



# International Journal of Nursing and Health Care Science

Review Article

O'Donnell MG. J Int J Nurs & Healt Car Scie 03: 2022-110

## Servant Leadership: A Call to Leadership Change in Uncertain Times

Mary Gemma O'Donnell, MSN, RN, CCM<sup>#</sup>

<sup>#</sup>School of Nursing, Northern Arizona University, Arizona, USA

**#Corresponding author:** Mary Gemma O'Donnell, MSN, RN, CCM, Assistant Clinical Professor, School of Nursing, Northern Arizona University, 2777 West Windtree Dr, Flagstaff, Arizona 86001, USA

**Submission Date:** 21 January, 2022

**Accepted Date:** 19 March, 2022

**Published Online:** 25 March, 2022

**How to cite this article:** O'Donnell MG (2022) Servant Leadership: A Call to Leadership Change in Uncertain Times. Int J Nurs & Healt Car Scie 02(03): 2022-110.

### Abstract

A servant leader focuses on the growth and well-being of people and the communities to which they belong. The philosophy of being a servant leader stems from a natural feeling that one wants to serve. The purpose of this article is to discuss the topic of servant leadership and its relevance to nursing. This is the first of a two-part series. In Part I, servant leadership is defined and discussed within the context of the current COVID-19 pandemic and examined in regard to customer satisfaction, nursing career choice, and the positive effects of the application of servant leadership to healthcare facilities. Larry C. Spears' ten characteristics of servant leadership are introduced and the elements of being a heart-led leader are described. Portrayals of the philosophies and attitudes of prominent nurse servant leaders throughout history are provided. In Part II, from the narrative descriptions obtained through open-ended interviews with contemporary nurses, a model of servant leadership has been created. These reflections provide poignant examples of how today's nurses apply servant leadership within their specific work roles.

**Keywords:** Compassion; Heart-led; Kindness; Leader; Love; Leadership; Nursing; Nurses; Servant leadership

### Servant Leadership: A Call to Leadership Change in Uncertain Times: Part I

Nursing is a caring ministry. Throughout history, pandemics such as plague, flu, cholera, Middle East Respiratory Syndrome Coronavirus (MERS-CoV), nurses have provided care of the ill and the injured [1]. Recent events have challenged the profession's resiliency. In 2019 the global pandemic of Severe Acute Respiratory Syndrome Coronavirus (SARS-CoV) [COVID-19] emerged and its ongoing presence has resulted in a tremendous toll on health care providers including nurses. Some of the obstacles have been due to the pressures of wearing uncomfortable protective equipment for long hours of a shift, shortages in staffing, exposure to a deadly and potent virus, and the mental anguish of witnessing an excessive volume of patient deaths. The result of this has contributed to nurses leaving the profession and further escalating the nursing shortage.

While actively engaged in this battle against COVID-19, nurses have maintained their professionalism however they are also experiencing fear of what lies ahead for themselves, their patients, colleagues, families, and friends [2]. Additionally, nurses share the same concerns as much of the population; providing and protecting themselves and their families. Their concerns are multiplied due to their patient obligation and their need to address the health and well-being of their own families. These events have suggested that this may be a time to transform the way that nurses behave and lead. An innovative process such as servant leadership may be an option to rejuvenate our exhausted colleagues and recover our powerful resilience.

### Nurse Servant Leaders Put Others' Needs before Theirs

It was Christmas Eve at a small Midwest hospital and Anne O'Donnell, RN, MSN, AFNP, a 28-year-old nurse practitioner was rounding as a house supervisor. With only a couple of hours left to her shift, her mind wandered to Christmas Even plans of attending Midnight Mass with her siblings whom she had not seen in many months, visions of enjoying a festive Christmas Eve party hosted by her parents, eating Christmas cookies and opening presents played in her mind's eye. She noted the patient's call light and stopped in. The elderly patient, Miss M.,

Was in pain. While addressing this need Miss M. shared with Anne that she had no family but hoped to watch midnight mass on her TV in her room. She asked Anne what festivities she had planned for the evening. Without hesitation, Anne told Miss M. that she wasn't sure she would have time to get to her home for Mass after work. She asked Miss M. if she would like company for the televised midnight service in her room. Miss M's eyes filled with tears as she joyfully accepted. She would not be alone for Christmas Eve after all [3].

The true story of Anne's care and attention to Miss M.'s needs reflect a nurse servant leader in action. Anne O'Donnell would not have the joy of being with her family that night, but she would never forget the gift of happiness and fulfillment that her heart would treasure forever. Servant nurse leaders practice their profession in a compassionate and caring way.

Most nurses choose their profession because they want to take care of others [4]. In doing so, nurses typically place patient needs above their own. The most recent and significant case in point is the COVID-19 pandemic which has deeply publicized the personal risks that front line nurses take every shift they work due to the potential for exposure and virus transmission [5]. Many nurses volunteered to work in COVID-19 units early in the pandemic, even before a full understanding of measures needed to care for their patients safely knowledge of exactly what would save their patients [6]. The World Health Organization estimates that approximately 115,500 health care workers have died from COVID-19 between January 2020 and May 2021 [7].

### **Servant Leadership Defined**

Robert K. Greenleaf first wrote about the fusion of servant and leader in 1977 [8]. He described the servant leader as being a servant first. It begins with the natural inclination of desiring to serve first, and then the conscious choice brings a person to aspire to lead. The philosophy of servant leadership stems from the idea that the growth and well-being of people should be the goal of one's leadership practice. Greenleaf wrote, "The best test is: Do those served grow as persons? Do they become healthier, wiser, freer and more autonomous?" [8].

In servant leadership, there is a heavy emphasis on customer satisfaction [9]. If the traditional management structure within any organization is a pyramid: the base represents the lowest level employee with the point at the top usually representing a single CEO. With servant leadership, the leader becomes the point of the inverted triangle and the lowest line workers become the broad top. Servant leadership focuses on the customer, and in a nurse's case, for example, the focus is on serving the patient, the coworker, the nursing student, and the colleague.

Research shows that there is the value of servant leadership in nursing and suggests that these characteristics may be inherent in those individuals who choose and select nursing as a career [10]. In the book, *Servant Leadership in Nursing* [3], O'Brien indicates that literature supports the positive value of employment of servant leadership in healthcare settings. Accounts include the development of programs to integrate servant leadership into their culture; an alternative to the traditional power-based approach; the recognition of the possibility of human failure and seeing employee collaboration as part of the developmental process.

Transformational leadership is very similar to the concept of servant leadership. The transformational leader leads followers by doing the right thing because it is the right thing to do [11]. Transitional leaders treat people with care and compassion and encourage innovation and creativity. They also inspire others with their vision.

### **Characteristics of a Servant Leader**

An effective nurse servant leader exhibits many of the traits that Robert Greenleaf had written about. In 1992, Larry C. Spears extracted from Greenleaf's writings a set of ten characteristics of the servant leader: Listening, Empathy, Healing, Awareness, Persuasion, Conceptualization, Foresight, Stewardship, Commitment to the growth of people, and Building Community [12]. Spears notes this is not an exhaustive list, however, these traits encompass the main concepts. Servant leaders lead from the heart. Tommy Spaulding writes that leading from the heart means leading with love [13]. He notes love is at the core of qualities such as passion, commitment, compassion, and servant leadership. People who lead from the heart care deeply about serving others, about selflessness, about doing the right thing even when it is challenging, about developing empathy, and demonstrating generosity. He emphasizes that even though these ideas may seem "Soft" they permit us to live and lead much more powerfully. Spaulding says that asking questions like, "How can I serve today," and "How can I do right?" are words of a heart-led leader [13].

Heart-led leadership is a business model that results in love-driven outcomes [13]. Spaulding identifies the importance of forging relationships within a team. In essence, building trust and fostering relationships is built by knowing the team members. He provides an example of gathering senior leaders together and asking them how much they know about each other. During the meeting, the topic of charitable volunteerism amongst the group was discussed and many leaders shared a wealth of volunteer work and service they had done. One woman was quite candid and said she chose not to volunteer and desired to stay focused on her relationship with her husband. Spaulding asked if anyone ever knew about each other like this before and not one hand went up. Spaulding said to the woman, you must have a fantastic relationship with your husband. The woman said yes and broke down in tears and said her husband was 68 years old and not one of his relatives lived past 70. She said that was the reason why every moment she had when not at work, she spent with him. This self-revelation led to a discussion of the participants sharing personal stories. The premise of this exercise was that everyone has a story. Empathy, trust, and compassion grew within that team that day.

Studies report that servant leadership that has been demonstrated by organizational leaders has a positive effect on nurse job satisfaction [14] and significantly reduces nurse burnout. A study by Jooste and Jordann [15], recommends nurse managers include servant leader traits such as empowerment, compassion, and role modeling when overseeing nursing students. Servant leadership may be a plausible way to address some of the factors that are influencing the nursing shortages of today [9]. Advanced Practice RNs who promote the greatness of others is empowering for others and creates a positive culture that opens the way for healthcare excellence [16].

Ronnie Sheridan, the author of “Kindness: The Domino Effect” [17], is a nursing instructor and shares that teaching nursing students is her greatest love. She notes that the pandemic has provided additional feedback from students: besides creating a legacy of saving lives, the importance of showing kindness. Sheridan provides examples of kindness, something so simple such as smiling, asking colleagues, “How can I help you?” and offering forgiveness and understanding. It is showing support and caring for one another. It is demonstrating kindness even in the toughest of times. Sheridan says that by bringing energy, smiles, kind words, and empathy to her classroom, this positive behavior creates a domino effect, perfectly falling and going the distance.

### **Nurse Servant Leaders of the Past**

Mary Elizabeth O'Brien [3] writes about several prominent historical nurse servant leaders who cared for the sick in her book, *Servant Leadership in Nursing*. She reminds us all that the legacies of servant leadership left by this small cadre of nursing leaders have provided inspiration, support, and encouragement for all nurses who have followed in their footsteps.

Florence Nightingale was a servant leader who felt a call to serve when she was a child [3]. She was a deeply spiritual and prayerful person. She admired the nursing philosophies of both the Daughters of Charity and the Kaisersworth Deaconesses and as a result, she studied with them as part of her nursing education. Her ultimate goal in life was a mission of service to humanity. Nurses know Nightingale best from her devotion to the care of wounded soldiers during the dreadful conditions of the Crimean War. Her greatest servant leadership gift for nurses was the establishment of professional nursing. She established the first nursing school for nurses at St. Thomas Hospital in London and wrote a book called *Notes on Nursing* that outlined the basic principles of physical and psychological nursing care for sick individuals.

Burks [18] talks about Nightingale as a servant leader in an article titled, “Leading Like Flo: Servant Leadership.” She said that Nightingale believed that there was no such thing as a menial task for a nurse and that for the benefit of the patient who is suffering, “Scouring” a patient’s room is not beneath the nurse who had the true calling.

Clara Barton was a servant leader and as a result established the American Red Cross [3]. Similar to Florence Nightingale, she knew when she was very young that she wanted to care for the sick. During the Civil War, she alone gathered volunteer nurses and supplies and on wagon trains traveled to the battles that were raging. She and her volunteers bandaged and nursed thousands of fallen soldiers often with shells bursting around them. Edith Cavell was a servant leader during WWI in skilled trauma nursing, tending to the wounds of those suffering from battle [3]. Cavell helped to organize an underground system where she would care for allied soldiers and when it was time for them to leave, she would have guides take them to the border; to ensure their safety they were disguised as laborers, with forged identification papers. Ultimately Cavell was discovered by the Germans and was sentenced to death for treason. Her last recorded words were if she had to do it over, she would do it again. She is quoted to have written, “I know that patriotism is not enough, I must have no hatred and no bitterness toward anyone” [3].

O'Brien [3] adds accounts of other nurse servant leaders: Lillian Wald, Mary Breckinridge, and Genevieve de Galard. Wald, a nurse, social worker, and advocate for the poor, was the first nurse servant leader in public health, specifically, ‘visiting nurses.’ In 1928, she brought midwifery to the United States and sought to reach mothers and babies in need where medical care was virtually non-existent. Breckinridge was a frontier nurse who traveled on horseback in the rural, poverty-stricken areas of Kentucky. Nurse-Midwives came from England at the time and were advised to take at least five riding lessons before reporting for duty so that they were able to sit quietly on the horse and hold the reins. Air Force Lieutenant de Galard was a servant leader in the field of combat nursing during the French campaign with the Viet Minh in 1953. De Galard frequently risked her life amid mortar shelling to care for wounded soldiers on the battlefield. Eventually, she and 50 soldiers were captured by the Viet Minh and were prisoners of war for three weeks. During the captivity, de Galard cared for the soldiers’ wounds and wrote letters for them. After being released, de Galard was invited by President Eisenhower to receive the Presidential Medal of Freedom. She said, “I do not deserve this honor.” And insisted “That she had only done what any nurse would do” [3].

### **Conclusion**

Servant leadership is a philosophy that originates naturally from within an individual and does not require anything more than a smile, a kind word, and a genuine interest in the success and growth of others. Nurses throughout history have been leading as servants since this profession has been in existence. Nurses in contemporary practice continue to serve others and lead others through love and kindness. In the next part of this series, nurses who are currently engaged in nursing service provide their applications of being a servant first. As well, insight into how a nurse in any role can relate the concept of being a ‘servant as leader’ is showcased. Included in Part II are the traits that are specifically indicated for nurses as aligned with Larry Spears’ 10 characteristics of servant leadership.

## Servant Leadership: A Call to Leadership Change in Uncertain Times: Part II

This is the second of a two-part series. A servant leader focuses on the growth and well-being of people and the communities to which they belong. The concept of being a servant leader arises from a natural inclination that one wants to serve first and then lead next [8]. The purpose of this article is to discuss the topic of servant leadership and its relevance to nursing. The COVID-19 pandemic has affected the way nurses cope and the way they lead - to the point of mere exhaustion and loss of hope in their profession. Servant leadership may be the saving grace for all nurses - because the attributes of trust, empowerment, and respect are appropriately derived from the nursing servant leadership characteristics of giving of oneself, assessing needs, and being there to serve. All nurses have the power to be servant leaders. Here in Part II, nurses who are currently engaged in nursing service provide their applications of being a servant first. As well, insight into how a nurse in any role can relate to the concept of being a 'servant as leader' is shown. Included are the traits that are specifically indicated for nurses as aligned with the characteristics of servant leadership?

**Keywords:** compassion; heart-led; kindness; leadership; leader; love; nursing; nurses; Servant leadership

### Servant Leadership Roots

Greenleaf R [8] was the first to write about the servant as leader in 1970 in an essay that he published based on a mythical story he read about a group of men on a journey. Traveling with them was a servant, Leo, who did menial chores but who sustained them through his spirit and his song. One day, Leo disappeared. The group became disorganized, and the journey was abandoned. The group was unable to go on without Leo. Later, after many years of wandering, one of the men discovers that Leo is the great and noble leader of the organization that had sponsored the journey. In essence, this story says, the great leader is seen as a servant first, and while on the journey Leo was actually the leader the entire time. He was a servant first because that was what he was, deep down inside.

Larry C. Spears [12] was a premier student of Greenleaf's writings and director of the Robert K. Greenleaf Center for Servant Leadership and he referred to Greenleaf as a mentor and a pioneer in the field of servant leadership. Spears extracted a set of 10 characteristics of a servant leader from Greenleaf's writings: Listening, Empathy, Healing, Awareness, Persuasion, Conceptualization, Foresight, Stewardship, Commitment to the growth of people, and Building Community [12]. Spears notes this is not an exhaustive list, however, these traits encompass the main concepts.

### Nurses as Servant Leaders

For centuries, nurses have blazed the trail before us by putting forth their examples of putting others first and serving the ill and infirm. Think of Florence Nightingale during the Crimean War and of Clara Barton's presence on battlefields during the Civil War. In current times, as nurses battle the pandemic's devastating effects on their patients and the impacts on each other, many nurses have stepped up to the plate and do what we do best- take care of people. All nurses regardless of specialty have the potential to be servant leaders. The foundation of being a servant leader for nurses is through the expression and demonstration of genuine love and compassion for every human being. It is called leading from the heart [13].

### Contemporary Nurse Servant Leaders

The love of people that motivated the emergence of nursing as a profession is still so evident today. In the following exemplars, nurses still actively engaged in the profession provide insight into how servant leadership is applied within their practice settings.

**Listening-** listens receptively to others

**Laura Crouch, EdD, RN, CPAN, CNE, Northern Arizona University (NAU), Flagstaff, AZ professor and Faculty Mentor of over 20 years, has this to say about Listening with the heart (Personal communication, December 14, 2021):**

*"As a servant leader, I feel great interest in the wellbeing of my co-workers and the students. There are times in my career, I have been assigned a "challenging" student. I begin to look for the student's strengths before I look at the potential weaknesses. For example, do they contact me with issues, do they submit their assignments on time, do they address all the content in their papers, or discussion postings? Many times, the weakness is related to social skills. Asking the student to include me in group conversations is one way to support and monitor this potential problem. I'm just "listening" to the conversation - no input is expected. It is amazing how the instructor's calm "presence" can make a difference in the interactions - with no words spoken - or written."*

**Pam Stetina, PhD, RN, CNE, Northern Arizona University (NAU), Flagstaff, AZ, former Director of the NAU School of Nursing and current NAU nursing professor has been in academia for 27 years. Dr. Stetina shares how she places herself in the "Be Here Now" mode for her students (Personal communication, August 22, 2021).**

*"I find that sometimes I just "know" what needs to be said. For example, a student failed an exam, and it was devastating to the student. When the student came in to discuss study techniques and review items missed, I felt there was more than just the exam. I said quietly and gently, "What else is going on?" The student shared some significant life challenges, and I was able to guide the student to resources that could help. I think we get so busy that sometimes we don't stop to tap into our intuition or take the time to be authentically present in the moment. In actuality, it doesn't take a long time to just be present with someone- and it will save time later to listen now."*

**Jill Nelson, MSN, RN, CNL, former Director of Critical care at Yuma Regional Medical Center in Yuma, AZ, and now an adjunct faculty member at Northern Arizona University, Yuma Campus has been a nurse for over 36 years. Here Jill shares her deep commitment for listening intently to others (Personal communication, September 6, 2021).**

*"This example is from the perspective as a Director of Critical Care. In the COVID era, things were changing rapidly and often times from shift to shift we were changing the "rules" per say for PPE; staffing ratios and utilization of adjunct staff. It was very difficult to continue to try to communicate and support those changes from shift to shift. What I found most valuable was listening to my staff's concerns and refrain from attempting to discount their concerns and defend decisions. I had to learn to say, "I hear your concerns" and then work through the responses and find a mutual acceptable process."*

**Shauna Manning, BSN, RN has been working at the Northern Arizona Veterans Healthcare Hospital in Prescott, AZ for the past 22 years. Shauna believes that her patients share their stories because they feel safe where they are (Personal communication, September 16, 2021):**

*"At the VA we care for Veterans of a variety of ages and backgrounds. I have never been in the military myself, but it is clear to me that when somebody is in the military it is an experience that one does not forget. It becomes a part of them. Sometimes a veteran in my care will start talking to me about his time in the service. Even though it may have been 40 years prior, he speaks as if it was more recent. I see that these times had an impact on them and wonder if being on station and the VA hospital triggers memories. I listen and am honored that they chose me to share their memories both good and traumatic. Though I often want to ask them questions about their stories I generally don't. The feeling that I get is that they are sharing because they are in a safe place with us. I don't pry but am there to listen."*

**Empathy-** accepting others and recognizing others for their unique and special spirits

**Nurse Servant leader Crouch, Nursing Faculty and Faculty Mentor:** *"I prefer sympathy or compassion over "empathy". Empathy is simply understanding the situation. Sympathy or compassion experiences the emotional needs, distresses, discouragement, or even sadness. Allowing a person to share their feelings is important. The attitude to "buck-up" and "move-on" is never appropriate. Usually, the desire to move forward will come through the bonding support of sympathy and compassion."*

**Nurse Servant leader Stetina, Nursing Faculty and former Director of School of Nursing:** *"I have a natural curiosity about others and their stories. I like hearing more than the superficial concerns. I think I just ask gentle questions and, again, try to be present in the moment. I had a clinical group once that joked that I had made them all cry one semester because of caring concern. On my part, I just put myself in their shoes. One student had lost a grandparent and was taking care of a patient with the same diagnosis. It was unintentional and the student didn't realize the impact until I gently asked if the student was okay - that it must be hard for them. One hard thing for me is that I have a personality type where I tune in to other's emotions and it can greatly affect me. I have to be conscious about balance."*

**Nurse Servant leader Nelson, Critical Care Director, Charge Nurse:** *"As a charge RN, we had a patient who was gravely ill in our critical care unit. She was young and her extended family were making the staff very uncomfortable and at times interfering with her care. I had the opportunity to meet with them numerous times and over time I uncovered that a previous experience at our medical center caused them to be very distrustful of our care. Their extreme reaction to our conversations led me to realize there was something under the surface that we didn't fully understand. It took a bit of time over several days to realize what was happening. Many of these conversations were organic in nature and very informal. It then allowed me to voice their concerns and create a mutual communication "contract for truth" that allowed us to care for their loved one in a mutually respectful environment."*

**Nurse Servant Leader Manning, Hospital Nurse:**

**In commenting about the demonstration of great empathy for another:** *"This makes me think of a dementia patient who was sweet as could be. He was incredibly loving and very emotional. Caring for him was emotionally draining and, because of that, we had several staff members request not to care for him. I noticed that if he didn't get a certain amount of emotional attention his outbursts would be exacerbated. During his stay with us I would be sure to hold his hand when I spoke to him and would go into his room while I charted so he wasn't alone. His behaviors reduced! I am not a dementia nurse, so this was a cool experience for me."*

**Healing-** the potential for healing one's self and one's relationship to others.

**Nurse Servant leader Crouch, Nursing Faculty and Faculty Mentor:**

*“With COVID-19 affecting every life - there are times when the students express deep distress. I respond to each student individually and provide every opportunity for them to complete their work. I'm generous with “incomplete” grades. This provides the student the opportunity to successfully complete their work - when they are ready and able. There is no time limit for healing. Everyone responds to stressful situations and distress in their own manner.”*

**Nurse Servant leader Stetina, Nursing Faculty and former Director of School of Nursing:**

*“I have inadvertently hurt someone else's feelings. Sometimes I react first and think second. As soon as I realize I may have done something to hurt another, I will talk to that person. I don't feel pride has any place in these situations and I actually think vulnerability is appropriate in some situations. If I made a mistake, I believe the relationship will heal much faster if I own up to that mistake and ask for forgiveness. Most of the time the person has been very receptive. I am aware of a relationship that did not heal. In that situation, the relationship felt strained whenever we needed to work together. In times I've had to mediate or reprimand, I try to make sure that everyone has their say and summarize the outcome. Most of the time this has worked, but I also know there are times when there was some frustration because someone had to compromise.”*

**Nurse Servant leader Nelson, Critical Care Director, Charge Nurse, Adjunct Nursing Professor:**

*“One of my students last year was hurt by some feedback they received from their peers. I listened to their concerns, and we developed strategies to address the situation with their peer. They were able to speak and mend their relationship. It took encouraging and not interfering. This allowed the student to address the situation professionally and build on their conflict resolution skills.”*

**Nurse Servant Leader Manning, Hospital Nurse:**

*“I have several co-workers who are hesitant regarding the covid vaccine. As the infection control representative, I make myself available for anyone to ask any questions that they may have. If I don't have the answer, we look it up on a reputable evidence-based website. A few have received their vaccine after being able to ask questions. I am sad that some will lose their jobs due to being victims of misinformation. I am trying to help support my co-workers and profession by reporting fact.”*

**Awareness-** being able to view most situations from an integrated and holistic position.

**Nurse Servant leader Crouch, Nursing Faculty and Faculty Mentor:**

*“When asked about the values she holds to be true to her actions and thoughts, Dr. Crouch says that “I am not the most important person in the student's life. I'm simply a means for their own self-empowerment.”*

**Persuasion-**reliance on persuasion rather than one's positional authority

**Nurse Servant leader Stetina, Nursing Faculty and former Director of School of Nursing:**

*“I also want to comment on the use of openness and persuasion rather than control. I have exercised a certain amount of control, but I find that my usual is, “Have you thought about?” or “What if xyz?” or similar comments to try and solicit more information or get a group on board with an idea.”*

**Conceptualization-**the ability to think beyond day-to-day realities.

**Nurse Servant leader Crouch, Nursing Faculty and Faculty Mentor:**

*“Generally, standards and rules are important guidelines. There are situations where standards and rules do not “fit”. For example, one student broke her leg during her final clinical rotation. I have a close friend who is a Human Resource nurse for a hospital. He works with employees who are injured on a daily basis. I asked him if she could complete her clinical work through his preceptorship. He found many wonderful, meaningful experiences for this student - and she graduated on time!”*

**Foresight-** The ability to be intuitive; understand lessons of the past, realities of the present, and likeliness of decisions for the future.

**Nurse Servant leader Crouch, Nursing Faculty and Faculty Mentor:**

*“These difficult times will pass - they always do. We must not be stuck in the present time. Servant leaders are not focused on their own pursuits - they will change with the fluid needs of the professional environment. Looking forward to new opportunities through virtual healthcare responses, more community outreach, less acute hospitalization, with new and innovative healthcare modalities.”*

**Stewardship-** a commitment to serving the needs of others

**Nurse Servant leader Crouch, Nursing Faculty, Red Cross Volunteer, and Faculty Mentor:**

*“With the COVID pandemic, obtaining clinical sites is a huge challenge throughout our country. I'm currently pursuing an endeavor to provide nursing students with an opportunity to volunteer with the American Red Cross to obtain clinical hours. This endeavor requires stewardship characteristics. There are several facets to consider in accomplishing this endeavor. The team players include students, schools, and the Red Cross. All must come to consensus regarding the feasibility and quality of the clinical experience.”*

**Nurse Servant leader Stetina, Nursing Faculty and former Director of School of Nursing:**

*“I usually think of managing monies when I think of stewardship. Funds have been used to help students in emergency situations. I make it a habit to donate to NAU, especially the SON and library.”*

**Nurse Servant leader Nelson, Critical Care Director, Charge Nurse, Adjunct Nursing Professor:**

*“As a director, I had the opportunity to assist a staff member that was struggling with addiction and wanted to self-report to the nursing board. I was able to keep her confidence while facilitating meetings with the leaders of the unit that allowed the staff member to share her situation in her own words. This met the requirement for observations that were needed to assure patient and staff safety.”*

**Nurse Servant Leader Manning, Hospital Nurse:**

*“As nurses, part of our role is to promote health. I believe we should be leading the vaccination program for the country. I am saddened that this is not the case. I do worry about nurses choosing not to follow medical recommendations and how this will affect the level of trust the community has for nurses.”*

**Commitment to the growth of people**

**Nurse Servant leader Crouch, Nursing Faculty, Red Cross Volunteer, and Faculty Mentor**

*“This week I attended the NAU North Valley pinning, and after the ceremony a student from one of my online courses, came up to me and thanked me profusely for working with her when a family member was very ill with COVID. She was thankful that I was compassionate and understanding during a very difficult few weeks. Here she was graduating and had a very good job offer in an ICU. These experiences are why I teach.”*

*“I heartily believe in mentorship in every phase of our nursing career. I have been promoting mentoring in the SON, and collaborating with other faculty across the NAU campus. An important aspect in mentorship is identifying faculty who may be a good match for support, growth, encouragement, and friendship.”*

**Nurse Servant leader Stetina, Nursing Faculty and former Director of School of Nursing:**

*“I have mentored numerous others. Sometimes directly, sometimes indirectly. I might help a student find words to say when the student needs to talk to a faculty member or a roommate. Very recently, a friend was speaking very negatively about themselves. In talking with my friend, several characteristics were mentioned of another person my friend admired. After my friend mentioned these characteristics, I was able to mirror back some of those admirable traits in my friend with examples. I could see them clearly - my friend could not. Again, I try to be gentle.”*

**Nurse Servant leader Nelson, Critical Care Director, Charge Nurse, Adjunct Nursing Professor**

*“My mentor was my previous Director Karen Hardy. She led the unit for almost 30 years prior to me taking the reins after her retirement. She mentored me by role modeling communication strategies that allowed me to see the other's opinion of what had happened. I realized I was only seeing one side of the coin and until I could see all sides, I couldn't make a good decision. The other item that I really learned from her was the ability to allow staff to grow and move out of our department gracefully. Very often it feels very personal when someone decides to transfer out of your department. Her philosophy was that as long as their talents remained in the organization, it was a win for all of us. It also allowed you to welcome them back to the department when their circumstances changed again. It makes for very loyal and happy employees.”*

**Nurse Servant Leader Manning, Hospital Nurse**

*“I believe in growing the future of nursing by supporting nurses new to the profession. Having a nursing student is generally a little more work, but I know it important to give my time. I was a student once and 20 years later I still remember those who took the time to teach me. Now it is my turn to help nursing students and new nurses find their wings.”*

**Building Community-** creating true community among those who work within an institution

**Nurse Servant leader Crouch, Nursing Faculty, Red Cross Volunteer, and Faculty Mentor**

*“A caring nurse puts self away to promote relationships and improve outcomes. Bonding is an important part of selfless relationships. Through teaching online, it is important to be sensitive to the students’ “tone” and how the semester is unfolding. One of the most important aspects is to quickly respond to emails, and promptly grade the assignments. These endeavors lower stress and allows the students to move forward with the confidence that they are on the right track.”*

**Nurse Servant leader Stetina, Nursing Faculty and former Director of School of Nursing**

*“I remember several Zoom meetings with students who were struggling related to isolation and so many of the resources being shut down (due to the pandemic). I held online office hours for all of my classes. I occasionally included tributes or songs or resources to students (especially the licensed nurses) that I thought might provide a light of hope. I’d always acknowledge that we were going through tough times and give words of encouragement. I had several students reach out to let me know how much those simple words meant to them. Even if they didn’t reach out, they felt they knew I was there if they needed me.”*

**Nurse Servant leader Nelson, Critical Care Director, Charge Nurse, Adjunct Nursing Professor**

*“It is very difficult to discuss one’s own selflessness. It just doesn’t feel natural. I was able to see it clearly in the deeds of the leaders serving under me during the pandemic. Some of my Resource Coordinators (Charge RNs) were working 5-6 shifts a week. They would respond to emergencies; take patient assignments; assist with the care of other patients; listen to complaints from MDs; patient’s families; staff and still stay an hour or so after their shift was complete to set up the next RC for success. They did this for weeks at a time.”*

**Nurse Servant Leader Manning, Hospital Nurse**

*“I think that nurses make a difference every day for covid inpatients. The treatments that are currently available are minimal. Our goal is to provide care to restore health while they are often progressively getting sicker from the virus. It’s like working uphill. Many of the treatments that help are nursing interventions such as positioning, ambulation, Incentive Spirometer, and encouragement. Positioning a patient on their abdomen often takes 2-4 people, ideally, they are repositioned every 2 hours. It is exhausting work, all while in a suit that prevents us from taking care of our own needs such as access to water or the restroom. I don’t mean to sound dramatic! I am just very serious that this past 18 months have been the most challenging of my 22-year career. It is an honor to be a nurse and if given the option to go back in time and change my career path, I would still become a Registered Nurse.”*

“How to lead as servant first” (Larry Spears 10 Characteristics of a Servant Leader)	Nurse Educator (Personal communications, 2021, unless otherwise indicated)	Nurse Clinician (Hospital nurse, office nurse, bedside nurse)	School Nurse [19]	Nurse Manager (In any setting or position) [20]
Listening	Listen intently with your heart. Be present and focused with your student – allow no distractions. Listen because you sincerely care about the other person.	Ask others “What do you need from me? What can I do for you?” [21]. Listen intently-keep sincerity in your voice [3]. Recognize when patients want to talk about their beliefs and fears [22].	Be attentive, take a committed interest in others; really listen and then act on what is being heard; pay attention to the concerns of students and co-workers.	Provide intentional and receptive listening. Reflect on your inner voice. Credit team members. Encourage innovative ideas. Translate those ideas to meaningful actions [20]. Learn to listen-show restraint, pay attention, and actively listen to staff concerns [16].
Empathy	Allow the student to share his/her feelings- be supportive through compassionate and caring dialogue. Put yourself in the other person’s shoes. Know your student’s names, their dreams, their struggles and establish a caring relationship [22].	Put yourself in others’ place [3].	Provide emotional support, be charismatic, stimulate the intellectual interests of clients.	Perceive team member circumstances and standpoints. Accept their unique abilities and potentials. Example: do not require your nurses to do anything in which they are uncomfortable. Be self-less.

Healing	Respond to each student's needs uniquely to their situation. Be supportive at all times. Be understanding of their stress, feelings, and individual needs. Simply by asking the student if they are doing ok, can provide the direction that you need to help them best.	Be kind and compassionate to others. Be in tune with what is going on for others. [3].	Facilitate positive relationships with any of the school stakeholders. Provide caring skills to bring health and healing to the school environment.	Be aware that nursing attracts individuals from diverse backgrounds, including some with broken spirits and fractured personalities. Lateral violence has a potential to ensue- be committed to serve first to bring healing to the unit. Be aware of staff strengths to build acceptance of team members.
Awareness	Recognize that you are a guide to support and empower students. You are there to encourage students and others to reach their full potential.	Just be who you are. Be trustworthy. Speak well of others who are not present and those who are present will trust you more [21].	Influence others by demonstrating knowledge and modeling behaviors to improve individual or situational outcomes.	Recognize important events in team member's lives to develop a supportive culture.
Persuasion	Put self away to promote relationships and improve outcomes. Bonding is an important part of selfless relationships. When teaching online, be sensitive to the students' "tone" and how the semester is unfolding. Quickly respond to emails, and promptly grade assignments. Provide positive messaging.	Be open to contrary views. It does not mean you have to agree with it. Start the conversation with "Good! You see it differently! Let's talk." Changing your mind because you are open to others' views is how you grow [21].	Use different approaches to empower others. Be a coach to individuals or groups during committee meetings. Facilitate relationships with various school committee members.	Use collective expertise to build consensus. Servant leaders lead with not having their way, but instead they lead to have the best way. Gain consensus by discussing matters with your team.
Conceptualization	Be flexible to meeting the unique situations that arise for your students. Forge links with professional staff in clinical settings [3]. Go the extra mile for the student- allow them extra time for an assignment for an emergency or personal situation; keep the student trust in check and hold any information in trust [3].	Be vulnerable. Freely admit when you were wrong. Sincerely and humbly apologize without any excuse. Errors of judgement will be forgiven. Saying "That was a mistake and I apologize for the impact it has had on you. [21]"	Be accountable and take a genuine interest in team members' input. Show them that their input is valued. Encourage any new team member and their voices. Help to create a vision of the transformation.	Manage predicaments like medical emergencies, concurrent admissions, transfers, staff shortages emergencies collectively by sharing issues with team members. Equip them with creative ideas for the future. This process will advance their expertise to improve healthcare quality.
Foresight	Stay focused on the present time of healthcare advances and technology changes and be attentive to others' needs. Have a positive attitude.	Draw on past experience in moments of chaos and remain calm, centered, and in control. Teamwork can strengthen during challenging times [21].	Make people aware of what is expected of them and how their work fits into the organization.	Use multiple viewpoints to integrate with a broader lens to facilitate decision making.
Stewardship	Include and request student input and feedback for resource changes, ideas and supports.	Be a resource to others. Proactively ask a busy co-worker, "I am caught up, what I can do for you now?" Acts of kindness lead to great feelings of camaraderie [21].	Encourage staff members to be creative and to use innovative methods. Act as a guide to establish small achievable goals to give a team or group momentum.	Hire and retain team members who work to make the unit environment better for peers and patients. Empower the workforce and sustain a team spirit.
Commitment to growth of people	Help the student to see what it is in themselves that is going to make them a good nurse or a good leader [3]. Show understanding and kindness during difficult and challenging times for students. Point out positive characteristics in others. Value others' opinions and embrace them.	Tell others: "I am here for you, and I believe in you" [21].	Acknowledge others; recognize their value and share with others; acknowledge a teacher's idea and share it with an administrator; or credit a secretary for being a useful asset to the organization. Always follow through with commitments.	Be committed to assisting team members in their professional and personal journeys. Identify the unique talents and strengths of staff members. Engage them in line with their interests and skills to benefit the organization [20]. Allow people to fail. And continue to support staff in the face of failure. Do not let risks be a limitation [16].
Building Community	Make yourself readily available to students. If warranted, arrange outside of routine office hours meetings for student needs. Model humility. Do not ask someone to do a task that you are not willing to do yourself. Be willing to get your hands dirty [22]. Establish reputation for approachability [22].	Connect in a meaningful way with others. Measure success on how well other people are doing [21].	Collaborate to develop programs that promote & enhance health of students and the school community. Foster relationships with school cafeteria staff and play a role in nutritional education and establish wellness goals for the school. Be involved with policy development for school district.	Share a common purpose and values with your team. To enrich quality care, make regular visits to patients, gather information about the care they received, share this supportive feedback with individual nurses and the team. Recognize the needs of and support each team members. Thank staff for their contributions. Welcome new team members. Whenever there is a derangement from the servant leadership model, reinforce the concept- "serve those who have served us."

**Table 1:** How to be a servant leader as indicated for a nurse educator, nurse clinician, school nurse, and nurse manager.

---

## Conclusion

Servant leadership is a caring leadership philosophy that has been embraced by many nurses within their practice. When nurses treat others with genuine love and kindness, this behavior helps to build trust because it shows that the nurse really cares about the welfare of others. Nurse leaders who listen, show empathy, and demonstrate humility provide a psychological safety net that leads to a higher level of employee engagement.

Leading as a servant may be a natural inclination for those individuals who choose nursing as a career. And many nurses may feel that something innately drives them to put their patients before themselves. Shauna Manning, hospital RN, states that “I have stayed strong for my patients and my community. Serving is something that I feel called to do” (Personal communication, September 16, 2021).

It is important that nursing faculty demonstrate servant leadership so that their students can someday model this behavior themselves within the workforce and within their communities. Staff nurses, nursing students, and healthcare organizations may benefit from the application of servant leadership in many positive ways, including overall job satisfaction, personal growth, and ultimately, nurse retention.

Servant leaders aim to serve others. Empowerment for others is a great strength of the nurse servant leader. Laura Crouch, NAU nursing professor, states, “My teaching philosophy is to support every student to be as successful as possible - to meet their optimal potential” (Personal communication, December 14, 2021). For the nurse educator, listening, advocating, and making a difference brings a significant dimension of caring to the community being served.

Nurse servant leaders throughout history served patients courageously on battlegrounds, missions, and hospitals. Contemporary nurses demonstrate their servant leadership during times of natural hazards, pandemics, and similar to their historical counterparts, during wartime. In this time of COVID-19, just like our nurse colleagues from the past, acutely ill patients have died with only nurses beside them, often with the nurse holding their hands, comforting them, and ensuring them that they are not alone.

Ball [22] explains the nurse as a servant leader very well. Humility is perhaps the foundation of a servant leader. It is the reason that nurses can work 12-hour shifts, bathing, feeding, toileting, and turning their patients without taking time to eat or use the restroom themselves. Humility is what keeps nurse educators on campus long after their classroom and office hours are over to support a student who is struggling. She adds, “It is what drives both to touch the untouchable and love the unlovable” [22]. Now more than ever nurses everywhere need to be kind to each other (and to ourselves) as we tackle new ways of living and working [2]. All nurses have the chance to develop themselves into authentic servant leaders, all it takes is a desire to lead from the heart [23-25].

## References

1. Piret J, Boivin G (2021) Pandemics throughout history. *Frontiers in Microbiology* 11: 631736.
2. Jackson D, Bradbury-Jones C, Baptiste D, et al. (2020) Life in the pandemic: some reflections on nursing in the context of COVID-19 29: 2041-2043.
3. O'Brien (2011) Servant leadership in nursing: Spirituality and practice in contemporary health care. Sudbury, Massachusetts.
4. Vance T (2003) Caring and the professional practice of nursing.
5. Fawaz M, Anshasi H, Samaha A (2020) Nurses at the front-line of COVID-19: Roles. Responsibilities, risks and rights. *American Journal of Tropical Medicine and Hygiene* 103: 1341-1342.
6. Taxin A (2021) COVID-19 reunion: Tearful patients, nurses share memories. Associated Press.
7. World Health Organization (2021) Health & care worker deaths during COVID-19.
8. Greenleaf RK (2002) Servant leadership: A journey into the nature of legitimate power & greatness. New York/Mahwah, NJ. Paulist Press.
9. Swearingen S, Liberman A (2004) Nursing leadership: Serving those who serve others. *The Health Care Manager*. 23: 100-109.
10. Maglione JL, Neville K (2021) Servant leadership and spirituality among undergraduate and graduate nursing students. *Journal of Religion and Health* 60: 4435-4450.
11. Marquis BL, Houston CJ (2021) Leadership roles and management functions in nursing: Theory and application. (10th edition) Wolters Kluwer.
12. Spears LC (2018) Characteristics of servant leaders. In: Blanchard K., Broadwell R. eds. *Servant leadership in action: How you can achieve great relationships and results*. First Edition 18-14.
13. Spaulding T (2015) the heart led leader: How living and leading from the heart will change your organization and your life.
14. Amadeo CA (2008) A correlational study of servant leadership and registered nurse job satisfaction in acute health-care settings.
15. Jooste K, Jordann E (2012) Student nurses' perceptions of the nurse manager as a servant leader. *Africa Journal of Nursing & Midwifery* 14: 76-88.
16. Olvera L, Hunt K, Johnson K, et al. (2018) The APRN as servant leader. *Journal of Christian Nursing* 13.
17. Sheridan R (2022) Kindness: The domino effect. *Arizona Nurse* 75: 1.
18. Burks C (2021) Leading like Flo: Servant Leadership. *Tennessee Nurse* 26-27.

19. Ladd VJ (2009) School nurses: positive deviant leaders in the school setting. *The Journal of School Nursing: the official publication of the National Association of School Nurses* 25: 6-14.
20. Simon E (2021) Leadership in pandemic. *MEDSURG Nursing* 30: 349-352.
21. Mahon K (2011) in praise of servant leadership-horizontal service to others. *Dynamics* 22: 5-6.
22. Ball V (2015) Servant educators shape future of nursing. *Journal of Christian Nursing* 32: 225-256.
23. Blanchard K, Broadwell R (2018) Servant leadership in action: How you can achieve great relationships and results.
24. Garber JS, Madigan EA (2009) Attitudes toward collaboration and servant leadership among nurses, physicians, and residents. *Journal of Interprofessional care* 23: 331-340.
25. Ying M, Faraz NA, Ahmed F, et al. (2021). Curbing nurses' burnout during COVID-19: The roles of servant leadership and psychological safety. *Journal of Nursing Management* 29: 2383-2391.