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IMPACT OF QUALITY MANAGEMENT PRACTICES ON INNOVATION PERFORMANCE IN HOSPITALS WITH THE INTERVENING ROLES OF QUALITY CULTURE AND INNOVATION STRATEGY

GHANEM ALOTAIBI

DOCTOR OF PHILOSOPHY
UNIVERSITI UTARA MALAYSIA
2018
IMPACT OF QUALITY MANAGEMENT PRACTICES ON INNOVATION PERFORMANCE IN HOSPITALS WITH THE INTERVENING ROLES OF QUALITY CULTURE AND INNOVATION STRATEGY

BY
GHANEM ALOTAIBI

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ABSTRACT

The main objective of this study is to examine the effect of the Quality Management practices (QMPs) on innovation performance in the Kingdom of Saudi Arabia (KSA) hospitals. Additionally, the mediating effect of innovation strategy, quality culture and moderating effect of transformational leadership were examined between relationship of QMPs and innovation performance in hospitals of KSA. Data were collected from a population of 268 hospitals in the KSA using a cross-sectional study. A survey method was used for data collection and the questionnaires were personally-administered. Samples of 159 respondents were selected from the hospitals' directors using stratified random sampling. Partial Least Squares Structural Equation Modelling (PLS-SEM) was used to test the hypotheses in this study. The results showed that the construct of QMPs positively affect innovation performance in Saudi hospitals. With regard to the mediation of quality culture and innovation strategy, the results proved that both variables have a partial mediation role in the relationship between QMPs and innovation performance. Finally, the results showed that transformational leadership moderates the relationship between QMPs and innovation performance. The results of this study provide important insights to the hospital administrators, policy-makers and researchers in order to have a greater understanding of the effect of quality management practices, quality culture, innovation strategy, transformational leadership and innovation performance. The study concludes that providing quality culture in hospitals positively influences the performance of hospital employees. The health policy-makers should encourage hospital administrators to improve their transformational leadership which will also provide opportunities for the employees to enhance innovation performance in KSA Hospitals.

Keywords: Quality management practices, quality culture, innovation strategy, and innovation performance.
Objektif utama bagi kajian ini adalah untuk menyelidik kesan amalan pengurusan kualiti (QMPs) terhadap prestasi inovasi di hospital-hospital dalam kerajaan Arab Saudi (KSA). Di samping itu, kesan pengantara strategi inovasi, budaya kualiti dan kesan penyederhanaan kepimpinan transformasi diteliti bagi melihat hubungan di antara QMPs dengan inovasi prestasi hospital-hospital di KSA. Data dikumpulkan daripada populasi 268 buah hospital di Arab Saudi dengan menggunakan satu kajian rentas. Kaedah tinjauan digunakan untuk pengumpulan data dan borang soal selidik ini telah diedar secara peribadi. Sebanyak 159 sampel daripada responden telah dipilih dari kalangan pengarah hospital dengan menggunakan persampelan rawak berstrata. Model persamaan kuasa dua terkecil separa berstruktur (PLS-SEM) telah digunakan untuk menguji hipotesis dalam kajian ini. Hasil kajian menunjukkan bahawa konstruk daripada QMPs mempengaruhi prestasi inovasi di hospital Arab Saudi secara positif. Berhubung dengan pengantaraan budaya kualiti dan strategi inovasi pula, hasil kajian membuktikan bahawa kedua-dua pemboleh ubah mempunyai peranan sebagai sebahagian daripada pengantaraan dalam hubungan di antara QMPs dengan prestasi inovasi. Akhir sekali, hasil kajian ini penting kepada para pentadbir hospital, pembuat dasar dan penyelidik untuk memperoleh pemahaman yang lebih mendalam mengenai kesan daripada amalan pengurusan kualiti, budaya kualiti, strategi inovasi, transformasi kepimpinan dan inovasi prestasi. Kajian ini turut menyimpulkan bahawa penyediaan budaya kualiti di hospital-hospital mempengaruhi prestasi kakitangan hospital secara positif. Pembuat dasar yang bertanggungjawab harus menggalakkan pentadbir hospital untuk memperbaiki transformasi kepimpinan mereka yang juga akan menyediakan peluang untuk pekerja meningkatkan pencapaian inovasi di hospital-hospital dalam KSA.

Kata kunci: Amalan pengurusan kualiti, budaya kualiti, strategi inovasi, dan prestasi inovasi.
ACKNOWLEDGEMENTS

Firstly, I would like to express my sincere gratitude to my supervisor Prof. Dr. Rushami for his invaluable guidance and support throughout my research and writing this thesis. I would also like to thank my supervisor Prof. Dr. Sany for his insightful comments and encouragement. I could not have imagined having a better advisors for my PhD studies, which I greatly appreciate. Sincere thanks also go to the library and support staff at the university for their helpful assistance, and to my fellow PhD students who saw me through the highs and the lows.

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LIST OF ABBREVIATIONS

KSA: KINGDOM OF SAUDIA ARABIA

MOH: MINISTRY OF HEALTH

QMPs: QUALITY MANAGEMENT PRACTICES

IP: INNOVATION PERFORMANCE

QC: QUALITY CULTURE

IS: INNOVATION STRATEGY

TL: TRANSFORMATIONAL LEADERSHIP

EI: EMPLOYEE INVOLVEMENT

CF: CUSTOMER FOCUS

RD: ROLE OF QUALITY DEPARTMENT

SQ: STRATEGIC MANAGEMENT

PM: PROCESS MANAGEMENT

IA: INFORMATION AND ANALYSIS

CI: CONTINUES IMPROVEMENT

TE: TRAINING AND EDUCATION
CHAPTER ONE
INTRODUCTION

1.1 Background
Quality management practices play a significant role in business success and achievement. Leaders of business organizations, especially service organizations, have started to change from seeking success through strategies and techniques to seeking a culture that creates and sustains success (Schein, 2010). Quality management practices (QMPs) also enhance competitive advantage and help to achieve organizational goals (Kafetzopoulos, Gotzamani, & Gkana, 2015). QMPs increase the quality of services and products, and lead to customer satisfaction and continuous improvement (Kim, Kumar, & Kumar, 2012).

Innovation performance is significant in developing a strong competitive advantage. Innovation has been described as an important element in sustaining organizational competitiveness (Büschgens, Bausch, & Balkin, 2013; Ettlie & Rosenthal, 2011; Stock & Zacharias, 2011). Innovation has become one of the main priorities of organizations to achieve their goals of financial revenue and customer satisfaction (Schniederjans & Schniederjans, 2015; Yusr, Othman, & Mokhtar, 2012). Innovation performance is an indicator of the overall performance of an organization. Thus, innovation drives the organization’s functions to enhance its competitive advantage in the market (Schniederjans & Schniederjans, 2015). It is also an effective element linked to organizational strategies, culture, and goals (Hogan & Coote, 2014; Schein, 2010). From the perspective of the healthcare sector, innovation is the main motivator for enhancing
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REFERENCES


between pre and post accreditation periods in King Abdulaziz University Hospital. Research Journal of Medical Sciences, 5(1), 61-66.


Doeleman H. Have S., and Ahaus C. (2012, Empirical evidence on applying the European Foundation for Quality Management Excellence Model, a literature review, Total


Fraser, B. (2007) Human resources for health in the Americas *The Lancet* Volume 369 Issue 9557, 179 - 180


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https://www.itu.int/ITU-D/cyb/events/2012/ehealth/Nat_eH_Dev/Session%204/KSA-MOH-Presentation-SaudiArabia%20FINAL.pdf

https://www.weforum.org/agenda/2016/08/these-are-the-worlds-most-innovative-economies/


Jeong, S., Hsiao, Y. Y., Song, J. H., Kim, J., & Bae, S. H. (2016). The Moderating Role of Transformational Leadership on Work Engagement: The Influences of


Leape, L. L., & Berwick, D. M. (2000). Safe health care: are we up to it?: We have to be. *BMJ: British Medical Journal*, 320(7237), 725.


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APPENDIX A

Model of the current study
Strategic quality planning
Continues improvement
Information and Analysis
Customer Focus
Employee involvement
Training and education

Role of the quality department

Quality culture

Transformational leadership

Innovation strategy

Process management

QMP

Innovation Performance

Radical process innovation
Radical product innovation
Incremental product innovation
Incremental process innovation
Administrative innovation

Independent variable
Mediators
Moderator
Dependent variable
APPENDIX B
QUESTIONNAIRE
I am conducting a study for the purpose of scientific research to examine the impact of Quality management practices on innovation performance in hospitals in order to enhance the overall performance. When the study completed, I will be awarded a PhD in Business Management from Universiti Utara Malaysia. The title of the study is “Impact of quality management practices on innovation performance in hospitals: with the intervening role of quality culture and innovation strategy”.

It would be appreciated if you used your time to answer the enclosed questionnaires. Your participation is very important and significant. Information you give will make the importance of the study. The information gathered will be treated confidentially and only be used the purpose of this study scientific research.

Thank you for your cooperation.

Regards,
The researcher:
Ghanem Alotaibi
Cell phone: +966533969696
Email: g121@hotmail.com
Part A: Demographic Information

This section seeks general information about your position and the hospital, please circle the appropriate letter in the first question and give the answer for the second question.

1. How many years have you been in your position?
   a. 1 – 3  b. 4 – 6  c. 6 – 10  d. more than 10

2. Location of the hospital

The following parts (part B - F) seek information on five main variables namely Quality Management Practices, quality culture, transformational leadership, innovation strategy and innovation performance. Please tick () following:

1 = Strongly disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly agree

<table>
<thead>
<tr>
<th>Construct</th>
<th>Measurement Items</th>
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<tbody>
<tr>
<td><strong>Part B</strong> Quality Management Practices</td>
<td><strong>Training and education</strong>&lt;br&gt; 5. Hospital employees are given education and training in how to identify and act on quality improvement opportunities.&lt;br&gt; 6. Hospital employees are given education and training in methods that support quality improvement.&lt;br&gt; 7. Hospital employees are given the needed education and training to improve job skills and performance.&lt;br&gt; 8. Hospital employees are rewarded and recognized (e.g., financially and/or otherwise) for improving quality.&lt;br&gt; <strong>Employee involvement</strong>&lt;br&gt; 5. Teamwork and consensus are important in our hospital&lt;br&gt; 6. Our hospital encourages employees to participate in decision making&lt;br&gt; 7. Our hospital tries to understand the point of view of patients in defining the quality of health services.&lt;br&gt; 8. Our hospital’s senior management encourages teamwork across units and disciplines&lt;br&gt; <strong>Strategic quality planning</strong>&lt;br&gt; 8. Hospital employees are given adequate time to plan for and test improvements.</td>
</tr>
</tbody>
</table>
9. Each department and work group within this hospital maintains specific goals to improve quality.

10. The hospital's quality improvement goals are known throughout the organization.

11. Hospital employees are involved in developing plans for improving quality.

12. Middle managers (e.g., department heads, program directors, and first line supervisors) are playing a key role in setting priorities for quality improvement.

13. External customers are playing a key role in setting priorities for quality improvement.

14. Non-managerial employees are playing a key role in setting priorities for quality improvement.

**Customer focus**

4. The hospital does a good job of assessing current patient needs and expectations.

5. Hospital employees promptly resolve patient complaints.

6. Patients' complaints are studied to identify patterns and prevent the same problems from recurring.

7. The hospital uses data from patients to improve services.

8. The hospital does a good job of assessing physician satisfaction with hospital services.

9. The hospital uses data on customer expectations and/or satisfaction when designing new services.

**Information and analysis**

7. The hospital collects a wide range of data and information about the quality of care and services.

8. The hospital uses a wide range of data and information about the quality of care and services to make improvements.

9. The hospital continually tries to improve how it uses data and information on the quality of care and services.

10. The hospital continually tries to improve the accuracy and relevance of its data on the quality of care and services provided.

11. The hospital continually tries to improve the timeliness of its data on the quality of care and services provided.

12. The hospital compares its data to data on the quality of care and services at other hospitals.
### Continuous improvement

5. Managers in the hospital try to improve the quality of their service.

6. Managers in the hospital believe that quality improvement is their responsibility.

7. Managers in the hospital analyze their work services to look for ways of doing a better job.

8. The hospital has witnessed many improvements in the services.

### Process management

7. Quality data (defects, complaints, outcomes, time, satisfaction, etc.) are available.

8. Quality data are timely.

9. Quality data are used as tools to manage quality.

10. Quality data are available to hourly workers.

11. Quality data are available to managers and supervisors.

12. Quality data are used to evaluate supervisor and managerial performance.

### Role of the quality department

1. Quality department in the hospital is visible and easy accessed by all.

2. Quality department's access to divisional top management is easy.

3. Quality department in the hospital is independent.

4. There is a good level of coordination between the quality department and other departments.

5. Quality department is effective in improving quality in the hospital.

### Part C Improvement orientation

#### Quality culture

1. Workers who have a lot of experience doing something don't need to spend time collecting a lot of information to figure out how to do it better.

2. Trying to improve the way the work gets done is part of everyone's job.

3. An important part of everyone's job is to study the way we work.

4. A regular meeting to analyze the way work gets done makes an important contribution to improving customers' needs.

5. The idea of continually studying the way of work is important for all employees.

#### Teamwork Orientation

1. Employees and workers in different departments of the hospitals help each other.
2. Employees and workers in different departments of the hospitals are comfortably suggesting changes and improvements to each other.

3. There is a lot of cooperation between groups in this hospital.

4. Groups in this hospital do not work together to solve problems

**Mission and Goals Orientation**

2. Employees and workers are aware of how their work contributes to the organization’s mission.

3. Organization’s mission is understood by everyone who works in the hospital.

4. Workers in this organization do not feel that the organization’s goals have much to do with their work.

5. People who work in the hospital do not know exactly how their work contributes to the goals of the organization.

6. All employees and works understand the organization’s goals.

**Management Style**

1. Employees and workers can easily meet and hear the management.

2. Employees and workers are aware of how their changes in their work affect others.

3. People in the organization usually listen to the ideas of change.

4. Management of the hospital is willing to spend money to improve the quality of our services.

**Personal Influence/Performance**

7. My performance is judged more by how much work I do than by how well I do it.

8. Employees and workers in this organization are satisfied as long as the work meet the minimum standards.

9. Employees and workers have control over how things are done.

10. Employees and workers do not influence their groups on how things are done.

**Part D**

**Innovation strategy**

4. The organization’s vision and mission include a reference to innovation.

2. Innovation strategy had helped the organization to achieve strategic goals.

3. Improving administrative routine is seen as part of our innovation strategy.

4. Internal cooperation is an important part of
innovation strategy implementation.

5. Customer satisfaction is part of our innovation strategy.
6. Improving service quality is one of our key objectives of innovation strategy.
7. Formulating innovation strategy increases employees' skills.
8. Improving employees' commitment, morale, or both is part of our innovation strategy monitoring.

<table>
<thead>
<tr>
<th>Part E</th>
<th>Transformational leadership</th>
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<tbody>
<tr>
<td>14.</td>
<td>Top manager of the hospital talk about most important values and beliefs.</td>
</tr>
<tr>
<td>15.</td>
<td>Top manager of the hospital seek differing perspectives when solving problems.</td>
</tr>
<tr>
<td>16.</td>
<td>Top manager of the hospital talk optimistically about the future.</td>
</tr>
<tr>
<td>17.</td>
<td>Top manager of the hospital are pride of being associated with their employees.</td>
</tr>
<tr>
<td>18.</td>
<td>Top manager of the hospital talk enthusiastically about what needs to be accomplished.</td>
</tr>
<tr>
<td>19.</td>
<td>Top manager of the hospital specify the importance of having a strong sense of purpose.</td>
</tr>
<tr>
<td>20.</td>
<td>Top manager of the hospital spend time teaching and coaching.</td>
</tr>
<tr>
<td>21.</td>
<td>Top manager of the hospital go beyond self-interest for the good of the group.</td>
</tr>
<tr>
<td>22.</td>
<td>Top manager of the hospital give each employee his autonomy as an individual rather than a member of a group.</td>
</tr>
<tr>
<td>23.</td>
<td>Top manager of the hospital act in way that builds employee's respect.</td>
</tr>
<tr>
<td>24.</td>
<td>Top manager of the hospital consider the moral and ethical consequences of decisions.</td>
</tr>
<tr>
<td>25.</td>
<td>Top manager of the hospital display a sense of power and confidence.</td>
</tr>
<tr>
<td>26.</td>
<td>Top manager of the hospital articulate a compelling vision of the future.</td>
</tr>
<tr>
<td>27.</td>
<td>Top manager of the hospital consider each employee as having different needs, abilities, and aspirations from others.</td>
</tr>
<tr>
<td>28.</td>
<td>Top manager of the hospital get their employee to look at problems from many different angles.</td>
</tr>
<tr>
<td>29.</td>
<td>Top manager of the hospital help their employee to develop their own strengths.</td>
</tr>
<tr>
<td>30.</td>
<td>Top manager of the hospital suggest new ways of looking at how to complete</td>
</tr>
</tbody>
</table>
31. Top manager of the hospital emphasize the importance of having a collective sense of mission.

<table>
<thead>
<tr>
<th>Part F Innovation performance</th>
<th>Process innovation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5. The number of new process in our hospital has increased in the last 5 years</td>
</tr>
<tr>
<td></td>
<td>6. Our hospital is the first one offering new process compared to other hospitals</td>
</tr>
<tr>
<td></td>
<td>7. Our hospital changes and develops new process faster than other hospitals</td>
</tr>
<tr>
<td></td>
<td>8. Our hospital is faster in applying new process</td>
</tr>
<tr>
<td></td>
<td>9. Our hospital encourages the new ideas presented to develop new process</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Service innovation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Our hospital is the first one offering new service compared to other hospitals</td>
</tr>
<tr>
<td></td>
<td>2. The number of new services in our hospital has increased in the last 5 years</td>
</tr>
<tr>
<td></td>
<td>3. Our hospital encourages the new ideas presented to develop new service</td>
</tr>
<tr>
<td></td>
<td>4. Our hospital changes and develops new service creation methods faster than other hospitals</td>
</tr>
<tr>
<td></td>
<td>5. Our hospital is faster in bringing the new service to the people who use the service</td>
</tr>
</tbody>
</table>

Thank you for using your time
APPENDIX C

ARABIC QUESTIONNAIRE
استبيان

السيد المدير

السلام عليكم ورحمة الله وبركاته

تحيتي طيبة وبعد

أنا بصدد إجراء دراسة لغرض البحث العلمي حول أثر ممارسات إدارة الجودة على الابتكار. عند اكتمال الدراسة، سيتم منح شهادة الدكتوراه في الإدارة الصحية من جامعة أورنارا ماليزيا، عنوان الدراسة هو: "أثر ممارسات إدارة الجودة على أداء الابتكار في المستشفيات السعودية". سأكون ممتنًا جداً لتواصلكم بالإجابة على الأسئلة في هذا الاستبيان.

سيتم التعامل مع المعلومات التي يتم جمعها بصورة سريّة ولا نستخدم إلا لأغراض هذه الدراسة والبحث العلمي.

مدة الاستبيان: من 10 إلى 15 دقيقة

تقبلوا فائق التقدير والإحترام وجزيل الشكر والعرفان

وتندينا بالتوقيع للجميع

الباحث: عارف السعيبي

الهاتف المحمول: 096653396696

البريد الإلكتروني: g121@hotmail.com

القسم: معلومات ديموغرافية

هذا القسم بأسئلة من المعلومات الخاصة بالمنصب. رجاء الإجابة على الأسئلة التالية:

1. عدد السنوات التي قضيتها في منصب الحالي
   - 10 - 15
   - أكثر من 15

2. اسم المحتفظة التي بها المستشفى:
   - الإقسام التالية من ب إلى د تحتوي على أسلس أقياس متغيرات الدراسة. ضع علامة (+) إذا أتفقت على أحد الخيارات
   - لا أافق بشدة، لا أافق، محاب، أافق، أافق بشدة

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<table>
<thead>
<tr>
<th>الالسئة</th>
<th>القسم</th>
</tr>
</thead>
<tbody>
<tr>
<td>التدريب والتعليم</td>
<td></td>
</tr>
<tr>
<td>1. يتم تدريب موظفي المستشفى على كيفية تحديد وإيجاد فرص تحسين الجودة</td>
<td></td>
</tr>
<tr>
<td>2. يتم تدريب موظفي المستشفى على أساليب تحسين الجودة</td>
<td></td>
</tr>
<tr>
<td>3. يتم تدريب موظفي المستشفى التدريب اللازم لتحسين مهارات العمل والأداء.</td>
<td></td>
</tr>
<tr>
<td>4. تقوم الإدارة بمكافآت موظفي مستشفى مكافحة مالية و غيرها من أجل تعزيز جودة العمل الجماعي والمشاركة</td>
<td></td>
</tr>
<tr>
<td>العمل الجماعي والتوافق بين الموظفين مهم في هذه المستشفى</td>
<td></td>
</tr>
<tr>
<td>1. يشجع مستشفى الموظفين على المشاركة في صنع القرار</td>
<td></td>
</tr>
<tr>
<td>2. يتناول مستشاري بصورة مستمرة فهم وجهة نظر الموظفين و المستفي في تحديد نوعية ووحدة الخدمات الصحية.</td>
<td></td>
</tr>
<tr>
<td>3. تقوم الإدارة العليا في المستشفى بتشجيع العمل الجماعي عبر الوحدات وال.funcs</td>
<td></td>
</tr>
<tr>
<td>التخطيط الاستراتيجي</td>
<td></td>
</tr>
<tr>
<td>1. يعطي موظفو المستشفى الوقت الكافي للتخطيط والتحسين</td>
<td></td>
</tr>
<tr>
<td>2. كل الإقسام داخل هذا المستشفى لها أهداف محددة لتحسين جودة</td>
<td></td>
</tr>
<tr>
<td>3. أهداف تحسين الجودة في هذا المستشفى معرفة وواضحة للجميع</td>
<td></td>
</tr>
<tr>
<td>4. يشارك موظف المستشفى في وضع خطة تحسين الجودة</td>
<td></td>
</tr>
<tr>
<td>5. يرسم الإقسام ومدير الوحدات والبرامج والشركاء جميعهم يلعبون دورا رئيسيا في تحديد الأولويات لتحسين الجودة</td>
<td></td>
</tr>
<tr>
<td>6. يلعب المرضى دورا رئيسا في تحديد الأولويات لتحسين الجودة</td>
<td></td>
</tr>
<tr>
<td>7. الموظفون غير الإداريين يلعبون دورا رئيسيا في تحديد الأولويات لتحسين الجودة</td>
<td></td>
</tr>
<tr>
<td>التركز على العملاء</td>
<td></td>
</tr>
<tr>
<td>1. يقوم المستشفى بتقييم جيد للاحتياجات التفاعلية والعملاء</td>
<td></td>
</tr>
<tr>
<td>2. يقدم موظف المستشفى جوائز فورية ل شكرا المعاملين</td>
<td></td>
</tr>
<tr>
<td>المعلومات وتحليلها</td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td></td>
</tr>
<tr>
<td>1. يقوم المستشفى بجمع البيانات والمعلومات حول نوعية الرعاية والخدمات بصورة مستمرة</td>
<td></td>
</tr>
<tr>
<td>2. يستخدم المستشفى البيانات والمعلومات حول نوعية الرعاية والخدمات في تحسين الخدمات</td>
<td></td>
</tr>
<tr>
<td>3. يحاول المستشفى بستمرار تحسين العملية التي يستخدم بها البيانات والمعلومات حول نوعية الرعاية والخدمات</td>
<td></td>
</tr>
<tr>
<td>4. يحاول المستشفى بستمرار تحسين توثيق البيانات والمعلومات حول نوعية الرعاية والخدمات</td>
<td></td>
</tr>
<tr>
<td>5. يقارن مستشفى بستمرار البيانات الخاصة به إلى البيانات عن نوعية الرعاية والخدمات في المستشفيات الأخرى</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>التحسين المتواصل</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. يحظر المستشفى بصورة مستمرة تحسين جودة الخدمات</td>
</tr>
<tr>
<td>2. كل القائمين على أمر المستشفى يعتقدون أن تحسن الجودة هو مسؤوليتهم</td>
</tr>
<tr>
<td>3. كل القائمين على أمر المستشفى يقومون بتحليل أدائهم من أجل تحسينه</td>
</tr>
<tr>
<td>4. لقد شهدت المستشفى الكثير من التحسين في الخدمات</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>الإدارة الإجراءات والعمليات</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. بيانات الجودة متوفرة ويسهل الحصول عليها (فيما يخص الشكاوى، والتقارير ورضا العامل، وما إلى ذلك)</td>
</tr>
<tr>
<td>2. بيانات الجودة لدينا دائما محذرة ومجددة</td>
</tr>
<tr>
<td>3. يتم استخدام بيانات الجودة بصورة فعالة في مهام إدارة الجودة</td>
</tr>
<tr>
<td>4. بيانات الجودة متوفرة ويسهل الحصول عليها من قبل العامل</td>
</tr>
<tr>
<td>5. بيانات الجودة متوفرة ويسهل الحصول عليها من قبل المدراء والموظفين</td>
</tr>
<tr>
<td>6. تستخدم بيانات الجودة في قياس أداء المدراء والموظفين</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>دور قسم إدارة الجودة</th>
</tr>
</thead>
</table>
| 1. قسم إدارة الجودة في المستشفى متوفر ويسهل
## الوصول إليه

- يسهل على قسم إدارة الجودة في المستشفى الوصول للاستراتيجية المختلفة.
- يعمل قسم إدارة الجودة في المستشفى بحيث يكون هناك توافق بين قسم إدارة الجودة وبين باقي الأقسام في المستشفى.
- توافق الجودة قسم فعال في تحقيق مستوى الجودة في المستشفى.

## أسلوب الإدارة

- أسلوب في الغالب تفضيل ما يسمى من الإدارة.
- عندما يقوم عمال هذه الشركة بإجراء تغييرات في

## التوجه نحو التحسين الدائم

- الموظفون أصحاب الخبرة الذين لا يحتاجون إلى قضاء وقت لتحصيل المعلومات وفهم طريقة القيام بالمهام على نحو أفضل.
- إن محاولة تحسين طريقة إنجاز العمل مستقبلية للجميع:
- من الأجزاء المهمة في عمل الجميع دراسة الطرق التي تعمل بها.
- إن الاجتماعات المنتظمة لتحليل طريقة إنجاز العمل تشكل مساهمة هامة في تحسين احتياجات العملاء.
- إن فكرة الدراسة المستمرة لطريقة إنجاز العمل ببعض التكنولوجيا من تحسين هذا العمل لا تطبيق حقية على عمل الجميع.

## التوجه بخصوص العمال الجماعي

- يحاول العمال في الإدارات المختلفة مساعدات بعضهم البعض.
- الأشخاص الذين أعمل منهم يترحون التغييرات والتحسنات لبعضهم البعض.
- هناك الكثير من التفاوت بين مجموعات العمل في هذه الشركة.
- في غالبية مجموعات العمل بهذه الشركة لا يعمل العمال مع تكنولوجيا المشتقات.

## التوجه بشأن المهام والأهداف

- يعلم معظم العاملين في هذه الشركة مدى مساحة عمليهم في تعزيز رساله الشركة.
- رسالة الشركة مفهومة لدى جميع عماله.
- لا يشعر العمال في هذه الشركة بأن أهداف الشركة لا تتعلق كثيرًا بهم.
- لا يعرف الأشخاص العاملين بالشركة بالتحديد ما هي الأهداف المحددة للشركة.
- جميع من يعمل هنا يفهم بالتحديد ما هي الأهداف المحددة للشركة.
<table>
<thead>
<tr>
<th>التأثير الأداء الشخصي</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>يحسب دافئي بكمية العمل الذي يقوم به وليس بطريقة القيام بهذا العمل بشكل جيد.</td>
</tr>
<tr>
<td>2.</td>
<td>العمل في هذه الشركة قادرون ما دام عملنا يلي الحد الأدنى للمعايير.</td>
</tr>
<tr>
<td>3.</td>
<td>في حالة عملنا، لدينا سيطرة سريعة على تفويض تحميل النتائج.</td>
</tr>
<tr>
<td>4.</td>
<td>العمل في هذه الشركة يتنبأ المزيد من التعافي في تفويض الأشياء وليس في النساء تفويض الأدوار على النحو الصحيح من المرة الأولى.</td>
</tr>
<tr>
<td>5.</td>
<td>ليس لدينا الكثير من التأثير على تفويض أداء العمل في مجموعة عملنا.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>الاسم:</th>
<th>عين استراتيجية الإبتكار</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>رؤية المنظمة ورسالتها تشمل على الإبتكار.</td>
</tr>
<tr>
<td>2.</td>
<td>استراتيجيتنا الإبتكار لدينا قد ساعدت المستفيدين في تحقيق الأهداف.</td>
</tr>
<tr>
<td>3.</td>
<td>تحصين الرورين الإداري يعتبر جزء من استراتيجية الإبتكار لدينا.</td>
</tr>
<tr>
<td>4.</td>
<td>النمو الداخلي هو جزء مهم في تحقيق استراتيجية الإبتكار لدينا.</td>
</tr>
<tr>
<td>5.</td>
<td>رضا العامل هو جزء مهم من استراتيجية الإبتكار لدينا.</td>
</tr>
<tr>
<td>6.</td>
<td>تحصين نوعية الخدمة هي واحدة من الأهداف الرئيسية لاستراتيجيتنا الإبتكار.</td>
</tr>
<tr>
<td>7.</td>
<td>صيانة استراتيجية الإبتكار تحتوي على زيادة مهارات الموظفين.</td>
</tr>
<tr>
<td>8.</td>
<td>تحصين التزام الموظفين، والروح المعنوية هي جزء من استراتيجية الإبتكار لدينا.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>الاسم:</th>
<th>عين قيادة الجودة</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>يتحدث حول أمثلة أو المعتقدات لديه.</td>
</tr>
<tr>
<td>2.</td>
<td>يبحث عن وجهات نظر مختلطة عند حل المشاكل.</td>
</tr>
<tr>
<td>3.</td>
<td>يتحدث بتقديم حل مستقل.</td>
</tr>
<tr>
<td>4.</td>
<td>يلقت الشرعية معه.</td>
</tr>
<tr>
<td>5.</td>
<td>يقشع بخصوص محدودة من هو المسؤول عن تحقيق أهداف الإدارة.</td>
</tr>
<tr>
<td>6.</td>
<td>يحدد العامية الحصول على احساس فوري بالقصد (الكره).</td>
</tr>
<tr>
<td>7.</td>
<td>يعلي مع الوقت لتدريب紅.</td>
</tr>
</tbody>
</table>
8. يتجاوز المصطلح الذاتية لصالح الجماعة
9. يعطى كل فرد حصويته في التعامل
10. يعمل بطريقة تزيد من تقديره له
11. يتجنب النانوس إلا الإخلاصة ومعنوية للقرارات
12. يظهر شعورا بالقوة والثقة
13. يشكل رؤية واضحة للمستقبل
14. يعتبرون شخصا داخلاً وقادراً وأهمة مختلفة عن الآخرين
15. يساعدون في تفكيك المشكلات في عدة زوايا
16. يساعدون في تطوير مكاسب القوة لدى
17. يقترح طرقا جديدة في البحث عن كيفية انجاز المهام
18. يؤكد على أهمية وجود حسن جماعي بالمهمة

الابتكار في العمليات والإجراءات
1. لقد زاد عدد من الحرف والإجراءات المستخدمة والمحسنة في المستشفى في آخر 5 سنوات
2. مستشفينا هو الازدياد في تطبيق الحرف والإجراءات الحالية
3. يتم تطبيق الحرف والإجراءات الجديدة في المستشفى بصورة أسرع من المستشفيات أخرى
4. مستشفينا هو الأسرع في ابتكار وتحديث وتطبيق
5. مستشفينا دائمًا يعمل على تشجيع وتحفيز الابتكار
6. الابتكار في الخدمة

1. مستشفينا هو الأسرع في ابتكار وتحديث وتطبيق الخدمات الجديدة
2. لقد زاد عدد الخدمات المستخدمة والمحسنة في المستشفى في آخر 5 سنوات
3. مستشفينا دائمًا يعمل على تشجيع وتحفيز الابتكار
4. خدمات المستشفى بسرعة أسرع من الخدمات الأخرى
5. يتم تطبيق الحرف والإجراءات الجديدة في المستشفى بصورة أسرع من المستشفيات الأخرى