



SITUATIONAL LEADERSHIP STYLE IN NURSING MANAGEMENT IN CRITICAL CARE UNITS

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ABSTRACT

Leadership styles wield a profound influence on the dynamics of critical care units, shaping nursing workforce outcomes and patient care quality. Emphasizing the significance of transformational leadership and situational adaptability, this research explores the multifaceted impact of diverse leadership styles in nursing management. Investigating their effects on job satisfaction, intention to stay, and service provision, the study underscores the relevance of situational leadership in emergencies. As healthcare systems evolve, understanding these leadership dynamics becomes paramount for ensuring high-quality patient care amidst unprecedented challenges such as the COVID-19 pandemic, this study aims to explore the impact of nurse leadership philosophies—specifically transformational, transactional, and laissez-faire—on quality indicators in intensive care units. Through surveys, interviews, and patient data analysis, the research reveals that transformational leadership significantly enhances quality metrics, fostering increased patient satisfaction, reduced mortality rates, and improved cooperation among healthcare workers. The findings underscore the importance of nurse leadership development programs and emphasize the pivotal role of effective nursing leadership in delivering high-quality care. The study employed an integrated review technique, combining quantitative and qualitative findings on situational leadership in nursing management within critical care units. Adhering to Whittemore & Knafl's framework, the research involved problem identification, literature search, data evaluation, analysis, and findings presentation. Following PRISMA guidelines, the search strategy targeted studies published in English between 2000 and 2020, focusing on situational leadership in critical care units. Data collection involved extracting key study details, employing thematic analysis for qualitative data, and meta-analysis for quantitative data. Quality assessment utilized JBI checklists, identifying strengths and limitations, subsequently addressed through sensitivity analysis. In conclusion, situational leadership proves vital for nursing managers in dynamic critical care units, offering flexibility to address staff readiness levels effectively. The findings underscore the compatibility and effectiveness of transformational and situational leadership styles in promoting clinical leadership. Emphasizing collaborative leadership, shared values, and authentic behaviors, the studies highlight their positive impact on staff outcomes and care quality. Continuous training for nurse leaders is crucial for creating

positive work environments, ultimately improving patient care and staff well-being.,

Keywords: *leadership; style; nursing; critical care units*

INTRODUCTION and BACKGROUND

Leadership styles in nursing management play a crucial role in the effective functioning of critical care units. The nursing workforce and work environment are significantly influenced by leadership styles, which impact job satisfaction and workforce outcomes (Cummings et al., 2010). Transformational leadership in nursing has been associated with high-performing teams and improved patient care (Fischer, 2016). Nursing leadership styles directly impact intensive care unit quality measures, and the laissez-faire leadership style has been identified in some care settings as characterized by the superior's avoidance and inaction when subordinates are experiencing a situational need for leadership (Kiwanuka et al., 2020). Nurse managers use different leadership styles depending on the situation, with a tendency towards supportive, achievement-oriented, and participative leadership styles (Asamani et al., 2016). The situational leadership style is essential in managing specific conditions when needed, and it can be effective in emergencies such as cardiac arrest, enabling nurses to focus on the task as a whole on the patient (Ngabonzima et al., 2020; Durmuş & Kirca, 2020).

In the context of critical care units, nurse leadership styles significantly impact job satisfaction, intention to stay, and service provision (Ngabonzima et al., 2020). Additionally, the leadership styles of head nurses working in training hospitals have organizational acceptance and are frequently used in healthcare organizations due to their beneficial impacts on organizational variables (Matini et al., 2022). The situational leadership model offers four different leadership styles: directing, coaching, supporting – facilitating, and delegating, which are relevant in critical care units (Alčauskienė et al., 2019).

Influential nursing unit leaders utilize transformational leadership behaviors more frequently than transactional leadership in acute care hospitals, which is consistent with empirical evidence (Casida & Parker, 2011). Nurse managers should consider their leadership style from the point of view of employees, situation factors, and organizational goals, emphasizing the importance of situational leadership in nursing management (Vesterinen et al., 2012). The review on leadership in nursing emphasizes the appropriateness of using a particular leadership style in a specific situation, which is crucial in the context of critical care units (Cherian & Karkada, 2017). Furthermore, nurse managers' perceptions of their leadership styles, knowledge, and skills are essential for addressing challenging leadership and change management situations, which are pertinent in critical care units (Vesterinen et al., 2013).

Healthcare systems and demography are changing at a rate never before seen. The COVID-19 pandemic has increased demand, particularly for frontline healthcare professionals and intensive care units (ICU) (Litton et al., 2020). Making decisions in the healthcare industry requires nursing leadership, but reliable data must support such decisions (Shayan et al., 2019). Therefore, advocacy for nurses' participation in healthcare leadership and policy formulation is strong (Tnnessen et al., 2020). Unfortunately, efforts to increase nurses' engagement in healthcare leadership and policy formulation are hindered partly by a need for more data demonstrating their impact on healthcare quality indicators. Therefore, it is crucial to comprehend how nurse leadership philosophies affect quality indicators in critical care settings. This paper specifically examines the impact of nursing leadership styles on quality measures in ICUs.

Nursing managers are vital in translating the institution's vision into their staff's clinical practice, especially in critical care units requiring complex and intensive care. Therefore, nursing managers need practical leadership skills to adapt to different situations and challenges and empower their staff to provide high-quality patient care. One of the leadership styles proposed for nursing managers is situational leadership, which is based on the premise that there is no single best way to lead, but rather the most appropriate way depends on the situation and the readiness level of the followers. Mohamed et al. (2019).

Situational Leadership in Nursing Management

Situational leadership has been proposed as an effective style for nursing managers, emphasizing the importance of adapting leadership approaches based on the readiness level of the followers (Johansen, 1990). This leadership style involves behaviors such as directing, coaching, supporting, and delegating, which are tailored to the competence and commitment levels of the followers (Johansen, 1990; Morsiani et al., 2016). The impact of nurse managers' leadership styles on job satisfaction and intention to leave among nurses has been studied, highlighting the significance of leadership practices in improving patient care and increasing nurse retention (Morsiani et al., 2016; Lavoie-Tremblay et al., 2015). Additionally, the implications of leadership styles in nursing management on staff outcomes, including job satisfaction, have been explored, indicating the relevance of effective leadership in enhancing staff well-being and performance (Asamani et al., 2016).

Furthermore, the literature underscores the importance of situational leadership in addressing the challenges faced by nursing managers in critical care units, as it allows for the customization of leadership approaches according to the needs and abilities of the staff, ultimately contributing to the enhancement of professional autonomy, work readiness, and patient care quality and safety (Johansen, 1990; Morsiani et al., 2016; Lavoie-Tremblay et al., 2015; Asamani et al., 2016). Therefore, situational leadership emerges as a valuable approach for nursing managers to navigate the complexities of critical care settings and empower their staff to deliver high-quality patient care.

Leadership styles

Nursing leadership significantly influences quality indicators, which is crucial when trying to enhance the welfare of nursing staff or introduce new care paradigms (Cummings et al., 2018). There is a wealth of literature on ideas and practices of good nurse leadership. Three kinds of leadership theories—transformational, transactional, and laissez-faire—are directly linked to different leadership philosophies, according to Bass and Avalio (1994). The Full Range Leadership Model (FRLM) comprises these many leadership philosophies. The most well-researched and commonly mentioned leadership style in nursing and other disciplines is transformational leadership (TL) (Doody & Doody, 2012, 2015; Wu et al., 2020). According to Bass & Bass (2008), TL is distinguished by personalized consideration, intellectual stimulation, inspiring drive, and idealized influence. Leadership via transactions is another typical leadership style.

In some care settings, the laissez-faire leadership style, defined by the superior's avoidance and inaction when subordinates need leadership in a particular scenario, has also been noted. An inclusive leadership approach called authentic leadership articulates characteristics of different leadership models. According to Wong and Walsh (2020), authentic leadership is a set of leadership behaviors that creates favorable psychological abilities and an ethical atmosphere.

Leadership Styles in Critical Care Units

In critical care units, nursing management plays a crucial role in ensuring the delivery of high-quality care and maintaining a positive work environment for the nursing workforce. Leadership styles adopted by nurse managers have been the subject of extensive research, focusing on their impact on workforce outcomes, quality of care measures, job satisfaction, and staff retention. The literature reveals a variety of leadership styles employed by nurse managers, including transformational, transactional, laissez-faire, supportive, participative, and achievement-oriented styles, each with its implications for the nursing workforce and work environment (Cummings et al., 2010; Sfantou et al., 2017; Ofei & Paarima, 2022; Zhang et al., 2023; Warri, 2021; Khairunnisa & Nadjib, 2019; Lynch et al., 2017; Ngabonzima et al., 2020; Sabbah et al., 2020; Aliakbari et al., 2020).

Their association with various workforce outcomes underscores the significance of leadership styles in nursing management. For instance, transformational leadership has been found to positively relate to influential nursing unit organizational culture, while transactional leadership has a weaker relationship (Sfantou et al., 2017). Additionally, the Person-Centred Situational Leadership Framework has enhanced person-centered care within nursing homes, emphasizing the

importance of tailoring leadership approaches to specific care settings (Lynch et al., 2017). Furthermore, the impact of leadership styles on job satisfaction, intention to stay, and service provision in healthcare settings highlights the critical role of effective leadership in nursing and midwifery (Ngabonzima et al., 2020).

In the context of critical care units, the leadership styles adopted by nurse managers are particularly crucial due to the multifaceted nature of nursing services and the need to avoid errors, confusion, and waste (Ofei & Paarima, 2022). Moreover, the association of leadership styles with nurses' well-being and the quality of work in healthcare settings further emphasizes the critical role of leadership in improving the quality of care delivery (Warri, 2021; Sabbah et al., 2020). The literature also highlights the importance of ethical leadership and its potential to enhance the work environment and promote creativity in hospital settings, indicating the far-reaching impact of leadership styles on the overall quality of care (Mangion & Scicluna, 2022).

The specific challenges and demands of critical care nursing require nurse managers to exhibit the right leadership style to navigate urgent situations and maintain high standards of care effectively. The relationship between nurses' decision-making style and their disaster response competencies further underscores the importance of leadership styles in preparing nurses for critical situations and maintaining and improving their competencies (Aliakbari et al., 2020). Additionally, the impact of leadership styles on nurses' caring behavior and the mediating effect of psychological capital further emphasize the need for nurse managers to actively develop authentic leadership styles to promote nurses' caring behaviors toward patients in clinical practice (Zhang et al., 2023). Leadership Styles in Critical Care Units in Saudi Arabia

In the context of critical care units in Saudi Arabia, nursing leadership is crucial in addressing various challenges and ensuring high-quality patient care. The nursing shortage in Saudi Arabia is a pressing issue that requires effective leadership strategies to improve job satisfaction among nurses (Aboshaiqah, 2016). Nurse managers in Saudi Arabia need to consider the impact of turnover on daily assignments and patient care, emphasizing the importance of effective leadership in addressing this issue (Falatah & Salem, 2018). Additionally, the job satisfaction of nurses in Saudi Arabian hospitals is closely linked to leadership styles, highlighting the significance of leadership in influencing the work engagement and organizational commitment of nurses (AL-Dossary, 2022; Alrwili, 2022). Furthermore, the relationship between managerial competence and organizational commitment among nurses in Saudi Arabia underscores the influence of leadership on employees' sense of belonging and commitment to the organization (Almutairi & Bahari, 2021).

Transformational leadership has been shown to increase staff nurses' job satisfaction in critical care units in Saudi Arabia, indicating the potential of this leadership style in addressing the challenges faced in these units (Alrwili, 2022). Moreover, the effects of the nursing work environment on patient safety in Saudi Arabian hospitals highlight the need for effective leadership to create a healthy work environment that ensures patient safety (AL-Dossary, 2022). The impact of leadership styles and employee empowerment on organizational commitment further emphasizes the instrumental role of leadership in promoting organizational commitment among nurses in acute care settings (Othman & Khrais, 2022).

In addition to leadership styles, the cultural and religious diversity in Saudi Arabian healthcare settings presents communication challenges for nurses. Limited nurse-patient communication negatively affects the nurse-patient relationship, emphasizing the need for culturally competent leadership to address these communication barriers (Alshammari et al., 2019; Alshammari et al., 2022). Furthermore, the challenges facing the nursing profession in Saudi Arabia require efficient leadership to manage the various issues associated with the nursing workforce (Alsadaan et al., 2021). The significance of leadership in addressing specific healthcare issues is evident in various studies. For instance, introducing advanced specialist nursing and collaborative partnerships in Saudi Arabia is seen as a model for success that requires effective leadership to be implemented successfully (Hibbert et al., 2012). Additionally, fostering a supportive moral climate for healthcare providers in Saudi Arabia necessitates culturally competent leadership to ensure equity and cultural safety in healthcare delivery (Almutairi, 2015).

AIMS AND OBJECTIVE.

To investigate the effects of nurse leadership philosophies on the quality indicators for intensive care units. An investigation of the impact of nurse leadership styles on the quality indicators for intensive care units was undertaken.. The results will help to create a leadership development program for nurse manager and aspiring nurse manager to provide an appropriate leadership style based on the certain situation for better health services outcome.

Research Problems:

- 1. Identification of Optimal Leadership Styles:** The study aims to identify the most effective nurse leadership style for enhancing quality indicators in critical care units, prompting the research problem of determining which among transformational, transactional, and laissez-faire styles yields the most favorable outcomes.
- 2. Impact on Patient Satisfaction and Mortality Rates:** A central issue arises in understanding the specific impact of transformational leadership on quality metrics, particularly patient satisfaction and mortality rates, within critical care units.
- 3. Collaboration Challenges in Critical Care Units:** The investigation brings forth the problem of assessing how different leadership philosophies influence cooperation among healthcare workers in critical care settings, addressing potential challenges in fostering teamwork and collaboration.

Research Questions:

1.Primary Question:

•How do various nurse leadership styles, specifically transformational, transactional, and laissez-faire, influence quality indicators in critical care units?

2.Secondary Questions:

- What is the specific impact of transformational leadership on patient outcomes, including satisfaction and mortality rates, in critical care units?
- How do different leadership philosophies affect overall unit performance, emphasizing cooperation among healthcare workers in critical care settings?
- To what extent can surveys, interviews, and analysis of patient data provide insights into the relationship between nurse leadership styles and quality metrics?
- In what ways can hospitals implement nurse leadership development programs to improve the delivery of high-quality care in critical care units?

SIGNIFICANT OF THE STUDY

In the realm of nursing management, particularly within critical care units, leadership styles play a pivotal role in shaping the nursing workforce, work environment, and patient care outcomes. Notably, the systematic review by Cummings et al. (2010) underscores the influence of leadership styles on job satisfaction, with a specific emphasis on the positive impact of transformational leadership. Kiwanuka et al. (2020) reinforce these findings by highlighting the favorable effects of transformational, considerate, and exemplary leadership styles on the quality of nursing care in intensive care units, echoing the relevance of such styles in critical care settings. Asamani et al. (2016) further contribute insights by revealing nurse managers' preference for supportive, achievement-oriented, and participative leadership styles, showcasing the adaptability demanded in the dynamic context of critical care units. Additionally, the intersection of leadership styles with nurses' job satisfaction, motivation, commitment, and empowerment, as emphasized by Cosentino et al. (2021), underscores the pivotal role leadership plays in shaping the quality of professional life for ICU nurses. The intricate relationship between emotional intelligence and leadership style, as explored by Saleem & Faraj (2022), further accentuates the nuanced nature of effective leadership in nursing management, particularly crucial in high-stress environments like essential care units. Kallas's (2014) study affirms the importance of specific competencies outlined in the Kouzes and Posner transformational leadership model, reinforcing the relevance of transformational leadership skills in nursing management, especially in critical care settings where effective leadership is paramount.

Moreover, a gap is identified in the literature concerning the introduction of advanced leadership programs for nurse managers in Saudi Arabia (Alghamdi et al., 2019). While Alkahtani (2016) emphasizes the significant influence of leadership styles on nurses' attitudes and behaviors, further research is deemed necessary to understand the specific leadership styles of nurse managers in Saudi Arabia (El Dahshan et al., 2017; Saleh et al., 2018). Collectively, this synthesis of references underscores the critical significance of leadership styles in nursing management within essential units of care, emphasizing their impact on workforce dynamics, patient care outcomes, and the overall work environment.

METHODS

Design

The researcher decided to use an integrated review technique (Whittemore & Knafl, 2005) to allow us to combine and compare the findings from quantitative and qualitative studies on situational leadership in nursing management at the critical care units. According to Whittemore & Knafl (2005), there are five frameworks to ensure the rigor and quality of the review. (1) Problem identification, (2) literature search, (3) data evaluation, (4) data analysis, and (5) findings presentation comprise their framework. The researcher followed the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) (Moher et al., 2009) guidelines to increase the rigor and transparency of our review process.

Data Collection Procedure

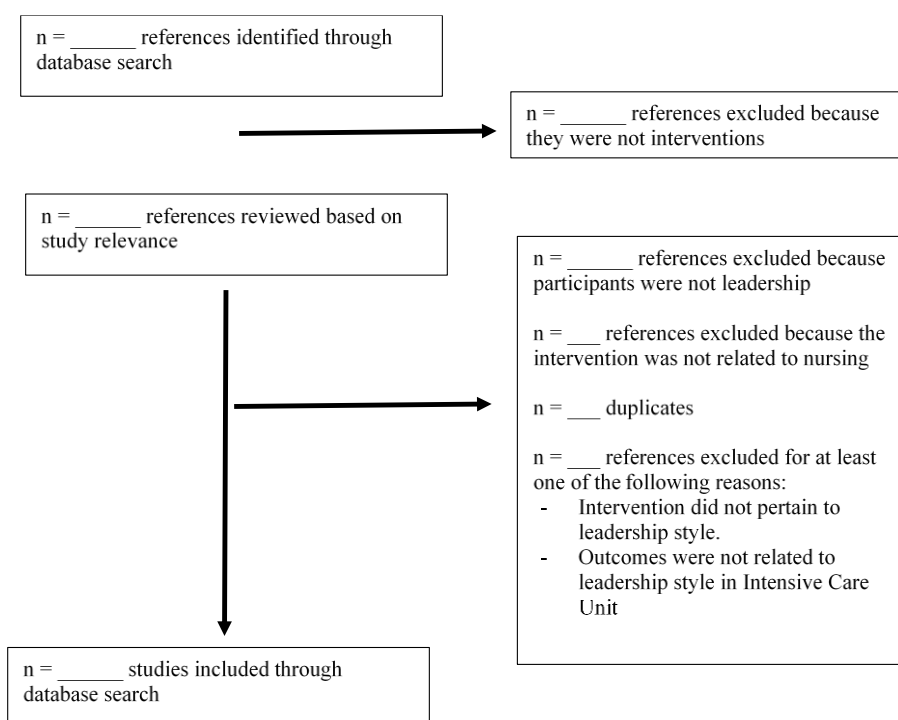
The search strategies used in this study are the following criteria: (a) focused on situational leadership style in nursing management in critical care units; (b) reported quality indicators related to patient, staff, or organizational outcomes; (c) used quantitative, qualitative, or mixed methods; (d) published in English; and (e) published between January 2000 and December 2020. The excluded studies that (a) did not involve nursing managers or critical care units; (b) did not measure or report quality indicators; (c) used other leadership styles or theories; or (d) were reviews, editorials, commentaries, or case studies.

Data collection

The researcher extracted the following data from each study: author, year, country, setting, sample size, design, methods, nursing leadership style, quality indicators, and main findings. We used a table to summarize and compare the data from the selected studies. We performed a thematic analysis to identify the common themes and patterns in the qualitative data and a meta-analysis to calculate the pooled effect sizes and confidence intervals in the quantitative data. We used a narrative synthesis to integrate and interpret the results from both data types. We resolved discrepancies or conflicts in the data extraction and analysis by discussion and consensus among the reviewers.

Evaluation of quality

We assessed the methodological quality of the included studies using two quality appraisal tools from the Joanna Briggs Institute (JBI) (2020): the JBI quality appraisal checklist for analytical cross-sectional studies and the JBI quality appraisal checklist for qualitative research (See Supplementary information II & III). We rated each study as high, moderate, or low quality based on the number and type of criteria met. We found that four studies were of high quality, two were of moderate quality, and one was of low quality. The main strengths of the studies were the use of appropriate sampling, data collection, data analysis methods, and the precise description of the findings and implications. The main limitations of the studies were the lack of randomization, blinding, and control groups, as well as the small sample sizes and low response rates. These limitations may have introduced biases or confounding factors that affected the reliability and validity of the findings. We addressed these issues by conducting a sensitivity analysis to test the results' robustness and reporting the heterogeneity and publication bias in the meta-analysis.



Findings Interpretations

Balsanelli and Cunha (2015) conducted a correlational study to examine the relationship between nursing leadership and the work environment in intensive care units (ICUs). They used a convenience sample of 66 pairs of nurses and nursing technicians and administered a questionnaire. The study found that the work environment was separate from actual nursing leadership. The nature of the institutions, whether public or private, also did not significantly affect leadership. However, the nurse-physician relationship domain stood out as a significant factor. The authors concluded that nurses should choose leadership styles that align with the characteristics of the ICU, and leadership skills can be developed regardless of the work environment.

Mohamed and Saleh (2019) conducted a descriptive correlational study to assess nursing managers' situational leadership style and nurses' work readiness levels. The study included a convenient sample of 84 nursing managers and 420 nurses from Assiut and Sohag University hospitals. The researchers used a structured questionnaire to collect data. The findings showed that most nursing managers must utilize the situational leadership style. However, more than half of the nursing managers at Assiut and less than half at Sohag used the participative leadership style. Regarding nurses' work readiness levels, the highest percentages were in the moderate category. The authors recommended providing condensed training for nursing managers to enable them to utilize leadership styles that align with nurses' work readiness levels.

Iraizoz-Iraizoz et al. (2023) conducted a scoping review to explore nurses' clinical leadership in the ICU. They reviewed eleven studies and used five central online databases to gather the evidence. The review revealed that idealized influence, motivational inspiration, intellectual stimulation, and intrinsic individual consideration were key competencies for clinical nurse leaders in the ICU. Situational and transformational leadership styles were considered compatible in this setting. Communication skills and professional experience were essential determinants for promoting clinical leadership in ICUs. The scoping review comprehensively understood the competencies, leadership styles, determinants, and strategies needed to promote ICU nurses' clinical leadership.

Kiwanuka et al. (2021) conducted an integrative review to examine the impact of nursing leadership styles on quality measures in the ICU. They reviewed 253 identified studies from various databases. The review identified leadership styles such as transformational, considerate, exemplary, trusted, and absentee leadership in ICUs. Active nurse leaders who advocated for their staff were found to be more effective. Leadership styles impacted productivity, morale, staff outcomes, medication errors, and

neonatal care outcomes. The authors highlighted the link between nursing leadership styles and structural and outcome measures in ICUs but noted a need for studies on process measures.

A study examined the effect of leadership styles on job satisfaction among critical care nurses in Aseer, Saudi Arabia. The study used a quantitative cross-sectional design and a convenience sample of 89 staff nurses reporting to 8 nurse leaders. The researchers used the multifactor leadership questionnaire to assess leadership styles. The findings revealed that nurse leaders had a mix of transactional and transformational styles, with transformational leaders resulting in higher job satisfaction. The study emphasized the importance of transformational leadership for increasing staff nurses' job satisfaction and recommended training nurse leaders in this style.

Zaghini et al. (2019) conducted a cross-sectional survey to investigate the relationship between nurse managers' leadership style and patients' perception of the quality of care nurses provide. The study included a convenience sample of 479 registered nurses and 829 patients from multiple centers. Separate questionnaires were administered to nurses and patients. The results confirmed that nurses who were satisfied with leadership experienced less burnout, strained interpersonal relationships, and engaged less in misbehavior. In turn, patients were more comfortable with the quality of care provided by nurses. The authors concluded that organizational context, leadership, and nurses' behaviors influenced patients' perceptions of care, and managers should consider these factors to improve care quality.

Duignan (2020) conducted a scoping review to examine the impact of clinical leadership in advanced practice roles on outcomes in healthcare. The review included 765 potential articles and searched in SCOPUS and PubMed. The results indicated no objective evidence of the impact of advanced practitioners' clinical leadership on patient, staff, or organizational outcomes. The author highlighted the need for unbiased data to determine the extent of clinical leadership in advanced practice settings and suggested aligning clinical leadership policy objectives with official operational leadership possibilities for advanced practitioners.

Tønnessen (2020) conducted a scoping review to explore the visibility of nursing in policy documents related to healthcare priorities. The review focused on Nordic countries and found that all had published documents articulating values and criteria regarding healthcare priorities. The review emphasized the importance of clarifying nursing priorities to prevent missed nursing care and ensure the equitable distribution of limited resources.

The Cardiff study conducted in 2020 identified four pillars for creating effective workplace cultures that are also considered good places to work: collaborative leadership, living shared values, safe, critical, creative learning environments, and change for the better. By incorporating these pillars, organizations can retain dedicated staff and deliver valued care. The study emphasizes the importance of involving frontline healthcare workers and service users in decision-making to drive meaningful change.

Avolio, B. J., Walumbwa, F. O., & Weber, T. J. (2009). Leadership: Current theories, research, and future directions. *Annual Review of Psychology*, 60, 421-449.

This review article provides an overview of current theories and research on leadership and future directions for leadership studies. It covers various leadership approaches, including trait theories, behavioral theories, contingency theories, transformational leadership, and authentic leadership. The authors discuss the importance of studying leadership in different contexts and highlight the need for more research to understand the complex nature of leadership.

Wong, C. A., & Cummings, G. G. (2007). The influence of authentic leadership behaviors on trust and work outcomes of health care staff. *Journal of Leadership Studies*, 1(2), 64-73.

This study examines the influence of authentic leadership behaviors on trust and work outcomes among healthcare staff. The researchers surveyed 227 healthcare staff members and found that original leadership behaviors positively influenced trust and work outcomes, including job satisfaction, organizational commitment, and engagement. The findings suggest that authentic leadership is essential for creating a positive work environment and improving staff outcomes in healthcare settings.

Hutchinson, M., Jackson, D., & Peters, K. (2013). Power and nursing practice: A phenomenological examination of the power contest between nurses and doctors in Australia. *Journal of Advanced Nursing*, 69(12), 2782–2792.

This qualitative study explores the power dynamics between nurses and doctors in healthcare settings in Australia. The researchers conducted in-depth interviews with 23 nurses and found that power struggles and contestation were everywhere between nurses and doctors. The study highlights the need for effective collaboration and communication between healthcare professionals to improve patient care and create a positive work environment.

Laschinger, H. K. S., Wong, C. A., & Grau, A. L. (2013). Authentic leadership, empowerment, and burnout: A comparison in new graduates and experienced nurses. *Journal of Nursing Management*, 21(3), 541-552.

This study compares the relationships between authentic leadership, empowerment, and burnout among new graduate nurses and experienced nurses. The researchers surveyed 226 nurses and found that authentic leadership and empowerment were negatively associated with burnout in both groups. However, the relationships were more robust for experienced nurses than new graduates. The findings suggest that authentic leadership and empowerment are essential to preventing burnout among nurses. Lavoie-Tremblay, M., Fernet, C., Lavigne, G. L., & Austin, S. (2016). Transformational leadership and nurses' psychological well-being: A three-wave cross-lagged study. *Nursing Research*, 65(1), 59-67.

This longitudinal study examines the relationship between transformational leadership and nurses' psychological well-being over time. The researchers collected data from 528 nurses at three-time points and found that transformational leadership positively influenced nurses' psychological well-being, including job satisfaction, emotional exhaustion, and personal accomplishment. The study highlights the importance of transformational leadership in promoting nurses' well-being and suggests that organizations should prioritize the development of transformational leadership skills among nurse leaders.

No.	Author, year	Title	Design and sample	Tool	Main findings	Conclusion and recommendation
1.	Balsanelli, A. P., & Cunha, I. C. (2015).	Nursing leadership in intensive care units and its relationship to the work environment.	In the correlational study, a convenience sample of 66 pairs (nurses and nursing technicians)	A questionnaire	The work environment was not associated with actual nursing leadership ($p = 0.852$). The public or private nature of the institutions where the investigated ICUs were located had no significant effect on leadership ($p = 0.437$). Only the nurse- physician relationship domain stood out ($p = 0.001$).	The choice of leadership styles by nurses should match the ICU characteristics. Leadership skills could be developed, and the work environment did not influence the investigated population.
2.	Mohamed, A. S., & Saleh, N. M. A. (2019).	Assessing Nursing Manager's Situational Leadership Style and Nurse's Work Readiness Levels.	Descriptive correlational study design, a convenient sample of nursing managers No=84 and 420 nurses	Structure Questionnaire	At Assiut and Sohag Universities hospitals, the highest percentage of nursing managers utilize the participative leadership style (50% and 47.6%, respectively), while the lowest percentage use the delegative leadership style (4.8% and 2.4%, respectively). Regarding nurses, the highest percentages at Assiut and Sohag Universities Hospitals have a moderate work readiness level (54.8% and 48.6%, respectively), followed by a high work readiness level (38.1% and 28.6%, respectively).	Most Assiut and Sohag University hospital nursing managers must utilize the situational leadership style. However, more than half of nursing managers at Assiut and less than half at Sohag use the participative style. Additionally, the highest percentage of nurses have a moderate work readiness level. It is recommended to provide condensed training for nursing managers to enable them to utilize leadership styles that align with the work readiness levels of the nurses.

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3.	Iraizoz- Iraizoz et al.(2023)	Nurses' clinical leadership in the intensive care unit: A scoping review	A scoping review of Eleven studies	Five central online databases, PubMed (including MEDLINE), CINAHL, PsycINFO, Scopus and Cochrane	The evidence reveals that Idealized influence, motivational inspiration, intellectual stimulation, and intrinsic individual consideration are the critical competencies needed for clinical nurse leaders in the intensive care unit. Situational and transformational leadership styles are considered compatible in this setting. Communication skills and professional experience are essential for promoting clinical leadership in intensive care units.	This scoping review provides broad knowledge, which helps to understand, in a single study, the critical competencies, leadership styles, determinants, and strategies needed to promote intensive care unit nurses' clinical leadership.
4.	Kiwanuka, F., Nanyonga, R. C., Sak-Dankosky, N., Muwanguzi, P. A., & Kvist, T. (2021).	Nursing leadership styles and their impact on intensive care unit quality measures: An integrative review.	An integrative review of 253 identified studies,	Databases	Leadership styles in intensive care units include transformational, considerate, exemplary, trusted, and absentee leadership. Active nurse leaders who advocate for their staff are more effective. Leadership styles impact productivity, morale, staff outcomes, medication errors, and neonatal care outcomes.	The findings highlight the link between nursing leadership styles and structural and outcome measures in intensive care units. The current literature needs studies highlighting the impact of nursing leadership styles on process measures in intensive care units.
5.		Effect of Leadership Styles on Job Satisfaction Among Critical Care Nurses in Aseer, Saudi Arabia	Quantitative cross-sectional study, using convenience sampling. Staff nurses (N=89) reporting to 8 nurse leaders	multifactor leadership questionnaire	Nurse leaders had a mix of transactional and transformational styles. Transformational leaders resulted in higher job satisfaction. Operating conditions had a negative impact, while pay, benefits, and nature of work were unrelated. Nurses were moderately satisfied, with 23% of satisfaction linked to leadership facets like support and motivation.	The study emphasized the importance of the TF style of head nurses for increasing staff nurses' job satisfaction. It is suggested that nurse leaders should be trained in the TF leadership style and provided more support and training for effective management of CCU.
6.	Zaghini, F., Fiorini, J., Piredda, M., Fida, R., & Sili, A. (2019).	The relationship between nurse managers' leadership style and patients' perception of the quality of the care provided by nurses: Cross-sectional survey	A multi-center cross-sectional study convenience sample, 479 registered nurses and 829 patients	two different questionnaires, one for the nurses and one for the patients.	Results confirmed the hypothesis that when nurses were satisfied with leadership, they felt less burned-out and strained in interpersonal relationships, engaged less in misbehavior, and, in turn, patients were more comfortable with the quality of the care they provided.	The results of this study showed that the characteristics of the organizational context, the leadership, and the nurses' behaviors influenced patients' perceptions of nurses' care. Therefore, healthcare service managers should consider these results seriously to improve patient care quality.
7.	Duignan,2020	Impact of clinical leadership in advanced practice roles on outcomes in health care	A scoping review of 765 potential articles	Searching in SCOPUS, PubMed	The results indicate no objective evidence of the impact of advanced practitioners' clinical leadership on the patient, staff, or organizational outcomes.	The findings show no unbiased proof of the influence of advanced practitioners' clinical leadership on the outcomes of patients, employees, or organizations. The lack of square data makes it difficult to determine how much clinical leadership is practiced in advanced practice settings. The research shows that AP clinical leadership policy objectives and official operational leadership possibilities for APs need to be more closely aligned.

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8.	Tønnessen,2020	Visibility of nursing in policy documents related to health care priorities.	A scoping review	searching databases	All the Nordic countries have published documents articulating values and criteria relating to healthcare priorities.	As a result, it was determined that nursing priorities must be made clear to prevent missed nursing care and guarantee the equitable distribution of limited resources.
9.	Cardiff,2020	Guiding lights for effective workplace cultures that are also good places to work.	A three-phase study	Series of Context-Mechanism- Outcome (CMO)	We can co-create effective workplace cultures in settings that are also good places to work by focusing on four pillars: collaborative leadership, living shared values, safe, critical, creative learning environments, and change for good that matters.	The study proposes, based on the views of frontline healthcare workers from around the world, that collective leadership, shared values, safe, critical, creative learning environments, and change for the better as decided by those who are receiving and receiving care can help retain staff who are dedicated to delivering care that is valued by staff and service users.
10.	De Brun,2020	Understanding the impact of a collective leadership intervention on team working and Safety culture in healthcare teams	multiple case studies,	A realist evaluation	The case findings will be compared to find patterns or demi-regularities and to determine whether the intervention works differently in other circumstances.	The findings will be presented to stakeholders and interest groups and published in peer-reviewed publications at national and international conferences.
11.	Endres,2020	Understanding (non)leadership phenomena in Collaborative inter-organizational networks and advancing shared leadership theory	qualitative	three collaborative inter- organizational networks	two separate types of network involvement with distinct network identities at their core have been experimentally identified and are connected to different leadership-related phenomena in our networks.	By presenting joint-motivational network identity as a novel concept related to the evolution of shared leadership, the findings progress in conceptualizing shared leadership while shedding fresh light on cooperation and leadership in inter-organizational networks.
12.	Guo-wen Zhang, Xiao-hong Zhang, Wen-feng Lin et al. al 2023	Authentic Leadership and Nurses' Caring Behavior in China: The Mediating Effect of Psychologic	An online survey. 3,495 registered nurses	Questionnaire	Authentic leadership, psychological capital, and caring behavior among nurses exhibited significant correlations. Furthermore, psychological capital significantly mediated ($\beta=0.378, p<0.001$) the correlation between authentic leadership and nurses' caring behavior.	According to the findings of this research, enhancing psychological capital could help nurses who experience an authentic leadership style improve their caring behaviors effectively. This finding suggests that nursing managers should actively develop an original leadership style and take action or provide education to increase nurses' psychological capital. This can effectively promote nurses' caring behaviors toward patients in clinical practice.
13.	Asamani, J., Naab, F., & Ofei, A. (2016).	Leadership styles in nursing management: implications for staff outcomes.	A cross-sectional survey designed to collect data by a convenience sampling of 273 nursing staff in five hospitals		Nurse managers utilized different leadership styles, favoring supportive, achievement-oriented, and participative leadership. The nursing staff showed moderate levels of job satisfaction. The	The findings have enormous implications for nursing practice, management, education, and human resources for health policy that could lead to better

					nurse managers' leadership styles accounted for 29% of the variation in staff job satisfaction. The nursing staff's intention to remain at the current workplace was low, with more than half expressing an intention to leave (51.7%) and 20% actively seeking opportunities elsewhere. The nurse managers' leadership styles explained 13.3% of the staff's intention to stay in their current positions.	staff retention and job satisfaction and ultimately improve patient care.
14.	Balsanelli et al. (2015)	IDEAL AND REAL LEADERSHIP OF NURSES IN INTENSIVE CARE UNITS AT PRIVATE AND PUBLIC HOSPITALS	A cross-sectional study from a sample of 66 pairs (nurses and nursing technicians)	Questionnaire	Among the 66 nurses surveyed, 98.5% considered the style 9.9 ideal, and 63.6% were evaluated as 9.9 by the nursing technicians. There were no differences between nurses' ideal and authentic leadership styles in intensive care units at private and public hospitals ($p=0.67$).	The present study enabled us to map the styles of leadership of intensivists nurses and to observe that belonging to private and public hospitals did not interfere with the practice of this ability.
15.	AL-Dossary, R. (2022).	Leadership Style, work engagement, and Organizational commitment among Nurses in Saudi Arabian hospitals	a cross-sectional design, a convenience sampling of 394 nurses and nurse managers	Online survey	Among the participants, 84.4% were nurses, and 15.6% were nurse managers. A significant difference ($p < 0.05$) in opinions is observed among nurse managers about transformational and transactional leadership styles and engagement. Transformational and transactional leadership positively correlate with organizational commitment and nurses' engagement.	Differences in leadership style perceptions among nurses and nurse managers reflected nursing management issues, which must be addressed in light of rapid infrastructural changes owing to Saudi Vision 2030.

Discussion

The studies discussed provide valuable insights into the role of situational leadership style in nursing management in critical care units. Balsanelli and Cunha (2015) found that the work environment in ICUs was not associated with actual nursing leadership, but the nurse-physician relationship stood out as a significant factor. This suggests that situational leadership, which adapts to different situations and relationships, could be beneficial in managing the complex dynamics of critical care units.

Mohamed and Saleh (2019) highlighted that most nursing managers must utilize the situational leadership style. However, they found that using leadership styles that align with nurses' work readiness levels, such as participative leadership, could be effective. This implies that nursing managers should consider the readiness and capabilities of their nursing staff when applying leadership approaches.

Iraizoz-Iraizoz et al. (2023) emphasized the compatibility of situational and transformational leadership styles in promoting clinical leadership in ICUs. The review highlighted the importance of competencies such as idealized influence, motivational inspiration, intellectual stimulation, and individual consideration for clinical nurse leaders in the ICU. This suggests that situational leadership, which adjusts leadership behaviors based on the needs of individuals and the situation, can complement the transformational leadership style in critical care settings.

Kiwanuka et al. (2021) identified various leadership styles, including transformational, considerate, exemplary, trusted, and absentee leadership in ICUs. The review emphasized the positive impact of active nurse leaders who advocate for their staff, improving productivity, morale, staff outcomes, and patient care quality. This suggests that situational leadership, which encompasses different leadership styles based on the situation and the team's needs, can contribute to positive outcomes in critical care units.

Zaghini et al. (2019) examined the relationship between nurse managers' leadership style and patients' perception of the quality of care. The study found that when nurses were satisfied with their leadership, they experienced less burnout and engaged less in misbehavior, ultimately influencing

patients' satisfaction with the quality of care. This emphasizes the role of leadership in shaping the work environment and its impact on patient outcomes.

The scoping review by Duignan (2020) highlighted the need for unbiased data to determine the impact of clinical leadership in advanced practice roles on patients, staff, and organizational outcomes. This suggests the importance of conducting rigorous research to understand the specific effects of leadership styles in advanced practice settings.

Tønnessen's (2020) scoping review focused on the visibility of nursing in policy documents related to healthcare priorities. The review emphasized the need for clear nursing priorities to prevent missed care and ensure equitable resource distribution. This highlights the importance of leadership in advocating for nursing and ensuring that nursing perspectives are considered in healthcare decision-making processes.

The Cardiff study (2020) identified collaborative leadership, shared values, safe learning environments, and change for the better as pillars for creating effective workplace cultures. This study emphasizes the importance of involving frontline healthcare workers and service users in decision-making to drive meaningful change. Leadership styles promoting collaboration and value-driven decision-making can create positive work cultures.

These studies suggest that situational leadership styles can benefit nursing management in critical care units. By adapting leadership behaviors to the specific needs and characteristics of the ICU, nursing managers can effectively navigate the complexities of the work environment and promote positive outcomes for both staff and patients. Furthermore, the studies highlight the importance of considering nurses' work readiness levels, building solid nurse-physician relationships, and incorporating transformational leadership competencies with situational leadership.

However, it is essential to note that the studies also indicate a need for more utilization of situational leadership by nursing managers in some cases. This suggests a potential gap in leadership development and training, emphasizing the need for continuous education and support to enhance nursing managers' leadership skills and ability to adapt to different situations.

Avolio, B. J., Walumbwa, F. O., & Weber, T. J. (2009) provide a comprehensive review of current theories and research on leadership. The article covers various leadership approaches, including trait theories, behavioral theories, contingency theories, transformational leadership, and authentic leadership. It emphasizes the need for more research to understand the complex nature of leadership and suggests future directions for leadership studies.

Wong, C. A., & Cummings, G. G. (2007) investigate the influence of authentic leadership behaviors on trust and work outcomes among healthcare staff. The study finds that original leadership behaviors positively impact trust and work outcomes, such as job satisfaction, organizational commitment, and engagement. It highlights the importance of authentic leadership in creating a positive work environment in healthcare settings.

Hutchinson, M., Jackson, D., & Peters, K. (2013) examine the power dynamics between nurses and doctors in healthcare settings in Australia. Through interviews with nurses, the study reveals everyday power struggles and contestation between nurses and doctors. It emphasizes the importance of effective collaboration and communication between healthcare professionals to improve patient care and create a positive work environment.

Laschinger, H. K. S., Wong, C. A., & Grau, A. L. (2013) compare the relationships between authentic leadership, empowerment, and burnout among new graduate nurses and experienced nurses. The study finds that authentic leadership and empowerment are negatively associated with burnout in both groups, with stronger relationships observed among professional nurses. It suggests that authentic leadership and empowerment are crucial in preventing burnout among nurses.

Lavoie-Tremblay, M., Fernet, C., Lavigne, G. L., & Austin, S. (2016) conducted a three-wave cross-lagged study to examine the relationship between transformational leadership and nurses' psychological well-being over time. The study finds that transformational leadership positively influences nurses' psychological well-being, including job satisfaction, emotional exhaustion, and personal accomplishment. It highlights the importance of transformational leadership in promoting nurses' well-being and recommends prioritizing developing leadership skills among nurse leaders.

These studies contribute to our understanding of leadership in healthcare settings, emphasizing the significance of authentic leadership, collaboration, and empowerment in creating positive work environments, improving staff outcomes, preventing burnout, and promoting nurses' psychological well-being.

The findings suggest that situational leadership, combined with other effective leadership styles and competencies, can create a positive work environment, enhance staff satisfaction, and improve patient care outcomes in critical care units. Further research and practical interventions are warranted to explore and promote the effective application of situational leadership in nursing management within this specific context.

Conclusion

In conclusion, Situational leadership is a flexible and adaptable style that can help nursing managers in critical care units cope with the dynamic and complex nature of their work environment. By assessing their staff's situation and readiness level, nursing managers can choose the most appropriate behavior from directing, coaching, supporting, or delegating to enhance the staff's competence, commitment, and autonomy.

Relevance to Nursing Practice

The studies on nursing leadership in critical care units provide valuable insights into various leadership styles, their impact on the work environment, and the outcomes for healthcare staff and patients. The findings highlight the importance of choosing leadership styles that align with the characteristics of the ICU and nurses' work readiness levels. Transformational and situational leadership styles are considered compatible and effective in promoting clinical leadership in ICUs. The studies emphasize the significance of collaborative leadership, shared values, safe learning environments, and meaningful change in creating effective workplace cultures. Additionally, the studies underscore the positive impact of authentic leadership behaviors, such as trust-building and empowerment, on staff outcomes and the quality of care. The role of nursing managers and their leadership styles in influencing job satisfaction, burnout, and patient perceptions of care is also highlighted. These findings emphasize nurse leaders' need for continuous training and development to enhance their leadership skills and create positive work environments. These studies contribute to understanding nursing leadership in critical care settings and provide valuable insights for improving patient care and staff well-being.

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