Title: Cultivating ethical leadership in the recovery of COVID-19

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1. Have made substantial contributions to conception and design, or acquisition of literature, or analysis and interpretation of literature (KM; OD; CO’D; CAV);
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Cultivating ethical leadership in the recovery of COVID-19

Aim: The necessity of fostering ethical leadership in the recovery of COVID-19 is proposed.

Background: Supporting physically and emotionally exhausted nurses, whilst ensuring quality standards of care delivery in the recovery phase of COVID-19, requires careful, considerate and proactive planning.

Evaluation: Drawing on literature and utilising Lawton and Paez Gabriunas' (2015) integrated ethical leadership framework (purpose, practices, virtues), possible practical suggestions for the operationalisation of ethical leadership are proposed.

Discussion: Nurse managers must maintain ethical vigilance in order to nurture values driven behaviour, demonstrating empathy and compassion for nurses experiencing physical and emotional exhaustion because of COVID-19. It is important that open dialogue, active listening and self-care interventions exist. Nurse managers have an essential role in inspiring and empowering nurses, building morale and a collective commitment to safe quality care.

Conclusion: Nurse managers need to consider ways of empowering, supporting and enabling nurses to apply ethical standards in everyday practice.

Implications for Nursing Management: Fostering ethical nurse leadership requires careful and sensitive planning, as well as charismatic, compassionate and inspirational leaders. Supporting staff through respect, empathy, role modelling and
genuine conscientiousness is essential for increasing job performance and sustaining an ethical work environment.

Key words: COVID-19; ethical leadership; self-caring behaviours; positive working environments; professional resilience.

Introduction:

Nurses must be commended for their commitment in responding to the global COVID-19 pandemic. However, nurses are experiencing extreme pressures as a result of poor preparedness for this pandemic, unprecedented high volumes of critically ill patients and limited available resources (Smith and Cheung Li, 2020). ‘Complexity compression’ (Krichbaum et al., 2007) and ‘work intensification’ (Wills et al., 2015), are terms used to conceptualise complex and busy environments, where the speed of work requirements is intensified. During a pandemic, inevitably nurses will experience ‘complexity compression’ and ‘work intensification’. Nevertheless, Labrague and De Los Santos (2020) describe the negative impact of COVID-19 on nurses’ wellbeing, caring behaviours and work performance. The importance of supporting staff and nurturing compassionate and resilient working environments is an immediate priority, but will be particularly paramount in the recovery of COVID-19. This requires careful, concentrated and proactive planning through an ethical leadership lens. However, as ethical leadership in nursing is a relatively new era of leadership, there is minimal evidence reporting on its operationalisation in practice.

Nurse managers as ethical leaders, play a central role in empowering ethical behaviour in everyday practice. Ethical leadership provides a supportive mechanism for nursing practice (Zhao and Xia, 2018; Mekhum, 2020) and helps improve nurses’ performance (Lotfi et al., 2018), which is critical in the response to COVID-19. Although the value of ethical leadership is acknowledged, there is minimal operationalising guidance for nurse managers (Schick-Makaroff and Storch, 2019). In addressing this gap, this discussion paper critically considers the demands and pressures on nurses during COVID-19 and identifies practical suggestions regarding the operationalisation of ethical leadership. These practical suggestions are addressed within the domains of Lawton and Paez Gabriunas (2015) integrated ethical leadership framework, which addresses purpose, practice and virtues. This
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Providing ethics education and training is also recommended as a means of creating a greater awareness of ethical considerations and supports the application of professional values in daily practice (Poorchangizi et al., 2019). Nurse managers will also need to critically examine ways of ensuring professional values guide decision-making and subsequently inform caring behaviours (Labrague et al., 2019). Proposing ‘ethics champions’ (Fitzgerald et al., 2018) to guide/oversee decision making may also assist in maintaining ethical vigilance. Being physically present and contributing during care delivery decisions can help identify individual and collective challenges, whilst providing guidance on standards of care. However, allowing opportunities in a safe space for nurses to express areas of concerns and discuss personal and environmental factors that inhibit wellbeing also requires careful consideration.

**Practices: Nurturing self-caring behaviours and professional resilience**

Yuanyuan Mo et al. (2020) draw attention to the immense pressure, fatigue and stress nurses are facing amidst COVID-19. Unresolved stress results in burnout, contributing to inefficiency and declining standards of care (White et al., 2019). In particular, when nurses experience burnout, they are at risk of; becoming detached and ineffective (Hunsaker et al., 2015) and experience ‘emotional numbing’ (Dominque-Gomez and Rutledge, 2009). Nurse managers need to identify early signs of stress, emotional exhaustion and burnout, whilst planning interventions that support the wellbeing of their staff. Listening to nurses’ needs and supporting their wellbeing through developing ‘caring connections’ (Meyer et al., 2011) and maintaining an ‘open dialogue’ (Labrague et al., 2019), is essential. Encouraging self-care interventions such as; mindfulness and emotional hygiene programmes (Jiang et al., 2020; Wei et al., 2020), are paramount. However, this requires commitment, enthusiasm and investment on the part of nurse managers and buy in from teams. Facilitating forums which provide a place for staff to openly express their ethical concerns in a non-judgmental environment promotes ethical practices, self-caring behaviours and helps build professional resilience.
The importance of developing capabilities to continue working in pressurised environments and ‘bounce back’ from the devastation of COVID-19 through nurturing professional resilience will be crucial. Labrague and De los Santos (2020) recommends resilience building training programmes as a means of addressing COVID-19 related anxiety among nurses. Resilience refers to the ability to maintain personal and professional wellbeing in the midst of stressful work environments, based on ethical behaviours (McCann et al., 2013). Higher resilience at work is associated with better work performance (Walpita and Arambepola, 2020). Nurse managers need to incorporate ethical leadership skills in creating resilient work environments. However, Barkhordari-Sharifabad et al. (2018) identify the challenges with implementing this style of leadership where there are competing demands on managers. To build professional resilience within the team, nurse managers firstly need to develop their own capacity to develop resilience before they can inspire and empower others. Opportunities for managers to avail of resilience strengthening training and leadership development programmes is indispensable. An important characteristic when building a resilient work environment is the ability for staff to discuss concerns and leaders to listen, learn and act. However, this requires an in-depth understanding of the personal and environmental factors that support and hinder professional resilience (Barrett, 2018). Exploring staff emotions, managing expectations and developing self-awareness within the team are effective ways of growing resilience (McCann et al., 2013). Simple measures such as setting up regular one to one meetings with staff to sit and listen to their concerns and talk through solutions, actively hearing their voice and enabling the nurse themselves to act or change, helps promote resilience development.

Virtues: Inspiring, motivating and empowering

Nurse managers have an essential role in rekindling ethical behaviours, developing staff morale and a collective commitment to quality and safe care. Engaging in cognitive reframing empowers the reshaping of working environments into more functional supportive workplaces for staff (Glass, 2009). Effective ethical leadership can increase job satisfaction and staff morale, reduce burnout and encourage positive working environments (Zappala and Toscano, 2020). Ethical leaders
proactively influence ethical norms and behaviours through communicating, inspiring, motivating and empowering their team (Brown and Treviño, 2006). Nurse managers will be required to role model ethical performance themselves, encouraging staff to engage in ethically caring practices. They need to be charismatic, inspirational, have personal integrity, and consideration for the needs of individuals (Copeland, 2016). Involving staff in decision-making and action plans are recommended as these are critical to building staff morale, motivation and a collective approach to addressing challenges. Leading by example (Vaismoradi et al., 2016) and providing personal and professional support for staff (Labrague et al., 2019) are core to supporting and motivating nurses. Consideration should also be given to providing mentorship programmes that focus on promoting professional relationship building, collective efficacy and caring behaviours (McCann et al., 2013; Duffy et al., 2018). Managers need to nurture team working and this requires taking measures to prevent incivility in nursing teams (Bagnasco et al., 2018). They need to show care for their staff, commitment to advocating for their staff’s needs and courage to challenge resource allocation with senior management when required. Nurse managers need to critically review their own identities as ethical leaders and this should commence with developing awareness of self in terms of ethical leader characteristics and an awareness of how their decisions impact others. They need to appreciate the importance of embracing and facilitating change, creating the vision for care delivery and standards of care, empowering staff and building resilience within the team.

**Implications for nurse managers:**

Nurse managers need to proactively examine ways of supporting staff, developing positive working environments and encouraging ethical behaviour. It will require charismatic, compassionate and inspirational leaders who can support staff through respect, empathy, role modelling and genuine conscientiousness, whilst encouraging integration of shared values and ethical behaviours. Opportunities for staff to discuss their feelings, experiences and challenges in a safe non-threatening environment, is necessary. Staff need to feel comfortable in speaking up about burnout and its causes. Nurse managers also need support in developing a greater awareness and understanding of their role in nurturing individual and collective ethical behaviour.
(Zappala and Toscano, 2020). Barkhordari-Sharifabad et al. (2018) call for the need for organisational support and education and training for leaders as means of supporting their ethical leadership skills and abilities to act in moderator role nurturing ethical behaviour. Opportunities need to be provided for nurse managers to consider the real and difficult challenges of leading and operating ethically with professional integrity, during a pandemic. This paper has important implications for nurse managers as during and post COVID-19 managers may find themselves struggling to engage their workforce as in pandemic times views on work may be less central to their lives.

Conclusion

Ethical leadership construct is seen as multidimensional and applying the framework used in this paper may limit its interpretation and true value. On the other hand, it may provide guidance for ethical leadership in daily practice during a pandemic. Traditional leadership characteristics of assertiveness and achievement should be supplemented with ethical leader characteristics, such as; values of altruism, fairness, empathy, courage and resilience (Knights, 2016). Managers that exhibit ethical behaviour and resilience in their response to this pandemic can powerfully influence the actions of others. Nonetheless, aligning managerial and ethical leadership skills with other leadership demands on nurse managers in the aftermath of COVID-19, will require renewed attention and proactive planning. Therefore, in order to face these challenges, it is crucial for nurse managers to foster ethical vigilance, nurture self-caring behaviours and professional resilience while inspiring, motivating and empowering their nursing team. The importance of having open dialogue, understanding the vulnerabilities of staff, whilst nurturing self-care and professional resilience must not be underestimated. Ultimately nurse managers need to act in a moderator role to identify the support needs of staff, reduce burden and support wellbeing in an empathic and compassionate manner. However, for this to occur healthcare organisations need to ensure supports and ethical leadership development are available to nurse managers in the form of education, training, peer support and coaching. This is essential as we cannot support nurses without
supporting nurse managers and the support for nurses can only be as good as the support given to its leaders.

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