

Authentic Leadership and the Impact on Psychological Safety and Relationship Quality

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Disclosures

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LEARNING OBJECTIVES

At the conclusion of the presentation participants will be able to:

- Discuss the relational constructs of leadership, relationship quality and psychological safety in the creation of a healthy work environment in the acute care setting.
- Appraise the effect of Authentic Leadership skills on work environment within the acute care setting.
- Reflect upon their own relational strengths and weakness within the workplace to identify areas requiring additional attention to improve overall health of the workplace.



Variables of relating

- Leadership style
- Nurse to nurse relationship quality
- Interactional civility
- Psychological safety



A relational event or a technical exchange?

- A study of 10,000 nurses - mortality rate 60% higher if poorly rated work environment (Aiken, Clarke, Sloane, Lake & Cheney, 2008)
- Meta-analysis identified interpersonal relationships as essential for healthy work environment (Kramer, Schmalenberg & Maguire, 2010)
- Manager support & nurse-MD communication essential for healthy work environment BUT communication was positive only in the context of a quality relationship (Kramer & Schmalenberg, 2008)



The importance of relationships in healthcare

- Relationship on collaboration (Gittel, et al 2000), disruptive behavior (Rosenstein & O'Daniel, 2005), lateral violence & bullying (Vessey, DeMarco & DiFazio, 2010).
- Quality relationships among providers linked to safe patient care
- The IOM (2011) is calling for interdisciplinary education and improved collaboration in the acute care setting



High Quality Relationships (HQR)

- Dutton and Heaphy (2003) identified 3 capabilities of HQRs
 - Emotional carrying capacity, the tensility of the tie & degree of connectivity
- High-quality relationship (HQR) defined as a connection “marked by vitality, mutuality & positive regard” (Dutton & Heaphy, 2003)



Authentic Leadership (AL)

- Positive relationally based model (Avolio, et al., 2004)
- Contains core elements of other positive models (TL & Ethical)
- The AL shapes the environment through the possession & modeling of 4 elements:
 - self-awareness
 - balanced information processing
 - relational transparency
 - internalized moral perspective



Authentic Leadership Research

- AL significantly r/t job satisfaction with the relationship mediated through empowerment (Wong & Laschinger, 2013)
- Relationship between AL & perceptions of quality care by nurses, mediated by trust in manager (Wong, Laschinger & Cummings, 2010)
- Both AL and structural empowerment were significantly related to a new nursing graduate's perception of interprofessional collaboration (Laschinger & Smith, 2013)



Psychological Safety (PS)

- The tacit knowledge or belief that it's interpersonally safe to be vulnerable among colleagues (Edmondson, 1999; Kahn, 1990).
- Fosters honesty, willingness to present divergent ideas, safe to admit errors, openness in asking for help and other risk-taking behaviors needed for effective coordination of complex care
- Without it- greater risk for error and poor outcomes (Edmondson, 2004; 2012)



Specific Aims

- To explore the congruence between nurse director's self-evaluation of authentic leadership style and staff nurses' evaluation of leadership style.
- To determine the impact of leadership style on team psychological safety.
- To identify if leadership style's impact on psychological safety is mediated by high quality relationships.



The Study Design

- A non-experimental predictive survey design
- Convenience sampling
- Staff nurses and nurse directors from general medical-surgical and critical care units
- To improve response rate, a \$10.00 gift card incentive was offered upon completion of this confidential survey



Instrumentation

- Authentic Leadership Questionnaire (ALQ) - a 16-item measure with four subscales which correspond to the four components identified in the model
 - Reliability previous studies: .70 - .90; current .98
- High-Quality Relationship measure - a 20-item measure
 - Reliability previous studies .72-.85; current .93
- Psychological Safety - a 7-item instrument
 - Reliability previous studies 0.78 to 0.82; current .74
- Workplace Incivility Scale (WIS) - a 6 -item inst.
 - Reliability in previous studies ranges .86 to .88 and current study .90



Procedure

- Informational session for the nurse directors
- Email notice 4 days prior to release of survey link
- Second email provided a link to the confidential survey
- Two week later a reminder sent for those who did not respond
- \$10.00 gift card incentive was offered upon completion of the confidential survey



The Sample

- Staff nurses and Nurse Directors from general medical and surgical units within an acute care hospital setting
- A response rate of usable surveys were 55% for the nurse directors ($n = 17$) and a 21% response rate for staff nurses ($n = 455$)
- A modest effect size of 0.2 for the relationship ALQ and psych. Safety
- G-Power software (Faul, Erdfelder, Lang, & Buchner, 2007) for correlational analysis, a recommended power of 0.80, alpha level of .05, and a two-tailed test, we estimated a needed sample size of 321 or greater



P < .050

Correlation of major study variables for staff nurses

	ALQ	HQR	WIS	PS
ALQ	1			
HQR	.338**	1		
WIS	-.339**	-.551**	1	
PS	-.028	-.077	.036	1

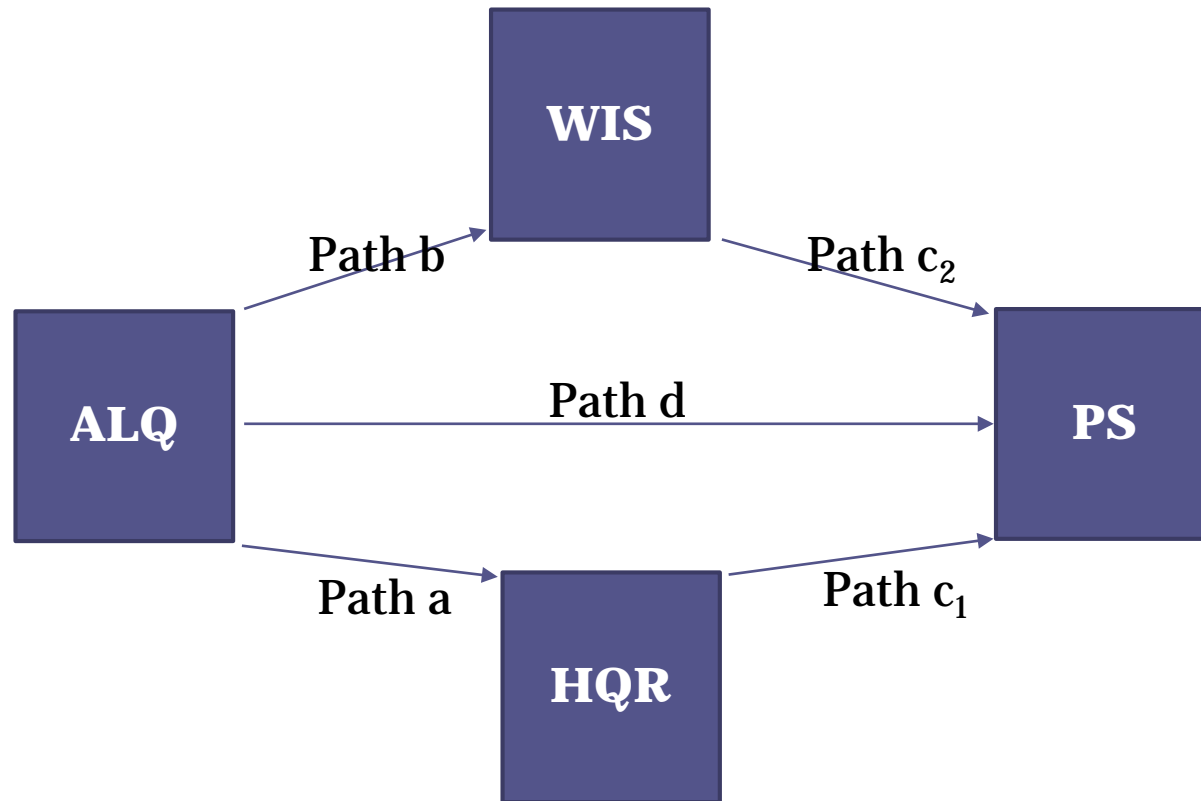
Note: ALQ – Authentic Leadership Scale; HQR – High Quality Relationship Scale; WIS – Workplace Incivility Scale; PS – Psychological Safety; Staff nurse n = 455
 ** Significant at less than .010

Covariance matrix for major study variables

	ALQ	HQR	WIS	PS
ALQ	1.200			
HQR	.220	.352		
WIS	-.311	-.274	.700	
PS	-.058	-.085	.055	3.459
Means	2.536	3.540	2.014	2.536
SD	1.096	.593	.837	1.860
Skewness (SE)	-.550 (.114)**	-.393 (.114)**	1.221 (.114)**	-5.777 (.114)**
Kurtosis (SE)	-.640 (.228)	.685 (.228)**	1.687 (.228)**	33.360 (.228)**

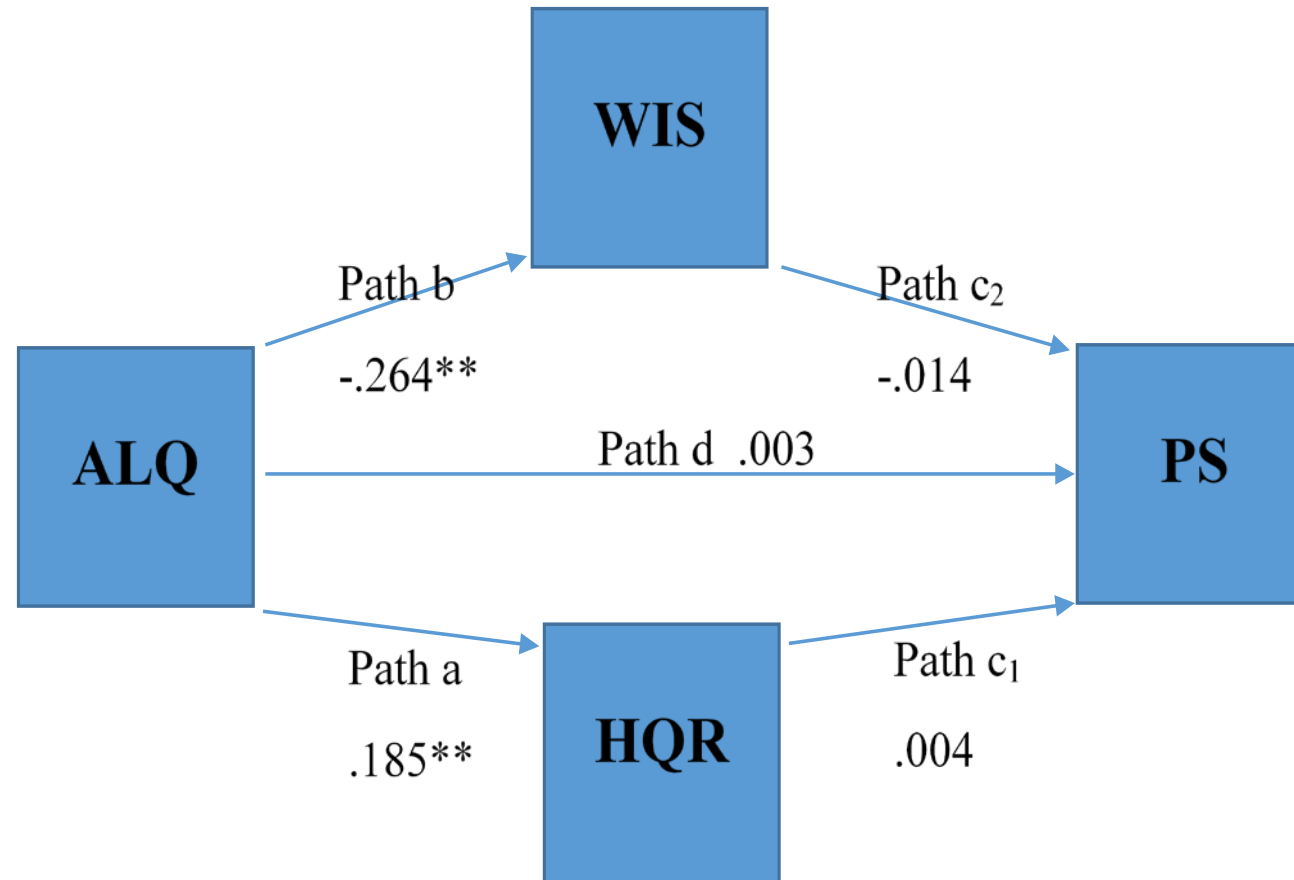
Hypothesized Model Paths

- Model



Significant $p < .050$

Mediation Analysis



Discussion and Limitations

- Higher levels of authentic leadership was correlated with higher levels of relationship quality and lower levels of incivility.
- This supports the notion that leadership style does impact the relational tone of a unit, thereby influencing the peer-to-peer relationships within the team.
- The lack of direct or indirect relationship of leadership to psychological safety may indicate either different or additional factors involved in the mediation.



Discussion and Limitations

- A narrow leadership style instrument was used but a broader measure, such as Multi-factor scale might have better captured the relationship with psychological safety
- Complex nature of organizational research may require a more complex model



Discussion and Limitations

- Timing of survey release
- Inability to conduct a team based measure
- Use of convenience sampling
- Unionized facility



Future Studies

- Broaden literature scope to identify additional mediating variables
- Multi-site study with probability sampling and perhaps within unit analysis of the variables identified
- A comparison of union and non-union facilities to determine whether there are unique factors related to power, trust and psychological safety
- Analysis of ALQ subscales to determine with greater specificity which characteristics have a stronger impact on identified variables



Contribution

- Supports the notion that front line management can set the relational tone of a patient care unit
- Supports current literature regarding relationally based leadership skills contributing to healthy peer-to-peer relationship building
- With ongoing concerns regarding negative workplace behavior such as incivility, these outcomes can guide future interventions for the same
- Contributes to learning objectives in leadership education



Questions

