# Providers of Medical Services in the Governmental Healthcare Sector in the Kingdom of Saudi Arabia: Knowledge of Healthcare Quality Standards

Saleh Omair Humaid Almutairi<sup>1</sup>, Mashal Ghannam Sarah<sup>2</sup>, Meshari Salem Alrehaili<sup>3</sup>, Ahmed Habs Alotaib<sup>4</sup>, Sattam Saleh Ahmed Abu Kamis<sup>5</sup>, Mutlaq majed mutlaq Alqahtani<sup>6</sup>, Rowida Faisal Alhakeem<sup>7</sup>, Talal Ali Hamdan Alghamdi<sup>8</sup>, Hisham Suliman Alshedoukhy<sup>9</sup>, Ahmed Aziz Alanazi<sup>10</sup>, Mona Mokbel Alhabardi<sup>11</sup>, Abed Awadh Ismail Almutairi<sup>12</sup>, Fahad Mohammad Alharbi<sup>13</sup>, Taleb Waseem Barakah Almutairi<sup>14</sup>, Madawy Falah Alharbi<sup>15</sup>, Shamma Rasheed Nasser Mohammed AL-suaraan<sup>16</sup>, Wejdan Dubays Muneer Alotaibi<sup>17</sup>, Abdulmohsen Salem Almutairi<sup>18</sup>

- Saleh Omair Humaid Almutairi, Medical Records, King Khalid Hospital in Alkharj. Ministry of Health, Kingdom of Saudi Arabia. Mu6air@gmail.com
- Mashal Ghannam Sarah, Operating Room Technician, King Khaled Hospital in Al-Majma'ah, Ministry of Health, Kingdom of Saudi Arabia.

meshga88@gmail.com

- Meshari Salem Alrehaili, Epidemiology Technician, prince Mohammed bin Abdulaziz Hospital, Ministry of Health, Kingdom of Saudi Arabia. kingdom of Saudi Arabia. mesharixzn@gmail.com
- <sup>4.</sup> Ahmed Habs Alotaibi, Epidemiology Technician, prince Mohammed bin Abdulaziz Hospital, Ministry of Health, Kingdom of Saudi Arabia.

a7med41@hotmail.com

Sattam Saleh Ahmed Abu Kamis, Epidemiology Technician, King Salman Hospital in Riyadh, Ministry of Health, Kingdom of Saudi Arabia.

Sattam050@hotmail.com

Mutlaq Majed Mutlaq Alqahtani, Pharmacy Technician, Al-Muzahmiya General Hospital, Ministry of Health, Kingdom of Saudi Arabia.
MCIO 2 Characida arabia.

M6l8 8@hotmail.com

- Rowida Faisal Alhakeem, Pharmacist, King Saud Medical City, Ministry of Health, Kingdom of Saudi Arabia. roroalhakeem@gmail.com
- Talal Ali Hamdan Alghamdi, Pharmacist, Al-Iman General Hospital, Ministry of Health, Kingdom of Saudi Arabia. Talal.ph20@gmail.com
- 9. Hisham Suliman Alshedoukhy, Epidemiology Technician, prince Mohammed bin Abdulaziz Hospital, Ministry of Health, kingdom of Saudi Arabia.

halshudukhi@gmail.com

- Ahmed Aziz Alanazi, emergency medical services, Al-Iman General Hospital, Ministry of Health, Kingdom of Saudi Arabia. Re77aa@gmail.com
- Mona Mokbel Alhabardi, MD. Laboratory, Ministry of Health, Kingdom of Saudi Arabia.

Malhabardi@moh.gov.sa

- Abed Awadh Ismail Almutairi, Nursing, prince Mohammad bin abdulaziz, Ministry of Health, Kingdom of Saudi Arabia. Aalmutairi376@moh.gov.sa
- Fahad Mohammad Alharbi, Technician-Dental Technology, Riyadh Specialized Dental Center, Ministry of Health, Kingdom of Saudi Arabia. F.h-111@hotmail.com
- Taleb Waseem Barakah Almutairi, Technician-Dental Technology, Riyadh Specialized Dental Center, Ministry of Health, Kingdom of Saudi Arabia. Talebwas@hotmail.com
  - Madawy Falah Alharbi, Nursing Technician, Hail health cluster, Ministry of Health, Kingdom of Saudi Arabia. madawyfa@moh.gov.sa
- Shamma Rasheed Nasser Mohammed AL-suaraan, Nursing Technician, King Saud Medical City, Ministry of Health, Kingdom of Saudi Arabia.

salsuaraan@moh.gov.sa

- Wejdan Dubays Muneer Alotaibi, Nursing Specialist, Qassim Health Cluster, Ministry of Health, Kingdom of Saudi Arabia. Walotaidi@moh.gov.sa
- Abdulmohsen Salem Almutairi, Nursing, King Saud Medical City, Medical Tower, CCD, Ministry of Health, Kingdom of Saudi Arabia.
  Abdulmohsensalem3@gmail.com

#### Abstract:

The study aimed to assess the knowledge of healthcare providers regarding healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia. The study utilized a descriptive survey methodology to achieve its objectives. The study sample consisted of 464 healthcare professionals working in the governmental healthcare sector in Saudi Arabia. A questionnaire was used as the data collection tool. The study found a statistically significant positive correlation (p-value < 0.01) between healthcare providers' knowledge of healthcare quality standards and the quality of healthcare services, with a Pearson correlation coefficient of 0.751, indicating a strong positive relationship. Based on the study results, the study recommends several actions. Firstly, hospital management should inform patients about the value of their medical bills before initiating service procedures. Secondly, healthcare providers should develop plans and strategies for infection prevention and control for patients. Thirdly, hospital management should provide educational leaflets before conducting tests and required radiological imaging for patients, ensuring patients can easily access their medical information.

## **Keywords**

 Healthcare providers - Healthcare quality standards - Governmental healthcare sector -Kingdom of Saudi Arabia.

## Introduction

Given the ongoing developments in various fields of political, economic, and social life globally, coupled with the cognitive and technological revolution, the world has become a small village. This has led many sectors and institutions to focus on the quality of services they provide (Algerian et al., 2011).

Human health is the main focus of all healthcare institutions. Therefore, improving individuals' health status has made quality in healthcare services a global, regional, and local concern. The current era witnesses rapid and continuous changes in the provision and development of healthcare services. This requires ongoing changes in the healthcare sector to maintain a better level of service provided to patients by healthcare providers. Achieving this necessitates increased efforts by healthcare organizations to provide high-quality

healthcare services that meet international standards and fulfill patients' needs (Al-Bakri, 2005).

Healthcare institutions seek to enhance their services and performance by following various local and international strategies and standards to achieve excellence in service provision by healthcare providers within these institutions. Emphasizing quality is one of the main goals of healthcare institutions, which requires healthcare providers' mastery of quality standards to enhance the professional level of medical staff at all levels. This is achieved through providing high-quality medical services, meeting customers' requirements, expectations, and needs, both declared and undeclared, by healthcare institutions. Quality is considered a priority for organizational leadership to enhance productivity levels. Quality is the primary driver for all institutions in general and healthcare institutions in particular to achieve a competitive advantage by implementing quality standards.

Interest in service quality lies in utilizing scientific methods and modern statistical techniques to apply quality management programs, as well as establishing appropriate standards, evaluating performance levels, and maintaining high levels of administrative, technical, and medical performance for all healthcare providers. Healthcare providers must master their knowledge of medical quality standards and apply them in providing services within medical institutions (Algerian et al., 2011). Therefore, this study seeks to understand the extent of healthcare providers' knowledge and familiarity with healthcare quality standards.

#### Research Problem:

Due to the importance of the quality of medical services provided by healthcare institutions and the increased interest of international and local health organizations and bodies in the importance of medical service quality in light of various healthcare quality standards, several healthcare facilities have observed problems related to healthcare service quality, providers' lack of knowledge about the required service quality, and the absence of application of agreed-upon healthcare standards by specialized bodies and organizations. This necessitates understanding the extent of medical service providers' awareness of healthcare quality standards, their application in reality, and their impact on the quality of services provided by medical service providers. Therefore, the research problem can be summarized in the following question:

What is the extent of healthcare providers' knowledge of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia?

# The importance of the study

The importance of the study can be divided into theoretical and practical importance:

- 1. Theoretical Importance:
- Understanding the opinions and attitudes of medical service providers towards the level of healthcare quality in the governmental healthcare sector in Saudi Arabia.
- Enriching libraries with a new topic, which is understanding the extent of medical service providers' awareness of healthcare quality standards in hospitals in general and Buraidah Central Hospital in particular.
- 2. Practical Importance:
- The significance of healthcare quality in hospital management for stakeholders and researchers in this field, as quality is a focal point for organizations in general and the healthcare sector in particular.
- Increasing awareness among healthcare workers and healthcare facilities about the importance of knowing healthcare quality standards, applying them during patient service across different levels, and focusing on providing high-quality service.
- Providing recommendations for all healthcare providers about the standards that contribute to improving the quality of services in healthcare facilities.
- Contributing to enhancing the quality of services in government hospitals and developing them through raising awareness about quality standards at global and local levels.
   Research Questions:

The study aims to answer the following questions:

- What is the current status of healthcare quality standards in the governmental healthcare sector in Saudi Arabia?
- To what extent are medical service providers aware of healthcare quality standards in the governmental healthcare sector in Saudi Arabia?
- How much do medical service providers apply healthcare quality standards in the governmental healthcare sector in Saudi Arabia?

Study Hypothesis:

There is a statistically significant relationship at a significance level of 0.05 between medical service providers' awareness of

healthcare quality standards and the quality of healthcare services.

Study Objectives:

The study aims to:

- Determine the current status of healthcare quality standards in the governmental healthcare sector in Saudi Arabia.
- Assess medical service providers' awareness of healthcare quality standards in the governmental healthcare sector in Saudi Arabia.
- Evaluate the extent to which medical service providers apply healthcare quality standards in the governmental healthcare sector in Saudi Arabia.

## **Research Methodology:**

The researcher used a descriptive approach due to its suitability for the study's nature and objectives. The descriptive method involves querying all members of the research community or a large sample of them to describe the phenomenon under study in terms of its nature and degree of existence without going beyond that to study the relationship or infer causes.

Study Population and Sample:

The study population consists of medical service providers in the governmental healthcare sector in Saudi Arabia. Due to the difficulty of determining the sample size because of its large number, the questionnaire was distributed to this number, and the number of valid returned questionnaires for analysis was 464.

Characteristics of Study Participants:

The study has arrived at the following results based on the study's questions and objectives:

Firstly, Personal Data: Below is the presentation of general information about the study sample (464 individuals), focusing on their personal information as answered in the first part of the questionnaire, categorized as follows:

Table (1): Distribution of Study Participants by Gender Variable

Gender	Frequency	Percentage
Male	310	68
Female	154	32
Total	464	100

The table shows the distribution of study participants by gender, with (68%) of the participants being males, making them the majority in the study sample, while (32%) of the participants were females.

## Job Title:

Table (2) shows the distribution of study participants according to their job title.

Job	Frequency	Percentage
Administrative	176	38
Doctor/Pharmacist	60	13
Technician	144	31
Nurse	84	18
Total	464	100

Table (2) displays the distribution of study participants according to the job title, revealing that (37.9%) of the study sample held administrative positions, making them the largest category in the study sample. Meanwhile, (12.9%) of the participants were doctors, whereas (31%) held technician positions, and (18.1%) of the total study participants were nurses.

## Years of Experience:

Table (3) illustrates the distribution of study participants according to the variable of years of experience.

Years of Experience	Frequency	Percentage
1-5 years	72	16
6-10 years	124	27
11-15 years	144	31
16-25 years	124	27
Total	464	100

Table (3) shows the distribution of study participants according to years of experience. It indicates that (16%) of the study participants had 1-5 years of experience, while (27%) had 6-10 years of experience. Moreover, (31%) of the study participants had 11-15 years of experience, and (27%) had 16-25 years of experience, making them the largest category in the study sample.

**Number of Training Courses Attended:** 

Table (4) illustrates the distribution of study participants according to the variable of the number of training courses attended.

Number of Training Courses	Frequency	Percentage
None	80	17
1-3 training courses	120	26
4-7 training courses	92	20
8-10 training courses	172	37
Total	464	100

Table (5) presents the distribution of study participants according to the variable of the number of training courses attended. It shows that (17%) did not receive any training courses, while (26%) of the participants had 1-3 training courses. Additionally, (20%) had 4-7 training courses, and (37%) of the total study participants had 8-10 training courses, making them the largest category in the study sample.

# Type of Contract:

Table (5) shows the distribution of study participants according to the type of contract.

Contract Type	Frequency	Percentage
Self-Employment	152	33
Civil Service	312	67
Total	464	100

Table (8) illustrates the distribution of study participants according to the type of contract. It shows that (32.8%) of the study sample had a self-employment contract, while (67.2%) of the study participants had a civil service contract.

## Study Instrument:

Based on the nature of the data and the methodology used in the study, the researcher found that the most suitable instrument to achieve the objectives of this study is a questionnaire. The study instrument was developed by referring to the literature and previous studies related to the study topic.

Validity of the Study Instrument:

# - Face Validity of the Instrument:

To verify the face validity, the questionnaire was presented to a number of experts who are faculty members in the Business Administration department and are interested in the study field. Their opinions and suggestions were gathered regarding the importance of the statements, their clarity, appropriateness for measuring the intended constructs, and suitability for the study's objectives. Based on the feedback and

suggestions received, necessary modifications were made, including revising some statements and removing others. The final version of the questionnaire was then approved for use.

- Internal Consistency Reliability of the Instrument:

To ensure internal consistency reliability, Pearson correlation coefficients were calculated between each statement in the questionnaire and the total score of the construct it belongs to. The following two tables illustrate these coefficients.

Table (6) presents the Pearson correlation coefficients for the statements of the study instrument with the total score of each construct.

	The reality of healthcare quality standards in the government healthcare sector in the Kingdom of Saudi Arabia										
Phrase	Correlation	Phrase	Correlation	Phrase	Correlation	Phrase	Correlation	Phrase	Correlation		
No.	Coefficient	No.	Coefficient	No.	Coefficient	No.	Coefficient	No.	Coefficient		
Fir	First Axis Second Axis		Th	Third Axis		Fourth Axis		th Axis			
1	0.721**	1	0.802**	1	0.751**	1	0.840**	1	0.776**		
2	0729**	2	0.805**	2	0.709**	2	0.780**	2	0.883**		
3	0.766**	3	0.794**	3	0.625**	3	0.687**	3	0.844**		
4	0.688**	4	0.749**	4	0.747**	4	0.702**	4	0.661**		
5	0.744**	5	0.729**					5	0.910**		
6	0.761**	6	0.740**					6	0.555**		
7	0.782**		•	•				•			

<sup>\*\*</sup>At a significance level of 0.01 or less,

Table (6) shows that all statements are statistically significant, indicating high internal consistency coefficients. This suggests high and sufficient validity indicators that can be trusted in applying the study instrument.

Table (7) presents the Pearson correlation coefficients for the items of the constructs with the total score of each construct.

The level of awareness of healthcare providers about quality health standards in the government healthcare sector in the Kingdom of .Saudi Arabia  Phrase  Correlation Coefficient  1 0.304** 1 0.518** 2 0.364** 2 0.330** 3 0.547** 3 0.830** 4 0.675** 4 0.873**								
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.Saudi Arabia         .the Kingdom of Saudi Arabia           Phrase         Correlation Coefficient         Ph ras e         Correlation Coefficient           1         0.304**         1         0.518**           2         0.364**         2         0.330**           3         0.547**         3         0.830**	II -		-	•				
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Phrase         Coefficient         ras e         Correlation Coefficient           1         0.304**         1         0.518**           2         0.364**         2         0.330**           3         0.547**         3         0.830**		Correlation	Ph					
e 1 0.304** 1 0.518** 2 0.364** 2 0.330** 3 0.547** 3 0.830**	Phrase		ras	Correlation Coefficient				
2 0.364** 2 0.330** 3 0.547** 3 0.830**		Cocmercia	е					
3 0.547** 3 0.830**	1	0.304**	1	0.518**				
	2	0.364**	2	0.330**				
4 0.675** 4 0.873**	3	0.547**	3	0.830**				
	4	0.675**	4	0.873**				
5 0.413** 5 0.641**	5	0.413**	5	0.641**				
6 0.326** 6 0.734**	6	0.326**	6	0.734**				
7 0.825** 7 0.668**	7	0.825**	7	0.668**				
8 0.438** 8 0.642**	8	0.438**	8	0.642**				
9 0.572** 9 0.901**	9	0.572**	9	0.901**				
10 0.692** 10 0.462**	10	0.692**	10	0.462**				
11 0.871** 11 0.633**	11	0.871**	11	0.633**				

The level of av	vareness of	Proposals that contribute to				
healthcare pro	viders about	increasing the knowledge of				
quality health	standards in	healthcare providers about				
the governmen	t healthcare	quality health standards in the				
sector in the I	Kingdom of	government healthcare sector in				
.Saudi A	rabia	.tł	ne Kingdom of Saudi Arabia			
	Correlation	Ph				
Phrase	Coefficient	ras	Correlation Coefficient			
	Cocmicient	е				
12	0.890**	12	0.587**			

<sup>\*\*</sup>Significant at the 0.01 level

Table (7) shows that all statements are significant at the 0.01 level, indicating high internal consistency coefficients. This suggests high and sufficient validity indicators that can be trusted in the application of the current study.

Reliability of the Study Instrument:

To measure the reliability of the study instrument (survey), the Cronbach's alpha coefficient was used. Table (8) presents the Cronbach's alpha coefficient for measuring the reliability of the study instrument constructs.

Table (8) - Cronbach's Alpha Coefficient for Measuring the Reliability of the Study Instrument

Axes and Dimensions of the	Phrases	Axis	
Survey	No.	Stability	
The current status of healthcare			
quality standards in the	28	0.801	
government healthcare sector	20	0.801	
in the Kingdom of Saudi Arabia			
The extent of awareness of			
healthcare providers about			
quality health standards in the	12	0.990	
government healthcare sector			
in the Kingdom of Saudi Arabia			
Proposals that contribute to			
increasing the knowledge of			
healthcare providers about	12	0.661	
quality health standards in the	12	0.001	
government healthcare sector			
in the Kingdom of Saudi Arabia			
Overall Reliability	52	0.882	

The table (8) demonstrates that the study instrument enjoys statistically acceptable reliability. The overall reliability of the study was 0.88, while the reliability coefficients of the study instrument ranged between 0.80 to 0.99 to 0.66. These are high reliability coefficients that can be trusted in applying the study instrument.

**Statistical Processing Methods:** 

To achieve the study objectives and analyze the collected data, several appropriate statistical methods were used using the Statistical Package for Social Sciences (SPSS) software. The data were coded and entered into the computer.

To determine the length of the Likert scale cells (lower and upper bounds) used in the study constructs, the range was calculated (5-1=4), then divided by the number of scale cells to obtain the correct cell length (4/5= 0.80). This value was added to the lowest value in the scale (or the start of the scale, which is 1.00) to determine the upper limit of this cell. Consequently, the cell lengths became as follows:

- From 1.00 to 1.80 represents (Strongly Disagree) towards each statement in the different constructs to be measured.
- From 1.81 to 2.60 represents (Disagree) towards each statement in the different constructs to be measured.
- From 2.61 to 3.40 represents (Neutral) towards each statement in the different constructs to be measured.
- From 3.41 to 4.20 represents (Agree) towards each statement in the different constructs to be measured.
- From 4.21 to 5.00 represents (Strongly Agree) towards each statement in the different constructs to be measured.

The frequencies and percentages were calculated to understand the respondents' responses to the main statements included in the study instrument. Then, the following statistical measures were computed:

- Mean: to determine the average response of the study participants to the study questions. It helps in ranking the statements based on their weighted average.
- Standard Deviation: to understand the spread or dispersion of respondents' responses to each statement in the study constructs from their mean. A smaller standard deviation indicates a concentration of responses.
- Pearson Correlation Coefficient: to determine the degree of correlation between each question of the study.
- Cronbach's Alpha: to test the stability of the study instrument.
- Pearson Correlation Coefficient: to test the study hypotheses.

Analysis and Interpretation of Study Results:

Answering the first question: What is the current status of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia?

To understand the perspective of healthcare providers at Buraidah Central Hospital, the arithmetic means, standard deviations, and ranks of responses were calculated regarding the current status of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia from the viewpoint of healthcare providers at Buraidah Central Hospital. The detailed results related to the study dimensions are as follows:

# 1. Quality related to patients' rights:

To understand the status of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia concerning patients' rights from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of study participants regarding statements related to the quality dimension of patients' rights from the viewpoint of healthcare providers at Buraidah Central Hospital. The detailed results are presented in the following table:

Table (9): Study participants' responses to statements related to the quality dimension of patients' rights based on agreement averages.

	agreement ave									
		F	ا	Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	The hospital	F	74	38	4	0	0			
6	obtains the patient's consent when needed for receiving treatment or undergoing surgery by healthcare providers.	%	63.8	32.8	3.4	0	0	4.59	0.56	1
	The hospital	F	71	31	13	1	0			
2	maintains patient confidentiality and privacy of their information.	%	61.2	26.7	11.2	0.9	0	4.47	0.73	2
	The hospital	F	56	49	9	2	0			
1	provides appropriate and safe treatment for all patients.	%	48.3	42.2	7.8	1.7	0	4.36	70.	3
4	Healthcare providers at	F %	56 48.3	40 34.5	16 13.8	3 2.6	1 0.9	4.25	0.86	4

		F Degree of Approval								
No.	Phrases	Percentage	Strongly Agree		Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	the hospital provide all necessary information, tests, and diagnoses for patients.									
	The hospital	F	53	43	17	3	0			
5	and healthcare providers respect patients' appointment times.	%	45.7	37.1	14.7	2.6	0	4.25	0.80	5
	Patients are	F	56	33	24	3	0			
3	informed about the identity of the doctor and healthcare providers taking care of them.	%	48.3	28.4	20.7	2.6	0	4.20	0.86	6
	The hospital	F	55	34	17	5	5			
7	informs patients about the cost of services before initiating patient care procedures.	%	47.4	29.3	14.7	4.3	4.3	4.07	1.09	7
	The over	all ave	erage o	f the a	xis			4.31	0.8	0

Based on the results in Table (9), it is evident that the study participants strongly agree with statements regarding the quality dimension of patients' rights in the governmental healthcare sector in the Kingdom of Saudi Arabia, with an average of 4.31. The results also indicate a convergence in the agreement among study participants on statements related to the quality dimension of patients' rights, with average scores ranging from 4.59 to 4.07, falling in the fourth and fifth categories of the five-point scale. These categories represent strong agreement to agreement with the study tool, indicating

variation in viewpoints regarding the agreement of study participants on statements related to the quality dimension of patients' rights, which are arranged as follows:

- phrase number (6), "The hospital obtains patient consent when necessary for receiving treatment or undergoing surgery by healthcare providers," ranked second in terms of strong agreement among study participants, with an average of 4.59 and a standard deviation of 0.56. This result highlights the importance of obtaining patient consent when needed for treatment or surgical procedures by healthcare providers.
- phrase number (2), "The hospital maintains patient confidentiality and privacy of their information," ranked second in terms of strong agreement among study participants, with an average of 4.47 and a standard deviation of 0.73.
- phrase number (1), "The hospital provides appropriate and safe treatment for all patients," ranked third in terms of strong agreement among study participants, with an average of 4.36 and a standard deviation of 0.70.
- phrase number (7), "The hospital informs the patient of the invoice amount before starting service provision," ranked last in terms of agreement among study participants, with an average of 4.07, indicating the researcher's view on the hospital's necessity to inform patients about the invoice amount before starting service provision.

Secondly: Infection Prevention and Control:

To understand the status of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia regarding infection prevention and control from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of study participants on statements related to the dimension of infection prevention and control. The detailed results are presented in the following table:

Table (10): Study participants' responses to statements related to the dimension of infection prevention and control based on agreement averages.

		F	De	gree	of Ap	prov	/al			
N o.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	Standard Deviation	Rank
	The	F	67	34	13	1	1			
5	hospital ensures the availabilit y of hand sanitizers in every patient room and in all departme nts.	%	57.8	29 3.	11 2.	0 9	0.9	4.4 2	0.79	1
	Healthcar	F	66	34	13	2	1			
1	e providers in the hospital maintain hand hygiene when providing services.	%	56.9	29 3.	11 2.	1 . 7	0.9	4.4 0	0.82	2
	The	F	62	41	9	2	2			
2	hospital isolates patients from others for infection preventio n purposes if necessary	%	53.4	35 3.	7. 8	1 . 7	1.7	4.3 7	0.84	3
	Medical	F	56	38	18	2	2			
4	and non- medical tools for infection control policies are available and applied.	%	48.3	32 8.	15 5.	1 . 7	1.7	4.2	0.90	4

		F	De	gree	of Ap	prov	/al			
N o.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	Standard Deviation	Rank
	The	F	55	39	14	6	2			
6	hospital monitors cleanlines s staff at all times in all hospital facilities.	%	47.4	33 6.	12 1.	5 2	1.2	4.2 0	0.96	5
	Medical	F	53	39	19	2	3			
3	providers explain infection preventio n and control plans to patients.	%	45.7	33 6.	16 4.	1 7	2.6	4.1 8	0.94	6
	The o	veral	averag	e of t	he ax	is		4.3 0	0.87	7

Through the results presented in Table (10), it is evident that the study participants strongly agree with the reality of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia regarding infection prevention and control, with an arithmetic mean of 4.30. The results above indicate a homogeneity in the agreement among study participants, with average scores ranging from 4.42 to 4.18, falling in the fourth and fifth categories of the five-point scale, indicating strong agreement to agreement with the study tool. This demonstrates consistency in the agreement among study participants regarding infection prevention and control from the viewpoint of healthcare providers at Buraidah Central Hospital, which are ranked as follows:

- Statement number (5), "The hospital ensures the availability of hand sanitizers for every patient room and in all departments," ranked first in terms of strong agreement among study participants, with an arithmetic mean of 4.42. The researcher attributes this to the awareness of healthcare providers about the necessity of providing hand sanitizers for every patient room and in all departments.
- phrase number (1), "Healthcare providers at the hospital ensure cleanliness of their hands when providing

services," ranked second in terms of strong agreement among study participants, with an arithmetic mean of 4.40.

- phrase number (2), "The hospital isolates patients from other patients for preventive purposes if necessary," ranked third in terms of strong agreement among study participants, with an arithmetic mean of 4.37.
- phrase number (3), "Healthcare providers explain infection prevention and control plans to patients," ranked last in terms of agreement among study participants, with an arithmetic mean of 4.18. The researcher attributes this to the necessity for healthcare providers to focus on explaining infection prevention and control plans to patients.

Thirdly: Education and Training:

To understand the status of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia regarding the availability of education and training from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of study participants on statements related to the dimension of education and training. The detailed results are presented in the following table:

Table (11): Study participants' responses to statements related to the dimension of education and training, ranked in descending order based on agreement averages.

		F		Degree	of App	roval				
No.	Phrases	Percentage	ıgly		Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	The	F	46	49	13	7	1			
1	hospital provides informative materials to introduce available services.	%	39.7	42.2	11.2	6	0.9	4.14	0.90	1
	Service	F	48	41	19	6	2			
4	providers explain the patient's medical history,	%	41.4	35.3	16.4	5.2	1.7	4.09	0.96	2

		F	l	Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	prevention methods, and treatment options.									
	The	F	40	45	25	6	0			
2	hospital offers training courses for healthcare providers.	%	34.5	38.8	21.6	5.2	0	4.03	0.87	3
	Educational	F	40	43	27	6	0			
3	brochures are provided before conducting necessary tests and imaging for patients.	%	34.5	37.1	23.3	5.2	0	4.01	0.89	4
	The o	verall	averag	ge of th	e axis			4.06	0.9	0

Through the results in Table (11), it is evident that the reality of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia in terms of education and training from the viewpoint of healthcare providers came with an arithmetic mean of 4.06. This arithmetic mean falls within the range indicating agreement. Additionally, the results above show variability in the agreement among study participants regarding education and training, with average scores ranging from 4.14 to 4.01, falling in the fourth category of the five-point scale, indicating agreement with the study tool. This indicates consistency in the agreement among study participants regarding education and training, which are ranked in descending order based on agreement as follows:

- phrase number (1), "The hospital provides informative materials to introduce available services," ranked first in terms of agreement among study participants with an agreement average of 4.14. This result reflects the importance for

hospitals, specifically Buraidah Central Hospital, to provide informative materials introducing their available services.

- phrase number (4), "Healthcare providers explain patients' medical history, preventive measures, and treatment," ranked second in terms of agreement among study participants with an agreement average of 4.09.
- phrase number (2), "The hospital provides training courses for healthcare providers," ranked third in terms of agreement among study participants with an agreement average of 4.03.
- phrase number (3), "Information brochures are provided before conducting necessary tests and radiological images for patients," ranked last in terms of agreement among study participants with an agreement average of 4.01. This result highlights the necessity for informative brochures in the governmental healthcare sector in Saudi Arabia before conducting necessary tests and radiological images for patients.

Fourthly: Medical Records and Information Management:

To understand the reality of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia regarding medical records and information management from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of study participants on statements related to the dimension of medical records and information management. The detailed results are presented in the following table:

Table (12): Study participants' responses to statements related to the dimension of medical records and information management, ranked in descending order based on agreement averages.

		F		Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	The hospital	F	64	36	15	1	0			
4	maintains confidentiality of patient information.	%	55.2	31	12.9	0.9	0	4.43	0.71	1
	The hospital	F	61	43	11	1	0	_	_	
1	provides easy access to	%	52.6	37.1	9.5	0.9	0	4.41	0.69	2

		F	[	Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	patients' medical records.									
	Patients are	F	58	43	15	0	0			
3	given a summary of their medical condition upon discharge.	χ.	50	37.1	12.9	0	0	4.37	0.70	4
	Patients can	F	51	53	10	2	0			
2	easily access their own medical information.	Х	44	45.7	8.6	1.7	0	4.32	0.70	3
	The ov	erall a	verage	of the	axis			4.38	0.7	0

Through the results in Table (12), it is evident that the viewpoint of healthcare providers at Buraidah Central Hospital has an arithmetic mean of 4.38. This arithmetic mean falls within the range indicating strong agreement regarding medical records and information management. Additionally, the results above show consistency in the agreement among study participants regarding medical records and information management, with average scores ranging from 4.43 to 4.32, falling in the fifth category of the five-point scale, which indicates strong agreement. This demonstrates consistency in the agreement among study participants regarding medical records and information management, ranked in descending order based on agreement as follows:

- phrase number (4), "The hospital maintains the confidentiality of patient information," ranked first in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.43. This result reflects the awareness of healthcare providers at Buraidah Central Hospital about the importance of maintaining patient information confidentiality.
- phrase number (1), "The hospital provides patients' medical records easily," ranked second in terms of agreement

among study participants with strong agreement and an arithmetic mean of 4.41.

- phrase number (3), "Patients are provided with a summary of their medical condition upon discharge," ranked third in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.37.
- phrase number (2), "Patients can easily access their medical information," ranked last in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.32. This result emphasizes the necessity for patients to have easy access to their medical information. Fifthly: Continuous Improvement:

To understand the reality of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia regarding continuous improvement from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of study participants on statements related to the dimension of continuous improvement. The detailed results are presented in the following table:

Table (13): Study participants' responses to statements related to the dimension of continuous improvement, ranked in descending order based on agreement averages.

		F		Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree		Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	The hospital	F	60	44	11	1	0			
1	prioritizes "patients' interests" at the forefront of management and healthcare providers' concerns.	%	51.7	37.9	9.5	0.9	0	4.41	0.69	1
	The hospital	F	47	49	18	1	1			
3	provides clear informational boards.	%	40.5	42.2	15.5	0.9	0.9	4.21	0.79	2
2		F	44	50	18	4	0	4.16	0.80	3

		F	Į.	Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	Hospital staff respond promptly and efficiently to patients' inquiries and questions.	%	37.9	43.1	15.5	3.4	0			
7	There is always someone responsible available to resolve problems and assist patients.	, У.	37.9	40.5	17.2	3.4	0.9	4.11	0.87	4
6	All hospital facilities are clean, and the buildings are well-maintained.	, '.	39.7	47	15	3.4	3.4	4.09	0.98	5
5	The hospital provides comfortable waiting and seating areas for patients.	F	36.2	51 44	18	1.7	2.6	4.09	0.90	6
	The hospital	F	43	44	23	4	2			
4	offers suggestion boxes for patient complaints and feedback.	%	37.1	37.9	19.8	3.4	1.7	4.05	0.93	7
	The ov	erall a	verage	of the	axis			4.16	0.8	5

Through the results in Table (13), it is evident that the reality of healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia, regarding continuous improvement from the viewpoint of healthcare providers, has an arithmetic mean of 4.16. This arithmetic mean falls within

the range indicating agreement. Additionally, the results above show variability in the agreement among study participants regarding the dimension of continuous improvement, with average scores ranging from 4.41 to 4.05, falling in the fourth and third categories of the five-point scale, indicating strong agreement to agreement. This variability in agreement among study participants on the level of continuous improvement is ranked in descending order based on agreement as follows:

- phrase number (1), "The hospital prioritizes 'patient' interests in the management and healthcare providers' concerns," ranked first in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.41. This result indicates the awareness of healthcare providers at Buraidah Central Hospital about the importance of prioritizing patient interests in management.
- phrase number (3), "The hospital provides clear guidance signs," ranked second in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.21. This result highlights the role of guidance signs for patients in the hospital.
- phrase number (2), "Hospital staff respond quickly and efficiently to patient inquiries and questions," ranked third in terms of agreement among study participants with agreement and an arithmetic mean of 4.16.
- phrase number (5), "The hospital provides comfortable waiting and seating areas for patients," ranked last in terms of agreement among study participants with agreement and an arithmetic mean of 4.09. This result emphasizes the necessity for the hospital to provide comfortable waiting and seating areas for patients.
- phrase number (4), "The hospital provides boxes for patients' complaints and suggestions," ranked last in terms of agreement among study participants with agreement and an arithmetic mean of 4.05. This result indicates the necessity for there to be boxes for patients' complaints and suggestions.

Answering the second question: What is the extent of awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia?

To determine the extent of awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of

study participants on statements related to the extent of awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia. The detailed results are presented in the following table:

Table (14): Study participants' responses on statements related to the second dimension, ranked in descending order based on agreement averages.

	agreement ave	F		Degree	of Apr	oroval				
No.	Phrases	Percentage '	Strongly Agree		Neutral	Disagree	Strongly Disagree	Mean	Standard Deviation	Rank
	I strive to	F	66	39	10	1	0			
12	achieve patient comfort and satisfaction with the hospital.	%	56.9	33.6	8.6	0.9	0	4.47	0.69	1
	I maintain	F	62	44	9	1	0			
8	patients' medical records and safeguard their privacy.	%	53.4	37.9	7.8	0.9	0	4.44	0.67	2
	l prioritize	F	60	45	9	1	1			
10	patient welfare above all other interests.	%	51.7	38.8	7.8	0.9	0.90	4.43	0.67	3
	I ensure ease	F	58	48	10	0	0			
9	of access for patients to their medical reports.	%	50	41.4	8.6	0	0	4.41	0.64	4
	I obtain	F	63	37	16	0	0			
3	patient consent before performing any services and inform them of the service cost.	%	54.3	31.9	13.8	0	0	4.41	0.72	5
	I address all	F	59	45	11	1	0			
11	patient questions,	%	50.9	38.8	9.5	0.9	0	4.40	0.69	6

		F		Degree	of App	oroval				
No.	Phrases	Percentage			Neutral	Disagree	Strongly Disagree	Mean	Standard Deviation	Rank
	complaints, and suggestions and accept feedback openly.									
	I focus on	F	61	39	14	1	1			
4	infection prevention, maintaining cleanliness, and sterilizing hands and tools to prevent infections.	%	52.6	33.6	12.1	0.9	0.9	4.39	0.73	7
	I ensure all	F	59	42	15	0	0			
5	necessary medical tools and devices are available in the hospital to provide comprehensive medical services.	%	50.9	36.2	12.9	0	0	4.38	0.70	8
	I focus on	F	56	47	13	0	0			
7	improving my skills, training, and staying updated with advancements in medical services.	%	48.3	40.5	11.2	0	0	4.37	0.69	9
	I provide	F	61	38	15	2	0			
1	medical care to any patient and facilitate service delivery while respecting patient schedules.	%	52.6	32.8	12.9	1.7	0	4.36	0.77	10

		F		Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Mean	Standard Deviation	Rank
	I uphold	F	54	50	11	1	0			
2	patient confidentiality and introduce myself to patients.	%	46.6	43.1	9.5	0.9	0	4.35	0.68	11
	I educate	F	54	41	20	1	0			
6	patients on health, safety, prevention, and treatment guidelines.	%	46.6	35.3	17.2	0.9	0	4.28	0.77	12
	The ov	erall a	verage	of the	axis			4.39	0.7	0

Through the results in Table (14), it is evident that the viewpoint of healthcare providers at Buraidah Central Hospital regarding the extent of awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia has an arithmetic mean of 4.39. This arithmetic mean falls within the range indicating strong agreement. Additionally, the results above show variability in the agreement among study participants regarding the extent of awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia. The average scores ranged from 4.47 to 4.28, falling in the fifth category and the third category of the five-point scale, indicating strong agreement to agreement. This variability in agreement among study participants on the level of awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia is ranked in descending order based on agreement as follows:

- phrase number (12), "I strive to achieve patients' comfort and satisfaction with the hospital," ranked first in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.47. This result indicates a high level of awareness among healthcare providers about the need to equip themselves to achieve patients' comfort and satisfaction with the hospital.

- phrase number (8), "I maintain patients' medical records and preserve their privacy," ranked second in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.44. The researcher believes this is attributed to the importance of patients' medical records and the necessity of preserving their privacy by healthcare providers.
- phrase number (10), "I prioritize patients' interests above all others," ranked third in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.43.
- phrase number (2), "I maintain patient confidentiality and introduce myself to the patient," ranked second to last in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.35. This result underscores the importance of healthcare providers maintaining patient confidentiality and introducing themselves to the patient.
- phrase number (6), "I am keen on educating patients and informing them about health, safety, prevention, and treatment rules," ranked last in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.28. This result highlights the importance of healthcare providers being keen on educating patients and informing them about health, safety, prevention, and treatment rules.

Answering the third question: Suggestions that contribute to increasing the awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia:

To identify suggestions that contribute to increasing the awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia from the viewpoint of healthcare providers at Buraidah Central Hospital, frequencies, percentages, arithmetic means, standard deviations, and ranks were calculated for the responses of study participants on statements related to suggestions that contribute to increasing the awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia. The detailed results are presented in the following table:

Table (15): Study participants' responses on statements related to the third dimension, ranked in descending order based on agreement averages.

		F	[	Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	Encourage	F	69	39	8	0	0			
5	healthcare providers to provide emergency exits and display informative signs.	%	59.5	33.6	6.9	0	0	4.53	0.62	1
	Train	F	66	44	6	0	0			
4	healthcare providers on infection prevention and control measures.	γ.	56.9	37.9	5.2	0	0	4.52	0.59	2
	Provide	F	69	36	10	1	0			
9	training to healthcare providers on dealing with challenging infectious diseases.	%	59.5	31	8.6	0.9	0	4.49	0.69	3
	Emphasize	F	68	36	12	0	0			
10	the importance of personal hygiene and facility cleanliness for healthcare providers.	%	58.6	31	10.3	0	0	4.48	0.67	4
	Encourage	F	66	40	9	1	0			
7	the hospital to immunize healthcare providers and provide	%	56.9	34.5	7.8	0.9	0	4.47	0.67	5

		F	ı	Degree	of App	roval				
No.	Phrases	Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	necessary									
	vaccinations.  Highlight the	F	67	36	13	0	0			
1	importance of informative signs directing patients in the hospital.	//.	57.8	31	11.2	0	0	4.47	0.69	6
	Train	F	65	40	11	0	0			
2	healthcare providers on handling fires and disasters that may occur in the hospital.	%	56	34.5	9.5	0	0	4.47	0.66	7
	Print	F	64	39	13	0	0			
8	informative posters that educate healthcare providers about diseases and epidemics.	%	55.2	33.6	11.2	0	0	4.44	0.68	8
	Provide	F	65	39	10	1	1			
6	training to healthcare providers on hospital computer systems that store patient records and information.	%	56	33.6	8.6	0.9	0.9	4.43	0.76	9
	Train	F	62	42	11	1	0			
11	healthcare providers on responding to fire emergencies.	%	53.4	36.2	9.5	0.9	0	4.42	0.70	10

	Phrases	F	Degree of Approval							
No.		Percentage	Strongly Agree	Agree	Neutral	Disagree	Strongly	Mean	Standard Deviation	Rank
	Conduct	F	61	42	13	0	0			
12	training courses to educate healthcare providers about healthcare quality standards.	%	52.6	36.2	11.2	0	0	4.41	0.68	11
	Train	F	60	43	13	0	0	4.41	0.68	12
3	healthcare providers on how to handle assaults on healthcare providers.	%	51.7	37.1	11.2	0	0			
	The overall average of the axis								0.67	

Through the results in Table (15), it is evident that the suggestions contributing to increasing the awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia, from the viewpoint of healthcare providers at Buraidah Central Hospital, have an arithmetic mean of 4.46. This arithmetic mean falls within the range indicating strong agreement. It also shows variability in agreement among study participants regarding the suggestions that contribute to increasing the awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia. The average scores ranged from 4.53 to 4.41, falling in the fifth category of the fivepoint scale, indicating strong agreement. This consistency in agreement among study participants on the suggestions that contribute to increasing the awareness of healthcare providers about healthcare quality standards in the governmental healthcare sector in the Kingdom of Saudi Arabia is ranked in descending order based on agreement as follows:

- phrase number (5), "Encourage healthcare providers to provide emergency exits and provide guidance signs for

them," ranked first in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.53. This result indicates awareness among healthcare providers at Buraidah Central Hospital about the importance of providing emergency exits and guidance signs for them.

- phrase number (4), "Train healthcare providers on how to limit and combat the spread of infections," ranked second in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.52. The researcher believes this is due to the role of training healthcare providers in educating them on how to limit and combat the spread of infections.
- phrase number (9), "Train healthcare providers on dealing with stubborn infectious diseases," ranked third in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.49.
- phrase number (12), "Conduct continuous training courses to educate healthcare providers about healthcare quality standards," ranked second to last in terms of agreement among study participants with partial agreement and an arithmetic mean of 4.41. This result underscores the importance of conducting training courses regularly to educate healthcare providers about healthcare quality standards.
- phrase number (3), "Train healthcare providers on how to deal with assaults on healthcare providers," ranked last in terms of agreement among study participants with strong agreement and an arithmetic mean of 4.41. This result indicates the importance of hospital management training healthcare providers on how to deal with assaults on healthcare providers.

## **Hypotheses Testing:**

There is a statistically significant relationship at the significance level of 0.05 between the awareness of healthcare providers about healthcare quality standards and healthcare service quality.

To test the above hypothesis, the researcher used the Pearson correlation coefficient to determine the relationship between the awareness of healthcare providers about healthcare quality standards and healthcare service quality. The following table illustrates this:

Table (16): Pearson Correlation Coefficient between Healthcare Providers' Awareness of Healthcare Quality Standards and Healthcare Service Quality.

	Healthcare Providers' Knowledge of					
	Healthcare Quality Standards					
Ovality of Haalth	Correlation	Level of				
Quality of Health Information	Coefficient	Significance				
	0.751**	0.01				

<sup>\*\*</sup> At a significance level of 0.01,

There is a statistically significant positive correlation between the awareness of healthcare providers about healthcare quality standards and healthcare service quality, with a Pearson correlation coefficient of 0.751, indicating a strong positive correlation. The results show that as the awareness of healthcare providers about healthcare quality standards increases, the levels of healthcare service quality from the perspective of healthcare providers at Buraidah Central Hospital also increase. This result or relationship explains the role of healthcare providers' awareness of healthcare quality standards in achieving a higher level of healthcare service quality and overall quality improvement in the services provided by the hospital.

## **Study Results**

Results of the First Inquiry: Reality of Health Quality Standards in the Government Healthcare Sector in the Kingdom of Saudi Arabia?

First: Quality regarding Patient Rights:

The study participants strongly agreed on the statements regarding the reality of health quality standards in the government healthcare sector in Saudi Arabia concerning patient rights, with an average score of (4.31), which are ranked as follows:

- Hospitals seek patient consent when necessary for treatment or surgery by healthcare providers.
- Hospitals maintain patient confidentiality and privacy of their information.
- Hospitals provide appropriate and secure treatment for all patients.
- Healthcare providers at the hospital provide all necessary information, tests, and diagnoses for patients.
- Hospitals respect patient appointments.

- Patients are informed of the identities of the doctors and healthcare providers caring for them.
- Hospitals inform patients of the bill's value before starting service procedures.

Second: Infection Prevention and Control:

The study participants strongly agreed on the reality of health quality standards in the government healthcare sector in Saudi Arabia regarding infection prevention and control, with an average score of (4.30), which are ranked as follows:

- Hospitals ensure hand sanitizers are available in all patient rooms and departments.
- Healthcare providers at the hospital maintain hand hygiene when providing services.
- Hospitals isolate patients from others for preventive purposes when necessary.
- Medical and non-medical tools for infection prevention and control policies are available.
- Hospitals monitor cleaning staff at all times in all hospital facilities.
- Healthcare providers explain infection prevention and control plans to patients.

Third: Education and Training:

The reality of health quality standards in the government healthcare sector in Saudi Arabia regarding education and training from the perspective of healthcare providers scored an average of (4.06), ranked descendingly according to study participants' agreement as follows:

- Hospitals provide informational materials to introduce available services.
- Healthcare providers explain patients' medical history, prevention methods, and treatment.
- Hospitals offer training courses for healthcare providers.
- Educational brochures are provided before conducting necessary tests and radiographic images for patients.

Fourth: Medical Records and Information Management:

The perspective of healthcare providers at Buraidah Central Hospital scored an average of (4.38), ranked descendingly according to study participants' agreement as follows:

- Hospitals maintain patient information confidentiality.
- Hospitals provide patients' medical records easily.
- Patients receive a summary of their medical condition upon discharge.
- Patients can easily access their medical information.

Fifth: Continuous Improvement:

The reality of health quality standards in the government healthcare sector in Saudi Arabia regarding continuous improvement from the perspective of healthcare providers scored an average of (4.16), ranked descendingly according to study participants' agreement as follows:

- Hospitals prioritize "patients' interests" in the forefront of management and healthcare providers' concerns.
- Hospitals provide clear guidance boards.
- Hospital staff respond quickly and effectively to patient inquiries and questions.
- The responsible personnel are always available to solve problems and assist patients.
- All hospital facilities are clean, and buildings are well-maintained.
- Hospitals provide comfortable waiting and seating areas for patients.
- Hospitals provide suggestion boxes for patient complaints.

Results of the Second Inquiry: What is the level of awareness among healthcare providers regarding health quality standards in the government healthcare sector in Saudi Arabia?

The perspective of healthcare providers at Buraidah Central Hospital regarding the awareness of healthcare providers about health quality standards in the government healthcare sector in Saudi Arabia had an average score of (4.39). Their agreement scores ranged from (4.47 to 4.28), falling within the fifth category of the five-point scale, indicating a strong agreement with the study tool. This demonstrates consistency in the study participants' agreement on the quality of performance, ranked in descending order according to their agreement as follows:

- Strive to achieve patient comfort and satisfaction with the hospital.
- Maintain medical records and patient confidentiality.
- Prioritize patient welfare above all else.
- Facilitate patients' access to their medical reports.
- Obtain patient consent before any services and inform them of the service cost.
- Address all patient inquiries and complaints effectively.
- Focus on infection prevention, hand hygiene, and equipment sterilization to prevent infections.
- Ensure availability of all necessary medical tools and devices at the hospital.

- Develop skills through training and stay updated with new medical services.
- Provide medical services to all patients and respect their appointments.
- Maintain patient confidentiality and introduce myself to the patient.
- Educate patients about health, safety rules, prevention, and treatment.

Results of the Third Inquiry: Proposals contributing to increasing awareness among healthcare providers about health quality standards in the government healthcare sector in Saudi Arabia:

The proposals contributing to increasing awareness among healthcare providers about health quality standards in the government healthcare sector in Saudi Arabia, from the perspective of healthcare providers at Buraidah Central Hospital, had an average score of (4.46). Their agreement scores ranged from (4.53 to 4.41), falling within the fifth category of the five-point scale, indicating a strong agreement with the study tool. These proposals were ranked in descending order according to their agreement as follows:

- Encourage healthcare providers to provide emergency exits and provide clear guidance boards.
- Train healthcare providers on infection prevention and control measures.
- Train healthcare providers to deal with resistant infectious diseases.
- Emphasize personal hygiene for healthcare providers and maintain cleanliness and sterilization of tools and facilities at the hospital.
- Encourage hospital vaccination for healthcare providers and provide necessary vaccinations.
- Highlight the importance of guidance boards directing patients in the hospital.
- Train healthcare providers in dealing with fires and hospital disasters.
- Print informative posters to educate healthcare providers about diseases and epidemics.
- Train healthcare providers on hospital computer systems for record-keeping and patient information.
- Train healthcare providers on handling fire emergencies.
- Conduct continuous training courses to educate healthcare providers about health quality standards.

- Train healthcare providers on handling assaults against healthcare providers.

**Hypothesis Testing:** 

There is a statistically significant relationship at a significance level of (0.05) between healthcare providers' awareness of health quality standards and healthcare service quality.

There is a positive and statistically significant correlation at a significance level of (0.01) between healthcare providers' awareness of health quality standards and healthcare service quality, with a Pearson correlation coefficient value of (0.751), indicating a strong positive correlation.

# **Study Recommendations:**

Based on the results, the study recommends the following actions:

- 1. Hospital Management should inform patients about the cost of services before starting service procedures.
- 2. Healthcare providers need to develop plans and strategies for infection prevention and control for patients.
- 3. Hospitals should provide educational brochures before conducting tests and necessary radiographic imaging for patients, and patients should have easy access to their medical information.
- 4. Hospital Management should provide comfortable waiting and seating areas for patients and set up suggestion boxes for patient complaints.
- 5. Ensure the availability of all necessary medical tools and equipment at the hospital to provide comprehensive medical services. Also, focus on skill development through training and staying updated with new medical services.
- 6. Healthcare providers should provide medical services to all patients, be accommodating in service procedures, respect patient appointments, maintain patient confidentiality, and introduce themselves to the patient.
- 7. Healthcare providers should educate patients about health rules, safety measures, prevention, and treatment.
- 8. Hospital Management should train healthcare providers on hospital computer systems for record-keeping, patient information, and health quality standards.
- 9. Hospital Management should train healthcare providers on how to handle assaults against healthcare providers.

#### Reference

- Iyad Abdul Fattah Al-Nasur, Abdul Rahman Abdullah Al-Sagheer (2014), Contemporary Marketing Issues and Applications, 1st edition, Dar Safa for Publishing and Distribution, Amman, Jordan.
- Badis Boukheloua, Souhila Qamou (2016), The Impact of Organizational Support on Healthcare Service Quality: A Field Study at El-Mawal Hospital for Women and Children in Touggourt, Algerian Journal of Economic Development, Issue 5, Algeria.
- Al-Bakr, Thamer Yasser (2005), Healthcare Services Marketing, Dar Al-Yazouri Scientific Publishing and Distribution, Amman.
- Al-Bakri, Thamer Yasser (2012), Hospital Management, Dar Al-Yazouri Scientific Publishing and Distribution, Amman, Jordan.
- Al-Jazairi, Safaa Mohammed Hadi; Mohammed, Ali Ghubash; Shtat, Bushra Abdullah (2011), Measurement and Evaluation of Healthcare Service Quality: An Applied Study at Al-Faitha General Hospital, Master's thesis, Iraq.
- Saudi Center for Healthcare Facilities Accreditation, 2015. http://cbahi.securehostsite.biz/Library/Assets/CBAHI%20profile%20second%20edit%20final-021108.pdf