

## استمارة جائزة أميز الأداء للعيادات والمجمعات الصحية الخاصة بالمملكة العربية السعودية للعام 2025م

## التعريف العام بالجائزة

أميز هي جائزة تميز الأداء للمنشآت في القطاع الصحي بالمنطقة الشرقية حيث ارتأى فرع وزارة الصحة بالمنطقة الشرقية تكريم وتقدير المنشآت التي تميّزت في خدمة المستفيدين، بهدف تعزيز التنافس الإيجابي وضمان تطور مستويات أداء المنشآت الصحية في المنطقة وتقدير جهودهم المبذولة. ولعل من أسمى أهداف هذه الجائزة ما يتوقع لها من أثر إيجابي في خلق بيئة تنافسية تدعو للتميز والإبداع وتحسين أداء الخدمات الصحية ورفع جودتها بما يحقق رؤية المملكة 2030 المرتبطة بتطوير الخدمات الصحية المقدمة للمستفيدين.

سيكون التقديم لجائزة أميز الأداء لهذا العام 2025م ابتداء من يوم 1 سبتمبر 2025م الى يوم 30 سبتمبر 2025م حسب الشروط والاحكام المرفقة

التقديم على الجائزة عن طريق الايميل الخاص بجائزة أميز الأداء ( [AMYAZ-DM@MOH.GOV.SA](mailto:AMYAZ-DM@MOH.GOV.SA) )

للتواصل للدعم الفني الخاص بجائزة أميز الأداء أ. طلال البندر (0544445071)

## تعبئة استمارة الترشيح:

المعلومات الرئيسية المطلوبة	الإجابة	رقم الهاتف
أسم المنشأة الصحية		
رقم الترخيص		
تاريخ انتهاء الترخيص		
اسم صاحب المنشأة		
أسم المدير الطبي		
مدينة المقر الرئيسي		
عدد الأسرة		
عدد الموظفين		
عدد الكادر الصحي		
عدد الكادر السعودي		
عدد الكادر السعودي الصحي		

المعايير جائزة أميز الأداء للعيادات والمجمعات الصحية الخاصة

**Governance, leadership (20%)**

مرفقات	الشروحات	المعيار الفرعي	الرقم
<p>نعم</p> <p>صورة للخطة الاستراتيجية والجدول الزمني لتحقيقها مع صور لنشر الرؤية والرسالة في أنحاء المنشأة.</p>	<p>Operation complies with ministry of health goals. It generally involves setting goals and priorities, determining actions to achieve the goals, and mobilizing resources to execute the actions. Shaping the strategy with the future. Whether the developers and implementers are making decisions consistent with the current national policies.</p> <p>Please attach a copy of the plan, KPI's and time frame follow up of level of achievement.</p>	<p>A strategic / operational plan with valid date , implemented and addresses the polyclinic vision and mission, objectives, analytic tools , show associated traceable measures to the strategic plan; activities to achieve the objective.</p>	1
<p>نعم</p>	<p>Planning is a process and thus has inputs, activities, outputs and outcomes. Sitting objectives should include patient safety. Analytical tools (PESTLE, SWOT analysis, Growth-share matrix, Balanced scorecards or strategy maps).</p>	<p>Polyclinic plan's Objectives Include patient safety.</p>	2
<p>نعم</p> <p>ارفاق صورة من توصيات الجولات القيادية</p>	<p>CEO senior leaders perform patient safety measures walk rounds / meetings, as leaders establish open and transparent communication with front line staff, fostering an environment where safety concerns are identified, discussed, and acted upon collaboratively.</p>	<p>Structured leadership Walk rounds/ meetings program addressing patient safety improvement / initiatives.</p>	3
<p>نعم</p> <p>صورة لمحضر اجتماع المجلس التنفيذي</p>	<p>Board meetings reporting to /chaired by Chief Executive Officer (CEO) are documenting patient safety discussions during periodic meeting agenda or minutes. Board members also review performance data, and incident reports to identify trends and opportunities for improvement. If there is no clear evidence of the criterion, the entire criterion = zero.</p> <p>Please attach meeting minutes / agenda addressing patient safety discussion.</p>	<p>Board of Directors meetings /executive committee meetings. (Addressing patient safety efforts and Focused Improvement projects in patient safety).</p>	4
<p>نعم</p> <p>صورة للمؤشرات المطلوبة</p>	<p>Data is collected at the Polyclinic level, The presence of systematic, data-guided activities designed to bring about the progress of the plan according to the proposed schedule. If there is no clear</p>	<p>Continuous comprehensive quality indicator system that reports the progress of strategic or operational plan according to the time frame.</p>	5

مرفقات	الشروحات	المعيار الفرعي	
<p>نعم</p> <p>صورة شهادة التوطين.</p>	<p><b>Polyclinic must have documented evidence that indicates Periotizing citizen staffing requirements and specific qualifications.</b></p> <p><b>This indicator measures the number of Saudis working in the polyclinic</b></p> <p><b>(Number of Saudis working in the polyclinic / Total employees in polyclinic) * 100</b></p> <p><b>attach A staffing policy showing the framework that guides how the poly clinic hires, manages and places its employees with any preference to Saudi recruitment.</b></p> <p><b>Attach (التوطين) certificate from Human Resources and Social Development.</b></p>	<p><b>Work force: Periotizing citizen staffing requirements and specific qualifications.</b></p>	6
<p>نعم</p> <p>صورة للخطة / السياسة المطلوبة</p>	<p><b>the presence of a plan or policy to retain Saudi staff with evidence of success of the plan in the ( Saudi staff turnover rate)</b></p>	<p><b>Provide Saudi staffing recruitment and retention plan.</b></p>	7
<p>نعم</p> <p>صورة من سياسة مشاركة التمريض باللجان المختلفة</p>	<p><b>Evidence of nurse involvement Clinical decision-making, from patient assessment and implementing care plans (health education sessions, nurses participate in developing policies, advocating for patients, and collaborating with other healthcare professionals to ensure optimal outcomes. Presence of different nursing committee's).</b></p> <p><b>Attach example of committee formation order showing nurses membership.</b></p>	<p><b>Evidence of Nurse Participation in clinical Affairs</b></p>	8
<p>نعم</p>	<p><b>A core competency of nursing is “the ability to practice nursing that meets the needs of clients cared for using logical thinking and accurate nursing skills”.</b></p> <p><b>Attach a copy of competency program structure and evidence of implementation.</b></p>	<p><b>presence of nurse competency program and % of nurses covered by this program</b></p>	9

**Customer/Beneficiary Services (30%)**

الرقم	المعيار الفرعي	الشرح	مرفقات
1	Presence of Patient Experience Measurement Program.	<p>Polyclinic implements mechanisms to gather, review, and utilize patient and family opinion about the health services provided. Patient experience is a process that reflects the interpersonal aspects of quality of care received.</p> <p>Attach clear and complete detailed proof (e.g. patient regular survey).</p>	<p>نعم</p> <p>صورة لبرنامج قياس رأي المستفيد و صورة من المشروع التحسيني</p>
2	Number of improvement projects or processes based on beneficiary feedback implemented	<p>Number of improvement projects or processes that have been implemented based on beneficiary feedback. (Monitoring mechanism: number of projects affecting the patient experience survey element, divided by the total number of projects for every 6months) Attach clear and complete design/ details of the projects.</p>	<p>نعم</p> <p>صورة من وثيقة المشروع التحسيني</p>
3	Percentage of closure of 937 complaints within the recommended 48 hours.	<p>Percentage of complaints resolved within 48 hours from time it was filed/submitted by patient family or others.</p> <p>Resolution was communicated to the patient/ family/other.</p> <p>Numerator: Number of Complaints resolved within 48 hours from filing/submission to communication of resolution</p> <p>Denominator : Total number of complaints received.</p>	<p>لا</p>
4	Overall Satisfaction with complaint resolution	<p>Not only the closure of 937 notification, it is the decision for improvement. Numerator: Complaints who received a (satisfied, very satisfied) scoring on its resolution/ outcome by the patient/family/others</p> <p>Denominator : Total number of complaints received.</p>	<p>لا</p>
5	Reports of Customer abuse against Polyclinic employee over the last 12 months.	<p>Any report or complaint that includes verbal or physical abuse or expulsion of the beneficiary. Ministry of health indicator for the number of reports of abuse is calculated monthly (in the monitoring mechanism, one number per month).</p>	<p>نعم</p> <p>مرفق إحصائية بلاغات سوء المعاملة</p>



مرفقات	الشروحات	المعيار الفرعي	
نعم	<p>Fulfilling work environment standards for people with disabilities and documenting them electronically through an automated program (platform) called "Mowaamah."</p> <p>* Attach proof of registration for the certificate.</p> <p>* Attach if a certificate if granted</p>	<p>Mowaamah certificate from Ministry of Human Resource and Social Development</p> <p>" شهادة الموائمة "</p>	6
نعم عدد المخالفات على المنشأة.	<p>Improper conduct, Negligence or Default issued against health institution. (The committee, mentioned to look into Violations, negligence, or dereliction against Polyclinic. These include system violations committed by the polyclinic, with penalties imposed by the Health Administration Violations Review Committee).</p>	<p>Number of institutional violations (from the committee in the branch of MOH) according to Private Health Institutions Law.</p> <p>(لجنة النظر في مخالفات المؤسسات الصحية الخاصة)</p>	7
نعم عدد المخالفات على الأطباء بالمنشأة.	<p>Improper conduct, Negligence or Default issued against healthcare staff. (The committee, to look into violations of the healthcare professions practice. Professional violations committed by the medical staff, the penalty will be imposed by the Committee for Reviewing Violations of the Health Administrative violations committed by the medical and administrative staff; the penalty will be imposed by the Polyclinic to which it belongs. Improper conduct, Negligence or Default issued against health care workers</p> <p>Attach clear and complete proof and evidence</p>	<p>Number of healthcare providers' violation against any staff member of the polyclinic.</p> <p>(لجنة النظر في مخالفات مزاولي المهن الصحية الخاصة)</p>	8

## Performance and Sustainability (20%)

الرقم	المعيار الفرعي	الشرح	مرفقات
1	Obtained by the poly clinic Accreditations	An accredited polyclinic demonstrates that it has met national/international standards. If there is no clear evidence of the criterion, the entire criterion = zero (Attach the valid accreditations granted to the Polyclinic). Attach copies of obtained accreditation. And / or application for accreditation.	نعم
2	Number of training courses conducted by the poly clinic over 12 months	(Attach training course schedules, accreditation numbers, and evidence of conducting training programs)	نعم
3	Employees trained by the Polyclinic on quality and patient safety/ tasks and skills.	(Attach the number and names of employees trained on the quality/ patient safety training programs with evidence of providing and attending the training programs) Attach number of admin. Staff of attendance.	نعم
4	Percentage of administrative staff member trained programs in safety	Attach a list of admin. Staff who were trained on patient safety with the name of training program & evidence of conducting & attending the program.	نعم
5	Agreements with non-profit societies or Active patients organizations for sick and needy (Attach a copy of each agreement)	Non-profit organizations and societies play a crucial role in providing support for sick and needy individuals, often through active agreements and collaborations. Active agreement with community charities to help the sick and needy people is of value in community .	نعم
6	Number of national initiatives, events, and campaigns in which the Polyclinic has participated (Attach a copy of the participation certificates.)	At least 1 per quarter, equivalent to 4 contributions over 12 months during the specified year.	نعم
7	Electronic Health System ( EHS )	Attach the name of the available EHS or digital version of patient medical chart with an example of one medical record.	نعم
8	Integrated Health System	All services provided are integrated in one single system. (Attach the name of the system/program and the activation date.	
9	Active Cybersecurity Protection Program	It must have specific policies and processes that demonstrate its compliance with current health information and cybersecurity regulatory requirements. It must establish a secure arrangement for sharing data between third parties, including the patient, and a backup for patient data. If there is no clear evidence, the full criterion = zero.	نعم

مرفقات	الشروحات	المعيار الفرعي	
نعم	Attach a CFO of a privileging or credentialing committee with minute of the last 3 meeting.	physicians have current delineated clinical privileges, Documented evidence of implementing best practice	10
نعم	How polyclinic can improve the well-being of their workers, according to the World Health Organization recommendations for the vital role of healthcare workers. provide an example done during last 12 months	The Polyclinic has an employee wellbeing program	11
نعم	The system should ensure that employees can report safety concerns without fear of retaliation or negative consequence; it should be accessible method for employees to voice their concerns and for the organization to address potential issues. (Just culture). Attach a copy of the policy / reporting system.	The Polyclinic has a policy for an employee safe complaint reporting system	12

**Patient Safety (30%)**

الرقم	المعيار الفرعي	الشرح	مرفقات
1	A written policy outlines critical results delineating the management of clinical alarms, including setting alarm parameters and alarm escalation procedures.	Clinical alarm life cycle includes the pathway for alarms of abnormal results in vital signs, lab or X ray results, which include: alarm generation, transmission, identification and response; thereby enhancing patient safety. Attach a copy of policy / pathway for critical result alarm system.	نعم
2	Evidence of reviewing and monitoring compliance with the clinical alarm system policy at least monthly, with a corrective action plan.	Attach indicators that involves tracking performance indicators, conducting audits, and documenting any non-compliance or areas needing improvement.	نعم
3	Sentinel events reported in the last 12 months with proper management and system improvement efforts / recommendation.	This measures the number of mistakes(for patient attending measurement , vital signs, made by staff in poly clinic when treating a patient that was reported appropriately reflecting the presence of JUST culture.	نعم
4	No show rate and measure taken to improve it	No show Rate: This is a KPI for outpatient clinics. If a patient misses a scheduled appointment, or scheduled procedure. Measure this value over time so you can address the issues and improve the attendance via a designed system/ procedure. Attach a copy of improvement project to improve Pt attendance.	نعم
5	initiatives of patient education campaigns	Documents of different examples (pdf, and screens in waiting areas.... etc.)	نعم
6	There is a valid medical waste management contract.	Attach copy of valid contract	نعم
7	An assigned infection control officer with clear job description and tasks.	Assignment order and approved Job description.	نعم
8	Participation of (the infection control officer and/or a staff trained nurse) in the infection prevention control committee.	Attach infection prevention & control committee formation order showing membership of nurse / infection control officer.	نعم

مرفقات	الشروحات	المعيار الفرعي	
نعم	To ensure a safe and healthy environment by equipping its workforce with the knowledge and skills to prevent and control infections. This training likely covers various aspects of infection control, such as hand hygiene, personal protective equipment, and proper cleaning and disinfection procedures. If there is no clear evidence, the full criterion = zero. Attach copied of related training program and attendance.	ratio of Employees that have been trained on the infection control skill	9
نعم	Attach a photo of the room	There is a central sterilization room, separate from other clinics as per standard	10
نعم	Number of health care employee with Bicsll certificate / total number of healthcare employee *100	Percentage of employee with BICSL certificate.	11
نعم	Attach copy of Policies and procedures which in compliance MOH guidelines.	Clear policy for Infection Prevention and Control.	12
نعم	Attach the policy of Adverse events reporting that occur with medical treatment, injury, psychological harm or trauma, or death.	Documented Just Culture Training: personnel are comfortable disclosing errors, including their own	13