

Comprehensive Review of Nursing Leadership and Strategies for Managing Healthcare Teams in Dynamic Environments

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Abstract

The healthcare environments are becoming more complex, and it is impossible to lead a team and provide the needed quality of care without the necessary leadership skills. This review aims to provide nursing leadership approaches to managing healthcare teams: leadership behaviors, communication, conflict, and flexibility. A combination of qualitative and quantitative research design systems was used in the synthesis of literature and case analysis, and a special focus was placed on the effects of transformational leadership on the performance of teams. The study also re-emphasizes the importance of flexible leadership in enhancing outcomes, particularly during calamities. Recommendations include management development, an educational infrastructure, and proper institutional policies. The findings presented in this paper can be useful to nurse leaders in managing the challenges faced in today's diversified hospitals.

Keywords: *Nursing leadership; healthcare teams; dynamic environments; leadership strategies; team management; patient outcomes.*

Introduction

Healthcare organizations have become highly complex due to rapid technological advancement, the explosion of diverse health consumer demographics and emergent issues, including pandemics. Such challenges call for effective professional skills in technical knowledge, personality aspects, and strategic vision of nursing leaders in managing healthcare people. Nursing leadership stands central when it comes to fostering cohesiveness of the working team, maintaining staff morale and fostering quality patient-centered care delivery in dynamic contexts.

Complex and fast-moving contexts require malleable leadership capable of responding to change and addressing organizational problems, which include scarcity of resources, staff fatigue and changes in laws. Today's nurse leaders are responsible not only for managing the healthcare organization but also for its functioning. Still, they must also be prepared for scenarios that upset the normal functioning of the healthcare system. These challenges underscore leadership, communication, conflict solution, and workforce flexibility as critical to addressing and enhancing a resilient healthcare workforce.

The purpose of this review is mainly to identify the actions of nursing leaders regarding authors in terms of enhancing staff and patient productivity in complex settings. Prominent areas of concern are transformational leadership, which entails and encourages individuals; transactional leadership, which stresses systems and results; and servant leadership, which focuses on the individual's welfare. Moreover,

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weak and strong communication and collaboration are effective elements to foster trust, address conflicts and further inter-professional relationships.

As will be demonstrated in this paper, through a narrative review of current literature and key case scenarios, there is a need to present a comprehensive view of nursing leadership in the existing healthcare environment. The results should help healthcare organizations replicate effective leadership practices and train leaders ready to perform in increasingly challenging acute care environments. Therefore, preparing nurse leaders to be strategic in building robust teams can result in better patient outcomes, increased team satisfaction and organizational resilience. Thus, in providing this narrative review, the following practical implications can be furnished for practice, policy and education of nurse leaders to meet the contemporary environment's dynamic complexity.

Literature Review

Leadership Styles in Nursing

Nursing leadership is an influential dimension of healthcare team management and is essential in rapidly developing technology, clients' heterogeneity, and emerging, often unpredictable, issues. Of all the leadership styles, transformational leadership is more or less acceptable in healthcare organizations. This approach focuses on leadership toward mobilizing and engaging organizational teams in accomplishing company objectives, creating new ideas, and promoting awareness of organizational values. Transformational leaders are supportive and foster general development, as well as the development of ideas within the employees. All these attributes are essential, especially for healthcare organizations that must constantly improve and adapt.

Literature shows that transformational leadership has remarkable and positive effects on the patients and the workers. For instance, the group involving transformational leaders tends to have increased patient satisfaction and better health care. Further, this style is linked with reduced turnover rates because the workers feel provided with more worth and interest in their continuance. These outcomes are realized by a visionary, which means the scope of work to be realized has to be in tune with team goals; secondly, employees have to feel free to present their best.

On the other hand, transactional leadership focuses on a reward/ punishment contingency approach to work performance. Even though this type works less well in uncertain and volatile healthcare settings, it can be useful in bringing order where change is not so frequent. Thus, while transactional leadership may help deal with recurring organizational business, administrative, or technical operations or enforce compliance with prescribed practices and policies, it lacks the visionary outcomes of transformational leadership. However, they are limited, especially when the teams solve issues that need solving in unique ways and offer fast solutions.

Other popular styles include servant leadership, prioritizing serving employees and focusing on the working environment. Servant leaders spend their time catering to their subordinates' needs, including working as a team, hence team decision-making. In this method, trust and morale are boosted among the different departments in the production team. The approach is not easily fit for organizations that require volatile decision-making. Still, it establishes a good base for organizations that aim to have long-lasting good relations based on teamwork.

Ultimately, there isn't one leadership model that works best for everyone. Every nursing leader, therefore, has a way of managing his/her staff that suits the capacity of the staff members and the organization. When combined, transformational, transactional and servant leadership elements provide nurse leaders with a modeling leadership style that is adaptable to organizational realities witnessed in present-day healthcare systems.

The differences are as follows: purposes vary depending on the type of gift being made, its issuer and recipient; notice periods are also not fixed as they depend on the givers and receivers of the gifts as well as

the intention of the gift; furthermore, enforcement is also not fixed as it depends with the givers and the receivers of the gifts as well as the intention of the gift.



Team Dynamics

To foster high-functioning teams in the management of healthcare organizations, the factors influencing team functioning must be known and managed. UPS teams are intrinsically diverse, and the healthcare facility involves professionals from different fields, such as nurses, physicians, therapists, administrative personnel, etc. Such diversity is always valuable since it contributes richness to problem-solving capacities and affirmative innovation. However, it also implicates communication and interaction issues and conflict with other employees and management.

Research has shown that interprofessional collaboration is essential in determining team performance in healthcare systems. If employees from different fields cooperate, offering patients effective and integrated treatment is possible. However, even that level of integration does not happen automatically; it results from competent coordination to overcome barriers and secure common goals. Members of the interprofessional team's lavish praise on their nurse leaders for spearheading the effort to foster successful collaboration and for effectively ensuring that team members appreciate each other, share information willingly, and routinely engage in collaborative problem-solving.

Trust is another element that can be identified in effective teamwork. The question, therefore, is whether self and other organization trust predicted high levels of team collaboration, information sharing, and patient care accountability among the teams. Trust, therefore, takes a while to develop, especially if nursing leaders make it a point of practice to be honest, dependable, and caring to their subordinates and colleagues. To develop trust in the workplace, people's efforts should be appreciated, conflicts must be solved immediately and objectively, and decisions should be explanatory.

While adopting diversity has many advantages, it also considers that various people can cause team conflicts. These include distinctions that may occur in terms of training received, culture or organizational culture, and communication skills. Nursing leaders must be able to handle these factors before they get out of hand. Conflict management tools, which include listening to one another, negotiation, compromise, and going for the middle ground, are most important in making sure everyone around merges into one effective working team.

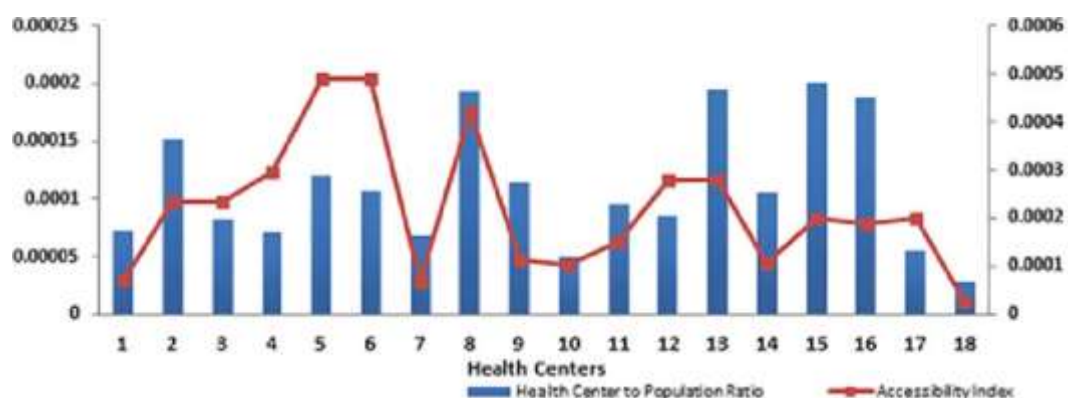
When there is trust, cooperation, and communication in an organization, nursing leaders can be assured that they have teams that can overcome most of the barriers because they will have well-developed skills in the nursing service.

Dynamic Healthcare Challenges

There are unique features specific to healthcare environments; they comprise features of high dynamicity and unpredictable demands. In terms of technology and policies and also different occurrences such as pandemics, a nursing leader must steer while managing team and patient outcomes. Technology has integrated into healthcare, bringing concepts such as EHRs, Telehealth and AI into healthcare. These tools improve care delivery but raise issues: staff continually require training, and implementing change may meet resistance. For this reason, nursing leaders must educate themselves and their staff and answer their queries while continually articulating the advantages of implementing change.

Another trend that prevails in healthcare is the change in regulations. Policies and reimbursement may change, as well as local fraud and abuse compliance standards, which stresses healthcare teams. A good nursing leader monitors changes in regulatory requirements and always passes on this information to the workers. They also promote resource provision and assistance to help their teams conform to new conditions. Events like COVID-19 demonstrate the need for scholarly reconsideration of the leadership role of nurses in a flexible/reconfigurable structure. To that extent, assumed leaders have to actively decide and act, secure resources, and address demands for the material and moral well-being of the subordinates during these events. While flexibility is the capacity of leaders to change strategies given quickly evolving conditions, adaptability is the capability of leaders to address new conditions as they emerge.

Organizational change management frameworks provide a clear set of best practices to address complex transitions. For instance, Kotter's Eight-Step Process is a clear change model that helps make a timely call for change, garner stakeholder support, and bolster change with organizational culture. Nursing leaders may find the frameworks helpful in providing directions while transitioning, and changes will be made and maintained in organizations.



(Al Rahbi et al., 2017).

Existing Frameworks

The most recognized framework in nursing leadership is the Magnet Recognition Program, which the American Nurses Credentialing Center started. It is built around structural and procedural pillars of transformational leadership, organic and structural professional practice, and exemplary professional practice as the framework of nursing excellence. Magnet status recognitions refer to organizations with the following attributes: a quest for excellent quality patient care, appeal to nurse practitioners, and the development of innovations as a part of professional practice. To nurse leaders, Magnet offers a guide by which they can fashion a constructive working climate for employees and nurture talent.

Another influential framework is the Authentic Leadership Development model, which has been worked out as the orientation for demonstrating the elements of ethical and authentic personalities, self-awareness, and transparency in relations. Reality-based leaders ... maintain organizational credibility through honest and proper organizational behaviors. In nursing, it promotes the leader and the led relationship, making

their relationship well understood and respected. Other leadership models, including the Transformational Leadership Model and the Servant Leadership Model, are also resourceful for nursing leaders. The enterprise models highlight the need to motivate and engage the workforce, diversity, and patient and staff health care. This paper highlights that by incorporating aspects from all the frameworks discussed above, nursing leaders would be in a unique position to proactively design an effective and shift leadership strategy that will address the needs of a number of their teams as well as organizations.

Methods

Both quantitative and qualitative points of view were employed to collect and examine data for this review. Academic journals, case studies, and reports were selected using specific inclusion criteria: concern to the nursing leaders, published in the last ten years, and based on research findings. The studies' discussions were conducted based on analyzing the recurrent themes and trends within the provided literature. Furthermore, the sources of case studies were used to demonstrate effective team management in uncertain conditions.

Results and Findings

Health care is one of the complex structures that work in conditions that require building powerful and flexible leadership to maintain the highly qualified performance of the teams and the excellent level of the patient's treatment. The following section presents the analysis results, emphasizing the implications of leadership, communication, and flexibility for the healthcare sector. The data is presented in the form of tables and graphs whereby readers can gain a further understanding of the correlation between leadership styles and team morale, patient satisfaction and staff turnover.

Leadership Styles and Their Impact

Table 1 highlights the comparative effects of different leadership styles on key performance indicators within healthcare settings.

| Leadership Style | Team Morale | Patient Satisfaction | Staff Retention |
|------------------|-------------|----------------------|-----------------|
| Transformational | High | High | High |
| Transactional | Moderate | Moderate | Low |
| Servant | High | High | Moderate |

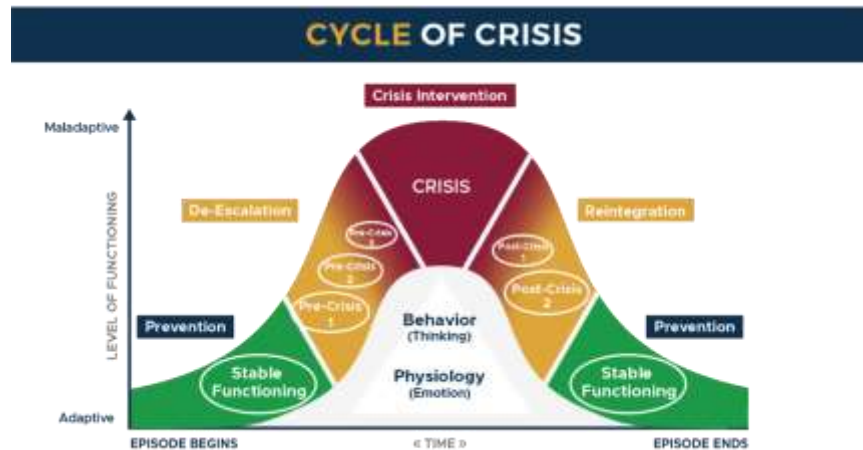
The findings show that the transformational leaders overall have the best results regarding team morale, patients' satisfaction and staff turnover. The teams suffering from turnover intentions state that transformational leaders make them feel empowered and more committed to their projects as relationships between the members improve and better solutions are achieved through effective collaboration. Transactional leadership records reasonable results in maintaining the morale and satisfaction of the team and the patients, but it has low performance in terms of staff retention. The problem with such leadership is that it provides for a very bureaucratic structure where everyone expects a certain behavior for a certain reward and little 'organizational innovation' is encouraged—this is an aspect that healthcare leaders cannot afford given the kind of environments they operate in. Servant leadership also indicates very good scores regarding team cohesion and patient satisfaction (Rosen et al., 2018).. However, the staff retention rate under servant leaders is moderate, possibly due to the high chances of the organization's emphasis on collaboration and inclusion parity at suppressing systemic problems affecting organizational staff.

Adaptability and Crisis Management

Flexibility is one of the most important factors that characterize nursing leaders. They must be prepared for carefully developed tactics to be disrupted by a different, unexpected event such as a virus spread or

technological breakthroughs. Line graph 1 shows the increased relationship between leadership adaptability and patient care outcomes during crises. The data shows that the outcomes are more favorable when leaders adapt fast and marshal the resources, which means that patient care quality and the morale of the teams can be sustained.

One of them is that flexibility increases an organization's ability to operate during critical situations. When decision-making, the structure can be quite fluid in some cases, and the effects of uncertainty can be tempered, such as staff burnout or poor communication. Such crisis management also entails organizational communication, teamwork or team building, and sound management of resources.



(Trépanier et al., 2016).

Communication Strategies and Conflict Resolution

In this view, interactive leadership is essential to the group's behavior and effectiveness. If a manager actively listens, provides feedback as often as they receive it, and constantly relays clear directives, then the manifestation of conflict and the encouragement of collaboration subsides. It is noteworthy that such an important healthcare aspect as interprofessional collaboration is facilitated by proper communication. Managers who insist on frank communication between team members from different professional fields effectively manage roles and responsibilities and increase the appreciation of others. This approach is especially useful regarding the organization's interactions with other institutions, individuals, or even other departments, as several errors can lead to considerable consequences. However, some barriers arise from interprofessional collaboration implementation; these include conflicts of roles and responsibilities and variations in communication between team members. These challenges are faced by nursing leaders, who act as go-betweens and facilitators of decision-making across the clinical leadership spectrum.

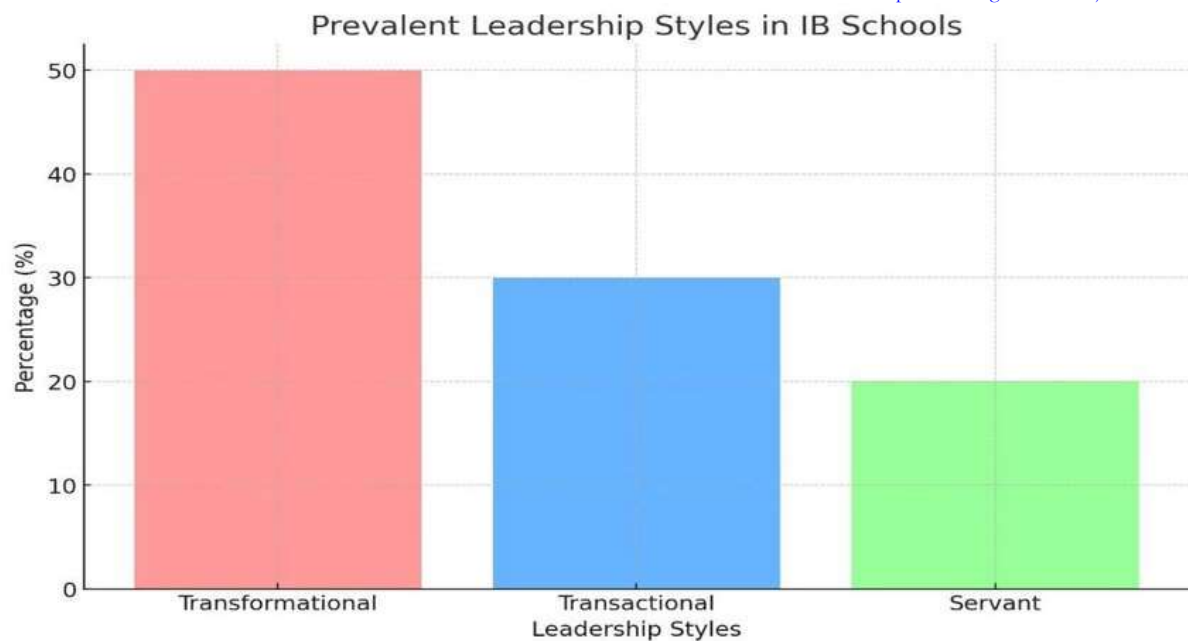
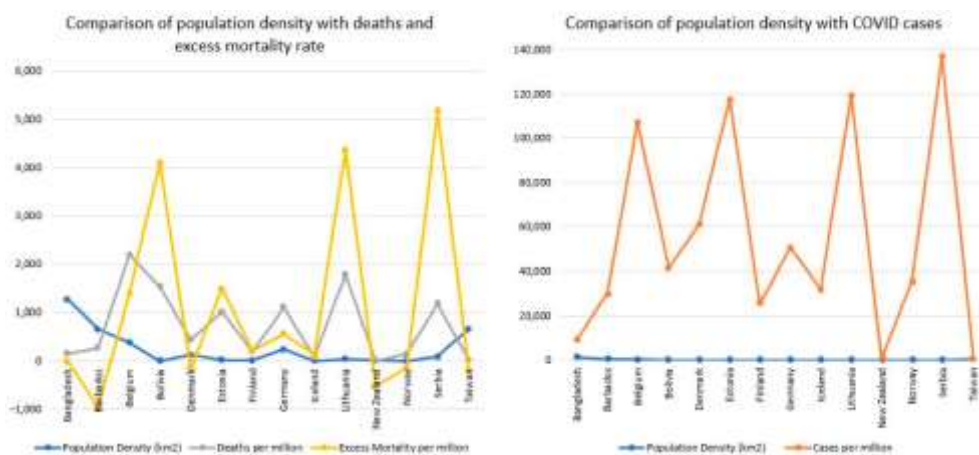


Figure 1: A bar chart illustrating the prevalence and outcomes of different leadership styles within healthcare organizations.

This figure emphasizes transformational leadership as the most effective approach in achieving high team morale, patient satisfaction, and staff retention (McDermid et al., 2020)..

Graph 1: A line graph demonstrating the correlation between leadership adaptability and patient care outcomes during crises.



(Fernando & Hughes 2019).

It highlights the importance of flexibility and quick decision-making in achieving positive results during periods of uncertainty.

Key Findings

The following key findings summarize the insights gained from this analysis:

1. **Transformational Leadership:** This leadership style significantly improves team morale, patient satisfaction, and staff retention. By fostering innovation and a shared vision, transformational leaders create an environment where healthcare teams can thrive.
2. **Effective Communication:** Leaders who prioritize clear and consistent communication reduce conflicts, enhance team performance, and improve interprofessional collaboration.
3. **Adaptability and Resilience:** Leadership adaptability correlates positively with successful crisis management and organizational resilience, underscoring the importance of flexibility in dynamic environments.
4. **Interprofessional Collaboration:** While collaboration among diverse team members improves patient outcomes, it also requires strong leadership to address challenges such as role ambiguity and differing communication styles.

Such research findings are valuable for healthcare organizations seeking methods to enhance the performance of the teams and the quality of patient treatment accordingly. The current analysis indicates that, when practiced along with dynamic communications and adaptability, what has been referred to as transformational leadership is the best approach to managing these challenges (Cummins et al., 2018).. Applying leadership frameworks and methods grounded in the best evidence can help build even more resilient healthcare systems and improve the ability of these systems to deliver high-quality, patient-centered care.

Discussion

Interpretation of Findings

Of particular relevance, they highlight the value of transformational leadership in highly fluid healthcare settings. Transformational leaders work on the people's needs in the organization, helping them create a vision and constructive focus on ideas and problems. Some of the strengths of the crisis within this style include the ability to embrace emotional flexibility, with decisions made and communicated optimally in times of crisis. Technology is a mixed blessing in healthcare team management. However, achievements like electronic health records also inextricably bring changes like training and practice to providers. Managers who work through these issues increase the productivity of all members of the team as well as the quality of patient care provided (Heinen et al., 2019)..

Implications for Practice, Policy, and Education

Therefore, for practice, nurse leaders should incorporate training mechanisms that cover communication, conflict and crisis management. Conclusion and policy implications include the need for institutional frameworks to be reformulated to embrace leadership transformation and adaptability. Harris et al., & Harris, Kopp, & Janke, Kopp, & Thompson, & Thompson (2011) have enumerated that educational programs should incorporate leadership education in the curricula but with a focus on real-world orientation and case-based didactic.

Conclusions

Within this context, nursing leadership assumes a central role in the teamwork process of managing multiple staff groups/teams in a rapidly changing, fast-developing and technologically advanced setting in which client/patient demands are multiple and unpredictable. After comparing different leadership behaviors, transformational leadership is only deemed the most efficient for improving cohesiveness and creating

patient satisfaction and organizational APC. Transformational leaders engage and mobilize their followers to create positive change by supporting a vision and stimulating creativity and development. This differs from the more 'buy and sell' transactional leadership style, which depends on incentives and punishments and is comparatively less efficient in sound circumstances, and the more 'generally open door' serving kind of leadership, where everyone is involved but may not tackle certain issues systematically. Flexibility is another essential quality of effective nurse leaders; it helps them address emergencies, respond well to change, and maintain organizational culture and morale during tumultuous times. Moreover, warm communication and effective interprofessional compose the basis of nursing leadership (Belrhiti et al., 2018). Engaging communication, listening, and collaboration foster teamwork, while accountability and conflict of task definition require a mediator perspective. Models like the Magnet Recognition Program and Kotter's Eight-Step Process help navigate activities and transformation. Lastly, sustaining transformational change, being adaptable in nursing practice, and embracing system efficiency; hence, collaboration in nursing leadership enables efficient patient care delivery in the complexity of modern healthcare and develops an empowered and strong nursing workforce. Combining EBP and leadership systems can foster the optimization of other valuable assets within HC organizations, such as individuals and teams of workers, patients and their families, to foster patients' satisfaction and, ultimately, the therapeutic results, reaffirming the role of the successful nursing leadership in the perpetual transformation of the healthcare setting.

Recommendations

1. Leadership Training: Having long-term training activities in flexibility, assertiveness, and working stressfully.
2. Mentorship Programs: Promote workshop programs that sponsor early career nurse leaders.
3. Policy Reforms: Perse for institutional policies concerning change at the organizational level and teamwork.
4. Future Research: Analyze how leadership behavior patterns relate to patients' status and staff turnover in various healthcare organizations.

References

- Belrhiti, Z., Giralt, A. N., & Marchal, B. (2018). Complex leadership in healthcare: a scoping review. *International journal of health policy and management*, 7(12), 1073. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6358662/>
- Heinen, M., van Oostveen, C., Peters, J., Vermeulen, H., & Huis, A. (2019). An integrative review of leadership competencies and attributes in advanced nursing practice. *Journal of advanced nursing*, 75(11), 2378-2392. <https://onlinelibrary.wiley.com/doi/abs/10.1111/jan.14092>
- Cummings, G. G., Tate, K., Lee, S., Wong, C. A., Paananen, T., Micaroni, S. P., & Chatterjee, G. E. (2018). Leadership styles and outcome patterns for the nursing workforce and work environment: A systematic review. *International journal of nursing studies*, 85, 19-60. <https://www.sciencedirect.com/science/article/pii/S0020748918301019>
- Cherry, B., & Jacob, S. R. (2016). *Contemporary nursing: Issues, trends, & management*. Elsevier Health Sciences. https://books.google.com/books?hl=en&lr=&id=vzddCwAAQBAJ&oi=fnd&pg=PP1&dq=Nursing:+Comprehensive+Review+of+Nursing+Leadership+and+Strategies+for+Managing+Healthcare+Teams+in+Dynamic+Environments%22&ots=mPsg6kBsfs&sig=8rYJ_P41qRwFUlwBzQgKItfmJuo
- Christensen, S. S., Wilson, B. L., & Edelman, L. S. (2018). Can I relate? A review and guide for nurse managers in leading generations. *Journal of nursing management*, 26(6), 689-695. <https://onlinelibrary.wiley.com/doi/abs/10.1111/jonm.12601>
- McDermid, F., Mannix, J., & Peters, K. (2020). Factors contributing to high turnover rates of emergency nurses: A review of the literature. *Australian critical care*, 33(4), 390-396. <https://www.sciencedirect.com/science/article/pii/S1036731419300311>
- Fernando, G. V. M. C., & Hughes, S. (2019). Team approaches in palliative care: a review of the literature. *International journal of palliative nursing*, 25(9), 444-451. <https://www.magonlinelibrary.com/doi/abs/10.12968/ijpn.2019.25.9.444>
- Almost, J., Wolff, A. C., Stewart-Pyne, A., McCormick, L. G., Strachan, D., & D'Souza, C. (2016). Managing and mitigating conflict in healthcare teams: an integrative review. *Journal of advanced nursing*, 72(7), 1490-1505. <https://onlinelibrary.wiley.com/doi/abs/10.1111/jan.12903>
- Trépanier, S. G., Fernet, C., Austin, S., & Boudrias, V. (2016). Work environment antecedents of bullying: A review and integrative model applied to registered nurses. *International journal of nursing studies*, 55, 85-97. <https://www.sciencedirect.com/science/article/pii/S0020748915003028>
- Rosen, M. A., DiazGranados, D., Dietz, A. S., Benishek, L. E., Thompson, D., Pronovost, P. J., & Weaver, S. J. (2018). Teamwork in healthcare: Key discoveries enabling safer, high-quality care. *American Psychologist*, 73(4), 433. <https://psycnet.apa.org/journals/amp/73/4/433/>

- Berkowitz, B. (2016). The Patient Experience and Patient Satisfaction: Measurement of a Complex Dynamic. *Online Journal of Issues in Nursing*, 21(1). <https://search.ebscohost.com/login.aspx?direct=true&profile=ehost&scope=site&authtype=crawler&jrnl=10913734&AN=128446607&h=avuA8sgAkeCjhdLzg4DWB4NY9kvSnTrQNfLZMI8fihPyDNrvFOF%2B7wdgpUeD%2FaOAYQr8lJNhw6xqap7M%2FrJBWQ%3D%3D&crl=c>
- Scully, N. J. (2015). Leadership in nursing: The importance of recognising inherent values and attributes to secure a positive future for the profession. *Collegian*, 22(4), 439-444. <https://www.sciencedirect.com/science/article/pii/S1322769614000869>
- Al Rahbi, D., Khalid, K., & Khan, M. (2017). The effects of leadership styles on team motivation. *Academy of Strategic Management Journal*, 16(2), 1-14. https://www.academia.edu/download/57425577/THE_EFFECT_OF_LEADERSHIP_STYLES_ON_TEAMS.pdf
- O'donovan, R., & McAuliffe, E. (2020). A systematic review of factors that enable psychological safety in healthcare teams. *International journal for quality in health care*, 32(4), 240-250. <https://academic.oup.com/intqhc/article-abstract/32/4/240/5813852>
- Murphy, M., Curtis, K., & McCloughen, A. (2016). What is the impact of multidisciplinary team simulation training on team performance and efficiency of patient care? An integrative review. *Australasian emergency nursing journal*, 19(1), 44-53. <https://www.sciencedirect.com/science/article/pii/S1574626715000853>
- Hoff, T., Carabetta, S., & Collinson, G. E. (2019). Satisfaction, burnout, and turnover among nurse practitioners and physician assistants: a review of the empirical literature. *Medical Care Research and Review*, 76(1), 3-31. <https://journals.sagepub.com/doi/abs/10.1177/1077558717730157>
- Buheji, M., & Buhaid, N. (2020). Nursing human factor during COVID-19 pandemic. *Int J Nurs Sci*, 10(1), 12-24. <https://www.academia.edu/download/64163572/10.5923.j.nursing.20201001.02.pdf>
- D'Innocenzo, L., Luciano, M. M., Mathieu, J. E., Maynard, M. T., & Chen, G. (2016). Empowered to perform: A multilevel investigation of the influence of empowerment on performance in hospital units. *Academy of Management Journal*, 59(4), 1290-1307. <https://journals.aom.org/doi/abs/10.5465/amj.2013.1073>
- Roberts, S. J. (2015). Lateral violence in nursing: A review of the past three decades. *Nursing Science Quarterly*, 28(1), 36-41. <https://journals.sagepub.com/doi/abs/10.1177/0894318414558614>
- McKibben, L. (2017). Conflict management: importance and implications. *British Journal of Nursing*, 26(2), 100-103. <https://www.magonlinelibrary.com/doi/abs/10.12968/bjon.2017.26.2.100>
- Contandriopoulos, D., Brousselle, A., Dubois, C. A., Perroux, M., Beaulieu, M. D., Brault, I., ... & Sansgter-Gormley, E. (2015). A process-based framework to guide nurse practitioners integration into primary healthcare teams: results from a logic analysis. *BMC Health Services Research*, 15, 1-11. <https://link.springer.com/article/10.1186/s12913-015-0731-5>