



Healthcare System in Saudi Arabia

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Objectives of this lecture

- Define what is a health system
- To enumerate the components of the health system
- Understand the role of each component
- To identify the strengths and weaknesses of Saudi health system
- Be familiar with the current transition in the health system

Acknowledgement!

Some content of this lecture is from:

Health System in Saudi Arabia

Dr. Bader Al-Ibrahim

Field Epidemiology Training Program

Ministry Of Health



**In Saudi Arabia, Healthcare is
Governed by the Ministry of
Health (MOH)**

History of MOH



- **1925 (1343H):** Public Health Department, in Makkah
- **1925 (1344):** Public Health and Ambulance Services
- **1950 (1370):** *Ministry of Health established by a royal decree from King Abdul Aziz*

MOH Mission



- Provision of healthcare at all levels
- Promotion of general health and prevention of disease
- Developing laws and legislations regulating both governmental and private health sectors
- Monitoring performance in health institutions
- Monitoring research activity and academic training in field of health

MOH Milestones in Prevention and Control



- **1950:** ARAMCO collaborated with WHO to MOH control malaria in Eastern region
- **1978:** The country adopted concept of Primary Health Care
- **1983:** Primary healthcare was implemented in healthcare system
- **1997:** Successful immunization program where 90% of children were immunized



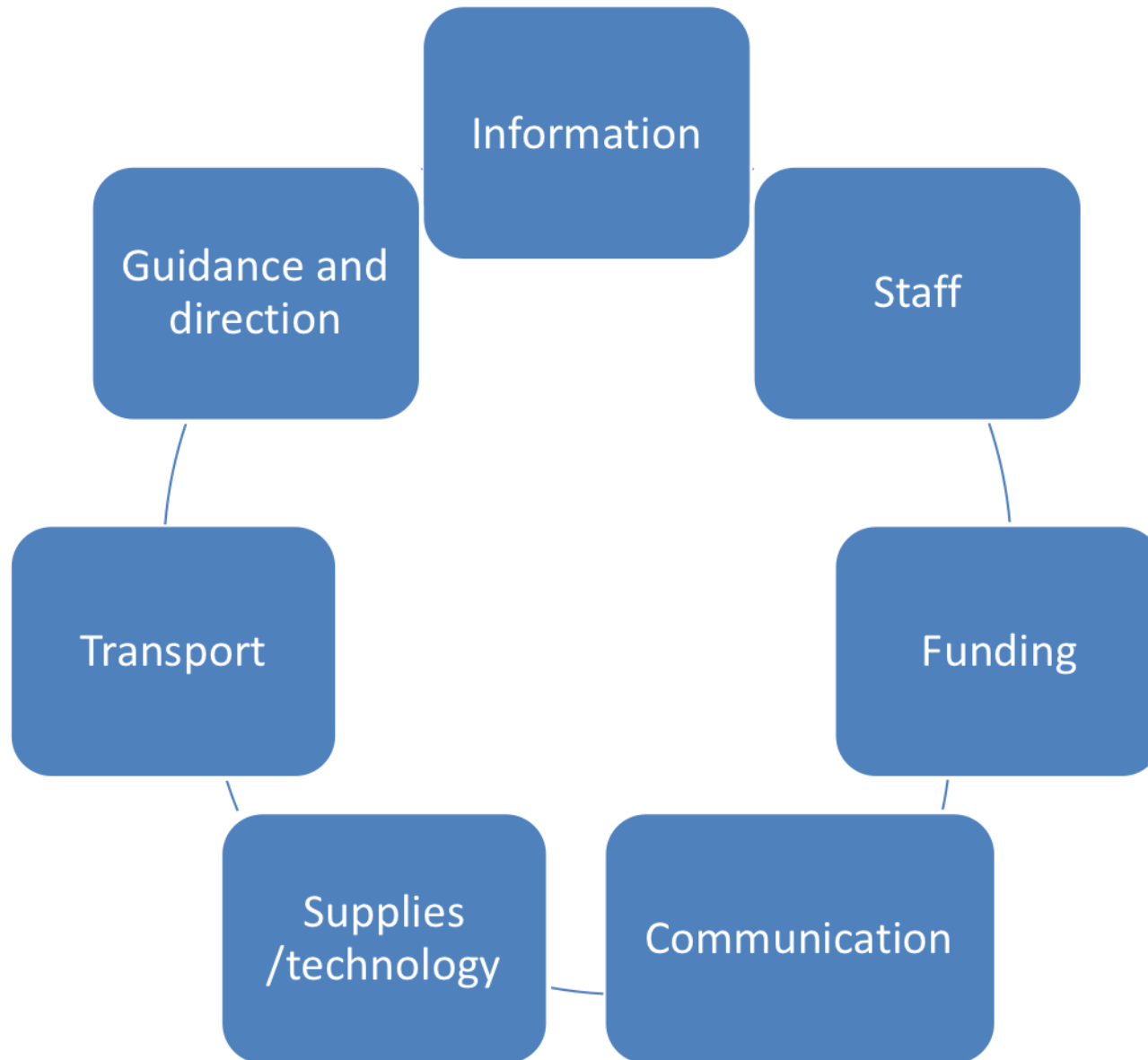
What is a Healthcare System

- “a system which ‘exists and evolves to serve societal needs’—with ‘components’ that ‘ . . . can be utilized as policy instruments to alter the outcomes”

Source: Anut R. Health systems, systems thinking and innovation. Health Policy Plan 2012; 27: iv4-iv8.

- “A health system is the total of all the organizations, institutions and resources whose primary purpose is to improve health.”

Healthcare System Needs





As Per WHO Health Systems should provide Services that are

- Affordable
- Responsive to the community
- That treat people decently



Components of a health system

- Financial Resources
- Legislation
- Health Regulators
- Health Care Providers
- Human Resources
- Medical supplies
- Pharmaceutical producers
- Judiciary Services



Financial resources

- Finances are usually available from:
 - The government
 - Out of pocket services
 - Charity
 - Donation



Table of MOH Budget (in thousands of riyals), compared to State Budget, over the years from 1427-1428 to 1438-1439H.:

Hijri year	Gregorian year	Total of the State Budget	Appropriations for the Ministry of Health					
			Total Budget (x1000)	*Rate in %	Chapter I	Chapter II	Chapter III	Chapter IV
1427/1428H.	2007	380.000.000	22.808.200	6.0%	11.527.200	3.781.000	5.200.000	2.300.000
1428/1429H.	2008	450.000.000	25.220.000	5.6%	12.392.000	4.228.000	6.000.000	2.600.000
1430/1431H.	2009	475.000.000	29.518.700	6.2%	14.391.400	4.527.300	7.760.000	2.840.000
1431/1432H.	2010	540.000.000	35.063.200	6.5%	17.150.000	5.213.200	9.560.000	3.140.000
1432/1433H.	2011	580.000.000	35.063.200	6.9%	19.207.000	5.903.200	11.210.000	3.540.000
1433/1434H.	2012		47.076.447		22.594.000	6.850.100	13.291.755	4.340.592
1434/1435H.	2013		54.350.355		25.200.000	7.758.600	16.391.755	5.000.000
1435/1436H.	2014		59.985.360		26.087.630	8.492.000	20.404.543	5.001.187
1436/1437H.	2015		62.342.539		26.666.810	8.725.303	21.898.239	5.052.187
1437/1438H.	2016		58,899,190	7.01%	26,103,790	8,002,551	22,992,849	1,800,000
1438/1439H.	2017		67,758,793	7.61%	27,412,949	8,647,051	27,507,479	4,191,314

Source: <https://www.moh.gov.sa/en/Ministry/Statistics/Pages/Budget.aspx>



Legislation

- Executive bodies:
 - The King
 - The Council of Ministers
- Judicial body:
 - The Saudi court
- Legislative body:
 - Shariah



Health regulators

- The National Health Council
- Ministry of health
- The Saudi Commission for Health Specialties
- Council of Co-operative Health Insurance
- The Saudi Food and Drug Authority



Healthcare providers

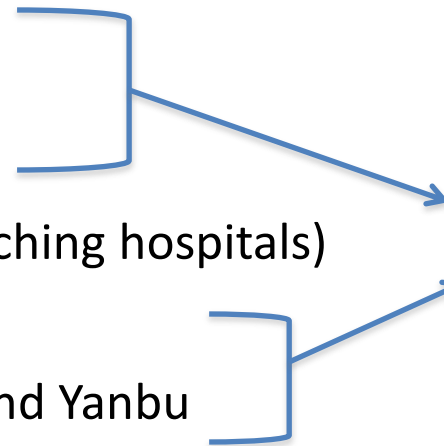
- Governmental
 - MOH
 - Other ministries (MOE, MOD...etc)
- Non-governmental (private)



Provision and Financing of Healthcare

- Prior to 2016, almost **60%** of the healthcare provision was provided by MOH and free
- **Other Government** bodies include:

- Referral hospital (KFSHRC)
- Security Forces
- Army Forces
- National Guard
- MOE hospitals (university teaching hospitals)
- ARAMCO hospitals
- Royal commission for Jubail and Yanbu
- School health units
- Red Crescent Society



Provide services for defined populations
(employees and dependants)

Healthcare Delivery Structure in 2011

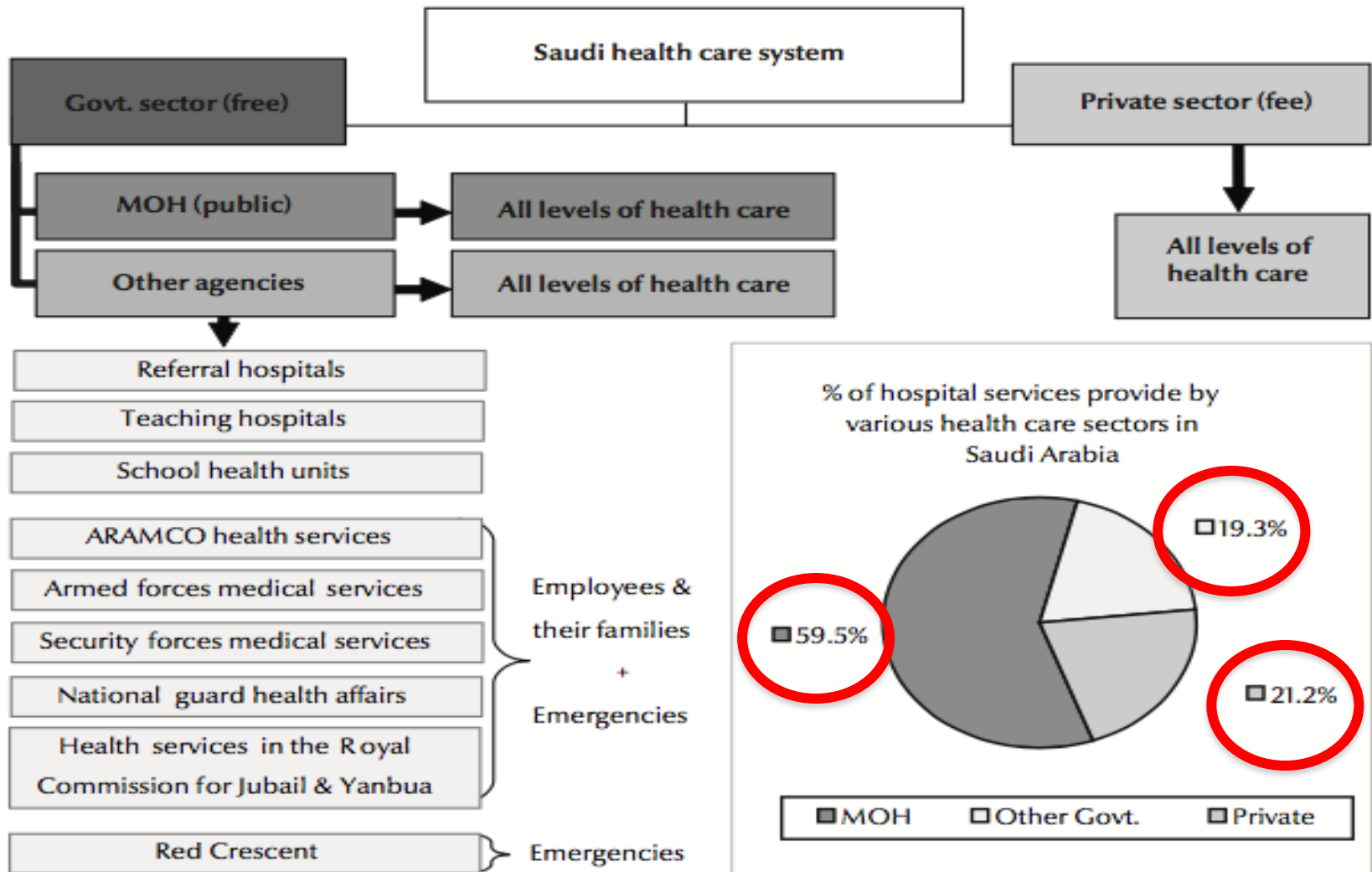


Figure 1 Current structure of the health care sectors in Saudi Arabia (MOH = Ministry of Health). Source of data: [4]



Human resources

- Current manpower in Saudi Arabia Health System:
 - 282 hospitals under the ministry of health
- Staff to population ratios:

Staff	Count	Ratio (No. per 100,000 population)
Physicians (including dentists)	89,675	13.5
Dentists only	13,935	1.13
Pharmacists	25,119	1.1
Nurses including midwives	180,821	31.9
Allied health personnel	107,323	18.1



Health regulators

The National Health Council

Ministry of health

The Saudi Commission for Health Specialties

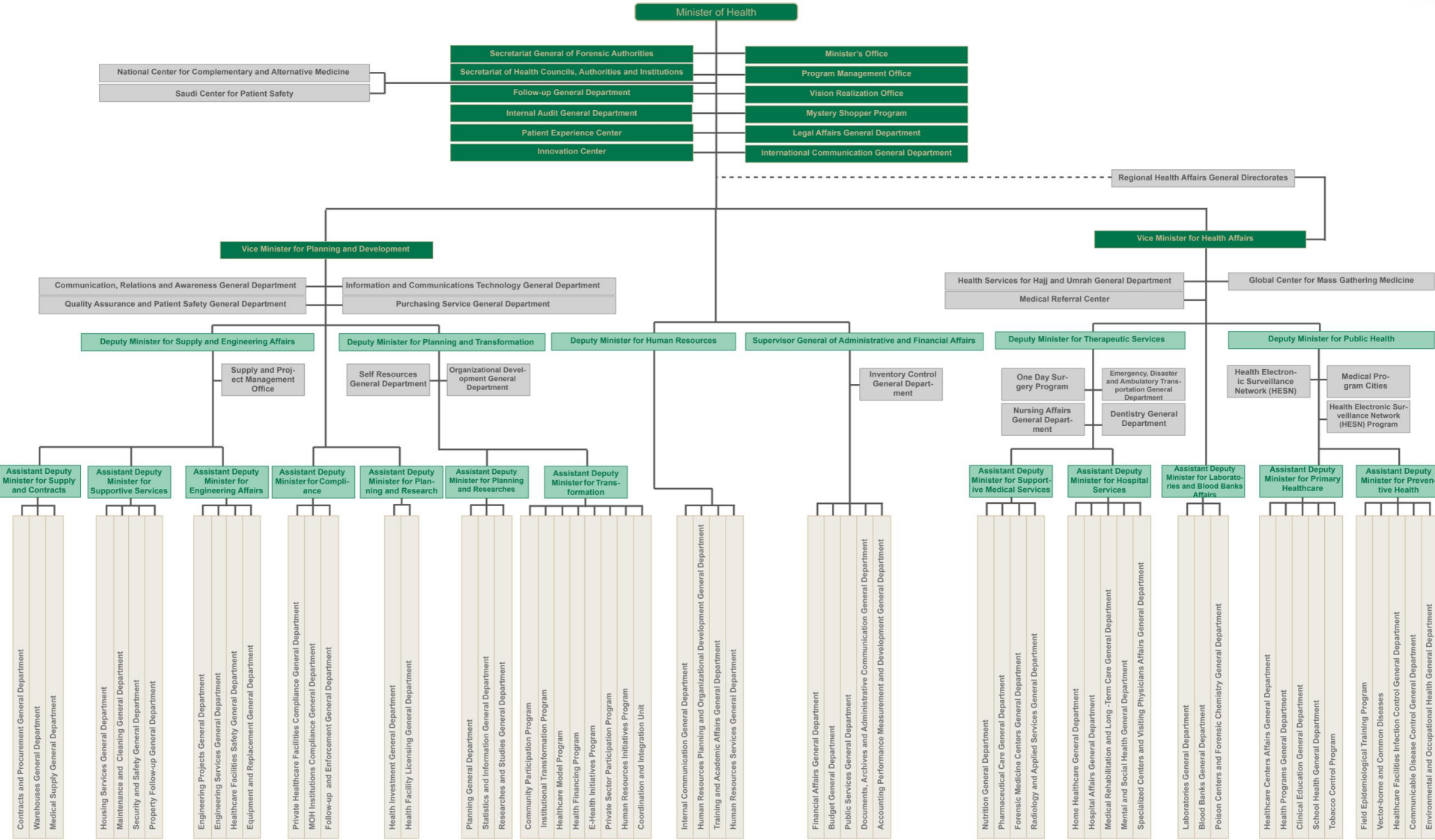
Council of Co-operative Health Insurance

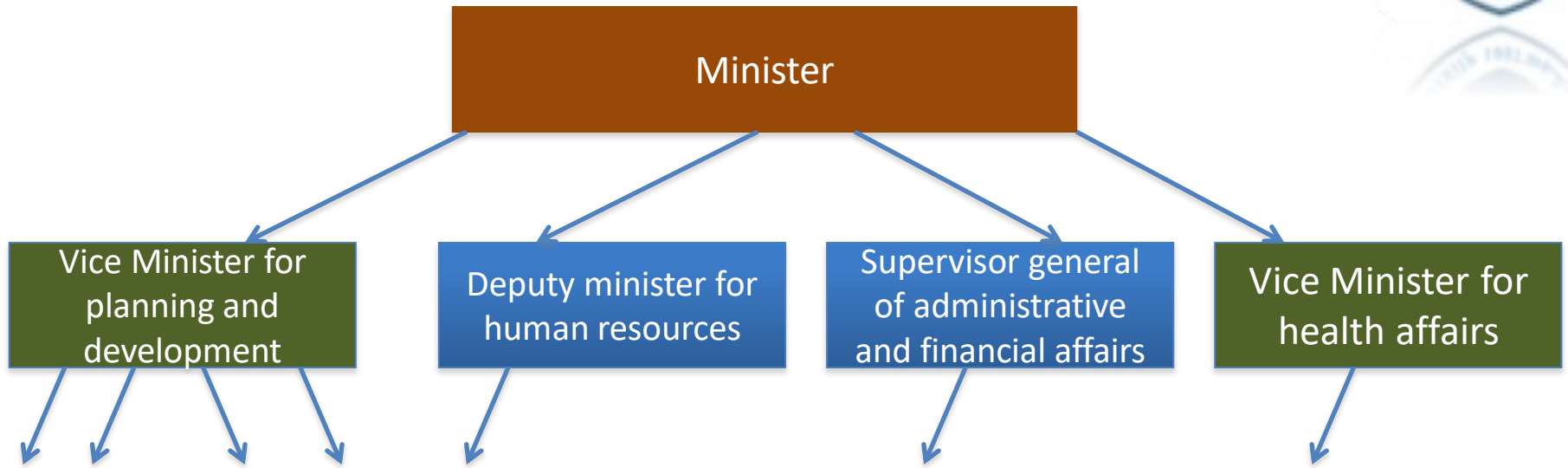
The Saudi Food and Drug Authority



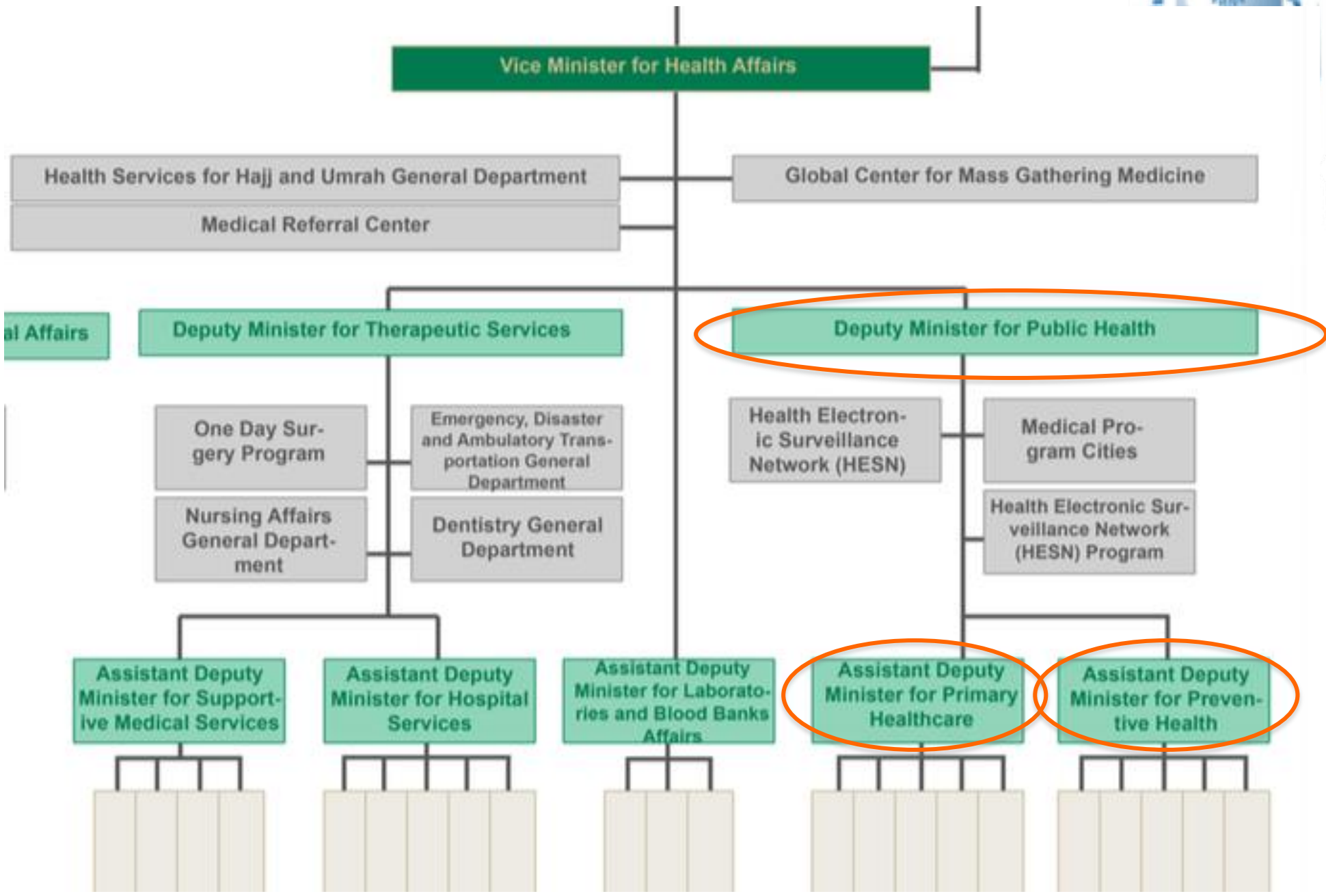
Organizational Structure of the Ministry of Health

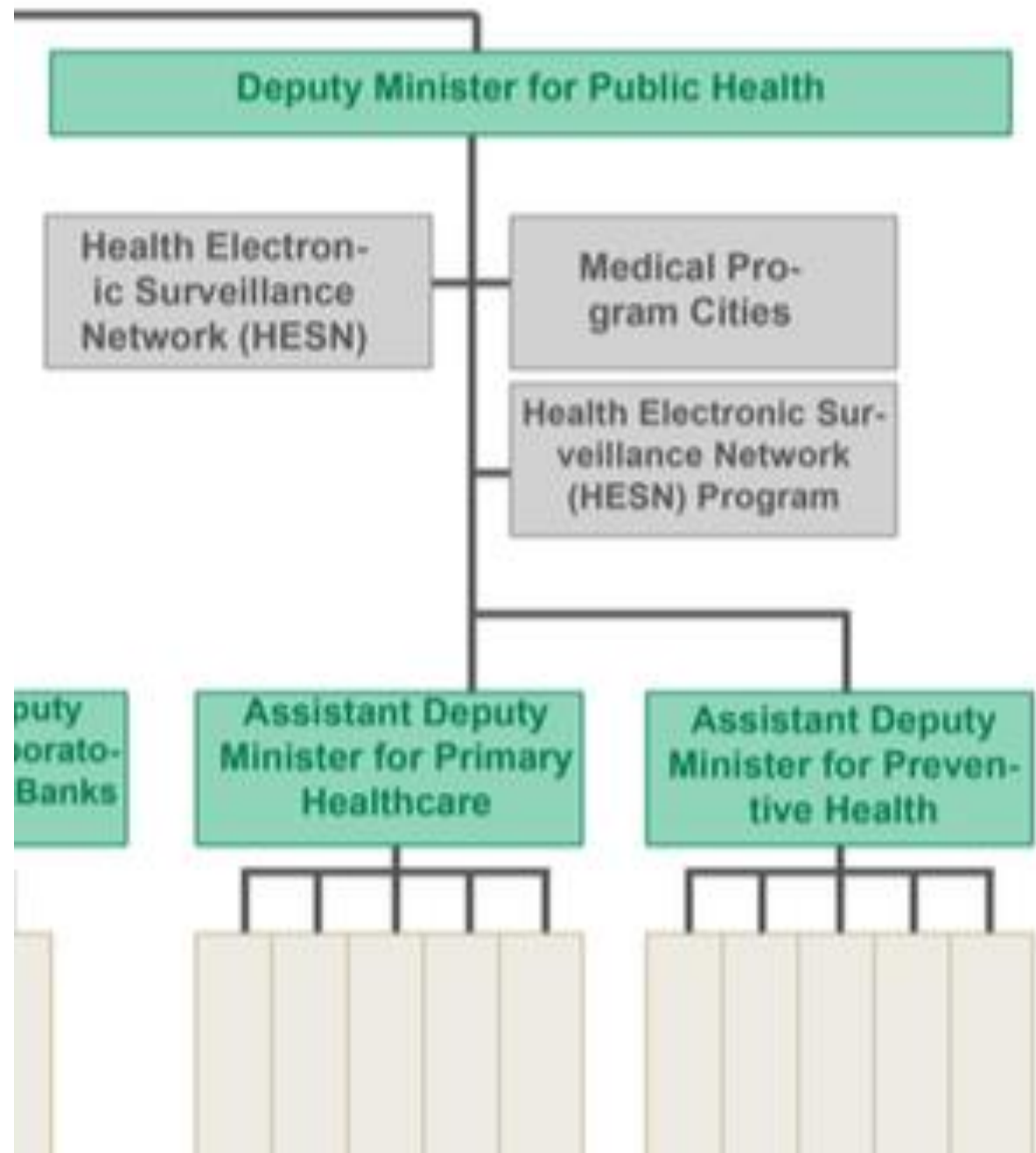
MOH Interim Organizational Structure



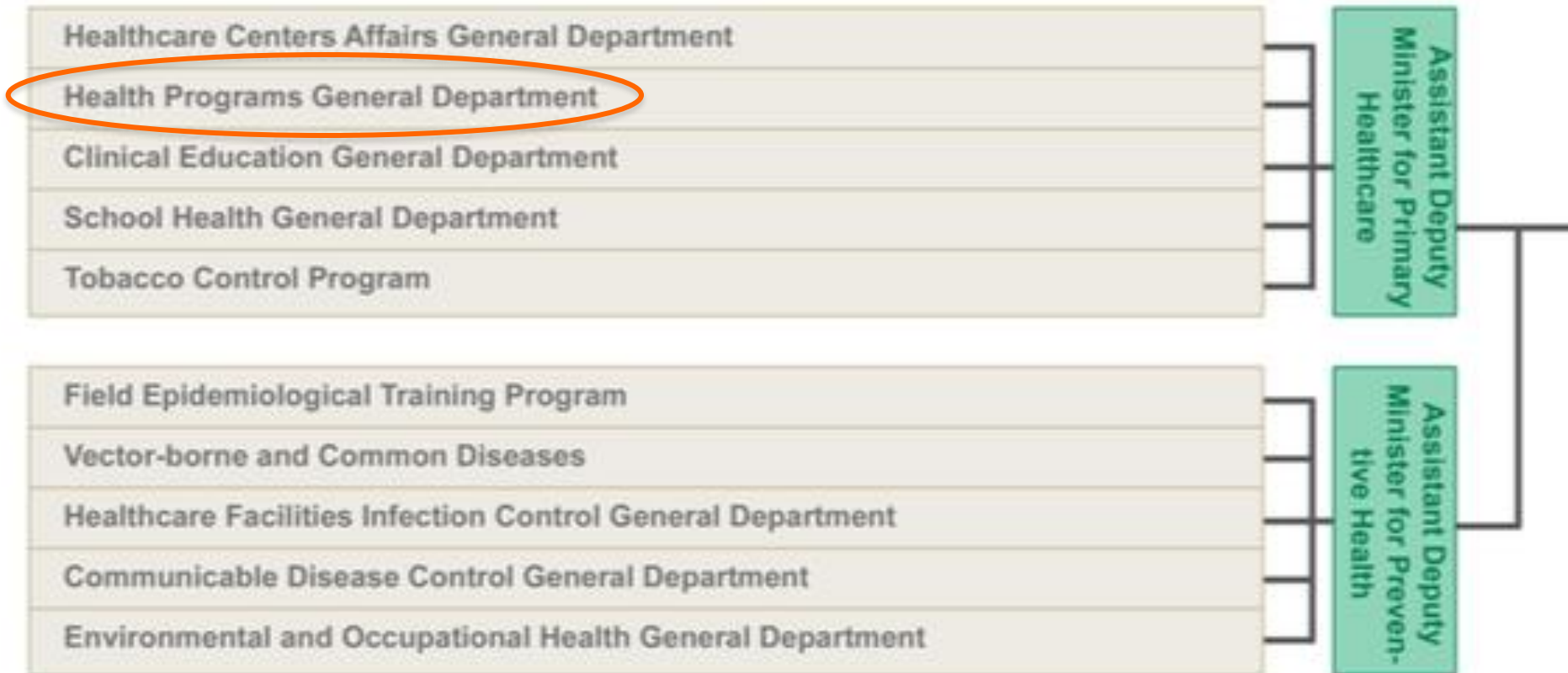


Organizational Structure of MOH





Under Deputy Minister of Public Health





Ministry Directorates

- Healthcare is operated in each region under the directorate of that region
 - 20 regions => 20 directorates



Strengths of the current health system

- Universal (covers everybody) (NHS)
- Accessible
- Comprehensive
(primary, secondary and tertiary)
- Safe
- Equitable



Weaknesses of the current health system

- Weak Primary care
- Multi - sectoral:
 - Duplication of services among providers
 - Difficult to Coordinate
 - Waste of resources
- Poor electronic health record system



Vision 2030 and the Transformation in Healthcare

Vision 2030 Healthcare Initiatives: Why?



- The Saudi population is rapidly growing with a demographic shift
- Available free healthcare services cannot meet the growing population of Saudi nationals
- Between 2015 and 2016 -> significant drop in MOH governmental funding; free governmental hospital care was no longer available for private sector workers

Major Components of Healthcare Transformation of Vision 2030



- Privatization of the healthcare system
- Redrafting a method for financing such a system

In order to establish a sustainable healthcare system that meets the population needs



National transformation program objectives

1. Increase privatization of healthcare services
2. Optimization of use of resources
3. Increase the use of information technology
4. Increase training for physicians
5. Increase number of nurses and allied health
6. Improve services in ER and ICU
7. Improve primary care services
8. Improve infrastructure, facilities, standards
9. Acceptable waiting time for services (all levels)
10. Improve governance of healthcare
11. Adopt national emergency preparedness plan
12. Identify additional revenues
13. Improve public health services
14. Improve services provided post-discharge
15. Improve safety principles

The ultimate goal:

**quality
of life**

Whose Responsible for Directing this Transformation?



- The **Vision Realization Office** (VRO) at the MOH
- VRO objectives are:
 - Achieve objectives of NTP 2020 and vision 2030
 - Monitor transformation activities (initiatives and tasks)
 - Creating a motivating and productive work environment
 - To make sure their objectives and activities are in align with the vision 2030 objectives of other governmental sectors (*multi-disciplinary approach*)

Comparing the previous health care system to the transformed one



Previously the MOH was:

- Provider
- Regulator
- Payer

New health care system:

- MOH will be regulator and significantly reduce the provision of healthcare



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