



# Transformational Leadership

## *Unleashing the Potential*

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One of the most powerful Sources of Evidence of the Magnet Recognition Program® is TL 10EO: Transformational Leadership 10—Expected Outcome. To meet the expectation for this standard, Magnet® organizations must describe and demonstrate changes in the work environment and patient care based on input from direct care nurses. This single requirement packs a punch and aptly represents what Magnet is all about. Early research from McClure et al<sup>1</sup> found evidence of this important aspect in every one of the original 41 reputational Magnet hospitals. What does it mean in today's healthcare environment and how can the formal leader—the chief nurse executive (CNE)—bring it to life?

A review of the literature on leadership reveals a turning point when Burns<sup>2</sup> explored what made transformational leaders different from “Great Man” leaders. The Great Man theory posited that leaders were born and only men with great intellect, persuasive powers, and keen decision-making ability could lead

the masses.<sup>2</sup> Burns determined that true transformation could only occur when there was a relationship between leader and followers. An effective leader didn't hold all of the power and authority, but rather created an environment that brought leaders and followers together to solve problems, create new ways of doing work, and manage change together.

Highly effective leaders have highly effective teams and strong group culture. The leader does not have to be in charge of everything, but he or she must communicate the shared vision, encourage intellectual stimulation, consider individuals, and motivate the team to be innovative and take measured risks to improve. Fast forward to today's healthcare environment, Tim Porter O'Grady, DM, EdD, ScD(h), FAAN, shares a powerful image of leaders “setting the table” for a space where shared dialogue and shared problem solving can occur.<sup>3</sup> Aligned with this perspective, as a CNE, I often felt that my key job was to call the meeting and bring people together (and make sure I found a way to pay for lunch). Once the right people were in the room, and the task was set before the team, those who actually did the work—that is, the clinical nurses—were the best ones to redesign, quality improve, innovate, and implement the changes that were needed to make patient care better.

In many Magnet organizations around the country, CNEs have created cultures of transformational leadership. Excellent examples abound of formal shared governance structures and highly effective councils, committees, and congresses. As I visit these Magnet hospitals, I have witnessed something more—a spirit of transformation at the cellular level that manifests



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itself in a powerful connectedness between leadership and clinicians. For example, one hospital was holding “Innovation Day.” Flipcharts were stationed in every hallway and patient crossroad. On every flipchart was a headline: “One great idea I have to make patient care better at this hospital is...” Every employee, patient, and visitor was invited to share an idea on a Post-it note. The cross-hospital clinical team worked together to sift through every note for great ideas that could be implemented to improve patient care. When I spoke to the CNE about this clever, resource-efficient, and transparent process for engaging the entire team in transformation and change, she replied, “Sometimes there is so much great work going on here that I can’t keep track of it all!” This concern has caused me to reflect.

As CNEs, we want to make sure we “keep track of it all.” Because we are highly accountable nurse executives, we feel compelled to approve everything, count everything, be in charge of everything, and evaluate everything. Perhaps we need a different perspective. It is clear that our job is to create the systems and processes that enable those closest to the patient—the nurses who actually perform the work—to develop and evaluate and improve the care environment. When nurses’ passion, dedication, and shared vision are tapped, true transformation can occur. Our job as transformational leaders is to find ways to unleash that passion and create a place where continuous improvement and excellent patient care can flourish.

### References

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3. Porter O’Grady T, Malloch K. *Quantum Leadership: A Resource for Healthcare Innovation*. Boston, MA: Jones & Bartlett; 2007.