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Challenges in the Delivery of Nursing Practice within the Context of Ongoing Healthcare Reforms and System Transitions

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Abstract: Due to the ongoing changes and reforms in the field, nursing practice remains a pillar in the advancement of healthcare systems. While time and resources are ineffective, nursing practice continues to emerge as a global concern; there lies a rest in the positive changes taking place within the global healthcare systems. The emergence of digitally enhanced patient systems, advanced frameworks for interprofessional collaboration, and patient-focused care systems exemplifies advancements in the scope and quality of care. Not to be dismissed is the fact that the nursing personnel have been pushed into severe stress due to the enhanced nursing shortages, increased workloads, and the fast-paced skill acquisition meetings. With the increasing administrative burden that global health systems and reforms impose, nurses are increasingly spending less time attending to direct patient care; a situation worsened by the value-based care approach, which shifts the focus to revenues and cost control. The structural policies highly neglect the ethical quandaries in nursing delivery practice. This paper concentrates on concepts of nursing practices, practical results of burnout, and leadership.

Keywords: Healthcare Reforms, Professional Boundaries, Workload Issues, System Transitions.

1. Introduction

Healthcare systems have highly advanced technologies and are undergoing significant transitions nowadays. These changes enhance their competence and fairness, and enable them to adapt to the medical environment. Nurses are consistent in adopting digital technologies for delivery representations. They are facing trouble due to a lack of staff, an increase in responsibilities, and high professional standards.

Considering the challenges at hand, it is essential to examine the impact of ongoing reforms and system transformations on nursing practice. This understanding highlights the challenges faced by the nursing workforce and underscores the need for supportive regulations, appropriate training, and robust organizational structures (Best et al., 2012). This study focuses on understanding the concerns that strengthen nursing practice in the context of transformations in the healthcare system and with the intent of identifying barriers and examining their importance, as well as strategies to address them (Mhsnhasan et al., 2025).

Figure 1 illustrates the key nursing practice elements in the context of system changes and healthcare reforms. Nursing practice will always be at the center when there is an external shortage of workforce, changes to the health policy, implementation of digital health tools, and transformation to value-based care.

Increased complexity of ethical issues will add to the burden (Byers, 2017; Salmond & Echevarria, 2017). Converging arrows symbolize these factors, illustrating how organizational and structural changes put pressure on nurses' professional and daily responsibilities. The graphic highlights the intricacy of the reform-driven setting, where nurses must uphold their dedication to patient-centered care while concurrently adjusting to structural, technological, and ethical demands (Vassilakopoulou & Marmaras, 2015).

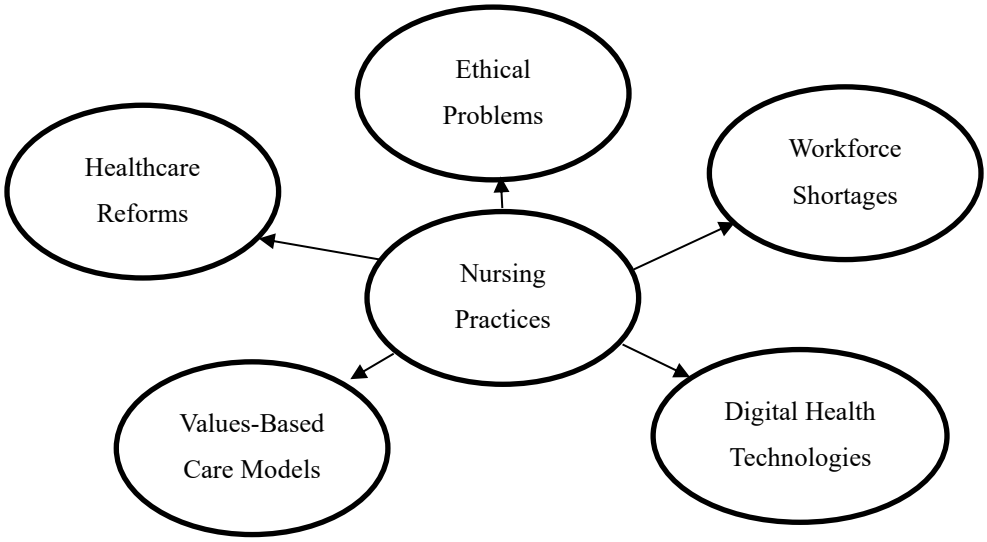

Figure 1: Features Influencing Nursing Practice in Healthcare Reforms

2. Literature Review

One strategy for enhancing Iran's healthcare system is the implementation of the Healthcare Reform Plan. There are unquestionably advantages and disadvantages to both the plan and the execution (Rao & Saxena, 2025). The purpose of this study (Salarvand et al., 2017) was to outline the difficulties faced by nurses in enacting healthcare reform in Iran. The study used a qualitative approach based on traditional content analysis. Purposive sampling was employed, and data saturation was achieved with 30 participants. MAXQDA software was used to evaluate the data (Adeshina et al., 2024; Marchildon et al., 2021).

The implementation of this reform presents several challenges for nurses, including inadequate infrastructure, a negative perception, a complex problem, the need for a monitoring and control plan, the impact on nurses, and the assumptions and proposed solutions of the general public (Docteur & Oxley, 2003; Castillo & Al-Mansouri, 2025). This study was approved by the University ethics committee (LUMS.REC.1395.152). Participants' informed consent was also obtained, and they were fully informed about the study's objectives and methodology, including the need to record the interview and their personal rights, such as the right to confidentiality, anonymity, and the ability to withdraw from participation. At the same time, data was gathered and examined (Naylor et al., 2011). As a result, following each interview, the statements made by the participants on tape were carefully transcribed verbatim and listened to. To gain a deeper comprehension of the emotions and experiences of participants, transcripts were examined multiple

times (Menaka et al., 2022). Meaningful sentences were then highlighted, and significant information was underlined. Subsequently, an attempt was made to extract a notion that indicated the key component of the person's thinking (Hedqvist et al., 2025).

As outlined in the Institute of Medicine's "Future of Nursing" study, nursing education programs may face significant challenges in producing sufficient numbers of advanced practice registered nurses to achieve the goal of contributing to the development of a better US healthcare system (Fitzgerald et al., 2012). To ensure that there are sufficient advanced practice registered nurses (APRNs) to work in practice, research, and educational settings, this paper identifies specific challenges that need to be addressed (Manderson et al., 2012). It proposes solutions to enhance APRN clinical education.

A review of both contemporary and classic nursing literature is used to determine best practices. Intensive interprofessional partnerships and drastic curriculum changes, such as a greater emphasis on simulation and service work both domestically and abroad, are among the strategies. To bring about significant and long-lasting change, nurse educators must collaborate with all parties involved (Maier & Aiken, 2016). A diverse and cooperative workforce of professionals united in a vision to maximize the practice potential of all practitioners can meet the healthcare needs of US citizens, thanks to these approaches to APRN clinical education, which have the potential to alter APRN preparation significantly.

To improve APRN education, nurse educators must collaborate with all relevant parties to identify and utilize best practice clinical education strategies that address existing obstacles to providing high-quality clinical experiences.

Nurses are required to serve the interests of patients as well as the organizational efficiency drives during these challenging times in the public sector (Rapley & Davidson, 2010; Martin et al., 2012). This study examines the changing role of frontline nurses as leaders and change agents in the context of implementing person-centered health policy. When it comes to providing healthcare, nurses are often perceived as having a high level of autonomy.

Nonetheless, social control mechanisms apply to them. Nurses may be doing their best work in a limited setting when they apply person-centered care policies. A review of nursing practice in implementing person-centered health policies is provided (Jane Osareme et al., 2024). Findings: A disconnect exists between the resources provided to nurses and the demands placed upon them, despite extensive literature on addressing health professionals' opposition to policy implementation.

In this environment, nurses are advocating for change by using their discretion and leading from the front. Encouraging nurses who want to take the lead in patient involvement may hold the secret to improving healthcare. The potential of front-line nurses must be fully realized by supporting their leadership development with the proper organizational support, as health services are frequently overmanaged and underlead (Mayra et al., 2021).

3. Proposed Methodology

A mixed-methods research methodology is employed in this study to investigate the challenges nurses face when providing care during ongoing systemic changes and healthcare reforms. The reason behind employing a mixed-methods approach will be to complement the "nurse's' theories, perceptions, and mechanisms concerning instituted change" with the already quantified aspects of nursing practice like the nursing workload, role modifications, and patient outcomes. Out of the total population of registered nurses employed in primary care clinics, community health centers, and tertiary hospitals, quantitative data will be obtained from 300 nurses through a cross-sectional survey. These participants will be selected through purposive sampling to guarantee inclusion of specialists from varying levels of the health system, from downtown metropolitan areas with advanced facilities to the countryside where social change processes pose especially frequent and troublesome practical problems.

Aside from the survey, 20 to 25 nurses specially selected for the purpose of providing detailed commentary on how systemic alterations have impacted their professional practice will participate in semi-structured interviews to obtain qualitative data. Collaboration between different specialists, ethical issues, the burden of change policies, and the agility needed to incorporate digital devices into everyday caregiving will all form part of the interviews. The survey and interview data will provide the means to understand the complexities of nursing practice in situations driven by reform.

The completed analysis will consist of two parts. Quantitative survey answers will be analyzed to identify patterns through descriptive statistics, and then other methods of analysis will examine the patterns in reforms, workloads, expanded roles, and satisfaction, utilizing techniques such as regression analysis and chi-square testing. The underlying narratives of nursing adaptation throughout healthcare reforms will be revealed by thematically analyzing qualitative interview transcripts, identifying and coding recurrent themes such as institutional limits, organizational pressures, and boundary negotiations.

The entire study procedure will be conducted with strict adherence to the principles of ethics. All participants will be asked for their informed consent before participating, and confidentiality and anonymity will be ensured to safeguard both personal and professional identities. The relevant institutional review board will be consulted to obtain ethical approval, ensuring adherence to research ethics regulations and professional standards.

In the center of the framework, the relationship with the patient and the area of nursing practice, comprised of direct patient care, care coordination, and collaborative practice, are most pivotal to nursing and nursing practice, explaining in part the methodology (Abou Malham et al., 2020) described in the pivotal methodology. The convergence of nursing knowledge and skills, professional boundaries, organizational context, and the wider institutional context encase the core of the framework.

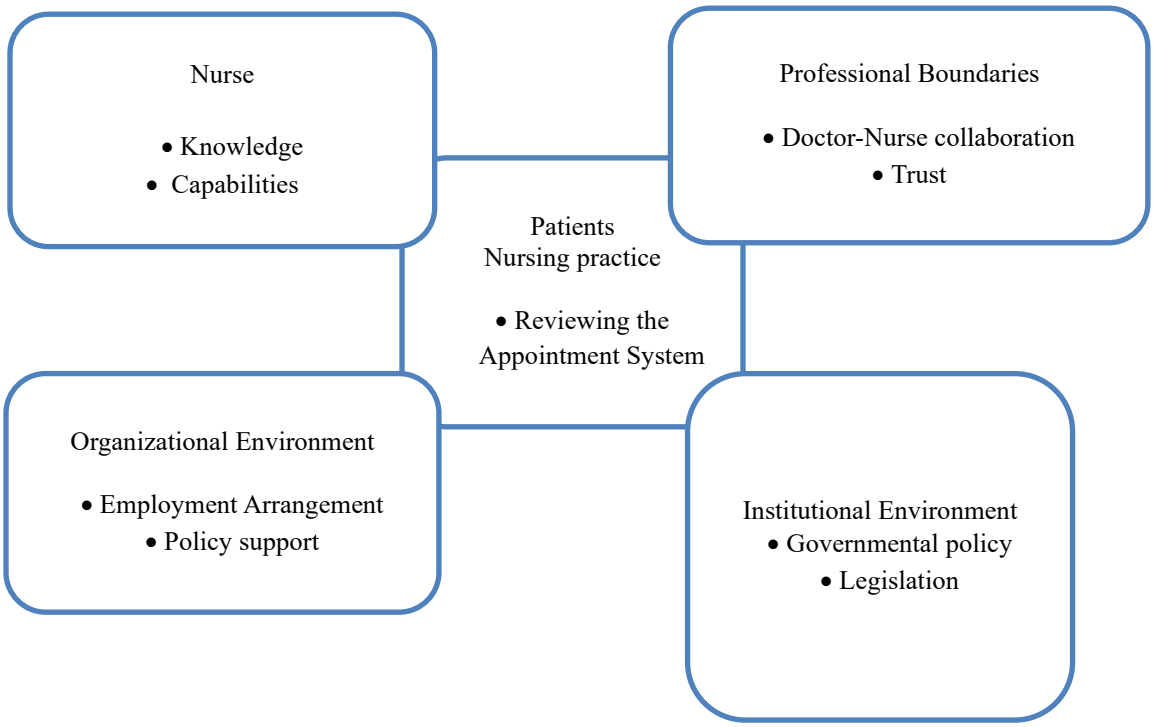

Figure 2: Conceptual Framework of Analyzing Factors Influencing Changes in Nursing Practice

4. Results and Discussion

The result presents numerous interconnected challenges that nurses frequently encounter in patient care and healthcare improvement efforts. One survey has 300 registered nurses and they conducted an interview with 25 members of their hospital. They find the outcomes are tough and persistent conditions connected to professional boundaries and organizational structure.

Qualitative interviews also confirmed that the nurses often reported "being stretched too thin" as well as "struggling to meet the needs of patients with the resources available." The nurses claimed that these findings support previous studies that highlight changes in an established system, which involve stress to the workforce, as a major roadblock to successful system changes.

Adoption of digital health technologies in practice by nurses as part of their routine is also a critical outcome. Around 75% of people expressed that they highly used digital technologies for electronic health records in surveys. Although numerous nurses recognize the technological value in healthcare, particularly in terms of improved patient access and care, many admit that they lack the necessary skills to effectively utilize technological tools. Moreover, much evidence suggests that alteration can cause new duties and responsibilities. It also led to an understanding of technological improvements without interprofessional teamwork and organizational assistance.

The paper acknowledged that nurses face significant challenges due to their professional boundaries. They need to take care of patients while also adhering to the limitations of the organizational structure. Nowadays, digital technologies are widely used in healthcare organizations, but nurses often lack an understanding of the concepts behind these technologies. Organizations should provide nurses with training

on advancements in digital technologies and how to care for patients using these technologies effectively. Many surveys reported that ethical considerations are high in the nursing field, and they have experienced much moral distress and career dissatisfaction.

Figure 2 presents multiple layers of framework connected to the practice of nursing. Third, the organizational culture of the workplace should be transformed to support the development of empowering environments that enhance effectiveness, productivity, and professional satisfaction. Finally, policy should be proactive in identifying ethical dilemmas nurses may be faced with and provide them with frameworks to assist them in decision-making that protects their professional principles.

In summary, this study's findings show that nursing practice faces systemic, multifaceted, and intricately interconnected problems throughout healthcare reforms. Although reforms present chances for creativity and patient-centered care, they also run the risk of overtaxing nurses if proper support systems are not in place. To ensure that reforms achieve their intended objectives without compromising the quality, equity, or humanity of patient care, it will be crucial to strengthen nurse education, promote adaptable leadership, and establish environments that value collaboration and resilience.

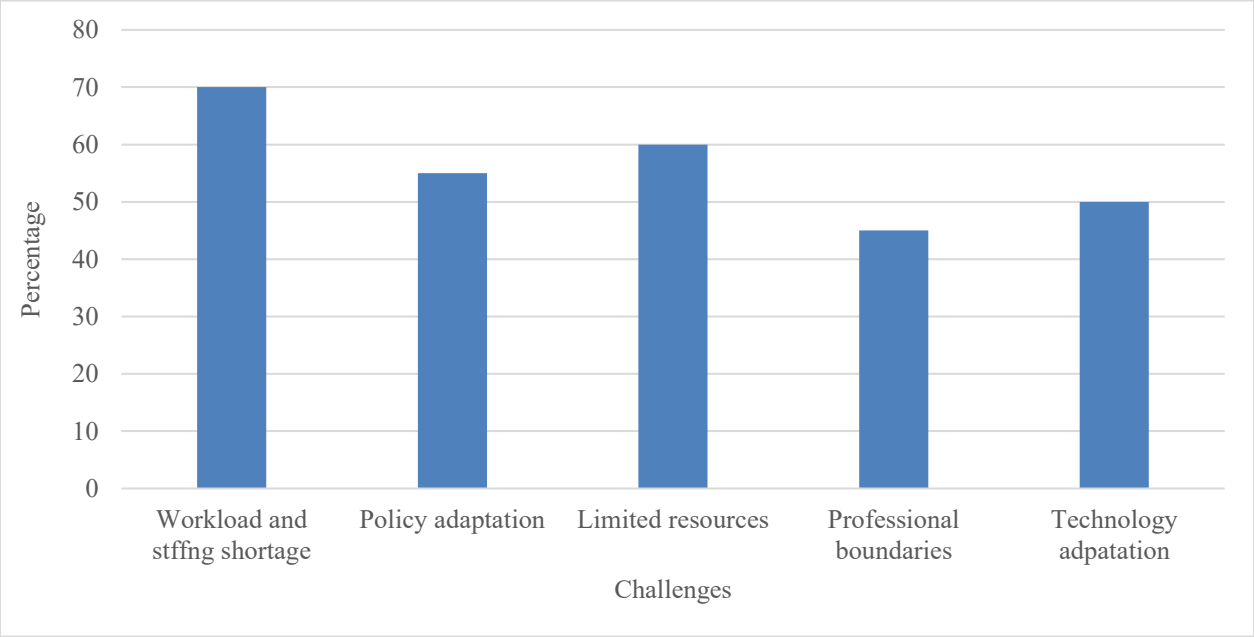

Figure 3: Key Challenges Faced by Nurses During Healthcare Reforms

The primary difficulties that nurses in this study reported are depicted in figure 3. The most significant problems identified were a lack of manpower and excessive workload (70%), followed by a shortage of infrastructure and resources (60%). Adapting policies and regulations (55%) and technology, including telemedicine and digital health technologies (50%), were also significant issues. Although they were less commonly mentioned, role ambiguity and blurred professional boundaries (45%) nevertheless constituted a substantial obstacle to effective practice. While structural reforms are intended to increase efficiency, this distribution emphasizes that these changes will only be successful if staffing shortages are addressed,

sufficient resources are made available, and nurses are equipped with the knowledge and skills necessary to adapt to changing healthcare contexts.

5. Conclusion

This research explores the complex challenges faced by nurses in delivering quality care amid system changes and modifications to the healthcare system. While the purpose of the reforms is to improve accessibility and efficiency and to enhance the outcome of care provided to patients, these reforms seem to pose a greater challenge to the nursing profession. The influence of a lack of staff is the bigger workload, unclear boundaries of professional roles in teamwork care models, and the repeated moral conflicts in rationing resources. These difficulties show the amount to which system variations can risk the very drive of improvements, should an passable framework.

Healthcare organizations have many nursing experts to assist the patients and doctor's but nurses have high job dissatisfaction and stress because of professional boundaries and lack of digital technology knowledge.

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