International Practice Development Journal



Online journal of FoNS in association with the IPDC (ISSN 2046-9292)

CRITICAL REFLECTION ON PRACTICE DEVELOPMENT

A timeline reflection: emboldened learning from my stories

Angela Brown

University of Wollongong, Australia Email: angela_brown@uow.edu.au

Submitted for publication: 3rd July 2013 Accepted for publication: 11th September 2013

Abstract

Background: This paper is a personal reflection on my leadership development using empowerment, enlightenment and emancipation as a reflective framework.

Aim and objectives: To reflect on my leadership journey and share some of my leadership stories as examples of opportunities for personal growth.

Conclusions: I have experienced a rich and fulfilling leadership journey; others could experience similar paths if they seek and seize the right opportunities. My journey continues.

Implications for practice:

- Leadership development can be enhanced by an open and responsive attitude to opportunities
- A model of reflection can be used to analyse experiences and tell them as stories (if only to oneself)
- Reflection will help measure personal and professional growth

Keywords: Leadership, emancipation, empowerment, enlightenment, storytelling

Background

My recent visit to the England Centre for Practice Development, at Canterbury Christ Church University, provided an opportunity to present a masterclass entitled *Leading All The Way: Leadership Stories and Practice Development*. I am grateful to the centre for inviting me to present this masterclass; it encouraged me to formulate a timeline of my leadership development journey. The purpose of the masterclass was to share some of my leadership stories as examples. I was able to articulate what I have learned and set out my preferred model of leadership, as well as explain how I use leadership in my work and, I hope, how leading and leadership contribute to practice development.

I will share my leadership journey, a journey that I suspect started when I was born but entered my consciousness in the 21st century, with a timeline from 2000 to 2013. This journey is seen through the lens of the three Es: empowerment, enlightenment and emancipation as a reflective framework. Fay (1987) suggests that people move 'along a continuum from enlightenment, through empowerment, to emancipation', (McCormack, 2009, p 42). McCormack and Dewing (2010) explain this further:

'Enlightenment is concerned with people seeing things differently... Empowerment is described by Johns (2000) as a sense of freedom to do something differently... Emancipation involves freeing themselves from the things they take for granted to take action to be more creative and do things differently' (McCormack and Dewing, 2010, p 29).

Where my nursing journey began

I am a nurse trained in the hospital system in the 1970s and had what I thought was a fairly typical career: registered nurse, registered midwife and management roles, for example, ward sister (ward/department manager) and senior nurse manager. I then moved to the education sector, with roles of lecturer, senior lecturer and head of department. I had no formal preparation for any of these roles unless you count a three week, first line management course. This was all in an era when management in the UK National Health Service had not only become the norm but institutionalised; some readers may remember the Griffiths report into NHS management (Department of Health and Social Services, 1983). Somewhat unbeknown to me, the leadership phenomena was taking off worldwide and the notion of transformational leadership was becoming the proposed panacea to all ills in the world of business, as well as in health. The proliferation of books, articles, training opportunities and other inspirational activities demonstrates that leadership has been a significant issue since the beginning of the 20th Century (Bryman, 1999; Parry and Bryman, 2006; Yukl, 2012). Leadership also seems to have become synonymous with management in everyday language but it is important that the similarities, differences and distinctions between these terms are teased out. I find the following useful in making this distinction:

'Management is about planning, organisation and control, while leadership is about the process of influence. It is goal-orientated and inextricably linked with group or team processes' (Millward and Bryan, 2005, p xv).

Where my leadership journey began

In 2000 I was lucky enough to be invited by the chief nurse at the local teaching hospital to undertake a secondment to facilitate the Royal College of Nursing (RCN) Clinical Leadership Programme. Through the facilitator development and orientation to the programme I was introduced to the work of Jim Kouzes and Barry Posner (1987), and their five exemplary practices of leadership:

- Model the way
- Inspire a shared vision
- Challenge the process
- Enable others to act
- Encourage the heart

What impressed me first of all was that Kouzes and Posner made leadership accessible to me and my colleagues:

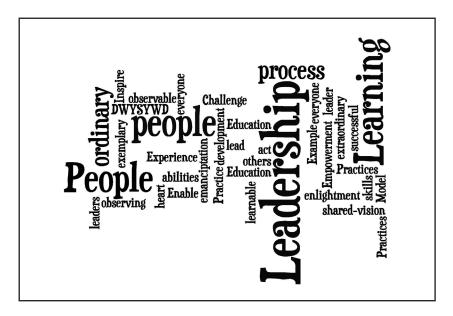
'Leadership is not the private reserve of a few charismatic men and women. It is a process that ordinary people use when they are bringing forth the best from themselves and others. When the leader in everyone is liberated extraordinary things happen' (1987 and 2007, p 27).

It was at this point that I felt I was empowered.

Empowered or enlightened?

I realise now that I was actually enlightened. I was fortunate to have not only a comprehensive exposure to the theory but also to the leaders involved in clinical leadership and its development, and to emancipatory practice development principles. Through the RCN Clinical Leadership Programme, I was introduced to Geraldine Cunningham, who developed the programme, as well as to a great group of clinical leaders at my local teaching hospital. Together we embarked on a shared journey of discovery, reflective practice, action learning sets, patient stories and observations of care, alongside a 360 degree evaluation of our leadership behaviours. For me, a gestalt moment (Enlightenment 1) was when all the things I had experienced and learned suddenly fell into a mosaic of my leadership opportunities, which I visualised as a wordleTM – a 'word cloud' that gives prominence to words that are used more frequently (see Figure 1).

Figure 1: Wordle



As a health professional of my time and a product of my career choices, I was a transactional leader, as were all my role models, so being exposed to more transformational ways of working gave me choices.

Development of leadership attributes in the programme focused on Kouzes and Posner's five exemplary leadership practices (1987, 2012); the programme engaged us all in activities designed to develop our attributes and therefore our capabilities as transformational leaders. The facilitation processes exposed me to emancipatory practice development tools and techniques, although I did not know this at the time.

By 2001 I had returned to my substantive position as a senior lecturer in a university and I received an email from a colleague asking for a volunteer to be part of a research project, the RCN Expertise in Practice Project. Through this participatory research project and action learning sets, my facilitation capabilities were further developed. Through the relationship with Gill Scott, the expert practitioner and participant researcher who was a lecturer practitioner in a local hospice, the power of art and artistry in revealing expertise was cemented for me. Little did I know this was my initiation to creativity and the beginning of my fascination with storytelling, the power of stories and the use of metaphors. This project also introduced me to critical companionship and to Angie Titchen and the project team. I became acquainted with Kim Manley, Brendan McCormack and Sally Hardy, all of whom made an impression not only on my facilitation development but also my leadership journey as realised I was modelling the way (Kouzes and Posner, 2012, p 16) (Enlightenment 2). Through these relationships I was encouraged to seek opportunities to share my experiences. Consequently, in 2002 I presented at the Practice Development Conference in Keele and the RCN Congress in Harrogate. Then, with something to write about, I contributed to book chapters and journal articles on expertise in practice and critical companionship (Scott and Brown, 2004; Brown and Scott, 2004; Brown and Harrison, 2009; Brown and Scott, 2010). The impact of critical companionship stays with me today; I recently introduced a colleague to this concept as a process for developing clinical educators and she inspired me to submit an abstract for the Enhancing Practice Conference in Sydney in October 2012, and to develop the poster you see below.

Figure 2: Poster for the Enhancing Practice Conference, Sydney, 2012



The journey continues

My leadership journey continued, taking me this time to Australia. I had visited Australia twice on different quests before; in 2003 I received an invitation to present the leadership work I had been involved in to the inaugural Celebrating Nursing Leadership conference in Wollongong, New South Wales. In 1998, on my first visit to Australia for the International Nurse Practitioner Conference, I had met a lovely woman in the swimming pool at a hotel in Melbourne and we chatted about Australian nurses and their publications. I knew her as Mary and we parted company, never, I thought, to meet again. Fast forward to 2003, at the dinner the evening before the conference in Wollongong I found myself sitting between two women, one of whom I now know to be Professor Mary Chiarella and the other Mary Fitzgerald, another practice developer. It was also that year when I became acquainted with the work of Gary Yukl. As my understanding of leadership was broadening, I liked his definition of leadership:

'The process of influencing others to understand and agree about what needs to be done and how to do it, and the process of facilitating individual and collective efforts to accomplish shared objectives' (Yukl, 2002 and 2012, p 8).

This mirrored my two most important areas of development: leadership and facilitation. While I am still committed to Kouzes and Posner (2012) and transformational leadership practices and behaviours, Yukl (2012) introduced me to leadership skills with a three-factor taxonomy: technical, interpersonal and conceptual skills. I saw this as drawing together the skills and behaviours I had learned.

It is important now to say why the renewed acquaintance with Mary Chiarella and the introduction to Yukl are important in the journey. If we jump forward to 2006, I had emigrated to Australia and I was

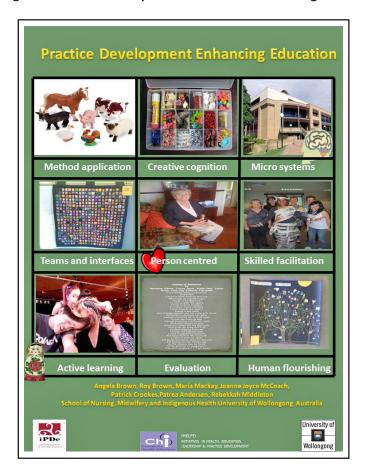
© FoNS 2013 International Practice Development Journal 3 (2) [8] http://www.fons.org/library/journal.aspx

invited to participate in the Models of Care work that was developing in New South Wales. To my great surprise the Chief Nursing Officer of New South Wales Health Department was Mary Chiarella and at the first meeting, and every time the opportunity arose thereafter, she publicly acknowledged me and my presentation in 2003 as having influenced the decision to introduce the RCN Clinical Leadership Programme in New South Wales. I had inspired a shared vision (Enlightenment 3).

The move to Australia for me has been fantastic professionally. I have had many and varied opportunities to advance my leadership and practice development expertise but the most enlightening moment occurred early in my time in Australia. In 2007 I was fortunate enough to attend a masterclass delivered by Brendan McCormack. In this class Brendan outlined the principles of practice development and the tools and techniques of its facilitators. This was the point at which I realised that I was involved in emancipatory practice development and that I had a toolbox containing some of the relevant skills (Enlightenment 4). Wow! It was a massive eureka moment. I then went to practice development school in Gosford, New South Wales, becoming reacquainted with Sally Hardy and Brendan McCormack, who were facilitators there. At this point I also met antipodean leaders in emancipatory practice development: Val Wilson, Annette Solman and Jackie Crisp.

This was a very important point in the journey. I work in higher education and contribute to the preparation of future generations of nurses, and the backdrop of emancipatory practice development in the New South Wales provides me and my colleagues with the opportunity to challenge the process. For example, it is my contention and that of my colleagues Roy Brown and Patrick Crookes that the curriculum development expertise that used to be guaranteed is disappearing in Australia and, we suspect, worldwide (Crookes et al., 2008). Together we have brought some leadership to curriculum development at the University of Wollongong and more widely (Crookes and Brown, 2010). The challenge, however, is the transfer of craft knowledge – the tacit knowledge of professionals – (Titchen, 2000), succession planning and staff development. Through the use of practice development processes we are trying to develop capability within our team; using practice development principles we have engaged in values clarification, claims, concerns and issues, and stakeholder engagement. Creativity has become commonplace as a learning and teaching strategy, in planning processes for projects and research and evaluation. We visualised this for a poster developed for the launch of the England Centre for Practice Development and it is shared here (see Figure 3).

Figure 3: Poster developed for the launch of the England Centre for Practice Development



Current leadership activities

Developing other leaders is the key focus of my learning, teaching and research activities. I coordinate a postgraduate subject, Effective Leadership in Practice, for university participants and clinicians through collaborations with three local health districts. The aim is to provide leadership development opportunities for health service employees. The programme has been running for five years and had more than 300 participants; anecdotal evidence and an independent evaluation of impact in 2009 elicited strong agreement from participants that the programme had improved their ability to act across all areas of leadership practice, including teambuilding, communication, self-development and operational development. These clinical leaders have actioned more than 100 leadership initiatives across all practice areas, many of which are interdisciplinary. All respondents to the survey said they used new skills and techniques acquired from the programme as part of workplace initiatives, and that it provided them with the tools, skills and confidence to implement their action plans. Together with colleagues we are clearly facilitating leadership development and enabling others to act (Enlightenment 5).

The embedding of creativity and active learning in undergraduate and postgraduate curricula often meets with some surprise. My subject participants tell me they attract raised eyebrows from their families, friends and colleagues who ask what they have learned and they report cutting, sticking, collage creation and so on. Their initial reluctance to use creative activities fades and it is a delight for me to see submitted for assessment the outcome of their creative selves — a visual representation accompanied by a story. It encourages my heart. Another aspect that I celebrate is how enthusiastically active learning (Dewing, 2008; Middleton, 2013) has been embraced by the school. Colleagues form a line (metaphorically) awaiting a practice development school opportunity; proliferations of postcards, sticky notes and craft boxes, conference presentation and publications and the use of practice development principles in learning, teaching and research projects are all causes for celebration. (Enlightenment 6).

Reflecting on the journey

Returning to the reflective framework – 'a continuum from enlightenment, through empowerment, to emancipation' (McCormack, 2009, p 42) – and my journey, I realise my continuum has been empowerment, though enlightenment to emancipation. I consider this a consequence of my age, gender, social class and choice of profession. I needed to give myself permission to be different and the leadership journey outlined has been my path to emancipation.

The enlightenment moments in this reflection have enabled me to value the opportunities and the people I have been fortunate to meet along the way, and to identify some key learning about leadership and leaders.

I am emancipated in that I am able to choose to do my work differently, seeing opportunities instead of barriers, and have the courage to challenge established ways of doing things. I have summarised my key learnings and this reflection has empowered me to share them (see Table 1).

Table 1: Summary of key learnings

Emancipation 1: Be reflexive, adopt and use a process of reflection to make sense of experiences along the way and seek to understand

Emancipation 2: Be courageous, experiment and take risks

Emancipation 3: Love your work and be proud of it

Emancipation 4: Remember what's important, make a difference, have integrity, have time for self and significant others

Emancipation 5: Never underestimate personal power – enthusiasm and encouragement work wonders

Emancipation 6: Have fun, think about your own leadership journey, identify your influences, look for ways to be transformational, and celebrate your values and your victories (Kouzes and Posner, 2012, p 301)

And finally one of my favourite quotes and photographs, which epitomise my journey: 'Leadership is like beauty: it's hard to define but you know it when you see it' (Bennis, 1989, p 1).



© FoNS 2013 International Practice Development Journal 3 (2) [8] http://www.fons.org/library/journal.aspx

References

- Bennis, W. (1989) On Becoming a Leader. Philadelphia: Basic Books.
- Brown, A. and Harrison, K. (2009) Working with critical companionship. Chp 5 *in* Hardy, S., Titchen, A., McCormack, B. and Manley, K. (Eds.) (2009) *Revealing Nursing Expertise through Practitioner Inquiry*. Chichester, UK: Wiley-Blackwell. pp 93-109.
- Brown, A. and Scott, G. (2004) Art and artistry in practice: a reflective account. Chp 8 *in* Foyle, L. and Holstad, J. (Eds.) (2004) *Delivering Cancer and Palliative Care Education*. Oxford: Radcliffe. pp. 99-111.
- Brown, A. and Scott, G. (2010) Treasures in jars of clay: working with critical companionship. Chp 5 in Foyle, L. and Holstad, J. (Eds.) (2010) *Illuminating the Diversity in Cancer and Palliative Care Education: Sharing Good Practice*. Oxford: Radcliffe. pp. 83-92.
- Bryman, A. (1999) Leadership in organizations. Chp 2 *in* Clegg, S., Hardy, C. and Nord, W. (Eds.) (1999) *Managing Organizations: Current Issues*. London: Sage. pp. 26-42.
- Crookes, P. A., Brown, R. A. and Brown, A. M. (2008) *Curriculum Development as a Scholarly Activity a Dying Art*? Clinical Professions Education. Sydney: ConLog pp 55-55.
- Crookes, P. and Brown, R. (2010) *The Development of a Pre-registration Nursing Competencies Assessment Tool for Use Across Australian Universities*. Sydney: Australian Learning and Teaching Council.
- Dewing, J. (2008) Becoming and being active learners and creating active learning workplaces: the value of active learning. Chp 15 *in* McCormack, B., Manley, K. and Wilson, V. (Eds.) (2008) *International Practice Development in Nursing and Healthcare*. Oxford: Blackwell. pp 273-294.
- Department of Health and Social Services (1983) NHS Management Inquiry: The Griffiths Report. London: DHSS.
- Fay, B. (1987) Critical Social Science. New York: Cornell University Press.
- Kouzes, J. and Posner, B. (2007) The Leadership Challenge. (4th edition). New Jersey, USA: Wiley.
- Kouzes, J. and Posner, B. (2012) The Leadership Challenge. (5th edition). New Jersey, USA: Wiley.
- Johns, C. (2000) Becoming a Reflective Practitioner: A Reflective and Holistic Approach to Clinical Nursing. Oxford: Blackwell Science.
- McCormack, B. (2009) Practitioner research. Chp 2 *in* Hardy, S., Titchen, A., McCormack, B. and Manly, K. (Eds.) (2009) *Revealing Nursing Expertise Through Practitioner Inquiry*. Chichester, UK: Wiley-Blackwell. pp 31-54.
- McCormack, B. and Dewing, J. (2010) *The Implementation of a Model of Person-Centered Practice in Older Person Settings. Final Report*. Ulster: National Council for the Professional Development of Nursing and Midwifery.
- Middleton, R. (2013) Active learning and leadership in an undergraduate curriculum: how effective is it for student learning and transition to practice? *Nurse Education in Practice*. Vol. 13. No. 2. pp 83-88.
- Millward, L. and Bryan, K. (2005) Clinical leadership in healthcare: a position statement. *Leadership in Health Services*. Vol. 18. No. 2. pp xii-xxv.
- Parry, K. and Bryman, A. (2006) Leadership in organizations. Chp 2.1 *in* Clegg, S., Hardy, C., Lawrence, T. and Nord, W. (Eds.) (2006) *The SAGE Handbook of Organization Studies* (2nd edition). London: Sage. pp 447-468.
- Scott, G. and Brown, A. (2004) Boundary angst and negotiation in palliative care. *Spirituality and Health International*. Vol. 5. No. 4. pp 195-205.
- Titchen, A. (2000) *Professional Craft Knowledge in Patient-Centred Nursing and the Facilitation of its Development*. Kidlington, UK: Ashdale Press.
- Yukl, G. (2002) Leadership in Organizations. (5th edition). New Jersey, USA: Prentice Hall.
- Yukl, G. (2012) Leadership in Organizations. (8th edition). New Jersey, USA: Prentice Hall.

Acknowledgements

I would like to acknowledge Jan Dewing for feedback on the masterclass and inspiration to publish this reflection.

© FoNS 2013 International Practice Development Journal 3 (2) [8] http://www.fons.org/library/journal.aspx

To all the aspiring leaders with whom I have had the pleasure of spending time, thank you. I would also like to acknowledge Roy Brown, Joanne Joyce McCoach and Patrick Crookes for their critical companionship in the preparation of this manuscript.

Angela Brown (MA, PG Dip, Grad Cert, BSc Hons, RN), Associate Professor, School of Nursing, Midwifery and Indigenous Health, Faculty of Science, Medicine and Health, University of Wollongong, Wollongong, Australia.