

# Nurse-Led, Virtually Enabled Collaborative Care- The Triad of Transformation

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**Abstract- Introduction:** As healthcare systems around the globe struggle with chronic illness, staff shortages, and an inability to make care available to all patients, novel concepts in nursing are emerging as solutions to improve patient care. Nurse-Led Virtually Enabled Collaborative Care: The Triad of Transformation offers innovators and practitioners alike a futuristic model of nursing as an emerging practice characterised by innovation and partnership. **Objective:** This research seeks to fulfil three objectives. a) To examine existing information related to nurse-led virtual care and collaborative healthcare models; b) to explore the possibilities of innovations in nursing technology related to chronic illness management; and finally, c) to provide a conceptual framework, the "Triad of Transformation," that integrates nurse leadership, digital health technologies, and interprofessional collaboration. **Methods:** According to PRISMA-ScR guidelines, we conducted a scoping review, identifying 50 records published between 2015 and 2026 in databases such as PubMed, CINAHL, Scopus, and Web of Science; 35 passed screening and eligibility assessments and were ultimately included as eligible studies; their data were charted and synthesised thematically. **Results:** The results indicate that nurse-directed care models can help strengthen the organisation of care, enhance patient outcomes, and make care more accessible. Virtual technology can be used to provide consistent care and benefit people who may be neglected in the first place. Healthcare professionals are also more accountable and provide more coordinated care, thanks to teamwork. The Triad of Transformation is an effective roadmap for creating more innovative, equitable, and patient-centred healthcare worldwide. In the future, this framework should be applied to research the extent to which these approaches can be implemented, extended, and facilitated by the policy in various healthcare contexts. The model preconditions the integration of nursing leadership and digital health tools to enhance coordination, access, and long-term success in current healthcare.

**Keywords-** Nurse-led care; Virtual healthcare; Telehealth; Collaborative care; Remote patient monitoring; Digital nursing innovation; Health system efficiency; Self-management support; Multidisciplinary care; Virtual nursing.

## I. INTRODUCTION

The long-term illnesses that affect millions, irrespective of their location in the world, not only affect their health. Most healthcare facilities tend to focus on curing immediate symptoms, and follow-up is often not provided. As the number of patients in long-term care is increasing and they are struggling with factors such as staff shortages and limited access to care, new ways to assist these patients should be sought. Studies have demonstrated that genuine differences can be achieved through nurse-led approaches that integrate technology. As an example, nurse-led care has been found to contribute to the reduction of anxiety and depression that might increase the quality of life among patients (Chen et al., 2025). Online education and counselling may also enhance patient satisfaction with their care (Kankaya & Karadakovan, 2020), and remote care can make health services more affordable while providing mental support (Li & Liu, 2025).

However, a significant body of research treats nurse-led care, telehealth, and teamwork as independent issues. These aspects are not found in many studies that combine them in a single approach. To improve healthcare, this paper presents a new model, Nurse-Led, Virtually Enabled Collaborative Care: The Triad of Transformation, which combines nurse leadership, telehealth, and collaboration. Such combined concepts can inform the use of technology in nursing practice.

**Objectives:** The objectives of this study are: a) to examine existing evidence on nurse-led virtual care and collaborative healthcare models. b) to synthesise the literature on innovative nursing technologies used for chronic illness management. c) to propose a conceptual framework known as "The Triad of Transformation," that encompasses nurse leadership, digital health technologies and interprofessional collaboration.

Literature Review: Research continues to demonstrate the efficacy of nurse-led telehealth and remote monitoring interventions for patients living with conditions such as heart failure. Studies such as those by Basso et al. (2024) and Almeida Neto et al. (2025) demonstrate significant improvements in patient outcomes through remote monitoring; other research, such as that by Davis et al. (2026), is a more conservative assessment.

Digital health tools have come a long way, and their positive influence cannot be denied. Patients no longer accept passive care; they have become empowered to monitor their own conditions, access services remotely and become active participants in health decisions (Coffey et al., 2022; Lee et al., 2022). Hospitals and community services that have implemented telehealth and virtual nursing have reported not only smoother workflows, but also increased patient satisfaction (Brindise, 2024; Brown-Johnson et al., 2023).

Perhaps most striking is how treatments that once required hospital beds can now take place on virtual wards at home, relieving strain on healthcare systems (Viney et al., 2024). All this would not be possible without true teamwork. Nurse-led care models bring together physicians, nurses and other healthcare providers in close collaboration and coordinate care more effectively than individual providers can. Telemedicine-based collaboration has proven particularly successful at managing chronic conditions and mental health concerns (Fortney et al., 2017; Rojas et al., 2018), as well as increasing access to care (Chen et al., 2025).

When nurse practitioners lead patient treatment programs, patients' overall quality of life improves even more, while anxiety and sadness decrease. Nursing encompasses more than clinical duties; this is especially evident in virtual care environments. Nurses frequently perform multiple duties simultaneously: education, advocacy, listening, and coordination are just some of the tasks they perform in virtual care environments. Nurse-led telehealth interventions can create tangible changes in patients' lives that make a real difference (Garcia-Rodriguez et al. 2024; Ibrahim et al., 2025).

Not only is technical proficiency critical, but patients also value when nurses pay close attention (Alenazi et al., 2024). Nursing remains its essence regardless of virtual environments: caregivers remain, caregivers, while technology serves simply as its medium for delivery. Telehealth and remote nursing care appear to have significant positive outcomes, as evidenced by studies (Kilfoy et al., 2024; Smedslund et al., 2025), which show how these approaches help patients better manage chronic illnesses, maintain good health and decrease unscheduled medical visits (Kilfoy et al., 2024; Smedslund et al., 2025).

Virtual nursing also appears to reduce workloads for bedside nurses in noncritical situations without jeopardising patient safety (Bhaloo et al., 2025); effective implementation relies on adequate planning, training, and infrastructure (Poole et al., 2025). Even with its many promises, virtual care still poses significant hurdles that should not be underestimated. A patient without access to smartphones or who has difficulty using apps cannot benefit from virtual care programs, despite their effectiveness.

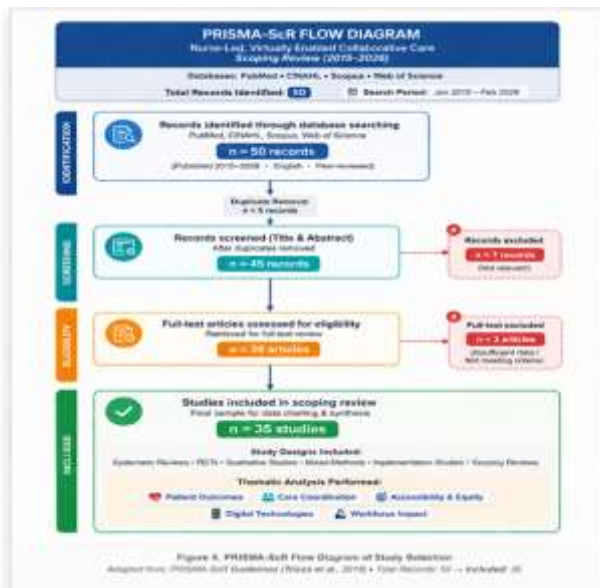
This issue impacts a disproportionately large group, such as older adults and people from under-resourced communities, prompting uncomfortable questions regarding whether digital health solutions actually reduce inequality or worsen inequity. Change can be slow in hospitals like India: longstanding habits and protocols, as well as staff reluctance, are major barriers, while research needs improvement as too much is short-term or inconsistently measured, making generalisation difficult. While technologies like AI or virtual reality may open new avenues, these often pose more questions than answers at present.

Nurse-led virtual care based on nursing leadership, digital tools, and collaborative practice is no longer a distant dream; much of it already occurs, and the results are promising. The "Triad of Transformation" nicely captures this dynamic. However, frameworks alone cannot provide all of the solutions - what the field truly requires are more rigorous long-term outcome studies, objective evaluation of what does not work as intended, and genuine dedication to making these models work across settings- not just well-resourced ones where pilot projects tend to thrive. Building this foundation requires hard but necessary work!

## II. METHODOLOGY

In this paper, we reviewed recent work on nurse-led virtual healthcare and collaborative care paradigms. We wanted to gather the most recent evidence on how digital health tools and effective collaboration among healthcare professionals can make a tangible difference in the care people receive, particularly for those living with chronic illnesses. To do this, we searched large databases, including PubMed, CINAHL, Scopus, and Web of Science, for English-language, peer-reviewed articles.

We sought nurse-led models, including telehealth, remote monitoring, and virtual nursing, as well as nurse collaboration models. We have also limited our search to work published between 2015 and 2026, ensuring we have the most reliable information on digital nursing and virtual care. Fig.1: Nurse-Led, Virtually Enabled Collaboration Care: The Triad of Transformation PRISMA-Scr Flow Diagram



By adhering to the PRISMA-ScR protocol, we ensured a streamlined, transparent process for identifying, screening, and synthesising studies, using 35 of 50 review papers as evidence for analysis. We reviewed works on digital care - led by nurses, telehealth, virtual nurses, remote monitoring, team-based models in primary care settings, community health centres, chronic disease management programs and hospitals. Key criteria, such as study design, setting, intervention type, and primary findings, were used to extract and organise data from the selected studies. A thematic analysis was then conducted on this literature to identify recurring themes and insights. Finally, the Triad of Transformation framework was devised. What we discovered helped shape our structure: Nurse-Led, Virtually Enabled Collaborative Care: The Triad of Transformation. This

paradigm illuminates how healthcare is transforming now through nurse leadership, digital innovation, and cross-disciplinary collaboration.

### III. RESULTS AND CONCEPTUAL FRAMEWORK DEVELOPMENT

This study presents a Triad of Transformation as an approach to bridge seemingly disparate concepts, such as nurse-led care, digital health tools, and collaboration, in meaningful ways. This framework unites three interlinked elements: nurse leadership, digital health tools, and interprofessional teamwork. The leaders of nursing are significant in the organisation of care, patient teaching, and assisting patients in self-managing their health. Remote monitoring, telehealth, and health apps keep patients at a distance and make it easier to deliver care remotely. By collaborating with healthcare workers who have various backgrounds, the process of decision-making and the provision of more coordinated care will become possible. All of these are done in a conducive environment that incorporates sound policies, well-established digital systems, equitable funding, and the provision of care to all. New methods of delivering healthcare succeed and expand under these conditions. The study selection process is illustrated in Figure 1. A total of 50 records were identified through database searches. 45 records were screened after duplicates (n=5) were removed. 7 records were excluded following title and abstract screening. Full text assessment of 38 articles resulted in the exclusion of 3 studies. After removing duplicates and screening abstracts, 35 studies were included in our final review. The included research encompassed a range of designs, including systematic reviews, randomised controlled trials, qualitative studies, and implementation research.

Table 1: Characteristics of Included Studies:

Author (Year)	Study Design	Category	Setting/Population	Key Findings
Chen et al. (2025), Mohan et al.(2022), Ibrahim et al. (2025), García-Rodríguez et al. (2024), Bulto (2024), Coffey et al. (2022)	Randomised controlled trial, Feasibility, Comparative, Intervention, Review, Implementation study	Nurse-led care	Heart failure patients, Cardiovascular, Ambulatory, Young adults, General healthcare,	Improved mental health and quality of life, Effective teleconsultation and care delivery, Improved mental health outcomes, Improved lifestyle adherence, Enhanced access to care
Bhaloo et al. (2025). Gregory (2024), Saul et al. (2026), Poole et al. (2025), Brindise (2024), Kankaya, H., & Karadakovan, A. (2020)	Scoping review, Review, Implementation study,	Virtual nursing	Inpatient care, Healthcare systems, Hospital setting, Critical care, Radiology nursing	Improved care coordination, New care delivery model, Successful early implementation, Identified best practices, Improved workflow efficiency

Lee et al. (2022), Brown-Johnson et al. (2023), Davis et al. (2024), Schultz (2023), Wong et al. (2022), Lamba & Bonnechère (2024), Oliveira & Martinez-Perez (2026)	Mixed-methods study, Feasibility study, Review, Systematic review	Digital health / Integrated	Chronic disease patients, Wound care patients, Multimorbidity, Nursing practice, Older adults, Stroke patients, AI systems	Improved rehabilitation outcomes, Increased patient engagement, Improved care continuity, Telehealth innovations, Improved quality of life, Benefits of virtual reality rehabilitation, Sustainability insights
Smedslund et al. (2025), Wathne et al. (2025), Walker et al. (2019), Basso et al. (2024), Almeida Neto et al. (2025), Tao et al. (2023)	Systematic review & meta-analysis, Qualitative study, RCT protocol	Remote monitoring/ Integrated model	NCD patients, Chronic illness patients, Heart failure patients, Self-care patients	Reduced hospitalisation, improved self-management, Positive patient experiences, Telemonitoring intervention, Video monitoring model, combined digital + nurse-led care
Fortney et al. (2017), Rojas et al. (2018), Charalambous et al. (2024), Kilfoy et al. (2024), Lambert et al. (2017)	Randomised controlled trial, Clinical trial, Scoping review, Systematic synthesis, Meta-analysis	Collaborative care	Depression patients, Rural patients, Telehealth services, Chronic conditions, Chronic illness patients	Improved outcomes vs usual care, Improved access and outcomes, strengthened teamwork, Improved coordination, Improved psychosocial outcomes.

These categorisations of studies informed the thematic synthesis and the development of the Triad of Transformation. First, Nurse-Led interventions were found to improve patient outcomes, particularly in disease management, quality of life, and mental well-being. Secondly, as shown in studies, Nurse-led models improved care coordination by bridging communication gaps among healthcare professionals, resulting in better-organised, patient-centred care. Thirdly, digital technologies such as telehealth and remote monitoring have significantly enhanced access to healthcare facilities and services. These tools were valuable for the clients in underserved populations. At the same time, challenges were noted regarding digital literacy and infrastructure. Finally, the use of virtual care models positively impacted healthcare systems by improving efficiency and optimising workforce utilisation. Overall, the importance of integrating nursing leadership, technology and teamwork in modern healthcare systems was seen.

**Integrating into the conceptual framework: The results from the included studies informed the development of the Triad of Transformation framework.**

- Nurse Leadership is supported by evidence on care coordination and patient engagement (Chen et al., 2025; Ibrahim et al., 2025; Davis et al., 2024)
- Digital Health Technologies is supported by telehealth and monitoring outcomes(Coffey et al. 2022, Kilfoy et al. 2024, Smedslund et al. 2025)

- Collaborative Care Models is supported by multidisciplinary teamwork findings(Fortney et al.2017, Charalambous et al.2024, Rojas et al.2018)

This framework provides a comprehensive model for advancing nurse-led, digitally enabled healthcare systems. Based on the findings, the following framework (Fig. 2) was developed.



Fig.2: Scaling, Policy & Sustainability Considerations

**Multi-Level Governance & Growth Model**

\*Source: Author’s own conceptual framework; figure visualisation generated with the assistance of ChatGPT (OpenAI).

As indicated in the figure, to ensure that nurse-led, virtual team care is effective and sustainable, four major pillars must collaborate:

- **Policy Alignment** - Favourable national/local policies, effective leadership, and coverage for all people are a precursor to success.
- **Infrastructure** - Consistent systems within organisations, high-quality online tools, sufficiently trained personnel, and clear operational channels can ensure that issues are handled without issues.
- **Financing** - Consistent and intelligent funding keeps care in motion and can even increase it over time.
- **Community Equity** - Easily accessible care, cultural competence, and openness to everyone will help reach all groups.

All these elements are in a chain reaction, tracking the current state of affairs, adjusting financial services, and amending policies. The system remains robust and capable of expanding further.

primary point is that such planning is gradual and attentive to detail, leading to real and effective change in healthcare.



Fig.4: Clinical Implementation Components



Fig.3: Practical Examples & Use Cases

**Application-Oriented Implementation Model**

\*Source: Author’s own conceptual framework; figure visualisation generated with the assistance of ChatGPT (OpenAI).

This number is a gradual approach to implementing nurse-managed virtual care groups. It begins with identifying a specific need in care or operations, which helps determine what to focus on, whether assisting with diagnoses, risk assessment, or patient monitoring. It is then applied in practice using the care approach in the right environment, i.e., an ICU, an outpatient unit, or an inpatient ward. Result measures include effectiveness, cost, patient satisfaction, and speed of care. The

**Operational Workflow Integration Model**

\*Source: Author’s own conceptual framework; figure visualisation generated with the assistance of ChatGPT (OpenAI).

This implies that nurse-led virtual team services are most effective when integrated into the current routine rather than added to it. It is less disruptive when it is simple to use and part of everyday work, and it adds less work while enabling healthcare workers to make quick decisions. This will increase the likelihood that the new approach will remain in clinical use, thereby improving efficiency, providing high-quality care, and ensuring a sustainable transition.

**Foundational Pillars Model**

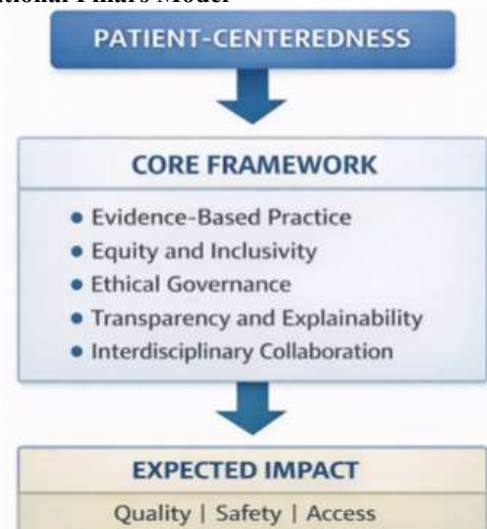


Fig.5: Core Framework Principles & Rationale

\*Source: Author's own conceptual framework; figure visualisation generated with the assistance of ChatGPT (OpenAI).

Foundational principles such as evidence-based practice, equity, ethical governance, visibility, and collaboration demonstrate the execution of a nurse-led, virtual collaborative service. These principles ensured that the model is operationally effective, scientifically sound, and ethically responsible, while strengthening its credibility, trustworthiness, accountability, and long-term sustainability.

Continuous Quality Improvement Cycle



Fig.6: Measurement, Evaluation & Quality Assurance

\*Source: Author's own conceptual framework; figure visualisation generated using the assistance of ChatGPT (OpenAI).

This is a process of constant enhancement. It starts with an evaluation that gathers key information on care services, operations, and outcomes. Teams use this data to determine the system's effectiveness and the safety and effectiveness of the care provided. If issues or gaps are found, the required changes are implemented to address them. The outcomes are reviewed again after such changes to determine whether improvement has been made. This cycle helps healthcare staff be more responsible, enhance the quality of healthcare services provided, and contribute to the further evolution of nurse-led virtual team care.



Fig.7: Integrated Framework for Nurse-Led, Virtually-Enabled Collaborative Care.

\*Source: Author's conceptual framework (Lungsanghungle Newme); visual illustration generated with assistance from ChatGPT (OpenAI).

The diagram illustrates the essential concepts of the model, encompassing policy and enduring sustainability; practical applications and assessments of the model; fundamental principles and standards centred on patients; and the processes involved in nurse-led virtual healthcare team services. Based on synthesised evidence, the Triad of Transformation framework is developed as shown in the figure.8

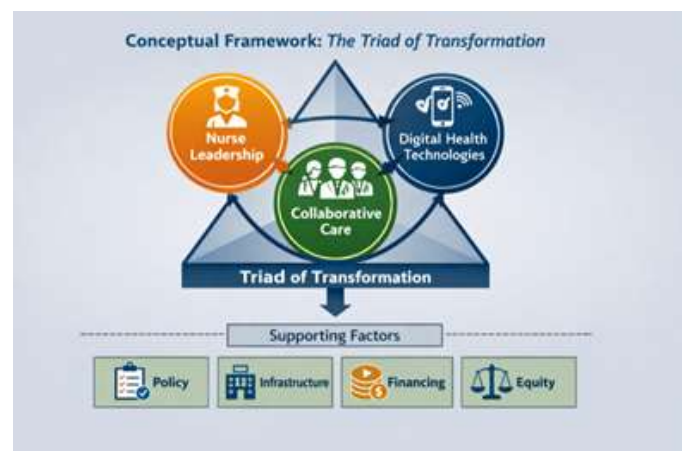


Fig.8: Nurse-Led, Virtually-Enabled Collaborative Care: The Triad of Transformation (TVCC-T3 Model).

\*Source: Conceptual model developed by Lungsanghungle Newme; figure illustration generated with assistance from ChatGPT (OpenAI).

Nurse-Led, Digital Care and Collaborative Care work synergistically rather than independently to promote holistic healthcare delivery. Their integration is supported by system factors such as policy alignment, infrastructure provisioning,

financing needs and equity considerations as illustrated in figures 2-7. These elements combine to form a sustainable healthcare delivery model for modern healthcare delivery systems. This framework illustrates that efficient healthcare system transformation occurs through the coordinated interaction of Leadership, technology, and collaborative care, rather than through isolated care delivery models. This framework unifies nurse leadership, digital health technologies, and collaborative care as primary drivers for nurse-led, virtually enabled healthcare. With appropriate policies, digital tools, funding, and fair access in place, this approach demonstrates that working together among staff, technology, and systems results in improved care for people living with chronic illness. More patients get the care they require while treatment remains organised.

#### IV. DISCUSSION

This scoping review highlights the growing role of nurse-led, virtually enabled collaborative care in addressing contemporary healthcare challenges. The findings demonstrate that integrating nurse leaders with digital technologies and interdisciplinary collaboration can significantly improve patient outcomes and healthcare delivery. Earlier, nurse-led care, technology and collaborations were normally considered as separate. What is amazing is that the Triad of Transformation has brought all these parts together. It is a form of care in which nurses will be on the front line, utilising digital tools in collaboration with other health practitioners to ensure that patients receive more complex care.

Table. 2: Mapping of Evidence to Triad of Transformation Components

Triad Component	Supporting Studies	Key Evidence
Nurse Leadership	Chen et al. (2025); Mohan et al. (2022); Ibrahim et al. (2025); Davis et al. (2024)	Improved patient outcomes, education, and chronic disease management
Digital Health Technology	Coffey et al. (2022); Smedslund et al. (2025); Brown-Johnson et al. (2023); Lee et al. (2022)	Remote monitoring, telehealth effectiveness, and improved engagement
Collaborative Care	Fortney et al. (2017); Rojas et al. (2018); Charalambous et al. (2024)	Better coordination, multidisciplinary teamwork
Virtual Nursing Models	Bhaloo et al. (2025); Gregory (2024); Saul et al. (2026)	Integration of digital + nurse roles
Patient Outcomes	Wong et al. (2022); Kilfoy et al. (2024); García-Rodríguez et al. (2024)	Improved QoL, adherence, and self-management

To begin with, nurses are at the centre of planning the care, patient education, and assisting individuals in managing chronic health issues. They tend to serve as a key intermediary between patients and the healthcare team, ensuring everyone is in unison. Nursing leadership can foster a more active patient experience, which benefits patients' health. Secondly, telehealth, remote health, and mobile health are digital health tools that have transformed healthcare delivery. Such technologies enable medical personnel to monitor their patients remotely, act swiftly when necessary, and stay in touch even when outside the doctor's office. It is also through digital tools that individuals in remote or underserved areas receive care, and that patients can stay involved and manage chronic conditions. Third, collaboration of various healthcare workers provides patients with more comprehensive care. By collaborating with doctors, nurses, pharmacists, and others, treatment plans can be developed more effectively, and care may become more consistent. The inclusion of this nurse-led, tech-enabled care collaboration helps the healthcare system operate more effectively, avoid care fragmentation, and enhance the patient experience.

Besides these key factors, the review emphasised that the wider health system needs to be heavily supportive. There must be good policies, sound digital systems, equitable financing, and equitable access to care. These supports are hard to implement or expand nurse-led, virtual care models without them. Healthcare systems are obligated to create conditions that encourage digital innovation, and these conditions should ensure that nurses adopt the tools and support needed to lead technology-enabled care. The research also concludes that nurses must be comfortable with the digital tools and that telehealth must become a constituent of care. Team building among healthcare professionals is also a good idea. This requires nurses to be trained to build their online skills. Besides, the use of digital health and regulations to support nurse-led virtual care needs policies, and the new model needs a financial plan.

All in all, the Triad of Transformation can offer healthcare institutions a distinct roadmap for advancing patient-governed, technology-driven nursing care systems. Through the application of nurse leadership, digital health technologies, and the power of teams, better management of chronic diseases, as well as access to and quality of care, can be achieved in areas with limited resources or that are otherwise inaccessible.

#### Implications

In practical terms, the study's findings highlight the importance of nurses in applying technology to deliver care. Indeed, healthcare organisations are supposed to support nurses in acquiring skills in using technology, including telehealth, remote monitoring, and remote communication. Telehealth can be implemented as a daily nursing activity to monitor patients,

educate them about their health, and manage their conditions. Hospitals and clinics must also support teamwork by establishing teams to facilitate communication and decision-making among professionals. Digital care led by nurses can improve access to healthcare, particularly for those living in rural or inaccessible regions. Virtual care protocols and guidelines can make care more efficient and deliver high-quality care to patients. The research may provide useful recommendations for healthcare workers, organisations, and policymakers on integrating nurse-led digital care into the broader healthcare system. The Triad of Transformation framework may serve as the guidelines for implementing telehealth, remote monitoring, and team-based care in everyday nursing practice. It implies assisting nurses in becoming more comfortable using digital tools, integrating virtual nursing into their everyday work routines, and promoting collaboration among all members of the care team. Such measures can significantly enhance patient care, particularly in rural districts and resource-poor areas.

To enjoy effective nurse-led virtual healthcare services, institutions and government assistance are needed. The government needs to focus on improving its health resources, including ensuring internet access and the availability of electronic health records and other electronic health systems. It also needs to develop laws that champion nurses' position in virtual health care. The development of equitable payment policies and funding sources can help more people and organisations utilise telehealth and nurse-led digital care. Digital health education and training for healthcare workers will help make technology an inseparable part of the healthcare system. Lastly, it should always be a priority that all people (even in isolated or under-resourced locations) have access to digital health services.

#### **Theoretical / Conceptual Contribution**

This review also emphasises specific research directions to pursue next in the field of digital nursing and healthcare collaboration. Scholars ought to put the Triad of Transformation to the test in other health institutions, particularly those that are not well-endowed. Long-term, practical studies are needed to assess the effectiveness of nurse-led digital care in helping people become healthier, better manage ongoing diseases and conditions, and streamline care delivery. As part of research into the effects of digital tools on nurses' daily routines, job descriptions, and levels of job satisfaction. By comparing traditional care with nurse-led virtual care, one can determine which is more cost-effective and easier to implement, while also considering whether patients feel comfortable using digital technologies and whether everyone can access this form of treatment, so no one feels left out.

This study contributes to the existing body of knowledge by developing an integrated conceptual framework that bridges

three traditionally separate domains: Nurse-Led care, digital care, and collaborative care. While prior studies have extensively explored each component independently, there remains a lack of theoretical models that explain how they interact within a unified system. This research paper introduces the Triad of Transformation as a new integrative model that includes nurse leadership, digital health, and teams as a conceptual framework for healthcare service delivery. The Triad of Transformation is unique compared to other research studies, which have conventionally treated the components separately. In contrast, it explicitly describes interactions among the components and the mutual benefits of their interplay in nurse-led, technology-enabled care. This synthesis makes the model's theoretical novelty clear, as it advances digital nursing research by outlining how these dimensions can be operationalised in practice and by providing a foundational framework to guide and inform future research and the design of technology-oriented nursing interventions.

#### **Future Research Directions**

The review identifies several areas for further research to advance nurse-led digital health care and the Triad of Transformation framework. The framework should be validated in other health facilities, such as hospitals, clinics, and nursing homes, through further research. To realise the long-term, practical study in which the nurse leads virtual care that can influence patients' health, their use of healthcare, and cost savings, research on the topic is necessary, particularly for chronic diseases. Investigating which digital skills nurses require and which training is beneficial for them to use telehealth and remote monitoring effectively is also necessary. Additionally, research should be conducted on patients' comfort with online medical services and their level of trust in these services. Lastly, the policies and funding needed to ensure the success of nurse-led virtual care should be researched.

#### **Limitations of the Study**

Any analysis of this research study's findings should keep a few important points in mind. Firstly, the current review is based on prior research. Moreover, it includes studies written only during 2015-2026. Thirdly, the research articles used in the review were conducted across diverse healthcare systems, patient groups, and methodologies, making comparisons between studies difficult. Lastly, the Triad of Transformation remains a theory that has not yet been tested in actual healthcare contexts. Further studies are required in order to determine its effectiveness in practice and under various circumstances.

## **V. CONCLUSION**

This review reveals that technology-based teamwork, which nurses can lead, is gaining increasing significance in addressing modern healthcare issues, such as rising rates of chronic disease

and disparities in healthcare delivery. The Triad of Transformation model integrates nurse leadership, digital health technologies, and teamwork across healthcare professionals to provide a balanced ADR that enhances care delivery and improves patient outcomes. The framework, emphasising nurses as primary users of technology in structuring care, illustrates how digital nursing can keep patients engaged by offering more consistent services that reach more individuals. To implement such models effectively, healthcare systems need clear policies, effective digital interventions, dependable financing arrangements and equitable access by all. The model assists healthcare administrators, scientists, and policymakers in developing more flexible yet patient-centric care in settings where resources are scarce or care distances are greater.

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