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Research Article

Governance And Its Impact On Improving The Quality Of Health Services In Public Hospitals Case Study: The Specialized Health Institution - Hamdiken Belkacem - Cancer Control Center, Batna

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ABSTRACT

This research aims to demonstrate the impact of governance implementation on improving the quality of health services in public hospitals. To achieve this, a field study was conducted at the specialized health institution - Hamdiken Belkacem - Cancer Control Center, Batna. The study targeted a sample of employees from the medical, paramedical, and administrative staff. The research employed a descriptive-analytical method and relied on a questionnaire as a data collection tool. Data was processed and analyzed using SPSS V25 software. The study concluded with several key findings, including:
- The specialized health institution - Hamdiken Belkacem - Cancer Control Center, Batna is moderately inclined towards implementing governance.
- The specialized health institution - Hamdiken Belkacem - Cancer Control Center, Batna provides high-quality health services from the perspective of its employees.

Keywords: Governance, Quality of Health Services, Improving Quality of Health Services, Hospitals, Algerian Public Health Institutions.

Introduction

Public health institutions are characterized as non-profit service organizations that aim to provide high-quality health services in an ever-changing technological environment. These institutions are among the most complex due to the type of technology used and the general human composition, leading to numerous organizational, technical, and material obstacles that hinder their operation. Citizens often complain about the poor delivery of public services across various sectors and the lack of quality, indicating that public facilities suffer from severe problems at multiple levels, particularly in management.

The pressures on all health institutions have unprecedentedly increased in an era marked by the spread of chronic and epidemic diseases, exacerbated by societal growth. Public hospitals, in particular, bear the brunt of these increasing pressures. Governance, a modern concept that has gained significant attention in recent years, is used to achieve quality and efficiency in performance. In Algeria, public authorities primarily focus on improving the quality of health services through material support for health infrastructures, whether by establishing new structures or updating medical equipment. However, there is little attention given to updating and aligning health and hospital management to create a coherent policy for managing these health structures and equipment.

Therefore, this research attempts to address governance and its principles and values adopted by public hospitals to improve the quality of health services. Within this framework, the research problem is encapsulated in the following main question:

What is the impact of governance implementation on improving the quality of health services in the Specialized Health Institution - Cancer Control Center, Batna?

To delve deeper into this primary question, several sub-questions will be addressed:

1. To what extent is the studied health institution inclined towards implementing governance principles?
2. What is the level of quality of health services in the studied health institution?

3. Is there a statistically significant impact at the significance level of $\alpha \leq 0.05$ for the implementation of governance on improving the quality of health services in the studied health institution?

Theoretical Framework of the Study

I. Governance: Definition, Emergence, and Evolution

The concept of governance is relatively new in the scientific arena, formulated by international institutions in the last decade of the twentieth century as an innovative idea to manage human affairs in a way that ensures a dignified life on economic, political, and social levels. Based on this foundation, we aim to understand the concept of governance.

Definition of Governance

Governance, as a contemporary concept, has led most thinkers and scholars to different interpretations, without a unified definition. According to an article published in the electronic journal "Al-Hiwar Al-Mutamaddin" in issue (2817) titled "The Role of Good Local Governance in Managing Local Affairs in Morocco" by Moroccan researcher Mohsen Al-Nadawi, governance, based on the fields in which it has been employed, is defined as follows (Houchat, 2018, p. 19):

- Restructuring the relationship among all stakeholders based on the concept of contract, participation, and consensus.
- A new approach, vision, and philosophy for change with economic, financial, social, and political dimensions, considered the most effective method for managing public and societal affairs.
- Governance as a new model for power management and political and social organization, representing a new vision for the relationship between the state and society. It thus presents a new approach to managing change in public and private facilities, as well as in civil society. It symbolizes the mobilization and rational investment of resources to ensure effective management conditions. In this context, the researcher emphasized the necessity of elements such as safeguarding freedom, expanding choices for citizens, enhancing participation, ensuring effective accountability, and complete transparency under the separation of powers, the rule of law, and the independence of the adjudicating body.

Philip Escaros* defined governance as "a means to balance authority commands and available resources through two approaches: strict adherence to management science principles (formal) alongside considering personal skills and individual proficiency in the art of applying principles and foundations (informal and colloquial). Together, science and art work to establish a triad of political, institutional, and professional values" (Badie, 2016, p. 28).

2. The Emergence of the Concept of Governance

The term "governance" originates from an ancient Greek word describing a captain's skill and ability to steer a ship through waves, storms, and hurricanes, while upholding noble values, ethics, and honorable behavior to safeguard the lives and properties of the passengers. When the captain successfully brings the ship to safety, maritime experts would refer to him as a "well-governed captain" (Al-Buqami, 2021, p. 602).

Although the modern emergence of the governance system is linked to financial crises and collapses, the researcher Mariam Al-Buqami's review of numerous books revealed no indication of the term "governance" being used during the era of the Prophet Muhammad (peace be upon him) or the Rightly Guided Caliphs. However, the linguistic root of the word "ح-ك-م" in Arabic reveals multiple meanings that align with the concept of governance. The principles and features of governance in Islam can be observed through the foundational relationship between the ruler and the governed.

3. Principles of Governance

Studies agree that there are six fundamental principles of governance (Al-Buqami, 2021, p. 306). This section will clarify these principles as follows:

A. Participation and Accountability

Governance involves several principles that any entity committed to governance must adhere to and implement in detail. Participation and accountability are among these principles.

B. Legitimacy, Efficiency, and Effectiveness

Legitimacy is represented by adherence to the rule of law, justice, equal opportunities, and citizens' acceptance of those in power (Hamouta, p. 604). Efficiency refers to the relationship between means and outcomes, while effectiveness is the relationship between outcomes and objectives, both of which apply to governance.

C. Responsiveness and Transparency

Responsiveness is the endeavor of governance bodies to serve all parties and respond to their demands without marginalizing anyone (Al-Buqimi, p. 604). Transparency refers to the freedom of access to information and its disclosure.

II. Quality of Health Services: Definition, Importance, and Objectives

1. Definition of Health Service Quality

A service is "an intangible activity that provides a benefit and is not necessarily associated with the sale of a good or another service." It is also "an activity or benefit that can be provided to another party, fundamentally intangible, non-transferable in ownership, and sometimes linked to a good" (Al-Otaibi, 2019, p. 196).
Kotler and Armstrong define a service as: "An activity or benefit that one party (the producer) can offer to another party (the customer) to fulfill an unmet need, without resulting in the transfer of ownership from the producer to the customer" (Guechi, 2020, p. 55).

- **Health Services**:

Health services encompass the efforts made by every individual within the health system aimed at protecting and improving health, whether in the context of individual or public health, or through a multi-sectoral approach. Health services are also defined as an integrated mix of tangible and intangible elements that satisfy and fulfill patient needs, thereby aiding in their recovery (Messaoudi, 2020, p. 204).

- **Quality**:

The definitions of quality provided by various authors and scholars vary widely, as seen in the following examples (Shalabi, 2005, p. 3):

- Johnson defines quality as the ability to meet consumer desires in a way that aligns with their expectations, achieving complete satisfaction with the product or service provided.
- Rush sees quality as a product attribute, including its size, shape, and composition. Specifically, it is the characteristic that determines the product's market value and the extent to which it performs the function for which it was designed.
- Juran defines quality as "fitness for use," while the American Society for Quality Control defines it as "the totality of features and characteristics of a product or service that bear on its ability to satisfy given needs."

- **Quality of Health Services:**

Quality of health services refers to providing health services that meet the needs of patients and the community, in alignment with professional ethics, modern medical sciences, and available resources while considering the circumstances of the beneficiaries (Bachir, p. 186). This is within a specific economic framework, balancing risks with benefits. Some prevalent definitions of health service quality include (Guechi, p. 63):

- Donabedian defines quality of health services as "the application of medical science and technology to achieve the maximum benefit for public health without increasing the risk. Thus, the degree of quality determines the best balance between risks and benefits."
- The World Health Organization defines the quality of health services as "the endeavor that ensures the consistency of diagnostic and treatment processes for each patient to achieve the best health outcomes in line with modern medical sciences, at the least cost and risk, and with good relations that gain patient satisfaction within the health institution."
- The American Institute of Medicine defines the quality of health services as "the degree of increase in desired health outcomes from health services provided to individuals and populations, consistent with current professional knowledge" (Bachir, p. 186).
- Quality of health services is also defined as "the extent to which the health organization achieves safety for both service providers and recipients" (Mehdaoui, 2017, p. 238).

2. Importance of Quality in Health Services

The importance of quality lies in achieving the overarching goal of its establishment, which involves documenting and preparing numerous programs and effective mechanisms to identify problems and find optimal solutions. Additionally, it involves anticipating potential future issues that could negatively impact the services provided to patients and the desired outcomes. The importance is realized by making the benefits of quality clear and tangible to the patient through the following (Kaci, 2019, p. 617):

- Focusing on patients' needs to meet their requirements;
- Achieving actual performance quality across all functional sites, not limited to services alone;
- Implementing a series of necessary actions to accomplish quality performance;
- Continuously examining all processes and eliminating secondary activities in the production and delivery of services to the patient;
- Ensuring the continuous improvement of projects and developing performance metrics.

3. Objectives of Quality in Health Services

Since health services aim to maintain health, providing these services with high quality achieves the following objectives (Atiya, p. 6):

- Ensuring the mental and physical health of beneficiaries;

- Providing high-quality health services that achieve patient satisfaction and loyalty to the health organization, which subsequently becomes an effective means of communication for this organization;
- Obtaining feedback and impressions from patients and measuring their satisfaction with health services, which is an important tool in administrative research, healthcare planning, and policy development;
- Developing and improving communication channels between healthcare providers and beneficiaries;
- Enabling health systems and organizations to perform their tasks efficiently and effectively;
- After achieving the desired level of health services provided to patients, the primary goal of implementing quality, thereby achieving better productivity levels.

Applied Aspect of the Study:

First - The Specialized Hospital Institution - Hamdiken Belkacem - Batna Cancer Control Center: Definition and Establishment

The Specialized Hospital Institution - Hamdiken Belkacem - Batna Cancer Control Center is one of the most important public health institutions in Batna province. Administratively known as CLCC (Centre de lutte contre le cancer), it is commonly referred to as CAC (Centre anti cancer). This institution has a regional nature in receiving citizens seeking health services, thus serving residents of Batna province and those from other neighboring or non-neighboring provinces. The center provides diagnostic and therapeutic services for various cancerous tumors, including chemotherapy (chimiothérapie) and radiotherapy (radiothérapie), as well as various surgical interventions. However, it still lacks nuclear treatment and stem cell transplantation services.
The Regional Cancer Control Center of Batna was established by Executive Decree No. 11-128 dated 17 Rabi' al-Thani 1432 corresponding to March 22, 2011, which supplements the list of specialized hospital institutions attached to Executive Decree No. 97-465 dated 2 Sha'ban 1418 corresponding to December 2, 1997, which defines the rules for the establishment, organization, and operation of specialized hospital institutions (Official Gazette, 2011). Thus, the Batna Regional Cancer Control Center is subject to the provisions of Executive Decree No. 97-465 defining the rules for the establishment, organization, and operation of specialized hospital institutions. Consequently, the Batna Regional Cancer Control Center is a specialized public hospital institution with administrative nature, enjoying legal personality and financial independence. It is placed under the supervision of the Governor of Batna province, managed by a Board of Directors and operated by a Director, and has a consultative body called the "Medical Council" (Executive Decree No. 97-465).
The Batna Regional Cancer Control Center is classified within category "A" under Article 1 of the Joint Ministerial Decree dated 1 Jumada al-Awwal 1435 corresponding to March 3, 2014, which supplements the Joint Ministerial Decree dated 26 Jumada al-Awwal 1419 corresponding to September 17, 1998, which defines the criteria for classifying health sectors and specialized hospital institutions (Joint Ministerial Decree, 2014). The inclusion of the Batna Regional Cancer Control Center within category "A" means that it has undergone classification criteria based on the number of beds, regional and national nature, university and non-university status, in addition to the number of departments, as stipulated in Article 2 of the Joint Ministerial Decree dated 26 Jumada al-Awwal 1419 corresponding to September 17, 1998, which defines the criteria for classifying health sectors and specialized hospital institutions (Joint Ministerial Decree, 1998).

1. Research Community

The overall research community consists of all public hospitals in Algeria. However, the field study was applied to the Specialized Hospital Institution Hamdiken Belkacem - Batna Cancer Control Center, making this hospital the specific community under investigation.
The total identifiable population for this research consists of all employees at the Specialized Hospital Institution Hamdiken Belkacem - Batna Cancer Control Center, amounting to 559 employees.

Field Study Sample

Based on the identifiable community of 559 employees at the Specialized Hospital Institution Hamdiken Belkacem - Batna Cancer Control Center, a random sampling method was used to determine the study sample. To calculate the appropriate sample size, an online tool providing sample size calculation services was used. The sample size was determined to be 87 individuals, with a margin of error of 9.72% and an assumed proportion of 50% for the presence or absence of the studied characteristic (Raosoft, 2021).

2. Internal Consistency Validity of the Questionnaire

- Internal Consistency Validity for the Quality of Health Services Dimension

Table 1: Pearson Correlation Coefficients between Each Item of the Quality of Health Services Dimension and the Total Score of the Associated Criterion

							Quality of Health Services Criteria		
	Reliability		Responsiveness		Assurance		Empathy		Tangibility
Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient
01	0.813**	04	0.852**	07	0.745**	10	0.872**	13	0.604**
02	0.807**	05	0.869**	08	0.761**	11	0.873**	14	0.791**
03	0.694**	06	0.710**	09	0.623**	12	0.747**	15	0.814**
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The significance level for all items in the Quality of Health Services dimension was 0.000

Source: Researchers' analysis based on SPSS V25 results.
**Correlation coefficients are significant at the 0.01 level.

The significance level for the correlation of all items was 0.000, which is less than the significance level of 0.01. This indicates that all items in the Health Services Quality dimension are linearly correlated with their respective criteria, with correlation coefficients ranging from 0.604 to 0.873, indicating moderate to strong correlations. Hence, all items support their respective criteria.

Internal Consistency Validity for the Governance Dimension

Table 2: Pearson Correlation Coefficients between Each Item of the Governance Dimension and the Total Score of the Associated Principle

Governance Criteria									
Accountability		Transparency		Participation		Efficiency and Effectiveness		Empowerment	
Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient
17	0.585**	20	0.783**	23	0.703**	26	0.822**	29	0.808**
18	0.807**	21	0.865**	24	0.497**	27	0.774**	30	0.741**
19	0.731**	22	0.865**	25	0.644**	28	0.685**	31	0.773**
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Governance Criteria									
Laws and Regulations		Integrity		Sustainability		Justice and Equality		Simplicity and Clarity	
Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient	Item	Correlation Coefficient
33	0.850**	36	0.838**	39	0.786**	42	0.727**	46	0.866**
34	0.930**	37	0.915**	40	0.841**	43	0.847**	47	0.900**
35	0.903**	38	0.896**	41	0.831**	44	0.899**	48	0.720**
-	----		----		----	45	0.866**	--	-----
The significance level for all items in the Governance dimension was 0.000									

Source: Researchers' analysis based on SPSS V25 results.
**Correlation coefficients are significant at the 0.01 level.

The significance level for the correlation of all items was 0.000, which is less than the significance level of 0.01. This indicates that all items in the Governance dimension are linearly correlated with their respective principles, with correlation coefficients ranging from 0.585 to 0.93, indicating moderate to very strong correlations. Hence, all items support their respective principles.

Third: Construct Validity of the Questionnaire

- Construct Validity for the Health Services Quality Dimension

Table 3: Pearson Correlation Coefficients between Health Services Quality Criteria and the Total Score of the Dimension

	Reliability	Responsiveness	Assurance	Empathy	Tangibles
Correlation Coefficient	0.609**	0.856**	0.642**	0.783**	0.772**
	The significance level for all health services quality criteria was 0.000				

Source: Researchers' analysis based on SPSS V25 results.
**Correlation coefficients are significant at the 0.01 level.

The significance level for all health services quality criteria was 0.000which is less than the significance level of 0.01. This indicates that each criterion for health services quality is linearly correlated with its respective dimension, with correlation coefficients ranging from 0.609 to 0.856, signifying moderate to strong correlations. Thus, all criteria effectively support their corresponding dimension.

- Construct Validity for the Governance Dimension

Table 4: Pearson Correlation Coefficients between Governance Dimensions and the Total Score of the Dimension

	Accountability	Transparency	Participation	Efficiency & Effectiveness	Empowerment
Correlation Coefficient	0.523**	0.707**	0.606**	0.793**	0.864**
	Laws and Regulations	Integrity	Sustainability	Justice and Equality	Simplicity and Clarity
Correlation Coefficient	0.791**	0.835**	0.761**	0.783**	0.761**
	The significance level for all governance principles was 0.000				

Source: Researchers' analysis based on SPSS V25 results.

**Correlation coefficients are significant at the 0.01 level.

The significance level for all governance principles was 0.000, which is less than the significance level of 0.01. This indicates that each principle of governance is linearly correlated with its respective dimension, with correlation coefficients ranging from 0.532 to 0.856, signifying moderate to strong correlations. Thus, all principles effectively support their corresponding dimension.

2. Reliability of the Questionnaire

Reliability of a questionnaire refers to its ability to produce consistent results when administered multiple times to the same sample under identical conditions. It assesses the extent to which the measure yields similar readings each time it is used. To ensure the reliability of the study's questionnaire, the Cronbach's Alpha coefficient was employed. The results are detailed in the following table:

Table 5: Cronbach's Alpha Coefficients for Questionnaire Reliability

Questionnaire Dimensions		Cronbach's Alpha
Health Services Quality	Reliability	0.662
	Responsiveness	0.732
	Assurance	0.500
	Empathy	0.779
	Tangibles	0.698
Overall Reliability for Health Services Quality		**0.859**
Governance	Accountability	0.517
	Transparency	0.780
	Participation	0.174
	Efficiency and Effectiveness	0.638
	Empowerment	0.768
	Laws and Regulations	0.875
	Integrity	0.856
	Sustainability	0.754
	Justice and Equality	0.849
	Simplicity and Clarity	0.778
Overall Reliability for Governance		**0.944**
Overall Reliability of the Questionnaire		**0.947**

Source: Prepared by the researchers based on SPSS V25 results.

The Cronbach's Alpha coefficients for the study dimensions (Health Services Quality and Governance) ranged from 0.856 to 0.944, indicating strong to very strong reliability. This demonstrates that the questionnaire exhibits substantial reliability.

4. Measurement of the Hospital's Commitment to Implementing Governance Principles

The first question asks: "To what extent does the hospital under study apply governance principles?" To answer this, the means and standard deviations of the responses from the study sample regarding the Governance dimension were calculated. The results are presented in the following table. The means were classified into five categories, each representing a benchmark for evaluation: 1 to 1.79 indicates very low; 1.8 to 2.59 indicates low; 2.6 to 3.39 indicates medium; 3.4 to 4.19 indicates high; and 4.20 to 5 indicates very high. (Statistical Thinking, 2021).

Table 6: Means and Standard Deviations of Governance Principles at the Cancer Center in Batna

			Governance Dimension	
Principles	Mean	Standard Deviation	Evaluation Degree	Rank
Accountability	3.34	0.74	Medium	3
Transparency	3.09	0.93	Medium	7
Participation	3.59	0.58	High	1
Efficiency & Effectiveness	3.13	0.86	Medium	6
Empowerment	2.92	0.87	Medium	8
Laws and Regulations	2.48	1.07	Low	10
Integrity	3.13	1.06	Medium	5
Sustainability	3.48	0.89	High	2
Justice and Equality	2.82	1.01	Medium	9
Simplicity and Clarity	3.15	0.93	Medium	4
Overall Governance Dimension	3.10	0.68	Medium	---

Source: Prepared by the researchers based on the analysis of the questionnaire data using SPSS V25.

The results indicate that the overall level of implementing governance principles at the Cancer Center in Batna, from the employees' perspective, is medium, with a mean of 3.10 and a standard deviation of 0.68. This

suggests that the employees of the Cancer Center in Batna moderately agree that governance principles are being applied at the specialized hospital.
In summary, it can be stated that the Cancer Center in Batna tends towards a medium level of implementing governance principles.

5. Measurement of the Level of Healthcare Service Quality at the Hospital under Study

The second question posed is: "What is the level of healthcare service quality at the hospital under study?" To answer this, means and standard deviations of the responses from the study sample regarding the Healthcare Service Quality dimension were calculated. The results are presented in the following table. The means were classified into five categories, each representing a benchmark for evaluation: 1 to 1.79 indicates very low; 1.8 to 2.59 indicates low; 2.6 to 3.39 indicates medium; 3.4 to 4.19 indicates high; and 4.20 to 5 indicates very high (Statistical Thinking, 2021).

Table 7: Means and Standard Deviations of Healthcare Service Quality Criteria at the Cancer Center in Batna

			Healthcare Service Quality	
Criterion	Mean	Standard Deviation	Evaluation Degree	Rank
Reliability	3.45	0.79	High	5
Responsiveness	3.51	0.84	High	4
Assurance	3.90	0.63	High	2
Empathy	3.88	0.80	High	3
Tangibility	3.97	0.77	High	1
Overall Healthcare Service Quality	3.76	0.57	High	---

Source: Prepared by the researchers based on the analysis of the questionnaire data using SPSS V25.

The results indicate that the overall level of healthcare service quality at the Cancer Center in Batna, from the employees' perspective, is high, with a mean of 3.76 and a standard deviation of 0.57. This suggests that the employees of the Cancer Center in Batna perceive that they provide high-quality healthcare services in line with the latest scientific and professional developments and high ethical standards. Additionally, it indicates that the employees believe the healthcare services they provide meet the established standards for healthcare quality.
In conclusion, it can be stated that the Cancer Center in Batna offers high-quality healthcare services.
Based on the previous results of measuring the hospital's commitment to applying governance principles and the level of healthcare service quality provided by the institution, the null hypothesis (H_0) is rejected, and the alternative hypothesis (H_1) is accepted, which states: "The hospital under study is assumed to apply governance principles and provide healthcare services of high quality."

6. Presentation and Analysis of Results Related to Answering the Third Question

This section presents the results of the statistical analysis of the questionnaire data concerning the governance and healthcare service quality dimensions. The analysis employs inferential statistical measures to test the second main hypothesis and its derived sub-hypotheses, and to answer the third question: "Is there a statistically significant effect at the $0.05 \geq \alpha$ level of governance implementation on improving the quality of healthcare services at the hospital under study?"
To address this question, simple linear regression analysis was conducted to verify the presence of a statistically significant impact of governance implementation on improving healthcare service quality at the hospital under study. The results are illustrated in the following table:
Table 8: Results of Simple Linear Regression Analysis to Measure the Impact of Governance Implementation on Improving Healthcare Service Quality at the Cancer Center in Batna

Independent Variable	Regression Coefficient (β)	T Value	Statistical Significance (Sig)
Constant (β_0)	2.286	9.680	0.000
Governance	0.476	6.397	0.000
F Value			40.922
Significance of F			0.000
Simple Correlation (R)			0.570
Coefficient of Determination (R^2)			0.325
Significance of R			0.000

Source: Prepared by the researchers based on the analysis of the questionnaire data using SPSS V25.

The results from the table indicate the following:
The validity of the model is confirmed by the F value of 40.922 with a significance level of 0.000, which is less than the 0.05 significance level. Therefore, the simple linear regression model is appropriate for testing the effect of governance on improving healthcare service quality.

The simple correlation coefficient (R) is 0.570 with a significance level of 0.000, indicating a moderate positive relationship between governance and the improvement of healthcare service quality. This suggests that implementing governance at the Cancer Center in Batna is likely to lead to a relative improvement in healthcare service quality.
The regression coefficient for governance is significant, with a T value of 6.397 and a significance level of 0.000, which is less than the 0.05 significance level. This confirms that there is a statistically significant effect of governance implementation on improving healthcare service quality at the hospital under study.
In conclusion, the results confirm that there is a statistically significant effect at the 0.05 level of governance implementation on improving the quality of healthcare services at the hospital under study.

Conclusion

The research has yielded several key findings, which can be summarized as follows:
- The culture of governance within the studied healthcare institution is moderately prevalent. Employees face ambiguity in understanding its principles and lack empowerment elements to activate these principles.
- The overall level of orientation towards applying governance principles in the studied healthcare institution is moderate. This is due to organizational and leadership challenges characterized by authoritarian features within centralized bureaucratic frameworks. The closer the work environment is to the institution's administration or the stronger the relationship with it, the more governance principles, especially non-material ones, tend to be neglected.

Recommendations

Based on the results obtained and observations of the working environment in the studied healthcare institution, several recommendations are proposed to enhance the application of governance and significantly improve the quality of healthcare services. These recommendations include:
- Moving away from an authoritarian model and adopting a democratic, decentralized approach in all medical and administrative operations.
- Implementing new public management strategies for managing public hospitals as a starting point and enabling element for activating governance principles. This approach provides a suitable material and organizational environment for governance, focusing on results rather than procedural compliance.
- Promoting the culture of governance by organizing national and local health meetings and workshops for healthcare administrations. These should clarify governance principles, practical application methods, and activation requirements, relying on experts in the field of governance.
- Leveraging experiences from health organizations in various countries in the field of governance to develop and implement an effective governance model aimed at improving the quality of healthcare services in public hospitals.

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