

The Impact of Internal Organizational Environment Factors on the Efficiency of Health

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Abstract

When it comes to the provision of medical services, quality is crucial. It entails changing healthcare so that actions, not just words, reflect values. Additionally, there is a change from quantity to quality. The outcome of treatment is more crucial than how many patients a doctor sees in a day. The standard of care can be raised by being aware of numerous internal and external factors. Organizational leadership and management must comprehend these elements and incorporate them into the provision of services. This cross-sectional research seeks to determine the critical internal variables needed to raise the caliber and effectiveness of healthcare services provided by Hafr Al Batin hospital. It sought to learn the healthcare team's perspectives on internal factors and how to steer patients toward the best results. In favor of the patients, Hafr Al Batin hospital's healthcare team surveyed 66 respondents. Twenty-one respondents believe that the healthcare team needs more education to raise the standard of care provided in hospitals. The best way to improve medical performance, in the opinion of 38, is through communication skills, which 34 people believe can be learned by attending expert lectures. According to 25 respondents, raising salaries is the most crucial step that can be taken to improve the standard of healthcare services. While 63 respondents agree that healthcare services and equipment are equally important, 3 respondents disagree. Improvements must be made to internal organizational factors and healthcare service quality to achieve improved performance. by increasing the healthcare team's knowledge through lectures from knowledgeable members, improving communication and leadership skills, using more cutting-edge equipment, and paying higher salaries to inspire employees.

Keywords: Impact of internal organizational- environment factors- efficiency of health.

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CHAPTER 1

INTRODUCTION

Quality is very important in the delivery of medical services. It means transforming healthcare to reflect values, not just words. There is also a shift from quantity to quality. Successful treatment is more important than the number of patients a doctor treats on a given day. Awareness of many internal and external factors can help improve the quality of care. These components must be understood and incorporated into service delivery by organizational leadership and management [1]. External factors are those beyond the organization's control, and internal factors are those that

exist within the organization. Infrastructure, leadership and management, people skills, organizational structure and culture, and collaborative care practices are internal factors that influence the quality of care. The mechanism for allocating resources to meet business goals is part of the organizational structure. They consist of duties, obligations and roles that people have. To achieve quality health care, the decision-making process must be guided by structure [2].

Efficiency and quality of health care service provided to the patients are the mainstays of every hospital. This makes a good reputation and increases the

outcomes of the hospital. This also improves the lives of many patients and this is considered the primary goal of hospital establishment [3].

Service quality is correlated with patient happiness, loyalty, healthcare enterprise productivity, and profitability. Healthcare organisations all across the world regard this as a strategic difference to keep their competitive edge. Therefore, it is crucial to recognise, assess, and enhance the quality of health services [4].

The purpose of the study is to identify what is needed to be done regarding the internal factors in Hafr Al Batin hospital to produce high-quality service.

METHODS

Study Design

This is a cross-sectional study to know the important internal factors required to improve the quality and efficiency of healthcare services in Hafr Al Batin hospital. It aimed to know the opinions of the healthcare team regarding the internal factors and how

to be directed towards the best outcomes for the sake of patients.

Study Setting

We used a questionnaire which included demographic data, questions regarding agreement or disagreement of the healthcare team towards some factors and opinions of the healthcare team about the internal factors. This was distributed among the members of the healthcare system in Hafr Al Batin hospital including physicians, pharmacists, nurses, technicians and employees.

Inclusion and Exclusion Criteria

All members of the healthcare team including employees are included in the study. They should have opinions regarding the best outcomes for the hospital. They should have at least 6 months of work at hospitals. Patients or their relatives were excluded because they might represent a source of bias in the results. Fresh staffs were excluded as well.

CHAPTER 2

Data Collection

Data was collected based on the online questionnaire that was sent to staff members of the hospital. Others who don't access the online questionnaire took an offline sheet of it and answer the questions.

Data Analysis

We used SPSS to carry out all statistical tests depending on the type of data and required suitable tests. Descriptive statistics were carried out for demographic characters and the Likert scale was used to translate the responses to section 3 in the questionnaire.

Ethical Considerations

The research will be carried out according to research and professional ethics. Permission will be taken from the hospital of Hafr Al Batin as it is involved in the research. The data will be secured and the confidentiality of participants will be kept and not shared except among the members of the research study. The data obtained from the study will be used for research purposes and will be tackled towards the objective of the proposed research.

RESULTS

Demographic Data

Among 66 respondents, 50 were males and 16 were females. Age groups were classified as follows: 20-30 years, 30-40 years, 40-50 years and >50 years as shown in Figure.1. The first age group had 28 respondents, followed by 14, 12 and 2 respondents for the following age groups respectively. Regarding the jobs of the participants, 21 were physicians, 21 were

employees, 11 technicians, 7 were nurses and 5 were pharmacists as shown in Figure.2. Regarding society 42 respondents were living in rural societies and 24 were living in urban societies.

Opinions towards Influencing Factors and Likert Scale Measurements

We asked the participants 10 questions about their opinions on the influencing factors regarding the quality of services presented in the hospitals and how to develop these services. These questions were based on an agreement scale ranging from strongly disagree with the lowest score which is 1 and strongly agree with the highest score of 5. The Likert scale was used to determine the degree of agreement. It is formed of 5 levels of agreement as shown in the table 1.

The results of the questionnaire are shown in the table with the mean value of the answers to each question based on the Likert scale.

As shown in the table 2 Questions 4, 5 and 9 have a high level of agreement with the stated opinion based on the Likert scale. Questions 1, 2, 3, 6, 7, 8 and 10 have a moderate level of agreement based on the Likert scale.

Twenty-one respondents see that the healthcare team requires more knowledge to improve the quality provided in the hospitals, 17 respondents see that they require more technical skills, 16 think that they need to be more updated and 12 think that they need to meet different cases of patients.

Among the respondents, 38 think that the most required non-medical skills to be present in medical staff are communication skills, 16 think that leaders are the most important, 9 think that presentation skills are the most required and 3 think that language should be the most present non-medical skills.

Regarding the best way to improve medical performance, 34 believe that this can be acquired by lectures from experts, 24 see that it is acquired by more

practice in hospitals and 8 think that this can be gained by educational lectures in universities.

The most important procedure to help in the improvement of the quality of healthcare services was seen to be increasing salary by 25 respondents, managerial leadership by 23 and decreasing work time by 18 respondents. 63 respondents have a belief that healthcare equipment has the same importance as healthcare services but 3 respondents disagree with them.

Table 1: Interpretation of Likert scale

Mean range	Scale	Interpretation
1 – 1.8	1	Very low
1.81 – 2.60	2	Low
2.61 – 3.40	3	Moderate
3.41 – 4.20	4	High
4.21 - 5	5	Very high

Table 2: Statements scores using Likert scale

No	Item	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Mean
1	Patient's socio-demographic characteristics affect healthcare service.	15	5	19	20	7	3
2	Nurses should be trained and knowledgeable enough to achieve the best quality of health care service.	16	3	12	15	20	3.3
3	Physician's satisfaction and motivation are achieved by high salaries only.	5	11	22	13	15	3.3
4	Patients are free to choose the healthcare team in the hospital.	6	10	17	17	16	3.42
5	Inadequate infrastructures, resources, and equipment inhibit delivery of quality medical services.	2	1	20	17	26	4
6	Patients are free to share in the process and choose whether to follow the physician's instructions or not.	8	10	13	17	18	3.4
7	Any member of the healthcare team whether the pharmacist, physician or nurse can take the decision alone without referral to others.	12	10	16	13	15	3.1
8	High finances should be required by the patients to give high-quality care services.	14	10	23	11	8	2.83
9	The patient should cooperate with the healthcare team to provide high-quality service.	3	6	19	13	24	3.7
10	Physicians' sociodemographic characteristics affect the quality of healthcare service.	14	8	27	14	3	2.75

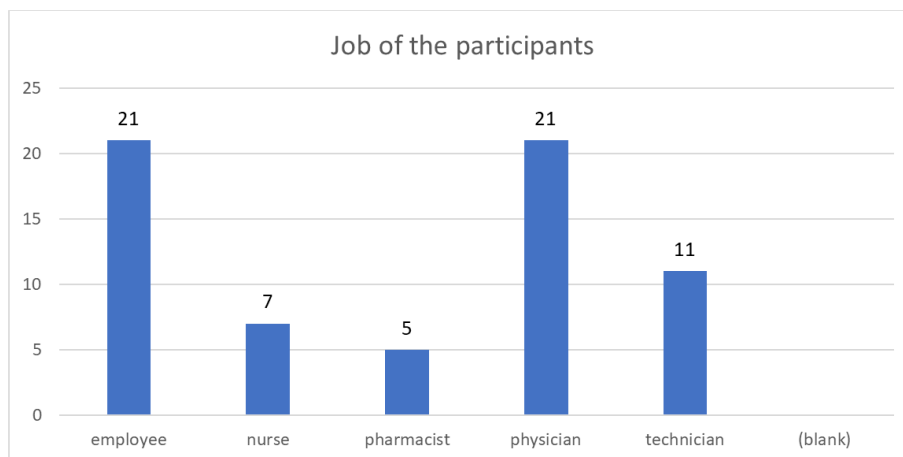


Figure 1: Age distribution of the study participants

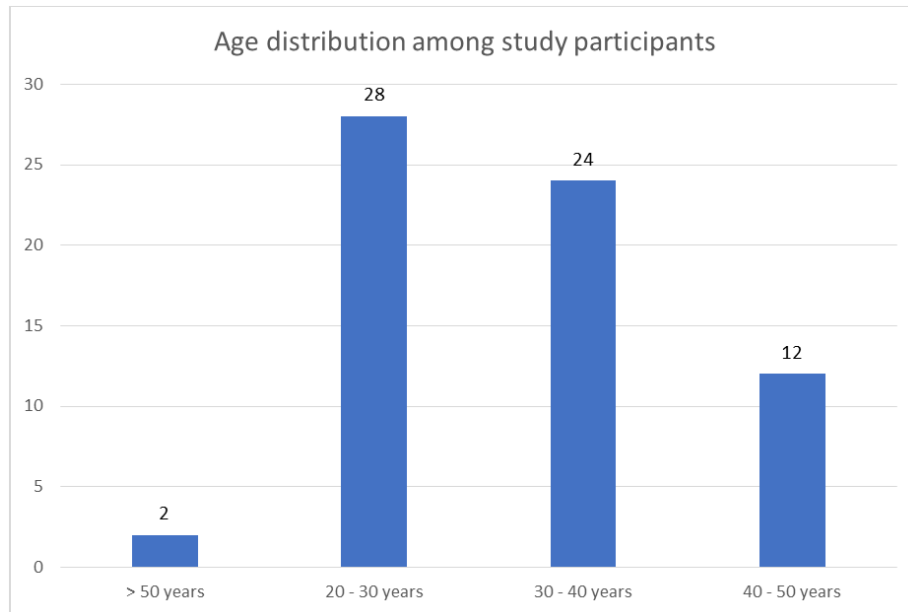


Figure 2: Different jobs of study participants

CHAPTER 3

DISCUSSION

The standard of healthcare delivery has an impact on patient satisfaction, loyalty, productivity, and profitability of healthcare organisations. Healthcare organisations all across the world regard this as a strategic difference to keep their competitive edge. Therefore, it is crucial to recognize, assess, and enhance the quality of health services. The idea of high-quality medical care is subjective, intricate, and multifaceted [3-5].

Facilities that provide healthcare have two environments: an internal environment and an external environment. The internal environment is the term used to describe the working environment (medical facility) in which medical services are provided and the tools and infrastructure required to do so. A healthcare institution's performance and service quality levels are affected by the external environment [3].

Socio-demographic aspects of the patient: socio-demographic information about patients affect how they interact with doctors, which in turn affects the standard of care. Physicians need to be aware of and considerate of patient culture. Physicians can connect with patients more skillfully and gain their trust by being aware of their socio- demographic traits. Patient Involvement: Patient participation and cooperation are significant and affect the quality of care standards. Some medical professionals reported that their patients' unwillingness to cooperate throughout therapy hampered and prolonged the healing process.

Medical knowledge (knowledge and competence): the expertise and professional competency of practitioners greatly influence the standard of medical care. For healthcare professionals to advance in their careers and have access to educational opportunities, medical institutions are crucial. Unfortunately, some doctors have complained about certain aspects of medical education at various universities. Motivation and satisfaction among doctors: providing patients with high-quality care depends on physician satisfaction. Physicians discovered nine organisational elements that affect physician motivation and job satisfaction. Salary, working conditions, management efficiency, organisational policies, personnel, ratings, job security, workplace culture, and advancement prospects are a few of these [6].

The survey was composed of mainly 3 parts. The first included the demographic data of the study participants. Most of them were males and between 20-30 years of age. Regarding the jobs of the participants, most of them were physicians or employees and most of them belong to rural societies.

The second part was composed of 10 statements regarding the factors affecting the internal organization and quality of healthcare in the hospital to see the opinion in agreement or disagreement of the study participants. A high score of the agreement was observed among the following opinions: Patients are free to choose the healthcare team in the hospital, inadequate infrastructures, resources, and equipment inhibit delivery of quality medical services, and the patient should cooperate with the healthcare team to provide high-quality service. A moderate score of the

agreement was obtained among the following opinions: patient's socio-demographic characteristics affect healthcare service, nurses should be trained and knowledgeable enough to achieve the best quality of healthcare service, physician's satisfaction and motivation are achieved by high salaries only, patients are free to share in the process and choose whether to follow the physician's instructions or not, any member of the healthcare team whether the pharmacist, physician or nurse can take the decision alone without referral to others, high finances should be required by the patients to give high-quality care services, physician's socio-demographic characteristics affect the quality of healthcare service.

The third part of the survey included questions regarding steps required to improve quality in the hospital. Most participants think that the healthcare team requires more knowledge to provide better quality followed by more technical skills, being more updated and meeting more different cases of patients. Most participants believe that communication skills are the most important non-medical skills required in the healthcare team followed by leadership skills then presentation skills and finally language skills. Most of the participants think that more knowledge and experience are acquired through lectures by expert staff. They think that the most important procedure to be taken is to increase salaries as a motivation to improve the quality of services. Almost all the participants believe that the equipment is as important as the health care team services.

CONCLUSION

The quality of health care services and internal organizational factors need to be improved and acquire better performance. This can be achieved through many factors such as increasing knowledge of the healthcare team through lectures from expert members, increasing communication and leadership skills, increasing the use

of modern equipment and increasing salaries to motivate healthcare team members.

REFERENCES

1. Fatima, I., Humayun, A., Iqbal, U., & Shafiq, M. (2019). Dimensions of service quality in healthcare: a systematic review of the literature. *Int J Qual Heal care*, [Internet]. [cited 2022 Nov 13], 31(1), 11–29. Available from: <https://pubmed.ncbi.nlm.nih.gov/29901718/>
2. Heeringa, J., Mutti, A., Furukawa, M. F., Lechner, A., Maurer, K. A., & Rich, E. (2020). Horizontal and Vertical Integration of Health Care Providers: A Framework for Understanding Various Provider Organizational Structures. *Int J Integr Care* [Internet]. [cited 2022 Nov 13], 20(1). Available from: [/pmc/articles/PMC6978994/](https://pubmed.ncbi.nlm.nih.gov/346978994/)
3. Choi, K. S., Lee, H., Kim, C., & Lee, S. (2005). The service quality dimensions and patient satisfaction relationships in South Korea: Comparisons across gender, age and types of service. *J Serv Mark*, 19(3), 140–9.
4. Alexander, J. A., Weiner, B. J., & Griffith, J. (2006). Quality improvement and hospital financial performance. *J Organ Behav* [Internet]. [cited 2022 Nov 30], 27(7), 1003–29. Available from: <https://onlinelibrary.wiley.com/doi/full/10.1002/job.401>
5. Boshoff, C., & Gray, B. (2004). The relationships between service quality, customer satisfaction and buying intentions in the private hospital industry. *South African J Bus Manag* [Internet]. [cited 2022 Nov 13], 35(4), 27–38. Available from: https://www.researchgate.net/publication/235361597_The_Relationship_Between_Service_Quality_Customer_Satisfaction_and_Buying_Intentions_in_the_Private_Hospital_Industry
6. Mosadeghrad, A. M. (2014). Factors Affecting Medical Service Quality. *Iran J Public Health* [Internet]. [cited 2022 Nov 13], 43(2), 210. Available from: [/pmc/articles/PMC4450689/](https://pubmed.ncbi.nlm.nih.gov/24450689/)