National Survey of Pharmacy Leadership at Ministry of Health in Saudi Arabia: Communication and Relationship Strategies

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Abstract

Objective: To explore the national survey of pharmacy leadership of the Ministry of Health with emphasis on pharmacy communication strategies. **Methods:** It is a ninety days cross-sectional national survey of pharmacy leadership practice at Ministry of Health. The survey modified from self-assessment of 360 leadership and with pharmacy leadership literature. It consisted of a demographic section, leadership pathway, and fifty-three leadership questions. It contained selected eighteen leadership skills of 360 leadership, self-assessment. Of The leadership skills included Achievement, Goals, Flexibility, Feedback, Excellence, Empowering Others, Emotional Intelligence, Decision Making, Developing Others, Cultural Awareness, Continual Improvement, Communication Skills, Coworker Development, Leading the Change Needed, Attitude, Analytical, Administrative Skill, and Action. The electronic format of the survey through the survey monkey system and distributed through emails. All analysis is done through the survey monkey system. The survey divided into several parts for analysis, and discussion. Part one: practice management, part two: planning and organizations, part three: communications and relationship strategies, part four: problem-solving and decision making, part five: performances management, part six; working environment, and part seven: professional development. The study explored the part number three; National Survey of Pharmacy leadership: communication and relationship strategies. **Results:** The survey distributed to one hundred hospitals, the response rate, was forty-two hospitals (42%) with seventy-pharmacy leaders. The gender distribution of responders was Male 43 (63.24%) and female 25 (36.76%) while the nationality was Saudi 69 (98.57%) and non-Saudi one (1.43%). Most responders were in the age range (25-34 years) 30 (55.12%) and (35-44 years) 26 (38.24%). The average score Communication skills were 2.62 (87.32%) with the highest score was shared valuable information with others 2.79 (92.99%) and listens to others' points of view with an open mind was 2.79 (92.99%). The lowest score was coach others and provides feedback on the use of different oral communication styles for different audiences 2.47 (82.32 %), and checks for understanding throughout conversations or group was 2.48 (82.65 %). **Conclusion:** The communication strategies of pharmacy leaders are acceptable at Ministry of Health institution in Saudi Arabia. The pharmacy leaders demand special management education and training programs. The annual survey of pharmacy leadership is highly recommended at MOH organization in Kingdom of Saudi Arabia.

Key word: Pharmacy leadership, Communication, Relationship strategies, Ministry of Health, Saudi arabia.

INTRODUCTION

One of the best tools to improve the pharmacy services and marketing pharmaceutical services was communication skills and relationships. It involved all tools and skills or programs for under the big the Umbrella of pharmacy practice, for instance, global communication among pharmacy staff or healthcare care providers or patient relationships. Several examples of communications tools in practice For instant deliver presentations, Coaches others, Listening skills, and non-verbal communication.^[1-3] Several textbooks and educational program of the board of pharmaceutical specialties discussed the communication in the pharmacy practice but not instigated per say the pharmacy leaders.^[1,6,7] The studies conducted to investigate the pharmacy leaders with communication and relationships are seldom finding overall the world.^[8] Also, it is hard to find an investigation in Saudi Arabia or Gulf and Middle East counties discussed that is issues. The objective of the study

to explore the national survey of pharmacy leadership with emphasis on communication and relationships at healthcare organizations in Kingdom of Saudi Arabia.

METHODS

It is a ninety days cross-sectional national survey of pharmacy leadership practice at MOH hospitals. The survey modified from self-assessment of 360 leadership and with pharmacy leadership literature. It consisted of a demographic section, leadership pathway, and fifty-three leadership questions. It contained selected eighteen leadership skills of 360 leadership self-assessment.^[9] Of The leadership skills included Achievement, Goals, Flexibility, Feedback, Excellence, Empowering Others, Emotional Intelligence, Decision Making, Developing Others, Cultural Awareness, Continual Improvement, Communication Skills, Coworker Development,

Survey about pharmacy leadership, communication, and relationship strategies

Leading the Change Needed, Attitude, Analytical, Administrative Skill, and Action. The questions consisted of open and closed questions. The 5-points or 3-point Likert response scale system used. This survey distributed to all leadership at MOH hospital pharmacies in Kingdom of Saudi Arabia. It included general director of pharmacy at MOH and regions, the directors of pharmacy and supervisor at MOH hospital pharmacies. The electronic format of the survey through the survey monkey system and distributed through emails. A reminder e-mail containing a link to the website forwarded two weeks after. All analysis is done through survey monkey system. The survey divided into for several parts for analysis, and discussion. Part one: practice management, part two: planning and organizations, part three: communications and relationship strategies, part four: problem-solving

and decision making, part five: performances management, part six; working environment, and part seven: professional development. The study explored the part number three; National Survey of Pharmacy leadership: communication and relationship strategies.

RESULTS

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

Table 1: Demographic information of pharmacy leaders.

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

Table 2: Demographic hospital information.

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

Board of Hospitals Accreditation (CIBAHI) was 36 (76.60%) while 22 hospitals (46.81%) accredited by USA International Joint Commission and CIBAHI and 11 (23.40%) accredited by Saudi Commission of Healthcare Specialties. The gender distribution of responders was Male 43 (63.24%) and female 25 (36.76%) while the nationality was Saudi 69 (98.57%) and non-Saudi one (1.43%). The majority of responders were in the age range (25-34 years) 30 (55.12%) and (35-44 years) 26 (38.24%). The academic qualifications of responders were BSc. Pharm 44 (64.71%) followed by Mater degree 9 (13.24%) and Diploma Pharmacy 7 (10.29%). Of those, only 10 (14.93%) completed a residency program in pharmacy administrations, and four (4.16%) had completed board of pharmaceutical specialties. Most responders worked as a supervisor of the unit at hospital pharmacy 33 (50 %) or director of pharmacy 24 (36.36%). Of those they had experienced as pharmacist more than ten years 33 (47.14%) and had administrative work one to three years' experience 18 (25.71%) and more than ten years were 15 (21.43%) as explored in table 1 and table 2. The average score Communication skills were 2.62 (87.32%) with the highest score was Shares important information with others 2.79 (92.99%) and Listens to others' points of view with an open mind was 2.79 (92.99%). While the lowest score was coach others and provides feedback on the use of different oral communication styles for different audiences 2.47 (82.32 %) and Checks for understanding throughout conversations or group was 2.48 (82.65 %) as explored in table 3.

DISCUSSION

The pharmacy administration at MOH in Kingdom of Saudi Arabia included the communication culture with regular pharmacist or pharmacy leaders as

Table 3: Communication and relationship strategies.

Answer Options	Never		Sometimes		Always		Average	Response number
Shares important information with others.	0	0.00%	13	20.63%	50	79.37%	2.79	63
Listens to others' points of view with an open mind.	0	0.00%	13	20.97%	49	79.03%	2.79	62
Listens carefully.	0	0.00%	14	22.22%	49	77.78%	2.78	63
Communicate well.	0	0.00%	18	28.57%	45	71.43%	2.71	63
Keeps open and regular communication with others.	0	0.00%	18	29.51%	43	70.49%	2.7	61
Clarifies words or statements to gain better understanding of the message.	0	0.00%	20	31.25%	44	68.75%	2.69	64
Communicates effectively with management, both upward and downward.	0	0.00%	22	34.92%	41	65.08%	2.65	63
Effectively and regularly communicates regarding issues that are critical to the team.	1	1.59%	20	31.75%	42	66.67%	2.65	63
Use different communication way with others	2	3.13%	20	31.25%	42	65.63%	2.63	64
A leader communicates frequently and honestly about issues that are affecting employees.	1	1.61%	21	33.87%	40	64.52%	2.63	62
Communicates effectively with all levels of the organization.	1	1.59%	21	33.33%	41	65.08%	2.63	63
Asks follow-up questions as needed.	0	0.00%	26	40.63%	38	59.38%	2.59	64
Able to deliver presentations.	0	0.00%	27	43.55%	35	56.45%	2.56	62
Takes time to listen to you.	1	1.59%	27	42.86%	35	55.56%	2.54	63
Uses active listening techniques to ensure successful communication.	2	3.23%	25	40.32%	35	56.45%	2.53	62
Uses effective non-verbal communication	2	3.23%	25	40.32%	35	56.45%	2.53	62
Effectively delivers presentations to teams, large groups, and diverse audiences.	0	0.00%	30	47.62%	33	52.38%	2.52	63
Checks for understanding throughout conversations or group presentations/discussions.	0	0.00%	33	51.56%	31	48.44%	2.48	64
Provides feedback on the use of different oral communication styles for different audiences.	2	3.13%	30	46.88%	32	50.00%	2.47	64
answered question: 64 and Skipped question: 6								

part of generic pharmacy strategic planning.^[10] Several tools, projects in the communication skills, for instance, patient medication counseling for all pharmacists, pharmacist job satisfaction and pharmacy relationship. Also, the pharmacy and healthcare providers communication and relationships, how to prepare and deliver pharmacy presentation, utilization of new technology in pharmacy practice, including tele-pharmacy, the pharmacist usage of social media.^[10,11,12] Several courses conducted for all types of pharmacy staff included a pharmacist, pharmacy technician, and pharmacy leaders. The pharmacy administration requested from all pharmacies to lessen, communicate appropriately, and receive any suggestions or problem and implement or solve accordingly. Despite, that is still the actual level of communication of Pharmacy leaders is not known. The authors tried to investigate the communication skills for pharmacy leaders at of Healthcare organizations in the Kingdom of Saudi Arabia. The finding showed an average score of all communication elements is better with lower than what reported by Kolawole O *et al.*^[8] If some element removed from the results will resemble what Kolawole O *et al.* report. The highest element of communication skills was sharing information with others and this normal because it is part of the primary pharmacist job including the leaders. The leaders participated in the committee and daily discussed with staff and trained the student. The second highest communication elements were listening to other with open-minded. That is an excellent skill need for pharmacy leaders in the practice sharing and communicates new project of pharmacy services during the implementation of Pharmacy strategic planning. By the top element of communication skills, the Pharmacy leaders can prevent and protect the patient from drug-related problems.^[13-16] The lowest score of communication elements was related to presentation and training program, and this is expected to find because of pharmacy leaders not trained in the residency program and do not have advanced professional degree Pharm D. also, that reflected may be the pharmacy leaders not participated in delivering Pharmacy presentation to the healthcare professionals. The leaders may not use group discussion in the training program or the pharmacy administration especially in the large pharmacy meeting entire the staff. The non-verbal communication is not appropriate level for pharmacy leaders, and that is related to inadequate training of administration skills. The communication elements need support with established training program including the residency program. Also, the pharmacy leaders should share to deliver a presentation to the pharmacy staff and healthcare professionals at Ministry of Health organizations in Saudi Arabia.

CONCLUSION

The pharmacy leaders had well communication strategies. The sharing information was the best skills and coaches other was the lost scores. Targeting of established education and training program for pharmacy leaders is highly recommended at Ministry of Healthcare institution in the Kingdom of Saudi Arabia.

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None

CONFLICT OF INTEREST

None

SOURCE OF SUPPORT

None

ABBREVIATION USED

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

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