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"If your actions, inspire others to dream more, learn more, do more. You are a leader" – John Quincy Adams

Leadership is open to many interpretations such as the one above, here is another for you to consider:

"The true mark of a leader is the willingness to stick with a bold course of action – an unconventional business strategy, a unique product-development roadmap, a controversial marketing campaign – even as the rest of the world wonders why you're not marching in step with the status quo. In other words, real leaders are happy to zig while other zag. They understand that in an era of hyper-competition and non-stop disruption, the only way to stand out from the crowd is to stand for something special" – Bill Taylor from the article "Do you pass the Leadership Test?"

Examples:

The above picture for me suggests how Leadership feels a lot of the time, whereby as a leader in any organisation it's a constant struggle to try and do the right thing at the right time by balancing your head against your heart.

1. A personal example I had in a prison setting many years ago was of a person on hunger strike who's elderly parents had no way to get in to see him and he was failing fast. I took the decision to send a member of staff to collect them on an evening and escort them to the healthcare to be with their son and return them home afterwards late that night. It all went well but had it not then it would have been down to my decision making, on balance the heart won because it was the human thing to do.
2. Another example I can recall was in respect of an Approved Premises that had gained a poor reputation for safety and activity or lack of it I should say until a new manager took over and went to local business groups and got donations and time to run various activities free of charge which carried this AP to gain EE status. A good leader was successful where her predecessor was not.
3. A final example is set within a Personality Disorder Unit where it's speciality was causing resentment amongst staff and residents within the wider setting. The Clinical Lead had the vision to allow several other non PD residents who needed the same programme to become part of a hybrid integrated group which benefitted all concerned and broke down barriers.