Role of Nursing leaders in Improving quality of care and patient out come in Saudi Arabia, A systemic review

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Abstract

Today, it is proven that successfully managing the best quality care can lead to a reduction in costs. Quality healthcare is the direct consequence of patients receiving their desired outcomes. Therefore, offering patients' quality care in nursing is highly important since it determines patients, families, nurses, and the healthcare organisation's satisfaction. Measuring the effectiveness of care is possible through surveys, which focus on patient satisfaction. In addition, a number of studies have revealed that maintaining standards is highly significant, can be achieved via defining clear, concise and specific goals and objectives, and thus nurses at all times must deliver quality care. By doing this, patients' physical and psychological well-being are improved, as well as being discharged from hospital earlier. The aim of this study was to determine how nursing leadership can improve nurses' quality of care and patient outcome which in turn would lead to satisfaction of nurses providing better quality care in Saudi Arabia. nursing outcomes deals with a number of variables such as their behaviors and attitudes towards providing their patients with better quality care and how they perform in their job role. Patient satisfaction, on the other hand, deals with their feelings towards the level of care they are providing. In investigating this issue further, a systematic review was conducted. five of the most relevant articles were selected to help Saudi hospitals to become aware of how different styles of nursing leadership and leader to better improve nursing outcomes, since this is an unfamiliar topic in Saudi Arabia. It was found that effective nursing leaders who adopt a specific leadership style, in this context, the relational leadership style, had improved nursing outcomes and in turn resulted in improved patient satisfaction. The study concluded that without a clear leadership style, nursing leaders would find it challenging to lead their staff since such styles aim to motivate and inspire the staff to carry out their job effectively and in so doing, would have a positive impact on the patient.

Overview

Managing the best quality of care can reduce cost (McNichol and Hamer, 2006). Quality in health care means excellence in the desired outcomes for patients. Providing quality care in nursing is significant because it determines the satisfaction of patients and their families, nurses and the health care organization (Sherman et al., 2008). The effectiveness of such care can be measured through surveys of patient satisfaction. In addition, research shows that standards must be upheld through comprehensive objectives and specific goals (Al-Yousuf, 2002). Therefore, it is important that nurses deliver quality care at all times. In so doing, patients' psychosocial and physical well-being are enhanced and in turn resulting in a prompt discharge from hospital. Quality of care is not always evident in all hospitals. A case in point is the hospitals in Dammam, Saudi Arabia. While the care is good, nevertheless, there is significant variations among hospitals because of such reasons as:1. There is variation between the number of Saudi nurses and the number of expatriate nurses. According to Almalki (2011), Saudi nurses comprise only 29.1% of the total number of nurses in the ministry workforce. 2. The large percentage of expatriate nurses are not all fully able to speak in Arabic which in turn affects the quality of care received by the patients (Almalki, 2011). To prevent this from happening the role of the nursing leaders in Saudi Arabia is important in preventing suboptimal care. Tomey (2004) suggests that nursing leaders are the people who are qualified and skilled to have the managerial authority and responsibility to direct and influence colleagues and other health care professionals (HCPs) to bring nursing care to an optimal level. Nursing leaders need to know what factors influence patient satisfaction. To improve nursing performance, it is suggested that they, along with experienced nurses have to: Improve the nursing skills by providing continuing education programs.Support and motivate the staff in order to reduce frustration. Provide promotion incentives for staff. Create a healthy work environment to improve the satisfaction of the staff and patients.

Nurse Outcomes and Patient Satisfaction

Furthermore, in recent times, close attention has been paid towards the use of patient outcomes in order to assess the delivery of quality care and patient satisfaction as a genuine indicator of patient outcomes. Studies have found that patients have the ability to distinguish their feelings based on the distinct aspects of care like their satisfaction towards the degree of nursing care they are receiving from staff and their overall experiences of receiving their care whilst in hospital (Rubin et al., 1990; Kouzes and Posner, 1995). Moreover, hospital studies indicate that patient satisfaction is directly associated with satisfaction with nursing care (Mcneese-Smith, 1999).

Collaboration:-

According to Institute Of Medicine IOM (2000), further improving nursing outcomes and patient satisfaction requires nursing leaders to come up with various ways to improve collaboration among

staff. Collaboration is a process in which joint communication and decision making among healthcare professionals come together, namely nurses and physicians (Propp et al., 2010). Furthermore, such factors as cooperation, good communication, knowledge, mutual respect, shared responsibility and trust are some of the attributes of collaboration (Erickson et al., 2003).The existence of true collaboration rests on the work group, for example, nurses and physicians, working as a team and all members are appreciated for the work they do and their contributions to the team. In addition, Kinnaman and Bleich (2004, p.311) defines collaboration as "A communication process that fosters innovation and advanced problem solving among people who are of different disciplines, organizational ranks, or institutional settings; band together for advanced problem solving, discern innovative solutions without regard to discipline, rank or institutional affiliation and enact change based on a higher standard of care or organizational outcome". While, collaboration can also be defined as "…interaction between nurses and physicians with trust, respect, and joint contributions of knowledge, skills, and value to accomplish the goal of quality patient care" (Krairiksh and Anthony, 2001, p.17). It is therefore vital for all team members to support Roberts, A.R Roberts, A.R and contribute to this notion in order for nurses to offer the best quality care for their patients (Barnsteiner,

2001).

Aim: -The aim of this systematic review to assess how nursing leaders can improve quality of care and patient out come in Saudi Arabia.

Objectives: -To achieve the aim, the following objectives have been identified:

1. To evaluate relevant articles relating to the aim.

2. To apprise the quality of the studies.

3. To find out different approaches to enable nurses to improve patient care at practice level.

Methods

In this section, the research questions and processes were examined by using methods to find and appraise the quality of studies for inclusion and exclusion, as well as identification for data synthesis.

A review question was precise, as unfocused questions bring about ambiguity about what research to involve and how to conclude the findings (Higgins and Green, 2005). The question was involved four components, a population, intervention, comparison and outcome (Glasziou et al. 2001).

Search Strategy: Formulating Systematic Review Question

This systematic review is to evaluate how can nursing leaders in Dammam hospitals, Saudi Arabia can influence nurses to improve their quality of patient care at practice level.Parahoo (2006) states that research question is essential and fundamental for research process. PICO framework which stands for problem, intervention, comparison and outcome is a crucial tool to formulate a research question and to simplify the main core of the research (Brettle and Grant, 2004). Further,

a research question can be broken down to manageable keywords which can foster the assessment of the inclusion and exclusion criteria (Sackett et al. 2000). The PICO framework was used to identify the problem and find a solution (University of Illinois at Chicago [UIC], (2014). Developing a researchable question is the most challenging task for the researcher (Aslam and Patricia, 2010). The PICO framework is extensively used to help analyse clinical issues, so in the context of this systematic review,PICO has been applied. It is intended to explore how leaders of nursing can influence their nurses and improve the quality of patient care at the practice level. PICO provides a framework for clarifying a search question and breaking down the topic to increase reliability and clarity and to facilitate a review of the research literature (Brettle and Grant, 2004).

Unpublished, Grey Literature: -

In unpublished or 'grey' literature, publication bias can occur, which might affect the validity of the study or the result (Higgins and Green 2005; McAuley et al., 2000). This approach is used to assess the outcome of the topic and examine the terms used related to nursing practice, the improvement of the patient care. These terms were found to be too broad in the references, and because of this, the strategy protocol of search strategy was reformulated. Additionally English language journals are inclined to present positive results (Khan et al., 2001) therefore; searching literature was limited to English language papers only.

Inclusion and Exclusion Criteria: -

the publication date was limited to within the last 10 years, and results included only sources in English, in order to limit the number and focus the search to enable the location of relevant evidence. The search focused on male and female nursing leaders in Dammam, Saudi Arabia who are in a privileged position to influence nurses to improve the quality of patient care at practice level.

Search Outcome: -

Various database has been explored, along with electronic database to find citation. Further, a wide range of databases involved an abstract, which can be read to establish the suitability before the retrieval of full text articles. For example, the Cochrane Library is the largest provider of resources with regards to health care (The Cochrane Library, 2014; Zhang, et al., 2010), while biomedical literature was provided by Medline (Glasziou et al., 2001). Holland and Rees (2010) state that the quality of the results is centered on the hierarchy of evidence, while Craig and Smyth (2007) believe it to be focused on the design of the research question based on researching the most suitable and related studies. They believe that it is not suitable to use randomized control trials (RCTs) in answering questions on patient beliefs or experiences. Despite this, qualitative studies are more suitable as it is focused on individual insights, experience and attitudes (Parahoo, 2006).

Analyzing the Quality of the Results: -

The Critical Appraisal Skills Programme (CASP) was selected as the quality assessment tool. It was chosen for its connection to the specific design and because it does not set numerical values to each study, but rather is made up of a sequence of questions regarding the validity of individual studies. A lower quality, better-reported study can achieve more than a research paper with higher validity that was not prepared to the same extent. Horsley et al. (2011) state that high quality articles should be peer-reviewed, include sufficient discussion and specifically analysed data and concentrate on the findings and outcomes. In this review the CASP was utilised to assess and evaluate the relevant studies. It have been advised by Horsley et al. (2011) that the high standard studies should maintain an sufficient argument and discussion along with analysed data, and clear outcome and findings. The aim of this review is to investigate how nursing leaders in Dammam, Saudi Arabia, could influence their nursing staff to improve the quality of patient care at practice level.

Data extraction: - In data extraction the relevant data was extracted from all the relevant articles (Khan et l,2001). Since the researcher was aware of bias therefore special attention was taken. In this study, the outcome and the result were illustrated in special tabulation that has been used for summaries of all extracted data

Data synthesis: - is the collection of all involved data and summaries of the results from the primary studies by using statistical techniques (Deeks, 2002). That can be done by metaanalysis or narrative approaches. According to Parahoo, (2006) meta-analysis is one approach commonly used for summaries by gathering the findings of different studies. Meta-analysis is suitable for quantitative data in data synthesis, (Glasziou, 2001). Conversely, the narrative approach will be more suitable if there is a qualitative outcome.

RESULTS

McNichol and Hamer (2006) have pointed out that successfully managing the best quality care can lead to a reduction in costs. Further, quality healthcare will also result in patients receiving their desired outcomes such as quality care and a good hospital environment. Therefore, offering patients' quality care in nursing is highly important since it determines patients, families, nurses, and the healthcare organisation's satisfaction (Sherman et al., 2008). Measuring the effectiveness of such care can be done via surveys, which focus on patient satisfaction. In addition, Anderson, (2002) asserts that a number of studies have revealed that maintaining standards is highly significant, and can be achieved via defining clear, concise and specific goals and objectives. As a result, nurses at all times must deliver quality care. By doing this, patients' physical and psychological well-being are improved, as well as being discharged from hospital earlier.

Methodological Approaches Adopted in the Studies

In this systematic review, 5 studies pertaining to how nursing leaders can improve quality of care and outcomes were reviewed. All the studies adopted their own distinctive methodological strategies in conducting the studies. The following constitute the methods adopted in each of the

8 studies: **1) Cummings et al. (2008)** Cummings et al. (2008) study, on the other hand, used a prospective research design, which involved the distribution of a self-report questionnaire to gather results, which included demographics data, the work environment and characteristics pertaining to nurses' intent to leave their job role and job satisfaction. Prospective research involves groups of people, namely nurses, which vary depending on particular factors being investigated. This is to determine the way which these factors influence the rate of a particular outcome.

2) Stanley et al. (2008) This study by Stanley et al. (2008) takes on a naturalistic approach. The study delves into the introduction of a new clinical nursing leader role for improving quality and patient safety. In a naturalistic approach, the phenomenon is investigated in great detail and so are the specific groups, namely nursing leaders and patients, associated within its natural setting.

3) Furtado et al. (2011) With regard to Furtado et al. (2011) study, they use a combination of quantitative, descriptive, informational and correlational approaches, to describe nurses' leadership behaviours and staff perceptions, and whether this impacts on job satisfaction among nursing staff. As stated earlier on page 26, these three approaches often involve investigating the relationships between a number of variables, in this case, nurses and job satisfaction. Quantitative studies focus on gathering statistical and numerical data.**4) Haycock-Stuart and Kean (2012)** Haycock-Stuart and Kean (2012) study adopted a qualitative approach, which used interviews and focus groups as its main source of collecting data. The data pertained to perceptions about the ways in which nursing leadership impacts on quality care in communities. A qualitative approach is used to explore the phenomenon in more detail, provides a more in-depth account to research (more descriptive) and is research that does not use numbers or statistics to illustrate the results.

5) Lascbinger (2008) Finally, the study by Lascbinger (2008) was conducted in order to test his nursing work-life model, connecting "structural empowerment to Lake's 5-factor professional practice work environment model and work quality outcomes". Furthermore, the study used a predictive, non-experimental design to measure 234 nurses' perceptions of patient quality care. A predictive, non-experimental study is used when the researcher is unable to change, control or manipulate the subjects, but rather depends on interactions, interpretation or observation in order to come to a conclusion. Therefore, the researcher has to depend on the likes of case studies, surveys or correlations, since he/she is unable to show a true cause-and-effect relationship

Review of the Studies

Cummings et al. (2008) Cummings et al. (2008) study aimed to cultivate a theoretical model for those factors pertaining to the work environment that impact on the level of job satisfaction among oncology nurses. Furthermore, the study pointed that nurses are the most overworked, stressed and ill-stricken workforce, and 8% of nursing staff have failed to show up for work as a result of sickness. The theoretical model was also tested as a structural equation model by means of LISREL 8.54.The results indicated that the final model tailored to the data adequately ($v2 = 58.0$, $df = 44$, $P= 0.08$). Furthermore, the results showed that relational leadership, as well as nurse

relationships having a significant impact on the opportunities for staff development, supporting novel ideas and support for supervisors in managing conflict, nurse autonomy, and participating in making policy decisions, among other important factors. Therefore, such factors led to increased levels of job satisfaction among nurses, thereby leading to higher levels of patient satisfaction.In conclusion, the results revealed that positive relationships and relational leadership among managers, physicians and nurses are crucial towards creating oncology nursing environments that are of high quality and increasing level of job satisfaction in nurses. However, the implications for nursing management reveal that by concentrating on adaptable factors like staff development, staff resources and leadership, which in turn can lead to improved levels of job satisfaction, as well as helping to retain nursing staff, are all ways of improving oncology nursing work environments. **Stanley et al. (2008) :-** Stanley et al. (2008) study explored the American Association of Colleges of Nursing's(AACN) newly introduced role, clinical nurse leaders (CNL) and its potential impacts in practice. The background focused on the major pressures that health care delivery systems have to deal with in order to enhance outcomes relating to patient care and reduce costs insettings where resources are diminishing. A aturalistic approach was used as the study's method, which was used to evaluate the effects of CNL on outcomes pertaining to care.Furthermore, the case studies explained the experiences of implementing CNL at three different practice environments across the same geographical area.The results showed that cost savings, which included enhancements on the core measures ofCentres for Medicare and Medicaid Services (CMS), are swiftly recognised in environments in which the implementation of the CNL role into the model for care delivery has already occurred.The study concluded that since there is an increasing need for cost-effective care and better outcomes, the CNL role therefore gives the opportunity for nursing to lead innovation via maintaining the quality of healthcare as much as possible while minimising costs simultaneously. However, the implications for nursing management revealed that nursing now has an exclusive position to stress the issues that negatively impact on the country's health system. Furthermore, the CNL signifies a rousing and highly auspicious opportunity for nursing to assume a leadership role, pertaining to numerous practice partners, and to employ patient safety and quality improvement initiatives throughout all healthcare environments. **Furtado et al. (2011)**The aim of Furtado et al. (2011) study was to explain and compare the leadership behaviors of nursing managers with staff nurses views based on their leader's style of leadership. Also, the study determined whether leadership components impact on staff nurses' job satisfaction. The research background involved understanding the leadership phenomenon through adopting a comprehensive theoretical framework, like the situational leadership model, which enables the division of leadership into different small parts, which therefore creates a broad, but clear picture of the process of leading people. The methods used in this study were correlation, descriptive, inferential and quantitative studies. Furthermore, a total of 266 nurses, made up of both staff and managers, participated in this study from two public Portuguese Azorean hospitals. Also, in order to assess the nurses' leadership behaviors, the

authors adopted Hersey and Blanchard's Leadership Effectiveness and Adaptability Description questionnaire. In addition, the authors had designed a job satisfaction instrument, which was used to determine the level of satisfaction in staff nurses. The results showed that there were significant differences between nursing staff and nursing managers concerning the views of leadership components. Furthermore, it was revealed that staff nurses' the level of job satisfaction was low. The study also discovered that a few leadership components had a direct association with staff nurses' satisfaction. In conclusion, the study asserted that it is vital for managers to be aware of their own leadership, and to adopt the most suitable style, which in turn helps to develop their nursing staffs' skills, while at the same time, to promote their professional satisfaction. However, the implications for nursing management leadership, revealed that leadership is a difficult concept to understand, which is inseparable from job satisfaction. Moreover, nursing managers' encouraging effective leadership via formal training might result in having an increased number of satisfied nurses in their work, improved nursing care, and robust leadership. **Lascbinger (2008)** The aim of Lascbinger (2008) study was to test the nursing work-life model by Leiter and Laschinger, and connecting structural empowerment to the 5-factor professional practice work environment model and work quality outcomes. The method used in this study was a nonexperimental design in order to test a random sample of nurses. The nature of the study was to reveal a "relationship between structurally empowering work conditions and both job satisfaction and nurse-assessed patient care quality". A total of 234 staff nurses participated in this study, and the investigation showed that professional practice environment characteristics facilitated the relationship between both the quality of nurse-assessed patient care and job satisfaction and structurally empowering work conditions. The study concluded that the efforts to form and sustain healthy and highly satisfying working conditions, which contributes to professional practice in modern nursing working environments is critical to improve nursing outcomes.

Discussion

Improving nursing outcomes and the level of satisfaction in the workplace is vital towards the well-being and safety of patients. Nursing leaders who manage their nursing staff well will not only improve their overall outcomes, performance and satisfaction, but it will also satisfy the patient at the same time, since they will be provided a good level of care. On reflection of the 8 articles, a number of consistencies pertaining to nursing leadership and nursing staff outcomes and performance and patent satisfaction were identified. For example, studies by Abualrub and Alghamdi (2012), Cummings et al. (2008), Furtado et al. (2011) and Lascbinger (2008) had discovered similar relationships between to nursing leadership and nursing staff outcomes and performance and patent satisfaction. They all similarly concluded that effective nursing leadership plays a vital role in improving nursing staffs' outcomes, performance and satisfaction, which in turn leads to patient satisfaction and better quality care. In addition, a number of studies in the literature review confirm this idea (Johansson et al., 2002; Kroposki and Alexander, 2006; ElDahshan and Keshk, 2014; LoBiondo-Wood andHaber,

2014), and the majority conclude that if nursing leaders adopt the correct leadership style, they are more likely to satisfy their patients. Therefore, it seems that effective leadership is the main catalyst to improving nursing staffs' and outcomes, performance and satisfaction, which as a result supports patient care and satisfaction as well. In addition, this key finding is consistent with Sherman et al. (2008) study, since they also explain about how offering patients' quality care in nursing determines patients, families, nurses and the healthcare organisation's satisfaction because of effective nursing leaders.

It was also discovered from both the systematic review and the literature review that those nurses who adopt a relational leadership style, which involves people working together to make a difference to benefit the common good, had a strong connection with patient satisfaction. Both Kroposki and Alexander (2006) and Cummings et al. (2008) pointed out that a relational leadership style showed a significant impact on the opportunities for staff development, supporting ideas and support for supervisors in managing conflict, nurse autonomy, and participating in making policy decisions, thereby leading to better nursing outcomes, which then led to higher levels of patient satisfaction. Therefore, this further ustifies that having an effective leadership style is the catalyst to increased levels of patient satisfaction. On the other hand, Honkavuo and Lindstrom (2014), Stanley et al. (2008) and Haycock-Stuart and Kean (2012) studies had uncovered a number of key findings pertaining to nursing leadership and patient outcomes regarding safety and their hospital experiences, as well as meeting nursing goals. It was discovered that the key goal to nursing was to provide the best quality service to their patients, while easing their suffering as much as possible. Furthermore, Honkavuo and Lindstrom (2014) stressed the importance of nurses' awareness and their responsibility to professionally care for their patients among other factors being the main contributor towards easing the suffering of patients. However, it was further concluded that effective nursing care can only be achieved if nursing leaders supports their staffs' professional development to provide quality care for their patients, leading to their satisfaction.

This is also consistent with Stanley et al. (2008) and Haycock-Stuart and Kean (2012) studies, as well as the literature studies (ElDahshan and Keshk, 2014), since they both similarly concluded that effective nursing leadership can help to maintain the quality of healthcare with staff nurses provide, which in turn helps to boost not only nurses' satisfaction, but their patients' satisfaction also. In particular, Haycock-Stuart and Kean (2012) pointed out that it is important for both nursing leaders and their nursing staff to be clear about the ways in which they intend nursing quality to be valued and to demonstrate the means of showing this in order to satisfy their patients. Therefore, it again comes down to effective leadership playing a vital role in improving nursing outcomes, performance and satisfaction, since it is nursing leader's responsibility to support their nursing staff into becoming effective carers, which impacts on the level of quality care patients receive. An interesting thing to note is that Tørstad

and Bjørk (2007) was the only study which pointed out the relationship between nursing outcomes, performance and satisfaction and staff competences, as well as implementing an effective strategy for quality care. The study concluded that it was vital for nursing managers to recognise the connection between individuals' professional development and the development of quality, and the wards' high standards. Therefore, strategic planning of nurses' capabilities at all levels of decision making within the organisation are required. Moreover, Tørstad and Bjørk (2007) findings sum up the previous points made in this discussion since nursing managers need to be aware of this link between their nursing staffs' professional development and the development of quality, and the wards' high standards for patients in order to provide the most effective care for their patients, and to improve nurses' outcomes, performance and overall satisfaction.

However, it seems that quality outcomes, performance and satisfaction for nurses can only be made possible if there is a clear strategy in place in order to improve this, since Tørstad and Bjørk (2007) pointed out that nursing leaders need to be aware of the connection between professional development and quality care in order to implement an effective system of care in hospitals. In addition, failing to implement such strategies can lead to what Honkavuo and Lindstrom (2014) pointed out about how nursing leaders' not being aware of the difficult situations associated with clinical nursing, leading to suffering of nurses. Thus, only effective nursing leadership strategies can help to reduce this level of suffering and to improve their overall satisfaction. In spite of there being ample research pertaining to how nursing leaders can improve staff nurses' performance and outcomes, as well as their levels of job satisfaction, there are however few studies that relate to these issues in the Saudi context, which therefore calls for future research to be carried out on the topic.

Limitation of the Study Despite the limitations in this review, there were however, a number of consistencies based on the methodological design of these studies. Given the ample research which was discovered about the topic, nearly all the studies had revealed similar findings and nothing new about topic was discovered. Another issue was the lack of research pertaining to the topic in line with the Saudi context, and only one study by Abualrub and Alghamdi (2012) discussed the topic in this context. Therefore, there seems to be very limited research about the topic in the Saudi region. In addition, some of the selected articles may have not been peer reviewed, and thus there might be an element of personal bias in those studies.
Implications for Practice By doing this systematic review, which has synthesized 8 studies, nursing leaders can use this as a roadmap for improving their nursing staffs' outcomes, performance and satisfaction in order to provide their patients with the best quality care possible. Furthermore, it is vital for change in practice to be applied in Saudi Arabia, since it seems that nursing leadership and improving nursing staffs' outcomes, performance and satisfaction is based on both party's perspectives. The systematic review has also provided evidence, which has

revealed some highly interesting initiatives associated with nursing leadership and patient care. Moreover, this systematic review concludes that nursing leaders need to be aware of the close link between professional development of their nursing staff and quality care for patients in order to improve their overall outcomes, performance and satisfaction. Hence, a theoretical framework is required in order help understand the role of nursing management, and how they can lead their nursing staff in becoming effective careers for their patients through improving their overall outcomes, performance and satisfaction.

Implications for Future Research in Saudi Arabia

This systematic review will help to shed some light for future studies on how nursing leaders can improve nurses' quality outcomes, leading to better patient care, since there are limited studies about the topic in the Saudi context. Furthermore, both local and national research must be carried out in Saudi Arabia in order to investigate the true nature of nursing leadership and its impact on quality and patient outcomes. In conclusion, additional studies are required to explore the different leadership styles adopted by nursing managers in order to improve patient outcomes and nursing staffs' outcomes. Lastly, the relationship between quality care and nursing leadership should also be further investigated in order to reveal different nursing leadership trends.

Recommendations

The research findings found in the systematic review provided ample evidence based on how nursing leaders can improve nurses' performance and outcomes, as well as job satisfaction, leading to better patient care. Therefore, the author hopes that this systematic review has provided a better understanding and awareness of the relationship between nursing leadership and improving nursing staffs' outcomes, performance and satisfaction, leading to better quality care for patients. Furthermore, to apply this to the Saudi context, a series of recommendations are provided for consideration. . Further investigate the role of nursing managers in achieving quality care for patients' to further understand the theoretical framework and philosophy of nursing managers' leadership styles used to achieve quality care for patients;. Ensure a suitable environment for nursing leaders to manage their staff. Provide the best quality care for their patients These recommendations can be achieved by specifically looking at and revaluating the different leadership strategies used by nursing managers, since the studies in the systematic review barely touched upon this issue.

Conclusion

It has been realized that nursing leaders find it challenging to manage their staff, while helping to provide the best quality care. patient outcomes, quality can only be improved if nursing leaders employ effective means of leadership since the actions of the leader will have a direct impact on their staff. So, better leadership means better outcomes, The systematic review revealed that nursing leaders need to be aware of the close link between

professional development of their nursing staff and quality care for patients in order to improve their overall outcomes, performance and satisfaction.

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