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After graduating with a degree in Pharmacology in 2002, Helen qualified as a Registered Veterinary Nurse in 2005. She began a nine-year stint as a locum nurse working nationally and internationally, developing experience in referral medicine and surgery, charity practice, emergency nursing and exotics. During this time she spent five years on BVNA council in a variety of roles, culminating in her being awarded honorary membership in 2016.

In 2013 she qualified as a human-centred nurse. After two years working on intensive care, she moved to the transplant team supporting patients pre- and post-transplant. Currently she works at Addenbrookes Hospital, Cambridge on the Transplant High Dependency Unit.

Helen remains a RVN and has developed a strong interest in the principles of One Health and chairs the Veterinary Nursing Futures One Health Committee. She regularly lectures and writes about concepts and ways of working that may be shared between the professions to support clinical and professional practice. Her first textbook, on Veterinary Nursing Care Plans was published earlier this year. She is currently working on an MSc in Healthcare Management.

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Leadership for frontline veterinary nurses: the theory

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ABSTRACT: Increasingly, leadership is being acknowledged as a shared responsibility across a professional team, rather than being reserved for those in a position of authority. There is support for team members becoming leaders within their own areas of expertise with the aim of supporting the broader leadership of an organisation. This approach can be a valuable opportunity for veterinary nurses to learn and practise leadership skills. This article addresses some of the theoretical concepts of leadership and aims to explain why learning and practising leadership behaviours at all levels of veterinary nursing can benefit the individual, the veterinary team and ultimately the veterinary nursing profession.

Keywords: Leadership; One Health; professional development; leadership skills; leadership behaviours; leadership theory

Introduction

The word leadership is one that resonates throughout both professional settings and media headlines. Insufficient or bad leadership is often cited as the reason for poor performance throughout a range of situations. Most recently, headlines have blamed leadership for problems with the railway, banking and politics. Hartley and Benington (2010) describe how “better leadership” is seen as central to improving the quality of human-centred healthcare and the improvement of organisational processes within the National Health Service (NHS).

This article aims to explain the theory of shared leadership, where leadership is relevant to all members of an organisation, including “frontline staff”, those who do not hold a formal authority role within a team but who demonstrate excellence with their own scope of practice. These staff members may benefit individually from exploring leadership and leadership behaviours. Furthermore, incorporating leadership behaviours into their everyday practice could support their own organisation and potentially their profession as a whole.

In 2000, The NHS Plan (Department of Health, 2000) argued for more attention to be paid to leadership within human-centred care and this has been supported with more recent seminal reports into poorly

performing hospitals that have offered an insight into the influence of leadership on patient outcomes. Specifically, the Francis (2013) report investigated compromised standards of care at Mid Staffordshire Foundation Trust and identified a link between poor leadership and suboptimal care. The Berwick (2013) Review into Patient Safety within the same year also identified the same links.

These reports, combined with an ongoing need to address patient safety, have resulted in leadership becoming a high priority within nursing in the NHS. The Francis (2013) report identified that successful human healthcare organisations had a culture of “thousands of leaders”, meaning that everyone at all levels displays the values of leadership through their behaviour at work. Whitby (2018) states that within healthcare it should be the responsibility of all staff, including nurses, to provide leadership, rather than viewing it exclusively as the role of those in senior positions. To support this concept of shared leadership, training is offered from undergraduate level throughout all stages in of human-centred nursing.

Within the veterinary profession, leadership is a concept that is being discussed more and more. Evidence suggests poor leadership may affect patient outcomes and quality of care (Oxtoby et al., 2015). Furthermore,

Pearson et al. (2018) describe that leadership has previously been given little priority within the veterinary profession which has led to confusion and inadequate understanding of the concept. The Vet Futures report in 2015 (Vet Futures Board, 2015) identified leadership development as a key priority for the sustainable long-term future of the profession. In their strategic plan for 2017–2019 the RCVS focuses on developing leadership within the veterinary professions. The RCVS leadership initiative describes three areas of work, supporting leadership for everyone, leading the profession and supporting future leaders (RCVS, 2017).

Supporting leadership for everyone resonates with the concept of shared leadership being promoted within NHS nursing and is equally applicable within veterinary nursing. The recent VN Futures report (VN Futures Action Group, 2016) highlighted the need for leadership training within veterinary nursing and one of the key actions of the report is to develop lifelong leadership programmes so that staff members taking on leadership roles receive training and support. Historically many veterinary nurses in traditional leadership roles did not receive specific training, but rather evolved into these roles simply because they were the most experienced or were the only ones who expressed an interest.

It might be hypothesised that this emphasis on leadership is particularly relevant given the relatively immature nature of the veterinary nursing profession. Strong leadership behaviours, demonstrated at every level of experience and qualification, will promote the profession and support its growth and development. The introduction of leadership education starting at student level, then ongoing throughout an individual's veterinary nursing career will support the development of well-rounded veterinary nurses with the confidence and ability to take on senior roles. Such roles may be within their own clinical working environment as well other professional roles in industry, government, education or political representation with the British Veterinary Nursing Association and RCVS Veterinary Nurse Council.

The ongoing interest in leadership throughout the veterinary profession is represented within the education sector, with continuing professional development events. Professional associations have started offering specific leadership programmes to incorporate the theoretical and practical principles of leadership. The RCVS have recently launched a pilot training programme, The Edward Jenner Veterinary Leadership Programme (Royal

College of Veterinary Surgeons, 2018) which has been developed in conjunction with the NHS Leadership Academy to encourage the development of everyday leadership skills for the veterinary team.

Despite this ongoing attention and commitment to improve leadership skills within the veterinary team, it can be difficult for frontline nursing staff to comprehend how the concept of leadership is relevant to them. The first step in appreciating the relevance of leadership across the veterinary nursing team is to understand its definition and address the difference between leadership and management. Secondly, it is important to understand why the veterinary profession needs robust leadership at all levels of the veterinary team. Lessons can be learnt from the NHS where transferable concepts highlight the need for ongoing resources to be directed to leadership training. Finally, further lessons can be learnt from the NHS as to why shared leadership, the distribution of leadership responsibilities across the team, at all levels of experience and qualification may be a highly effective way of working and can support personal development, positive local outcomes and development of the profession as a whole.

What is leadership?

There are many definitions of leadership, but, for the purposes of this article, leadership can be described simply, as a process of influencing others to achieve a common goal. Using this definition, it is easy to see how all members of staff have a leadership role, albeit usually confined to their own area of expertise. Every time a member of staff supports a new team member with their learning, they are demonstrating leadership. Every time a team member makes a suggestion to improve a service, they are displaying a leadership behaviour.

Leadership behaviours can be described as those that facilitate a group of people working towards a common goal. Within the NHS, the Leadership Framework (NHS Leadership Academy, 2011) forms the foundation of leadership behaviours that all NHS staff should aspire to (Table 1). It is based on the concept that leadership is not restricted to those in formal leadership roles, but that there is a shared responsibility for the success of an organisation. Using this model provides a framework for leadership within a veterinary team, with individuals able to identify key skills they might want to learn and practise.

Leadership opportunities within nursing may present themselves anywhere within

the working practice day, during patient handovers, when teaching and sharing knowledge, in team meetings and when administering clinical care. Examples of positive leadership behaviours can be as simple as the fair allocation of breaks, or more significant such as responding to a crisis in a calm and organised manner, which supports effective clinical care in a time of high pressure.

Is leadership just another word for management?

The words leadership and management are often used interchangeably, but describe different concepts. Management strategies are created by team members who hold predefined roles and responsibilities, usually associated with a level of authority. They are usually tasked with operating and maintaining current systems, monitoring and controlling work streams and are concerned with the implementation of set practices through budgeting, planning and staffing decisions (Storey, 2004). Usually, such decisions involve the distribution of resources with a particular focus, without influencing people to actually use them. Typically, management is a short-term and single-focus approach (Hartley & Benington, 2010).

In contrast, leadership is transformative, the influencing of people to behave or work in a particular way, and is usually linked to a long-term focus through the pursuit of new visions and goals. The emphasis is usually on empowering individuals, rather than simply directing them. Leadership is broader than management as it tends to involve a wider range of people, as opposed to just those who are involved in a relationship based on authority (Hartley & Benington, 2010).

Why is there a need for robust leadership within healthcare?

There are a number of factors that support the NHS prioritising leadership as a key element of staff development. There are new, emerging disease profiles that require the acquisition and practise of new nursing skills, alongside new technology and research linked to existing health conditions. There is a need for the adaption of acute-care models to chronic health promotion models. Patients have higher expectations and an associated increased healthcare intelligence and require more support and education. Each of these factors will result in changes to established

Table 1. The NHS leadership framework.

Demonstrating personal qualities	Working with others	Managing services	Improving services	Setting direction
Developing self-awareness	Developing networks	Planning	Ensuring patient safety	Identifying contexts for change
Managing yourself	Building and maintaining relationships	Managing resources	Critically evaluating	Applying evidence and knowledge
Continuing personal development	Encouraging contribution	Managing people	Encouraging improvement	Making decisions
Acting with integrity	Working within teams	Managing performance	Encouraging transformation	Evaluating impact

ways of working and therefore all require a level of leadership and demonstration of leadership behaviours to support long-term adaptation of traditional nursing roles.

These factors are equally applicable to veterinary nursing. Emerging disease within the veterinary sector due to an increasing number of imported animals has led to the need for new knowledge and sharing of professional information across the sector. Health promotion nursing is needed within veterinary healthcare as animals are living longer with chronic disease and owners require ongoing support to keep their much-loved pets happy and healthy. Increased client expectations in line with clients knowing and understanding more about their own health is likely to mean the veterinary nursing profession is increasingly at the front of owner education and support. Supporting the use of new technology and techniques in line with evidence-based practice is an ongoing journey that is relatively new to veterinary nursing and therefore can be challenging.

Like human-centred nursing, each of these factors requires leaders and leadership behaviours to tread the path for others to follow. In addition, the veterinary profession is undergoing ongoing increasing corporatisation, which may offer leadership opportunities for veterinary nurses as a practice transitions between independent management and group management.

Why is shared leadership supported in healthcare?

Shared leadership, the concept of distributing leadership roles and responsibilities across a team, rather than restricting them to those in a position of authority, has been embraced by the NHS for a number of reasons.

Primarily, it is the increasing complexity of healthcare, combined with rapidly evolving practices and processes that has led high-ranking organisational leaders to rely

on experts within their specific areas to take on leadership roles. Significantly, problems that arise in healthcare are often described as wicked, meaning they are problems that are new, complex and involve a wide range and number of stakeholders who often have contradictory views. They are difficult to solve as they often have multiple, complex potential solutions.

The logical conclusion, therefore, is that no one person can solve these problems or lead such complex organisations alone. Sharing responsibility allows organisational managers to engage with relevant stakeholders, taking advantage of their specific skills and knowledge. No one person can keep up with each specialist area of healthcare or be an expert on every problem in healthcare and therefore gathering a robust leadership team around them can support decision-making on a broader organisational level. Again, this is equally applicable to veterinary nursing. A rapidly changing environment, both clinically and non-clinically, combined with an increasingly complex patient group mean that single-person decisions are harder to both make and implement. Stakeholder consultation and engagement is crucial to make relevant leadership decisions that will be implemented effectively.

Why should veterinary nurses care about leadership?

Embracing leadership skills and behaviours is a prime opportunity for veterinary nurses to push themselves forward within the practice team, add to their portfolio of skills and potentially develop as role models to move the profession forward.

Leadership behaviours are not and should not be reserved for those in senior positions. In striving for effective clinical practice and a supportive working environment all nurses can demonstrate leadership throughout their daily work. Furthermore, taking advantage of the current rise in leadership

training and development can support those veterinary nurses who are keen to rise through the ranks and take on senior roles. By taking the initiative to learn and practise leadership behaviours early in their careers, such nurses can begin to hone their skills and learn from any mistakes, making the transition into senior roles much easier in the future.

The second part of this article will suggest four practical leadership behaviours adapted from the NHS Leadership Qualities Framework (NHS Leadership Academy, 2011) that veterinary nurses could consider adopting as part of their ongoing role within practice. In embracing such behaviours, they can support their own personal development, support improved practice outcomes and potentially contribute towards strengthening and growing the veterinary nursing profession.

Disclosure statement

No potential conflict of interest was reported by the author(s).

References

- Berwick, D. (2013). Berwick review into patient safety. Retrieved from: www.gov.uk/government/publications/berwick-review-into-patient-safety
- Department of Health. (2000). *The NHS Plan: A plan investment, a plan for reform*. London, UK: The Stationery Office.
- Francis, R. (2013). *Report of the Mid Staffordshire NHS foundation trust public inquiry. Executive summary*. London, UK: The Stationery Office.
- Hartley, J., & Benington, J. (2010). *Leadership for healthcare*. Bristol, UK: Policy Press.
- NHS Leadership Academy. (2011). NHS Leadership Framework. Retrieved from: www.leadershipacademy.nhs.uk/wp-content/uploads/2012/11/NHSLeadership-Framework-LeadershipFramework-Summary.pdf
- Oxtoby, C., Ferguson, E., White, K., & Mossop, L. (2015). We need to talk about error: Causes and types of error in veterinary practice. *The Veterinary Record*, *177*(17), 438.
- Pearson, C., Butler, A., & Murray, Y. (2018). Understanding veterinary leadership in practice. *Veterinary Record*, *182*(16), 460.
- Royal College of Veterinary Surgeons (RCVS). (2017). RCVS Strategic Plan 2017–2019. Retrieved from www.rcvs.org.uk/how-we-work/the-role-of-the-rcvs/strategic-plan/
- Royal College of Veterinary Surgeons (RCVS). (2018). RCVS Leadership Initiative. Retrieved from www.rcvs.org.uk/lifelong-learning/rcvs-leadership-initiative/
- Storey, J. (2004). *Leadership in organisations: Current issues and key trends*. London, UK: Routledge.
- Vet Futures Board. (2015). Taking charge of our future: A vision for the veterinary profession for 2030. Retrieved from: www.vetfutures.org.uk/resource/vet-futures-report/
- VN Futures Action Group. (2016). VN Futures Report. Retrieved from www.vetfutures.org.uk/resource/vn-futures-report-and-action-plan/
- Whitby, P. (2018). Role of front-line nurse leadership in improving care. *Nursing Standard*, doi: 10.7748/ns.2018.