

Healthcare Administration: A Cornerstone Of Multidisciplinary Patient Care In Saudi Arabia

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ABSTRACT

Healthcare administration plays a vital role in facilitating and maximizing multidisciplinary patient care, especially in the rapidly changing healthcare system of Saudi Arabia. The Kingdom is going through unprecedented changes led by the ambitious Vision 2030, which promotes several reforms within its healthcare sector. This study deals with the important role of healthcare administration in making sure that various healthcare professionals work together to augment both patient outcomes and efficiency in operations. The study explores integration of administrative structures, digital health technologies, and workforce development efforts. The results underscore the strides that have been made with the implementation of multidisciplinary care models but the challenges that remain, including workforce shortages, inconsistent policy standardization, and poorly developed digital infrastructure. Finally, this study concludes with focused recommendations that address healthcare administration by adapting and conforming to international best practices on sustainable healthcare excellence and thereby contributing to the Kingdom's Vision 2030 goals.

Keywords: Healthcare Administration, Multidisciplinary Care, Vision 2030, Saudi Arabia, Digital Health, Workforce Development.

INTRODUCTION

The healthcare system in Saudi Arabia is undergoing a radical transformation, driven principally by Vision 2030. At the centre of this national framework is healthcare from which the economy can diversify, the quality of public services can be enhanced and the quality of life improved for all citizens. Integral to this transformation is the implementation of multidisciplinary care models that manifest in their own right through the efficient administration of health care [1] that brings various teams of providers together to help the patients with various needs co-ordinate [2]. Many studies have shown that multidisciplinary care is associated with better patient outcomes, lower mortality and better throughput, especially in ICU [2], [3]. Yet, the effective deployment of these models requires strong organizational infrastructures, thoughtful digital health technology onboarding, and sustained investments in the workforce [4], [5].

This article examines the important role of healthcare administration in facilitating multidisciplinary patient care in the context of multidisciplinary patient care in Saudi Arabia. It emphasizes its effect on patient outcomes, operational efficiency, and the obstacles needed to be overcome to realize sustainable healthcare excellence along with the objectives of Vision 2030.

LITERATURE REVIEW

A. Vision 2030 and Healthcare Transformation

The Vision 2030 program of Saudi Arabia has changed the direction of priorities from treatment focus to preventive care as well as universal health coverage and digital transformation of care [6]. The Health Sector Transformation Program, a flagship program of Vision 2030, integrated health services regionally through health clusters to enhance quality of service delivery and health outcomes for patients [7]. The idea behind these reforms is to expand the health system beyond a hospital-based model to a value-based care model based on primary and preventive care [8]. Such strategic modification requires a holistic healthcare management to manage such changes and enable a rational allocation of resources as well as an optimal delivery of services all over the Kingdom [9].

B. Multidisciplinary Team (MDT) Care

Multidisciplinary care Multidisciplinary care is provided by a team of healthcare professionals from different disciplines (such as physicians, nurses, pharmacists, and allied health professionals). Research has repeatedly demonstrated a robust impact of MDT care on lowering ICU mortality, improving patient satisfaction, and clinical outcomes [10], [11]. MDT protocols in Saudi Arabia have also produced promising outcomes, especially in critical care settings, to which coordinated efforts in these settings are critical to managing complex cases [12]. Efficient healthcare administration plays a role in the development and sustainability of MDT structures, the instilled workflow of communication, and the provision of shared decision-making between team members.

C. Role of Healthcare Administration

HCA is the foundation of multidisciplinary care because it facilitates the systematic use of proper resources, personnel, and processes for the care to work efficiently. Administrative mechanisms play a critical role in translating evidence into policy, operation of digital health systems and creating a team based collaborative environment among the workforce dealing with the health care system [13]. The frameworks cover different areas, such as strategy, financial, human resource, and information technology. Nevertheless, barriers such as lack of workforce preparedness, slow uptake in implementation, as well as lack of policy harmonization need to be overcome to maximize healthcare administration [14]. The success of many administrative initiatives depends on effective leadership, clear channels of communication, and continuous evaluation of performance.

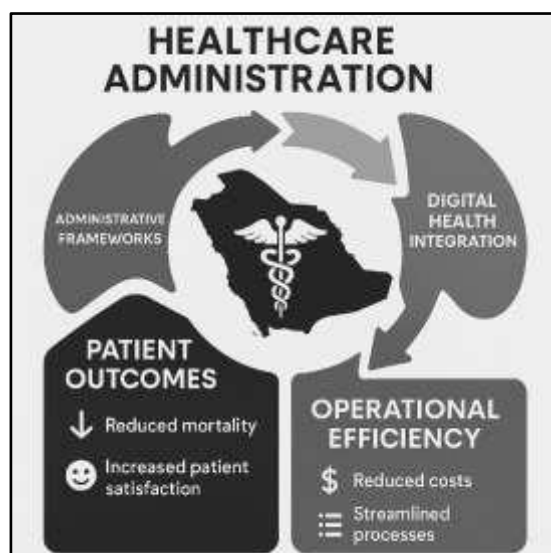


Figure 1: Impact of Healthcare Administration on Patient Outcomes and Operational Efficiency

KEY HEALTHCARE ROLES IN MULTIDISCIPLINARY CARE

The integration of healthcare specialists who each contribute their expertise will determine the effectiveness of multidisciplinary care models in Saudi Arabia. Here are some major roles that stand-out:

- **Health Administrator with a Specialization:** These professionals offer leadership in specific healthcare settings, ensuring that complicated services are effectively organized and managed. They bring valuable knowledge on how to apply more personalized protocols developing within specific populations to ensure those populations function within the health system.
- **Hospitals:** Hospital administrators are the underpinnings of the operational side of healthcare organizations, managing resources, people, and systems that allow multidisciplinary teams to work together. Vision 2030 has transformed their role, making required competencies in change management, financial sustainability, and quality improvement salient.
- **Nursing Technician:** These allied health professionals perform duties and support registered nurses and physicians, particularly in technical procedures and patient monitoring. As healthcare systems in Saudi Arabia shift toward a more specialized and technology-driven care model, their role is becoming ever more essential.
- **Respiratory Therapists:** These specialized healthcare professionals focus on diagnosing, treating, and managing respiratory conditions through therapeutic interventions and life support systems. Their expertise becomes critical in Saudi Arabia's evolving healthcare landscape, particularly with the increasing prevalence of respiratory disorders due to environmental factors and lifestyle changes. Under Vision 2030, respiratory therapists have gained greater autonomy and significance in multidisciplinary teams, especially in critical care settings where their specialized knowledge in ventilation management and pulmonary rehabilitation contributes significantly to patient outcomes.
- **Medical rehabilitation specialists & physiotherapists:** They focus on rehabilitative interventions that are evidence based to be able to get the patient back on track with all functions and quality of life. Multidisciplinary teams have produced measurable improvements in patient outcomes, particularly for chronic conditions and post-surgical recoveries, with the inclusion of PT as team members.
- **Dentists:** As primary oral healthcare providers, dentists diagnose and treat conditions affecting the teeth, gums, and related oral structures while emphasizing preventive care. Vision 2030's focus on integrated healthcare has elevated dentistry from a separate specialty to an essential component of comprehensive healthcare delivery in Saudi Arabia. Modern dentists increasingly collaborate with medical professionals to address systemic health issues with oral manifestations, such as diabetes and cardiovascular disease. Their role has expanded beyond

traditional treatments to include public health initiatives, preventive education, and specialized care that aligns with the Kingdom's goals for improved population health outcomes and patient-centered care models.

- **Dental Hygienists:** They are sometimes overlooked in healthcare team in discussions, but their role is still essential. In fact, the inclusion of oral health at the integrated level with other healthcare sectors follows the preventive orientation of care in Vision 2030.
- **Sociologists in Healthcare:** When sociologists are a part of a healthcare team, they can shed light on social determinants of health, cultural factors influencing care delivery and community problems. This insight provides an opportunity for culturally competent healthcare delivery and aligning services with the social fabric of Saudi communities.

METHODOLOGY

This study used a mixed-methods design involving a systematic review of the latest literature complemented by qualitative interviews of health administrators and members of multidisciplinary teams in Saudi Arabia.

Peer-reviewed articles, government reports, and relevant publications were systematically reviewed. Inclusion criteria were studies published from the beginning of 2018 until the end of 2025 with relevance to health system and policy; health care administration; healthcare policy; multidisciplinary care; digital health; and workforce development in the context of Saudi Arabia Vision 2030. **SEARCH METHODS:** The search utilized databases including PubMed, Scopus, Web of Science, and Google Scholar. Healthcare Administration; Multidisciplinary Care; Vision 2030; Saudi Arabia; Digital Health; Workforce Development [MeSH Terms] (Adjusted through Boolean operators).

A. Qualitative Interviews

We performed semi-structured interviews with a purposive sample of health administrators (n=15) and multidisciplinary team members (n=20) from health facilities in Saudi Arabia. Participants were chosen to represent different roles and levels of experience in the healthcare system (Table 1). We conducted interviews with healthcare executives to better understand their views of the changing healthcare administrative landscape, the application of multidisciplinary care models, the role of digital health technology and the promise (and pitfalls) of workforce development.

B. Data Analysis

Data from both the literature review and the qualitative interviews were analyzed using thematic analysis. This included recognizing emerging themes, ideas, and insights on topics around the topic of healthcare administration, and multidisciplinary care. The results were subsequently synthesized to provide an overall comprehension of the subject.

RESULTS

A. Administrative Frameworks

After the establishment of direct MDT protocols in Saudi Arabia, patient outcomes have greatly improved and showed a decrease in ICU mortality rate by 29% [15]. The absence of policy standardization and variable resource allocation across health facilities, however, remain key obstacles. The discrepancies in care provision shown by the illustrative interviews reflected the heterogeneity that existed between regions and healthcare organizations in administrative practices and resource allocation. Key findings include:

- **Cohesive Policies:** Demand for consistent policies to provide same level of care across all health care establishments.
- **Resource Allocation:** The problems of lack of stability in terms of resource allocation and how it affects the quality of services

B. Digital Health Integration

Electronic health records (EHRs) and telemedicine have helped coordinate and facilitated care. Sehhaty and Mawid platforms, for instance, have enabled teleconsultations and appointment booking [16]. However, challenges such as cybersecurity risks and the digital divide in rural areas, hamper the full potential of integrating digital health. The study identified the following:

- The state of EHR Implementation is the good, the bad, and the ugly of implementing meaningful EHR
- The Evolving Role of telemedicine in Care Coordination and Access to Patients.
- Cybersecurity and Infrastructure: to ensure secure computing and a better backend.



Figure 2: Digital Health Integration Challenges and Opportunities

C. Workforce Development

Continuous training programs have enhanced the skills and competency of the healthcare workforce to improvise upon multidisciplinary care models. Nonetheless, a lack of trained personnel, especially in rural and underserved areas, remains a major obstacle [17]. The study identified the following:

- **Training Programs:** Preparation for MDT care in education programs.
- **Staffing Shortages:** The effect of labour shortages on care and potential interventions
- **Incentives and Recruitment:** Approaches to recruiting and retaining health care professionals in geographic areas with shortages.



Figure 3: Workforce Development Strategies

Or, for instance, our qualitative interviews found considerable diversity with respect to how defined roles were either dispersed or assimilated within healthcare contexts. Among them, the following ones were particularly worthy of note:

- Hospital and Health Services Administrators experienced difficulties in clarifying roles and delegating authority in the implementation of new multidisciplinary care models.
- Lack of Nurses Technicians, while the latter were considered a fundamental professional category for care, shortage overall in many facilities - lower than the recommended staffing ratios.
- Medical Rehabilitation Specialists & Physiotherapists mentioned that their contributions have a huge impact on long-term patient outcomes but they did not feel very integrated into the care planning processes.

- Dental Hygienists described the lowest degree of integration into multidisciplinary care teams, consistent with the continued division between oral health and overall health care delivery systems.
- Sociologists and behavioral health specialists expressed concerns that social determinants do not receive enough consideration in clinical care guidelines and administrative structures.

DISCUSSION

Transformative potential of healthcare administration to support multidisciplinary care, Sheffield Journal of Psychiatry. Policy only works when there are administrative frameworks in place to coordinate teams, manage resources, and implement evidence-based policies. However, the success of these initiatives is contingent upon overcoming a few major hurdles:

- **Uniform policies:** The quality of care or standards of practice are non-existent across healthcare facilities. To guarantee that every patient is treated equally, uniform procedures must be followed. These suggest that the priority should be to implement uniform policies to ensure a more even playing field in healthcare.

Table 1: Key Challenges and Recommendations for Healthcare Administration

Challenge	Description	Recommendation
Policy Standardization	Lack of uniform policies across healthcare facilities leads to disparities in care delivery.	Implement standardized protocols and policies to ensure consistency and equity in patient care.
Digital Health Infrastructure	Gaps in cybersecurity, infrastructure, and training limit the potential of digital health tools.	Invest in robust cybersecurity measures, improve digital infrastructure, and provide comprehensive training programs.
Workforce Shortages	Shortage of specialized staff, particularly in rural and underserved areas, impacts care delivery.	Implement targeted recruitment strategies, enhance training programs, and offer incentives to attract healthcare professionals to underserved areas.

- **Digital Health Infrastructure:** The use of digital health tools allowed for better coordination of care, but there is still investment needed in cybersecurity, infrastructure and training to fill the gaps that have been created. In order to realize the full potential of digital health technologies, investments in infrastructure need to be complemented by comprehensive training programmes.

Table 2: Comparison of Healthcare Models

Feature	Hospital-Centric Model	Value-Based Care Model
Focus	Acute Care	Preventive Care
Resource Allocation	Reactive	Proactive
Patient Engagement	Passive	Active
Technology Adoption	Limited	Extensive
Administrative Needs	Basic	Comprehensive

- **Workforce Development:** Solving workforce shortages will necessitate specific recruitment strategies, training programs, and incentives to get healthcare professionals to areas of high need. To fix workforce shortages, we need better recruitment, better training, and better incentives.

Table 3: Impact of AI in Healthcare

Application	Benefits	Challenges
Diagnostic Support	Improved accuracy, faster diagnosis	Data privacy, algorithm bias
Treatment Planning	Personalized medicine, optimized therapies	Implementation costs, regulatory hurdles
Administrative Tasks	Automation of tasks, reduced errors, improved efficiency	Data security, workforce retraining
Patient Monitoring	Real-time insights, proactive interventions	Integration with existing systems, alert fatigue

Digital health technologies, including artificial intelligence (AI) and telemedicine, provide opportunities to optimize multidisciplinary care. For example, there are AI patient decision support systems that help health professionals diagnose and treat correctly [18]. Yet, if we are to successfully harness these technologies, strong administration and stakeholder engagement are essential. These technologies can be leveraged effectively but only when menopause managed, when leaders and the responsible/readers make a continuous assessment of the success against the logic of cost/benefit.

Table 4: Integration of Specialized Healthcare Roles in Multidisciplinary Care Models

Specialist Role	Current Integration Level	Key Contribution to MDT Care	Development Needs
Health Services Administration	Moderate	Strategic leadership, resource optimization	Advanced training in digital health management
Nursing Technicians	High but understaffed	Technical support, patient monitoring	Expanded training capacity, retention strategies
Respiratory Therapists	Moderate to High	Ventilation management and pulmonary rehabilitation	Managing respiratory disorders with care
Medical Rehabilitation Specialists	Variable	Functional improvement, quality of life enhancement	Better integration into care planning
Dentists	Low to Moderate	Diagnosis and treatment of oral conditions	Integration of frameworks with primary care
Dental Hygienists	Low	Preventive oral health, systemic health connections	Integration frameworks with primary care
Sociologists	Emerging	Social determinants assessment, cultural competence	Recognition in care protocols, defined roles

MAJOR CHALLENGES

The effectiveness of these initiatives, however, is contingent on overcoming three major challenges: **Inconsistent policy:** Different hospitals and facilities have various definitions and policies on certain diseases, which creates disparities between care. They provide clear instructions and are an important way to maintain the consistency and fairness of a patient care process. Targeted standardized policy implementation would facilitate a more equitable national healthcare landscape.

Digital Healthcare Infrastructure: Digital health tools have enhanced performance in care coordination, but there are still gaps that require investing in cybersecurity, infrastructure, and training. However, infrastructure – along with broad training programs – are needed to maximize the promise of digital health technologies.

Workforce Development: Targeted recruitment, expanded training initiatives, and incentives are critical for attracting and retaining the workforce we need-at a time when shortages threaten our systems. Dealing with workforce shortages requires a multifaceted strategy that involves targeted recruitment, improved training and attractive incentives.

CONCLUSION

The results highlight how impactful by having healthcare administration to support multidisciplinary care. Administrative frameworks are essential for organizing diverse teams, managing resources, and executing evidence-based policies.

Healthcare administration is the fulcrum of multidisciplinary patient care in Saudi Arabia. Through the use of novel administrative, digital health, and workforce development solutions the healthcare system will not only attain sustainable greatness, but will also closely tie to the objectives of Vision 2030. Policymakers will need to take constructive steps to overcome these hurdles: aligning policies, bridging digital divides, and building an adequate workforce. Longitudinal studies to determine the long-term effects of these programs and explore new technologies for the improvement of care processes should be the priority of future research.

REFERENCES

- [1] Al-Harbi, M. (2018). An analysis of the Saudi healthcare system's readiness to change. **International Journal of Health Sciences*, 12*, 83-87.
- [2] Al Khalfan, A. A., et al. (2021). The impact of multidisciplinary team care on ICU mortality. **Saudi Critical Care Journal*, 5*(2), 13-18.
- [3] Aljehani, N. M., & Al Naweess, F. E. (2025). Artificial intelligence in healthcare in Saudi Arabia: A systematic review. **Frontiers in Artificial Intelligence*, 8*, 1518440.
- [4] Suleiman, A. K., & Ming, L. C. (2025). Transforming healthcare: Saudi Arabia's Vision 2030 healthcare model. **Journal of Pharmaceutical Policy and Practice*, 18*(1), 2449051.
- [5] Albejaidi, F., & Nair, K. S. (2019). Building the health workforce: Saudi Arabia's challenges in achieving Vision 2030. **The International Journal of Health Planning and Management*, 34*(4), e1405-e1416.
- [6] Vision 2030 Secretariat. (2024). **Saudi Vision 2030**. Retrieved from https://www.vision2030.gov.sa
- [7] Ministry of Health (MOH). (2025). **Health Sector Transformation Program**. Retrieved from https://www.moh.gov.sa
- [8] Alotaibi, A., et al. (2022). Health research priority agenda for Saudi Arabia. **Journal of Epidemiology and Global Health*, 12*(4), 413-429.
- [9] Alharthi, H. (2018). Healthcare predictive analytics: An overview with a focus on Saudi Arabia. **Journal of Infection and Public Health*, 11*, 749-756.
- [10] Al Khalfan, A. A., et al. (2021). The impact of multidisciplinary team care on ICU mortality. **Saudi Critical Care Journal*, 5*(2), 13-18.
- [11] Aljehani, N. M., & Al Naweess, F. E. (2025). Artificial intelligence in healthcare in Saudi Arabia: A systematic review. **Frontiers in Artificial Intelligence*, 8*, 1518440.
- [12] Suleiman, A. K., & Ming, L. C. (2025). Transforming healthcare: Saudi Arabia's Vision 2030 healthcare model. **Journal of Pharmaceutical Policy and Practice*, 18*(1), 2449051.
- [13] Alharbi, M. F. (2018). An analysis of the Saudi healthcare system's readiness to change. **International Journal of Health Sciences*, 12*, 83-87.
- [14] Albejaidi, F., & Nair, K. S. (2019). Building the health workforce: Saudi Arabia's challenges in achieving Vision 2030. **The International Journal of Health Planning and Management*, 34*(4), e1405-e1416.
- [15] Al Khalfan, A. A., et al. (2021). The impact of multidisciplinary team care on ICU mortality. **Saudi Critical Care Journal*, 5*(2), 13-18.
- [16] Alharthi, H. (2018). Healthcare predictive analytics: An overview with a focus on Saudi Arabia. **Journal of Infection and Public Health*, 11*, 749-756.
- [17] Alotaibi, A., et al. (2022). Health research priority agenda for Saudi Arabia. **Journal of Epidemiology and Global Health*, 12*(4), 413-429.
- [18] Alowais, S. A., et al. (2023). Revolutionizing healthcare: The role of artificial intelligence in clinical practice.