

Editorial: Leading from the front

“Leaders are those individuals who are out in front, taking risks, attempting to achieve shared goals and inspiring others to action” (Marquis & Huston 2015, p34). This very positive statement from a contemporary nurse leadership text written by two fellow American colleagues inspired me and reinforced my own ideals of what nurse leadership should be about. Importantly, it is positive and affirming the need for nurses to truly embrace the concept of leadership for themselves; that nurses should see themselves differently; that they should feel enabled to step out in front and be counted for their decision-making; and feel empowered to take risks, recognising that they require to bring out the best in others and importantly inspire others to follow.

However, the Kings Fund (2014) identified that the NHS provider organisations are currently experiencing a high number of vacancies at senior levels, are reliant on stand-ins and are witnessing a greater turnaround of senior leaders. Ultimately it is suggested that this can have a negative effect on staff morale, their commitment and ultimately on their performance. As Francis (2010) stated: “It is a truism... organisational culture is informed by the nature of its leadership”. With such instability in the leadership of any organisation, the potential adverse affect on the overall quality of care is likely to be and the reason therefore for so many failures

However, is this what the new all-graduate nurse within the UK feels prepared to achieve? I am not so sure. It has been my observation that students are not attracted to the profession for the leadership that they can offer, nor consider themselves as ‘leaders’ at any level until they assume a title that reflects a leadership role. My recent experience in talking with first year students, 3rd year completing students and also advanced practice students, suggests that leadership is something that is bestowed on those who seek positions of responsibility; titles which, by virtue of the role, leadership is assumed. However, this is absolutely not what is advocated, nor, in my experience, how they are prepared to enter the world of professional, or indeed advanced practice. Yet, leadership is absolutely not about job title alone but about how individuals act, their relationship with self and with their followers. It is this notion of relationship with ‘self;’ that I am curious to explore as I have experienced this myself as well as observed this in others and seen a transformation in individuals’ behaviour and how they related to others and to a situation. As educators, we have a role to play in facilitating students at all level to see themselves differently, to ask themselves: ‘if not me, who?’ The UK world of health and social care practice has seen a plethora of catastrophic disasters in the failure of service users by those in professional practice, either through professionals themselves not acting appropriately, or, standing by whilst others fail to step out in front, take risks and inspire others to action as Marquis and Huston (2015) suggest.

Until we take on positions of authority, do we see ourselves as unimportant, that leadership is a role that others take up but not for ourselves? So, what happens to change us? Is it the role or is it the transformation that happens within us?

So, are leaders born or are they made?

Yet, as Francis (2010) noted well: “It is a truism... organisational culture is informed by the nature of its leadership” and the reason therefore for so many failures. So, I ask myself, why is leadership so elusive, so unattractive to those who manage and lead care on the front line? Reading a number of key texts on leadership by UK nurses, often still grappling with terminology, give a very different picture to the ones written in the USA.

Since the publication of the two Francis reports (2010, 2013) and the myriad of subsequent reports identifying the failures in our UK health service in terms of unacceptable care, there has been a renewed interest in publications focusing on nursing leadership. Carol Huston, well known for her leadership textbooks wrote:

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what does leading from the front mean in practical terms? How would one recognise a leader? Are the qualities the same whether we consider leaders in nursing practice, education or research? What does leading from the front actually mean?

I have had the opportunity of exploring various theories on leadership, ways of articulating what a leader does, how they should behave and how they articulate what they do. I am sure that when challenged, most senior practitioners are able to offer a particular view as to what the qualities of a front-line leader are, yet may not perceive these qualities in themselves.

‘Getting individuals to be accountable in every moment means changing the focus away from a hierarchical model of leadership to one where true ownership is part of every moment. Self-Leadership is both how we influence self and others to act and react in a given moment with a clear mind no matter what the demands of the environment might be’ (Brown 2013)

Francis R (2010) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry. Accessed on 24.4.14 from <http://www.midstaffpublicinquiry.com>

Marquis B.L, & Huston, C.L. (2015) *Leadership Roles and Management Functions in Nursing: Theory and Application*. (8th edition), Wolters Kluwer Health/Lippincott Williams & Wilkins, Philadelphia, USA.