

Active Involvement in National and International Health Care Management

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Description

Leadership and management are the key building blocks of a health system. The field of cancer care is facing enormous challenges and changes, including an aging population, a severe workforce shortage, and an influx of new and expensive therapies. The engines that drive the performance of health care systems are the cancer professionals. Multidisciplinary collaboration and multi professionalism are the foundations on which successful combat against cancer can be built. Leadership and administrative support that facilitates multidisciplinary collaboration optimizes practices to produce quality in cancer care. A range of factors pertaining to multidisciplinary team, availability of patient information, leadership, team and meeting management, and workload can all affect how well MDTs are implemented within patient care.

MDTs do not need to be led by medical professionals because there are other core members such as nurses with adequate skills who could take on this role. Nurses also see themselves as integrating diverse disciplinary inputs in the interests of patient care. Wihl et al have proposed that skills-driven leadership, leadership training, and possibilities to assign MDT meeting leadership to other professions or disciplines should be considered to develop team competence and stimulate team development for comprehensive and effective case management in cancer care. Nursing leaders are often recognized as practice experts and as leaders in their particular field of nursing. Recognition and influence in and beyond the context of care depends greatly on their ability to articulate the distinct nursing contribution to patient care.

At the MDTs in departmental, organizational, and system levels, nurses can feel that they have less influence on the factors indirectly influencing the quality of patient care and that their contributions are unrecognized and marginalized in decision and policymaking. Initiatives that focus on building MDT culture, shared decision-making, and transforming the traditional hierarchical leadership models are therefore needed to create more productive workplace that fosters communication, respect, and teamwork with increased interactions with professionals from all relevant disciplines. The engagement of nursing leaders on multidisciplinary leadership is critical in the cancer care setting for the future of the nursing profession, quality of care, and the overall health care system.

To provide high-quality care and research, cancer centers need competent, healthy, highly motivated and committed staff. The attractiveness of the cancer center as an employer is becoming increasingly important. Identifying sustainable solutions for managing well-being at work and investing in healthy work environments is a necessity for the future health care. When high-quality nursing leadership is enacted, positive patient, care provider, and system outcomes are demonstrated. Furthermore, improvements in population health and well-being have been, and will continue to be, realized through the innovation and inspiration of the nursing profession.

All of these factors highlight the need to enhance cancer nursing leadership and support current and future leaders through nursing scholarship and active involvement in national and international health care management. However, although nurses are the largest group of health care professionals across the world, they are the least represented in leadership positions and decision-making. Nurses should be full partners, with physicians and other health professionals, in redesigning the care of people affected by cancer. Thus, in today's ever-changing and demanding health care environment, developing nursing leadership and future leaders is one of the greatest challenges faced by the nursing profession. The need for everyone to embrace nursing leadership practices has become increasingly important at all governance levels and in clinical practice.

Nursing Leadership

The concept of leadership is a complex and multidimensional phenomenon. Rather than being situated only within a traditional leadership role or title, nursing leadership is much more about critical thinking, action, and advocacy across all roles, practice settings, and domains of cancer nursing practice. Leadership is also about being able to see the present for what it really is, seeing the future for what it could be, and then taking action to close the gap between today's reality and the preferred future. Leadership involves vision, communicating that vision to others, planning to make it a reality but also serving as a symbol and source of energy. Leadership must aim to improve performance, allow for succession planning, facilitate organizational change, and grow an accountable culture that is aligned with organization goals, which in turn improves patient outcomes.

Leadership and management should be recognized both as a major indicator for developing quality organizational culture and as indispensable in work environments that retain an empowered and motivated workforce. A body of research has shown significant associations between relational leadership styles such as transformational and authentic leadership and a wide variety of encouraging transparent relationships that build trust and optimism and promote inclusive and healthy work environments. Therefore, relational leadership practices should be encouraged and supported by individuals and organizations to enhance nursing job satisfaction, retention, work environment factors, and individual productivity within health care settings. Supportive leadership and management styles can improve, for example, nurses' job satisfaction, organizational commitment, and intent to stay in their position, while simultaneously reducing stress and emotional exhaustion.

Leadership is demonstrated by registered nurses working in cancer care every day, and every nurse is a leader in the management of clinical care. Regardless of role or position, all nurses working in cancer care are expected to provide leadership. Some nurses work in more formal nursing leadership roles, whereas others demonstrate informal leadership skills as part of their daily work in the multidisciplinary clinical team. Cancer nursing leaders and clinical nurses are challenged to anticipate future trends in cancer care and create a culture, infrastructure, and practice environment that supports innovation, advancement of cancer nursing practice, and excellence in person-centered care. Evidence and the use of data are important tools for nursing leaders. Nursing leaders who support evidence-based nursing practice can create a culture of inquiry and, therefore, lay the foundation for the use of evidence to inform leadership and management decisions.