Clinical Leadership: The 6th Star of Quality

Transformational vs. Transactional Leadership

Washington & Idaho Healthcare Leadership Conference | 60-minute session

What did the best c… …n do that made people want to follo…

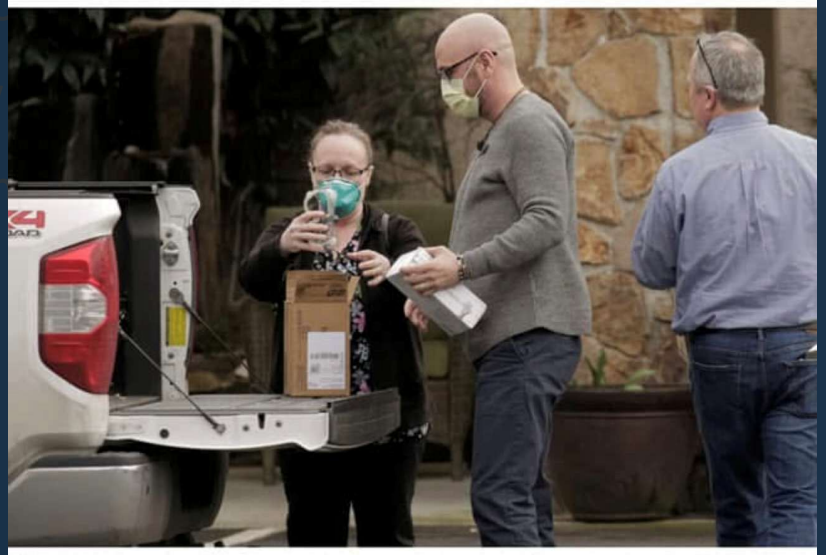
What did they do w…

Did they create com…

THE JIM BAKKER SHOW

MENU DONATE » search

Washington state confirms second U.S. coronavirus death; New York reports first case



Workers unload personal protective equipment, including goggles and gloves, at the Life Care Center of Kirkland, the long-term care facility linked to the two of three confirmed coronavirus cases in the state, in Kirkland, Washington, U.S. March 1, 2020. REUTERS/David Ryder

Learning Objectives

Define transformational and transactional leadership in a clinical setting.

Recognize when each approach is useful—and when it becomes a liability.

Connect leadership behaviors to staff engagement, accountability, quality, and survey readiness.

Apply a practical leadership framework to real-world clinical situations.

Leave with three actions you can use immediately with your leadership team.

Transactional Leadership Is Not “Bad Leadership”

Healthcare depends on reliable standards, clear roles, and consistent follow-through.

Transactional leadership is valuable when:

A safety standard must be followed immediately.

A new process needs clear expectations.

A performance issue requires direct accountability.

An emergency requires rapid coordination.

The risk occurs when transaction becomes the entire leadership strategy.

Where Transactional Leadership Can Break Down

"Because I said so" replaces clinical reasoning.

Staff learn to perform for the leader rather than for the resident.

Problems are repeatedly corrected—but not understood.

Leaders become the solution to every problem.

Compliance may improve temporarily while ownership declines.

Transformational Leadership: The Core Idea

Transformational leaders move people from “I have to” toward “I believe this matters.”

Four practical behaviors:

Model the standard.

Create meaning and purpose.

Develop and challenge people.

Recognize progress and reinforce the culture.

Goal: build a team that can sustain excellence even when the leader is not in the room.

Leadership and Staff Retention

People rarely leave only because of the work; they often leave because of the experience of the work.

Leaders influence whether staff experience:

Psychological safety

Fairness and consistency

Recognition and growth

Purpose and connection

Ask: “What does it feel like to work on this team?”

Leadership and Quality Outcomes

Quality is not just a set of metrics—it is the result of repeated behaviors.

Transformational leadership strengthens the systems underneath the numbers:

Reliable communication

Early escalation

Clinical curiosity

Interdisciplinary ownership

Learning from trends

Transactional tools then help hold those systems accountable.

Survey Readiness: What Do Your Systems Reveal?

A surveyor can see the policy. The bigger question is whether the culture makes the policy real.

Do staff understand why the standard exists?

Can staff explain what they do when something goes wrong?

Do leaders identify patterns—or isolated events?

Are corrective actions sustained after the surveyor leaves?

Case Study: The Repeated Missed Treatment

Scenario: A resident repeatedly misses a scheduled treatment. The nurse manager has corrected the same issue three times.

Transactional response: “This cannot happen again. The next occurrence will result in disciplinary action.”

Transformational response: “Let’s understand why this keeps happening. What is the system telling us?”

Leadership challenge: Use accountability without stopping at accountability.

Audience Activity: Rewrite the Response

Take one common leadership statement and make it more transformational.

Instead of: “Why didn't you follow the care plan?”

Try: “Walk me through what happened. What got in the way of following the plan?”

Then ask: “What needs to change so this is reliable next time?”

When to Lead Transactionally

Immediate resident or staff safety concern

Regulatory or legal requirement with no ambiguity

Repeated noncompliance after coaching

Emergency or time-critical response

Clear boundary-setting or performance accountability

Key principle: Be direct about the standard; be curious about the cause.

When to Lead Transformationally

Culture change

Staff engagement and retention

Performance improvement

Recurring clinical problems

Interdisciplinary collaboration

Developing future leaders

Key principle: Build the capacity of the team—not dependence on the leader.

A Practical 5-Step Leadership Conversation

1. STATE — What standard or outcome are we trying to achieve?
2. ASK — What happened from your perspective?
3. EXPLORE — What barriers, systems, or knowledge gaps contributed?
4. ALIGN — What will we do differently, and who owns it?
5. FOLLOW UP — How will we know the change is sustained?

The “Three Questions” Leader

“What are you seeing?”

“What do you think is causing it?”

“What do you recommend we do next?”

These questions shift staff from task-doers to clinical problem-solvers.

Building More Leaders

Stop being the person with every answer.

Delegate outcomes—not just tasks.

Ask charge nurses and department leaders to bring solutions with problems.

Coach in real time.

Celebrate thoughtful decisions, not just perfect results.

Create opportunities for emerging leaders to practice leadership.

Leadership Self-Assessment

Where do I rely too heavily on transactional leadership?

Where do I avoid accountability in the name of being supportive?

Do my staff feel safe bringing me bad news?

Am I developing leaders—or creating dependence on me?

What behavior of mine is currently shaping the culture?

30-Day Leadership Challenge

Week 1 — Observe: Identify one recurring leadership problem.

Week 2 — Ask: Use curiosity before correction.

Week 3 — Develop: Give a team member ownership of a solution.

Week 4 — Sustain: Review the result, recognize progress, and adjust.

Choose one behavior. Repeat it until the team notices the difference.

The Leadership Shift

From compliance → commitment

From correction → curiosity

From solving → developing

From “my department” → “our organization”

From managing today → building tomorrow.

Closing Reflection

Think of one person you lead.

What do I need them to DO?

What do I need them to BELIEVE?

What do I need them to BECOME?

The best clinical leaders manage performance while transforming people.

The Best Leaders Use Both

Transactional

Standards

Structure

Clarity

Accountability

Consistency

Transformational

Purpose

Ownership

Development

Innovation

Commitment

Leadership Is a Multiplier

Leader behavior → team response → resident experience → organizational results

What becomes “normal” on your unit is often what leaders consistently model, tolerate, recognize, and follow up on.

The question is not simply “Are we compliant?” but “Can this team sustain the standard without constant leader intervention?”

Questions & Discussion

What leadership challenge are you taking back with you?