



ISSN Print: 2394-7500  
ISSN Online: 2394-5869  
Impact Factor: 8.4  
IJAR 2022; 8(10): 193-196  
[www.allresearchjournal.com](http://www.allresearchjournal.com)  
Received: 13-08-2022  
Accepted: 17-09-2022

Author's details are given below  
the reference section

## Assessment of the impact of the transformation of the directorate of health affairs into a health cluster and its impact on the quality of health services for the population of the city of Mecca

Nawaf M Alharbi, Saleh M Alharbi, Mohammed A Sulaimani, Ahmad A Alzhrani, Hani D Almaghthwi, Mohammed M Eissa, Ahmed M Badawi, Marie A Allihayni, Asaad S Almokhildi, Sameer M Albishri, Asim S Almoanna, Rakan B Aljuaid, Muhamad A Almazmumi, Suhail F Abutalib, Majdi S Almuanni, Asmah A Miswak, Amin O Alhendi, Zaid A Almalki, Fayes A Alshehri, Abdulrahman A Althubyani, Hatem M Fagieh, Raed M Rommani, Duaa A Alharbi, Salem N Alharbi, Samaher S Shaqra, Mohana A Alsolimy, Saeed N Alghamdi, Mohammed S Alghamdi, Saleh H Alzahrani, Faisal S Alharbi, Ahmed A Alsulami, Nawaf K Alotaibi, Talal M Alsarawani, Ramzi S Aldaadi, Abdulkriem A Malaka, Talat S Ghandurah, Dakheel S Almalki, Saleh J Almalki, Ashwaq M Alnazawi, Nawaf S Alharbi, Ghazi S Ashoor and Embark A Alsharef

DOI: <https://doi.org/10.22271/allresearch.2022.v8.i10c.10219>

### Abstract

The aim of the study is the importance of shifting from the Directorate of Health Affairs to the Health Cluster according to the cost of health services with high quality, and to give decision makers the ability to make the right decision by providing quality health services at a low cost to patients. An electronic questionnaire was distributed through social media (WhatsApp) because of social distancing and prevention. Crowding in public places (WhatsApp) for different neighborhoods of Makkah Announced 1,000 electronic questionnaires designed through Google Drive (random sample) via mobile phone groups for women and men from the age of 16 to over 65 years, and responses were received from about 650 people. Knowing that all participants are residents of the holy city of Makkah.

**Keywords:** Transformation, health cluster

### 1. Introduction

The Kingdom of Saudi Arabia is the biggest country in the Arabian Peninsula, with a landmass of 2250,000 square kilometers and an estimated 33.4 million population<sup>[4,5]</sup>, and it is considered an ability by the great powers and one of the world's top twenty economies<sup>[6]</sup>. The Kingdom espoused "Vision 2030" as a strategy for economic development and national growth. The vision demonstrated the Kingdom's objectives to become a major nation globally by achieving three main goals: a vibrant society, a thriving economy, and an aspirant nation. The history of health care facilities in the Kingdom is almost a century. The public health department was established first in Mecca in 1925<sup>[3]</sup>. After the second world war, the Saudi economy was growing due to the dramatic increase in oil production, and more health care infrastructure was built. In 1950, the MOH was formed with various healthcare institutions<sup>[9]</sup>. In the year 2018, Saudi Arabia had 75,225 beds in 484 hospitals, which was 22.5 beds/1 per 0,000 population. The total health budget reached 90 billion SR (9.2% of the total governmental budget) in 2018<sup>[5]</sup>. The Kingdom of Saudi Arabia has made notable progress in improving its population's health over recent decades, particularly in the areas of child and maternal mortality and the reduction of infectious diseases. Average life expectancy at birth improved from 64 years.

**Corresponding Author:**  
Nawaf M Alharbi  
Ministry of Health, Makkah,  
Saudi Arabia

In April 2016, the Kingdom launched its “Vision 2030”, comprised of 96 strategic goals, governed by several Key Performance Indicators (KPIs). A few initiatives, known as vision realization programs (VRPs) were developed in this regard and under, the different governmental private, and non-profit organizations’ implementation processes to achieve that goal.

A practical and governance integrated model was set up by the Council of Economic and Development Affairs to translate multiple “Vision 2030 VRPs working parallel to achieve the strategic objectives & realize the vision [7, 8] In June 2016, the National Transformation Program. (NTP) was launched as a VRP involving 24 government agencies to build the capacity and capabilities required to achieve the ambitious goals of “Vision 2030” [7, 8] With the growing population, the Saudi health sector faces enormous challenges and is undergoing significant reform. following regional and global trends. The First Theme of NTP is “Transform health care”. which aims to restructure the health sector to become an overall and useful system. A new MOC will raise public health that focuses on prevention and health awareness to ensure access to health services. Through optimal coverage, and equitable geographical distribution of society. It will, and comprehensive & expanded e-health services and digital solutions. Moreover, it will target the continuous improvement of health services by focusing on the beneficiaries’ experience and satisfaction in line with international standards and best practices [7, 8]. Leading organizations involved in health care transformation are the MOH, Saudi Health Council, King Faisal Specialist Hospital and Research Center, Saudi Food and Drug Authority, The Saudi Red Crescent Authority, and the Ministry of Education. Three significant challenges were identified in the health care system: 1) difficult access to health services, 2) limited quality and inefficient health services, and 3) inadequate preventive health care. Different strategies were developed to overcome these challenges. Firstly, to enhance the accessibility of health care services for the citizens, the plan was to expand health facilities, including improving infrastructure and increasing the numbers of beds and health care professionals. Adequate geographical distribution ensures affordable services, easy specialized consultation through workforce planning, redistributing responsibilities, improving referral system and appointments, and easy access to emergency medical care by promoting related medical professions were also planned in this regard. Secondly, to improve the quality and efficiency of health care services, the plan was to increase clinical effectiveness, enhance safety, improve patient experience, and improve sustainability and financial transparency. Finally, regarding promoting prevention against health risks, controlling communicable and non-communicable diseases, and improving readiness to confront health disasters [7, 8].

## 2. Material and Methods

This study was launched in (the city of Mecca in the kingdom of Saudi Arabia), began writing the research and then writing the questionnaire in May 2022, and the study ended with data collection in September 2022. The researcher used the descriptive analytical approach that uses a quantitative or qualitative description of the social phenomenon, (Assessment of the impact of the transformation of the Directorate of Health Affairs into a

health cluster and its impact on the quality of health services for the population of the city of Mecca). This type of study is characterized by analysis, reason, objectivity, and reality, as it is concerned with individuals and societies, as it studies the variables and their effects on the health of the individual, society, and consumer, the spread of diseases and their relationship to demographic variables such as age, gender, nationality, and marital status. Status, occupation, and use of the Office Group 2010 histogram for Excel to rank the results by dragging them on the statistical software [3].

## 3. Results and Discussion

A questionnaire is an important and useful tool for collecting a huge amount of data. However, researchers were not able to personally interview participants on the online survey, due to social distancing regulations at the time to prevent infection between participants and researchers and vice versa (not coronavirus participation completely disappearing from society). He only answered the questionnaire electronically, because the questionnaire consisted of thirteen questions, all of which were closed. The online approach has also been used to generate valid samples in similar studies in Saudi Arabia and elsewhere [2] Regarding the first question, which is I see that there is an improvement in the medical services provided in the hospitals and departments affiliated with them, the respondents who strongly agreed and those who did not know answered equally by 14.7%, agreeing 37.1%, disapproving 17.3%, and strongly disapproving 16.2%. As for The second question, I see that there is an improvement in the medical services provided in the health centers. The respondents answered strongly with a percentage of 16.4%, while those who agreed with a percentage of 37.9%, those who do not know and strongly disagree with a rate of 14.6%, and strongly disagreed with 16.4%. As for the third question, did the waiting period decrease or you were able to get an appointment soon to receive the service at the health center, the respondents answered “strongly agree” by 15.2%, while those who agreed with a rate of 29.3%, while those who did not know by 11.1%, strongly disagreed by 17.7%, and did not agree 26.8%. As for the fourth question, the waiting period has decreased or you were able to get an appointment soon to receive the service at the health center, the respondents answered “strongly agree” by 15.2%, while those who agreed with a rate of 29.3%, while those who did not know by 11.1%, strongly disagreed by 17.7%, and did not agree 26.8%. As for the fifth question, I was able to obtain the service of performing operations in the hospital in a very short time, the respondents answered strongly with a percentage of 10.7%, while those who agreed with a rate of 17.3%, while those who do not know with a percentage of 37.1% and strongly disagree with a percentage of 16.3%, and who do not agree with 18.3%. As for the sixth question, I was able to obtain service in the hospital inpatient service in a short time. The respondents answered strongly with a percentage of 10.6%, while those who agreed with a rate of 17.7%, while those who did not know 34.3%, strongly disagreed with 14.1%, and did not agree with 23.2%. As for The seventh question, I was able to detect and take treatment in a very short time in the emergency departments, the respondents answered strongly with a percentage of 14.1%, while those who agreed with a percentage of 31.8%, while those who did not know with a percentage of 14.6% and strongly disagreed by 19.2%, and who did not agree

with 20.2%. As for the eighth question, I was able to obtain the treatment that was prescribed to me from the pharmacies designated by the Ministry of Health in the private sector. The respondents answered strongly with a percentage of 19.8%, those who agreed with a percentage of 38.6%, while those who did not know with a percentage of 14.2% and strongly disagreed with a percentage of 14.7%, and 12.7% disagree. As for the ninth question, I was able to perform the required analyzes in the hospital's laboratories in a short time. The respondents who agreed and who did not know answered equally by 17.7%, while those who agreed with 38.4%, strongly disagreed with 9.6%, and disagree with

16.7%. As for the tenth question, I was able to get an appointment and get the required x-ray in a short time, the participants who strongly agreed and strongly disagreed answered 14.2% of those who did not know with a percentage of 26.4%, while those who agreed with a percentage of 23.9%, and those who did not agree with a percentage of 21.3%. (Table No.1) About the eleventh question, how satisfied are you with the health services provided to you in the hospital and health center? 39.4% are satisfied, 7% are very satisfied, 20.2% are neutral, 17.2% are dissatisfied, and 16.2% are very dissatisfied.

**Table 1:** People's trends and opinions about the quality of health services provided by health facilities in Mecca

Questions	S. Agree	Agree	Don't know	Disagree	S. disagree
I see an improvement in the medical services provided in the hospitals and their departments	14.7%	37.1%	14.7%	17.3%	16.2%
I see that there is an improvement in the medical services provided in health centers	16.4%	37.9%	14.6%	14.6%	14.6%
The waiting period decreased or you managed to get an appointment soon to receive the service at the health center	15.2%	29.3%	11.1%	17.7%	26.8%
I was able to obtain the service in the outpatient clinics of the hospital	13.1%	39.4%	17.7%	18.2%	11.6%
I was able to get the service in conducting operations in the hospital in a very short time	10.7%	17.3%	37.1%	18.3%	16.3%
I was able to get service in the hospital inpatient service in a short time	10.6%	17.7%	34.3%	23.2%	14.1%
I was able to detect and take treatment in a very short time in the emergency departments	14.1%	31.8%	14.6%	20.2%	19.2%
I was able to get the treatment that was prescribed to me from pharmacies designated by the Ministry of Health in the private sector	19.8%	38.6%	14.2%	12.7%	14.7%
I was able to perform the required analyzes in the laboratories of the hospital in a short time	17.7%	38.4%	17.7%	16.7%	9.6%
I was able to make an appointment and get the required x-rays in a short time	14.2%	23.9%	26.4%	21.3%	14.2%

#### 4. Conclusion

The state's decision to switch to a health cluster and its impact on the quality of health services provided to the residents of the city of Makkah, was for a purely economic purpose, in terms of providing a health service of high quality and at the lowest material costs. That the population agrees and is satisfied with all health services in terms of radiology appointments, laboratories, clinics, conducting operations, hypnotizing and taking treatment provided to them in health facilities (hospitals and health centers) with a request to improve them in the future so that they are fully approved and satisfied with them.

#### 5. Acknowledgment

To begin with, I would like to Praise God and thank Dr. Anas S. Dabool, from Umm Al-Qura University, Mecca, Saudi Arabia. And the researchers who make the project comes to light.

#### 6. References

1. Alserahy, Hassan Awad, *et al.* The thinking and scientific research, Scientific Publishing Center, King Abdul-Aziz University in Jeddah, the first edition; c2008.
2. Al Zoghbi, Muhammad, AlTalvah, Abas. Statistical system understanding and analysis of statistical data, first edition, Jordon- Amman; c2000.
3. Kadasah NA, Chirwa GC, *et al.* Knowledge, Attitude and Practice Toward COVID-19 Among the Public in the Kingdom of Saudi Arabia: A Cross-Sectional Study. *Front. Public Health.* 2020;8:217.
4. Walston S, Al-Harbi Y, Al-Omar B. The changing face of health care in Saudi Arabia. *Ann Saudi Med.* 2008;28(4):243-250243-250.
5. MOH. Statistical Yearbook 2018. Kingdom of Saudi, Arabia - Ministry of Health Portal. Saudi Arabia:

Ministry of Health [accessed 2022 15 September]. <https://www.MOH.gov.sa/en/Ministry/Statistics/book/Documents/book-Statistics.pdf>.

6. Economy of Saudi Arabia. Wikipedia [accessed 2022 15 September]. [https://en.wikipedia.org/wiki/Economy\\_of\\_Saudi\\_Arabia#cite\\_note-1](https://en.wikipedia.org/wiki/Economy_of_Saudi_Arabia#cite_note-1)
7. National Transformation Program. Saudi Vision 2030. Saudi Arabia [accessed 2022 September 15].
8. Saudi Vision 2030. Saudi Arabia. 2019 May 30 [accessed 2020 September 15]. [https://vision2030.gov.sa/sites/default/files/report/Saudi\\_Vision2030\\_EN\\_2017.pdf](https://vision2030.gov.sa/sites/default/files/report/Saudi_Vision2030_EN_2017.pdf)
9. Health care human resource development in Saudi Arabia: emerging challenges and opportunities – a critical review. *Public Health Rev.* 2019;40(1):1-16.

#### Authors Details

##### Nawaf M Alharbi

Ministry of Health, Makkah, Saudi Arabia

##### Saleh M Alharbi

Ministry of Health, Makkah, Saudi Arabia

##### Mohammed A Sulaimani

Ministry of Health, Makkah, Saudi Arabia

##### Ahmad A Alzhrani

Ministry of Health, Makkah, Saudi Arabia

##### Hani D Almaghthwi

Ministry of Health, Makkah, Saudi Arabia

##### Mohammed M Eissa

Ministry of Health, Makkah, Saudi Arabia

**Ahmed M Badawi**  
Ministry of Health, Makkah, Saudi Arabia

**Marie A Allihayni**  
Ministry of Health, Makkah, Saudi Arabia

**Asaad S Almokhildi**  
Ministry of Health, Makkah, Saudi Arabia

**Sameer M Albishri**  
Ministry of Health, Makkah, Saudi Arabia

**Asim S Almoanna**  
Ministry of Health, Makkah, Saudi Arabia

**Rakan B Aljuaid**  
Ministry of Health, Makkah, Saudi Arabia

**Muhamad A Almazmumi**  
Ministry of Health, Makkah, Saudi Arabia

**Suhail F Abutalib**  
Ministry of Health, Makkah, Saudi Arabia

**Majdi S Almuanni**  
Ministry of Health, Makkah, Saudi Arabia

**Asmah A Miswak**  
Ministry of Health, Makkah, Saudi Arabia

**Amin O Alhendi**  
Ministry of Health, Makkah, Saudi Arabia

**Zaid A Almalki**  
Ministry of Health, Makkah, Saudi Arabia

**Fayes A Alshehri**  
Ministry of Health, Makkah, Saudi Arabia

**Abdulrahman A Althubyan**  
Ministry of Health, Makkah, Saudi Arabia

**Hatem M Fagieh**  
Ministry of Health, Makkah, Saudi Arabia

**Raeed M Rommani**  
Ministry of Health, Makkah, Saudi Arabia

**Duaa A Alharbi**  
Ministry of Health, Makkah, Saudi Arabia

**Salem N Alharbi**  
Ministry of Health, Makkah, Saudi Arabia

**Samaher S Shaqra**  
Ministry of Health, Makkah, Saudi Arabia

**Mohana A Alsolimy**  
Ministry of Health, Makkah, Saudi Arabia

**Saeed N Alghamdi**  
Ministry of Health, Makkah, Saudi Arabia

**Mohammed S Alghamdi**  
Ministry of Health, Makkah, Saudi Arabia

**Saleh H Alzahrani**  
Ministry of Health, Makkah, Saudi Arabia

**Faisal S Alharbi**  
Ministry of Health, Makkah, Saudi Arabia

**Ahmed A Alsulami**  
Ministry of Health, Makkah, Saudi Arabia

**Nawaf K Alotaibi**  
Ministry of Health, Makkah, Saudi Arabia

**Talal M Alsarawani**  
Ministry of Health, Makkah, Saudi Arabia

**Ramzi S Aldaadi**  
Ministry of Health, Makkah, Saudi Arabia

**Abdualkriem A Malaka**  
Ministry of Health, Makkah, Saudi Arabia

**Talat S Ghandurah**  
Ministry of Health, Makkah, Saudi Arabia

**Dakheel S Almalki**  
Ministry of Health, Makkah, Saudi Arabia

**Saleh J Almalki**  
Ministry of Health, Jeddah, Directorate of  
Health Affairs in Jeddah

**Ashwaq M Alnazawi**  
Ministry of Health, Makkah, Saudi Arabia

**Nawaf S Alharbi**  
Ministry of Health, Makkah, Saudi Arabia

**Ghazi S Ashoor**  
Ministry of Health, Makkah, Saudi Arabia

**Embark A Alsharef**  
Ministry of Health, Makkah, Saudi Arabia