesses are that there are still nurse staffs who are not compliant with procedure standards when implementing nursing cares. To overcome this disobedience, the head nurse carries out a leadership role that is responsibility for the work. In this role of responsibility, the head nurse explains the task to the nurse staff until the person really understands the procedure that must be followed in taking nursing care.

The factor that poses a threat to the head nurse is the turnover rate of hospital nurses, which is 6% of 2145 nurses. Turnover will increase in nurses with low performance, negative work attitudes and those who experience excessive stress (Carpenter, Bauer, & Erdogan, 2012). This figure is an obstacle for the hospital where it will affect the decline in quality, as stated by Neuhauser (2011) in (Saparwati, M., Sahar & Mustikasari, 2013) that barriers in labor include absenteeism, loss of time which results in quality and economic losses for agencies.

Turn over is very disturbing the implementation of nursing services that will affect the quality of services provided. This problem is a big challenge for the head nurse where as a leader must think innovatively to reduce the turnover rate through staff retention programs. Work environments that can comply the needs of nurses can reduce turnover rates and improve nurse retention. A work environment that can improve nurse retention is a professional practice such as involving nurses in hospital decisions and developing opportunities and experiences (Stone, 2006)

Problem Solving Strategy

Based on the results of the SWOT analysis, problem solving strategies to overcome weaknesses and prevent threats are

1. Build and maintain an effective team
2. Strengthen team commitment in every meeting
3. Improve performance monitoring using quality time head nurse with nurse staff
4. Design a staff retention system with top level managers

The first strategy is to build and maintain an effective team by always reminding the objectives of the activities every day through safety briefings, maintaining open and facilitative communication with all team leaders. The second strategy is the ability of a leader to build commitment in an effective team. Effective teams can be interwoven

with planning joint activities involving all teams in effective ward meetings, giving positive feedback every day.

The third strategy is to monitor the performance of the implementing nurses. This one of them can be achieved with performance appearance reviews (Crowther, 2004). According to Crowther (2004), performance appearance review is an opportunity for nurse staff and managers to clarify the goals to be achieved, feedback, support and recognition of the achievement of a nurse. The head nurse has carried out this review, but it needs to be done directly and periodically at the beginning of the placement, after six months and after one year.

5. Conclusion

Based on the results of the analysis, it can be concluded that the problem are staff undisciplined come during safety briefings, the excessive workload of the head nurse is beyond his competence, staff non-compliance with standard procedures, wide span of control, there is no staff retention system, high rates of nurse turnover, staff nurses carry out duties beyond their obligations, especially in drug services, and nurse staff who resigns to work abroad. The suggestions can be related to the findings of the problem, namely build and maintain an effective team, strengthen team commitment in every meeting, improve performance monitoring using quality time of head nurse with nurse staff, and design a staff retention system with top level managers by planning staff development programs and reviewing the workload of nurses according to competence.

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