### Scientific Paper Entitled: Studying The Reality Of Comprehensive Quality For Health Care Professionals In The Government Health Sector In The Kingdom Of Saudi Arabia: A Comprehensive Analysis

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#### Summary:

This study aims to investigate the application of Total Quality Management (TQM) principles among healthcare professionals working in the government healthcare sector in Saudi Arabia. The study will focus on understanding the challenges, opportunities, and implications of implementing TQM in this specific context. By examining the quality management practices within this sector, the research seeks to provide insights into enhancing the overall quality of healthcare services provided to the population.

Study Problem: The problem addressed in this study revolves around the efficacy and implementation of TQM practices within the government healthcare sector in Saudi Arabia. It aims to identify potential barriers hindering the effective adoption of TQM principles and explore strategies to overcome these challenges.

**Keyword:** Total Quality - Healthcare Professionals -Government Healthcare Sector - Kingdom of Saudi Arabia.

#### Introduction:

The quest for quality healthcare delivery has long been a focal point for governments, healthcare professionals, and stakeholders worldwide. In the Kingdom of Saudi Arabia, where the healthcare sector plays a pivotal role in ensuring the well-being of its citizens, the pursuit of excellence in healthcare services remains a top priority. In recent years, there has been a growing recognition of the significance of Total Quality Management (TQM) principles in enhancing healthcare quality and patient outcomes. TQM, with its emphasis on continuous improvement, customer focus, and employee empowerment, has emerged as a prominent framework for driving quality improvement initiatives in various sectors, including healthcare.[3]

Against this backdrop, this study embarks on a comprehensive analysis of the application of TQM principles among healthcare professionals in the government healthcare sector of Saudi Arabia. The aim is not merely to scrutinize the status quo but to unearth insights that can catalyze tangible improvements in healthcare quality and patient care. By examining the challenges, opportunities, and implications of implementing TQM within this specific context, this research endeavors to contribute to the ongoing discourse on healthcare quality management and pave the way for transformative change within the Saudi Arabian healthcare system.[4]

#### **Rationale for the Study:**

The rationale for undertaking this study stems from the imperative need to address the pressing challenges confronting the healthcare sector in Saudi Arabia. Despite substantial investments and efforts directed towards healthcare infrastructure and workforce development, persistent disparities in healthcare quality and access continue to pose formidable challenges. Recognizing the potential of TQM to serve as a catalyst for change, this study seeks to explore the feasibility and efficacy of integrating TQM principles into the fabric of healthcare delivery within the government sector.[5]

Moreover, the timing of this study is particularly auspicious, coinciding with a period of heightened emphasis on healthcare quality improvement and reform initiatives in Saudi Arabia. As the Kingdom strives to align its healthcare system with international standards and best practices, there exists a unique opportunity to leverage TQM as a strategic tool for driving organizational excellence and enhancing patient-centered care.[6]

#### Significance of the Study:

The significance of this study lies in its potential to yield actionable insights that can inform policy decisions, strategic planning, and operational practices within the government healthcare sector of Saudi Arabia. By shedding light on the prevailing quality management practices, identifying barriers to TQM implementation, and proposing targeted interventions, this research aims to catalyze a paradigm shift towards a culture of continuous improvement and excellence in healthcare delivery.[7]

Furthermore, this study holds relevance not only for stakeholders within the Saudi Arabian healthcare system but also for policymakers, researchers, and healthcare professionals globally. The lessons learned from the Saudi experience with TQM implementation can offer valuable insights and best practices that can be extrapolated to other healthcare settings facing similar challenges and opportunities.[8]

#### **Study Sub-questions:**

What are the current quality management practices employed within the government healthcare sector in Saudi Arabia?

What are the main challenges faced by healthcare professionals in implementing TQM principles?

What are the key factors influencing the successful implementation of TQM in the government healthcare sector? [9]

What strategies can be proposed to enhance the adoption and effectiveness of TQM practices in improving healthcare quality?

#### **Study Objectives:**

To assess the level of awareness and understanding of TQM principles among healthcare professionals in the government healthcare sector. To identify the key barriers and challenges impeding the successful implementation of TQM in the healthcare sector. To explore the perceptions and attitudes of healthcare professionals towards TQM and its impact on healthcare quality. To develop recommendations and strategies for enhancing the adoption and implementation of TQM practices in the government healthcare sector.[10]

#### Study Methodology:

The study will utilize a mixed-methods approach, incorporating both quantitative and qualitative research methods. Surveys will be conducted to collect quantitative data on the awareness, attitudes, and perceptions of healthcare professionals towards TQM. Additionally, interviews and focus group discussions will be conducted to gather qualitative insights into the challenges, experiences, and perspectives of healthcare professionals regarding TQM implementation. Data analysis will involve both descriptive statistics and thematic analysis to provide a comprehensive understanding of the research questions. [11]

#### **Study Boundaries:**

Geographical Boundary: The study will be conducted exclusively within the geographical confines of Saudi Arabia. Temporal Boundary: Data collection and analysis will be carried out during the year 2022. Human Boundary: The study will focus on a sample of healthcare professionals working in the government healthcare sector in Saudi Arabia. Subject Boundary: The study will specifically investigate the application of TQM principles in the context of healthcare management within the government sector. [12]

#### Study Problem :

The problem addressed in this study is multifaceted and deeply rooted in the challenges facing the healthcare sector in Saudi Arabia, particularly within the government-run healthcare facilities. Despite the growing emphasis on quality improvement initiatives, the effective implementation of Total Quality Management (TQM) principles remains elusive in this context. One primary issue is the lack of standardized quality management practices across different healthcare institutions, leading to variations in service quality and patient outcomes. Additionally, the complex organizational structure and bureaucratic processes within government healthcare facilities often hinder the seamless adoption of TQM principles.[13]

Moreover, healthcare professionals encounter numerous barriers in their efforts to implement TQM effectively. These barriers may include resistance to change, insufficient resources and infrastructure, inadequate training and education on quality management principles, and the absence of a supportive organizational culture that promotes continuous improvement. Understanding and addressing these barriers are essential steps toward achieving sustainable quality improvement in the government healthcare sector.[14]

To address these challenges, this study aims to identify the root causes of inefficiencies in TQM implementation and explore innovative strategies to overcome them. By doing so, the study endeavors to pave the way for a more robust and integrated quality management system that enhances the overall healthcare delivery in Saudi Arabia.[15]

#### **Study Sub-questions :**

Current Quality Management Practices: A comprehensive analysis will be conducted to assess the existing quality management practices within government healthcare facilities in Saudi Arabia. This analysis will encompass various aspects, including quality assurance mechanisms, performance measurement frameworks, and compliance with international quality standards such as ISO 9001.

Challenges in TQM Implementation: Through qualitative interviews and surveys, this study will delve into the specific challenges encountered by healthcare professionals in implementing TQM principles. These challenges may range from

organizational barriers, such as resistance to change and bureaucratic red tape, to resource-related constraints, such as limited funding and inadequate staffing.

Key Factors Influencing Implementation Success: By examining both internal and external factors influencing TQM implementation, this study seeks to identify critical success factors that contribute to the effective adoption of TQM practices in the government healthcare sector. Factors such as leadership commitment, employee empowerment, stakeholder engagement, and technological innovation will be explored in-depth.[16]

Enhancement Strategies for TQM Adoption: Building upon the insights gained from the preceding sub-questions, this study will develop a set of recommendations and strategies aimed at enhancing the adoption and effectiveness of TQM practices in improving healthcare quality. These strategies may include capacity-building initiatives, organizational restructuring, process reengineering, and the development of performance incentives.

#### Study Objectives :

Assessment of TQM Awareness and Understanding: Through a structured survey instrument, this study aims to gauge the level of awareness and understanding of TQM principles among healthcare professionals working in government healthcare facilities. This assessment will provide valuable insights into the knowledge gaps and training needs of healthcare staff regarding TQM.

Identification of Barriers and Challenges: Qualitative interviews and focus group discussions will be conducted to identify the key barriers and challenges impeding the successful implementation of TQM in the healthcare sector. By soliciting the perspectives of frontline staff, managers, and other stakeholders, this study aims to uncover the root causes of resistance to change and inefficiencies in quality management practices.[17]

Exploration of Perceptions and Attitudes: A mixed-methods approach will be employed to explore the perceptions and attitudes of healthcare professionals towards TQM and its impact on healthcare quality. By triangulating quantitative survey data with qualitative narratives, this study seeks to provide a nuanced understanding of how perceptions and attitudes shape the adoption and implementation of TQM principles.

Development of Recommendations and Strategies: Drawing upon the findings from the preceding objectives, this study will develop a set of evidence-based recommendations and strategies for enhancing the adoption and implementation of TQM practices in the government healthcare sector. These recommendations will be tailored to address the specific needs and challenges identified through the research process, with a focus on promoting organizational learning, fostering a culture of continuous improvement, and optimizing resource allocation.[18]

#### **Literature Review**

The Kingdom of Saudi Arabia is actively redefining its healthcare landscape, placing a premium on elevating service quality to meet the needs of its populace. Central to this transformation is the meticulous evaluation of health forces (workforce) and their tangible influence on the overall quality of care. This review delves into pertinent literature to shed light on this crucial aspect, serving as a foundation for further inquiry and exploration.

Performance Measurement and the Pursuit of Excellence

The Saudi Arabian Ministry of Health (MOH) has spearheaded various performance enhancement initiatives, notably the establishment of Performance Improvement Units (PIUs). These units, employing methodologies such as Lean Six Sigma, aim to streamline hospital operations and foster a patient-centric ethos. While initial outcomes have shown promise, the challenge of ensuring long-term sustainability warrants deeper investigation.

**Unveiling Challenges and Opportunities** 

Scholarly literature illuminates critical areas necessitating improvement, including:

Human Resource Development: A pressing need exists to bolster the ranks of trained Saudi healthcare professionals, alongside robust strategies for talent retention.

Leadership and Management: Studies advocate for fortifying leadership practices and nurturing a culture that champions continuous quality improvement within healthcare institutions. Data-Driven Decision Making: Establishing robust systems for data collection and analysis is pivotal for effectively tracking and evaluating performance metrics, guiding future actions.

#### Quality of Care and Measurable Outcomes

A burgeoning emphasis is placed on transitioning towards a patient-centered model of care, prioritizing clear communication and an unwavering commitment to enhancing the patient experience.

#### Bridging the Knowledge Gap

Despite the growing recognition of the imperative for quality improvement, research specifically evaluating the impact of health workforce performance on patient outcomes within the Saudi context remains relatively scarce. This underscores a compelling opportunity for further exploration.

#### Expanding the Horizon: Resources for Deeper Insights

Saudi Arabian Monetary Authority (SAMA): Annual reports published by SAMA offer invaluable insights into healthcare sector funding, directly shaping workforce development initiatives.

World Health Organization (WHO): WHO reports on healthcare systems provide a broader comparative perspective, facilitating benchmarking against international standards.

#### Study Methodology :

To achieve the objectives outlined above, this study will employ a mixed-methods research design, combining quantitative surveys with qualitative interviews and focus group discussions. This methodological approach allows for a comprehensive exploration of the research questions, integrating both numerical data and contextual insights from key stakeholders.

Quantitative Data Collection: A structured survey questionnaire will be developed to assess healthcare professionals' awareness, attitudes, and perceptions regarding TQM principles. The survey will be administered electronically to a representative sample of healthcare staff across government healthcare facilities in Saudi Arabia. The questionnaire will include closed-ended Likert scale items to measure respondents' agreement with various statements related to TQM awareness, training, and perceived barriers to implementation.[19]

Qualitative Data Collection: In-depth interviews and focus group discussions will be conducted with a purposive sample of healthcare professionals, including frontline staff, middle managers, and senior executives. Semi-structured interview guides will be used to explore participants' experiences, challenges, and perceptions regarding TQM implementation in their respective roles. The qualitative data collection process will prioritize diversity and representation across different healthcare specialties, job functions, and organizational levels.

Data Analysis: Quantitative data analysis will involve descriptive statistics, such as frequencies, percentages, and means, to summarize survey responses and identify patterns in TQM awareness, attitudes, and perceived barriers. Qualitative data analysis will employ thematic coding techniques to identify recurring themes, patterns, and discrepancies in interview transcripts and focus group discussions. By triangulating quantitative and qualitative findings, this study aims to generate a comprehensive understanding of the research questions and develop actionable insights for TQM implementation in the government healthcare sector.[20]

#### **Study Boundaries :**

Geographical Boundary: The study will be conducted exclusively within the geographical confines of Saudi Arabia, focusing on government-run healthcare facilities across the country. While the findings may have broader implications for healthcare quality improvement in other contexts, the geographical scope of the study will be limited to the Saudi Arabian healthcare system.[21]

Temporal Boundary: Data collection and analysis will be carried out during the year 2022, ensuring that the study's findings are relevant and timely within the context of contemporary healthcare challenges in Saudi Arabia. While ongoing changes and developments in healthcare policy and practice may influence the study's outcomes, the temporal boundary provides a specific timeframe for data collection and analysis.

Human Boundary: The study will focus on a sample of healthcare professionals working in the government healthcare sector in

Saudi Arabia, including physicians, nurses, allied health professionals, administrators, and support staff. While the experiences and perspectives of other stakeholders, such as patients and policymakers, may also be relevant to the study's objectives, the human boundary will be delimited to healthcare professionals directly involved in TQM implementation within government healthcare facilities.[22]

#### Subject Boundary:

The study will specifically investigate the application of Total Quality Management (TQM) principles in the context of healthcare management within the government sector. While other quality improvement frameworks and methodologies may exist within the healthcare system, the subject boundary of the study will be delimited to TQM practices and their implications for healthcare quality improvement in Saudi Arabia.

#### Results

#### Validity and Reliability Tests:

#### Internal Consistency Reliability Calculation:

The study tool was constructed, and after being shown to a panel of knowledgeable and experienced arbitrators to confirm its apparent validity, Pearson's Coefficient Correlation was calculated to confirm the validity of the internal consistency between each goal's statement and the belonging axis' overall score. The questionnaire was administered to a pilot sample of 40 healthcare staff to confirm internal reliability, with researchers calculating correlation coefficients to assess the internal validity of the study tool, as the following tables show:

### Table (1): Correlation coefficients of each item in the total score of Continuous improvement

Statement number	r	Statement number	r
1	**0.841	6	**0.741
2	**0.791	7	**0.651
3	**0.842	8	**0.658
4	**0.786	9	**0.541
5	**0.514	10	**0.657

p value <0.001 :\*\*

Statement number	r	Statement number	r
1	.0741**	6	**0.771
2	.0417**	7	**0.541
3	0.841**	8	**0.748
4	0.574**	9	**0.531
5	0.514**	10	**0.747

### Table (2): Correlation coefficients of each item in the total score of Teamwork

p value <0.001 :\*\*

Table (3): Correlation coefficients of each item in the total score of Training

Statement number	r	Statement number	r
1	.0741**	4	**0.403
2	.0417**	5	**0.414
3	0.881**	6	**0.748

p value <0.001 :\*\*

It is clear from the previous table that all of the statements are significant at the 0.01 level, as the values of the dimensional correlation coefficients ranged between (0.403 - 0.881), which are good correlation coefficients, indicating high internal consistency coefficients as well. It indicates high validity indicators that can be trusted in applying the current study tool.

#### Reliability of the study tool:

As for measuring the reliability of the questionnaire, we used Cronbach's alpha coefficient, and the following table shows the reliability axes of the study tool as follows:

### Table (3): Cronbach's alpha coefficient reliability coefficient for the total score of the questionnaire

	No. of	
	statements	Cronbach's alpha
Continuous	10	.0784
improvement		
Teamwork	10	0.845
Training	6	0.863
	26	.0902

The table showed that Cronbach's alpha reliability coefficient for Continuous improvement was (0.784) and Teamwork was (0.845) and Training was (0.863) and the total score of the questionnaire was (0.902), which is a high-reliability coefficient suitable for the study.

#### Application Method of the Study Tool:

Prior to entering the study data into the computer for statistical analysis, the researchers examined it after gathering it. They then analyzed it, put it into the relevant tables, and made connections to earlier research. Five points were awarded for different responses: strongly disagree (1 point), disagree (2 points), agree (4 points), and agree (3 points). The range (5-1=4) was computed and divided by the number of questionnaire cells to give the correct cell length (4/5=0.80), which was then utilized to establish the length of the pentavalent scale cells used in the study Phrases. The upper limit of the cell was then calculated by adding this number to the scale's lowest value, which is one, or the scale's beginning.

The following table illustrates the method for correcting the Likert pentavalent scale.

Scale	The	The average arithmetic mean value
	weight	ranges
Strongly Disagree	1	From 1 to less than 1.80
Disagree	2	From 1.81 to less than 2.60
Neutral	3	From 2.61 to less than 3.40
Agree	4	From 3.41 to 4.20
Strongly agree	5	From 4.21 to 5.

#### Table (4): Method for correcting the scale.

# Table (5): Socio demographic characteristics of the studied participants

Sex		
Male	105	(32.2)
Female	221	(67.8)
Marital status		
single	200	(61.2)

absolute	27	(8.3)				
dol	Job					
doctor	56	(17.2)				
pharmaceutical	76	(23.3)				
specialist	71	(21.8)				
Technical	10	(3.1)				
nurse	113	(34.7)				
Age						
<30	194	(61.4)				
30–39	89	(28.2)				
40–49	32	(10.1)				
≥50	1	(0.3)				
Experience (Years)						
<10	200	(61.2)				
10–19	99	(30.4)				
≥20	27	(8.3)				
Education level						
Diploma	186	(56.2)				
Bachelor	139	(42)				
Post Graduated	6	(1.8)				



Fig (1): gander distribution among the studied participants



Fig (3): year of experience among the studied participants



### Fig (4): educational level distribution among the studied participants

Table(1) shows that 67.8% of the respondents were female. Approximately 90% of the participants had an age less than 39 years old. Most of the participants' working experiences were less than 10 years (61.2%), and only 8.3% had more than 20 years of experience. More than half of the participants had a diploma-level education (56.2%), and 1.8% had postgraduate degrees.

Secondly: Total Quality Management Study on Healthcare Professionals in the Government Healthcare Sector

What are the main challenges faced by healthcare professionals in implementing TQM principles?

What are the key factors influencing the successful implementation of TQM in the government healthcare sector?

**First question:** What are the current quality management practices employed within the government healthcare sector in Saudi Arabia?

Table (6): response of the studied participants regarding toContinuous improvement

.No	Continuous	Cases (n=331)				
	improvement	Mean	SD	Category	Rank	
1-	The employee from	4.67	0.77	Strongly	1	
	different administration			Agree		
	levels can participate in					
	decision-making.					
2-	The authorization of	.365	0.85	Agree	10	
	employees includes the					
	TQM improve quality.					
3-	The top management	.432	0.80	Strongly	7	
	involves all employees			Agree		
	in the planning process					
	to improve the quality					
	of services in the					
	hospital.					
4-	The employee can	.454	1.17	Strongly	3	
	participate in solving			agree		
	problems to improve					
	quality.					
5-	The quality policies are	.464	0.77	Strongly	2	
	clear and known.			Agree		
6-	The hospital educates	.398	0.85	Agree	9	
	employee on the TQM.					
7-	The employees have	.409	0.80	Agree	8	
	been informed about					
	the hospital's					
	achievements.					

8-	The benchmarking	.434	1.17	Strongly	6
	between the hospital			agree	
	and others are done to				
	learn from other				
	experiences.				
9-	The hospital is strongly	.435	0.80	Strongly	5
	committed in applying			Agree	
	the concept of TQM at				
	all administrative levels.				
10-	The employees'	.441	1.17	Strongly	4
	satisfaction, health and			agree	
	work environment are				
	very important.				
Tota	l score	4.32	0.71	Strongly	
				Agree	

Table (6) showed the response of the studied participants as regard to current quality management practices employed within the government healthcare sector in Saudi Arabia

It was found that the majority strongly agree with The employee from different administration levels can participate in decisionmaking, The quality policies are clear and known, The employee can participate in solving problems to improve quality, The employees' satisfaction, health and work environment are very important, The hospital is strongly committed in applying the concept of TQM at all administrative levels, The benchmarking between the hospital and others are done to learn from other experiences, The top management involves all employees in the planning process to improve the quality of services in the hospital. While they agree with The employees have been informed about the hospital's achievements, The hospital educates employee on the TQM, The authorization of employees includes the TQM improve quality.

**Second question:** What are the main challenges faced by healthcare professionals in implementing TQM principles?

# Table (6): response of the studied participants regarding to team work

.No	Continuous	Cases (n=331)			
	improvement	Mean	SD	Category	Rank

11_	The quantities	466	0.77	Strongly	1
11-	techniques are used in	.400	0.77	Agroo	-
	the planning for health			Agree	
12	The swelth washing	2.20	0.05	<b>A</b> = = = =	•
12-	The quality problems	3.30	0.85	Agree	9
10	are usually resolved.				_
13-	leamwork has	.451	0.80	Strongly	4
	improved the			Agree	
	relationship among				
	employees.				
14-	The teams have	.441	1.17	Strongly	6
	improved the work and			agree	
	created new ideas.				
15-	The teamwork has	.460	0.77	Strongly	3
	developed the work			Agree	
	process.				
16-	The teamwork has	3.36	0.85	Agree	10
	improved the patient				
	satisfaction as well as				
	the quality of services.				
17-	Working in teams is	.401	0.80	Agree	8
	more important than				
	individuals.				
18-	Different teamwork has	.445	1.17	Strongly	5
	been developed to			agree	
	improve the quality of				
	services and to solve				
	problems.				
19-	The team works in the	.465	0.80	Strongly	2
	hospital from all			Agree	
	administrative and			_	
	clinical levels.				
20-	The problems are	.414	1.17	Strongly	7
	resolved by building			agree	
	teamwork.			-	
Tota	l score	4.32	0.71	Strongly	
				Agree	

Table (6) showed the response of the studied participants as regard to the main challenges faced by healthcare professionals in implementing TQM principles

It was found that the majority strongly agree with The quantities techniques are used in the planning for health services, The team works in the hospital from all administrative and clinical levels, The teamwork has developed the work process, Teamwork has improved the relationship among employees, Different teamwork has been developed to improve the quality of services and to solve problems., The teams have improved the work and created new ideas. While they agree with The problems are resolved by building teamwork, Working in teams is more important than individuals, The quality problems are usually resolved, The teamwork has improved the patient satisfaction as well as the quality of services.

**Third question:** What are the key factors influencing the successful implementation of TQM in the government healthcare sector?

.No	Training	Cases (n=331)				
		Mean	SD	Category	Rank	
21-	The provided training	.445	0.77	Strongly	3	
	programs fit the need of			Agree		
	employees.					
22-	Every employee has a	3.77	0.85	Agree	6	
	chance to enter into					
	training programs.					
23-	The employees have	.441	0.80	Strongly	4	
	chances to be trained in			Agree		
	improving the quality of					
	health care services.					
24-	Training works on the	.469	1.17	Strongly	1	
	improvement of			agree		
	employees'					
	performance					
25-	The employee has been	.454	0.77	Strongly	2	
	trained in their job			Agree		
	duties and skills.					

 Table (6): response of the studied participants regarding to

 training

26-	Training works on the	3.98	0.85	Agree	5
	improvement of health				
	services.				
Total score		.441	0.71	Strongly	
				Agree	

Table (6) showed the response of the studied participants as regard to key factors influencing the successful implementation of TQM in the government healthcare sector

It was found that the majority strongly agree with The Training works on the improvement of employees' performance, The employee has been trained in their job duties and skills, The employees have chances to be trained in improving the quality of health care services. While they agree with Training works on the improvement of health services, Every employee has a chance to enter into training programs.

#### Discussion

The findings of this study were discussed in relationship to the availability of a TQM unit and the extent of TQM principle implementation in other sectors and Middle East countries.

Three principles of TQM were identified in this study, representing 70% of the extent of implementing TQM, which consisted of the following: continuous improvement, teamwork, training.

These results were supported by Al-Omar, who identified four principles: continuous improvement, decision-making depending on the data, top management commitment and customer focus. These principles altogether explained 65% of the variance with 26 items. Customer focus was the highest implemented principle (mean 3.78 out of 5), and the least implemented principle was decision-making depending on the data (mean 3.46 out of 5).

These results were supported by Lee, Khong, Ghista, Mohammad Mosadegh Rad,11 who found that implementation of TQM was very low and was affected by management process, focus on customers, leadership and management. Process management was the highest level in application, and the lowest was focus on employees. This is consistent with the findings of other studies.14 The findings of this study support the findings of Morrow, who extracted three principles of TQM: teamwork, customer focus and continuous improvement. These three principles explained 58% of the variance with 12 items. The highest implemented principle was continuous improvement (3.36 out of 5), followed by customer focus (3.05) and finally teamwork (2.59).15 These studies explained that there is a response to the customer needs. Furthermore, they identified the importance of customer satisfaction in the success of any organization. The philosophy of quality in health services has four features: output quality, which consists of meeting customer expectations; the use of prospective and retrospective methods for evaluating and monitoring; the responsibility of all and the focus on input, process and outcomes.

#### Results

The study conducted a comprehensive analysis of the application of Total Quality Management (TQM) principles within the government healthcare sector of Saudi Arabia. Through surveys and interviews with healthcare professionals, several key findings emerged regarding current quality management practices, challenges in TQM implementation, and factors influencing successful adoption.

Continuous Improvement: The majority of respondents strongly agreed that employees from different administrative levels participate in decision-making processes, and quality policies are clear and known. Additionally, there was a high level of agreement that employees can participate in solving problems to improve quality, and the hospital is strongly committed to applying TQM principles at all levels.[24]

Teamwork: Participants strongly agreed that teamwork has improved work processes, developed relationships among employees, and created new ideas. They also acknowledged the importance of teamwork in resolving quality problems and improving patient satisfaction. This indicates a positive perception of teamwork as a facilitator of quality improvement initiatives.

Training: Respondents strongly agreed that training programs focus on improving employee performance and are tailored to the needs of healthcare professionals. They also agreed that employees have opportunities to be trained in improving the quality of healthcare services. This highlights the importance of continuous training and skill development in TQM implementation.

Challenges in TQM Implementation: Despite the overall positive perception of TQM principles, healthcare professionals face challenges such as resource constraints, resistance to change, and bureaucratic processes. These challenges can hinder the seamless adoption of TQM practices and require targeted interventions to overcome.[25]

Factors Influencing Successful Implementation: Key factors influencing successful TQM implementation include the relevance of training programs, accessibility to training opportunities, and alignment of training with organizational goals. These factors play a crucial role in empowering healthcare professionals with the necessary knowledge and skills to drive quality improvement initiatives.

#### Recommendations

Promote a Culture of Continuous Improvement:

Encourage and facilitate employee involvement in decisionmaking processes to foster a culture of continuous improvement.

Implement regular quality improvement initiatives that involve employees in problem-solving activities and decision-making processes.[26]

Foster Interdisciplinary Teamwork:

Promote and support interdisciplinary teamwork across all administrative and clinical levels to foster collaboration and innovation.

Establish multidisciplinary teams dedicated to addressing specific quality improvement goals and optimizing resource utilization.

Invest in Comprehensive Training Programs:

Tailor training programs to the specific needs and skill levels of healthcare professionals, with a focus on continuous learning and skill development.

Develop training programs covering TQM principles, quality improvement methodologies, communication skills, and patient-centered care.[27]

Address Systemic Barriers to TQM Implementation:

Address systemic barriers such as resource constraints, resistance to change, and bureaucratic processes through change management strategies.

Streamline bureaucratic processes and allocate resources effectively to support TQM initiatives.[28]

Continuous Evaluation and Adaptation:

Continuously evaluate and adapt training programs to meet the evolving needs of healthcare professionals and align training initiatives with organizational objectives.

Establish a comprehensive training needs assessment process to identify gaps in knowledge and skills among healthcare professionals and tailor training programs accordingly.[29]

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