

A Review of Healthcare Human Resource Development: Perspective from Saudi Arabia

By

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Abstract

Since Saudi Arabia is transforming, it is experiencing a high need for different healthcare services to help meet the desires of the rapidly expanding and ageing population. Policymakers must address the key issues of a shortage of educated healthcare professionals. The shortage of healthcare workers leads to heavy reliance on foreign labour, necessitating Human Resource Development (HRD) strategies to train and prepare a sizable pool of Saudi Arabian healthcare professionals with the necessary skills. This research contributes to Saudi Arabian healthcare by describing the experiences of healthcare professionals who have worked there under the recently set Vision 2030 reforms in different health institutions' Human Resource Development realm. Vision 2030 shows evidence of the ground-breaking move made by the government to improve Saudi Arabia's healthcare system and offer chances for HRD.

Keywords: - Healthcare, Saudization, Human Resources Development, NTP 2020, and Vision 2030,

Introduction

The Middle Eastern region is one of the areas where healthcare infrastructure has recently seen tremendous development, particularly in Saudi Arabia (Walston et al., 2008). According to the Ministry of Health (2017), there are now 2.2 beds available in Saudi hospitals for every 1000 citizens of the Kingdom. The Saudi Arabian government has put a lot of resources into the healthcare sector at all levels. According to Almalki and FitzGerald (2011), the Saudi Arabian government is focused on ensuring better healthcare for Saudi Arabians. The 2018 assessment claims that the Saudi government needs to spend significant money on social development and health care, somewhere in the range of 146.5 billion SAR (Saudi Arabian Monetary Authority, 2018). This investment will ensure that all people have the right knowledge regarding healthcare. Besides, it will be easy to employ more qualified and skilled healthcare workers to help deal with the heavy workload affecting healthcare professional workers. Saudi Arabia has demonstrated a commitment to ensuring the success of contemporary healthcare development despite the significant investments needed to modernize healthcare delivery there. A testament to their devotion is that the Middle East is among the countries ranked at the top in the world, 26th as of 2020, trailing Oman, which was ranked 8th (World Health Organization, 2020).

Apart from these successes in the Saudi healthcare system, various studies conducted following the introduction of Vision 2030 explain how the healthcare department faces major problems in providing quality patient care for the huge population (Al-Hanawi, 2017; Al-Hanawi et al., 2018; Alharthi, 2018; Alatawi et al., 2020; Fadlallah et al., 2019). The studies explain that a better healthcare system will increase life expectancy. However, this means there will be a problem in caring for the elderly since they will increase in number. As a result, there

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is a heavy burden on the current infrastructure, hence the need to ensure there are skilled healthcare professionals. To address this situation, Saudi Arabia unveiled Vision 2030. This new strategic plan offers the health sector several options and prospective public healthcare models to adjust its strategic commitments and path for the future (Moshashai et al., 2020; Vision 2030, 2019). Policymakers should address the inadequate training of healthcare workers, its heavy reliance on foreign employees, and Human Resource Development (HRD) strategies to develop a large pool of healthcare workers with the necessary skills. In HRD in healthcare, this study also evaluates the strategies taken by the country's intervention programs which aim to achieve the set Vision 2030.

Theoretical Background

The effect of healthcare HRD activities on various healthcare outcomes has been highlighted using various approaches. Although these models have been discussed in the literature review, this study focuses on major themes that appear in literature (Almalki et al., 2011; Al-Nozha et al., 2007; Mosca, 2012). Major topics covered include; providing improved healthcare facilities to an expanding population, improving healthcare standards, and offering affordable patient care. Although these principles are discussed in various settings, this essay primarily focuses on how they apply to the healthcare of Saudi Arabia.

Although few models explain public healthcare systems in the country, there are different methods to show how the different systems are used. It is important to note that the uniqueness of the models makes it hard to improve healthcare standards while reducing the tax burden on citizens. Bronfman (2011) put forth a model for developing a private healthcare level that includes people that can afford it instead of public healthcare. According to Al-Hanawi et al. (2019), the same form of patient care can be seen in the KSA, where extensive public healthcare is offered while private healthcare institutions are not utilized. Although Vision 2030 firmly supports the collaboration of the public and private institutions, one must accept that there is a failing public healthcare system. Increasing the willingness of those who can afford private healthcare to pay to get treated is not a good solution (Grand & Wolff, 2020). This demonstrates how the healthcare model relies more on efficiency. In addition, Portela et al. (2015) also claim that a rational healthcare model entails achieving the best healthcare and patient outcomes and identifying any shortcomings in healthcare intervention strategies. The models mentioned above present several issues regarding what constitutes quality healthcare since it can be based on longevity and quality of life or different preventive care and curative medicine.

Mosca (2012) proposed alternative ideas that will help enhance effectiveness in healthcare. Such ideas include abolishing monopolies and promoting interests within the healthcare system. Besides, Smith (2012) describes a healthcare model that has gained international traction as it measures a portion of the characteristics that lead to a health outcome. The author implied the typical expense of treating various disorders and illnesses, duration of stay, and labor hours. Over the years, there has been a noticeable increase in chronic illnesses which include obesity, high blood sugar levels, and coronary heart disease (Al-Nozha et al., 2007). The World Health Organization supports this following its 2018 report that KSA is ranked at position three globally for the prevalence of diabetic and obese people (World Health Organization, 2018). Given the challenges mentioned, for example, population increase and the poor quality of healthcare results in KSA, it will be crucial to bring reforms in the health sector. As a result, this research paper will analyze the impact of these strategies of Vision 2030 interventions on the hospital industry.

This essay's foundation is an important analysis of empirical facts and information gathered from various primary and secondary sources. In addition, the essay has semi-structured interviews as support. The main focus is on the Healthcare professionals in the Saudi healthcare department. To supplement our document analysis, twenty interviews were carried out. Table 1 summarizes all the participants used in this research project and their codes. The following table shows different ethical concerns and their validity.

No.	Participant	Code
1	Nurse	N1
2	Doctor	D1
3	Medical Consultant	MC1
4	Nurse	N2
5	Doctor	D2
6	Medical Consultant	MC2
7	Nurse	N3
8	Doctor	D3
9	Medical Consultant	MC3
10	Nurse	N4
11	Doctor	D4
12	Medical Consultant	MC4
13	Nurse	N5
14	Doctor	D5
15	Medical Consultant	MC5
16	Nurse	N6
17	Doctor	D6
18	Medical Consultant	MC6
19	Nurse	N7
20	Doctor	D7

The essay seeks to analyze the healthcare HRD in Saudi Arabia and investigate activities aimed at revitalizing the Saudi health department and facilitating the localization or Saudization of the employees working in the region. The study of the paperwork and interview information on Saudi Arabia's healthcare HRD reform will contribute to the available literature. As a result, the report can serve as a jumping-off point for the current healthcare HRD strategies that aim at achieving the Vision 2030 framework. Various authors agree that developing human resource strategies in the Saudi health sector faces various problems and opportunities due to Vision 2030. As a result, the essay focuses on these issues, the healthcare HRD, the relationship between Vision 2030, and the level of localization of health employees.

Results and Discussion

This part will analyze documentation from different sources. The documentation is supported by interview results from data collected from Saudi healthcare employees who are employed in the healthcare industry of Saudi Arabia. The data was compiled to examine the initiatives by Saudi Arabia's health industry that needs to be revitalized to support the Saudization of the employees working in the healthcare field. The saudization will help more Saudi natives to be employed by the government, rather than giving most of these chances to the foreigners. The major topics covered are healthcare HRD, Vision 2030, strengths and weaknesses of healthcare HRD in KSA, the NTP, and the Saudization of employees working in the healthcare department.

Challenges and Opportunities in Healthcare Department

The KSA aims that the ageing population will increase over the next ten years, so Saudi Arabia is expected to keep investing extensively in its healthcare institutions. As a result, there will be an increase in life expectancy, and this will create a greater need for more healthcare employees. This shows that Saudi Arabia requires more healthcare professionals to fulfil its ageing population's expanding demands. A McKinsey Global Institute report (2015) indicates that Saudi Arabia must hire many healthcare workers to fulfil Vision 2030. Therefore, this calls for an additional need for healthcare professionals. The report further states that "The vision 2030 cannot be achieved if more Saudi nationals are not employed. It is not right to rely on foreign labor, yet some natives can be trained and employed in the country (McKinsey Global Institute, 2015)." The localization of the employees is crucial to Vision 2030. Currently, 1 in 3 healthcare workers is Saudi Arabian. However, there are fewer healthcare graduates in KSA, making it hard to replace all the retiring employees.

The Saudi Arabian government must fill at least 100,000 healthcare industry positions by 2030 due to increased demand for quality healthcare (McKinsey Global Institute, 2015). The report states, "...more than 6000 nurses need to be employed every year so that it will be easy to reach the 100,000 minimum level of employed healthcare workers. If this is done yearly, vision 2030 will be achieved, and the entire population will easily enjoy quality patient care. (McKinsey Global Institute, 2015)." The overspecialization of doctors in KSA has created a huge employment shortage for family physicians. This demonstrates that just 5% of Saudi Arabian health workers practice family medicine. As a result, this worsens the country's healthcare employment crisis and necessitates the development of specific strategic goals to bring radical changes.

Following the challenges associated with a transformative change in KSA, the MGI report urges more labour engagement, especially from the younger generation and women. Apart from improving the pliability of the job market for Saudi Arabian healthcare employees, restricting the expansion of public sectors, as well as complicating foreign workers' recruitment, the report supports the development of Saudi workers' skills by ensuring they have the appropriate education and skills (McKinsey Global Institute, 2015). This, incidentally, underscores important issues that healthcare experts have noted. One problem is finding skilled personnel that is potentially accessible. According to the report, the country's major challenge is getting qualified and skilled employees who will help the economy grow. (McKinsey Global Institute, 2015). Following this, having the right number and standards of Saudi healthcare employees in the healthcare department will enhance the country's economy as the population continues to increase. The government should note that significant changes are needed to improve productivity and efficiency in the healthcare sector. If optimal healthcare standards are unmet, healthcare delivery will continue to deteriorate, creating an unachievable healthcare budget.

Both men and women in Saudi Arabia must be equally involved in the healthcare workforce. This will lead to an increase in the standards of household income. As a result, it will be easy to absorb the demographic youth bulge. In addition, the KSA will also need to figure out how to address the worrying gap between a person's skills and the labour market demands. The incentives and rewards of working in Saudi Arabia collide with having a productive and efficient workforce (McKinsey Global Institute, 2015). Most employees in the public realm get around 70% more than those employed in the private realm (McKinsey Global Institute, 2015). Besides, the report states that many companies consider employing foreign workers even if they do not have the necessary skills since they do not need hefty pay. Saudi citizens are known to ask for a lot of pay regardless of their experience and skills.

(McKinsey Global Institute, 2015). Following this, it is evident that most Saudi healthcare experts do not support Saudization as they prefer skilled foreign employees over unskilled Saudi employees, who often demand more salaries and wages.

Another major challenge affecting the KSA economy is ensuring improved healthcare to create a good economic setting. As a result, this will promote transparency, and better services will be provided. However, some healthcare experts are not ready for transparency. Transparency is important as it ensures healthy competition between companies. Through this, it becomes easy for foreign investors to invest in the organizations. Hence economic growth is achieved (McKinsey Global Institute, 2015). This demonstrates how important healthcare HRD is to the KSA economy and the health sector, demonstrating the necessity to examine the connections between healthcare HRD, National Transformation Program and vision 2030.

Human Resource Development, Vision 2030 in the country and the NTP Relationship

One of the Vision 2030 goals is to have more medical facilities, educate society about medical institutions and employ more healthcare professionals. In addition, healthcare delivery will be improved, and every citizen in the country will receive the best treatment. Following this, it will be easy to access all kinds of healthcare services in the country. This includes curative medication and preventive methods of treatment. This shows a need for public healthcare institutions to concentrate more on preventive care, controlling infectious illnesses as well as motivating individuals to ensure they can access quality primary care. In addition, the vision aims at improving healthcare by raising the standards of public healthcare institutions. According to the National Transformation Program (2018), this vision intends to enact a working plan that will enhance various private healthcare insurance covers, giving people improved access to medical services. Therefore, it is important to provide the right training, skills and resources. If all the healthcare practitioners are equipped with this, it will be easy to fight most of the chronic illnesses since they require very specialized treatments. However, the country is still lacking the right people who have the right skills and knowledge to deal with these illnesses. Vision 2030 aims to ensure there are more people with good nursing skills and ensure everyone receives patient care. For this to happen, the country must diversify its economy and have more sources of income instead of relying on the oil reserves only.

The Kingdom's Vision is to boost competitiveness and move the World Competitiveness Index to the top 10 nations (National Transformation Program, 2018). It states that by 2030, the private sector's share of GDP will have increased from its current 40% to 65%. The vision also sees more women in the workforce, hence an increase from 22% to 30%. Following this, there will be a lower unemployment rate in the country, estimated to reduce from 11.6% to 7% (National Transformation Program, 2018). The NTP also introduced 16 KPIs for the healthcare sector and 15 strategic objectives.

The KPIs serve as a lead for assessing the efficiency of implementing the National Implementation Program. The NTP's pertinent strategic initiatives that have an impact on healthcare HRD both directly and indirectly are the following:

- I. Achieving reasonable wait times all through
- II. Improving the efficiency of the healthcare sector by using information technology, the internet and different digital transformations.
- III. Enhancing the governance of the health system to increase accountability for issues with quality and patient safety;

- IV. Raising the standards of quality and safety and ensuring service providers have the right skills
- V. Improving healthcare facilities and the general infrastructure;
- VI. Enhancing the standard of living and medical care provided to patients outside of hospital settings
- VII. Increasing training and development, both nationally and internationally
- VIII. Making nursing and medical assistance careers more desirable;
- IX. Raising the percentage of private sector investment through different forms of finance and service delivery
- X. Quickening the efficient use of available capital (National Transformation Program, 2018).

It is important to emphasize “affluence” by building the HRD capacity and having good policy regulations instead of merely raising funds or the number of hospital beds, technology, or medical resources. By 2030, it is anticipated that persistent policy interventions will have achieved the ideal shift from a third to the expected two-thirds ratio in the Saudi-to-immigrant workers, which can then transform difficulties into opportunities, as indicated in the NTP 2020. Also, there is a need to make sure that possible investments in the healthcare industry match the requirements for local HRD in terms of employment possibilities. For the nurses, clinical officers, doctors, and other healthcare professionals, it separates itself from pricey hospital consultation-level specialization in favor of specialized primary healthcare. This is supported by Almalki and Al-Hanawi, (2018), who express the necessity for launching public and private cooperation models in selecting suitable resource-sharing organizations. Particularly in rural areas, the hospital utilization rate must be considerably raised from its present 53% while focusing on expanding local HRD initiatives within the family medical sector that employ local physicians and nurses (McKinsey Global Institute, 2015).

Following this, there are three significant obstacles to healthcare reform that the KSA has. It is crucial to note that the obstacles can result in opportunities if the necessary investments are made:

- i. Increased demand for professionals with training in the clinical and healthcare sectors;
- ii. A lack of healthcare personnel ready to deal with the increased prevalence of non-communicable illnesses.
- iii. Addressing productivity and par finance issues that the private sector should deal with (McKinsey Global Institute (2015)).

The sector needs to hire more Saudi citizens if KSA is to accomplish the abovementioned goals. Currently, one in three healthcare employees is a Saudi national. A similar image might be seen in allied health professions, including lab technicians, nurse assistants, and other healthcare workers.

It was predicted that if Saudi Arabia could achieve the Saudization rate or localization of the workforce, it would double for health professionals (for example, by two-thirds), and by 2030 there should be around 400,000 postings. Also, there is a chance to create roughly 50,000 management and support positions. To reduce the downward trend, there needs to be an increase in Saudi nationals pursuing healthcare careers. It is important to help Saudi youth join higher learning institutions and pursue healthcare-related courses. This can be achieved by providing resources and ensuring a [positive learning environment for the youth. In addition, all the teaching hospitals should be adequately equipped so that it becomes easy for healthcare students to practice what they learnt in school before they are employed fully (McKinsey

Global Institute, 2015). However, there is a significant constraint: the lack of continuous training of employees to equip them with the latest skills and technological advancements for medical assistants at public hospitals and the restricted teaching capacity.

Today's medical professionals are highly specialized, and there is a serious shortage of family physicians. Saudi Arabia's ageing population and the vast spread of diseases have led the country to shift its medical staff to primary caregiving. In addition to moving around medical personnel, the report states, it is important to develop innovative strategies to help deal with the industry's current challenges. An example is setting up flexible shifts so employees can get enough rest as they also focus on growing their skills. As a result, it will be easy to reduce employee workload, ensuring that every employee delivers the best services. (McKinsey Global Institute, 2015). It would also be necessary to alter the traditional perception that most people have of healthcare institutions, frequently seen as "hierarchical", as they do not hire nurses for more specialized or advanced tasks. The experts in the report affirm that, apart from employing and training new employees, private organizations significantly impact the nation's healthcare expansion (McKinsey Global Institute, 2015). Similarly, the NTP 2020 aims to make health practitioner's careers more attractive by ensuring they have a clear career direction and increasing the number of trained healthcare practitioners and medical support professionals available to 150 from 70.2 in every 100,100 people. (McKinsey Global Institute, 2015).

Currently, up to 24% of hospital beds and 32% of hospitals are available in the private healthcare sector (McKinsey Global Institute, 2015). A defined supply plan for the potential development areas would be necessary if the private healthcare sector would focus on establishing itself. Most private sector providers play a significant role in providing facilities in some regions where access to medical care is strained. The facilities can include long-term patient care centers, rehabilitation centers, and secondary care hospitals differentiated by specialized treatment and medication. The country can also widen the privatization of specific sectors, like localizing pharmaceutical manufacture and health care. NTP 2020 emphasizes that by 2020 KSA will have increased its share of pharmaceutical production from 20% to 40%. The government has taken some short-term achievable goals like assigning some chosen new facilities to private sector operators for launching in the next years (McKinsey Global Institute, 2015). The government will also jointly assess the effectiveness of public and private sector collaboration models. The government needs to set up measures that ensure expenditures are minimized. From a law perspective, it is important for the state must address the barriers to participation in the private sector, such as Saudi doctors' demands for legal ownership. In addition, the MGI research underscores the need to remove current investment barriers (National Transformation Program, 2018). Although there is still much to be done to make the goals, aspirations and projections a reality, they all aim to promote the localization of healthcare employees in the country.

Saudization of the Healthcare Workforce

The Saudi government has been forced to take decisive action to address the issues of increased unemployment and to employ locals rather than foreigners due to an increase in foreign employees, making it hard for Saudi citizens to access jobs. This realization led to the invention of a new word, "Saudization," which refers to a creative strategy to offer training to Saudi citizens to replace all foreign workers adequately. The government formulated the term a couple of decades ago, but it was only used later in 1994 in economics. According to Al-Asfour and Khan (2013), the Saudi Arabian government implemented the Saudization Policy, which required private sector businesses that have employed 20 workers or more (foreign) to ensure the number is reduced at a rate of 5% per year.

The private department was more concerned about the Saudization initiative, called the Nitaqat Program. The program was presented in the country in June 2011 (Al-Asfour and Khan, 2013). Consequently, the private sector's level of Saudization rose from 10% in 2011 to 13% by late 2012 (McKinsey Global Institute, 2015). Moreover, the private sector had previously accepted Saudization, although passively, and localization was not successfully implemented until the late 1990s. According to the MOH annual report, over two-thirds of healthcare practitioners are foreign or expatriate employees (Ministry of Health, 2017).

The MGI report, in contrast, gives employment levels for all Saudi residents, which has led to significant growth in Saudization. This includes sharing all private positions held by Saudi citizens and information about the Saudi citizens' public sectors (McKinsey Global Institute, 2015). Salaries and Saudization have a favorable relationship at the moment. Saudization, in this case, is the process by which Saudis control high-income departments and foreign employees control low-income departments. The possible effects of the government's initiatives and policy reforms are expected to hasten the localization process to reach higher levels. Also, Saudi Arabians are expected to begin applying for jobs currently held by foreign employees at the prevalently low wages that employees currently get. The state has been forced to take action by rejecting visas for foreign employees through a fixed ratio, such as 50% for females and 10% for males, as the unemployment rate is rising dramatically from the existing levels (McKinsey Global Institute, 2015). It supports that female employment is anticipated to expand relatively quickly. There has been an issue of gender inequality in employment. However, the country aims at achieving gender equality through the employment of as many female-qualified healthcare professionals as possible. Depending on the industry and the conventional criteria that apply to such work in KSA, there is a limit to the percentage of women anticipated to work in each field. As a result, the number of workers who are not Saudi natives required is determined based on the rate of Saudization by summing the current ratio of workers who are not natives of Saudi Arabia to the entire non-Saudi Arabian population (McKinsey Global Institute, 2015).

The "Nitaqat" program was introduced to take the role of the earlier Saudization initiative. Nitaqat gives every private institution that has more than five employees a Saudization aim, also referred to as "zones" or "bands"). The program separates organizations into different categories. Platinum and green categories include high, medium and low, and yellow and red. The categorization is based on the localization level achieved in these companies. Platinum and green organizations have the highest level of Saudization. On the other hand, red and yellow have the lowest levels of Saudization achieved (McKinsey Global Institute, 2015). As a result, the workers are sorted according to a color scheme depending on how well the company or organizations will perform: Non-compliant organizations are referred to as Red or Yellow, whilst compliant organizations are referred to as Green. The great-performing companies are called Platinum.

Nitaqat was very different from the preceding programs in different ways. First, the state could easily oversee the program. This was made possible through the integrated social insurance system, which made it easy to track all the records of people living in the country. Secondly, the visa records were stored well, making it easy to know how many Saudi natives and foreign workers are in the country. Once a particular organization employed a foreign worker, their details were collected and stored in the system (McKinsey Global Institute, 2015). The main reason for implementing this program was ensuring goals and objectives were met. The program divided various companies into more than 50 business categories. It also divided them into five distinct segments with set goals for each category according to the degree of Saudization the enterprises in that segment had previously attained. For example,

MGI research reveals that if an institution has up to 49 employees, the Saudization process will be 34% of the workforce (McKinsey Global Institute, 2015).

Policymakers have remarked that “Nitaqat has actual teeth” compared to previous efforts. The red companies have limitations placed on them, preventing them from granting more visas for recruiting expatriate workers. As a result, this has prevented the companies from expanding. The Platinum companies are rewarded with quick and immediate access to various government services and honors, including seamless processing of visas and adaptable grace periods after expiration, making it easy for the companies to expand and employ more Saudi employees. On the other hand, the Yellow companies get fewer restrictions. These findings point to a significant influence of localization in Saudi following the nation’s efforts to hire local Saudi talent instead of foreigners to meet the demands of Vision 2030.

Saudi Arabia’s policy has recently undergone a significant change. This has made the government launch strict measures to balance the spending rate on public facilities and the fiscal imbalance. The updated Vision 2030 ensures that the government will change some of its actions in all sectors. The healthcare industry also undergoes a significant change in its strategies. To evaluate the effectiveness of all stakeholders, the government has developed numerous plans, rules, and benchmarks for its HRD programs in the healthcare sector. Strategic objectives, KPIs, and KPTs have been presented, providing the healthcare sector with a clear direction.

In the following four years, the country hopes to earn 4 billion from using services rendered by private organizations (2016-2020). By 2020, it intends to 10% increase the share of private sector healthcare spending (25 to 35 per cent). Several strategies implemented by the government will increase Saudi Arabia’s workforce engagement in the healthcare industry. As a result, it will be easy to achieve Vision 2030 since most people will have access to quality healthcare. The NPT 2020 specifies areas for personnel management, career planning, and training and development for healthcare professionals. These measures will impact the localization of the workers since it has seen the need and importance of creating employment opportunities for the young Saudi people in the country. The more the youth are employed, the easier it will be for the country to achieve its economic goals and objectives. Second, by carefully adopting sustained policy approaches, a repositioning from the current one-third to a predicted two-thirds ratio of the total Saudi workers to foreign workers by 2030 must be made, creating opportunities out of challenges. Young Saudi-trained boys and girls have much room to grow in this industry.

Conclusion

The private sector has a vast role, including developing additional medical, nursing, dentistry, and other special educational institutions. This role presents a problem and a chance for the initial movers in the healthcare industry. One of the ways to achieve the set healthcare goals is by ensuring that private and public sectors work together. More learning institutions should be offered, and the youth should be allowed to work and help the country achieve its economic goals. As a result, it will be easy to meet the increased demand for healthcare professionals. There will be more people willing to join the healthcare profession. This will increase the number of healthcare institutions’ employees, reducing the heavy workload that most healthcare workers face. Therefore, it is necessary to strengthen and redefine the private sector’s role in human resource training in a new environment, particularly for long-term patient care, rehabilitation of patients for easier recovery, and day surgery units where patients require optimal care from healthcare practitioners.

In place of more funding, hospital beds, technology, or medical care, appropriate capacity building and proactive policy regulation are required. It is crucial to make sure that any future health-related investments align with the requirements of the regional HRD healthcare system. Introducing public versus private partnership models and strategies in selecting future institutions for sharing resources like the human workforce will be an actual test. Nonetheless, the new plan's policy orientation creates synergy amongst all stakeholders, making achieving the larger goal of diversifying the economy easier and giving private organizations more power to participate more actively. Only time will determine this position's credibility and cohesion with the new initiative.

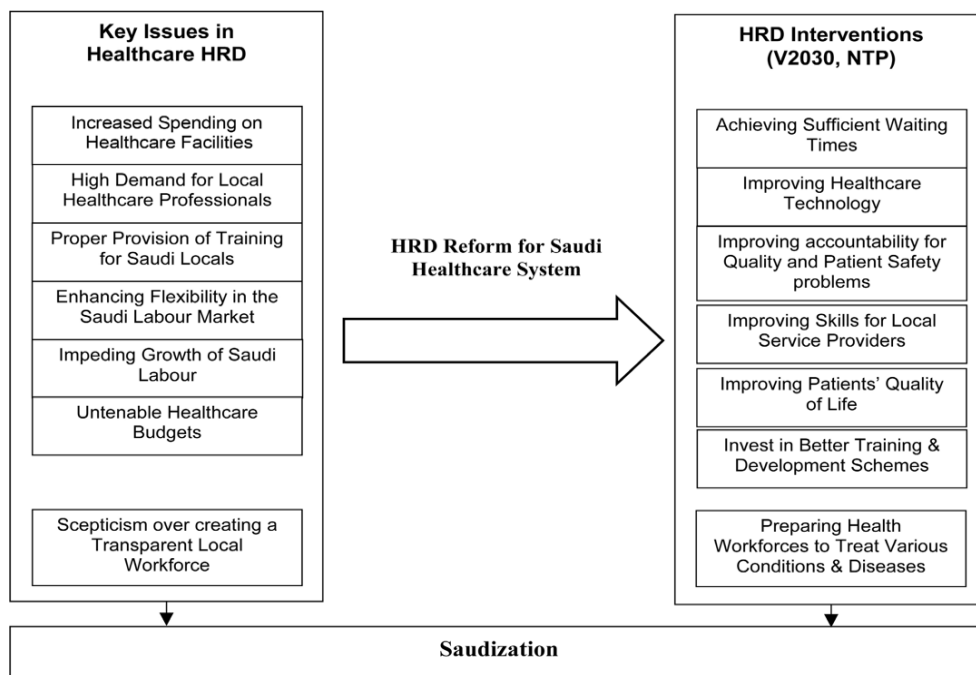


Figure 1; a conceptual model of potential healthcare human resource development reform in Saudi Arabia.

Limitations of this Research Study

Vision 2030 and National Transformation Program were enacted in 2016 following the MGI findings, which are the main focus of this research paper. Early studies and research by various authors have also been discussed. Different authors have given their views on the policies and strategies to improve healthcare in the country. The Saudization of healthcare workers and improved and continuous learning are significant components of the Saudi Arabian strategy to deal with the healthcare crises. The strategy has seen more natives get employed. This strategy will make achieving the set Vision 2030 and ensure that all citizens can access quality care easily. However, it is crucial to understand that the government is also planning on using the available resources for now to enhance efficiency.

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Conflicts Of Interest

This paper contains no conflicts of interests

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