



Discover your leadership style and unlock your potential



What's in this guide?

When it comes to leadership in social care, every leader will have their own style – there is no 'right' way to lead.

The aim of this guide is to help you unlock your potential through discovering which style suits you best.

We'll explore where your strengths lie and identify areas for focus, to give you clear, tangible takeaways which will help you make the most of your leadership style in practice.



Discover your style. Lead with confidence.

What's your leadership style?

Three main styles have dominated professional culture since 1939, when psychologist Kurt Lewin defined these as autocratic, democratic, and laissez-faire.

But leadership has changed a lot since 1939. And as you'll already know, leadership in social care has its own set of rules. It's hard to imagine how terms like 'autocratic' and 'laissez-faire' can be applied in practice within a care environment.

So in social care, we propose that there are three key leadership styles under different names.



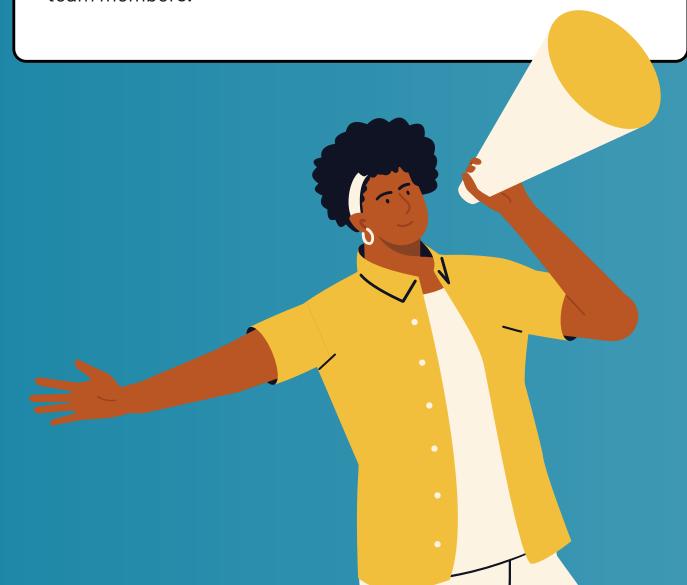
The visionary leader

Known for their ability to inspire others, these leaders have a clear sense of purpose and direction. They're often skilled at speaking about their vision in a way that resonates with their team members. They like to lead from the front and set clear goals and expectations.

Sub-leadership types:

Transformational leader: inspires employees to go above and beyond to transform an organisation.

Transactional leader: uses rewards and check-ins to motivate team members.



The empowering leader

Empowering leaders have a strong focus on growth and development of their team and aim to foster an environment of collaboration.

They tend to encourage independence and empower others to take ownership of their work, make their own decisions, and contribute to the team's success in the way they believe works best.

Sub-leadership types:

Democratic leader: makes room for multiple people to take part in the decision-making process.



The adaptive leader

Versatile and flexible, the adaptive leader adjusts their leadership approach based on the situation. They're skilled navigators of change and thrive in complexity, problem-solving and decision-making.

They might have more say in how a new team member does their job, whereas they'll leave more established members to their own devices.

Sub-leadership types:

Laissez-faire leader: hands off leaders who let their employees make the decisions.

Servant leader: serves the interests of the team first and foremost, distributing resources where they're most needed.

Situational leader: changes leadership style based on the specific situation.

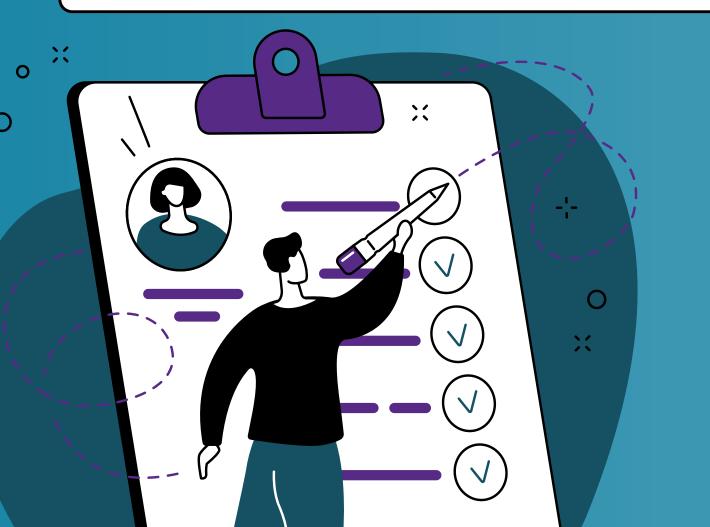


Next: we'll explore where your strengths lie - and areas to focus on.

Strengths and areas to focus

Every leader has strengths and areas to focus – after all, we're all human! Your ability to recognise these will define how well-rounded you can become as a leader.

Each leadership style below is divided into strengths and areas for focus. Make sure you're familiar with yours and with any other styles which you might recognise in your colleagues.

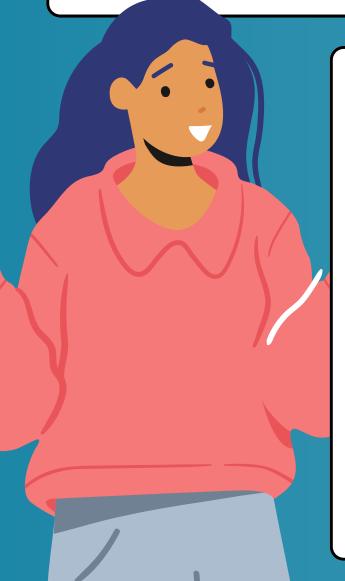


The visionary leader



Strengths

- Decisiveness: able to make quick decisions when required (e.g. when a patient is at-risk, or an incident is unfolding).
- Communication: making sure everyone knows their roles and why it's crucial to improve patient care or internal process.
- Innovation: finding new ways to tackle existing issues like recruitment, complex care, or resolve conflicts.



Areas to focus

- Short-term focus: can get caught up in the long-term vision and lose sight of important short-term milestones.
- Resistance to change:
 introducing new ways of
 working, such as switching to
 digital records, can often be met
 with resistance.
- Gathering other viewpoints: can often miss out on gathering key viewpoints from across the team
 potentially leading to some feeling left out.

The empowering leader



Strengths

- Collaboration: work well with key stakeholders, local communities, and patients to make decisions that suit as many needs as possible.
- Inspiration: inspire team members through an open collaborative culture and an emphasis on development.
- Support: continuously invest in their team members' development, improving their skills and knowledge to create a better quality of care.

Areas to focus

- Slower decision-making: will seek to gather everyone's input, which could be costly during time-critical decision-making.
- Conflict resolution: may avoid difficult conversations and conflict, which could undermine long-term team chemistry.
- Uncertainty: without clear guidance and instruction, some team members could become uncertain about their responsibilities and the importance of their role.



The adaptive leader



Strengths

- Empathy: prioritise understanding and recognise the diverse needs of team members and patients.
- Agility: excel in navigating change and shifting their approach based on evolving social care policies, regulations and challenges.
- Problem-solving: are resilient in the face of obstacles and finding creative solutions or approaches to complex social care issues.

Areas to focus

- Lack of stability: constant adaptation of leadership style can lead to a lack of stability within the organisation (potentially causing confusion).
- Risk-aversion: can be risk-averse, avoiding tough changes or innovations for fear of failure and being unable to adapt.
- Long-term planning: adaptation is excellent for the shortterm – but be careful to make sure a long-term strategic vision is in place for sustainable growth, too.

Next: It's time to apply your leadership style to some real-world examples.

Your leadership in action

It's time to put what you've learned into practice. So grab a pen, refer back to the previous two sections, and consider...

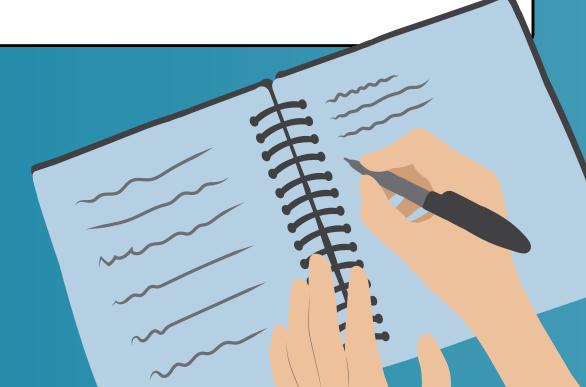
How would you handle the following three scenarios?

Here's some other things to keep in mind when outlining your response:

1. Who are the concerned parties? (patients, stakeholders, various seniority of team members)

2. What is your instinctive approach to resolving the issue?

3. Where might you need to make allowances for your own style of leadership?

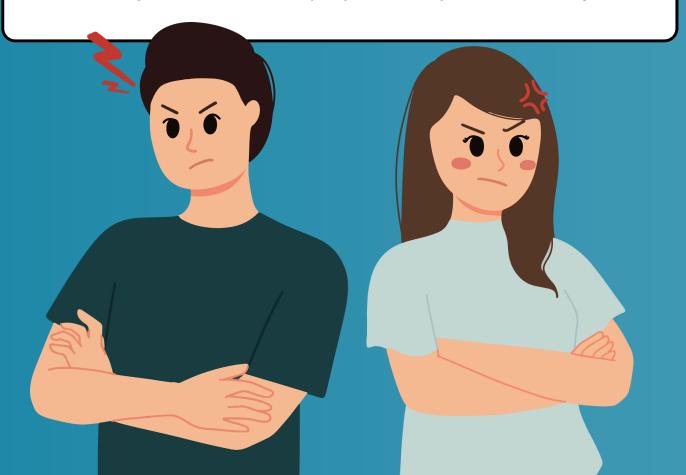


Scenario 1:

Conflict resolution for a patient with complex needs

Two carers, Maria and Meena, are in conflict over how to handle a patient with complex needs. Both team members want the best outcome for the patient but their difference in opinion is beginning to come between them, affecting their ability to work well together. Maria and Meena deliver care as a team – so it's essential they present a united front. Each team member comes to you separately to state their case.

How would you try to resolve their conflict? What potential areas of focus in your own leadership style should you look to mitigate?



Scenario 2:

Navigating barriers within the system

Recruitment and retention in care can be challenging. You're hiring for a role which requires specialist skills; however, the role is taking a little longer to fill than you expected as there aren't many available candidates with the skills you need. This is placing a higher workload than usual on team members and is proving a barrier for you as you seek to execute your vision for your team.

How would you potentially improve your chances of recruitment? How might you keep your existing team members motivated while the process continues?

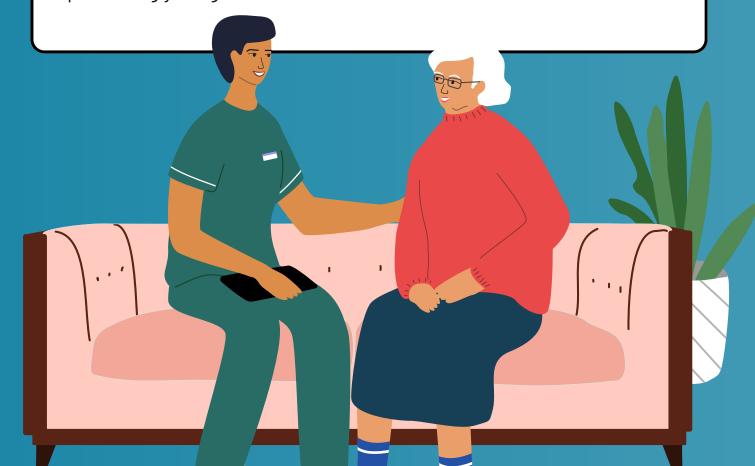


Scenario 3:

A promising carer in need of guidance

One of your team members is a promising young carer looking to progress in their social care career. They want to train, improve, and ultimately move up through the organisation. Currently, they find themselves with little spare time and little knowledge of where to begin with training and development. Seeing this, you want to equip this person with everything they need to be the best carer and future leader they can be.

How would you approach the situation? How might you help the promising young carer?



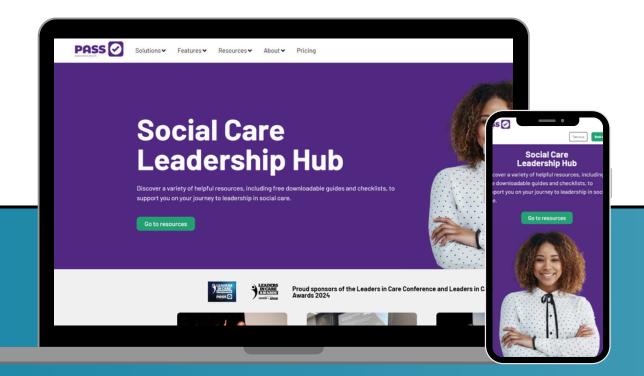
Make care count: more resources to help you grow

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