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Citation for final published version:

James, Alison H. , Bennett, Clare Louise , Blanchard, Denise and Stanley, David 2021. Nursing and values-based leadership: a literature review. *Journal of Nursing Management* 29 (5) , pp. 916-930. 10.1111/jonm.13273

Publishers page: <http://dx.doi.org/10.1111/jonm.13273>

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Nursing and Values-Based Leadership: A literature review.

Aim: to explore literature that supports an understanding of Values-Based Leadership in nursing.

Background: understanding Values-Based Leadership in nursing, means understanding several leadership theories such as Authentic, Servant and Congruent leadership.

Evaluation: electronic databases were systematically searched to locate studies with the terms Values-Based, Authentic, Servant and Congruent Leadership. The literature was assessed with the Joanna Briggs Institute critical appraisal tools and the Preferred Reporting Items for Systematic Reviews and meta-analysis approach and a thematic analysis.

Key Issues: Existing evidence focuses on specific perspectives within three dominant leadership approaches under the umbrella of values-based leadership: Authentic, Servant and Congruent leadership. Limited literature suggests that values-based leadership can support professional collaboration, enhanced trust and voice for nurses, support for staff wellbeing, empowerment, job satisfaction, patient-focused outcomes and quality care.

Conclusions: A dearth of empirical literature concerning values-based leadership and nursing exists. Evidence suggests that Authentic, Servant and Congruent leadership correlate with values-based leadership theories and core nursing values.

Implications for Nursing Management: Nurse managers should recognise the potential benefits of a values-based leadership approach for staff wellbeing staff, enhanced professional collaboration and the nurses voice, improved insight into clinical leadership attributes and improvements in quality patient care.

Key Words:

Nursing Leadership, Values-Based Leadership, Authentic Leadership, Congruent Leadership, Servant Leadership.

1. Introduction

In the 21st century, theories of leadership have re-emerged, with a focus on the leader's value base. Copeland (2014) identified 11 leadership theories situated within the sphere of values-based leadership, however, these all pertained to a business-

management focus. In conducting this review, it emerged that within nursing, three main leadership theories appear under the umbrella of the values-based leadership domain. As such, this review went beyond values-based leadership literature, to capture data related to Authentic Leadership, Servant Leadership and Congruent Leadership, aiming to gain a wider understanding of values-based leadership. This paper begins with an overview and definition of values-based leadership and the three leadership theories identified, before describing a literature review that explored each of the theories, supporting a wider understanding from a nursing perspective.

2. Background

Copeland (2014 p105) suggests that values-based leadership has emerged from a leadership landscape where many leaders have been, “plagued with extensive, evasive and disheartening ethical leadership failures...”. As a result, governments, communities and individuals have begun to place a renewed focus on the value of ethical behaviour and leaders who clearly demonstrate their values (Stanley, 2019). Values are described as a “key component of effective leadership and an essential trait for leaders to possess” (Graber & Kilpatrick, 2008, p180); other leadership writers and theorists concur (Ahn et al., 2011; Baloglu, 2012; Peregrym and Wollf, 2013; Stanley, 2019; Viinamakl, 2009).

In order to restore hope, confidence and integrity to organisations, leaders now need to move away from charismatic leadership styles and place values at the core of leadership practices (Copeland, 2014). In nursing and healthcare leadership, this movement has been mirrored with values increasingly becoming the focus for health practitioner practice (Wynia and Bedzow, 2019) and improving client services. Understanding the characteristics and evidence for such practices is, therefore, important. Denier et al. (2019) and Faith (2013) note that core values in healthcare, such as care and compassion, are being undermined by the negative impacts of cost containment, political wrangling and other influences and that if a “culture of care is to survive” there needs to be a commitment to values-based leadership (Faith, 2013, p6).

During this review process it became apparent that other leadership theories, dominant in nursing, suggest a wider view of values-based leadership. These were

Servant Leadership (Greenleaf, 1970, 1977), Authentic Leadership, (George, 2003) and Congruent Leadership (Stanley, 2006a, 2006b, 2008). These theories were, therefore, included to widen the scope of this review.

3. Definitions

Barrett (2006) suggests that a values-based leadership style could be described as leaders building on teams' shared values. As such, values-based leadership is based on the philosophical standpoint of the leader, with followers developing from a shared set of beliefs to increase motivation and productivity. Leaders act on behalf of their followers and seek to provide the conditions and resources that bolster followers' motivation. Values-based leaders enable followers to clearly see the core values that align with an organisation's values (Fernandez and Hogan, 2002). In providing a strong underlying moral and ethical foundation, values-based leadership anchors the leader's behaviour in positive ethical and moral practice (Bass and Avolio, 1993; Bass and Steidlmeim, 1999; Brown and Trevino, 2006; Gardner and Avolio, 2005).

The concept of Authentic Leadership developed from the increasing focus on ethics and organisational behaviours and the move towards transformational models of leadership (Avolio et al., 2004). Avolio and Gardner (2005) consider Authentic Leadership as a core paradigm for progressive forms of leadership, with a focus on self-awareness and moral perspectives. Authentic Leadership refers to a process aligned with positivity of psychological aptitudes and organisational contexts, leading to self-awareness and self-regulated positive behaviours among leaders. Proposing that self-knowledge and personal concepts drive individual leadership, Authentic Leadership views relationships as important and highlights the role of leaders as influencers (Cairns-Lee, 2015). Authentic Leadership has four principles at its core requiring "balanced processing, relational transparency, internalized moral perspective, and self-awareness" (Alilyyani et al., 2018 p35).

Savel and Munro (2017) assert that premodern concepts of Servant Leadership are rooted in Christianity and ancient Chinese writings with beliefs about leadership centring on the need for leaders to place prominence on serving others. In the modern context, Greenleaf (1970, 1977, 1998) developed the concept of Servant Leadership arguing that the leader has an innate desire to serve first and later decides to lead,

contrasting this with the individual who is a leader first. The servant leader prioritises others' needs and nurtures others in their professional development.

Congruent Leadership occurs when the values and beliefs of the leader are congruent with their actions (Stanley, 2006a, 2006b, 2008, 2017, 2019). As such, the leaders' values and beliefs are seen to drive and match their actions, thus gaining congruence. All three theories sit under the scope of a values-based theoretical perspective of leadership in nursing.

4. Methods: Search Strategy

4.1 Aim:

To explore literature that supports an understanding of values-based leadership in nursing.

4.2 Design

An integrative systematic literature review was chosen for its comprehensive approach to the identification of relevant literature. The use of a Preferred Reporting Items for Systematic Reviews and Meta-analysis (PRISMA) flow approach enabled a clear evaluation and analysis of the data and presentation of findings (Whittemore & Knafl, 2005). Once all the data was gathered it was thematically analysed.

4.3 Search Methods and Results

The literature search began by searching *BCS*, *Pubmed*, *CINAHL*, and *Pro-quest* databases for papers related to values-based leadership. A PRISMA process was applied to the literature search (Figure 1). Keywords included "*Values-Based Leadership*", "*Authentic Leadership*", "*Servant Leadership*" and "*Congruent Leadership*". 1084 papers were located initially. The search was, therefore, limited to research articles published in English from the year 2000 to May 2020 and papers which focused on health care leadership, resulting in 243 papers. Papers were also obtained through back-chaining and a manual search of current periodicals, including major nursing journals. Exclusion criteria were: not available as a downloadable paper, lack of a research focus (discussion or opinion papers) and lack of focus on health care leadership. The papers were divided into four categories for examination: Values-

based leadership (n=200), Authentic Leadership (n=478), Servant Leadership (n=310) and Congruent Leadership (n=96). Each paper was reviewed to ensure it met the inclusion criteria, following which 48 papers remained (Table 1, 2, 3, and 4); 10 papers on values-based leadership, 20 papers on Authentic Leadership, 8 papers on Servant Leadership and 10 papers on Congruent Leadership. Of these, 26 were quantitative, 6 were qualitative, 2 were cases studies, 10 were literature reviews and 4 were mixed method studies.

(Table 1, 2, 3, and 4, here)

(Figure 1 Here)

All articles that remained for review were analysed using the PRISMA guidelines (Shamseer et al., 2015) to support the selection process. Each article was analysed independently using relevant tools from the Joanna Briggs Institute critical appraisal tool catalogue (<https://joannabriggs.org/critical-appraisal-tools>). A thematic analysis of data within each paper was conducted, with each researcher dealing with the four leadership theories individually, before validation of the codes, categories and themes identified by each researcher (Glasper & Rees, 2017). This resulted in the identification of themes outlined in the following discussion and provided in summary in Table 5.

(Table 5 here)

5. Findings

An overview of all the literature identified is offered in Table 1, 2, 3 and 4. However, to synthesise and further review the literature a thematic analysis was used that led to the identification of several themes which illuminate outcomes and effects of approaches to values-based leadership described for nursing staff, organisations and healthcare. However, the methodological quality of the literature was highly variable and emerged predominantly from Canada, the USA and Australia, with some further wider international contributions. The review produced five overarching themes that help support an understanding of values-based leadership: Work

environment and job satisfaction, Staff wellbeing and burnout, Trust and voice, Interprofessional working and collaboration and Patient outcomes. The themes are discussed below.

5.1 Work Environment and Job Satisfaction

Papers across the data search addressed aspects of creating empowered work environments. Values-based leadership was considered supportive of social capital and promoting the retention of nurses, with value placed on quality relationships and a sense of belonging. This positively influenced mental health and job satisfaction (Alilyyani et al., 2018; Kark and Shamir, 2002; Shirey 2009 and Read and Laschinger, 2015), particularly when a positive work environment was supported by positive workplace role models (Giallonardo et al., 2010; Fallatah and Laschinger, 2016; Lee et al., 2019; Baek et al., 2019 and Shirey, 2009). Application of values-based leadership within an organisation resulted in reduced stress in nurses and encouraged a commitment to remain (Akerabashah and Alias, 2018). Baek et al.'s (2019) research supported these findings, identifying the positive effects of job satisfaction and commitment to the organisation when managers exhibited values-based leadership and was considered to bring greater citizenship behaviours to the work environment, exhibited through politeness, dignity and respect (Qui et al., 2020).

Gunnarsdóttir (2014) applied a Servant Leadership Survey (van Dierendonck and Nuijten, 2011), suggesting most respondents were satisfied with their jobs, with a significant correlation existing between job satisfaction and perceptions of Servant Leadership characteristics of humility, empowerment, accountability and authenticity.

Congruent Leadership research was less well defined in supporting job satisfaction; however indications suggest that it empowers approachable leaders, supporting positive workplace relationships (Stanley, 2006a, 2006b, 2008). Likewise, Wong and Laschinger (2012) found that Authentic Leadership increased job satisfaction and performance in nurses by encouraging empowerment within the organisation with a corresponding decrease of burnout, exhaustion and cynicism (Laschinger et al., 2013. Bamford et al. (2013). From a Servant Leadership perspective, Mahon (2011) and Neill and Saunders (2008) argue that values-based leadership results in greater

job satisfaction and morale, stronger collegial relationships, greater ethical values and professional growth. It has also been argued that Servant Leadership can support greater research capacity (Jackson, 2008) and enhanced quality of patient care (Ellis, 2019; Neill and Saunders, 2008).

5.2 Staff Wellbeing

Significantly, values-based leadership and, specifically, Authentic Leadership is associated with an increase in a sense of belonging, staff wellbeing and diminishing burnout (Fallatah and Laschinger, 2016; Lee et al., 2019; Long 2020; Malilha et al., 2017). This is particularly so during the transitioning of student to qualified nurse, with Giallornardo et al. (2010) identifying that nurses who were supported by preceptors who demonstrated high levels of Authentic Leadership experienced higher engagement and were encouraged to be positive with less burnout and emotional exhaustion. These findings were supported by Laschinger et al. (2015), Alilyyani et al. (2018) and Fallatah and Laschinger (2016). Mortier et al., (2016) explored the relationship between Authentic Leadership and thriving and found significant positive relationships between vitality of staff and an Authentic Leadership approach. In relation to Servant Leadership, Mostafa and El-Motalibs (2019) and Hanse et al. (2016) found high-quality social exchanges and mutual trust were enhanced by Servant Leadership. Placing values at the core of the organisation clearly enhanced staff wellbeing (Wynia and Bedzow, 2019).

5.3 Trust and Voice

Wong and Cummings (2009), Wong et al. (2010), Wong and Laschinger (2012) and Stanley (2019) found trust in the leader was an essential factor for supporting and enabling staff to voice concerns. Wong et al. (2010) also found that trust may have a positive impact on quality patient care and workplace engagement. Leaders in positions of 'control' were seldom seen as trustworthy or appropriate from a Congruent Leadership perspective (Stanley, 2006a, 2006c, 2008, 2019). Avolio et al. (2004) and Wong and Laschinger (2012) proposed that trust increased when managers demonstrated high levels of Authentic Leadership, a view supported as a

general attribute of values-based leadership (Wynia and Bedzow, 2019). Savel and Munro (2017) indicated that Servant Leadership offers the potential for non-stereotypical 'quiet' leaders to lead. Similarly, Congruent Leadership research established that a focus on leaders without managerial or positional control was seen to engender greater trust from followers and support the 'voice' of grass roots leaders, drawing the focus of leadership back into the clinical domain (Stanley, 2006a, 2006b, 2008, 2014, 2017, 2018). Focusing on the understanding that anyone can be a leader by matching their values and beliefs with actions and linking trust, voice and values, values-based leadership can create a powerful impact on followers and colleagues (Johansson et al., 2011; Stanley, 2017 Wynia and Bedzow, 2019).

5.4 Interprofessional Working and Collaboration

Interprofessional working and education is identified by the World Health Organisation (2010) as important for improving patient care, increased job satisfaction and reducing stress among healthcare workers. Significantly, Regan et al. (2016) suggested that Authentic Leadership linked empowerment and professional environments to enhance interprofessional and collaborative working qualities through self-awareness and role modelling, trustful relationships and shared decision making. Garber et al. (2009) found that nurses' attitudes towards collaboration were generally more positive than physicians', reporting that nurses had a more positive self-perception as servant leaders than physicians. A significant focus of research related to Congruent Leadership has been to support the identification of clinical leader characteristics with Coventry and Russell (2020) identifying that clinical nurse educators demonstrated the attributes. These have been identified as being: approachability, clinical competence, effective communication, being driven by their values and beliefs about providing quality care, being empowered or empowering others, being visible in practice and being positive clinical role models (Johansson et al. 2011; Stanley, 2006a, 2006b, 2008, 2014, 2017 and 2018). All of which are attributes of enhanced collaboration and support; the approach taken by values-based leadership.

5.5 Patient-Focused Outcomes

Few studies explored patient care and patient-focused outcomes. Wong et al. (2010) used a survey to test a theoretical model, exploring the association of Authentic Leadership with trust, engagement and perceived quality of patient care, finding that nurse managers who demonstrated Authentic Leadership behaviours influenced and fostered perceptions of quality care. In a secondary cross-sectional analysis, Wong and Giallornardo (2013) found a lower frequency of adverse patient-focused outcome in areas where nurse managers demonstrated Authentic Leadership, while Dirik and Interpeler (2017) found an increase in perceptions of positive safety climates where Authentic Leadership characteristics were demonstrated. Sturm's (2009) study focused on management issues and behaviours, concluding that in the community setting, nurses act autonomously and make important clinical decisions that have enduring ramifications for patients and their families. A holistic style, underpinned by the principles of Servant Leadership, was seen to foster growth and enhance retention.

Providing high quality care is central to Congruent Leadership (Johansson et al. 2011; Ungerleider and Ungerleider, 2011). The theory grew from research within the clinical domain and unlike the Authentic or Servant leadership, has been directly linked to clinical level leadership and empirical research from its inception (Stanley, 2006a; 2006b; 2008 and 2017; Coventry and Russell, 2020). The focus explores how clinical level leaders lead in the clinical domain; Ungerleider and Ungerleider (2011, p82) suggest that employing a congruent approach to leadership may, "open the door" to achieving, "conscious competence" in practice.

6 Discussion

This review began by exploring values-based leadership and its relationship to nursing to understand how this approach to leadership may enhance leadership within the nursing profession. Other value-focused leadership theories were incorporated to achieve a genuinely encompassing view of values-based leadership. As such, a wider scope of leadership theories were included in the search, with Authentic Leadership, Servant Leadership and Congruent Leadership considered under the umbrella of a general values-based approach to leadership from a health and nursing perspective.

There is a need to look at values centric leadership in the face of perceived disruptions in the health care paradigm and in order to gain a greater understanding of how values-based leadership supports or enhances leadership in the clinical or health domain and support improvements in quality care and the patients experience of care (Kelly, McHugh & Aiken, 2012). The evidence points to considerable advantages for the application of a values-based approach to leadership, regardless of the specific values orientated approach considered. Congruent Leadership has developed from research directly involving health practitioners, although both Servant and Authentic Leadership theories are more engrained in the American and Canadian literature and have been in place for longer.

Significantly, the literature suggests that ethical leadership leads to positive and effective healthcare outcomes (Barkhordari-Sharifabad et al., 2018) and that values-based leadership enhances nurses' organisational citizenship behaviours (Qui et al. 2020, p1611). Recent increases in commercialization in health care is driving a re-focus toward values-based leadership approaches, with more ethical decision making and priority setting becoming vital (Lorentzon & Bryant, 1997). There is a significant paucity of empirical literature examining the benefits, effectiveness and limitations of both Authentic and Servant Leadership within healthcare. This is also true for Congruent Leadership, although this theory is new and the evidence base is still growing (Stanley, 2019).

7.Limitations

We acknowledge that there may be limitations with the study. The data searches for each leadership theory were undertaken by four independent researchers, and while the results and findings were cross referenced the possibility of individual idiosyncratic differences in the search process can not be excluded. While multiple publications on the search topic were located, the exclusion criteria meant that the range of publications analysed was limited.

8. Conclusion

Exploring literature to help understand values-based leadership demonstrates that although there is a paucity of quality research literature, there are several features that link and strengthen an understanding of these different theories. As such,

common themes help describe and illuminate aspects of values-based leadership which provide focus to the differing approaches and their application to practice. Each supports the importance of applying, or at least considering, the application of a values-based leadership approach in nursing. As ethical approaches to leadership link to the overall professional values of the nursing profession, these theories have particular importance. Principally these include improving collaboration, patient-focused outcomes, staff wellbeing, job satisfaction and strengthening trust and the 'voice' of nurses to enhance their participation and influence in clinical practice.

8. Implications for nursing management

This literature review combines several values-based leadership theories and summarises the benefits of values-based leadership approaches for nursing leadership. Nurse managers and leaders should recognise the benefits of a values-based leadership approach for the wellbeing of their staff, enhanced professional collaboration, its place in developing trust and the nurses voice', improved insight into clinical leadership attributes and improvements in quality patient care. In an evolving health landscape, values-based leadership offers an ethical and grounding approach to leadership, linking clearly to professional values within the profession and supporting greater staff empowerment and quality patient care.

9. Future research

It is hoped that this paper will act to trigger a wider review of values-based leadership particularly in the area of patient-focused outcomes, as we are sure there is more yet to discover about Authentic Leadership , Servant Leadership and Congruent Leadership and their contribution to an understanding values-based leadership .

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