My Personal Leadership Aspirations

Eliran Gluzman

New York City College of Technology

Leadership 3110 Section D 505

December 18, 2019

Professor Paradiso

**My Personal Leadership Aspirations**

**Introduction**

 The current semester that is now winding down has been a difficult one for me personally. I have been going through a divorce and the toll that it has taken on me mentally and physically has been exhausting to say the least. However, by attending this nursing leadership course I was able to learn concepts and ideas that have helped me look at my personal life and professional career differently. These concepts include; holding the truth, appreciation of ambiguity, diversity, holding multiple perspectives without judgment, discovery of potential, quest for adventure towards knowing, reflective learning, nurturing the intellectual and emotional self, and keeping commitments to oneself. Being a father of three children, an owner of a flooring company, and a nursing student has a lot of different responsibilities and requires different leadership skills and techniques. By learning about how to become an effective leader I am and will be able to better lead my family, employees, and in the future as a nurse manager.

**Integrity**

According to Lexico Dictionary, Integrity is defined as the quality of being honest and having strong moral principles; moral uprightness (Integrity, 2019). Although this is one of the accepted basic definitions of integrity, what does that really mean? Having the right quality or makeup of the attribute of integrity is crucial when discussing the role of a nurse as a leader. I haven’t started my professional career as a nurse yet, but I know that having a strong sense of integrity and knowing where my heart and mind really lays is an important moral compass that I need to have once I start working as a nurse. As a leader I will be looked at by my subordinates for guidance, honesty, and direction.

 In the article “PERSONAL INTEGRITY AND LEADERSHIP”, by Antonius Gea, it states “This study finds that the leaders are out of touch and must tap into the information at the employee level by providing opportunities for leaders and employees to interact directly and regularly on ethics issues. Ethics needs to be a bottom-up phenomenon so that leaders can be aware of the perceptions of employees” (Gea, 2016). As a leader I would do my best to always interact with my subordinates, hear how they are feeling and see if there is anything they need, while also upholding ethical and moral standards. By doing so, it would help me recognize any issues that I might be overlooking. Being honest and building a trusting relationship with my team will allow me to gain their trust and respect and will help improve the integrity of the team/unit as a whole and individually. This will help make the team/unit run more efficiently and increase productivity, which in turn can save time and money for the institution.

 This semester I was assigned to the Ambulatory Surgery Unit at Maimonides Medical Center and shadowed the nurse manager by the name of Roger Bellow. I got to see first hand how it is to run a unit and constantly juggle many things at one time while wearing many different hats. At any given time, Roger would have to constantly find solutions for issues ranging from dealing with last minute cancellations to surgeons needing equipment that was not available or working properly. However, despite the type of problem, Roger always remained calm and professional while also displaying his integrity to his team and patients alike. I found Roger to be a great leader who I would love to emulate. I believe that with time and experience I will be able to be a leader with integrity that my team, unit, and patients will come to trust and rely on.

**Ambiguity**

As a new nurse I have to learn how to be confident in my decisions while having some form of uncertainty or doubtfulness in the back of my mind. From the first day in nursing school we were taught that nurses use the “nursing process” in order to analyze, interpret, and seek solution(s) to any given problem. This process can be used in almost all aspects of life and can help a leader make decisions using critical thinking skills. In my own personal experience as flooring salesman and installer, I sometimes find myself in situations where I don’t have all the answers or knowledge that is required. However, I am willing to seek help from others in order to find the best solution. This would be the same approach I would use in the future as a nursing leader.

**Diversity**

Diversity inevitably contributes to cultural differences in a variety of ways. As a nurse I need to be open to new ideas and opinions that I may not be used to or agree with. This indicates that it would be my responsibility to uphold a high level of cross-cultural fairness. Cross-Cultural fairness “is the degree to which cultural background, class, disability, and gender do not affect test results or treatment” (Neukrug 2015) In nursing school I was taught that nurses are not supposed to be judgmental and instead be accepting of everyone we encounter, no matter their race, religion, gender, or personal beliefs. In my personal view I try to be as open and accepting to everyone and their cultural background, so long as they don’t want to cause intentional harm to anyone. However from my point of view as a religious Jew I can see how I might also have some cultural or religious biases. It is important to be aware of our own personal biases in order to make unbiased decisions and put our patient’s needs ahead of our personal views. Cultural diversity is a big part that makes up New York City, which makes it a unique place to work and interact with others as a nurse.

In my personal experience in second semester of nursing school, I was assigned by the nurse on the unit to check the blood glucose level of multiple patients. As I entered a patient's room I saw what I assumed was a gentleman and referred to him as such. The patient turned out to be a woman who was upset with me referring to her as a man. I immediately apologized and tried to make up an excuse but I was completely in the wrong. This is a great example of how I was not aware of my environment and assumed the patient was a man because of her physical appearance, which is influenced by own bias. From that day on I always make sure to be more aware of my environment and personal biases. By learning about other cultures, religions, and races I will be able to better communicate and understand my patient’s needs.

**Perspectives**

The first step in the nursing process is assessment, which is when the nurse gathers all vital information needed in order to plan a course of action to help the patient. It is important to consider multiple perspectives during the decision-making process and assessment. By looking at multiple sources for insight and information I will be able to identify what the evidence suggests and narrow it down to the best viable option(s). Exploring different perspectives before making a final decision creates a holistic process, which has a positive influence on the outcome (Neukrug 2015). The more experience I will obtain in my critical care, the more I will be able to identify and explore multiple perspectives before making a decision.

In today's medical field patient centered care is crucial and the main focus. In the article “Shared decision making: Concepts, evidence, and practice” by [Stiggelbout, A.M](https://onesearch.cuny.edu/primo-explore/search?query=creator%2Cexact%2CStiggelbout%2C%20A.M%20%2CAND&tab=default_tab&search_scope=everything&vid=ny&lang=en_US&mode=advanced&offset=0), [Pieterse, A.H, and](https://onesearch.cuny.edu/primo-explore/search?query=creator%2Cexact%2C%20Pieterse%2C%20A.H%20%2CAND&tab=default_tab&search_scope=everything&vid=ny&lang=en_US&mode=advanced&offset=0) [De Haes, J.C.J.M](https://onesearch.cuny.edu/primo-explore/search?query=creator%2Cexact%2C%20De%20Haes%2C%20J.C.J.M%2CAND&tab=default_tab&search_scope=everything&vid=ny&lang=en_US&mode=advanced&offset=0), it states “[Shared decision making](https://www-sciencedirect-com.citytech.ezproxy.cuny.edu/topics/medicine-and-dentistry/shared-decision-making) (SDM) is increasingly advocated as the preferred model to engage patients in the process of deciding about diagnosis, treatment or follow-up when more than one medically reasonable option is available” ([Stiggelbout,](https://onesearch.cuny.edu/primo-explore/search?query=creator%2Cexact%2CStiggelbout%2C%20A.M%20%2CAND&tab=default_tab&search_scope=everything&vid=ny&lang=en_US&mode=advanced&offset=0) [Pieterse,](https://onesearch.cuny.edu/primo-explore/search?query=creator%2Cexact%2C%20Pieterse%2C%20A.H%20%2CAND&tab=default_tab&search_scope=everything&vid=ny&lang=en_US&mode=advanced&offset=0) [De Haes,](https://onesearch.cuny.edu/primo-explore/search?query=creator%2Cexact%2C%20De%20Haes%2C%20J.C.J.M%2CAND&tab=default_tab&search_scope=everything&vid=ny&lang=en_US&mode=advanced&offset=0) 2015) By integrating our patients in their own healthcare planning we give them a platform to voice their own opinion and desires in the treatment options they have. As a nurse, I will do my best to use this concept of SDM to engage my patients and together with the entire healthcare team come to a decision that everyone is either happy or content with.

**Potential**

In Judaism we are taught that we all have the potential to become as great as Moses. However, the Torah states that there never was or will be a prophet like Moses. So what does that mean? Can we be as great as Moses or not? The answer is that we each have the ability to reach our full potential like Moses reached his. The same could be said about nursing leaders. A good leader will emulate good attributes and inspire his team to help them reach their full potential. A good transformational leader motivates and encourages others to reconstruct problems and identify new ways of doing things.

In my life I try to be a good leader. Whether in my role as a father or owner of a flooring company. How could I expect my children or employees to listen and follow my directions if I don’t do as I preach? When I'm dealing with my children, I always try and lead by example. The same tactic could be applied when it comes to being an effective nursing leader. If I want to tap into the full potential of my team members I need to be able to show them that I know what I am talking about and requesting of them. The best way to do that is by getting my hands dirty and leading by example. A good leader also listens to his team in order to truly understand what it is they want or need and react accordingly to a given situation.

**Knowledge**

Life is one big school that we constantly learn new things about and from. What I mean by that is, since the day we are born we are constantly learning. The quest for knowledge is a lifelong one, it is ever- changing and constantly evolving. As a nursing leader it is vital to constantly stay up to date on the most recent medical research findings and changes. Patients come into the hospital seeking help with their health issues and expect the people treating them to use the best evidence based practices available. By demonstrating high levels of competency in clinical reasoning and leadership, nurses can provide adequate patient centered and evidence based care. By implementing new knowledge in the clinical setting leaders can improve the efficiency of their unit(s) and have better outcomes for their patients as a result. The benefit of constantly seeking new information and skills is that it influences not only the person who’s learning this new information but the people around them get inspired as well.

Nurses and nursing leaders can stay current with the latest data by taking online or in person continuing education courses, reading peer reviewed journal articles, and attending medical conferences. In a recent study published in Nursing Critical Care 2019 it talks about a new learning design program that was implemented in the MICU of a San Diego, California based hospital. The learning station design is called MILE and is a multimodal learning station based on the concept of learner directed education especially designed for MICU nurses (Hammer, Sterling, Stromack, Brown 2019). The MILE program is made up of nurse experts with the main goal of educating staff, precepting, mentoring, and presenting programs that can help solve problems and improve knowledge deficit (Hammer, Sterling, Stromack, Brown 2019). I believe that if more hospitals were to use such programs like the “MILE” in their facility it would be a great way to enhance the knowledge of the nurses and improve patient outcomes.

**Reflective Learning**

While learning is a lifelong job it must be anchored to either a physical or experienced event in order to truly retain and utilize it properly. In Judaism we study the Torah and all the laws that are in it, but we are obligated to not only study these laws and understand them but to physically do them every day. The same is true when it comes to the learning we do. As a new nurse I need to continuously learn new skills and put them into practice in order to perfect them.

Another way to achieve this is by using reflective learning. One of the developers of reflective learning is David Kolb. According to Kolb, learning and knowledge is achieved through the transformation of experience ([Peña, Pumarola, Aguilera, Tomàs, Farré, Ferrando](https://www-sciencedirect-com.citytech.ezproxy.cuny.edu/science/article/pii/S0260691716300636#!), 2015). Furthermore reflective learning provides different ways to make sense of the experiences, while being able to identify the results, and establish a concrete foundation that will lead to more learning and knowledge ([Peña, Pumarola, Aguilera, Tomàs, Farré, Ferrando](https://www-sciencedirect-com.citytech.ezproxy.cuny.edu/science/article/pii/S0260691716300636#!), 2015).

**Nurturing the Intellectual and Emotional Self**

As important as it is to be up to date on the most current evidence based practice and literature, it's equally, if not more important, to take care of oneself emotionally, physically, and spiritually. As a nurse I am expected to take care of my patients and give them all of my time, attention, and care. However, if I don't take care of myself I will fall short of this goal and as a result my patients, family, and coworkers may become affected in negative ways. One negative outcome of neglecting one's emotional wellbeing is a condition called compassion fatigue. This condition has both an emotional and physical component to it. Emotionally, the nurse may become withdrawn and apathetic towards the patients ailment. Physically, the nurse may experience fatigue, headaches, and backaches. Nurses can reduce their chances of experiencing compassion fatigue by taking care of themselves.

As I mentioned in my introduction, this semester has been a difficult one for me, more than any previous semester. I experienced this feeling of being indifferent or apathetic towards my children, parents, work obligations, and schoolwork. I hated feeling this way but could only do so much to help get myself out of this funk. Every Wednesday afternoon when I had to attend class for my nursing leadership class, I would find it both a bit annoying and helpful at the same time when the professor would ask the class, “What are you grateful for?” or “What did you do for self care this week?” In reality though the professor was trying to make us be more self aware of our feelings and gauge our own personal level of appreciation for what we have. By asking me these questions the professor would help me be more grateful for what I have and also remind me to take care of myself in order to be able to help others that may be depending on me.

**Keeping Commitments to Oneself**

If history has taught us anything it’s that humans evolve constantly. We’re always looking to improve our lives and make them easier, more productive, and self-centered. Look at all the technological advances we have achieved and what does it all come down to? Our own self needs. There is no greater example of this than in all the “Iphones” and “Ipads” of the world. Everything is about ourselves and taking selfies and posting them on social media in order to get likes and comments. Instead of enjoying our food, people find it necessary to take pictures of their food and share it with everyone they know.

Instead of caring about how many likes we’ll get for a picture we posted, let’s start taking care of ourselves. As a nurse or nurse leader I will do my best to set personal goals to better myself in my career and personal life, even if it’s small daily goals. I would like to be able to have a well-balanced personal and professional life. I know it won’t be easy but if I take care of myself and keep the commitments I made myself, I will be able to grow and balance my responsibilities more adequately.

**Conclusion**

In conclusion the experiences I had in clinical coupled with the class discussions have really opened up my eyes in what direction I want my personal and professional life to go in. This means that I have to put my self-care needs higher on my priority list so that I may be able to function properly which, in turn will help me be more efficient and helpful in other areas of my personal and professional life. I would love to build a long and successful nursing career that I can be proud of and have people look up to me for guidance and help. While at the same time feel like I am contributing and making a positive difference in people’s lives. This will not be an easy or short task to accomplish, but with hard work, dedication, self-sacrifice, and G-D’s help, of course, I believe that I can achieve it.

**References**

Antonius Gea. (2016). Personal Integrity and Leadership. *Humaniora*, 7(3), 359-369.

Fernández-Peña, R., Fuentes-Pumarola, C., Malagón-Aguilera, M., Bonmatí-Tomàs, A., Bosch-Farré, C., & Ballester-Ferrando, D. (2016). The evaluation of reflective learning from the nursing student's point of view: A mixed method approach. *Nurse Education Today,* *44*, 59-65.

Hammer, B., Sterling, M., Stromack, J., & Brown, L. (2019). Going the extra “MILE”: Continuing education for MICU nurses. *Nursing Critical Care,* *14*(3), 39-43.

Integrity (2019) *Lexico Powered by Oxford* . Retrieved from <https://www.lexico.com/>.

Neukrug, E., & Fawcett, R. C. (2015). *Essentials of testing and assessment: a practical guide to counselors, social workers, and psychologists*. Stamford, CT: Cengage Learning

Stiggelbout, A., Pieterse, A., & De Haes, J. (2015). Shared decision making: Concepts, evidence, and practice. *Patient Education and Counseling,* *98*(10), 1172-1179.