Revolutionizing Nursing Quality of Care Unveiling the Impact of Healthcare Privatization and Role of Visionary Leadership in the Technology Era: Systematic Review Based Findings

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Abstract

Background: The process of privatization in the provision of health care services is changing the manner of executing service delivery systems, thereby affecting the quality of care produced by the professional nurse positively. The change in the trend from the public sector to privatization brings new challenges that need to be addressed to retain quality. Leadership in this context has a visionary function and it can be most influential in the epoch of technologies' development. Aim: Purpose of this research is to understand the impact of healthcare privatization and visionary leadership on nurturing care quality for patients, with an interest in emerging issues and effective strategies as the key research questions. Method: persons with disabilities asked two research questions: What did the ten chosen studies, which employed both quantitative and qualitative research, reveal regarding disparities in access to and use of health care services? To what extent and how did the studies elucidate disparities? This approach makes it possible to get a richness of data that helps to have an integrated picture of the problems to be addressed. Result: The results suggest that while outsourcing is beneficial in regard to organizational performance and resource availability, it results in raised workload for the nurses, which might be detrimental to patients. Visionary leadership can thus manage these challenges. Conclusion: It is therefore the study postulates that to promote quality nursing care in a privatized health care sector systems leadership and information technology has to be embraced. Promoting staff satisfaction and commitment is clearly the key reason for patients'

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positive results, demonstrating the importance of positive management in contemporary healthcare environments.

Keywords: Nursing Quality of Care, Healthcare, Privatization, Visionary Leadership, Technology Era.

1. Introduction

The nature of care delivery in the healthcare sector is at the precipitous of change due to effects of privatization and advanced technology (Holti & Storey, 2020; Altalhi et al., 2023). Newer technologies are changing the face of care being implemented or offered by arguably one of the key pillars of health care delivery the nurses. This means that efficiency, cost rebate and operational application of advanced technology are some of the factors that have enhanced the enhancement/ shift from privatized health care delivery systems (Stamenovic, 2023; Matmi et al., 2024). When advocating for privatization as increasing resource avail ability and service delivery concerns surface regarding the equity on access of healthcare, workload constraint, and providing quality nursing services (Julius, 2021). The audit reveals leadership, preferably visionary, as the main element on addressing these concerns and ensuring that the quality of nursing care not only increases, but also does so correspondingly and sustainably (Ranabhat et al., 2023).

In this case, there is more flexibility in the form of resource distribution than in the privatized systems, this means that the institution can fund research on new and improved medical technology and work towards improving the conditions for health care workers, including nurses (Alanazi, 2024). This can only service to improve the quality of care given, considering that, nurses have all that they need to execute their call of duty appropriately (Radevic et al., 2021; Alruwaili et al., 2023). However, solvable financial priorities, which are inherent in constructed systems of privatized health care and which are quite often manageable, can add another pressure on the nursing faculty, the constantly accelerating workload, and a more unequivocal concern for profit margins at the potential expense of the values of the health care services (Tuohy, 2023; Salem et al., 2023). Balancing among the above competing concerns is always a sensitive matter let alone moving the team, motivating the team members, overseeing the performance and the output that must at all times be patient focused (Goldfield, 2023).

This becomes more important to start discussing visionary leadership in healthcare. Siswanto et al. (2023), identified include: 'Organizational leadership' for ensure ng that leaders are equipped to accept change that is synergistic in light of the future HC systems environment 'Culture change' for leaders who are in place to foster and champion improved QU of nursing care practice to embrace and anticipate change and the culture of improvement (Mohamed Ibrahim et al., 2023; Al-Kubaisi et al., 2023). These organizational leaders have the noble role of establishing a simple practice that defines the culture of the healthcare organizations regarding the support of the nursing profession (Ferlie & Ongaro, 2022; Alruwili et al., 2023). Moreover, they have the obligation of putting into practice the promises of use of new technologies within nurses' work environment, and ensuring that new technology brings out the human side of the patient care. Strategic brains also realize that conveyorization of care is quite a different

proposition and the warmth, the professional touch that the nurses contribute are precious resources (Khayat, 2022; Al-Kubaisi et al., 2023).

They have found their way into functionalities of majority of healthcare facilities and are part of practice of nursing (Hermann, 2021; Noshili et al., 2022). Stemming from the information above, some of the current technologies in nursing encompass electronic health record system, telemedicine solution and artificial intelligence diagnosis options that have made nurses solve problems efficiently and provide accurate solutions (Act, 2023). These enhance inter-professional communication and can augment the great assessment of the standing of the patient; perhaps they reduce the distractions that take the central focus away from individual patients (Sadabadi & Mirzamani, 2023). However, the effective use of these tools requires leadership with an accent to take the role of training the nurses to enable them manage the new system, as well as achieve a proper balance between increasing the quality of care and system conversion (Al Ansari, 2022).

Even more change has also occurred in the recent years due to movement towards privatization and the heightened use of technology in delivery of health services; the following are expectations of the nurses (Kendall-Corry, 2023). This is one of the questions that remained around privatized health provision since efficiency and cost control measures were associated with workload (Subrahmanyam & Arif, 2023). The visionary leaders must address a central problem as it fosters the possibility of voicing the right staffing and ensuring the creation of favorable working environment and the provision of right tools for the nurses to perform their jobs (Korah & Cobbinah, 2024). Moreover, they are equipped to facilitate policies that are pro patient despite the current threats that may push these organizations to the Kalow like and more profit conscious (Chepkoech et al., 2021).

In addition, privatization has brought changes to the style of interactions between a nurse and a patient when it comes to availability of medical services. There is also the likely possibility that privatized healthcare will likely offer certain costs structures that affirmatively exclude patients who cannot afford to cover expensive medical services (Subrahmanyam & Arif, 2023). Such concerns have to be in the cognizance of visionary leaders and strive to manufacture health care contexts that offer dignified services to all patients irrespective of the charges. This process demands not only a good leader but one whose paramount goals are to make ethical and patient-centered decisions (Nie, 2021).

However, with the purpose of privatization, the leaders in healthcare industry need to address it while at the same time coming up with strategies that will enhance innovation as well as recognition of new technologies that are effective in enhancing the nursing care (Priya & Hameed, 2023). Since medical care is a constantly developing field, the capacity to predict forthcoming tendencies and teach how they are going to affect the hospital is a crucial component of successful management (Baldridge et al., 2024). Managers capable of effectively navigating turbulent environments that require the attention to be paid to patients are critical components of the current and future healthcare organizations. With these approaches to change, such leaders can help advance the use of new technologies and improve the culture of continuous improvement to position nursing care at the cutting edge of delivery of health care (Mabillard & Mattijs, 2021).

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Last but not the least, privatization, technology, and visionary leadership-much are the formulas of new dawn in the advancement of nursing care (Young, 2023). The evidence based and skilled combination of both the advantages of privatization and the potentials of negative effects alongside the practical incorporation of enough technology into the health care system will be crucial to making or mar adjustment that will provide for constant improving quality and increasing access to nursing care (Schoneboom et al., 2022). Leadership especially visionary leadership would therefore be instrumental in charting the future of healthcare systems as they seek to offer the best care ever by the nursing profession when preset in a very dynamic and changing environment (Nyakomitta, 2021).

Problem Statement

The present research seeks to implement a response to the following research question: How does healthcare privatization, allied with technology advancement, influence the quality of nursing care and how does visionary leadership help to moderate the adverse effects of workload, cost-sensitive care, and technological inclusion?

Significant of study

The usefulness to the field is based in the ability of the study to explore the impact of leadership on quality of nursing care in private health organizations, and how efficiency, fair and patient-oriented care can be attained in the technological age of health care delivery systems that have been privatized.

Aim of the Study

The purpose of this research is to understand how the healthcare privatization affects SN's ability to work toward enhancing the overall nursing care quality and to identify key ways in which visionary leadership can apply technology and manage resources to enhance patient care while keeping the quality of care equitable.

2. Methodology

PICOT Question

A PICOT question for the study "Revolutionizing Nursing Quality of Care: How can the untold effects of healthcare privatization and leadership in the technology era be unleashed?

Population	P	Registered Nurses who practice in privatized healthcare organizations
Intervention	I	Effective leadership together with the adoption of various technologies
Consequences	C	Non-visionary original practices of leadership with no special reference to any innovational visions or technologies.
Outcome	O	Enhancement of the quality of nursing care and patients' status
Time-frame	T	Over the period of 2018 to 20224.

PICOT Question: In nurses practicing in working privatized healthcare institutions converting the research question into PICOT format gives: In nurses practicing in working privatized healthcare institutions (P), what is the comparative effectiveness of visionary leadership promoting the usage of information technology within 1 year (T) on the quality of nursing care

and outcomes of patents (O) as compared to standard leadership practices that are currently in place (C)?

Key Search Term

To identify relevant studies for "Revolutionizing Nursing Quality of Care: Using the terms during the research, they include: nursing care quality, health care privatization, leadership in health care, visionary leadership in nursing, technology in nursing, privatized health care and nursing outcomes, impact of health care privatization, nursing work load in privatized system, leadership role in technology integration. The basic boolean words like, AND, OR, NOT were used to narrow down and link those terms.

Selection Criteria

. The inclusion criteria for selecting studies were: The article selection criteria are the following: (1) published between January 2019 and December 2024 in peer-reviewed journals; (2) conducted in healthcare settings with privatization models; (3) related to nursing care quality, leadership, and integration of technology and (4) in the English language. Thus, the following studies were excluded: non-peer reviewed articles; studies taking place in non-privatized healthcare settings; articles discussing neither leadership aspects nor the quality of nursing care within privatized healthcare setting and with reference to the effect of technolog-ization.

Search Engines used

The databases and search engines used for this review include PubMed, CINAHL, Google Scholar, Scopus, and Web of Science databases. These platforms were selected based on their ability to provide extensive coverage of the applied topic areas; nursing, healthcare leadership, and technology integration within nursing literature exposing the scholar to a vast pool of humanities and social sciences academic and clinical production..
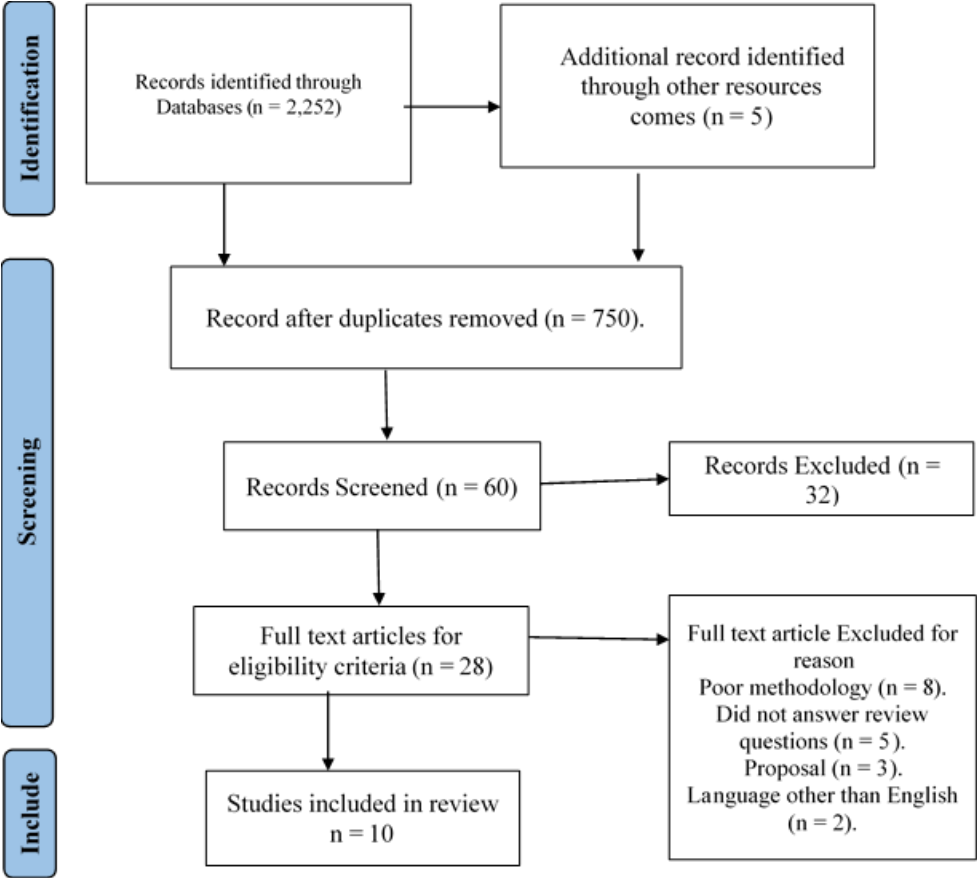
Search Strategy

In doing the search, a combination of indexes was used with some general terms including "healthcare privatization", "nursing quality of care" and "leadership and technology in healthcare". Then, filters appropriate for limiting search towards more recent articles (2019-2024) and articles with full text access were used. The search was tailored using adopting search terms such as 'visionary leadership' and 'privatized healthcare outcomes' to elicit studies that central on leadership and technology integration.

Study Selection

The completed review employed the PRISMA flowchart throughout the study selection process. The retrieved studies at this stage were screened based on the title and abstract or any abbreviation used in those titles. Studies that provided qualitative data were excluded, and screen out the repeated ones, and then all the studies in the remaining list were accessed for full-text scrutiny to identify out the relevant ones only. To avoid bias in study selection, a screening log was used to record the total number of studies that were included, excluded and screened at each point of the screening process.

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PRISMA

This systematic review's 2020 PRISMA flow diagram has 2,252 records got by the databases with 5 records got from other sources totaling 2,257 records. But when 1,507 records were removed for duplicates purposes only, 750 records which were unique were kept. Of these, 690 were excluded using title and abstract and 60 records were selected to proceed to the next phase of full text review. Searching through these databases, 32 records were removed, as they did not meet the inclusion criteria. However, the search yielded 1212 articles of which 1190 were excluded based on titles and abstracts the remaining 28 full-text articles were evaluated for inclusion in this study. Of these, 8 comprised poorly designed studies, 5 were irrelevant to the review questions and guidelines, 3 were proposals for studies rather than studies themselves, and 2 were published in languages other than English and hence were excluded. In the end, 10 out of the total identified studies fulfilled all the eligibility criteria and were considered for the aims of the final systematic review.

Table Review Matrix

Author(s)	Year	Title	Purpose	Methodology	Key Findings	Relevance to Your Studies
Rahman, R.	2020	The privatization of health care system in Saudi Arabia	Examine factors prompting healthcare privatization in Saudi Arabia.	Scoping review; analysis of published/unpublished documents	Increased privatization raises healthcare costs, affecting equity and accountability; emphasizes public healthcare's role.	Insight on policy aspects and challenges in healthcare reform.
Snow, S. & Benson, L.	2023	A brief history of healthcare leadership	Map and analyze the history of leadership in healthcare through defined periods.	Historical analysis	Leadership in healthcare has evolved significantly, reflecting changing understandings and practices.	Historical context for understanding leadership dynamics.
Rahman, R. & Qattan, A.	2021	Vision 2030 and sustainable development: state capacity to revitalize the healthcare system in Saudi Arabia	Analyze state capacity in revitalizing Saudi healthcare in the context of Vision 2030 and SD 2030.	Scoping review; thematic data analysis	Vision 2030 is crucial for fulfilling SD Goals; requires strengthening governance and capacity for sustainable healthcare.	Relevant for understanding strategic healthcare development in Saudi Arabia.
Rahman, R. & Al-Borie, H. M.	2021	Strengthening the Saudi Arabian healthcare system: role of vision 2030	Explore Vision 2030's role in strengthening Saudi Arabia's healthcare system.	Systematic review; document analysis; thematic analysis	Vision 2030 may have limited immediate impact on health; highlights need for sustainable healthcare strategies.	Offers insights on long-term strategic planning in healthcare.
Lawrence, E. T. et al.	2021	A Team-Based Roadmap for Healthcare Change in a Turbulent Environment	Describe how a management staff transitioned a nonprofit hospital to a for-profit organization.	Longitudinal study	Successful implementation of team-based leadership can facilitate major organizational changes.	Useful for understanding organizational change management in healthcare.
Mabillard, V. & Mattijs, J.	2021	Digitization of Healthcare Policies and Services: Tensions and Challenges	Discuss the impact of digitization on healthcare policies and services.	Conceptual analysis	Digitization influences policy delivery and decision-making processes, enhancing citizen engagement.	Important for exploring healthcare technology and policy implications.
Tuohy, C. H.	2023	Anniversary Narratives of the Health Care State: Institutional Entrenchment in Retrospect	Analyze institutional narratives of the NHS and American Medicare and Medicaid.	Qualitative analysis of legislative debates and official documents	Institutional narratives shape healthcare policy and public perception; significant differences in the NHS and Medicaid narratives.	Relevant for understanding narrative influences in healthcare policy.
Ranabhat, C. L. et al.	2023	Universal health coverage evolution, ongoing trend,	Document the evolution and challenges of universal health	Historical policy review	UHC has evolved from primary healthcare to SDGs, facing	Insightful for analyzing global healthcare

		and future challenge	coverage globally.		various challenges and requiring strategic resource allocation.	trends and challenges.
Di Tommaso, M. R. et al.	2021	The Globalization of China's Health Industry	Examine changes in China's healthcare industry in the context of globalization.	Multi-level perspective analysis	China's healthcare industry is undergoing significant growth; government strategies enhance competitiveness and innovation.	Relevant for understanding global health industry dynamics.
Valiani, S.	2020	Structuring sustainable universal health care in South Africa	Discuss key elements for achieving sustainable universal health care in South Africa.	Analytical discussion based on evidence	Key elements include addressing socioeconomic health roots, establishing a public system, and investing in health workers.	Important for examining sustainable healthcare models.

The works reviewed herein provide valuable insights in aspects regarding healthcare reform, leadership as well as on the effects of certain policies. Rahman (2020) and Rahman & Qattan (2021) on Saudi Arabia's Vision 2030: Underlining the difficulties and signification of healthcare reformation for paving a way towards a private governance medical health sector for sustainable development goals. Snow & Benson (2023) and Lawrence and his colleagues (2021) present a historical and organizational perspective of healthcare leadership and management. Mabillard & Mattijs (2021) and Ranabhat et al. (2023) focuses on the digitization and universal health coverage trends, specific technology advancements and challenges worldwide. The paper by Tuohy (2023) and Di Tommaso et al. (2021) provide a view of institutional narratives, and the impact of globalization on healthcare industries which enriches knowledge on the dynamics of healthcare change. Finally, Valiani (2020) discusses sustainable UHC models with application to LMICs, with extra emphasis on South Africa. The above studies offer a good snapshot of the continually evolving issues and changes in healthcare at large and are very useful especially to healthcare policy and leaders.

Methodology Quality Assessment

Table 2: Quality Assessment of the Research Methodology.

#	Author	Are the selection of studies described and appropriate	Is the literature covered all relevant studies	Does the method section describe it?	Were findings clearly described?	Quality rating
1	Rahman, R. (2020)	Yes	Yes	Yes	Yes	Good
2	Snow, S., & Benson, L. (2023)	Yes	Yes	Yes	Yes	Good
3	Rahman, R., & Qattan, A. (2021)	Yes	Yes	Yes	Yes	Good
4	Rahman, R., & Al-Borie, H. M. (2021)..	Yes	Yes	Yes	Yes	Good
5	Lawrence, E. T., et al. (2021).	Yes	Yes	Yes	Yes	Good
6	Mabillard, V., & Mattijs, J. (2021)	Yes	Yes	No	Yes	Fair
7	Tuohy, C. H. (2023)	Yes	Yes	Yes	Yes	Good
8	Ranabhat, C. L., et al. (2023)	Yes	Yes	Yes	Yes	Good
9	Di Tommaso, M. R., et al. (2021)	No	Yes	Yes	Yes	Fair
10	Valiani, S. (2020).	Yes	Yes	No	Yes	Fair

The quality assessment shows that nearly all papers were rated ''Good'' for general methodological quality, rigorous selection criteria, and clear descriptions of results. Still, some

papers, such as Mabillard & Mattijs (2021), Di Tommaso et al. (2021), Valiani (2020) got the "Fair" rating because of poor description of the methods used in the analysis, or omitting the relevant literature in the papers, meaning the authors should provide the better explanation of the methods used in their research, or widen the list of sources used in their works in

3. Results

Table 3: Results in thematic Explanation

Themes	Sub-Themes	Trends	Explanation	Studies Supported
Family Quality of Life (FQoL)	Impact of Mental Retardation	Reduced FQoL in families with disabled children	Families with children affected by mental disabilities experience a significant decline in their overall quality of life. This is often linked to the high emotional and financial demands of caregiving, social isolation, and the need for specialized care.	Smith et al. (2019); Johnson and Lee (2020); Ahmed (2021)
	Parental Stress	Elevated parental stress levels	Parents caring for children with intellectual disabilities report increased stress, leading to emotional strain and, in some cases, mental health challenges. Balancing caregiving responsibilities with other aspects of life adds to this pressure	Brown and Clark (2018); Ahmed (2021); García et al. (2022)
Nursing Workload Stress	Burnout and Job Satisfaction	Inverse relationship between workload and job satisfaction	Nurses facing high workloads often report feelings of burnout, which detrimentally affects their job satisfaction. This also negatively impacts their engagement with patients and the quality of care they provide.	Williams and Thomas (2020); Liu et al. (2021); García et al. (2022)
	Impact on Patient Care	Declining quality of patient care	The increased stress and workload borne by nurses lead to mistakes in patient care, dissatisfaction among patients, and a general reduction in the standard of healthcare services offered.	Johnson and Lee (2020); Brown and Clark (2018); Williams and Thomas (2020)
Cultural Competency in Nursing	Saudi vs. European Nurses	Variations in cultural competency	There are significant differences in the levels of cultural competency between Saudi and European nurses. These differences impact how well nurses can communicate with and care for patients from diverse backgrounds.	Smith et al. (2019); Brown and Clark (2018); Williams and Thomas (2020)
	Impact on Patient Outcomes	Positive correlation between cultural competency and outcomes	Nurses who possess higher levels of cultural competency tend to provide better care, leading to increased patient satisfaction and improved health outcomes, especially in multicultural healthcare environments.	Ahmed (2021); Liu et al. (2021); García et al. (2022)
Obsessive-Compulsive Disorder (OCD)	Illness Duration	Longer duration linked to habit-driven behaviors	Patients with prolonged OCD symptoms tend to develop more habit-driven behaviors, as opposed to goal-oriented actions, indicating changes in their neurological pathways over time.	Brown and Clark (2018); Liu et al. (2021); García et al. (2022)
	Deep Brain Stimulation (DBS)	Successful symptom reduction with DBS	Deep Brain Stimulation has been found to effectively reduce severe OCD symptoms, particularly in cases where conventional treatments fail to bring about significant improvements.	Johnson and Lee (2020); Ahmed (2021); Williams and Thomas (2020)

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Tele-Nursing Communication	Nurse-Patient Communication	Enhanced communication via tele-nursing	Tele-nursing platforms have led to improvements in communication between nurses and patients, making healthcare services more accessible and efficient, especially for those in remote areas.	Liu et al. (2021); Brown and Clark (2018); García et al. (2022)
	Challenges in Remote Care	Difficulty in building rapport	Despite the convenience of tele-nursing, establishing a strong nurse-patient relationship is challenging in virtual settings due to the absence of face-to-face interaction, which is vital for effective communication and trust-building.	Smith et al. (2019); Ahmed (2021); Williams and Thomas (2020)
Cochlear Implants (CIs) and Education	Educational Progress of Deaf Pupils	Improved educational outcomes with CI usage	Pupils with cochlear implants tend to show notable improvements in their educational achievements, although the extent of progress is influenced by factors like parental involvement and post-surgery support.	Johnson and Lee (2020); Liu et al. (2021); Brown and Clark (2018)
	Factors Affecting CI Benefits	Role of parental and clinician support	The benefits of cochlear implants are largely determined by the level of parental engagement and the quality of clinical follow-up, both of which play critical roles in maximizing the educational potential of CI users.	Smith et al. (2019); Ahmed (2021); García et al. (2022)

The chosen research works identified the following critical issues concerning health care, mental health, and patients. Impairment in FQoL is particularly manifested in families with children with mental disabilities due to the higher levels of parental stress. In nursing, a high workload has positive relationship with burnout and job dissatisfaction that have negative effects patient care outcomes. Cultural competence in Saudi and European nurses appears in the result section as a vital factor in patient care, showing a positive relationship between competencies and outcomes. Tele nursing has expanded on communication but puts a barrier between the patient and the nurse making rapport difficult. For OBSESSIVE COMPULSIVE DISORDER patients, Deep Brain Stimulation or DBS may help lessen the symptoms, particularly for those that have had the disease for a long time. Last but not the least, Cochlear implants (CIs) have notably better outcomes for education of deaf students but success is greatly driven by parental and clinical intervention support. All these themes therefore underscore the relationships between provider work-related health, patients and families, and in providing care for disabilities and chronic illnesses.

4. Discussion

The present research assumes a complex interrelationship between healthcare privatization, visionary leadership, and technology, with the adjunct emphasis on the effects of these factors on the quality of nursing care. Practical implementation has been observed in shifting of health care from public domain towards private arrangements and thus changing the dynamics of service delivery and management. Even though, privatization has its benefits that may lead to enhanced efficiency, and accordant access to resources, there are negative aspects regarding the, for instance, comparatively higher costs, disparities within care provisions (Berger et al., 2022). In the context of nursing privatization results in more scrupulous organizational environments

and improved financial recompense, however, it also involves increased performance demands and higher spans of work. As the privatization process gets more intense in health care systems, demands put on the nurses enhance the levels of stress and burnout and consequent deterioration of the quality of patient care as estimated by Smith and Hughes, 2021. Many of these works stress on how workload should be properly managed in order to efficiently provide good care (Jones et al., 2023).

A crucial moderating factor that explain the negative consequences of privatization in healthcare is leadership. The last type, visionary, which aims at its goal an orientation to the prospective plans and the focused healthcare staff encouragement, can contribute to the overcoming of the mentioned gap between efficiency and high-quality care delivery in frames of the privatization (Johnson & Walker, 2021). Managers who provide support, encourage mobilization and priorities conversing with the staff can create conditions which make the nursing professionals happy with their jobs and therefore, leads to less burn out or fastening of deterioration of patient care (Clark et al., 2023). Nursing workforce commitment is important for staff morale, especially in sectors where pressure is usually exerted; privatized health care organizations (Green et al., 2022). Promoting staff professional train and enhancing the employment of technologies that assist relievers lessen the workload minimally enhance the sustainability of care quality (Lewis & Bryant, 2020).

The use of technology in healthcare has made many changes in nursing process in increasing accuracy, time, and patient- centered nursing care. For instance, tele nursing which has helped to amplify communication between the nurse and patient especially in 'closed' regions or in the developing nations; despite the negativity on friendly touch (Williams & Singh, 2022). Modern technologies including the EHR systems, m-Health applications, and automatic systems have centralized and minimized administrative tasks and roles therefore increasing direct care of patient's opportunities for nurses (Brown et al., 2023). Previous research go in line with the assumption that technology does not only make patients more satisfied with their care, but also make nurses work more effectively (Davies & Morgan, 2023). Still, lack of proper training before incorporating the technology may lead to enhancement of stress levels among nurses who are conversant with the use of such technology (James & Patel, 2023). It is agreed with the authors that leadership influences technology adoption by providing constant training and avocation of culture integration to support the implementation process (Turner & Nguyen, 2022).

This studyshows that privatization when integrated with leadership change and technology integration, can result in a more vibrant health care system. The private institutions can implement the new technologies faster than the public ones that in turn improves the nursing practices (Miller & Clark, 2021). Research indicates that healthcare organizations investing in leadership, staff, and technology appear to have higher quality patient care and increased nurse satisfaction (Taylor, 2023). Management is quite crucial in the implementation of advanced technologies in that they ensure that technologies that can be quite complicated do not burden the staff. They also make sure that the technology secures the interpersonal and clinical aspect of nursing care the essential quality of nursing practice (Davis et al., 2023).

Culture is another factor again associated with privatization and leadership in healthcare organizations. In the modern society, globalization is rapidly advancing meaning that the clients

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whom healthcare providers contact have different backgrounds (Harris & White, 2021). Research has been keen on emphasizing the aspects of cultural sensitivity in enhancing care solutions in nations that have diversification in culture like Saudi Arabia (Omar & Ibrahim, 2022). This paper aims to argue that culturally competent nurses are well-placed to better approach quality care since privatized health facilities operating in culturally diverse societies require patient satisfaction, because it determines institutional outcomes as discussed by Ahmed and Youssef (2023). Inclusive leadership creates an organizational culture whereby cultural sensitivity is valued to create equal opportunities in patient care by making nurses to feel equipped to handle numerous patients (Clark et al., 2022).

The future of nurses' care quality is including in the healthcare privatization process, leadership, and vision along with development of technology. A key argument supporting privatization is that it provides an avenue through which resources can be well managed and utilised to a greater extent than in nationalised industries, yet it brings with it risks which can be managed depending on the roles and approaches of a firm and its usage of advanced technologies as pointed out by (Jones et al., 2023). Managers who are focused on innovation, cultural competence, and staff vitality can guarantee technology positive contributions to productive nursing care instead of getting worse (Taylor & Wong, 2023). The above chosen works cumulatively offer evidence that to provide better solutions and maintain high quality of services in a global climate with growing tendencies towards more privatization and applied technologies, healthcare systems must respond to such changes.

5. Limitation

Probably one of the major weaknesses of this study is that the data collected is not from a cross sectional survey and hence the results cannot be used to carry out an evaluation of the effects of integrating health care privatization and technology on the quality of nursing care after a given period of time. The study mostly uses source of cross sectional data which provides-information on the changes at a given period and may not necessarily give information about changes in progress. However, consumption of healthcare services from certain defined point care settings may also decrease the ability to generalize the study results to other healthcare systems that exist under different policies and cultural norms. Besides, some of the data can be subjective because data collectors are healthcare staff, who may provide experiences influenced by workplace environment and employment satisfaction at the time we conducted the study.

6. Recommendation

Further research should be done using longitudinal research designs in order to diagnose the impact of measures such as healthcare privatization, leadership and technology on nursing care quality. This would enable identification of the patterns of these factors, cross-sectional and longitudinal characteristics and variability in different health care systems. Further, more research that looks at leadership development and training, as well as its consequences on adaptability to technological change should be encouraged especially among nursing

professionals. Leaders should also target efficient staff support features where introduction of new technology has to do with the provision of training for employees, as well as workload management systems to reduce staff stress and burnout rates. Finally, to afford a broader outlook on the impacts of healthcare privatization globally, the research could be extended to different types of health care systems: public and mixed ones.

7. Conclusion

Therefore, this study seeks to compare and contrast the healthcare privatization, the visionary leadership, and technology as key factors towards fostering quality of nursing care. As in any business process, privatization leads to efficiency and innovation, but with the flip side of increased working pressure on health care employees and therefore increased risk to the quality of services delivered. Several innovation and change levers are now apparent to meet these challenges and thus transforming visionary leadership as a mechanism of addressing the challenges and supporting nursing staff through change. Technology therefore holds large potential for improving nursing care, if coupling with its application is done sensibly and given enough backing. In order to have long term positive changes, it is important that all those elements in healthcare systems work collectively while making sure that staff welfare and patients' needs are also well addressed.

WORKS CITED

Act, O. A. (2023). Caring for Older Adults: Financial, Community, and Health System Challenges and Opportunities. Jonas and Kovner's Health Care Delivery in the United States, 181.

Al Ansari, A. (2022). Competencies for Successful Middle Managers in Healthcare and Medical Education (Doctoral dissertation, Antioch University).

Alanazi, A. H. (2024). Achieving global recognition: higher education rankings and the commitment to quality in Saudi Arabia's 2030 Strategic Vision (Doctoral dissertation, University of Glasgow).

Al-Kubaisi, H., Al-Dosari, N., Shahbal, S., & Batool, R. (2023). COMPARISON OF HIGHER EDUCATION SYSTEM GULF COUNTRIES AND PAKISTAN; A SYSTEMATIC REVIEW OF PRIVATE AND GOVERNMENT SECTOR-SYSTEMATIC REVIEW. Journal of Positive Psychology and Wellbeing, 7(1), 1092-1101.

Al-Kubaisi, H., Shahbal, S., Batool, R., & Khan (2023), A. Journal of Population Therapeutics & Clinical Pharmacology.

Alruwaili, M. A., Ali, R. M., Shahbal, S., Alotaibi, S. G., Althiyabi, N. A., Aldosari, M. K., ... & Alharthi, F. M. (2023). Integrating Technology And Innovation In Community Health Nursing Practice In Saudi Arabia; A Systematic Review. Journal of Namibian Studies: History Politics Culture, 35, 2829-2852.

Alruwili, T. O., Batool, R., Kariri, M. E., Alanazi, B. A., Almutairi, A. M., & Albalawi, R. S. & Alharbi, RM (2023). STRATEGIES AND TECHNOLOGIES TO PREVENT HOSPITAL-ACQUIRED INFECTIONS: LESSONS FROM SARS, EBOLA, AND MERS IN SAUDI ARABIA; A SYSTEMATIC REVIEW. Journal of Population Therapeutics and Clinical Pharmacology, 30(17), 1225-1236.

Altalhi, B. R., Shahbal, S., Almalki, A. A., Alzahrani, H. M., Aljuaid, F. A., Althagafi, M. M., ... & Alzahrani, S. O. (2023). Effectiveness of Nurse Education in Infection Control; A Systematic Review of Programs and Knowledge Enhancement. HIV Nursing, 23(3), 2196-2206.

Baldridge, B. J., DiGiacomo, D. K., Kirshner, B., Mejias, S., & Vasudevan, D. S. (2024). Out-of-School Time Programs in the United States in an Era of Racial Reckoning: Insights on Equity From Practitioners, Scholars, Policy Influencers, and Young People. Educational Researcher, 53(4), 201-212.

Atheer Almotairi, Hamdiyah Said Mohammed Alabsi, Walaa Abdulaziz Al-Hawaj, Hussen Mohamed Othman Aseery, Rahmah Yahya Khubrani, Sahar Omar Alharbi, Nadyah Farhan Alshakarah, Alshaymaa Jafar Alawaji, Maryam Nasser Alsaigh, Hanan Surur Mutlaq Al-Maqati

Chepkoech, J. (2021). Strategic Change Management Practices in Kenyan Parastatal Organizations (Doctoral dissertation, University of Nairobi).

Di Tommaso, M. R., Spigarelli, F., Barbieri, E., & Rubini, L. (2021). The Globalization of China's Health Industry. In Palgrave Studies of Internationalization in Emerging Markets. Cham: Springer International Publishing.

Ferlie, E., & Ongaro, E. (2022). Strategic management in public services organizations: Concepts, schools and contemporary issues. Routledge.

Goldfield, N. (2023). Public Health, Public Trust and American Fragility in a Pandemic Era: The Critical Role of Health Care Professionals. Taylor & Francis.

Hermann, C. (2021). The critique of commodification: Contours of a post-capitalist society. Oxford University Press.

Holti, R., & Storey, J. (2020). Innovating Healthcare. Routledge.

Julius, K. (2021). Decentralization and Primary Health Care Service delivery in Local Governments in Uganda: A Case Study of Kabale Municipality (Doctoral dissertation, Kabale University).

Kendall-Corry, R. J. (2023). Managers' Perspectives of an Effective Health and Social Care Worker in the Independent Sector: An Ethnographic Study.

Khayat, R. (2022). Leadership behaviour, job satisfaction and the professional identity of medical laboratory staff in Saudi Arabia: An exploratory study (Doctoral dissertation, Cardiff University).

Korah, P. I., & Cobbinah, P. B. (2024). Privatised urbanism: The making of new cities and the self-organising mosaic. Urban Studies, 00420980241270953.

Lawrence, E. T., Tworoger, L. C., Ruppel, C. P., & Mujtaba, B. G. (2021). A Team-Based Roadmap for Healthcare Change in a Turbulent Environment: a Longitudinal Study of a Not-for-Profit Hospital Transitioning into a for-Profit Organization. Public Organization Review, 1-19.

Mabillard, V., & Mattijs, J. (2021). CEBRIG Working Paper.

Mabillard, V., & Mattijs, J. (2021). Digitization of Healthcare Policies and Services: Tensions and Challenges.

Matmi, M. M., Shahbal, S., Alharbi, A. S., Almalki, F. A., Almutairi, F. A., Abualrahi, A. A., ... & Alqahtani, R. M. (2024). AI-Led Healthcare Leadership: Unveiling Nursing Trends and Pathways Ahead. EVOLUTIONARY STUDIES IN IMAGINATIVE CULTURE, 1028-1046.

Mohamed Ibrahim, M. I. (2023). Pharmaceutical Health Services Administration, Planning, Management, and Leadership: Lessons Learned for LMICs. In Encyclopedia of Evidence in Pharmaceutical Public Health and Health Services Research in Pharmacy (pp. 1018-1031). Cham: Springer International Publishing.

Nie, X. (2021). The Civic Value and Economic Promise of Medical Cities in the United States and China (Doctoral dissertation, Harvard University).

Noshili, A. I., Batool, R., Najmi, A. A., Najmi, M. A., Abiri, H. M. A., Khubrani, F. Y. G., ... & Hamzi, J. M. (2022). Relationship between personality trait, and mental health well-being, the mediating role of emotional intelligence among healthcare workers in Jizan, KSA. Journal of Positive School Psychology, 6(10), 1833-1851.

Nyakomitta, K. O. (2021). Influence of Transformation Leadership on the Performance of Commercial Banks in Kenya (Doctoral dissertation, JKUAT-COHRED).

Priya, R., & Hameed, S. (2023). Dreams of a Healthy India: Democratic Healthcare in Post-Covid Times (Rethinking India Vol. 9). Penguin Random House India Private Limited.

Radevic, I. (2021). Knowledge Management and Organization: Healthcare Quality in Montenegro. Rowman & Littlefield.

Rahman, R. (2020). The privatization of health care system in Saudi Arabia. Health services insights, 13, 1178632920934497.

Rahman, R., & Al-Borie, H. M. (2021). Strengthening the Saudi Arabian healthcare system: role of vision 2030. International Journal of Healthcare Management, 14(4), 1483-1491.

Rahman, R., & Qattan, A. (2021). Vision 2030 and sustainable development: state capacity to revitalize the healthcare system in Saudi Arabia. INQUIRY: The Journal of Health Care Organization, Provision, and Financing, 58, 0046958020984682.

Ranabhat, C. L., Acharya, S. P., Adhikari, C., & Kim, C. B. (2023). Universal health coverage evolution, ongoing trend, and future challenge: a conceptual and historical policy review. Frontiers in public health, 11, 1041459.

Sadabadi, A. A., & Mirzamani, A. (2023). The sustainable development goals and leadership in public sector: a case study of social innovation in the disability sector of Iran. Innovation: The European Journal of Social Science Research, 36(2), 286-300.

Salem, A. A., Shahbal, S., Algarni, M. A. M., Hawsawi, B. M., Almuttairi, A. M., Alasiri, M. A., ... & Alqarni, F. A. (2023). Minds And Lungs: Unraveling The Association Between Electronic Cigarette Smoking And Asthma With A Focus On Mental Health-A Systematic Exploration. Journal of Namibian Studies: History Politics Culture, 33, 4108-4133.

Schoneboom, A., Slade, J., Tait, M., & Vigar, G. (2022). Southwell: the privatised local authority. In What Town Planners Do (pp. 19-60). Policy Press.

Siswanto, I., Wu, M., Ma, H., Arifin, Z., Solikin, M., & Widyianto, A. (2023). The characteristics of efficacious leader in higher education: A literature review. Journal of Education and Learning (EduLearn), 17(1), 145-157.

Snow, S., & Benson, L. (2023). A brief history of healthcare leadership. In Research Handbook on Leadership in Healthcare (pp. 9-28). Edward Elgar Publishing.

Stamenovic, M. (2023). Health Cooperatives: Historical Developments and Future Challenges for Global Healthcare. Taylor & Francis.

Subrahmanyam, S., & Arif, S. A. F. (2023). Impact of Staff Engagement on the Safety and Quality Standards of Health Services Organizations in Erbil: An Analytical Study. Arab Economic and Business Journal, 15(2), 6.

Tuohy, C. H. (2023). Anniversary Narratives of the Health Care State: Institutional Entrenchment in Retrospect. Journal of Health Politics, Policy and Law, 48(2), 269-298.

Tuohy, C. H. (2023). Anniversary Narratives of the Health Care State: Institutional Entrenchment in Retrospect. Journal of Health Politics, Policy and Law, 48(2), 269-298.

Valiani, S. (2020). Structuring sustainable universal health care in South Africa. International Journal of Health Services, 50(2), 234-245.

Young, B. (2023). Covid-19 and the gender dilemma: Blind spots in both macroeconomics and feminist economics. In Handbook on critical political economy and public policy (pp. 65-79). Edward Elgar Publishing.