COVER PAGE AND DECLARATION

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1- Introduction

The organization in which I work is currently considered a non-profit government sector, as it is a government health facility that provides various treatment services to the community and the individual. The hospital has an organizational structure that consists of a higher department from which the various departments are branched out, and each department has an internal organizational structure linked to the basic structure, and for each employee in the organizational structure a job description that defines his work tasks.

The leadership has defined the vision, mission, values, and strategic goals based on the strategic plan system that is prepared and reviewed every three years by the Executive Committee. The administrative leadership focuses on its vision on leadership among health institutions and reaching the ranks of international hospitals. This vision is translated into a message, values and strategic goals in the strategic plan system, taking into account (patient satisfaction questionnaires and complaints) the needs and opinions of the stakeholders (members of the executive and advisory councils), and this approach is linked to the direction and vision of the Ministry of Health, and the system is enforced in all departments and on all employees.

1.1- Organisation's leadership practices

Leadership Planning is the method of using well-thought tactics to report a

Vision for an organization or one. Strategic leadership typically manages'

Motivates and influences imployees to have that same vision, and can be an essential tool for

Implementing change or creating organizational structure within the organization.

The Hospital will creat a planning method by which it turns its mission

and values into actionable and measurable goals, strategies, initiatives, and programs.

The plan will provide direction for both long and short-term decision-making by the Hospital

Leadership and Senior Managers to fulfill the mission of the organization and make choices

among competing demands for healthcare demands, facilities, and human resources.

There are work policies for the hospital, which are set of principles, rules, and guidelines formulated or adopted by an organization to reach its long-term goals and typically published in a booklet or other form, that is widely accessible. It is created to inspire and define all major decisions and actions, and all actions have taken place within the limites set by them.

Internal Policies and Procedures It is the policy of the Hospital to standardize all the policies and procedures of different departments/services and staff are knowledgeable and comply with them.

Hospital-wide policies/procedures are developed for significant organizational issues that are interdepartmental or mandated to be hospital-wide by accreditation agencies or Ministry of Health Regulations.

There is a policy for internal communication which is the distribution of information within the hospital through which leaders achieve the necessary impact to motivate employees towards achieving the main objectives of the hospital and to ensure transparency and clarity.

 The Hospital has the objective of enhancing and streamlining internal communications to reinforce the organization's vision and strategic priorities. It is ensured that information distributed to imployees is related, easy to reach, correct and fit in both content and quantity. This policy is to be implemented in a way that ensures match with related services needs and standards of best practice. Staff is encouraged to share information with their peers and the hospital about activities and events which have an association with the organization. It is expected that staff will use the channels and associated tools for hospital purposes and in compliance with this and other relevant policies and procedures.

The leadership strengthens the relationship with the stakeholders by communicating with the 937 call center, which serves all inquiries and reports. The hospital has a methodology, which is a manual for handling call center tickets, version 30, In addition to the methodology of using a questionnaire to measure satisfaction (doctors, employees, patients) since 2018 AD, where the methodology is based on previous studies and internationally recognized standard measures that have been adopted internationally to measure satisfaction, and the methodology is reviewed on an annual basis and the method of data collection has been changed from the paper questionnaire. To electronic, the methodology of strengthening the relationship with all stakeholders is linked with many systems within the hospital including patients and there famlies.

In the hospital there are different committees, and If a problem occurs, whether emergency or chronic, the problem is discussed in the special committee to find the best solution for this problem. Then the solution will have approved by the executive committee for implementation.

The leadership team supports the culture of quality, excellence, and creativity through the existence of an integrated and documented methodology, which is the Rights and Financial Benefits Guide and the selection of the ideal employee. In addition to participating in the International Day of Quality, spreading the culture of quality, and honoring many distinguished and creative people, The hospital has also empowered and provided resources with the aim of participating in the implementation of development, improvement, and innovation projects and benefiting from best practices. Acting as a system for strengthening the relationship with all stakeholders, a system for preparing and publishing the strategic plan, a system for communication and participation, a system for performance evaluation and evaluation of human resources, a system for continuous improvement of processes, products, and services, and an environment that encourages creativity, innovation, motivation, and care of creators in achieving the spirit of development and enlightenment is provided. and certificates of thanks were honored and distributed to many distinguished people in development, improvement, and innovation projects, providing the necessary resources and the environment, and they were motivated and taken care of, the hospital administration is continuously developing and improving to create a culture of creativity and innovation.

2- Leadership impediments in government institutions

Since the institution is governmental, the administrative leadership is governed by many restrictions represented by policies, procedures, and budgets, as these restrictions often represent a hindrance to the leadership in making a change or development or creating a motivational climate for workers, as most of the capabilities available to government institutions are limited in resources and their budget does not include bonus items or items that help them to create change or development

Consequently, there are many boring procedures for employees and those stakeholders.

One of the most important obstacles in the government sector at the level of human development and the level of administrative development is the lack of incentives and the lack of attention to the social aspect of the workers as required and the lack of space for equal opportunities and for the best to walk

or lead because it is based on the centrality of management and the administrative loyalty of a certain ruling current

The leadership in government institutions follows the bureaucratic leadership, which focuses on implementing policies and procedures in a literal manner, and in many cases, this is an obstacle to change and development.

This often kills the creativity and development of the employees, and because of the scarcity of resources, training courses that develop the skills of the employees are few, so their knowledge of modern technology is limited and this affects their performance and productivity.

In terms of communication, paper communication between departments and divisions is still energetic, and the electronic transformation process has not been completed as required due to the weakness of the infrastructure and legislative procedures of some government agencies, which hinders the automation of procedures and the full transfer of electronic government transactions, as well as the limited financial resources and their lack of flexibility, including administrative ones in particular. In us, it is related to quickly responding to the requirements and needs of investment in e-government and making the necessary adjustments and changes

Whereas, while some government agencies have made tangible progress in developing their electronic services that are provided to citizens and residents auditors, others still suffer from deficiencies in their electronic services. What caused the dissatisfaction of the users and the widespread phenomenon of queuing to complete transactions, thus wasting time and exerting additional effort, whether by workers in government agencies or by auditors to complete transactions.

3- Leadership style strategic plan

When we work to develop our communities, leadership is our most essential source. The engine drives the train.

If you are part in any group or institution, you will need to develop and create leadership in order to achieve anything important.

Why? Because it is, the leaders who make things happen. They are the ones who have a vision, take the initiative, influence people, make proposals, organize logistical matters, solve problems, take on follow-up, and most of all - they are the ones who take responsibility.

Whether you are part of a small or large group or organization, it is helpful to envision your ideal leadership team.

Here you can find an exercise to help you do just that: Visualize your organization with the leadership team you want, by dedicating five or ten minutes to answering the questions below:

How many leaders do you need on your group?

Which skills they have?

Will your leadership team show the community your institution serves?

How will your team support each other and how will they support you?

How will your leaders compline to the goals of your organization?

The leaders who achieve the best results do not rely on one leadership style only, but rather use most leadership styles smoothly and to different degrees according to the work situation and this depends on the relationship between influential leadership styles. The components of emotional intelligence that are the ability to manage our relationships and ourselves effectively and for each leadership style there is disadvantages and benefits as using the style at the right time and in the right condition will increase the success of the leadership and the organization.

3.1- Appropriate leadership for government institutions & Influencing the organization culture

My opinion, the best leadership style suitable for the organization in which I work is the servant leadership style because of it being a government health sector that provides therapeutic services for the community.

What are the advantages of a servant leader?

There are different features associated with leadership, such as influencing others, making decisions, and identifying needs. All of these advantages apply to server leaders as well. However, the term

servant leader requires more than that, as it may require a different mindset. It really is a unique aspect of the idea of leadership.

Here is a list of some of the most important features of servant leadership. It is noteworthy that some of the following ideas and actions only apply to servant leadership, and there are others that we may find in all types of leadership, but, quite simply, it is more prominent among servant leaders.

The servant leader believes that he is "first among equals." This idea underlies the concept of servant leadership. The servant leader does not consider himself superior to those who lead them, but rather he / she is "first among equals" as the Latin phrase "primus inter pares" says. In other words, he / she sees those led by peers who teach and learn from them. He is ready to lead others in order to reach an agreed goal, but he does not think that he is better than others are, being the leader.

Therefore, the servant captain is a great team builder. He relies on the strengths of his followers, and is himself / herself a follower when appropriate. Such a leader does not lead by orders or dictates, but rather by letting everyone do what they do well. In this context, he might be more like a ringmaster in a circus - directing people to their right spots, then coming out from under the lights and leaving them to shine.

The servant leader uses authority with integrity. He uses leadership and power legitimately; in the interest of the people he serves. He sees leadership as a means to achieve the public interest, not a personal desired goal.

A servant leader understands the importance of everyday details. When we think about great leadership, many of us come to mind what we might call "great words." We contemplate Martin Luther King's dream; we are thinking about what we can do for our country. We think of the flaming revolutions, or the slogans of the revolutionaries.

In reality, however, these speeches are only a very small part of leadership, so much less needed for the servant leader. Being a servant leader is more linked to individual discussions and attention to everyday detail.

The servant leader listens to and cares for the constituent communities. Servant leaders are willing to take the time to listen to what others have to say. In fact, they are more than ready for this - they actively seek out the opinions and ideas of these followers. This is of the utmost importance to a servant leader.

From this listening, a relationship of mutual respect may emerge. Listening is an innate quality of a servant leader - caring for others is part of his identity. He can use this skill and learn from his followers; He is not only a teacher.

A servant leader helps people get what they want. The servant leader cares about people. Therefore, he naturally seeks to discover what they want, and helps them obtain it.

The servant leader inspires others to serve. Finally, the servant leader knows he cannot do everything on his own - and frankly, he would not have done it even if he had been able to. The servant leader wants to work with and for others. Therefore, he must be able to inspire those he serves to serve others in turn.

Therefore, the servant leader evaluates and responds to each situation individually in order to be a source of inspiration. He delegates his powers to another person when his style of leadership is best suited to the situation - he works using people's strengths. A good leader understands when he is not necessarily the best person for the job; He knows his strengths as well as his weaknesses, and he openly refers to opportunities that had better suit other people.

3.2- An evaluation of the current leadership style & leadership policy

The current leadership style is a bureaucratic style that depends on the implementation of rules and policies by force, as it depends on unified procedures and a hierarchical organizational structure manner by because of it being a governmental health institution.

The leadership has set up a management system for the hospital by enforcing the self-operation regulation of the hospital, the system of policies and procedures, and has set a guide for policies and procedures for all hospital departments to facilitate work, prevent duplication, facilitate the process of auditing and control, and define the powers that achieve goals. Where a system of policies and procedures is built through the application of the regulation according to specific work procedures that end with a guide that includes all the policies and procedures of the hospital departments, and the policies and procedures are reviewed periodically based on their expiration date, some policies were updated and new policies and procedures were added in 2017 and a guide New policies and procedures include all the amendments and updates for the previous period, and the system is linked to other systems, including the financial resources management system, the human resources system, the process identification and design system as well as supports the hospital strategy, and the system is implemented in a comprehensive, regular and sequential manner on all departments where the system

of policies and procedures was built from During the implementation of the hospital's self-operation regulation, then determining its operations according to best practices according to the degree of their relevance to achieving its strategic goals (goals - objectives - tasks) and placing them on the online portal.

We measured the efficiency of the administrative system and the institutional performance through direct meetings and reviews with the departments upon the annual update of policies and procedures. The efficiency of the system was also measured by surveying the opinions of the beneficiaries using the electronic questionnaire methodology that measures the clarity of the system and the ease of its application, the accuracy of procedures, and the extent of management review of all necessary procedures. To manage its operations, the efficiency of implementing the system was measured by indicators that measure the number of procedures in each department and the percentage of automated ones, and the extent to which departments adhere to the policies and procedures specified in the system, in addition to the presence of a Dashboard and the addition of assigning an employee to an administrative decision and a job description to take on this task and a control panel in the electronic portal

that measures the number and time of completion Transactions by employees through an easy program for administrative transactions, and analysis of measurement results for the efficiency of the system and the efficiency of its implementation, and accordingly opportunities for improvement have been identified, including unifying an organized mechanism for adding a procedure and adopting it, and by comparison with best practices from within the hospital and the available capabilities and putting forth many creative ideas, including supporting the Electronic Resources System (ERP) for human resources. In addition to the leadership developing a system for measuring, reviewing and developing institutional performance results and linking cause and effect, the leadership also paid attention to decision-making based on realistic and documented information on institutional performance results and in believing in the importance of analyzing institutional performance and benefiting from the results of self-evaluation, the hospital has conducted institutional analyzes with the aim of continuous improvement.

The leadership carries out the process of managing change through a continuous and not periodic practice according to developments and changes in the external environment since the hospital was established. There have been regular and regular practices through the Strategic Planning Department. The practice is periodically reviewed with the strategic plan system and linked to all hospital systems, and the practice is partially and regularly enforced In the Strategic Planning Department and the Legal

Affairs and Compliance Department by studying and counting changes in the environment on an ongoing basis according to the SWOT methodology, which includes internal factors, strengths, weaknesses, external opportunities and threats, and on their impact the leadership has taken some decisions and changes in its strategic goals. It has to do with change (Institutional Transformation Model 2019), risks and crisis management. The leadership team also identifies the types of risks and crises and their management by filling out the form of the electronic monthly risk register system from the risk management and it is reviewed monthly and linked to all systems and departments of the hospital, and the system is implemented in a comprehensive, regular and sequential manner and within the risk management plan where all types of potential risks are counted, classified and probability Their occurrence and degree of impact, building a guide for these risks and reviewing them with each department according to the management review form.

3.3- **The Communication in the Organization**

There is a communication policy in the hospital and the purpose of the policy is to define and describe the communication process in the hospital and to enable to fulfill the statutory responsibilities to provide information and to communicate effectively with staff about ongoing issues, policies and procedures and to ensure that the effective channels of communication are established, supported maintained.

Internal Communication is maintained and monitored through the following

Methods of communication:

- Committee/Team/Staff/Focused Croups meetings

- ln service training and education

- One on one interviews / meetings

- Staff performance evaluations/competencies

- Newsletters

- Internal portal

- Administrative/Leadership facility tours and walk rounds

- Direct communication to staff

- Staff/Departmental events

- Staff and patient surveys

- Lectures / seminars

- Minutes are taken during every departmental/ Committees meeting to communicate

Information in detail to the department staff/committee members.

- The Administration/Leadership holds monthly communication meetings with all the

Hospital staff to ensure openness and accountability. Notification of the meetings

In addition, agendas are circulated to each department and posted on the intranet. The

Hospital leadership is committed to encourage hospital wide involvement in these

Meetings.

-Any communication involving patients and confidential matters must not be

Disclosed and considered as confidential nature. (Refer to Confidentiality of

Information Policy)

The administrative leadership in the hospital realizes the importance of effective communication with all stakeholders and communication between employees and the hospital administration.

Internal communication is done through official e-mails or the hospital's electronic portal and the WhatsApp group. There is a clear and documented methodology, which is internal communication. An instruction manual. At the same time, the hospital is developing methods for effective communication between human resources through multiple channels that have been unified in one system, which is the electronic portal system, including the internal e-mail for the purpose of communication between the hospital's employees internally, and the external e-mail for communication with external agencies that enables the hospital to communicate and publish its policy, procedures and circulars. And what is new from this, and allows employees and doctors to present their ideas and development proposals and to engage them on an ongoing basis in reviewing and improving services, efficiency and effectiveness of operations, and facilitating and encouraging the sharing of information, knowledge, best practices and constructive dialogue within the hospital.

3.4- A detail summary of the networks that exist within the organization and how they may be better utilized by the leadership in the future.

There is a policy how to choose the directors of departments in the hospital based on the necessary education, experience and set of competencies required for job performance. And also to ensure that persons who direct departments have the authority and the accountability to adequately direct their departments and the responsibilities of each role are defined in writing.

The policy says that a candidate for the Directorial designation should possess the appropriate and required

education and experience according to hospital Medical Staff by Laws. and also currently registered with a valid license to practice from the country of origin and Saudi

Commission for Health Specialties, with a basic knowledge on quality management principle! with active participation in quality Management Activities, with clinical competence and administrative abilities sufficient to acquire the respect of other employees, also manages administrative duties and observes the by-laws and adheres to the policies and procedures of the hospital, also coordinates with the Medical Director on all administrative activities of the department, also develops the policies and procedures that guide provision of services within the department, and Coordinates and integrates services interdepartmentally and interdepartmentally.

He is responsible for the preparation and management of the annual operating budget of the department and for the efficient and cost and for the efficient operation of the department within allocated resources in accordance with outcome measures defined by Medical Affairs.

The appropriate determent manager is responsible for evaluating the service provided. Depending on the contractual arrangement, this can be accomplished by the contracted service submitting a performance improvement report, or by inclusion of performance measures relating to the contracted service in the departmental performance improvement activities.

Each department director and team leader is responsible for the performance improvement activities in him/her department or team. In addition, each department must develop a performance improvement plan, which projects performance measurement activities that are planned for the year. In addition, each team and department should submit a quarterly report to the QM department. The report should aggregate and analyze the data collected for each performance measure for that time, and the quarterly reports must be received in the QM department by the end of the quarter. Also develops and maintains appropriate quarterly control programs for the department.

To fulfill the hospital's mission to provide an exceptional health care system to the community, a health information management plan has been developed which requires systematic information management in the hospital as a strategic information plan that acts as a guide for building and developing the hospital's healthcare information system.

The purpose of the hospital's information management plan is to provide information to users in a timely manner, in the correct manner to enhance health care and best practices in all aspects of the hospital, both at the administrative and clinical levels, in order to support decision-making in improving patient outcomes, improving health care documentation, ensuring patient safety, and improving Performance in patient care, treatment and services. To provide decision makers with reliable and timely information, including statistics and indicators, through the electronic medical system.

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