

Exploring the links Between Ethical Leadership, Creativity and the work Environment in Hospital Wards

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Abstract: The literature indicates that a positive relationship between creativity and ethical leadership exists. It is critical to explore how this relationship can influence creative mindsets of nurse managers and nurses specifically within their work environment. The purpose of this study is to explore the influence of ethical leadership on creativity and the work environment in hospital wards. Data was collected by means of a qualitative approach. Staff from three wards in a general hospital was recruited for the study. Three nurse managers and nine nurses from three different wards in a hospital setting consented to hold semi-structured interviews. Thematic analysis was used to analyse the data from the interview transcripts. Nurses and nurse managers co-exist in a dynamic context provided through their work environment. Most respondents were able to identify creative activities in their daily work. Trust, inclusiveness and altruism facilitated learning and the development of new skills. This was manifested in environments where most respondents were receptive to alternative methods of addressing issues on the ward demonstrating a creative mindset. Nurses and nurse managers may mutually enhance their work environment by making it more engaging, by nurturing relationships, and facilitating creativity and creative mindsets by practicing ethical leadership. The study supports other research linking creativity and ethical leadership. Nurse managers and their teams have the opportunity to improve the quality of care delivery in hospital settings through their leadership style and openness to creative ideas.

Keywords: ethical leadership, creativity, creative mindset, work environment, interviews, thematic analysis

1. Introduction

Critical to any health care system nurses are the largest group of professionals in any hospital (Dall, 2009). Through their leadership styles and effective management, nurse managers are the authority figures in hospital wards typically associated with the creation of a positive work environment where staff enjoy working (Whiley, 2001). Toor and Ofori (2009, p.533) state that “leadership ought to be ethical in order to be effective and successful over the long term”. Taking this statement as a baseline, this paper aims to explore the possible relationship between ethical leadership, creativity and creative mindsets, and the work environment. Considered as the foundations for values, beliefs and moral (Meriac et al., 2013) manifested through customs and conduct (Northouse, 2016), ethical issues are considered as highly relevant in relation to employee engagement (Meriac et al., 2013) and creativity (Asif et al., 2020).

2. Theoretical background

Defined as an influencing relationship between leaders and followers with the intention to create change (Rost, 1993), leadership has acquired prominence in influencing and transforming employees’ needs and behaviours (Bass, 1985). This is also the case in hospital settings through a shift towards transformational and distributed styles of leadership (Turnbull James, 2011). Over time, leadership has acquired “a critical role in shaping the conditions for staff to deliver quality care” (Henderson, 2015, p. 793). Notwithstanding the definition, in the management of wards, the dual role of nurse and nurse manager exists and can potentially place the nurse manager in difficult situations on different levels (Divall, 2015). Ethical behaviour in nursing has long attracted the attention of researchers (de Casterlé et al., 2008; Goethals et al., 2010), with de Casterlé and colleagues raising concerns about ethical competence in hospital settings. Influenced by personal and contextual factors, the ethical behaviour of nurses has been identified as a complex process involving reasoning and decision making leading to the implementation of a selected decision (Goethals et al., 2010). Following a review of existing literature, the authors found that a balancing act was necessary. They must reconcile their own values with those of hospital, ward, patients and their relatives before making decisions. It was found that often conformity with previously dealt with issues is more feasible than applying their own ethically desirable approach. Rabie and Abdul Malek (2020), found that ethical behaviour in the work environment is associated with ethical leadership. Their findings indicate that this association is mediated by mechanisms of moral attentiveness.

Ethical leadership seeks to promote leadership skills through good conduct and character. Defined as “the demonstration of normatively appropriate conduct through personal actions and interpersonal relationships,

and the promotion of such conduct to followers through two-way communication, reinforcement, and decision-making” (Brown et al. 2005, p. 120), ethical leadership presents opportunities for exploration of its implications across different group and organisational settings. Toor and Ofori (2009) claim that not enough has been done to explore ethical leadership from an empirical point of view. Exploring the relationship between leadership employee outcomes and organisational culture, in their study the authors found that ethical leadership is positively linked to leader effectiveness and to the willingness of employees to put in extra effort in their work. It may be postulated that resting on good conduct and good character traits (Northouse, 2016), an ethical style of leadership may lead to an enhanced climate within the organisation (Aloustani et al. 2020). In exploring the impact of Moral Case Deliberation with first-line managers where moral reasoning took place to collectively explore moral issues, Silen and Svantesson (2019) reported that positive outcomes emerged through an enhanced ethical climate also implying group cohesion.

Nursing studies have also expanded to feature in the field of creativity. Amongst a myriad of definitions, some agreement seems to have been established in claiming that creativity involves novelty and usefulness (Mumford, 2003) or effectiveness (Runco & Jaeger, 2012). Creativity is something that we engage with regularly (Richards, 2018). As early as 1992, Ferguson referred to creativity in nursing as being a process that takes place both a conscious level and also unconsciously. Ma et al. (2018) conducted an integrative review to explore the concept of creativity in nursing literature. Through their review, they found that a variety of intrinsic and extrinsic factors may influence nurses’ creativity. They also noted that creativity could be enhanced through self-directed learning and group work. Clark (2008) maintains that nurse managers need to practice problem solving skills on the job to address emerging situations by calling on their creative thinking. She goes on to elaborate that this is done by inventing new solutions by putting imagination and skill to use thus practicing ‘creative nursing leadership’.

Collecting data from nurses and their supervisors, Malik et al. (2016) found that effective leadership is positively correlated with employee creativity. In another study, Nasser et al., (2021), explored the relationship between ethical leadership and creative process engagement with a mediating effect of leader-member exchange quality. They found a positive correlation and recommend more emphases in social activities that can enhance creative behaviour in a climate where there is ethical character and good conduct. Snow (2019), aimed to equip nurse leaders with methods that they could use to facilitate problem solving with the hope that a creative climate is established among the workforce. Using facilitative leadership styles like transformational leadership, she hoped that nurse leaders may inspire others to take the risk, be innovative to ultimately deliver better quality of care.

It must be noted that nurses and nurse managers work within an organisational context. The work environment has long been known to influence creativity in groups and individuals (Hamlin & Sawyer, 2007). Encouragement, autonomy, resources, pressures and organisational impediments are five conceptual constructs of creativity that influence while also impacting the work environment (Amabile & Mueller, 2008). Although the work environment could determine the extent of creative activity of individuals, the role of the creative person who may manifest attributes indicating a predisposition to creative activity is also critical. Mlodinow (2008) claimed that there may be a link between high motivation levels and creative activity. This activity may also be facilitated through the establishment of a creative mindset which is defined by Karwowski (2014:62) as “beliefs about the stable versus-malleable character and the nature of creativity”. Makel (2008) and O’Connor et al., (2013) have studied aspects related to fixed or growth (incremental) mindsets. Their findings indicate that a growth mindset enhances the disposition for individuals to work on tasks that require creativity like searching for solutions when problems need to be addressed.

2.1 Research question

Following a review of the pertinent literature, the main constructs were set to be explored from an empirical point of view. The perspectives of nurses and nurse managers were sought to acquire a better understanding of the link between the key constructs. To this end we formulated the following research question to guide our study:

How may ethical leadership, creativity and creative mindsets be linked in hospital wards?

3. Methods

Data for this study was collected from nurses and nurse managers working in the main general hospital in Malta (European Union) using semi-structured face-to-face interviews. All ethical procedures were adhered to as per regulations of the University Research Ethics Committee at the University of Malta, and the Research Ethics Committee of the General hospital.

3.1 Data collection

To capture the work environment, three groups were created; A, B, and C representing each participating ward. Recruitment was difficult due to the heavy workload and fatigue experienced by staff members at all levels. Once consent was granted through the intermediary, a schedule to conduct the semi-structured interviews was set up. The interview questions were structured in three sections in a way to address the core constructs relating to ethical leadership, creativity and creative mindset, and the work environment.

3.2 Sampling and recruitment

Twelve respondents were recruited through voluntary participation with each respondent being approached through an intermediary to allow the participants to make opt in or out without feeling coerced. The establishment of the sampling criteria identified nurses who had worked in the same ward where the data was collected for at least one calendar year prior to data collection. This criterion was set to ensure that respondents were familiar with the modus operandi on the ward and for them to have acquired a good sense of the working dynamics. Moreover, their educational background had to include either a diploma or a degree in nursing. The criteria for nurse managers were minimal to facilitate the uptake of respondents since the aim was to have nurses and nurse managers from the same wards included in the study. Nurse managers had to be in the position for at least one year prior to data collection.

3.3 Data Analysis

Semi-structured interviews took place lasting approximately sixty minutes with each participant. The aim was to elicit as much information as possible in a natural, yet reflexive way from the participants. With the aim to address a gap in the existing literature about nursing and nursing management, a pragmatic approach (Weaver & Olson, 2006) was used. All interviews were audio-recorded with the permission of respondents and transcribed manually. Thematic analysis was used to analyse the data collected due to the specific characteristics of this method.

“Thematic analysis is a method for identifying, analysing, and reporting patterns within data” Braun and Clarke (2006, p. 6). The authors claim that thematic analysis can be a method used to report on the lived experience of participants by interpreting their reality and meaning. Moreover, they argue that themes can capture important elements in relation to the research question and need not depend on quantifiable measures. The six steps identified by Braun and Clarke (2006) were followed to give structure to how interpretation of the data collected could be allocated while undergoing a process of reflexivity throughout the process. Phase one involves the familiarisation with the transcript data. This involved reading the transcript a number of times including reading while playing the audio to check for any mistakes that may have occurred during the transcription process. In phase two of thematic analysis initial codes were generated. Codes were generated by first making a list of different elements that seem meaningful. After reading the transcript various times and going over this process, the codes are divided into meaning categories. This leads to the third phase of the project; searching for themes. Throughout the process it becomes evident that some topics become recurring, thus reinforcing the aspect which they address. In this case the themes were related to ethical leadership, creativity and creative mindset and the work environment. In the following phase these themes were subsequently reviewed by ensuring that there is enough data to support them. In organising the data this process leads to a ‘map’ of how the data can be organised to have a meaning leading to the next phase which involves the naming of the themes. This phase requires the researcher to have a definition for each theme that emerges. The sixth and final step in thematic analysis involves the writing out of the findings. The process evolves naturally, however being aware of the steps adds a mindful stance to the activity involving a higher level of reflexivity. This involved the questioning and reviewing of the process undertaken during the analysis to ensure the trustworthiness of our study. Trustworthiness in qualitative research is a way in which researchers make their work noticeable (Lincoln & Guba, 1985).

4. Findings

The study aimed to explore how ethical leadership creativity and creative mindsets in hospital wards may be linked. Several themes emerged from the collected data guiding us to get a picture of how respondents see the link between ethical leadership, creativity and creative mindsets, and the work environment. A description of the demographic data of the sample population can be found in Table 1.

Table 1: Demographic data representing the sample

Age and Gender	Educational Background	Duration of employment on the ward	Role	Ward (letter) and Code
52; Male	Master degree	2 years	Nurse manager	A1
23; Female	Batchelor degree	2 years	Nurse	A2
23; Female	Batchelor degree	2 years	Nurse	A3
27; Female	Batchelor degree	3 years	Nurse	A4
50; Female	Diploma	4 years	Nurse manager	B1
25; Female	Batchelor Degree	3 years	Nurse	B2
25; Female	Batchelor Degree	4 years	Nurse	B3
53; Female	Diploma	10 years	Nurse	B4
35; Male	Master degree	1 year	Nurse manager	C1
45; Male	Master degree	20 years	Nurse	C2
40; Male	Batchelor degree	15 years	Nurse	C3
27; male	Batchelor degree	3 years	Nurse	C4

Participants were asked to interpret the term 'creativity'. Their responses were grounded in positivity, improvisation and how to be effective and efficient. Effectiveness in particular is in line with the definition of creativity by Runco and Jaeger (2012). Responses that support this view of being efficient and effective include the following:

"I find that resources are very limited to work with and creativity is having to work with what you have.
(A3)

"To paint with the colours that are available" (C1).

The element of improvisation appears to be in line with Clark (2008) when referring to the need to use skill and imagination when on the job in relation to creative nursing leadership. It is understood that improvisation in current context refers to decision making and finding solutions on the job. A respondent supports this view by stating that:

"you have to stay positive and improvise according to the situation you are facing" (A1).

Further analysis by re-reading transcripts led to the outcomes presented in Table 2. The table presents the three main themes, sub-themes and the categories that emerged from the analysis. These labels were developed throughout the six-step process identified above. Following the grouping of codes, the categories emerged. They were then separated into the different themes related to ethical leadership, creativity and creative mindset and the work environment. The theme related to ethical leadership seemed too broad to describe the manifestation of these elements. This led to a further breakdown into three sub-themes, namely ethical behaviour, approach to leadership and leader characteristics.

Table 2: Emerging themes

Main Themes	Ethical Leadership			Creativity and Creative Mindset	Work Environment
	Ethical Behaviour	Approach to leadership	Leaders characteristics		
Categories	Openness	Collaboration	Way of doing things	Personal disposition	Stress and stressors
	Values	Influence of team work	Skills	Idea generation and alternative seeking	Workload
	Altruism	Empowerment	Affect	Sharing of ideas	Time

Main Themes	Ethical Leadership			Creativity and Creative Mindset	Work Environment
	Trust	Development of skills	Character	Problem solving	Motivation and Motivators
	Inclusion	Teaching/ Learning modes			

4.1 Creativity and Creative Mindset

Creativity and creative mindset came across as a strong theme in current study. The following sub-themes emerged in relation to a creative mindset: (a) personal disposition to be creative; (b) idea generation and alternative seeking; (c) sharing of ideas; and (d) problem-solving.

From Ward A, a respondent gave a practical example of how the openness to different alternatives could be manifested on the ward. The notion of everyday creativity (Richards, 2018), or on the job creativity features as an important element when the nurse needs to think about a situation at hand.

“I think one example would be when dealing with a confused patient and you need to lead them back to their bed.” (A2)

Other nurses acknowledged that they have new ideas on a daily basis implying that they are aware of creativity and practice it regularly thus showing a disposition to a creative mindset. The manifestation of their ideas did not feature only in how they performed patient care. Participant C4 mentioned a specific incident where he had to be creative to get management to approve a new staffroom.

Nurse Manager A1 claimed that when solving problems there is no option other than having a creative mindset since the best and most appropriate solution needs to be identified. The nurse manager went on to align traits that might promote a creative mindset.

“As I said, space and the gift of initiative, and a certain weight of responsibility towards the patient are all factors that influence a creative mindset” (A1)

In terms of fostering a creative mindset and qualities about modes of thinking associated with it, such as convergent and divergent thinking, a response in particular captured the notion of the disposition to nurture this trait while also showing elements of a supportive leadership style.

“My vision is in empowering my staff to have ideas and implementing them.” (C1)

Overall, respondents from the two out of the three wards showed an appreciation of creativity and an inclination towards a creative mindset. Respondents from Ward B however, indicated more of a fixed mindset in seeking the establishment of routine and the need for stability without seeking continuous improvement. This attitude was linked to a heavy workload. The term creativity was unfamiliar to respondents from this ward in its potential relationship with nursing practice with the statement below indicating either a total misconception of the term creativity or the importance attributed to routine work. The respondent did not elaborate further therefore this aspect could not be clarified.

“I don’t think there is any creativity in nursing.” (B3)

4.2 Ethical Leadership

This was the broadest theme identified during the analysis of the data collected. Leadership proved too be broad and was split into three; ethical behaviour, leadership style referring mainly to transformative leadership and leadership skills referring to soft skills. Within these two categories, sub-themes were identified. Within the sub-theme of ethical behaviour, the following themes sub-themes emerged: (a) openness; (b) values; (c) altruism; (d) trust; (e) inclusion. For leadership style we identified: (a) collaboration, (b) influence of teamwork; (c) empowerment; (d) development of skills; (e) teaching and learning modes. Within the sub-theme related to leadership skills, the emerging sub-themes were: (a) characteristics; (b) skills); (c) affect; (d) character. It was interesting to note that besides the leader-follower relationship, these other elements emerged. Respondents from Ward A were consistent in highlighting positive aspects that nurture human relationships and that foster an environment for creative effort.

"(The nurse manager) a person in charge with the ability to listen, socialise, and be assertive, show respect and do what is right. Communication skills are very important". (A2)

"(The nurse manager) someone who tries to bring everyone together and to move us in one direction. I like how the leader works in the ward." (A4)

In an empowering stance hinting at an element of mentorship, the nurse managers of Ward B and Ward C1 stated the following:

"You need to model the image that you want them to be. Other people see you as leader, you do not see yourself as leader." (B1)

"Like being the first horse pulling a carriage, the leader is the person that gives the first push towards a direction. Always be with a smile and don't bother your staff with your problems unless it affects them directly. They have to worry (care) for the patients". (C1)

Aspects of openness and inclusion may be observed in the excerpts below:

"The leadership in this ward helped me to mature in my profession and to keep motivated to continuously learn and work in a team. Ideas are always welcomed." (C2)

".. we work as well on days when the nurse manager is not present as much as when he is. We communicate and lead ourselves through the day". (A2)

This is further supported when in a separate interview the nurse manager of the same ward claimed that:

"I give them space and freedom to do their practices in their own way and style. If there is an environment where it is safe to be free to voice your opinions and knowledge without judgement it will greatly improve the conditions to be creative." (A1)

4.3 Work environment

This theme refers to elements in the occupational context that impinge on ethical leadership and the creative mindset as perceived by the respondents. They seemed aware that the work environment provides instances that facilitate processes and others that hinders them. For instance, in relation to creativity and the facilitation of a creative mindset, the nurse manager in Ward A stated that:

"The work environment helps and hinders at the same time. It pushes you to solve problems, so you have to be creative whether you like it or not because if the solution is not found I have to answer to it all and it affects everyone negatively." (A1)

Apart from the direct reference to creativity, this respondent acknowledges the role of a leader and the responsibility that it brings with it. Altruism can also be observed in this excerpt. Within this broad theme, respondents identified the following sub-themes that were consistently referred to in various instances during different interviews: (a) stress and stressors; (b) workload; (c) time; (d) motivation and motivators. Respondent B1 another nurse manager for instance, indicated that the workload and time pressures influence the generation of ideas negatively by stating that:

"The environment here is hectic and there is no time to think about new ideas unless it solves the immediate problem." (B1)

Different attitudes emerged possibly owing to the nature of the ward setting and personal dispositions.

Workload and stress appear to be another impediment in relation to the enhancement of a creative mindset as claimed by the following respondent:

"sometimes the workload becomes too overwhelming at certain points of the day, and during those times you just focus on your work and pray that it will calm down for a few moments to take a breather!" (A2)

This comment however is countered by a nurse working in a different ward.

“The work environment helps me a lot to facilitate my creative intent. Work is your second home and it is up to you to make it, even though higher management provides a lot of barriers. Within nursing care there are standards, but I use creativity when I need to improvise.” (C2)

The above excerpt makes explicit reference to the creative mindset of individuals in relation to how one deals with the work environment while still engaging with creative activity. Moreover, the reference to work being the “second home” could be an indication that affect and belongingness are relevant elements to foster a creative mindset in the work environment. In this case, the work environment appears to act as a motivator that can lead to a creative mindset.

While acknowledging that creativity is critical in nursing, the following response by nurse manager C1 addresses issues of open-mindedness. It is not clear how this nurse manager addresses issues related to “lack of open-mindedness”, however, as a leader he demonstrates the practice of the skill of observation and acknowledgement of the different abilities of the team members.

“The nursing profession is nothing without creativity. It would not be nursing!” (C1)

“The lack of open-mindedness from employees does not help.” (C1)

5. Discussion

The aim of this study was to explore how ethical leadership, creativity and creative mindsets may be linked in hospital wards. Adopting a qualitative approach presented an opportunity to obtain a better worldview of our respondents. Overall, it can be noted that there is a positive influence among the three constructs. Supporting Hamlin and Sawyer (2007), the work environment emerged as an important element that may catalyze creativity and creative mindsets through ethical leadership. In line with Asif et al., (2020), the findings indicate that a sense of belonging and the positive attitude through ethical leadership of both nurse managers and nurses induces affective commitment that facilitates creativity and promotes a creative mindset. While de Casterlé et al., (2008) referred to issues with competence in relation to ethical behaviour in hospital settings, in the three wards where the respondents came from, ethical behaviour under the guise of leadership came across positively and in relation to empowering actions. This appeared to have a positive influence on creativity through the creation of effective ideas on a regular basis (Richards, 2018), such as when nurses need to usher confused patients back to bed thus supporting the definition by Runco and Jaeger (2012). A further notion of the positive link between ethical leadership and the engagement with creative activity including a creative mindset support the claims by Nasser et al., (2021). Overall, ethical behaviour appeared to act as a facilitator of creative activity. Empowering social activities when in the ward in an environment of trust could be conducive to creative activity. This was exemplified when respondents singled out instances when it happens. Hospital environments are sensitive workplaces. Having trust in nurses to run the ward in the absence of the nurse manager illustrates this element in our findings. Autonomy and encouragement and workplace constraints as identified by (Amabile & Mueller, 2008) appear to be symbiotic in the manifestation ethical leadership, creativity and creative mindset and the work environment. The work environment itself offers opportunities for the execution of ethical leadership principles on a learning ground through group work (Ma et al. 2018).

5.1 Limitations

The main limitation of the study is the small sample size leading to the impossibility of generalisation. The experiences described are limited to the respondents’ experience on the respective wards. It would be useful if more wards in different hospital settings both locally and abroad could express their views in relation to the three key constructs. From an academic perspective this would further enhance the extant literature bringing the constructs together. From a practical point of view, nurse managers could benefit from further education on ‘how-to guides’ that may support them in the facilitation of an environment that is conducive to creative mindsets through their leadership skills in an ethical manner.

6. Conclusion

Nurse managers and their teams have the opportunity to create engaging work environments where mutual work relationships can be nurtured while fostering a creative mindset that can lead individuals to more malleable attitudes when seeking solutions to improve the quality of care delivery in hospital settings. This can be achieved

through ethical leadership. Nurse managers and their teams have the opportunity to improve the quality of care delivery in hospital settings through their leadership style and openness to creative ideas.

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