



## HOSPITAL PLAN

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# IMAM ABDULRAHMAN AL FAISAL HOSPITAL STRATEGIC PLAN 2025-2030





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### VISION AND MISSION

 <b>Vision</b> Advancing care to elevate health and wellbeing for all نرتقي معاً بالرعاية الصحية للجميع	 <b>Mission</b> Deliver an innovative and sustainable model of care for better quality of life, for all تقديم نموذج مستدام ومتين للرعاية الصحية يعزز من جودة الحياة للجميع
<b>VALUES</b>	
<b>Why HHC RI</b> <b>Respect and Empathy</b> Deliver with compassion Healthcare touches lives at their most vulnerable; thus, compassion in our approach is as essential as the care we provide 	<b>1</b> <b>Excellence and Passion</b> Passion for Excellence The ambitious transformation ahead calls for extraordinary effort, where only excellence can drive the change we seek 
<b>We promise to</b> Demonstrate compassion by actively listening and responding with kindness and understanding to the needs of patients, families, and colleagues	<b>2</b> <b>Community &amp; People Centeredness</b> Lead with innovation Our goal is not to merely restructure care, but to fundamentally transform the model, requiring us to adopt innovative mindsets 
<b>Why HHC RI</b> <b>Integrity &amp; Accountability</b> Empower with Trust In a period marked by profound transformation, establishing trust ensures our community feels secure and empowered 	<b>3</b> <b>Teamwork</b> Act as one Navigating the complexity of the HC ecosystem will require combining our strengths to steer towards our shared vision 
<b>We promise to</b> Fuel your work with passion, showing energy and commitment in pursuing excellence and improving HC outcomes	<b>4</b> <b>Embrace innovation by constantly questioning the status quo and leveraging new technologies and approaches to solve complex challenges</b> Build trust through transparency, reliability, and accountability, ensuring that all actions align with the highest standards patient care
<b>Why HHC RI</b> <b>Teamwork</b> Foster unity by collaborating across departments and disciplines, working together as a cohesive team	<b>5</b> <b>Act as one</b> Navigating the complexity of the HC ecosystem will require combining our strengths to steer towards our shared vision

## INTRODUCTION

**Imam Abdulrahman Al Faisal Hospital (IAFH)** is a secondary healthcare facility operating under the Self-Operating Program and managed by the Riyadh First Health Cluster. It is located in the southern region of Riyadh, the capital of Saudi Arabia. The hospital officially opened on **03/12/1433H** (corresponding to **October 19, 2012**) and currently has a capacity of **200 beds**. IAFH operates as a Holding Company Hospital, providing a range of essential medical services to the community.

As part of Saudi Arabia's Vision 2030 transformation, the healthcare sector is a major focus. The vision outlines strategic goals to improve healthcare access, quality, and sustainability, aiming to shift from a



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treatment-based model to a prevention-focused and value-based mode. Goals are aligned with the strategic goals of both the Riyadh First Health Cluster and the Health Holding Company (HHC) as well as the goals of the national transformation program.

The Healthcare Sector Transformation Program is revolutionizing the Kingdom's healthcare system to make it more comprehensive, effective, and integrated than ever before. This enhanced system prioritizes active oversight of population health by promoting engagement and collaboration with stakeholders, adopting a patient-centered and innovative care model in partnership with globally recognized Centers of Excellence, focusing on developing a skilled and motivated workforce within a supportive and empowering work environment, implementing a state-of-the-art digital ecosystem for real-time data management and analytics, achieving sustainable operational and financial frameworks, and fostering a strong ecosystem through effective governance and risk management practices.

**IN THIS STRATEGIC PLAN:** AT IAFH, we focus on improving the health of our community by providing proactive, family-centered care beyond the boundaries of our facilities through stakeholder collaboration. We deliver patient-centered care through innovative care models, a skilled staff, and advanced digital capabilities for real-time decision-making. We focus on continuous improvement, financial sustainability, effective governance, and risk management to build a resilient health system that can adapt to future challenges.

## SCOPE OF SERVICE

The hospital offers prophylactic, diagnostic, and therapeutic services at inpatient and outpatient services to males and females of all age groups, races, and nationalities, and 24-hours round-the-clock services through the Emergency Department.

This facility provides safe and comfortable environment for both patients and personnel in order to provide optimum assistance to physicians and other health care providers in meeting the diagnostic, preventive, and



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restorative health needs of the patients. The facility staff provides quality, conscious, cost-effective and competent care with respect for life and dignity at each stage of human experience.

Services Are Provided On Outpatients, In-Patients and Emergency Bases.

Our patients can expect that all procedures, treatments, interventions, and care are delivered in accordance with established policies, protocols, and order sets designed to ensure patient safety and achieve positive clinical outcomes. These services are guided by thorough assessments, re-assessments, and clearly defined patient needs and goals. We are committed to respecting each patient's individual rights, needs, and confidentiality. All care is documented and managed through our fully electronic system (**Watheeq**), ensuring accuracy, efficiency, and continuity. In the event of system downtime, manual documentation processes are activated with strict adherence to safety protocols, with **patient identification** consistently prioritized to maintain accuracy and reduce risk.

### IN-PATIENTS SERVICES:

To align with Vision 2030 and the objectives of the Health Holding Company (HHC) and Riyadh First Health Cluster, the hospital will enhance its bed capacity to meet rising demand, alleviate overcrowding, and guarantee timely access to inpatient services. This involves assessing current capacity, predicting future requirements, and adopting effective strategies for bed utilization and management.

### BED CAPACITY:

Intensive Care Unit 1 (ICU 1) - 22

Intensive Care Unit 2 (ICU 2) – 8

Step Down Unit (SDU) – 4

Neonatal Intensive Care Unit (NICU) – 24

Pediatric Intensive Care Unit (PICU) – 6



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Pediatric Ward (PEDIA) – 16

Delivery Room (LR/DR)/OB – 22

Surgery Ward 1 (S1) – 30

Surgery Ward 2 (S2) - 22

Medical Ward 1 (M1) – 30

Medical Ward(M2) – 16

## OUTPATIENT DEPARTMENT:

Our Out Patient Department consists of 43 clinics, which includes 33 different specialty clinics with around 80245 patient visits in a year with exclusive pharmacy and X-ray services for OPD patients.

Comprehensive care to all eligible and non-eligible patients

Variety of medical services including diagnostic to scheduled patients and patients for follow-up checkups. Outpatient departmental specialized clinics are operated in morning and afternoon session, which is managed by specialty consultant and specialist:

1. General Surgery: Total of ten (10) session weekly, Morning five (5) sessions, afternoon sessions five (5) sessions.
2. Internal Medicine: - Total of 12) session; Morning five (5) sessions, afternoon five (5) sessions; Weekly Two sessions (2) Consultant internal medicine clinics
3. Obstetrics & Gynecology Clinic: Total of five (5) morning sessions, one afternoon session in a week.
4. General Pediatric Clinic: Total of six (6) sessions weekly, Morning three (3) sessions and afternoon three (3) sessions.
5. Pediatric Endocrinology clinic: Total of two (2) sessions at morning on Sunday and Monday and one (1) afternoon session on Monday.
6. Pediatric Bronchial: One morning clinic per week.
7. Pediatric Genetic Disease: Total of one (1) clinic per week on Monday morning.



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8. Pediatric Infectious Disease: Total of one (1) clinic per week on Monday morning.
9. Pediatric Neurology clinic: Total of two (2) sessions per week, Wednesday afternoon session, Thursday morning.
10. Pediatric surgery; Total of two (2) sessions weekly, Morning one (1) clinic and afternoon (1) session.
11. Neonatal Clinic: Total of one (1) clinic weekly, afternoon session on Wednesday.
12. Cardiology Clinic: - Total of four (4) sessions weekly, morning two (2) and afternoon session two (2). Monday, Tuesday, Wednesday.
13. Pulmonology Clinic: Total of two (2) sessions weekly on Sunday and Monday.
14. Nephrology: Total of two (2) afternoon sessions weekly on Monday and W
15. Urology: Total of six (6) sessions weekly, (Morning four (4) sessions and afternoon three (2) sessions.
16. Neurosurgery: Total of four (4) sessions weekly, (Morning three (3) and afternoon one (1).
17. Neurology: Total of five (5) sessions weekly at morning.
18. Behavioral Clinic: One clinic per week, morning session.
19. Orthopedic Surgery Clinic: Total of six (6) sessions weekly, (Morning 5 sessions and Sunday afternoon One (1) session.
20. Orthopedic Injection: One time per week.
21. Plaster Room: From Sunday to Thursday, morning and evening session.
22. Hematology: From Sunday to Wednesday, 3 morning sessions and 1 afternoon session.
23. ENT Clinic: Total of eight (8) sessions weekly, Morning sessions (4) and afternoon sessions (4) clinics (Including One stop clinic –Monday)
24. ENT Audiology: Total of eight (8) sessions weekly (Morning session four clinic and afternoon sessions four clinic)
25. Endoscopy: Total of five (5) sessions per week.
26. Anesthesia Clinic: Total of three (3) session clinics weekly at afternoon.
27. Dermatology Surgery: Tuesday afternoon session and Thursday morning session.



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28. Dermatology Clinic: Total of 7 sessions from Sunday to Wednesday, 4 morning session and 3 afternoon session.
29. Nutrition Clinic: Monday and Wednesday, morning and evening session.
30. Endocrinology: Total of eight (8) sessions weekly; (Morning session four (4) and afternoon Session (4) From Sunday to Wednesday.
31. Clinical Vascular Surgery: One (1) morning session on Tuesday
32. Psychiatric Clinic: Total of three (3) sessions weekly. Morning.
33. Staff clinic: Total of ten (10) clinics weekly morning session (5) and afternoon session (5)
34. One stop clinic: One Stop Clinic Team will prepare patients for surgery (Cholecystectomy and tonsillectomy) with their initial consultation. All the steps, which are prior to the surgery like examinations, investigations and consultation, should be done in a single visit on Monday of every week.
35. Urgent clinic care: from 1300H-0400H every day.
36. Dental Clinic: Total of ten (10) sessions per week for male and female ((Morning session five (5), afternoon sessions five (5).
37. Oral and dental Health Clinic: Total of two (2) sessions weekly (morning session one (1) and afternoon session (1).
38. Oral examination and Diagnostic Clinic: Total of two (2) sessions weekly (morning afternoon session.
39. Gastroenterology Clinic: Total of four (4) sessions weekly; (morning sessions three (3) and afternoon session one (1).
40. Anti –smoking clinic / Tobacco Clinic: Total of eight (8) sessions weekly, morning session (4) and afternoon sessions (4).
41. Health Education Clinic: Total of one (1) morning session clinic on Monday

### VIRTUAL SERVICE:



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The **Virtual Service at Imam Abdulrahman Al Faisal Hospital (IAFH)** provides remote healthcare access through secure digital platforms, enabling patients to receive medical consultations, follow-up care, and health education without the need for physical visits. This service aims to enhance accessibility, reduce wait times, and support continuity of care in alignment with the hospital's commitment to patient-centered care.

Clinics offering services are:

- Dermatology Virtual Clinic
- Diabetes Medicine Virtual Clinic
- Endocrinology Pediatric and Adult Virtual Clinic
- Family Medicine Virtual Clinic(Screening)
- Medication Refill Virtual Clinic
- Pediatrics Virtual Clinic
- Psychological Specialist Virtual Clinic
- Pulmonary Virtual Clinic
- Smoking Cessation Virtual Clinic
- Social Consultation Virtual Clinic

## DEPARTMENT OF MEDICINE

Department of Intensive Care: AICU, NICU and PICU

The Medical Department provides a comprehensive range of inpatient and outpatient services covering core and specialized areas of internal medicine. These include: General Internal Medicine, Cardiology, Pulmonology, Endocrinology, Nephrology, Neurology, Hematology, Gastroenterology (including diagnostic and therapeutic endoscopy), Psychiatry, and Dermatology.

**MAJOR DIAGNOSTIC ACTIVITIES:** These include but not limited to:



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#### Laboratory Investigations:

- Laboratory investigation (Routine and advanced blood tests (CBC, liver/kidney function, electrolytes)
- Immunologic and autoimmune markers (e.g., ANA, CRP, RF)
- Infectious disease panels (e.g., viral serologies, blood cultures)

#### Cardiovascular Diagnostics:

- Electrocardiogram (ECG), echocardiography
- Cardiac enzymes (e.g., troponin, CK-MB)

#### Pulmonary Diagnostics:

- Arterial Blood Gases, Radiological X-ray
- Pulmonary Function Test(PFTs), CT SCAN
- Spirometry, Peak Expiratory Flow Measurement

#### Gastrointestinal Diagnostics:

- Upper and lower GI endoscopy (gastroscopy, colonoscopy)
- Abdominal ultrasound
- H. pylori testing and liver imaging

#### Neurological Diagnostics:

- Brain imaging (CT/MRI)

#### Endocrinology and Metabolic Diagnostics:

- Blood glucose monitoring (HbA1c, fasting glucose)
- Hormonal profiling (TSH, cortisol, prolactin, etc.)
- Bone density testing (DEXA scan for osteoporosis)

**Others:** Lumbar Puncture, etc.

**THERAPEUTIC MODALITIES:** These include but not limited to:



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- Comprehensive medication management across all specialties (e.g., Antihypertensive, insulin therapy, anticoagulants, immunosuppressants)
- Antibiotic stewardship programs to ensure appropriate use.
- Therapeutic upper and lower GI endoscopy (e.g., polyp removal, variceal banding)
- Medical management of heart failure, arrhythmias
- Oxygen therapy, nebulization, and non-invasive ventilation (e.g., CPAP/BiPAP)
- Pulmonary rehabilitation for chronic respiratory diseases
- Electrolyte correction and diuretic therapy
- Central venous cannulation
- Psychopharmacological management
- Blood transfusions and iron therapy
- Chronic disease education (e.g., diabetes, hypertension)
- Nutritional counseling and smoking cessation programs
- Therapeutic ascetic pleural fluid tapping.
- Tracheal intubations.
- Ventilator support like mechanical ventilation.
- Plan and implement a comprehensive nursing care plan for a specific patient case.

## DEPARTMENT OF SURGERY

The Surgery Department encompasses a wide range of **surgical specialties and subspecialties** that provide comprehensive care for elective, emergency, day surgery cases. These services align with national healthcare transformation goals and support multidisciplinary, patient-centered care.

### Core Surgical Specialties:

General Surgery, Neurosurgery, Orthopedics, Urology, Otolaryngology (ENT), Dental, Maxillofacial surgery, and Pediatric Surgery.



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### DIAGNOSTIC MODALITIES

- Diagnostic laparoscopy
- Abdominal puncture
- Abdominal tapping
- Pleural biopsy
- Fine Needle Aspiration Cytology
- Excision biopsy
- Radiological Testing (Computed Tomography (CT) Scan, Ultrasound, Magnetic Resonance Imaging (MRI))
- Electrocardiogram(ECG)
- Routine investigation

### THERAPEUTIC MODALITIES

- Carrying out basic medical treatment
- Pre-operative care
- Direct post-operative care and observation
- Plan and implement a comprehensive nursing care plan for a specific patient case
- Dressing and debridement of surgical site
- Fine needle aspiration.
- Review of equipment to determine completeness, availability for use, cleanliness and safety
- Day care and Day Surgery services
- Surgeries for acute surgical emergencies
- Orthopedic surgeries
- Laparoscopic surgeries



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## DEPARTMENT OF PEDIATRICS

The **Department of Pediatrics** is dedicated to providing comprehensive healthcare services for infants, children, and adolescents. Our department focuses on preventive care, early detection, treatment, and management of pediatric diseases and conditions. The department is committed to ensuring that all children receive the highest quality care, utilizing a patient-centered approach that involves families in the decision-making process.

The pediatric ward delivers round-the-clock medical care for patients aged 1 to 13 years. Nursing and medical staff operate in three shifts to ensure continuous, high-quality pediatric services.

### DIAGNOSTIC MODALITIES

- Ultrasound
- Portable radiological test
- Routine investigation
- Gastric lavage
- Pulse oximetry
- Cardiac monitoring
- Throat swab and skin swab for culture and sensitivity studies
- Arterial blood gas sampling
- Neonatal central line insertion
- Intra-osseous cannulation
- Lumbar puncture

### THERAPEUTIC MODALITIES

- Intravenous line cannulation
- Intravenous fluid administration
- Gastric lavage



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- Nasogastric tube placement
- Intra-osseous cannulation
- Central line insertion
- Umbilical vein catheterization
- Umbilical artery catheterization
- Umbilical vein catheterization
- Blood exchange transfusion
- Neonatal resuscitation
- Phototherapy
- Chest-tube placement
- Conventional mechanical ventilation
- Ventilator support like mechanical ventilation

## DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

The **Department of Obstetrics and Gynecology** provides comprehensive, patient-centered care for women across all stages of life — from adolescence through reproductive years and into menopause and beyond. The department plays a vital role in maternal and newborn health and the diagnosis and treatment of gynecologic conditions, with services aligned to national healthcare goals and quality standards.

The ward provides 24 hours daily service. The department includes dedicated antenatal and delivery beds to support comprehensive maternity care services.

### DIAGNOSTIC MODALITIES

- Ultrasound for fetal monitoring and gynecologic conditions
- Pap smear and colposcopy for cervical cancer screening
- Hysterosalpingography (HSG)



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- Endometrial biopsy and D&C for abnormal uterine bleeding
- CT/MRI for pelvic masses and cancer staging
- Laparoscopy and hysteroscopy for diagnosis and treatment
- Laboratory investigations include blood chemistry, hematology, serology, hormone assay, and urinalysis.

## THERAPEUTIC MODALITIES

- Caesarian Section
- Normal deliveries
- Gynecological operations
- Hysterectomy
- Pharmacologic therapy (e.g., hormonal treatments, antibiotics, fertility drugs, Induction of labor)
- Emergency obstetric procedures
- Postpartum care and lactation support

## EMERGENCY DEPARTMENT

The Emergency Department (ED) provides 24/7 care for urgent, acute, and life-threatening conditions, including medical, surgical, pediatric, and trauma emergencies. With a capacity of 32 beds, the ED ensures rapid triage, stabilization, and seamless coordination with the hospital's specialty and diagnostic departments. It also plays a key role in responding to disasters and mass casualty events, prioritizing patient safety, efficiency, and clinical excellence.

### Bed Availability:

- Triage: 1 bed
- Rapid Assessment Room: 5 beds



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- Female observation :6 beds
- Male observation :4 beds
- Pediatric area :6 beds
- Resuscitation room: 4 beds (3 regular and 1 Isolation)
- Negative Isolation Resuscitation room: 1bed
- Waiting Room Isolation:1 bed
- Orthopedic Room: 1 bed
- Minor Room: 1 bed
- OB-Gyne:2 beds

### URGENT CARE CLINIC (UCC):

Urgent Care Clinics (UCC) is focused on the delivery of medical care for non-critical illnesses or injuries (CTAS 4 and 5), patients who are hemodynamically/vitally stable with an urgent need to see a clinician in an ambulatory medical facility outside of a traditional hospital-based or freestanding emergency department. All non-critical and stable patient presenting to IAFH from 1300H-0400H everyday shall be registered, assessed and examined in the UCC.

In case where patients arrive at the Emergency Department, ED staff will assess and prioritize patients based on the severity of their conditions using the Canadian Triage and Acuity Scale (CTAS).

### RADIOLOGY AND DIAGNOSTIC IMAGING

The department is committed to delivering high-quality imaging with patient safety, innovation, and clinical integration at the core of its operations.

### DIAGNOSTIC MODALITIES

#### All X-ray exams:



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Abdomen and Pelvis, Chest, Upper and Lower extremities, Skull., Spine. Mobile (portable) radiography, skeletal survey, Bone age. Scanogram, Fluoroscopy.

### Ultrasound

Abdomen and pelvis Doppler Ultrasound, breast, thyroid, neck, scrotum, Musculoskeletal Ultrasound.

### Mammogram:

Breast imaging, Diagnostic/ Screening, Follow-ups, Magnification, Compression, Tomosynthesis.

### CT scan with and without contrast:

CT brain (with & w/o contrast), CT Cervical spine, Neck (with & w/o contrast), Chest (with & w/o contrast) Chest HR, Abdomen (Oral with &w/o contrast), Pelvis (with & w/o contrast) Extremities (with & w/o contrast), joints; shoulder, knee, ankle, hips, wrist and whole spine PE (Pulmonary Embolism).

### MRI:

Brain (with & without contrast), MRA, MRV, Whole Spine (with & without contrast), Extremities (with & without contrast), joints; shoulder, knee, ankle, hips, Orbit P.N.S.

## PHARMACY DEPARTMENT

The Pharmacy Department ensures safe and effective medication use across inpatient and outpatient settings. It provides clinical pharmacy services, oversees medication management and supply, and conducts ongoing medication error analysis, including root cause reviews, to enhance patient safety. The department aligns with national standards to improve outcomes and reduce risks.

### Inpatient Pharmacy Services

The Pharmacy Department supports inpatient care by dispensing medications, processing orders, and ensuring safety. It manages stock, repacks medications, inspects crash carts, and removes expired items. The department handles requisitions, restocking, and reporting to maintain an efficient supply system.

## OUTPATIENT PHARMACY SERVICES



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The Outpatient Pharmacy provides one-month medication supplies, processes prescriptions, and handles data entry. It responds to medical staff inquiries, manages weekly requisitions, performs inventory checks, and monitors storage conditions, including refrigerator temperatures.

### EMERGENCY PHARMACY SERVICES

The Emergency Pharmacy ensures safe, timely medication dispensing in emergency care. It manages supplies, processes prescriptions, monitors inventory and refrigerator temperatures, and ensures availability of critical Class A emergency drugs, maintaining high standards of safety and readiness.

### CONTROLLED & NARCOTIC PHARMACY SERVICES

The Narcotics Unit supplies narcotics to wards, ensures proper documentation of orders, usage, and waste, and conducts regular inspections. It performs monthly checks for expired controlled substances and prepares consumption reports.

### MEDICAL REHABILITATION MANAGEMENT

Medical Rehabilitation Management aims to restore and enhance the functional abilities and quality of life of patients recovering from illness, injury, or surgery. It involves a collaborative, multidisciplinary approach to help individuals regain physical, cognitive, and emotional function.

#### Core Components:

**Assessment and Care Planning:** Personalized rehabilitation plans based on evaluations by physicians, therapists, and specialists.

**Multidisciplinary Approach:** A team of rehab physicians, therapists, psychologists, and social workers providing comprehensive care.

#### Rehabilitation Services:



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- Physical Therapy (PT): Mobility, strength, and pain management
- Occupational Therapy (OT): Daily living skills and independence
- Orthotic Unit

### Patient and Family Education

Training and support for patients and caregivers in the recovery process and long-term care.

### Discharge Planning and Continuum of Care

Coordinating home care, outpatient rehab, and long-term services for a smooth post-discharge transition.

### MODALITIES

- Diagnostic Tools (Goniometers, Pain Scale, Muscles Test, Hammer, Measuring Tape, Sensation Tests, Special Tests and Evaluations Forms)
- Infrared Rays
- Therapeutic Ultrasound
- Transcutaneous Electrical Nerve Stimulation
- Electrical Stimulator
- Hot and Cold Packs
- Nerve Conduction
- Laser
- Pediatric Equipment (e.g. vestibular ball, standing frame, mats, cones)
- Assistive devices (e.g. crutches, walkers, wheelchairs)
- Gym Equipment's (e.g. Treadmill)
- Occupational Equipment's
- Cervical and lumbar tractions
- Therapeutic Exercise Equipment (e.g. Shoulder wheel)



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## LABORATORY /BLOOD BANK DEPARTMENT

The **Laboratory and Blood Bank Department** is critical in providing accurate diagnostic testing and ensuring a reliable supply of blood products for patient care. The department is dedicated to supporting clinical decision-making through high-quality testing and safe blood transfusion services, adhering to established **policies and procedures** to ensure patient safety and regulatory compliance.

Provides services:

### Laboratory Services:

- Clinical Chemistry
- Hematology
- Microbiology
- Immunology/Serology
- Virology
- Parasitology/Clinical Microscopy
- Pathology
- Specimen Receiving/Processing Reference Laboratory
- Culture and sensitivity
- Urinalysis
- Point-of-Care Testing (POCT)

### Blood Bank Services:

- Collection & Storage
- Typing & Crossmatching
- Transfusion Services
- Donor Management



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## DEPARTMENT OF ANESTHESIA

The **Department of Anesthesia** plays a vital role in delivering safe and effective anesthesia care across surgical, diagnostic, and emergency procedures. It ensures patient comfort, safety, and optimal outcomes through comprehensive preoperative assessment, intraoperative management, and postoperative care. The department operates with a focus on clinical excellence, patient safety, and adherence to international standards.

### CORE SERVICES:

- Pre-Anesthesia Assessment**

Evaluation of patients' medical history, risk factors, and anesthesia needs before surgery or procedures.

- Intraoperative Anesthesia Management**

Administration of general, regional, or local anesthesia tailored to each procedure and patient condition.

- Post-Anesthesia Care**

Monitoring and recovery support in the Post-Anesthesia Care, ensuring safe transition post-surgery.

- Pain Management Services**

Acute and chronic pain control, including regional nerve blocks, epidural analgesia, and pain therapies.

- Anesthesia for Non-Operating Room Procedures**

Support for imaging, endoscopy, and emergency procedures requiring sedation or anesthesia outside the OR.

- Emergency and Critical Care Support**

Airway management, resuscitation, and sedation for critically ill or trauma patients.

## INFECTION PREVENTION AND CONTROL

The Infection Prevention and control program was established to ensure that Imam Abdulrahman Al Faisal Hospital has a functioning, coordinated process in place to reduce the risks of endemic, epidemic and



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Healthcare Associated Infection (HAI) to patients and Healthcare Worker's (HCW's). All Healthcare Workers in partnership with medical staff are responsible for the safety, health and well-being of all patients, visitors and- hospital staff. This responsibility 'may be met by working together to promote safe infection prevention and control practices, observing all rules, regulations, procedural guidelines and striving to improve the quality of patient care. For these reasons, Imam Abdulrahman Al Faisal hospital has established an infection prevention and control program which requires 'the participation and cooperation of all personnel. Activities performed by the Infection Prevention and control Department members fall within the current Infection Prevention & Control standards and these include the following:

- Prevention and control of healthcare associated infection in patients and healthcare workers.
- Target based surveillance/data management and investigation of outbreaks.
- Monitors and coordinates infection prevention and control practices with physicians, nurses and others as appropriate to IC practices.
- Prevention and control of communicable diseases.
- Review of policies and procedures related to Infection control.
- Education of hospital teams, patients, visitors, families and volunteers about infection prevention and control procedures.
- Orientation of new recruits on infection prevention and control matters and issues.
- Reporting communicable disease to Ministry of Health (24 Hours weekly basis and monthly) as well Riyadh First Health Cluster.
- Reporting of outbreak to General Directorate for Infection Prevention and Control, Ministry of Health and Riyadh First Health Cluster.
- Environmental monitoring (waste management, food service, water and air monitoring).



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## ADMINISTRATIVE AND SUPPORT DEPARTMENTS

Administrative and support departments ensure the efficient, safe, and compliant operation of healthcare facilities by providing the infrastructure and non-clinical services that enable clinical teams to focus on patient care.

## HOSPITAL ADMINISTRATION

Oversees overall hospital operations, strategy implementation, policy development, and coordination among departments.

## QUALITY AND PATIENT SAFETY DEPARTMENT

Quality has become a core business strategy and is now recognized as a shared responsibility across all levels of the organization. At Imam Abdulrahman Al Faisal Hospital, the **Quality Department** plays a central role in driving continuous improvement and ensuring the delivery of safe, effective, and patient-centered care.

The department is responsible for coordinating hospital-wide quality management activities and supporting key organizational functions. These include:

- **Strategic Quality Initiatives:** Designing and aligning quality projects with hospital goals.
- **Education and Training:** Building staff capacity through quality and patient safety education.
- **Key Performance Indicators (KPIs):** Developing, monitoring, and analyzing KPIs to track performance.
- **Data Management:** Collaborating with the Ada'a Program and the Information Center for accurate data reporting and benchmarking.
- **Team Training and Facilitation:** Supporting departments in implementing quality tools and problem-solving techniques.



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- Accreditation Readiness:** Ensuring compliance with national (CBAHI) and international standards.
- Patient Safety and Risk Management:** Promoting a culture of safety and managing incident reporting and root cause analysis.

The Quality Department reports directly to the **Hospital Director**, reflecting its strategic importance in supporting organizational excellence and accountability.

## CLINICAL EXCELLENCE DEPARTMENT

The Clinical Excellence Department at IAFH is dedicated to ensuring the highest standards of patient care through a focus on safety, quality, and evidence-based practices. Its scope encompasses the development of clinical governance structures, leadership in quality improvement efforts, and the fostering of a safety-first culture. The department monitors clinical performance, conducts audits, and leads peer reviews to ensure adherence to both national and international standards. Additionally, it supports ongoing professional development, facilitates the implementation of best practices, and incorporates patient feedback to continuously improve care.

## DATA WAREHOUSE

The Data Warehouse supports clinical and operational functions by integrating data, with a primary role in administration. It serves as a vital support system for decision-making, performance monitoring, and reporting across departments.

## RISK MANAGEMENT

The Risk Management Department at IAFH focuses on identifying, evaluating, and mitigating risks to enhance patient safety, ensure regulatory compliance, and support operational effectiveness. It leads risk assessments, incident investigations, and corrective action planning, while promoting a culture of safety and accountability aligned with the organization's strategic goals.



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### HUMAN RESOURCE DEPARTMENT

The Human Resource department provides expert advice and support to management and staff on all aspects of HR management and plays a key role in strategic planning in our hospital. The department is staffed by team of HR professionals who promote and support the personal development of our key resource whilst also promoting a working environment that is conducive to positive employee relations through effective best practice HR policies.

### PATIENT RELATION

Patient relations department is organized to be more responsive to the needs of the patients. Additionally, it assists patients by providing them and their families with information and services needed during their hospitalization and on their visits to the hospital. The patient Relations Department has prepared the necessary forms and brochures for patient and sitter's guidance and education. Social worker does daily rounds for each admitted patient and receives any suggestion for improvements or complaints.

### HEALTH INFORMATION MANAGEMENT

Manages medical records, data privacy, coding, and documentation in compliance with healthcare regulation.

### INFORMATION AND TECHNOLOGY DEPARTMENT

It is responsible for acquiring, analyzing and protecting digital and traditional medical information vital to providing Quality patient care. Health information management professionals plan Information systems, develop Health policy, and identify current and future information needs. In addition, they may apply the science of Informatics to the collection, storage, analysis, use, and transmission of information to meet legal, professional, ethical and administrative records-keeping requirements of Health care delivery. Imam Abdulrahman Al Faisal Hospital(IAFH) is currently transitioning from traditional paper-based records to a fully electronic system, utilizing **Watheeq** for Electronic Health Records (EHRs).



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## FACILITY MANAGEMENT AND SAFETY

Ensures proper maintenance of the physical environment, including safety, utilities, and infrastructure upgrades.

## GENERAL MAINTENANCE DEPARTMENT

The **General Maintenance Department** at Imam Abdulrahman Al Faisal Hospital (IAFH) is responsible for maintaining the functionality, safety, and reliability of the hospital's physical infrastructure and non-clinical systems. The department ensures that all buildings, utilities, and essential services are maintained in optimal condition to support uninterrupted healthcare delivery and a safe environment for patients, staff, and visitors.

## SUPPLY CHAIN MANAGEMENT

The **Supply Chain Department** at IAFH Hospital manages the procurement, inventory, distribution, and disposal of medical supplies and equipment. It ensures cost-effective purchasing, maintains optimal stock levels, and supports timely deliveries. The department also oversees asset management, quality control, compliance with regulations, and waste disposal. It utilizes forecasting, technology, and collaboration with clinical departments to improve efficiency and prepare for emergencies, ensuring the hospital has the necessary resources to provide high-quality care.

## APPOINTMENT UNIT (24 HOURS A DAY)

The **Appointment Unit** is responsible for coordinating and managing patient appointments across all clinical departments within the hospital.

## NUTRITION DEPARTMENT

The dietary Services department provides all different dietary services according to the patient diagnosis to the inpatient department. Nutrition department in the hospital provides its services in:



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- Clinical nutrition.
- Nutritional education.
- Nutrition services and dietary management

## CSSD

The CSSD is equipped with the modern technology machines and equipment to ensure 100% sterilization of the equipment and instruments and maintain the intimacy of the infection control inside the hospital, the following services are available: steam sterilization, formaldehyde sterilization, plasma sterilization.

## SECURITY

The security department is composed of units, one for male and the other is for female area. Their main duty is to protect people, property, information, and reputation. Responds rapidly to security emergencies within the hospital or health care setting. Help people into and out of their cars, receive hospital deliveries at night, and escort patients as needed.

## SUPPORTIVE SERVICES

It includes the following services:

- Housing Department
- Central Department
- Transportation Department



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IAFH		OVERVIEW		
		FACILITIES	NO. OF UNITS	Total Hospital Beds
			9	200
			41	IP Admissions
			26	OP Visits
		OPERATING STATISTICS	ED Visits	80245
			UCC Visits	82384
			Physicians	40320
			Nurses	346
			Allied Healthcare Workers	620
				478
BED CAPACITY				
Intensive Care Unit- 34	Pediatric Ward- 16	Surgical Ward (S2)- 22		
Neonatal ICU- 24	Delivery Room/OB- 22	Medical Ward (M1)- 30		
Pediatric ICU- 6	Surgical Ward (S1)- 30	Medical Ward (M2)- 16		



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STRENGTHS		WEAKNESSES	
<ul style="list-style-type: none"> <li>Teamwork &amp; high staff engagement.</li> <li>Leaders commitment and Professionalism</li> <li>Highly experienced team in management of critical cases.</li> <li>Strong implementation of CPGs, policies, pathways.</li> <li>Active monitoring of all process through the hospital.</li> <li>Experienced and skilled medical staff in most specialties and subspecialties.</li> <li>Highly Efficient Care Coordination with hospitals of Riyadh First Health Cluster.</li> <li>Accreditations and certifications (CBAHI Re-accreditation, ESR Accreditation, ISO9001 Quality Management System, ISO 30408 Human Resource Governance), Baby-friendly hospital.</li> <li>Strong system for data management</li> <li>Implementation of WATHEEQ Program – Electronic Medical Record</li> <li>High level of reporting incidents.</li> <li>Specialized Care Units (Day Surgery Unit, CDU)</li> <li>Activation of American Heart Association (AHA) for ACLS and BLS Training</li> <li>100% ACLS and BLS Certification for all critical care areas health care providers.</li> <li>Low attrition rate.</li> <li>Planned academic training schedule, SCFHS Program, CME accredited program</li> <li>Employee benefits and compensation</li> <li>Utilization of HR technologies (Mawared, Performance management)</li> <li>Improved patient experience</li> <li>Budget management</li> </ul>		<ul style="list-style-type: none"> <li>Hospital size (infrastructure)</li> <li>Insufficient space for car parking</li> <li>Unavailability of certain subspecialties</li> <li>shortage of staff in subspecialties</li> <li>Limited space in ER.</li> <li>Supply chain issues that may impact the ability to meet patient needs</li> <li>Issues in referral system.</li> <li>No availability of housing accommodation for workers.</li> <li>Using many medical equipment/devices that has exceeded its intended lifespan.</li> <li>Accreditations programs</li> </ul>	
OPPORTUNITIES		THREATS	
<ul style="list-style-type: none"> <li>Public – private partnership.</li> <li>Implementation of Model of care initiatives</li> <li>Strong integration with Alshifa PHCs</li> <li>Recruitment of highly qualified specialties</li> <li>Increase community participation and initiatives.</li> <li>Innovation of an automated laboratory system will streamline diagnostic workflows, reduce human error, and significantly improve turnaround times.</li> </ul>		<ul style="list-style-type: none"> <li>Low socioeconomic status &amp; neighborhood.</li> <li>Cybersecurity Risk.</li> <li>Resistance &amp; Fear of change</li> <li>Prolonged shortage of certain medications, as well as essential medical and non-medical supplies</li> <li>Challenges in meeting CBAHI standards:                             <ul style="list-style-type: none"> <li>- OPD (1) elevator is not connected to the fire alarm system</li> </ul> </li> </ul>	



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<ul style="list-style-type: none"> <li>Expanding Outpatient Services</li> <li>Expansion of Virtual Care</li> <li>Accreditation and Reaccreditation of the SCFHS Residency Program</li> <li>Focus on Patient-Centered Care and Experience</li> <li>Renovation of Emergency department</li> <li>Construction of Employee accommodation</li> <li>Expansion of car parking</li> <li>Hire subspecialties to cover hospital need</li> <li>There is no wall and door beside the 1st floor elevator.</li> <li>Replacement and upgrading of old/phase out hospital equipment and devices.</li> </ul>	<ul style="list-style-type: none"> <li>Absence of panic hardware on multiple fire exit doors</li> <li>OPD building and services Building are not covered by a functional sprinkler system.</li> <li>Transformers room and Main Distribution Board(MDB) room are not covered by clean agent system</li> <li>The hospital does not have stand pipes system.</li> <li>Absence of handwashing sinks in ante-rooms of isolation room</li> </ul>
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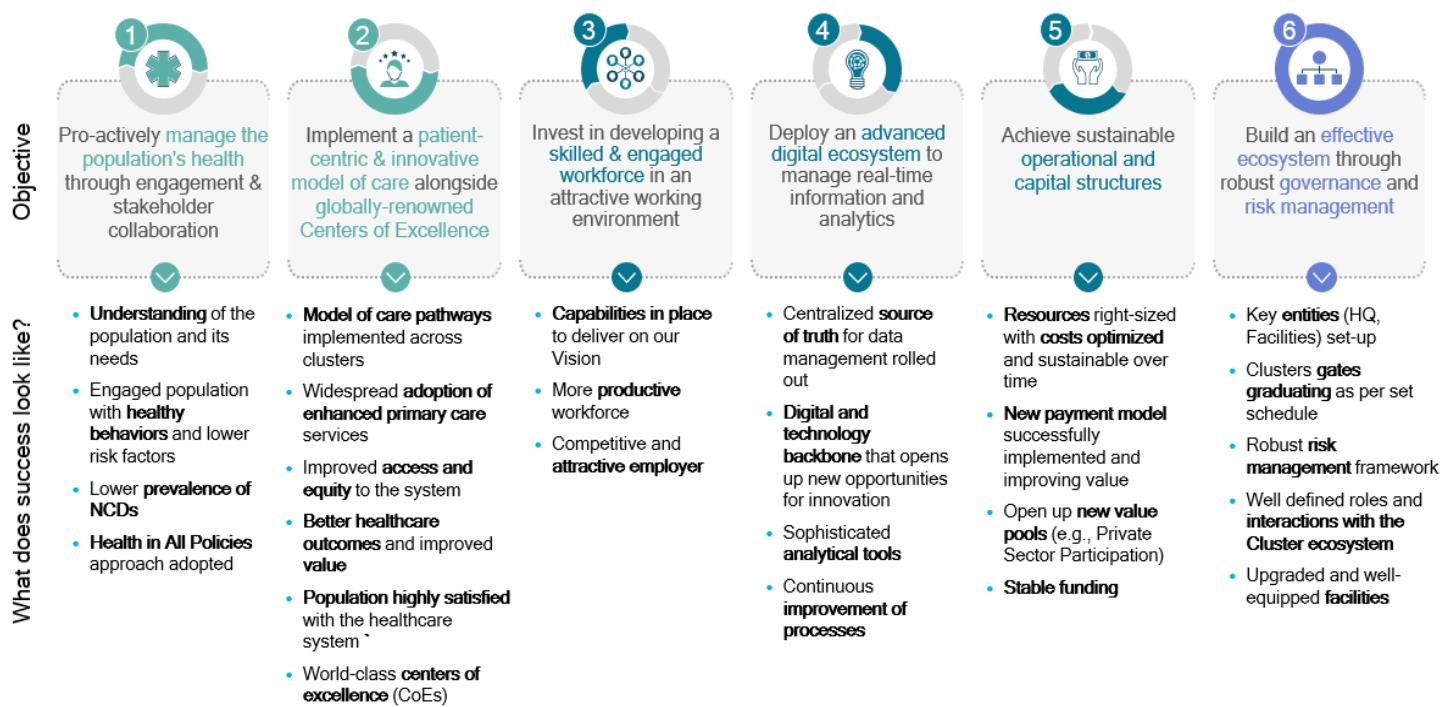


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## STRATEGIC GOALS ALIGNMENT WITH HHC

What does success look like?



## IMAM ABDULRAHMAN AL FAISAL HOSPITAL STRATEGIC GOALS AND INITIATIVES

- The strategic goals and initiatives are aligned with the Riyadh First Health Cluster's strategic objectives. Strategic activities are implemented to ensure that each goal remains continuously aligned with the overarching direction and priorities of the Riyadh First Health Cluster over the next five (5) years.



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- An annual review of progress, along with additions and modifications, will ensure accountability and continued commitment to achieving the established goals.
- Challenges will be addressed as they emerge, with overcoming them being a key priority.
- The organizational values emphasize a commitment to success, while also recognizing the sources of failure and guiding the institution safely through associated challenge.
- IAFH maintains a continuous focus on operational and strategic goals, with resilience and flexibility recognized as key assets in achieving success through streamlined approaches. Strong teamwork, effective leadership, and a deep commitment are considered essential to reaching the desired outcomes of the organization

## STRATEGIC GOALS AND INITIATIVES

### 1. Pro-actively manage the population's health through engagement & stakeholder collaboration.

ACO Domain: Population Health Management

#### Strategic Initiatives:

- Design and develop population health management tools and analytics
- Establish population engagement programs to assess health risks, raise health literacy and promote healthy behaviors
- Implement policies and programs in collaboration with Riyadh First Health Cluster and Health Holding Company to embed health considerations (e.g., education campaigns, road safety program).
- Implement Health Risk Assessment program
- Implement high risk population screening and management program for non-Communicable diseases



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- Implement population prevention program for Communicable diseases
- Identify partnerships and collaborations for social care (e.g., contracting services, pooling of resources.

### 2. Implement a patient- centric & innovative model of care alongside globally-renowned Centers of Excellence.

#### ACO Domain: Care Delivery

##### Strategic Initiatives:

- Enhance Services Integration Among Delivery Vertically (Primary, Second, Tertiary) to improve access to care
- Develop and guide implementation of a comprehensive program (including clinical outcomes measurement systems, patient related measure systems, incentives set-up) to facilitate the transition towards value-based healthcare.
- Enhance Efficiency of Inpatient and Outpatient Services to Maximize Turnover
- Implement manuals and toolkits (incl. clinical guidelines & others) to operationalize the full model of care(MOC).
- Plan and advance Medical Centers and Cities into globally recognized centers of medical excellence and innovation, attract medical tourism, and attract talent with top-tier medical residency program.
- Improve Access of Care Though State-of-the-Art Technology Assisted Channels (Virtual Care, Tele medicine.)
- Establish a call center as part of a Riyadh First Health Cluster broader patient experience and customer satisfaction program.
- Build A Comprehensive System of Providing Personalized Care Experience with Higher Clients



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Satisfaction

- Establish Research & Innovation capabilities, through e.g., partnerships with Research, Development and Innovation(RDI), life sciences, clinical trials under guidance of Riyadh First Health Cluster.

### 3. Invest in developing a skilled & engaged workforce in an attractive working environment.

ACO Domain: Human Capital, Communication and Change Management

#### Strategic Initiatives:

- Establish comprehensive learning & development academies to assess staff skills, design curriculums and individual plans and train staff on relevant skills.
- Establish workforce planning to reduce supply demand mismatches and define an aggressive sourcing plan for key positions (e.g., senior leaders).
- Define talent attraction (e.g., recruiting pools) and retention (e.g., incentive scheme) strategies to ensure a strong human capital for the transformation
- Transform IAFH into a center of excellence in medical care, training, and continuous learning, thereby reinforcing its commitment to quality, patient safety, and the development of human talent.
- Develop & Implement Robust Performance and reward system Management Program Cross-workforce Segments
- Promote workforce physical & mental wellbeing and engagement to reduce burnout.
- Develop A Disciplined, Caring, and Compassionate Work Force That Puts the Patient Always First
- Identify transformation champions/ leaders from the network to promote excellence
- Run an effective change management program as the key for a smooth & effective migration



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- Strengthen company culture through targeted programs, workshops and communication strategies to foster an inclusive, collaborative and high-performance workplace
- Empower each Head of Department to actively oversee and enforce certification compliance among their staff, ensuring that all medical, nursing, and allied health professionals involved in direct patient care maintain a valid Saudi Commission for Health Specialties (SCFHS) license and a current Basic Life Support (BLS) certification, renewed every two years.
- Implement and enforce role-based certification requirements for all direct care providers to ensure alignment with patient needs and clinical responsibilities. All staff must be trained in cardiopulmonary resuscitation (CPR), with additional certifications mandated as follows:
  - Physicians and nurses must hold valid mandatory certifications relevant to their roles, including ACLS, PALS, ATLS, and NRP, based on specialty and patient age group.

#### 4. Deploy an advanced digital ecosystem to manage real-time information and analytics.

##### ACO Domain: Data and Digitalization

###### Strategic Initiatives:

- Roll out the National Electronic Health Records system under the governance of Riyadh First Health Cluster.
- Update and implement a data and digital blueprint aligned with national standards, covering clinical, non-clinical, and patient-facing solutions, while revamping enterprise digital systems and training users for effective adoption.
- Establish standardized and unified coding principles to ensure accuracy and precision in patient records
- Ensuring adoption of strong cybersecurity measures

#### 5. Achieve sustainable operational and capital structures.

##### ACO Domain: Finance and Assets, Operations Management



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### Strategic Initiatives:

- Build a 5-year business plan to project future revenues as well as operational and capital requirements
- Develop and deploy a toolkit to analyze inefficiencies and bottlenecks (both in clinical and non-clinical areas), enabling clusters to address them and boost productivity
- Establish standardized and unified costing capabilities (e.g., Activity Based Costing (ABC) implementation) to enhance transparency, improve pricing decisions and increase operating margin
- Establish standardized and unified Revenue Cycle Management (RCM) capabilities to optimize revenue collection from private insurance
- Establish standardized and unified pricing capabilities to ensure balanced negotiations with the payer
- Implement a new payment model under Riyadh First Health Cluster in collaboration with Council of National Health Insurance (CNHI)
- Develop asset management guidelines and standards (e.g., maintenance schedule, safety procedures) in alignment with Riyadh First Health Cluster and Health Holding Company standards that go beyond the national regulations & standards
- Assess, tag and evaluate current infrastructure (facilities, equipment) and develop a capital plan to renovate them to the desired standards
- Execute asset migration and capital plan
- Establish Value Based Contracting

### **6. Build an effective ecosystem through robust governance and risk management.**

**ACO Domain: Leadership and Governance, Demand and capacity, Corporate Services**

### Strategic Initiatives:



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### Initiatives for this goal:

- Develop Assessment Plan to Ensure Cluster Readiness to Meet Gate 3 and 4 Requirement
- Identify alliances and collaboration opportunities with the private sector in alignment with Riyadh First Health Cluster and Health Holding Company.
- Develop and Implement Standardized Organization Design to Meet Current Transformational & Future Growth Needs Across Cluster.
- Plan and activate CoEs (Center of Excellence) in line with the new operating and governance model.
- Establish risk management governance model in align with Health Holding Company and Riyadh First Health Cluster.
- Implement Health Holding Company standards and guidelines (e.g., Human Resources policies, financial policies) under the guidance of Riyadh First Health Cluster.
- Implement Facility Accreditation Program Across Riyadh First Health Cluster to Ensure Safety and High Standard Practices.

## IAFH STRATEGIC KPIs

### GOAL NO.1: Pro-actively manage the population's health through engagement & stakeholder collaboration.

1. Antenatal Low cases in IAFH
2. Antenatal High Risk cases in IAFH
3. % of Population with controlled HbA1C
4. % of Population with Controlled BP
5. Home Health Care Visits
6. Total Number of Requested Home Care Services
7. Percentage of patients accepted in HHC services
8. Total Referral to and from PHCs



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9. Number of case managers
10. Number of beneficiary in Case managers
11. Outpatient visits
12. Waiting time 3rd available appointment days
13. OPD No show rate
14. % ED Non Urgent Cases
15. % of OPD new patients

**GOAL NO.2: Implement a patient- centric & innovative model of care alongside globally-renowned Centers of Excellence.**

1. Number of ED Visits
2. % ED Door to Disposition within 4 hours
3. Inpatient Bed Occupancy Rate
4. AICU Bed Occupancy Rate
5. Overall Bed Occupancy Rate
6. Overall ALOS
7. Critical Care ALOS
8. IP weekend discharge
9. % Long Stay Patients
10. IP % seen 1st day
11. OR Utilization Rate
12. Waiting Time for Elective Surgeries
13. ED STAT (HEMATOLOGY, CHEMISTRY)
14. INPATIENT STAT (HEMATOLOGY, CHEMISTRY)
15. INPATIENT ROUTINE (HEMATOLOGY, CHEMISTRY)
16. % of Routine Results reported within 4 hours



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17. RAD: IP Order to scan
18. RAD: IP Scan to Release
19. RAD: OPD Order to Scan
20. RAD: OPD Scan to Release
21. RAD: Machine Utilization (CT, MRI, US)
22. Ihala accepted Referrals (From R1)
23. Ihala accepted Referrals (Outside R1)
24. Ihala accepted Referrals (From KSMC)
25. Total accepted referrals
26. Total Referral sent to other facilities
27. Lifesaving cases accepted
28. Total number of Virtual Visits
29. PHAP Implementation
30. CLABSI
31. CAUTI
32. SSI
33. VAE
34. VTE RAM Compliance
35. Appropriate VTE Scoring
36. Appropriate VTE Prophylaxis
37. Incidence of Hospital Associate VTE
38. Percentage of STEMI Offered Primary PPCI
39. Percentage of Reperfusion Therapy
40. Myocardial Infarction Mortality Rate
41. Sepsis Overall Bundle Compliance



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- 42. Sepsis Mortality Rate
- 43. Stroke Mortality Rate
- 44. Community Acquired Pneumonia Mortality Rate
- 45. Crude Mortality Rate
- 46. Neonatal Mortality Rate
- 47. Maternal Mortality Rate
- 48. Standardized Mortality Rate
- 49. Patient Pressure Ulcer
- 50. Patient Falls Rate
- 51. Readmission to ICU within 48hours
- 52. Sentinel Events and Reportable Events
- 53. Medication Safety
- 54. Medication Errors Reports
- 55. Hospital Readmission
- 56. Bed Turnover
- 57. Bed Occupancy Rate
- 58. Case Manager services
- 59. Colorectal Cancer Screening in IAFH
- 60. Colonoscopy in IAFH
- 61. Breast Cancer Screening
- 62. ED Satisfaction Rate
- 63. Inpatient Satisfaction Rate
- 64. OPD Satisfaction Rate
- 65. Average Patient Satisfaction
- 66. 937 Complaints: General Indicators



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- 67. 937 Complaints: Closed Calls
- 68. 937 Complaints: % of Patients Satisfaction Upon Closing
- 69. UCC Visits
- 70. Total Cases managed in One Stop Clinic

### GOAL NO.3: Invest in developing a skilled & engaged workforce in an attractive working environment.

1. Number of new Nurses Hired
2. % of Staff Exit Interview
3. Total number of Staff rewarding activities conducted
4. Percentage of nurses with Bachelor's degree
5. IAFH Employee Attrition Rate
6. IAFH BLS and ACLS Training Center Beneficiaries
7. IAFH Spend for Training and Development
8. IAFH Training Programs
9. IAFH departments with external Trainees from Saudi Council For Health Specialist
10. Number of Scholarship Educational Fund for Academic Development (EFAD) Beneficiaries
11. IAFH Accredited Training Programs
12. Budget spend for training
13. Staff turnover
14. Transferred Staff Percentage
15. Staff Satisfaction Rate
16. % of Employees in the Top Percentile
17. Staff Repurposing
18. Privileging and Credentialing
19. Occupational Clinic Performance: % of File Staff completion



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20. Percentage of staff with mandatory certificates (BLS, ACLS, NRP, PALS, ATLS)

#### **GOAL NO.4: Deploy an advanced digital ecosystem to manage real-time information and analytics.**

1. IAFH Enterprise Planning Implementation
2. Unified data warehouse
3. Coding (Total number of Discharge files, Total number of reviewed patient medical record to assess the compliments of the file, Total number of coded files, Total number of no coded files,
4. Total number of incomplete files
5. Watheeq System Utilization

#### **GOAL NO.5: Achieve sustainable operational and capital structures**

1. Financial capabilities
2. RCM implementation
3. Total Revenues (Cash and insurance)
4. Paid treatment complaints
5. Operational Expenditures
6. Cost of supplies
7. Secure budget
8. Efficiency
9. Debts
10. Revenue from training
11. Budget spend for training
12. Budget variance Rate
13. Budget Utilization

#### **GOAL NO.6: Build an effective ecosystem through robust governance and risk management**

1. Percentage of Compliance of Reporting Risk Register



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2. Total number of Risks
3. Total number of Risk Per Departments
4. Total number of Risk Per Category
5. Total number of Risk Per Level
6. Total number of Risk Per Responses
7. Total number of Risk Per Status
8. ESR self-assessment
9. CBAHI midterm assessment
10. Patient Safety KPIs
11. Total number of Leadership Rounds Performed
12. % Critical Positions Have Succession Plan

## RISK MANAGEMENT

As part of IAFH strategic planning process for 2025–2030, the organization has identified and assessed key strategic risks that may impact the delivery of high-quality care, financial sustainability, and achievement of strategic goals. The hospital is committed to proactively managing these risks through structured mitigation strategies and ongoing monitoring.

S.no	Description of Risk	Likelihood	Impact	Mitigation
1.	Lack of integration between health information systems may lead to incomplete or unreliable population health data.	High	High	Establish regular audits for data accuracy and completeness, complemented by staff training in maintaining data integrity and managing population health registries.



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2.	Engagement challenges among target populations stemming from cultural and linguistic diversity	High	High	Develop and deliver culturally responsive health education initiatives to engage diverse communities.
3.	Stakeholder resistance to digital transformation driven by concerns over workflow disruption, increased complexity, and potential impact on existing roles	Medium	High	Implement change management programs with regular staff engagement  Provide continues training and support.
4.	Risk of compromised data confidentiality and security due to non-compliance with established privacy practices and standards	High	High	Implement robust cybersecurity protocols, including firewalls and encryption, alongside regular security assessments.
5.	System downtime and technical failures arising from malfunctions or failures of critical physical infrastructure components-including servers, storage devices, and networking equipment-pose significant risks to operational continuity and service availability	Low	High	Establish a robust IT support system with rapid response protocols.  Implement regular system updates and preventive maintenance

### Risk Monitoring and Review:



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- Monthly Risk Review will be held by the Quality and Patient Safety Committee
- Quarterly Risk Review will be held by the Hospital Executive Committee
- Risks will be re-evaluated annually as part of the Strategic Plan Review

## EXPECTED STRATEGIC OUTCOME

1. Higher levels of patient care and experience.
2. Enhanced patient care and overall health within the community
3. Increased coordination among stakeholders and healthcare partners
4. Strong Digitalized system network integrated with other RI facilities with better data access.
5. Higher performance and productivity.
6. Happy and satisfied staff.

## APPROVALS:

NO.	POSITION	NAME	SIGNATURE	DATE
Prepared By:				
1	Quality Coordinator	Ms. Yoania Castillo		06/01/2025 08:56
2	Quality Coordinator	Ms. Reeja Ebeneson		06/01/2025 09:13
3	Quality Coordinator	Ms. Amira Quilapio		06/01/2025 10:14
4	Quality Coordinator	Ms. Fatima Sakaluran		06/01/2025 11:54
5	Quality Coordinator	Ms. Angeli Puno		06/01/2025 12:56
6	Quality and Patient Safety Director	Dr. Ratib Dawood		06/01/2025 14:10



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### Reviewed By:

1	Director of Infection Prevention and Control	Mr. Raed Mohammed		30/01/2025 14:23
2	HDA for Nursing Affairs	Ms. Maryam Harthi		12/02/2025 10:09
3	Hospital Director Assistant For Human Resource	Mr. Nabil Madkhali		27/02/2025 14:50
4	Hospital Director Assistant of Operation and Engineering Affairs	Mr. Faisal Altamimi		17/03/2025 13:49
5	Hospital Director Assistant for Supply Chain Management	Mr. Saad Alzeer		01/04/2025 14:05
6	Hospital Director Assistant for Financial and Administrative Affairs	Mr. Thamer Al Thamir		21/04/2025 10:26
7	Medical Director	Dr. Khaled Alsunid		04/05/2025 13:22
8	Hospital Director Assistant for Medical Affairs	Dr. Abdullah Alzayed		20/05/2025 13:36

### Approved By:

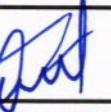
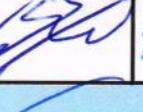
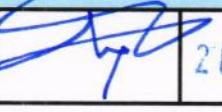
1	Hospital Director	Dr. Ateeq Al Garni		28/05/2025 08:34
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Effective Date : 11/06/2025



## IAFH STRATEGIC PLAN 2025

### APPROVALS:

No	Position	Name	Signature	Date
<b>Reviewed By R1 Zone:</b>				
1	Riyadh Health Zone CEO	Dr. Mohammed Almalki		28 MAY 2025
2	R1 GRC	Dr. Naifah Hamoudah		28 MAY 2025
3	R1 VP for Healthcare Delivery	Dr. Faisal Alaklabi		28 MAY 2025
4	R1 VP for Finance	Mr. Fahad Al Khuraiji		28 MAY 2025
5	R1 Strategic and Transformation Vice President	Dr. Hasan Areabi		28 MAY 2025
<b>Approved By:</b>				
1	Riyadh First Health Cluster CEO	Dr. Saleh Abdullah Altamimi		28 MAY 2025



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## POLICY HISTORY

Version	Title	Issued On	Review On	Effective On
PLAN.IAFH.002 v.2	IAFH STRATEGIC PLAN 2025 - 2030	06/01/2025 00:00	04/01/2030 00:00	11/06/2025 14:34

NAME	POSITION	EMAIL	TIME	DATE	STATUS
<b>PREPARED BY</b>					
Ms. Yoania Castillo	Quality Coordinator	yccastillo@moh.gov.sa	08:56	06/01/2025	Approved
Ms. Reeja Ebeneson	Quality Coordinator	rebeneson@moh.gov.sa	09:13	06/01/2025	Approved
Ms. Amira Quilapio	Quality Coordinator	aquilapio@moh.gov.sa	10:14	06/01/2025	Approved
Ms. Fatima Sakaluran	Quality Coordinator	frsakaluran@moh.gov.sa	11:54	06/01/2025	Approved
Ms. Angeli Puno	Quality Coordinator	arsantos@moh.gov.sa	12:56	06/01/2025	Approved
Dr. Ratib Dawood	Quality and Patient Safety Director	radawood@moh.gov.sa	14:10	06/01/2025	Approved
<b>REVIEWED BY</b>					
Mr. Raed Mohammed	Director of Infection Prevention and Control	ralbusayyis@moh.gov.sa	14:23	30/01/2025	Approved
Ms. Maryam Harthi	HDA for Nursing Affairs	mamharthi@moh.gov.sa	10:09	12/02/2025	Approved
Mr. Nabil Madkhali	Hospital Director Assistant For Human Resource	nhmadkhali@moh.gov.sa	14:50	27/02/2025	Approved
Mr. Faisal Altamimi	Hospital Director Assistant of Operation and Engineering Affairs	faltamimi2@moh.gov.sa	13:49	17/03/2025	Approved
Mr. Saad Alzeer	Hospital Director Assistant for Supply Chain Management	saalzeer@moh.gov.sa	14:05	01/04/2025	Approved
Mr. Thamer Al Thamir	Hospital Director Assistant for Financial and Administrative Affairs	talthamir@moh.gov.sa	10:26	21/04/2025	Approved
Dr. Khaled Alsunidy	Medical Director	kalsunidy@moh.gov.sa	13:22	04/05/2025	Approved
Dr. Abdullah Alzayedi	Hospital Director Assistant for Medical Affairs	aalzayedi@moh.gov.sa	13:36	20/05/2025	Approved
<b>APPROVED BY</b>					
Dr. Ateeq Al Garni	Hospital Director	aal-garni@moh.gov.sa	08:34	28/05/2025	Approved

Version	Title	Issued On	Review On	Effective On
PLAN.IAFH.002 v.1	IAFH STRATEGIC PLAN 2022 - 2025	02/01/2022 00:00	01/01/2025 00:00	23/01/2022 13:21

NAME	POSITION	EMAIL	TIME	DATE	STATUS
<b>PREPARED BY</b>					
Ms. Angeli Puno	Quality Coordinator	arsantos@moh.gov.sa			Approved
<b>REVIEWED BY</b>					
Dr. Ratib Dawood	Quality Director	radawood@moh.gov.sa			Approved
<b>APPROVED BY</b>					
Dr. Ateeq Al Garni	Hospital Director	aal-garni@moh.gov.sa			Approved

