

# National Survey of Pharmacy Leadership at Ministry of Health in Saudi Arabia: Professional Development

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## Abstract

**Objective:** To explore the national survey of pharmacy leadership at the Ministry of Health with emphasis on pharmacy Professional development. **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. The electronic format of the survey through survey monkey system and distributed through emails. 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 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 seven: National Survey of Pharmacy leadership: Professional development.

**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 1 (1.43%). Most responders were in age range (25-34) years 30 (55.12%) and (35-44 years) 26 (38.24%). The average score Developing Other skills was 2.6 (86.46%) with the highest score was the leader open to receiving feedback 2.69 (89.65%). While average score Coworker Development skills were 2.56 (85.32 %) with the highest score was Reviews others' work for quality and provides feedback 2.66 (88.65%). The average score Continual Improvement skills was 2.6 (86.65%) with the highest score was Open to the suggestions from others 2.75 (91.65). While the Leading the Change needed skills average score was 2.57 (85.65%) with the highest score was Supports hospital's efforts to implement changes that needed to enhance pharmacy care. 2.71 (90.32%).

**Conclusion:** The professional development skills of pharmacy leader was acceptable with a specific limit at Healthcare origination in Kingdom of Saudi Arabia. Targeting to improve the pharmacy leader's skills; the Continuous Professional Development program for pharmacy leadership implementation at all Ministry of Health organization is highly recommended.

**Key word:** Pharmacy leadership, Professional development, Ministry of health, Saudi arabia.

## INTRODUCTION

The continuous professional development (CPD) program is essential tools necessary for all pharmacist. The American society of health system pharmacist discussed the concept before several years ago with highly recommended for all type pharmacy leadership, pharmacy staff and clinical pharmacists.<sup>[1-2]</sup> There are several review publication encourages the pharmacy leaders to implement the CPD within their staff and may be included as part of leaders competency or skills.<sup>[3-5]</sup> Some literature discussed the continues medical education or professional development as part of developing pharmacy staff.<sup>[6]</sup> Several studies discussed these issues as part of pharmacy leadership jobs.<sup>[7,8]</sup> It very hard to find in Kingdom of Saudi Arabia or Gulf and Middle East counties any publications about continuous professional development concepts. The goal of the study to explore the national survey of pharmacy leadership with emphasis on pharmacy professional development in healthcare organization 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.<sup>[9]</sup> 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 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 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 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 one; National Survey of Pharmacy leadership: Professional development.

## 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 Saudi Central 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 1 (1.43%). The majority of responders were in 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%)

**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)	Response N	Response %	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	

completed residency program in pharmacy administrations and four (4.16%) had completed board of pharmaceutical specialties. The majority of responders worked as a supervisor of the unit at hospital pharmacy 33 (50 %) or director of pharmacy 24 (36.36%). Of those they had experiences 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 Developing other skills was 2.6 (86.46%) with the highest score was the leader open to receiving feedback 2.69 (89.65%), and the lowest score was Assesses employees' developmental needs. 2.53 (84.32 %) as explored in Table 3. While average score Coworker Development skills were 2.56 (85.32 %) with the highest score was Reviews others' work for quality and provides feedback 2.66 (88.65%), and the lowest score was Gives others development opportunities through project assignments and increased job responsibilities 2.44 (81.32%). The average score Continual Improvement skills was 2.6 (86.65%) with the highest score was Open to

the suggestions from others 2.75 (91.65%), and the lowest score was Leader give staff a clear picture of the direction 2.52 (83.99%). While the Leading the Change needed skills average score was 2.57 (85.65%) with the highest score was Supports hospital's efforts to implement changes that needed to enhance pharmacy care. 2.71 (90.32%) and the lowest score were Write a report about organization departments that resist change 2.38 (79.32%) as explored in Table 4.

**DISCUSSION**

The Saudi commission of health specialties required from each new pharmacist to get the license to practice pharmacy. The licensed pharmacist needs to pass the exam for the first time then every reward every three or five years need to bring continuous medical education credited hours. The pharmacist needs sixty hours every three years. The CME development of a new program by name continues professional development to implement for all Gulf counties for all healthcare care professional including pharmacists and pharmacy technician.<sup>[10]</sup> After implementation of pharmacy strategic plan in late 2012, the one primary goal was Pharmacy professional development.<sup>[11]</sup> The program should consist of all aspects of professional and met hospital or primary care pharmacy competencies.<sup>[12,13]</sup> It included an aspect of knowledge. An aspect of skills, and aspect abilities. Each type of pharmacist position needs individual need development for an instant, pharmacy students, pharmacy technician student, residency program candidates, director of pharmacy staff pharmacist, pharmacy supervisor, general clinical pharmacist and all specialties type related to the clinical pharmacy professionals. The pharmacy leaders should implement all programs necessary for them including management skills and building pharmacy leaders for the future. The investigator tried to explore the national survey of pharmacy leadership with emphasis on professional development. The finding of the study showed the development of the others including pharmacy staff and healthcare care professionals was acceptable. The highest skills of development of pharmacists were the pharmacy leaders opened for discussion to any program or activities before or after started the development program. That is excellent skills of pharmacy leadership during their practice while the lowest skills were the actual assessment of the development of pharmacy need or demand and created opportunities for professional's development. That is because most of the pharmacy leaders were young and they low experiences. The average results of coworker development are acceptable with high score skills found was a review of others quality of work while the lowest score was development through projects and job responsibilities. That expected finding because most of the hospital pharmacies required getting accreditation from Saudi Center of Healthcare organization accreditation and mist of pharmacy leaders focused on pharmacy Quality management. Also, most of the pharmacy leaders maybe do not have project management skills, and they do not like

**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		

**Table 3: Developing Others.**

	Answer Options	Never		Sometimes		Always		Average	Response N
1	Assesses employees' developmental needs.	2	3.13%	26	40.63%	36	56.25%	2.53	64
2	Tries to ensure employees are ready to move to the next level.	1	1.56%	23	35.94%	40	62.50%	2.61	64
3	Facilitates employee training when implementing new programs or systems.	0	0.00%	23	35.94%	41	64.06%	2.64	64
4	Creates opportunities for professional development.	2	3.13%	26	40.63%	36	56.25%	2.53	64
5	Makes sure that employees are aware of how they perform their job.	2	3.13%	22	34.38%	40	62.50%	2.59	64
6	Motivates employees to participate in development programs.	2	3.13%	23	35.94%	39	60.94%	2.58	64
7	Enhances the knowledge and skills of others.	2	3.13%	22	34.38%	40	62.50%	2.59	64
8	Helps to coach other employees.	2	3.17%	22	34.92%	39	61.90%	2.59	63
9	Is open to receiving feedback.	2	3.13%	16	25.00%	46	71.88%	2.69	64
answered question:64 and skipped question 6									

Table 4: Coworker Development.									
	Answer Options	Never		Sometimes		Always		Average	Response N
1	Coaches/mentors individuals to improve performance and to help them be more effective at workplace.	1	1.61%	22	35.48%	39	62.90%	2.61	62
2	Gives others development opportunities through project assignments and increased job responsibilities.	4	6.45%	27	43.55%	31	50.00%	2.44	62
3	Reviews others' work for quality and provides feedback.	1	1.61%	19	30.65%	42	67.74%	2.66	62
4	Takes immediate action on poor performance.	2	3.28%	23	37.70%	36	59.02%	2.56	61
answered the question 65 and skipped question 5									
Continual Improvement									
1	Keeps up to date with newest research and technology that help to develop the job.	3	4.76%	28	44.44%	32	50.79%	2.46	63
2	Leader give staff a clear picture of the direction.	3	4.92%	23	37.70%	35	57.38%	2.52	61
3	Looks for ways to expand and learn new job skills.	1	1.59%	20	31.75%	42	66.67%	2.65	63
4	Looks for ways to develop work processes and procedures.	1	1.59%	21	33.33%	41	65.08%	2.63	63
5	Open to the suggestions from others.	1	1.59%	14	22.22%	48	76.19%	2.75	63
answered the question 63 and skipped question 7									
Leading the Change Needed									
1	Supports hospital's efforts to implement changes that needed to enhance pharmacy care.	1	1.61%	16	25.81%	45	72.58%	2.71	62
2	Write report about organization departments that resist change.	3	4.76%	33	52.38%	27	42.86%	2.38	63
3	Supports new initiatives for organizational changes to improve effectiveness.	1	1.59%	25	39.68%	37	58.73%	2.57	63
4	Assists others in understanding changes to the organization.	0	0.00%	26	41.27%	37	58.73%	2.59	63
5	Helps the department manage organizational changes without any resistance.	1	1.59%	23	36.51%	39	61.90%	2.6	63
answered the question 63 and skipped question 7									

to increase the administration responsibilities without any additional benefit. The average scores skills of continual improvement were acceptable while the highest score skills were the leaders open for any suggestions and lower skills one kept dating the research and technology for helping get, that is due to the leaders open-minded to the discussion but not had abilities or skills in the research or pharmacy technology. The average results of leader the change was good with higher scores were supported the hospital for changes while lowest scores are writing of report for resistance changes. The results almost resemble what reported by Kolawole *et al.*<sup>[7]</sup> Most of our pharmacy leaders had excellent to work as a member of the teams in the hospitals, especially during hospital ad accreditation. While the documentation system of leaders in not appropriate, which is expected and due to the Pharmacy leaders had not enough experience for writing reports after the development any project. Most of the results could not compare with others studies due to the majority of investigations were a textbook, review papers, or discussed in depth detail like our study. The study may be the first study world, Saudi Arabia, Gulf or Middle East countries discussed such detail of pharmacy leadership with emphasis on professional development skills. The professional development of pharmacy leaders need a revision of assessment of the program, key successful indicators and improve some skills.

## CONCLUSION

The national survey of pharmacy leadership with the focusing on professional development is the first study done in Saudi Arabia, Gulf or Middle East counties. Targeting to improve some skill of professional development for pharmacy leaders is highly recommended. Further studies needed for more detail of professional development at Ministry of Health originations in Kingdom of Saudi Arabia is required.

## ACKNOWLEDGEMENT

None

## CONFLICT OF INTEREST

None

## SOURCE OF SUPPORT

None

## ABBREVIATION USED

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

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