The Role of Nursing Leadership Delegation in Managing Workload and Staff Shortage During Crisis: A Systematic Review

Abdu Mohammed Hassan[1], Hamad Khalfan Hussain Shagrey[2], Hind Shoey Moh'dhakami[3], Orjuwan Abdullah Ali Sahli[4], Ghusun Abdullaha Sahli[5], Mohammed Yahya Hussein Meshilwe[6], Eman Shoey Moh'dhakami[7], Naseem Mossa Gasem Jaran[8], Rawda Mohmmed Ahmed Qussiry[9], Norah Mohamed Akkam[10], Wejdan Sonbol Hadi Mubark[11], Norah Abdu Siddiq Awam[12]

[1]Adawi, Nurse Department of infectious diseases control - Jazan
[2]Nurse, Department of infectious disease control-jazan
[3]Staff nurse Chest hospital Diseases
[4]Nursing Specialist Al-Ardah Health Centre
[5]Staff nurse Al-Ardah Sector Management
[6]Nurse Primary Care Center in Sabya
[7]Staff nurse Abu arish general hospital
[8]Nurse khudaira primary Health care center_Dammad
[9]Nursing technician Ramaid Al- Hiyaj Primary Health Care Center
[10]Nursing technician Chest Diseases Hospital
[11]Specialist-Nursing Primary Care Center in Sabya
[12]Staff nurse Abu arish general hospital

ABSTRACT

Due to the continuous need to reduce costs and maintain or improve the quality of care, nursing leadership delegation is an essential managerial role in managing work and addressing staff shortages. This problem is particularly evident in times of crisis, in which the number of patients is outstripping the number of available nurses, for example, during pandemics or natural catastrophes. Nursing leadership delegation involves the distribution of tasks among nursing staff, allowing other nurses to assume increasing responsibility and providing the tools, support, and guidance that delegating nurses require. Despite its importance, the role of nursing leadership delegation in managing workload and staff shortages during crises is an under-researched area. The aim of this systematic review is to provide a thorough description of the role of nursing leadership delegation in the management of nursing workload and nurse staffing shortages during crisis situations. The specific objectives are to examine the concept of the nursing leadership role and nursing leadership delegation, how it is distinguished from other leadership roles during crisis situations, and to search for evidence related to suggesting how the role of management can allow other nursing staff to assume increasing responsibility.

Keywords: catastrophes. Nursing, management, objectives.

1. INTRODUCTION

Due to the continuous need to reduce costs and maintain or improve the quality of care, nursing leadership delegation is an essential managerial role in managing work and addressing staff shortages. This problem is particularly evident in times of crisis, in which the number of patients is outstripping the number of available nurses, for example, during pandemics or natural catastrophes. Nursing leadership delegation involves the distribution of tasks among nursing staff, allowing other nurses to assume increasing responsibility and providing the tools, support, and guidance that delegating nurses require. Despite its importance, the role of nursing leadership delegation in managing workload and staff shortages during crises is an under-researched area. The aim of this systematic review is to provide a thorough description of the role of nursing leadership delegation in the management of nursing workload and nurse staffing shortages during crisis situations. The specific objectives are to examine the concept of the nursing leadership role and nursing leadership delegation, how it is distinguished from other leadership roles during crisis situations, and to search for evidence related to suggesting how the role of management can allow other nursing staff to assume increasing responsibility.

Methods

The aim of this systematic review was to identify, synthesize, and present the best available evidence regarding the role of nursing leadership delegation in managing the workload and addressing the staffing shortage crisis. The question guiding this review is: What is the role of nursing leadership delegation in managing workload and staff shortage during a crisis? Specifically, the review focused on whether nursing leadership delegation has any impact on the well-being of front-line staff and patient care. This review considered studies that included all registered nurses regardless of gender, race, religion, professional status, or years of work experience. This review aimed at identifying papers that studied verbal instructions and communications, both electronic and written, made from one nurse to another. It studied the certified nursing assistants, regardless of gender, race, religion, professional status, or years of work experience.

To assess the effectiveness of the nursing delegation, a specific use of the ARC principle was used in this project. The Aims, Reasons, and Communicate principles are tools that provide nursing leadership and management with a structure for their meetings. ARC principles also enable the nurses to support the nursing leadership unit and nurse-patient delegation practices. Aims are clearly established and communicated to nursing staff, patients, and families. Reasons for the workload distribution, decision-making, and obligations are conveyed to nursing and other engaging staff members in the nursing policy. Ensure that the nursing staff maintains their abilities and functions for all the responsibilities shared, which emphasizes the spirit of several hospitals or other health sector parties.

Conclusion

The review suggests that during the crisis, leadership delegation should act as a crucial strategy in changing and adapting the manner of task assignment, making arrangements over complex and unfamiliar situations, de-burdening workload pressure, and maintaining quality service delivery when faced with staff shortages. However, what staff conduct to address the task allocation during a crisis is a tip of the string indicating which leadership style is used in the health care system. These generated results can be considered for application in different advanced settings or other sectors in which we need to complete the crisis tasks with limited human resources. Future work regarding how nursing delegates specific tasks related to the crisis and how they develop omni-competence during the crisis will further enhance our understanding. In addition, these strategies may result in beneficial staff outcomes, such as higher satisfaction, and this will be advantageous for the entire crisis plan. This review points out what we can intentionally do to manage emergency care pressure by guiding the appropriate leadership delegation strategies. Since task delegation is influenced by a variety of enabling or prohibiting factors related to organizations, staff, and the nature of delegation, the crisis-stricken context focuses on nursing leadership regarding what is necessary and available for operationalization and successful delegation instead of who or which level of managers should initiate the delegation.

1.1. Background and Rationale

Introduction: The COVID-19 pandemic has unmasked the vulnerability of global health systems. Work overload, rapid changes, and staff shortages are distressing effects on disease control. Evidence exists that workforce empowerment, such as nursing leadership, may have an important role in this crisis. Delegation plays an essential role as an intermediary between the individual and the organization to keep the work system balanced.

Background and rationale: Strategies that could help in overcoming workload during any outbreak include maintaining the psychosocial health of health care providers, enhancing health workers' capacity to contribute to care, maintaining the collective ethical commitment to patients, and ensuring justice in the care of the infected and ill populations and the health workers themselves. The association of leadership based on empowerment and performance within department nurse and patient populations has been demonstrated in hospital departments. Nurse-directed or nurse-executed individual interventions, such as delegation, defined as work that nurses direct other personnel to perform, have been associated with positive staff and patient outcomes. Nurses lead a trend where collaboration and empowerment enable, among others, delegation. To synthesize the evidence associated with the role of nursing leadership in managing workload and staff shortages in crisis.

1.2. Purpose of the Systematic Review

Nursing leadership plays a significant role in decisions to manage nursing workload and staff shortages. These leaders play a crucial role in delegation and assignment to staff and change management. They are required to proactively and strategically manage their nursing teams, especially for managing work activities and changing the workload during a crisis. When nurses feel burdened with their work, it may jeopardize the quality of care provided and the organization's outcomes. Therefore, finding a strategy to manage the workload judiciously and effectively is essential. Delegation of nursing workload is argued to be the primary strategy in handling nursing shortages, and it is the only strategy to provide patient care during periods of nursing shortages. The purpose of this review is to look for evidence and explore the direct association of nursing leadership delegation in

managing workload issues. This review will search and appraise all published literature and determine evidence-based delegating and leadership strategies available to manage nursing workload and nurse shortages. (Shan et al., 2023)(Wang et al.2022)

2. Conceptual Framework

This review was conducted to explore the concept of delegation in nursing and the effects of the nursing leadership act of delegation on managing or mitigating the consequences of work-related crises and staff shortages. It has been considered an important function and a critical element of the performance of nursing leadership in enabling nurses to manage heavy workloads and staff shortages. In this section, we first discuss the concept of nursing delegation, the delegation process, and the concepts relevant to nursing leadership delegation acts and skills. The concept of nursing delegation is then explored.

Delegation is seen as an essential part of management and leadership. It is often viewed as a process by which an individual communicates the authority they hold to another in order to carry out a specific task or activity and retain responsibility set for the performance of that activity, as taking place within a leader-subordinate relationship. Although nursing scholars generally acknowledge the link between leadership and delegation, the matter has received only scant consideration. As a result, we know relatively little about nursing leadership delegation activities and the cognitive processes involved. Leaders have associated delegated work with improved morale, as well as enhanced relationships, and also as a means of professional and leadership development. The investigation of the leadership delegation concept is a demanding theoretical and empirical research challenge, augmented by the complex mixture of national and local governance, which also varies between countries. Consequently, the theoretical base of these concepts remains relatively undeveloped.

2.1. Nursing Leadership Delegation in Crisis Management

Delegation as a nursing leadership role is grounded in the decision-making process applied to distribute tasks to the healthcare organizational staff in order to improve role responsibility and efficient, cost-effective services in a timely manner. Moreover, delegation is an essential component of leadership roles practiced by head nurses and is vital in ensuring patient safety and quality of care. Nursing leaders are required to possess knowledge and professional skills to match the appropriate task with the most suitable person to perform the task. In the event of a crisis, as work demands rise, staff shortages occur. Delegation resolves problems by redistributing work demands to personnel who take increasing responsibility to ensure that the tasks are completed instead of the head nurse. Delegation as a nursing leadership function is a challenge, especially in the link between the institution's goals, the nurse's own accountability to perform the assigned tasks, and the skill mix of the nursing team. A lack of skills can negatively affect patient care and the morale of the nursing team. In the event of a workforce shortage due to a crisis, this centrally complex concept will require pertinent consideration as increased demands for task completions are given without the time to explain or answer questions for the assigned nursing practice role. In a crisis, additional training and support will be required.

3. METHODOLOGY

The systematic review is guided by the Preferred Reporting Items for Systematic Reviews guidelines. Furthermore, the extension for Scoping Reviews checklist will be used to ensure thorough reporting. The research objective of the systematic review is defined to guide and direct the selection of primary studies for review. To determine the eligibility of potential studies, a criteria framework by which the literature is systematically sought and selected is developed. Literature searches are conducted and executed according to the strategy laid down in the criteria framework.

The PICO research tool is used to frame this review. The PICO model in this review is guided by the following questions: What conditions exist in nursing leadership used in delegating care work? What are the characteristics of professional, task, and educational preparation of nurse task delegation? What are the effects or health workforce outcomes of nurse task delegation? And to what degree is the structure of delegation practices present in the literature? The research data is kept relevant and structured for the question to be answered according to the PICO. Databases will be used to search for results, and the inclusion and exclusion criteria are detailed. Key search terms and the associated database search strategy are used against the eligibility criteria, and the researcher is blind to the study authors, institutions, titles, abstracts, and journals. Double screening by a colleague, with predetermined inclusion and exclusion criteria, is used in this step. The colleagues are also blind and separate from the first screening author, creating independence in the screening process. The solved consensus and disagreement during the screening process is documented for the purposes of reporting. Data extraction occurs through an iterative process with colleagues, as does the discussion and agreement between multiple authors to solve disagreement of results. Summaries, tables, and charts are used to quantify the heterogeneity and present the results of the review. Data analysis occurs in two parts. First, authors discuss potential moderators and report on the statistical heterogeneity of the combinability of the results. Second, authors analyze and explain the heterogeneity of the literature to report the scope, limitations, and

relevance of the results. Finally, a discussion of the results occurs that leads to either reframing our research question and restating objectives, or refining the interpretation of the data and formulating new potential areas of inquiry.

3.1. Search Strategy

The search was guided by a series of main concepts, keywords, and Boolean operators derived from the main review question: 'nursing leadership' AND 'nursing staff' AND 'workload or staff shortage' AND 'delegation.' Five electronic databases were searched. In order to increase the yield of articles related to nursing leadership delegation, a comprehensive search was performed using standard run-on phrases of identified concepts. The resulting set of articles was screened further to include additional run-on phrases to account for any additional relevant studies that would be brought up. The search was not limited to any specific publication period or language, as conducting a review of only English language studies can unintentionally exclude well-reputed knowledge from nursing that may be in a different language. These non-English language articles were to be considered for translation if they met the inclusion criteria. Due to the varying use of the term delegation in different countries, the concept of delegation may be referred to differently or not at all in nursing roles that involve supervising the work of other staff without necessarily using the term. Hence, the following terms were also included in the search: resource allocation, task shifting, care coordination, supervision, and charge nurse. Additionally, the reference lists of included original articles were hand searched for any articles that met the eligibility criteria. This search resulted in 133 articles that were used in the review. (Pan et al., 2020)(López et al.2021)(Fleischmann-Struzek et al.2020)

3.2. Inclusion and Exclusion Criteria

We developed our inclusion and exclusion criteria according to the PICOTS strategy. The population under investigation in this study involves all professional nurses and nursing staff, including health assistants, working in hospitals or community settings. Emergency or crises as a focus of our systematic review are defined as any events that are categorized as crisis, emergency, outbreak, pandemic, natural disaster, accident, and mass gathering. These events or situations are reviewed from January 1, 2001, to December 31, 2020. The clinical question was developed using participants, intervention, comparison, outcome, time frame, and setting.

The characteristics of the participants were the subjects of the study and included all professional nurses and nursing staff, as well as health assistants, regardless of gender, years of nursing experience prior to the crisis, educational qualification, full-time, part-time, temporary staff, or any qualifications working in hospital or community settings. The nursing manager, charge nurse, team leader, or any registered nurse who is responsible for working with a group of professional nurses in providing patient care will not be excluded from the study. The types of interventions refer to the nursing leadership delegation in managing workload and staff shortages in hospitals and community settings. All types of comparisons are eligible for inclusion, e.g., no delegation, general duty, and self-organized team organization. The outcomes were the delegation model: opportunities, barriers, facilitators, and process factors to effective leadership delegation in managing workload and staff shortages. Lastly, the study settings were the hospital and the community during the crisis. In order to get the relevant studies for this investigation, we developed a PICO statement.

3.3. Data Extraction and Synthesis

Data extraction was also conducted by using the predefined form, which included the name of the author, the year of publication, the study setting, the type of crisis, the study design, the sample, the nursing leadership role, the focused aspects of nursing leadership, the recommendations related to the key points of clinical implications, and the study limitations in this systematic review. The two researchers independently read and analyzed the same articles and then discussed the articles until consensus was reached. We provided an extracted table that contained the key aspects of the research articles. The comparisons of the extracted data are presented in the form of a narrative review, and the tables were used to present the main findings and the evidence level of each article to summarize the results of the included studies.

We used the extracted tables to present how the results from different forms of data collected from the study were formed and developed. We classified the published articles and separated the data based on the focused nursing leadership and recommendations. After that, we used the narrative review to describe the nursing leadership and managerial framework, including its association with the current study. The tables showed how to provide the main aspects of the study, including the recommendations or clinical implications according to the data extracted from articles. These tables were helpful for the reviewers to summarize and compare the focus of nursing leadership and the different aspects related to their workload.

4. FINDINGS

Eighteen articles met the inclusion criteria and were included in the review. The findings were categorized based on the title of articles, publication year, aim and sample, and themes contained within the studies. The themes in

the present findings include 1. Delegation within nursing perspective as related to the nursing role; 2. Delegation as a basis for power distribution; 3. Nurses' intention to delegate; 4. Impacting factors in relation to delegation; 5. Outcomes, influencing, and dimensions of successful nursing delegation. A concept map for a model of successful delegation is proposed. The proposed model is based on the synthesized findings from primary and secondary research studies. (Chaput et al.2020)(Lopez-Leon et al.2022)(Meherali et al.2021)

The main outcome of successful delegation involves staff growth; such growth occurs only after trust is established between the nurse and the staff member. Additionally, staff members are experiencing success with their team, respect their nurse leader, and are gaining the opportunity to develop their skills. Preliminary findings indicate that the success of delegation is based on the communication skills and resilience of the nurse leader. Failure in delegation results in adverse outcomes. Nurses further reported making unnecessary rounds and spending less time with patients to compensate for a lack of trust between themselves and others. The role of patient advocacy has also been associated with successful delegation. Successful nurse managers navigate a multidisciplinary health care structure adeptly and are aware of the needs of others.

4.1. Impact of Nursing Leadership Delegation on Workload Management

In response to a crisis, such as staff shortages in hospital settings, nursing leaders often focus on the adjustment of staff management, including delegation of tasks to ensure that care activities proceed. In this study, the concept of delegation is based on a comprehensive definition of the nursing delegation process by asking expert nurses to define when and under what circumstances they felt they were delegating tasks. By requesting licensed nurses to perform care activities that are not part of the accepted role described in their job description or contract, nursing leaders often delegate authority to extend workers' roles and manage personnel shortages by sharing their workload. Delegation is a complicated thinking process where the delegator identifies, allows, shares, and encourages the growth and development of the delegatee while creating a conducive environment for the completion of the task.

Long-term nurses develop a set of blurred roles and responsibilities within the healthcare team. Human resource management is one of the responsibilities in a nursing director's role. During a shortage of staff, nursing directors have a clear role to guide nursing staff on how to delegate and have resources available to carry out the delegation. While they share the result of the delegated task, they also delegate the responsibility for tasks to a delegate. As a nurse, the assignment of work to subordinate staff members to authorize them to complete routine tasks effectively transfers tasks and responsibilities to licensed employees while also supervising these individuals to ensure the quality of the nursing activities delegated to subordinates. Task delegation has been documented to provide an opportunity for nurses to share their workload and provide qualified structured care. However, reviewing the literature shows that there is little institutional effort to explore how effective delegation of leadership roles among nursing leaders could reduce workforce problems and manage staff shortages effectively. As a result, this work would evaluate the effectiveness of delegation, its effects on the relationships in patient care, and its potential impact on the profession as a means of overcoming staffing issues.

4.2. Impact of Nursing Leadership Delegation on Staff Shortage Management

A systematic review of a total of 12 studies, including 11 descriptive comparisons and one controlled trial, found that the presence of "delegative leadership" significantly reduced managerial workload in organizations. The review could not find any difference between the organizations with or without managers possessing both leadership and management skills. Organizations where leadership and management are not combined in managerial roles, and where expert and inspirational leaders hand the management aspect of their roles to the staff, were also examined. The characteristics of the organizations with a delegative management approach discovered by the review were that the sizes of the management workforce are reduced, the responsibilities of individual staff are extended, and management can often exhibit an autocratic managerial style.

Health care managers face two major issues on a daily basis: managing staff shortages and workloads. Our aims here are to establish the impact of nursing leadership delegation on workload and staff shortage levels. The database search identified 12 relevant studies that provided data to answer the research aims using a nursing workforce and patient care model. The large shortage of nurses is one of the factors that exacerbate nursing workloads, and nursing managers face strong pressure to manage shortages and workloads while attempting to maintain high-quality patient care. Data from the studies included in the systematic review that related to nursing leadership delegation to diverse health professionals and staff, and its relationship with shortage and workload factors, were analyzed. The results provide a wide range of perspectives and would be useful to many health professionals.

5. DISCUSSION

The systematic review provided evidence supporting positive leadership communication, a well-informed workforce, and effective partnership working. Further consistent feedback about the delegation skills from peers or other professionals would also drive the improvement of the quality of patient care in a rapidly changing

dynamic environment. The purpose of delegation is not micromanaging, and ensuring safe care is always achieved. Instead, delegating aims for the leaders to focus on what they do best, thereby aligning their unique skill sets, focusing their time on top priority projects, and making a difference in the organization. Nurses always want to ensure patient safety is their priority when they delegate. Nurses work together with professionalism. It does not matter how senior or junior the nurses are; mutual respect and trust are crucial to a strong relationship and effective teamwork. That means honesty, support, and celebrating each other's strengths, as well as supporting each other's areas for development. Moreover, the presence of positive leadership communication and a well-informed workforce allows them to feel a part of the decision-making process that supports a sense of belonging and confidence in their shared purpose and shared goals. They are empowered to take responsibility for their actions as they focus on the patient's perspective and ensure patient outcomes are driven. This enables a workforce to develop in a shared direction with clear communication about what is needed to be successful. The leaders, on the other hand, must be accessible to proactively seek out staff, value feedback, and make prompt and decisive steps to address concerns. Staff felt heard, appreciated, and guided by leaders who were supportive and made them feel valued. It is also essential for leaders to be receptive to the problems, respond positively, and consider how to support the decision-making that led to the concerns and how to enable connected planning and standardization among various teams. Leaders are in a position of trust. Therefore, reliable, open, and consistent sharing of all relevant information is essential, and ensuring staff members understand the bigger picture and their role within the organization is also important.

5.1. Key Themes Emerging from the Findings

1. Introduction This is the first review exploring the managerial leadership delegation of nursing care delivery at the frontlines using all the available and published evidence in handling workload management demands and staff shortages during crises. There is a need to explore the aspect of managerial leadership delegation because nurse managers, amounting to only 6% of the nursing workforce, play a crucial part in ensuring patient and staff satisfaction. Using a systematic review, the leadership style, perception of what the tasks are that should be delegated, communication, and the impact of effectively and ineffectively practicing delegation during crisis conditions were examined. This is important as newly graduated nurses, making up to a third of the workforce, might find themselves assuming managerial responsibilities. The importance of such preparation cannot be underestimated. Also, with education limited to theoretical exposure in delegation, the importance of orientation and support for nurse leaders is significant.

5.1. Key Themes Emerging from the Findings

The main themes that emerged from the included papers were "Task Performance: Orientation and Communication of Roles," coupled with "The Impact of Good and Poorly Practiced Leadership Delegation." These themes were an essential part of how nurses and healthcare professionals aligned their daily responsibilities, meeting patient care demands, work expectations, and organizational goals. Prioritizing the organizational requirements in terms of task execution cannot be more apparent with the need to respond in an emergency. Good delegation practices can often be a part of successful leadership, as various emergency rescue teams successfully operating in crisis settings have shown. After all, "many hands make light work." As nurses consider organizational demands, delving into patients' emotions, "communicating with diverse people under unusual situations" where heated emotions and situations can develop during an emergency cannot be overlooked. Nurses are expected to align with societal needs. Good delegation can only help in managing these emotions better.

5.2. Implications for Nursing Practice and Policy

There is a critical shortage of nursing leaders, particularly during healthcare crises. The review findings will help nursing leaders improve the functions and duties associated with nursing leadership delegation to manage workload and staff shortages. These findings would guide nursing leaders to develop and implement leadership preparation programs, training, and continuing professional development to articulate a structured career development ladder for frontline nurse managers. The findings highlight a significant association between nursing leadership delegation (in nursing workload control, supervision, unit management, financial control, or human resource management) and increasing outcome deficits such as patient neglect, adverse outcomes, stress, burnout, job satisfaction, staff turnover, absenteeism, occupational stress symptoms, and intention to quit experienced by unlicensed support staff.

Policymakers responsible for nurse leadership roles should be informed by these review findings for suggestions and support for substantial evidence policy reforms and the linkage between effective nursing leadership and safe nurse staffing needed to improve staffing outcomes. Researchers will find this review informative as well, since the findings identified a number of areas where supporting evidence is limited. Policymakers may also utilize the knowledge gained from this review to restructure nursing roles, strategies, responsibilities,

interventions, procedures, and departmental policy. The review findings regarding a number of strategies utilized by nurse leaders can impact their responsibilities to increase the status and perception of the role.

6. CONCLUSION

Introduction: The COVID-19 pandemic, with its psychological and physical burden, can result in staffing shortages. Staffing shortages can quickly overwhelm healthcare facilities and the complexity of patient care. This review suggests a number of strategies to alleviate nursing staff pressure in such times of crisis. Hierarchy also determined the ability to communicate problems upwards. It is suggested that in order to ensure safe patient care, clinical leadership must engage effectively with the challenges experienced by clinical leaders who have overall responsibility for staffing issues and these processes must be integrated into the daily work of clinical leaders. Aim: To investigate the role of nursing leadership in delegating nursing care services and essential daily tasks during the COVID-19 pandemic and the relationship to morale, mental well-being, and quality of patient care. Methods: This systematic review employed a specific methodology. Data were collected through thematic content analysis producing five themes with reference to the expanding data set and 'writing thoughts'. Data were segregated by theme and compared at upper and lower quartile levels. A plethora of research methods were employed, including focus groups. The roles of clinical nursing leaders, organisational strategies, and individual levels of delegation were thoroughly described both explicitly and implicitly. Integrated conclusions are considered to have empirical grounding and practical relevance. This research is important from the point of view of developing our body of work on nursing workload and delegation needs in times of emergency crisis.

6.1. Summary of Key Findings

The review highlights limited evidence available on the effects of nursing leadership delegation in managing care workload and staff shortages during a crisis. The evidence currently available shows a trend towards positive effects on staff, organization, and care quality with certain tasks delegated to lower qualified healthcare staff, but within the limits of the specific studies and facing major methodological concerns. A consequence is that these tasks should not be generalized. Motivation and professional development of care staff that lead to their readiness to take on non-standard tasks are also important when considering staff delegation. Technological attributes can also maintain the quality of clinical monitoring in care procedures.

It remains unclear whether leadership style and leader support and visibility generate any benefits for both care staff and the quality of care provided, and whether overall organizational performance improves if leader support and visibility are offered. Furthermore, studies that do address leadership seem to disregard certain groups and do not provide insight into the mechanisms that explain the behavior of leaders in times of crisis and how they can be supported. The more patient-oriented nursing leadership, equity-oriented work environment within the group, systemic structure change orientation, and structural empowerment of nurses, the higher the practice behavior, relational coordination, and structural empowerment overall, as well as a perceived system safety culture, a safe staffing environment, and job satisfaction of nurses in managerial and direct care positions, are seen.

6.2. Recommendations for Future Research

This systematic review indicates that the delegation of leadership responsibilities contributes to managing workload and staff shortages during a public health crisis among nursing teams in different healthcare settings. As we described in the introduction, the COVID-19 pandemic presented a striking and devastating crisis that had a negative impact around the world. It challenged healthcare organizations, nursing staff, nursing services, leaders, and even the leadership structure. This pandemic was not the first nor will it be the last crisis that affects societies. Accordingly, we have reviewed the knowledge of the experience because we believe this can guide nursing leadership in this new paradigm of crisis and in the different levels of response that have been identified for improving the response to a crisis and its consequences. The benefits of delegation promote better care outcomes and the well-being of nurses.

The value of delegation is recognized; functional delegation is a basis for support. To the best of our knowledge, this is the first review in the nursing field to provide evidence on what leadership delegation provides in times of crisis for managing work and staff shortages. Like all studies, this research has some challenges. They are mainly external validity, subjective bias, and limitations arising from the research design of the studies selected for the review. In terms of external validity, studies with different types of methodological designs were not included, even though they are recognized as important when the focus is to examine leadership processes in different realities. Future research can strengthen these themes by focusing on the validity of the scales used to measure leadership variables, leadership competencies, and improving nursing teams' leadership skills in times of crisis.

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