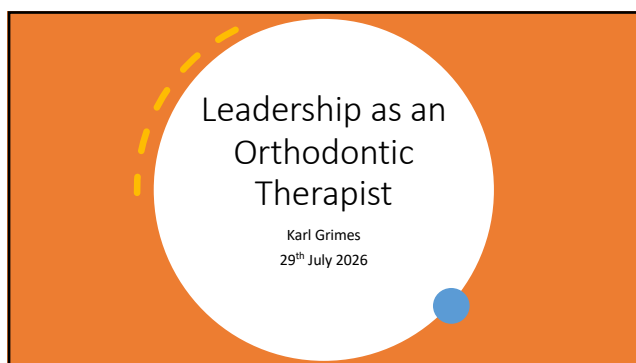
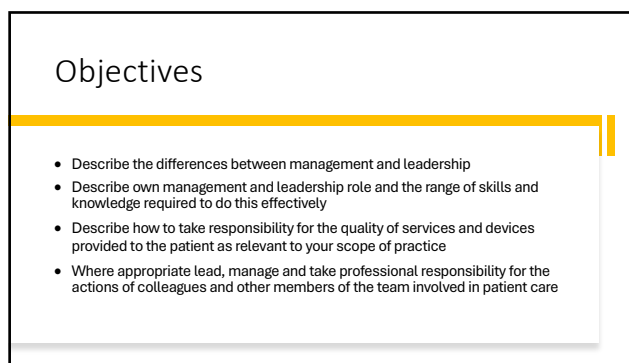




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6

Leadership skills

- Leadership is a set of skills and traits that can be learned and worked on, yet the general perception is that good leaders are scarce because:
- leaders come in guises
- leaders may rise only in response to a situation
- leaders may be unwanted until needed
- leaders may be mistaken for managers



7

Leadership

- **Focus:** Setting direction, inspiring vision, and motivating others.
- **Approach:** Focuses on the "why" and "what" of the work, emphasizing innovation and change.
- **Impact:** Creates a shared sense of purpose and drives long-term goals.
- **Key Skills:** Vision, communication, empathy, influence, and the ability to inspire.



8

Leadership Framework



- 1. Demonstrating Personal Qualities
- 2. Working with Others
- 3. Managing Services
- 4. Improving Services
- 5. Setting Direction
- 6. Creating the Vision (particularly for those in more senior roles)
- 7. Delivering the Strategy (particularly for those in more senior roles)

9

1. Demonstrating Personal Qualities

- 1. Developing self awareness: Being aware of their own values, principles, and assumptions, and by being able to learn from experiences
- 2. Managing yourself: Organising and managing themselves while taking account of the needs and priorities of others
- 3. Continuing personal development: Learning through participating in continuing professional development and from experience and feedback
- 4. Acting with integrity: Behaving in an open, honest and ethical manner



10

2. Working with Others

- 1. Developing networks: Working in partnership with patients, carers, service users and their representatives, and colleagues within and across systems to deliver and improve services
- 2. Building and maintaining relationships: Listening, supporting others, gaining trust and showing understanding
- 3. Encouraging contribution



11

3. Managing Services

- 1. Planning: Actively contributing to plans to achieve service goals
- 2. Managing resources: Knowing what resources are available and using their influence to ensure that resources are used efficiently and safely, and reflect the diversity of needs
- 3. Managing people: Providing direction, reviewing performance, motivating others, and promoting equality and diversity
- 4. Managing performance: Holding themselves and others accountable for service outcomes



12

4. Improving Services

- 1. Ensuring patient safety: Assessing and managing risk to patients associated with service developments, balancing economic consideration with the need for patient safety
- 2. Critically evaluating: Being able to think analytically, conceptually and to identify where services can be improved, working individually or as part of a team
- 3. Encouraging improvement and innovation: Creating a climate of continuous service improvement
- 4. Facilitating transformation: Actively contributing to change processes that lead to improving healthcare



13

5. Setting Direction

- 1. Identifying the contexts for change: Being aware of the range of factors to be taken into account
- 2. Applying knowledge and evidence: Gathering information to produce an evidence-based challenge to systems and processes in order to identify opportunities for service improvements
- 3. Making decisions: Using their values, and the evidence, to make good decisions
- 4. Evaluating impact



14

6. Creating the Vision (particularly for those in more senior roles)

- 1. Creating the vision of the organisation: Looking to the future to determine the direction for the organisation
- 2. Influencing the vision of the wider healthcare system: Working with partners across organisations
- 3. Communicating the vision: Motivating others to work towards achieving it
- 4. Embodying the vision: Behaving in ways which are consistent with the vision and values of the organisation



15

7. Delivering the Strategy (particularly for those in more senior roles)

- 1. Framing the strategy: identifying strategic options for the organisation and drawing upon a wide range of information, knowledge and experience
- 2. Developing the strategy: Engaging with colleagues and key stakeholders
- 3. Implementing the strategy: Organising, managing and assuming the risks of the organisation
- 4. Embedding the strategy: Ensuring that strategic plans are achieved and sustained



16

The leadership context: Stage 1

- Within own practice / immediate team
- Building personal relationships with patients and colleagues, often working as part of a multidisciplinary team.
- Staff need to recognise problems and work with others to solve them.



17

Stage 2

- Whole service/ across teams
- Building relationships within and across teams, recognising problems and solving them.
- Staff will be more conscious of the risks that their decisions may pose for self and others for a successful outcome.



18

Stage 3

- Across services/ wider organisation
- Working across teams and departments within the wider organisation.
- Staff will challenge the appropriateness of solutions to complex problems.



19

Stage 4

- Whole organisation/ healthcare system
- Building broader partnerships across and outside traditional organisational boundaries that are sustainable and replicable.
- Staff will be dealing with multi-faceted problems and coming up with innovative solutions.



20

Management

- **Focus:**
- Planning, organizing, controlling resources, and ensuring tasks are completed efficiently.
- **Approach:**
- Focuses on the "how" and "when" of the work, emphasizing efficiency and control.
- **Impact:**
- Maintains stability, ensures processes are followed, and achieves short-term objectives.
- **Key Skills:**
- Planning, organization, problem-solving, delegation, and monitoring.
- **Example:**
- A manager might oversee the budget, timeline, and tasks for developing the new product line.

21

What is the difference between a leader and a manager?

Manager	Leader
Focuses on the present	☑ Looks toward the future
☑ Prefers stability	☑ Appreciates change
☑ Orients toward the short term	☑ Orients toward the long term
☑ Focuses on procedure	☑ Engages in a Vision
☑ Asks "what" and "how"	☑ Asks "why" and "what"
☑ Prefers to control	☑ Knows how to delegate
☑ Is happy in complexity	☑ Prefers to simplify
☑ Uses the rational mind	☑ Trusts intuition
☑ Works within the context of the organization and the business	☑ Takes social and environmental contexts into consideration

22

Leadership vs. Management



Leadership can be seen as performing the influencing function of management, largely involved in goals setting and motivating people to achieve them.



Leaders decide "where we are going" and influence people to take that particular direction, rather than describe "how we are going to get there".



Inspired leaders are not necessarily good organizers and excellent managers.



The most effective managers are also leaders, and the quality of leadership has become and increasingly important part of management ability.

23

Leadership Types

- All leadership is temporary
- The transient nature of leadership is because the situation may come to an end or times and circumstances change:
- Situational Leadership
- Transitional Leadership
- Hierarchical Leadership

24

Situational Leadership



• THE RIGHT PERSON IN THE RIGHT PLACE AT THE RIGHT MOMENT.



• RECOGNIZE THE TIME AND CIRCUMSTANCES.



• WILLINGNESS AND ABILITY TO ASSUME THE RESPONSIBILITY. LISTEN AND TO TAKE THE RESPONSIBILITY TO HELP THE GROUP ACHIEVE ITS GOAL.



• IT OFTEN INVOLVES: NO COST DECISION, ECONOMIC DECISION, MORAL DECISION, MEDITATIVE DECISION, COMMUNITY DECISION, PHILANTHROPIC DECISION, INSTITUTIONAL DECISION, COMMUNITY DECISION, PRINCELY DECISION.

25

Transitional Leadership



• THE RIGHT TIME BUT WRONG CIRCUMSTANCES.



• IT MAY OCCUR WHEN: LEADERSHIP REQUIRES AT A CERTAIN MOMENT, BUT THE PERSON WHO IS THE LEADER MAY NOT BE CAPABLE OF DELIVERING THE LEADERSHIP.



• TRANSITIONAL LEADERS MAY: BE MISSING ALL THE RIGHT STUFF, BE FEARING THE RISK.

26

Hierarchical Leadership

• The right circumstances but wrong time.

• Assumes a leadership role because it is "their turn", whether they want the role or not.

27

Leadership Styles

- Coercive – Do what I tell you
- Affiliative – People come first
- Pacesetter – Do as I do, now
- Authoritative – Come with me
- Democratic – What do you think?
- Coaching – Try this

28

Authoritative Style

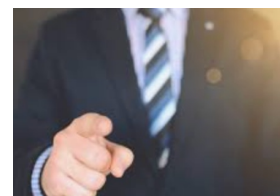
- **Why:**
 - Mobilizing people toward a vision.
- **How:**
 - Develop a clear vision
 - Obtain employee's perspective
 - Empower and delegate
 - Set standards & monitor performance
 - Use balance of positive & negative feedbacks
- **Slogan:**
 - "This is where we're going & why."
 - "Come with me."



29

Coercive Style

- **Why:**
 - Obtaining immediate compliance from employees.
- **How:**
 - Provides clear directives – no empathy
 - Tightly control situations
 - Use occasional attention-getting strategies
 - Emphasizes the negative
 - Focus on getting the job done
- **Slogan:**
 - "Do what I tell you!"
 - "You must do this NOW!"



30

Affiliative Style

- **Why:**
 - Promoting harmony and collaboration among employees.
- **How:**
 - Promote friendly interactions among employees
 - Put people first & tasks second
 - Try to meet employee's emotional needs
 - Identifies opportunities for positive feedback
 - Provide job security & work/life balance
- **Slogan:**
 - "People come first."
 - "Everyone must get along."



31

Democratic Style

- **Why:**
 - Building group consensus & commitment through group-management in making decisions.
- **How:**
 - Give employees full participation
 - Emphasize the importance of consensus
 - Include all view in the decision-making
 - Listen to employees for ideas
 - Reward group rather than individual
- **Slogan:**
 - "What do you think?"
 - "Let's see what the group wants to do"



32

Pacesetting Style

- **Why:**
 - Setting high performance standards and getting quick results from a highly motivated & competent team.
- **How:**
 - Lead by example
 - Allow employee work independently
 - Delegates demanding tasks to only outstanding performers
 - Exert tight control over poor performers
 - Promote individual effort rather than teamwork
- **Slogan:**
 - "Do as I do."
 - "This is how it must be done! WATCH ME!"



33

Coaching Style

- **Why:**
 - Developing people for future performance.
- **How:**
 - Help employees identify their performance strengths & weaknesses
 - Work with employees to establish long-range goals
 - Encourage employees to solve their own work problem
 - Treat mistakes as learning opportunities
- **Slogan:**
 - "Try this!"
 - "Let's see how can I support you!"



34

Using the Right Style

- "There is no certain guideline to be an effective leader."
- "There is no a fixed way to fit all situations."
- Effective leaders consider
 - The skill level and experience of the team
 - The work involved
 - The organizational environment
 - Your own preferred or natural style

35

Is Leadership Necessary?

- 1st task of the Leaders: to be the trumpet that sounds a clear sound.
- 2nd task of the Leaders: to accept the leadership as responsibility rather than rank or privilege.
- 3rd task of the Leaders: to earn trust.



36

Transitioning from Manager to Leader

- The journey from manager to leader, and from leader to executive, has 3 key transition points
- Manager: from individual performer to managing a team; "what's good for me" "what's good for my team"
- Leader: from managing a team to orchestrating groups of teams; "what's good for my team" "what's good for the organization"
- Executive: from groups of teams to complex organizations; "what's good for my organization" "what's the larger, longer term context"
- Transitioning is situational as well as hierarchical

37

- Healthcare professionals must ensure the quality of services and devices they provide, staying within their defined scope of practice and continuously developing their skills and knowledge.
- This includes taking responsibility for identifying risks, responding to concerns, and seeking necessary support or referral when needed.



38

Key Aspects of Taking Responsibility:

- **Scope of Practice:**
- The scope of your practice is a way of describing what you are trained and competent to do.
- It describes the areas in which you have the knowledge, skills and experience to practise safely and effectively in the best interests of patients.

39

Patient Safety

- Prioritizing patient safety is paramount, requiring professionals to recognize and address potential risks associated with services and devices.



40

Quality Assurance

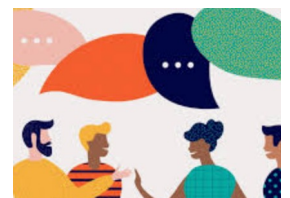
- This involves participating in audits, reflecting on practice, and engaging in continuing professional development to maintain and improve standards.



41

Communication

- Effective communication with patients, colleagues, and other healthcare professionals is essential for safe and effective care.



42

Honesty and Openness

- When things go wrong, healthcare professionals must be open and honest with patients and colleagues, even if it involves disclosing errors.



43

Seeking Support

- If a patient's needs fall outside a professional's scope of practice or if they encounter challenges they cannot resolve, they must seek appropriate support, including referral to another practitioner or service.



44

Examples of Applying these Principles:

- Providing Information:**
- Healthcare professionals must provide patients with clear, accurate, and understandable information about services and devices, including potential risks and benefits.



45

Involving Patients

- Actively involving patients in decisions about their care, including the use of specific services and devices, is crucial for ensuring patient-centered care.



46

Responding to Concerns

- If a patient expresses concerns about a device or service, the professional must investigate the concerns, address them appropriately, and escalate them if needed.



47

Continuous Improvement

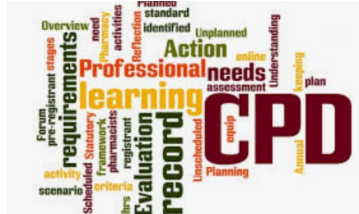
- Participating in quality improvement initiatives, such as audits and peer reviews, helps to identify areas for improvement in service delivery and device use.



48

Continuing Professional Development

- Staying up-to-date with the latest knowledge and skills is essential for providing safe and effective patient care.



55

Raising and Acting on Concerns

- All medical professionals have a duty to raise concerns about patient safety and to act on those concerns, following established procedures and policies.

56

Effective Teamwork

- Working effectively with colleagues from different disciplines is crucial for providing comprehensive patient care.



57

Resource Management

- Using resources efficiently and responsibly is an important part of providing good patient care.



58

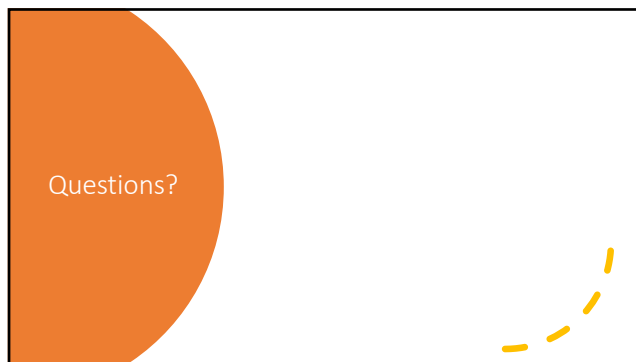
- By fulfilling these responsibilities, dental professionals can contribute to a culture of safety, quality, and respect within their workplaces, ultimately benefiting patients and the wider community.

59

Group exercise

- Split into groups of 2
- What leadership qualities do you think you have and what qualities can you develop in your role as an OT?

60



61