Leadership Challenges and Dilemmas in the Nursing Profession

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Each day, nurses are faced with different situations that test their choices. There are moral or ethical dilemmas that they have to reconcile with their values, and judgments while still fulfilling the requirements of their professional duties. In today's complex hospital environments, nursing leadership often compels the nurse to take hard decisions that can often conflict with ethical and moral values, leading to remorse or moral distress. This paper seeks to study and present different leadership styles and how one's personality and leadership traits affect the choices they have to make each day in the nursing profession, using examples from a specific scenario, where I as a nurse, was faced with making an ethical, moral or legal choice, keeping organizational constraints in mind.

To make a moral decision requires moral courage, and not opting for the moral choice leads to moral distress. Moral leadership strategies offer ways to promote moral courage in decision-making. Researchers have noted that that moral dilemmas or issues are not defined through scientific know-how, but by questions of what ought to be done, explaining that being able to, for example, know or identify how to take care of a patient is unlike choosing what kind of care to deliver and how to prioritize between patients requiring greater care (Edmonson, 2010). The conduct of a moral leader is based on the way he or she makes a decision, in which positive social norms and values, and those that have long-term benefits to society, are taken into consideration. Leaders are expected to be able to portray societal and intuitional beliefs, aspirations, and principles (L.S Leach, 2014). Because nurses principally act as moral representatives in a hospital or a healthcare organization, therefore their moral acts and decisions help maintain not only nurse retention and work satisfaction, but also raise the patient's comfort, relieve his/her distress, and promote the reputation of the hospital (Corley, 2002). The main treatise for nurses is learning to make moral choices, remain moral, and apply morality to every aspect of life, in individual, social, and professional/organizational capacities. Morality by its nature is not dependent on one's geographic nature, nor is it time-oriented or time-determined. A moral leader maintains morality in every time, location, and circumstance (Toulassi, 2013). When faced with a moral choice, moral distress in nurses can arise when confronted with personal value conflicts that can lead to anxiety, anger, or frustration, because of his/her inability to act as one sees fit due to organizational constraints. These feelings can lead to low self-esteem, emotional exhaustion, job dissatisfaction, or self-hate, leading to absenteeism, lack of morale, and hence poor work efficiency for the organization (Coles, 2010).

The ethical form of leadership is slightly different from moral leadership. Morality is ultimately a private compass of good and evil, right and wrong. Ethics, on the other hand, are dependent on others for definition. Ethics is conduct recognized for a particular class of human actions provided by an external source and can vary between contexts. A professional example of ethics inconsistent with

morals is a lawyer's work. A lawyer's individual morality, for example, tells him that murderers are to be punished, but as a professional lawyer, he is ethically required to defend his client in court using his skills despite knowing that the client is blameworthy. For the nursing profession, ethical dilemmas occur quite frequently in their careers. Ethical decisions regarding caregiving, patient advocacy, and prioritizing duties for patients are faced on a routine basis. Nursing ethical codes are written to define professional standards across all roles and levels. A common ethical situation is providing care in a custody environment. They should balance demonstrating an approach to care and empathy, ensure inmates' health needs are addressed and respected, and be appropriately responded to. Other ethical values associated with nursing practices include nurse advocacy and eliminating barriers to care and regard for humans. The nurse often finds himself in a unique leadership position where he is given to evaluate the effectiveness and quality of care required by the patient. (Mary V. Muse, 2011)

Legal principles involved in the nursing role range from issues such as anti-discrimination, acceptable staffing, and compliance with labor and healthcare laws. The legal associations of the nursing profession are linked with state and federal licensing and laws, the scope of practice, and public expectations regarding their performance. The legal standards and framework are provided by the nurse's license, training materials, education, and nursing standards, which provide the framework for professionally expected nursing practices. Performing below acceptable standards of care and competency exposes the nurse to litigation, violating the patient's civil rights. When the patient has requested care, the nurse is legally and ethically mandated to respond. Based on standard practices and codes, the nurse has to evaluate the patient's healthcare needs to determine the type or level of intervention needed and implemented. The nurse must also make a legal decision about referring the patient to another facility or a physician if the work falls beyond his/her scope (Mary V. Muse, 2011).

As a nurse leader, it is important to realize that a single person alone cannot achieve substantial results. Behind all successful leaders is a team of individuals with different personalities who support their leader and achieve success through collective efforts. A nurse leader who does not regard his team members' experience, knowledge, or ideas may be seen as the dictatorial type. This type of leadership may display his or her strengths, but it also has a lot of drawbacks that could be minimized in a proper team atmosphere. It is possible that during duties, the nursing staff may be headed in different directions, or they could work together as a team with defined objectives and focused targets. Team-based success is highly dependent on the strength or weakness of the nurse leader and his or her capability to remain consistent and inspire others by taking courageous moral and ethical stands. (Frandsen, 2014)

In my career as a Nurse, I have faced multiple instances where I have had to make a timely decision. One of the first ethical dilemmas I remember facing was during the early part of my career as a Licensed Vocational Nurse in a general hospital. The hospital was funded by a charity frequented by people from low-income backgrounds. There was an elderly patient who visited the hospital once and stood in line to be examined for his condition. The senior man had visited a few hospitals before and had his condition tested, but they kept referring him to other hospitals for specialized help. As I came to know of his situation, that he had a critical chest disease that was diagnosed through laboratory

tests by the medical specialists he had consulted before. Upon making a decision, I referred his case to a doctor who took in the elderly patient and performed further screenings and tests. The doctor explained his condition to me and tasked me to break down the details of the disease to the patient, in a suitable manner. The patient was suffering from non-small cell lung cancer that had advanced to such a stage that he only had a few more months to live. I was handed the responsibility for delivering the news of his condition by establishing a mechanism to ensure that he was psychologically ready to face the news. It was not just a legal obligation, but I also morally felt that the patient must be told about the truth of his condition. In my understanding, it was only through telling him the truth that I was able to help him in the management of his condition. As a nurse, I was ethically bound to help the patient manage his condition to the best of my knowledge. The previous hospitals the patient had visited had not disclosed his full condition to him. Therefore, I opted to consult with my fellow nurses in the group. From a legal perspective, nurses are legally restricted from sharing the patient's information with third parties, especially sensitive medical details of his ailment, unless they are associated with a proper medical background from where they could seek consultation to address the situation best.

Based on the Keirsey temperament sorter II test, my personality type was concluded to be an ISFJ protector-guardian. According to the assessment, a guardian is a vital social participant who is devoted to helping others (Keirsey, 1998). As a nurse, with the temperament of a guardian, my professional duties align with my personal beliefs and values, which led me to adopt the nursing profession. Alleviating the agony and suffering of patients and serving humanity are key traits of leaders with the ISFJ temperament. I have always believed in democratic consultation to simplify decision-making in my profession. My decision in the wake of this dilemma was to initially prescribe painkillers to the patient for the next few days before he will be called again. This provided me time for further consultations with my peers, whose opinions I decided to seek before making a decision. I discussed with them details and issues regarding the manner in which I was to reveal the update to the elderly man. Some of my colleagues were more experienced and had practice in disclosing such news to patients in a professional and calm way. I was advised by some of my colleagues to refer him to another hospital again, as had been done by the hospitals he had visited before. Then, I was advised by some other team members not to disclose the actual situation to him but to falsify the nature of his disease and reassure him that continuing his medication would ease his ailment in a few months. Some experienced members were of the opinion that I should bring the patient to one of the offices, locked from the outside, where I would take the full time to explain the nature of his ailment and situation to him properly, in a way that would be psychologically reassuring. As a leader, the different views of my group were important to me. I weighed them against my values and judgment and after an analysis decided to follow the majority opinion, that I should disclose the news to the elderly patient in a moral manner and advise him on the available options for him appropriately. Taking the decision, I called the patient to my office, locking it temporarily. After a prolonged conversation, he understood and accepted his situation and agreed to adhere to the medication plan suggested in this case for the last few months of his life, left. In this case, responding to the ethical dilemma, I relied on the democratic leadership style and used moral courage to tell him the reality. If I

had given the patient a false sense of hope, that would have created an internal moral conflict in me, possibly leading to lower morale. In the democratic style of moral leadership, one listens to the opinions of others and weighs the available options, then opts for the best option, considering the majority opinion as an important factor that leads to the decision. The nurse leader has the last say, after the voting process in the “democratic leadership framework” (Somecha, 2014) In my case, I carefully considered the views of my colleagues and came to the realization that the majority opinion was also in line with my personal sense of moral values. Therefore, it helped me decide and be sincere with my patients. In the end, I was able to convince him how to cope with his situation in a way that would minimize psychological stress and I fulfilled my ethical obligation to help him manage the last few months of his life in comfort.

As a nurse leader, It may often be necessary to embrace features from multiple other leadership styles depending upon the situation and its requirement but regardless of the nature of leadership traits, what remains consistent between them is to act with integrity, fix realistic targets, efficiently communicate in a way to encourage other people and to appreciate the strengths of your team members. Inspiring others with your strong vision and enabling them to see the bigger picture.

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