Leadership in Health and Social Care: A Critical Analysis and Development Plan
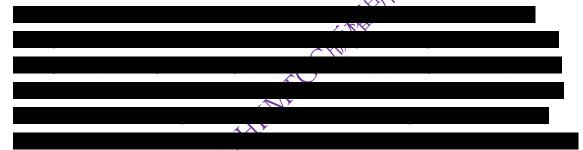
Assignment: Critically analyse any TWO (taught) leadership styles which you have observed in a defined professional role in your current or previous health or social care practice*.*

Leadership in Health and Social Care: A Critical Analysis and Development Plan

Part A: Essay

Introduction

Health and social care leadership pertains to the ability to steer, inspire, and lead individuals and groups toward accomplishing common activities and goals while being conscious of human vulnerability (Silva 2014). Leadership is central to handling the dynamics inherent in the interprofessional practice to provide excellent patient care outcomes while creating a positive organizational work environment. This essay critically evaluates Democratic Leadership and Laissez-Faire Leadership based on a case scenario of a psychiatric ward in Hong Kong where leaders work with different subordinates to achieve organizational goals while ensuring patients' rights are respected and their needs are met. In the case of the psychiatric ward, the nurse leader needs to be both a leader and a manager (Tobin 2014). This is because management is

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is an essential figure in the organization since she is responsible for coordinating care, resource management, and motivating the rest of the healthcare team to ensure that the best quality of care is provided to the patients. In addition, she is responsible for shaping organizational culture, conflict resolution, patient advocacy, and ethical practice within this health and social care setting. The discussion below focuses on describing the nurse leader's use of these styles and examining their effects on organizational relationships and patient well-being to identify benefits, drawbacks, and potential ethical issues.

Democratic Leadership

Participative or democratic leadership is a style of leadership that encourages organizational members' participation in decision-making processes (Wang, Hou and Li, 2022). It is defined as the leader's capacity to encourage the team members to participate in the decision-making processes with more regard given to the opinions of

the subordinates. This type of leadership is highly suitable for the health and social care sectors because it requires close collaboration between professionals from different fields who bring their expertise to the table simultaneously, which is typically best served with the support of effective leadership (Olatoye *et al.*, 2024). In a psychiatric ward, democratic leadership consists of a ward nurse leader delegating patient care plans among the team members. For example, during daily debriefing sessions in the facility, the leader organizes a weekly focus discussion on how to deal with patients with multiple

The strengths of democratic leadership are well captured in its impacts on team involvement and creativity (Wahyuwardhana and Wisesa, 2024). When deciding with the other team members, the leader fosters positive working relationships by establishing trust and mutual understanding. Moreover, this style involves more people in decision-making processes and creativity since people are likelier to share ideas and even try to

leadership also has its drawbacks. The first major drawback is that it is time-consuming. Deciding on a particular course of action can take a very long time since all stakeholders must agree, and this is worse, especially in emergencies where time is of the essence (Bwalya, 2023). This style may result in disagreements since people may have different views, meaning action takes longer.

From an ethical perspective, democratic leadership raises concern because of the challenges involved in maintaining patient safety amid the inclusion of all members. For instance, protracted debates may hinder appropriate actions during an emergency, such as when managing a patient in a severe condition. For example, a patient may

come in with a risk of being a danger to themselves and their practitioners; employing a

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act on their prerogative. Democratic leadership is in line with research studies that show the impact of leadership style on employee satisfaction and productivity (Hassnain, 2023). It also fits well with patient engagement care paradigms as they are collaborative and embrace shared decision-making (Wang, Hou, and Li, 2022).

Laissez-Faire Leadership

Hands-off, or laissez-faire leadership, is characterized by a lack of involved and proactive leadership (Myers, 2024). When leaders implement this strategy, they believe in their subordinates' abilities to manage tasks and only interfere when required. This style is particularly effective when employees are knowledgeable, experienced, and self-

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nurse leader delegates the responsibility of organizing group therapy to the team without influencing them on what to do or how to do it. In this context, the leader nurtures independence and confidence. This approach is most effective in psychiatric practice since the needs and reactions of different patients vary and require detailed analysis and flexibility in handling. It allows the employees in the department to utilize the available resources to handle the patient's needs as they please (Zheng and Li, 2024).

One of the strengths of this leadership style is the promotion of career development and creativity (Myers, 2024). When leaders provide team members with autonomy, they enable them to hone their decision-making and problem-solving abilities. This autonomy can also result in more creativity since the personnel is free to come up

with different methods that can lead to better patient treatment results. Secondly, it also implies that employees have minimal contact with their supervisors (Zheng and Li, 2024), removing excessive pressure and increasing morale.

However, this type of leadership has its drawbacks. A significant limitation is that decisions may come at the potential cost of decreased accountability since there are neither transactions nor agreements with followers (Zhang, Wang, and Gao, 2023). If no

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direction or uncertainty (Desgourdes *et al.*, 2023) in the definition of roles and responsibilities, most evidently in a diversified and pluralist environment. From an ethical viewpoint, promoting and enabling staff while maintaining accountability is critical. Although autonomy increases staff confidence in the psychiatric ward, the leader must implement measures to monitor care quality since the ward operates independently of the main hospital. However, performance appraisal that involves constant follow-ups can go a long way in addressing some of these concerns to maintain staff standards while allowing for autonomy.

The laissez-faire leadership style is efficient, especially in organizations with motivated and experienced personnel (Iqbal *et al.*, 2021). However, it is less suitable where a high degree of monitoring is needed or in high-risk contexts that involve significant resources. When applied to a psychiatric ward, the effectiveness of this style is affected by factors such as organizational policies and the competency of the people working in the facility.

Cultural, Organizational, and Environmental Factors

Micro-Level Factors

Leadership styles relative to a psychiatric ward require a consideration of micro-level factors. These aspects relate to the relations and interactions within the team: team members' skills, degrees of trust and communication, and conflicts. At the micro level, the internal functioning of the groups and, specifically, the interactions within the team

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contribute significantly to the leadership process (Kan, 2024). When working in a team with other professionals, some of whom may be from different fields, there must be cohesion to ensure all the members work as a team. For example, team members could

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Failure to provide adequate support or messages regularly to young workers may result in low productivity and confusion. Awareness and management of these micro-level factors enable leaders to uncover approaches to influencing a constructive and productive team. Nurses, psychiatrists, and other multidisciplinary team members should have daily meetings to discuss progress; this fosters teamwork and shared responsibility (Haines *et al.*, 2018).

Macro-Level Factors

Macro-level factors include the general cultural and organizational policies that play out within the context of leadership in a psychiatric ward. Regarding original cultural values in the context of healthcare leadership style in Hong Kong, hierarchy and respect for authority are prominent (Schoeb, 2016). For example, where democratic leadership

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Another notable aspect of leadership practices is the influence of cultural factors. Hong Kong residents exhibit collectivist values (Yang, 2021). This makes leaders promote group cohesiveness and consensus in decision-making.

Conclusion

In conclusion, leadership is vital in combating issues in psychiatric wards. Democratic leadership enhances group cooperation and innovation, while laissez-faire promotes a self-organizing work environment for skilled employees (Wang, Hou and Li, 2022; St. Thomas University Online, 2022). Nonetheless, democratic leadership can be time-consuming (Bwalya, 2023), and laissez-faire may eliminate responsibility. The

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nurse leader must effectively incorporate different philosophies to complement each other in psychiatric wards so that teams can work best to improve patient results.

Recommendations

Regarding leadership in the psychiatric ward, specific changes appropriate for democratic and laissez-faire cases are crucial for efficiency. Regarding the necessity to improve the efficiency of democratic leadership types, the time-consuming nature of the decision-making process should be noted. Decision tools like decision matrices and

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as they are already professionals. Performance appraisals and feedback discussions can be used to track progress and to determine where interventions may be needed.

When integrating the styles, leaders should be situational. Situational leadership posits that leadership styles vary depending on the employee's competence and motivation to work (Ghazzawi, Shoughari, and Osta, 2017). The leaders should use democratic leadership in complex decision-making that requires multiple inputs while employing laissez-faire leadership in trivial issues handled by competent subordinates.

Part B: Leadership Development Plan

Introduction

Leadership is a developmental process characterized by reflexivity (Cunha *et al.*, 2015) and the ability to work through problems, challenges and issues within diverse health and social care settings. It is an ongoing and evolutionary endeavour that starts when one is born and when one dies (Kjellström, Stålne and Törnblom, 2020). The following leadership development plan is designed to increase the participatory and autonomy-oriented skills required for achieving an appropriate balance between democratic and laissez-faire leadership. Therefore, this plan will target personal strengths and weaknesses by integrating reflective practices and specific intervention strategies. The ideal outcome is enriched professional development and the ability to create a positive team culture that puts the patient first. The rationale for this plan lies in the fact that leadership in psychiatric care is not just focused on accomplishing tasks; it entails empathy and emotional intelligence (Nadiia *et al.*, 2019). This plan involves a SWOT analysis identifying strengths, weaknesses, opportunities, and threats, reflective learning that derives key lessons, and SMART goals that guarantee defined, actionable, measurable outcomes.

SWOT Analysis

According to Gürel (2017), "SWOT Analysis is an analysis method used to evaluate the 'strengths', 'weaknesses', 'opportunities' and 'threats' involved in an organization, a plan, a project, a person or a business activity." SWOT analysis proves helpful when discussing personal leadership competencies, as it gives a general overview of all strengths, weaknesses, opportunities, and threats. It is used as a starting point for assessing organizational strengths and as a framework for deploying resources in existing competencies.

My strengths include good interpersonal skills, flexibility, and an understanding of human beings, which are crucial in health and social care management. Communication ██ ██ team's members, and flexibility enables leadership to assume various postures depending on the context. Through empathy, workers acquire the acumen to address

their colleagues' requirements and develop a supportive atmosphere that boosts morale and productivity in the workplace.

My weaknesses include the issues of switching between the two leadership styles, lack of delegation skills, and problems in addressing conflicts. Sometimes, I micro-manage my team, which may restrict a team member's freedom to gain more

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which may slow down the implementation of projects if not well handled. Another area that I need help in is strategic planning. This is because it is critical for sustainable management in healthcare (Huebner and Flessa, 2022). It is essential to highlight and discuss these weaknesses to enhance the prospects of balanced and adaptive leadership.

Opportunities exist through mentorship programs (Lee, Sunerman, and Hastings, 2020), leadership workshops, and organizational support. It is helpful to discuss the activities with experienced managers and get advice; skill-building can be obtained from workshops aimed at participatory and autonomous leadership. Leadership development can be supported by organizational resources, like feedback systems and performance tools, to enhance it.
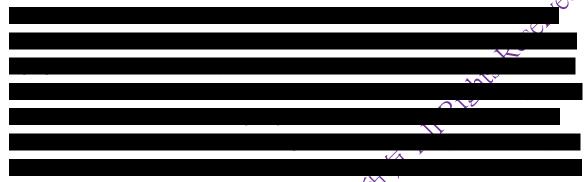
Some threats include resistance to change, limited resources, and differences in team composition. Team members may not be receptive to the change in leadership, resulting in difficulties in the implementation process. Lack of time or funds for planning,

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be harnessed, as well as minimizing weaknesses and deter threats, to sustain leadership development.

Reflection on Learning

The leadership in health and social module was valuable for understanding the complexities behind numerous leadership approaches and how they can be used effectively. The principles of the democratic model, where employees are encouraged to participate in group decision-making, were inspiring to promote engagement and

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creativity in the team. A primary criticism involved the time-consuming process of performing the role and the possible conflicts when decisions were being made; here, recommendations for improvement concerned the sphere of time management and conflict regulation, specifically in the work process (Bwalya, 2023). While recognizing that the lower level of involvement by the leader through laissez-faire leadership would enable professionals to actualize their potential and grow professionally, it was established that such a leadership style can only work well with professionals and those

performance appraisal instruments (Kandpal, Baroda, and Sharma, 2018). Further, it is notable that these insights are integrated into actionable goals that meet the personal learning goals and the psychiatric ward requirements.

Leadership Development Plan SMART Goals

Goal	Specific	Measurable	Achievable	Relevant	Time-Bound
Enhance participatory decision-making	Enroll in a workshop on collaborative decision-making strategies.	Facilitate five team meetings using new strategies.	Workshops are accessible online or locally.	Aligns with the goal of fostering democratic leadership.	Within 6 months.
Improve delegation skills	Attend a leadership training program on	Delegate three major responsibilitie	Organizational support ensures feasibility.	Improves team autonomy and aligns	Within 4 months.

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				with laissez-faire leadership.	
	effective delegation techniques.	s within a team.			
Develop conflict resolution skills	Participate in a conflict management course.	Apply techniques in three team meetings with measurable outcomes.	Relevant courses are available through professional platforms.	Essential for resolving conflicts in democratic leadership processes.	Within 8 months
Establish accountability mechanisms	Design and implement a structured performance review system.	Review team performance metrics quarterly.	Supported by organizational tools and resources.	Ensures accountability while maintaining team autonomy.	Within 1 year.
Reduce stress vulnerability	Integrate mindfulness practices into daily routines.	Measure stress levels through self-assessments and feedback.	Mindfulness apps and resources are widely available.	Improves decision-making and leadership effectiveness.	Within 3 months.

Each goal promotes democratic and laissez-faire leadership styles, offering an all-encompassing approach to professional development.

The plan outlining the execution of this leadership development strategy is divided into phases to promote organization and consistency with career objectives. The first stage (months 1–3) shall be dedicated to decreasing stress vulnerability and increasing focus by employing mindfulness. These practices, carried out daily, will create the basis for enhanced decision-making and leadership efficacy. At the same time, the delegation training will commence to enhance the ability to delegate duties and develop confidence in independent work among the teams. The development phase (4–8

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months) will focus on consensus, decision-making, and conflict-solving approaches. During this period, local workshops and online courses will be participated in to enhance democratic leadership skills. Implementation of these techniques will be provided, and it

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and encourage a free reign of leadership. Periodically, regular feedback meetings will be set up to assess the effectiveness of the strategies to be implemented. Every initiative should be evaluated regarding the qualitative and quantitative results at the team level by the end of the year.

The following challenges might be faced while implementing the leadership development plan. Dysfunction and lack of cooperation from the team members could be

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flexible online lessons and conducting the workshops off-peak or during weekends. Further, the ability to switch between different leadership styles and to possess appropriate behavioural competencies may prove to be challenging when working in a psychiatric ward.

Potential benefits are expected from the use of this leadership development plan. First, increased participation in decisions will lead to more innovation within the team

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improved, which will help lessen workflow interruptions within the team. Performance enhancements and standardized levels of patient care will be achieved through the accountability mechanisms that shall be put in place.

Conclusion

This leadership development plan provides a structured and actionable framework to enhance participatory and autonomy-focused leadership competencies.

Applying individual differences in strengths and areas of development, the plan is specific toward professional development goals and changes that may be present in a psychiatric ward. Therefore, leadership style in psychiatric wards should involve a combination of workplace participation and independence. Thanks to applying concepts such as SWOT analysis, SMART goal setting, and self-evaluation, a leader can always develop and improve the team effort's outcome.

Word count:

Part A 2033

Part B 1520

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