

National Survey of Pharmacy Leadership at Ministry of Health in Saudi Arabia: Planning and Organization

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Abstract

Objective: To explore the national survey of pharmacy leadership at the Ministry of Health with emphasis on pharmacy planning and organization. **Methods:** It is a ninety days cross-sectional national survey of pharmacy leadership practice at Ministry of Health. The survey modified from self-assessment of 360 leadership and with pharmacy leadership literature. It consisted of a demographic section, leadership pathway, and fifty-three leadership ship questions. It contained selected eighteen leadership skills of 360 leadership self-assessment. The electronic format of the survey through the survey monkey system and distributed through emails. All analysis is done through the survey monkey system. The survey divided into for several parts for analysis, and discussion. Part one: practice management, part two: planning and organizations, part three: communications strategies, part four: problem-solving and decision making, part five: performances management, part six: working environment, and part seven: professional development. The study explored the part number two; National Survey of Pharmacy leadership: planning and organizations. **Results:** The survey distributed to one hundred hospitals, the response rate, was forty-two hospitals (42%) with seventy-pharmacy leaders. The gender distribution of responders was Male 43 (63.24%) and female 25 (36.76%) while the nationality was Saudi 69 (98.57%) and non-Saudi 1 (1.43%). The majority of responders were in the age range (25-34) years 30 (55.12%) and (35-44 years) 26 (38.24%). The average score planning skills (achievement) was 2.41 (80.33%) with the highest score was Makes a plan was done and translate strategic action 2.48 (82.65%), and the lowest score was Completes work on given time frame and budget 2.35 (78.32 %). The average score planning skills (Goals) was 2.61 (86.99 %) with the highest score was Makes sure that I have a bright idea of our group's goals 2.74 (91.32%), and the lowest score was Achieves goals Successfully 2.44 (81.32%). The average score organization skills (Flexibility) was 2.58 (85.99%) with the highest score was Adapts to new organizational structures, policies, or procedures 2.67 (82.65%), and the lowest score was Can handle changes without complaining 2.37 (78.99%). **Conclusion:** The pharmacy leaders had excellent planning skills and organization with the inadequacy of objective achieving with appropriate time or budget. The regular survey of pharmacy leadership every one or two years is highly recommended for all healthcare organization in the kingdom of Saudi Arabia.

Key word: Pharmacy leadership, Planning, Organization, Ministry of health, Saudi arabia.

INTRODUCTION

The pharmacist during his studies in pharmacy college got several lectures about study organization and planning studying and goal achievements.^[1-2] After graduating the pharmacist practice what have learned during their studying to reach the pharmacy objectives and improve pharmacy services with implementation of new pharmaceutical care services.^[3-5] The American society of health system had pharmacy strategic plan for the pharmacy practice, and pharmacy society with annual following follow up of the plan.^[6-8] Also, some college of pharmacy had planned for education. The pharmacy strategic plan in Kingdom of Saudi Arabia had the first published in 2015.^[9] Several pharmacy practices or clinical Pharmacy founded on their strategic plan.^[10] The investigations about pharmacy leadership skills but the pharmacy leaders and their abilities or capabilities for organizations or planning very seldom worldwide or Saudi Arabia.^[11] In addition to Gulf or Middle East counties. The objective of the study to explore the national

survey of pharmacy leadership with emphasis on planning and organization in Kingdom of Saudi Arabia.

METHODS

It is a ninety days cross-sectional national survey of pharmacy leadership practice at MOH hospitals. The survey modified from self-assessment of 360 leadership and with pharmacy leadership literature. It consisted of a demographic section, leadership pathway, and fifty-three leadership ship questions. It contained selected eighteen leadership skills of 360 leadership self-assessment.^[12] Of The leadership skills included Achievement, Goals, Flexibility, Feedback, Excellence, Empowering Others, Emotional Intelligence, Decision Making, Developing Others, Cultural Awareness, Continual Improvement, Communication Skills, Coworker Development, Leading the Change Needed, Attitude, Analytical, Administrative Skill, and Action. The questions consisted of open and closed questions. The 5-points

Study on planning and organization among Leader Pharmacists

or 3-point Likert response scale system used. This survey distributed to all leadership at MOH hospital pharmacies in Kingdom of Saudi Arabia. It included general director of pharmacy at MOH and regions, the directors of pharmacy and supervisor at MOH hospital pharmacies. The electronic format of the survey through the survey monkey system and distributed through emails. A reminder e-mail containing a link to the website forwarded two weeks after. All analysis is done through the survey monkey system. The survey divided into for several parts for analysis, and discussion. Part one: practice management, part two: planning and organizations, part three: communications strategies, part four: problem-solving and decision making,

part five: performances management, part six; working environment, and part seven: professional development. The study explored the part number two; National Survey of Pharmacy leadership: planning and organizations.

RESULTS

The survey distributed to one hundred hospitals, the response rate, was forty-two hospitals (42%) with seventy-pharmacy leaders. The majority of the hospital bed size (200-299) was 16 (24.24%) followed by nine (13.64%) bed size (300-399) and eight (12.12%) more than bed size (= or > 600). The number of hospitals accredited by the Saudi Central Board of Hospitals

Table 1: Demographic information of pharmacy leaders.

Gender	Response N	Response %	Complete pharmacy residency	Response N	Response %
Male	43	63.24%	Yes	10	14.93%
Female	25	36.76%	No	57	85.07%
Answered question	68		Answered question	67	
Skipped question	2		Skipped question	3	
Nationality	Response N	Response %	Do you have Board of Pharmaceutical Specialty	Response N	Response %
Saudi	69	98.57%	Board Certified Ambulatory Care Pharmacist	1	1.54%
Non- Saudi	1	1.43%	Board Certified Critical Care Pharmacist	1	1.54%
Answered question	70		Board Certified Pharmacotherapy Specialists	2	3.08%
Skipped question	0		Non	62	95.38%
Academic Qualification (s)			Answered question	65	
18 to 24	0	0.00%	Skipped question	5	
25 to 34	30	44.12%	Total years of current position	Response N	Response %
35 to 44	26	38.24%	General Manager of Pharmaceutical care	5	7.58%
45 to 54	10	14.71%	Manager of Pharmaceutical care at region	1	1.52%
55 to 64	1	1.47%	Director of Hospital pharmacy	24	36.36%
65 to 74	1	1.47%	Supervisor of pharmacy units	33	50.00%
75 or older	0	0.00%	Director of Primary care center pharmacy	3	4.55%
Answered question	68		Answered question	66	
Skipped question	2		Skipped question	4	
Academic Qualification (s)			Total years worked as a Pharmacist	Response N	Response %
Diploma Pharmacy	7	10.29%	<3	9	13.24%
Bsc. Pharm	44	64.71%	3-5	13	19.12%
M.S	9	13.24%	6-10	13	19.12%
Msc. Clinical Pharmacy	4	5.88%	11-15	14	20.59%
Pharm.D.	11	16.18%	> 15	19	27.94%
Ph.D	0	0.00%	Answered question	68	
MBA	4	5.88%	Skipped question	2	
Pharmacy Residency (R1)	2	2.94%	Years of experience in administrative work	Response N	Response %
Pharmacy Residency (R2)	2	2.94%	Less than one year	10	14.29%
Fellowship	1	1.47%	1 - 3 years	18	25.71%
Other (please specify)	6	8.82%	4 - 5 years	13	18.57%
Answered question	68		6-10	14	20.00%
Skipped question	2		More than ten years	15	21.43%
			Answered question	70	14.29%
			Skipped question	0	

Study on planning and organization among Leader Pharmacists

Table 2: Demographic hospital information.

Number of beds at hospital	Response N	Response %
<50	6	9.09%
50-99	5	7.58%
100-199	7	10.61%
200-299	16	24.24%
300-399	9	13.64%
400-599	4	6.06%
More than or equal 600	8	12.12%
Medical City	7	10.61%
Regional Drug Information Centers at (General Health Affairs Directorate)	4	6.06%
Answered question: 70 and skipped : 0		
The hospital accreditation	Response Count	Response Percent
CIBAH	36	76.60%
Saudi Commission of Healthcare specialties	11	23.40%
JCI	22	46.81%
Canada	2	4.26%
ASHP	0	0.0%
ACCP	1	5.0%
Non	4	20.0%
Answered question: 47 and skipped question 23		

Accreditation (CIBAH) was 36 (76.60%) while 22 hospitals (46.81%) accredited by USA International Joint Commission and CIBAH and 11 (23.40%) accredited by the Saudi Commission of Healthcare specialties. The gender distribution of responders was Male 43 (63.24%) and female 25 (36.76%) while the nationality was Saudi 69 (98.57%) and non-Saudi 1 (1.43%). The majority of responders were in age range (25-34) years 30 (55.12%) and (35-44 years) 26 (38.24%). The academic qualifications of responders were BSc. Pharm 44 (64.71%) followed by Mater degree 9 (13.24%) and Diploma Pharmacy 7 (10.29%). Of those, only 10 (14.93%) completed a residency program in pharmacy administrations, and four (4.16%) had completed board of pharmaceutical specialties. The majority of responders worked as a supervisor of the unit at hospital pharmacy 33 (50%) or director of pharmacy 24 (36.36%). Of those they had experienced as pharmacist more than ten years 33 (47.14%) and had administrative work one to three years' experience 18 (25.71%) and more than ten years were 15 (21.43%) as explored in Table 1 and Table 2. The average score planning skills (achievement) was 2.41 (80.33%) with the highest score was Makes a plan was done and translate strategic action 2.48 (82.65%), and the lowest score was Completes work on given time frame and budget 2.35 (78.32 %). The average score planning skills (Goals) was 2.61 (86.99 %) with the highest score was Makes sure that I have a clear idea of our group's goals 2.74 (91.32%), and the lowest score was Achieves goals Successfully 2.44 (81.32%) as explored in Table 3. The average score organization skills (Flexibility) was 2.58 (85.99%) with the highest score was Adapts to new organizational structures, policies, or procedures 2.67 (82.65%), and the lowest score was Can handle changes without complaining 2.37 (78.99%) as explored in Table 4.

Table3: Planning Skills.

Achievement									
	Answer Options	Never		Sometimes		Always		Average	Response N
1	Completes work to given time frame and to budget.	1	1.52%	41	62.12%	24	36.36%	2.35	66
2	Demonstrates a well-organized and timely approach to achieve desired results.	0	0.00%	37	56.06%	29	43.94%	2.44	66
3	Makes a plan for getting things done and could translate strategic plan to action.	2	3.03%	30	45.45%	34	51.52%	2.48	66
4	Schedules time for self and others to optimize high priority and long-term actions.	3	4.62%	35	53.85%	27	41.54%	2.37	65
Answered the question 66 and skipped questions									
Goals									
	Answer Options	Never		Sometimes		Always		Average	Response N
1	Makes sure that I have a clear idea of our group's goals.	0	0.00%	17	26.15%	48	73.85%	2.74	65
2	Achieves goals Successfully.	0	0.00%	36	56.25%	28	43.75%	2.44	64
3	Encourage employees to have their goals .	0	0.00%	21	32.81%	43	67.19%	2.67	64
answered the question 65 and skipped question 5									

Table 4: Organizations Skills: Flexibility.

	Answer Options	Never		Sometimes		Always		Average	Response N
1	Able to adapt to new situations.	1	1.52%	25	37.88%	40	60.61%	2.59	66
2	Adapts to new procedures.	0	0.00%	24	36.36%	42	63.64%	2.64	66
3	Adapts to new organizational structures, policies, or procedures.	0	0.00%	22	33.33%	44	66.67%	2.67	66
4	Encourages others to adopt new procedures.	1	1.54%	20	30.77%	44	67.69%	2.66	65
5	Identifies new opportunities to achieve goals.	1	1.54%	23	35.38%	41	63.08%	2.62	65
6	Works effectively during periods of change.	0	0.00%	23	35.38%	42	64.62%	2.65	65
7	Can handle changes without complaining.	5	7.69%	31	47.69%	29	44.62%	2.37	65
8	Changes behavior quickly based on the task or needs of the customer.	2	3.08%	34	52.31%	29	44.62%	2.42	65
9	Able to change ways of working as needed.	1	1.54%	20	30.77%	44	67.69%	2.66	65
answered the question 66 and skipped question 4									

DISCUSSION

The pharmacy strategic planning for all hospitals and primary care centers founded in period 2000-2008, the updated one released in late 2012.^[9] The planning consisted of six strategic goals and imitative and more than eighty objectives. The plan founded and organized by task force team headed by the author. The pharmacy plan distributed to all twenty regions overall Kingdom of Saudi Arabia. Each regional pharmacy administration and Pharmacy director for each hospital have to set up annual plan to achieve the general strategic plan. On a regular basis, the general manager of pharmacy administration at MOH gathered a meeting, and each regional directors have to present their achievements, the challenges, and how to overcome those problems. During many conferences the Taskforce found some pharmacy administrator did annual setup plan, others had deficiencies of annual setup plan and remained did know goals achievements. Also, some pharmacy leaders had work organization problems. The authors tried to investigate the actual of pharmacy leadership with emphasis on planning and organization. The finding showed the average score planning skills (achievement) good percentages of the completing the work on time within the time frame, and the financial budget was not adequate. The results resemble what reported by National Center for Healthcare Leadership the only reference available to compare with it. However, they involved the physician and nurse in their study.^[11] The results are reflect the real practice of pharmacy leaders. They set up all related strategic issues but the time frame had problems may due to a high number of goals and challenging to achieve inappropriate time or the time was a short need to more extended time, sometimes the pharmacy leaders missed the time management skills. Also, the pharmacy planning not fits within financial budget because most of our pharmacy leaders not involved in the general financial budget or do not know the particular annual financial budget. The finding planning skill with same previous one the pharmacy leaders can set goals with inappropriate achieves them. Most pharmacy leaders have excellent with organization skills, but they could not tolerate or handle without problems. That is related to a deficit of education and training in the management skills or need some experience to overcome these changes. Most of our leaders had profound experiences within one to five years only with younger ages. Most of the results were difficult to compare with them because maybe the study the first done withing pharmacy leaders world or Saudi Arabia and Gulf or Middle Esat countries. The overall planning skills of pharmacy leaders are good with lower in achieving within time and budget or not accepting the changes during planning at the Ministry of Health hospital in the Kindom o Saudi Arabia.

CONCLUSIONS

The pharmacy leaders had adequacy of planning or organization skills but had the problem of achieving their goals with appropriate time or financial budget. Targeting of practical education and training course in the time

management or financial budget with close follow up will build good experiences to improve their skills at Ministry of Health organization in the Kingdom of Saudi Arabia.

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CONFLICT OF INTEREST

None

SOURCE OF SUPPORT

None

ABBREVIATION USED

KSA: Kingdom of Saudi Arabia, MOH: Ministry of Health,

REFERENCES

1. Janke KK, Traynor AP, Boyle CJ. Competencies for student leadership development in doctor of pharmacy curricula to assist curriculum committees and leadership instructors. *Am J Pharm Educ*. 2013;77(10):222.
2. Cho JC, Girnys JP. Preceptor Development Series National Survey Regarding the Importance of Leadership in PGY1 Pharmacy Practice Residency Training. *Hosp Pharm*. 2015;50(11):978-84.
3. Gouveia WA, Talbert RL, Hackner D, Miller WA. *Pharmacy Management*. The McGraw-Hill Companies. 2009.
4. Khan MU, Hassali MA, Ahmad A, Elkalmi RM, Zaidi ST, Dhingra S. Perceptions and practices of community pharmacists towards antimicrobial stewardship in the state of Selangor, Malaysia. *PLoS one*. 2016;11(2):e0149623.
5. Rafi MS, Naqvi SB, Khan MU, Fayyaz M, Ashraf N, Khan MA, *et al*. Evaluation of Potential Drug-Drug Interactions with Antidepressants in Two Tertiary Care Hospitals. *JCDR*. 2015;9(7):FC05.
6. ASHP Research and Education Foundation. *Pharmacy Forecast 2015-2019: Strategic Planning Advice*. 2015.
7. ASHP Research and Education Foundation. *Pharmacy Forecast 2016-2020: Strategic Planning Advice*. ASHP Foundation. 2015. Available from: <http://www.ashpfoundation.org/PharmacyForecast2016>.
8. Allen SJ, William Zellmer EA, Li E, Chen D, Hoffman JM, Knoer SJ, *et al*. Strategic Planning Advice for Pharmacy Departments in Hospitals and Health Systems Advisory Committee. *Am J Heal Pharm*. 2016;73:617-43.
9. Alomi YA, Alghamdi SJ, Alattiyh RA. Strategic Plan of General Administration of Pharmaceutical Care at Ministry of Health in Saudi Arabia 2012–2022. *J Pharm Pharm Sci*. 2015;1(3):1-8.
10. Alomi YA. National Pharmacy Practice Programs at Ministry of Health in Saudi Arabia. *J Pharm Pharm Sci*. 2015;1(2):17-8.
11. Leadership H. National Healthcare Leadership Survey Implementation of Best practices. Leadership. 2011; Available from: www.nchl.org.
12. 360 Degree Feedback Items List. Available from: <https://hr-survey.com/360FeedbackItemsList.htm>.

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