

HUMAN RESOURCE MANAGEMENT IN THE PRIVATE HOSPITALS OF ASSAM: FEW DIMENSIONS

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Abstract:

Like any other service industry, the health care industry too can become more effective by the proper utilization of the human resources. Traditionally in developing countries there was no culture of emphasizing more on the human resource part of the private hospitals. But in the recent past it has been realized that the budgets of the private hospitals put too much emphasis on mechanization and the construction of the hospitals by keeping its H R neglected. By apprehending the fact the private hospitals should emphasis more on the research of human resources and try to have some competitive advantage over its competitors. Proper management of human resources is vital to provide high quality health care services. This paper is based on the data taken from the private hospitals of Assam and on its basis certain solutions were also offered to solve the problems related to human resource management in the private hospitals.

Key Words: Human resource, private hospitals, training needs payments, leave rules and job satisfaction.

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Introduction:

In the present world, the Human Resource is considered as a capital to the organization because, by working upon on organization's material and money the human resources can create a difference for the organization. It happens more in case of a service industry like the hospitals. But managing the human resources in a hospital is not easy since here one has to deal with a set of employees who are highly knowledge workers and whose outcomes are intangible. At the same time customized service is another aspect of these knowledge workers. Hence it can be realized that in case of H R in hospitals, management has to do a lot to retain the spirit of the hospital employees high.

Literature Review:

S L Goel and R Kumar made inquiries about the complexities of modern hospital management system. They mentioned that the medical services are becoming costlier day by day. It also talked about the patients' knowledge regarding the ever changing medical services which are technologically advanced in nature.¹

Gupta observes that the public has become conscious of its rights in every walk of life and same is also true for medical care. Consumer Protection Act is there to give protection to customers. So every hospital administration is duty bound to know the lawful rights and responsibilities with respect to members of hospital staff, patients and visitors.²

B M Shakharkar writes, to deal with multiple groups of people working in hospitals with conflicting interests, the demand on top hospital administrators are almost unending. He must be a generalist and a specialist combine into one, capable of

¹ Goel, S.L. Kumar R. (2002). Management of Hospital in the 21st Century, Core Services, Vol. 1, New Delhi, Deep and Deep Publication.

² Gupta, A.K.. (2002). Challenge of Hospital Administration in 21st Century, in S L Goel, R Kumar (ed). Management of Hospital-Hospital Administration on the 21st century Vol. 2. New Delhi. Deep and Deep Publication.

understanding and interpreting medical, financial etc all aspects to deal with multiple groups with conflicting interests.³

According to R C Goel there are four causes of poor human resource management in hospitals. These are – indiscipline, high turnover, poor services by staff and low morale of its employees. To correct these points the hospitals need to give attention to the genuine grievances as are raised by patients and their attendants. It will reduce the costs, satisfy the patients and ultimately it will reduce the human mistakes and hence improvement in the human resource as a whole.⁴

Raman's article mainly discusses about the role that human resource can play in helping the community to know about the health care systems. He has given certain idea regarding educating the general people by the hospital H R concerning health related matters. Writer also showed the path how to evaluate the health education programmes.⁵

S L Goel feels since the health care organizations do not think about the manpower planning seriously, therefore the personnel policies start with defective outlines. Decisions are not perfect. His article seriously discusses about the gap between demand and supply time of the manpower availability, high training cost, migration of technical persons to highly paid jobs, difficulty to get good replacements, non existence of team work, good performance appraisal system, need for providing feedback are few to mention.⁶

Kabene et al state about the evidence of a single positive co-relation between the level of economic development in a country and its number of human resources for health

³ Shakharkar ,B.M.(1998). Principles of Hospital Administration and Planning,. New Delhi. Jaypee Brothers

⁴ Goel, R.C. (2006). Hospital Administration and Human Resource Management. New Delhi PHI Pvt. Ltd

⁵ Raman, A.V. (2002).Health Education and the Community. In S L Goel, R Kumar (ed) Management of Hospital vol. 3. New Delhi, Deep and Deep Publication

⁶ Goel, S.L.(2002). Manpower Planning. In S L Goel, R Kumar (ed) Management of Hospital vol. 4. New Delhi, Deep and Deep Publication

care services. Countries with higher gross domestic product (GDP) per capita spend more on health care than countries with lower GDP and they (developed countries) tend to have larger health care workforce.⁷

Regarding human resource related challenges Suriyawongpaisal said human resource for hospitals (HRH) is one of the most important and most expensive health resources. HRM is concerned with mobilization, motivation and capacity building of health personnel in order to achieve health goal. There are several challenges in HRM, namely, low motivation, ineffective staff utilization, low staff productivity, outdated and inappropriate skills/knowledge and overall misdistribution of Human Resource for health.⁸

C. Charles writes- In low income countries, private sector health care providers play a very significant role in service delivery. According to the writer, the poor people in such countries have spent a sizable portion of money on private health care facilities but the benefits that they are getting not up to the mark. Therefore the writer suggests the private sector health care should be monitored under national public health policies. The employees of the hospitals should be highly trained regarding chemicals, hazards, laboratory related facts, emergency handling and safely. He also talked about night shifts and shift rotations and the fatigue of the night duty people.⁹

Jha writes that the motivation of the hospital employees come from handsome salaries, welfare facilities, quality environment in workplace and living place plus friendly environment. A blending of these factors will make the employees very happy. Compensation is a strategic decision of linking up of financial incentives to the contribution of employees. Hence trade unions can play a great role. The

⁷ Kabene, S.M. Orchard, C. Howard, J. M. Soriano, M.A. Leduc, R. (2012). Importance of Human Resource Management in Health care: a global context. Retrived from: www.human-resoruces-health.com

⁸ Suriyawongpaisal, P. (2000). Potential Implications of Hospital Autonomy on Human Resource Management- A Thai Case study. Human Resource Development Journal Vol. 3 No. 3, 2000 retrieved from www.who.in/hrh/en/HRD

⁹ Charles, C. (2008). Hospital Human Resource Management. New Delhi. Anmol Publication Pvt. Ltd

paramedics' and nurses' motivational aspects were also highly emphasized on the write up.¹⁰

Shakharkar views it is certain that in the big hospitals to maintain so many things, need a professional public relations officer. Apart from these a good relations with the press is a must. Nursing staff plays the most important role in maintenance of public relations in the hospitals. For better public image the hospitals should involve the social organizations. He said warmth, concern, perception, sensitivity and compassion are integral to the art and business of healing and it can never be replaced by technology.¹¹

D C Mahanta wrote due to the perceived medical negligence sometimes the public start violence in health care institutions and doctors become the soft target of attack. It creates a horrible condition among the indoor patients undergoing treatment in the hospital. They are suddenly hit by unexpected shocks. The writer says studies have shown that errors do occur in medical profession since it is inevitable part of medical system therefore the doctors all over the world are trying to reduce the number of errors with the help of different measures and instruments.¹²

Koinis et al. emphasised on mental health promotion interventions, a focus on medical-nursing staff who work in clinical, high-intensity settings. They said health workers could be trained to use relaxation techniques and stress management strategies. Creation and development of psychological support and counseling programs are necessary . Wider participation of (new) doctors and nurses in the creation of health policies and the decision-making processes were also emphasised.¹³

¹⁰ Jha, S.M. (2008). Hospital Management. Mumbai. Himalaya Publishing House,

¹¹ Shakharkar ,B.M.(1998). Principles of Hospital Administration and Planning. New Delhi. Jaypee Brothers

¹² Mahanta, D.C. (2010). Vandalism in hospitals. The Assam Tribune, 26 December 2010.

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Research Methods:**Objective of Study:**

The present study tries to see the status, problems, challenges, limitations and policies applicable for the human resources engaged in various private hospitals of Assam. This study may help the hospital manager and proprietors to take future decisions. It will help the government hospitals too.

Parameters Used:

To assess the Human Resource Management state of affairs in private hospital, the parameters used were-education, earning level, experience, perception regarding their own role, training, working hours, facilities offered by the respective hospitals, holidays, leave rules, relationship with the employers, opinion regarding changing present workplace, job challenge etc.

Sample Design:

The universe of the study from which the samples are drawn, is the private hospitals of Assam. As sample only those hospitals were considered which were at least five years old and are reasonably large (100 bedded and above) with multiple specialties. The sampling technique used in this research is non probability sampling in nature. For the purpose of the present study, 6 Hospitals having 100 or more beds were selected from the 4 sample towns of Assam. All are multi specialty hospital and are taken into consideration on the basis of their location.

To study the human resource aspect, from each hospital at least 10 employees were interviewed with the help of a structured questionnaire. While going through interview process of the employees, it was ensured that the interviewees represent different groups of the workforce. The doctors, nurses and technicians were included as technical category respondents, whereas the clerks and the managerial cadre employees were involved as non technical people. Laboratory technicians, x- Ray technicians and physiotherapists were considered as technical group throughout the survey. Rationale

behind choosing the sample in this way is that the modern day hospitals are highly dependent on both the technical as well as the non-technical people for their operation. The tools of research used in this study is Personal Interview with structured schedules. The interview method was complemented by observations and informal discussions. While doing research, sometimes premeditated interactions were made with the patients and their attendants too.

Tools used for Data Analysis:

For analysis of the data frequency table, percentage, cross tabulation etc. were used.

Results and Analysis:

The respondents belonged to different hospitals and there were differences in their occupations which are represented in the following table (Table 1).

Table-1

Categories of the hospital professionals

Professions	Frequency	Percentage
Doctors	22	29.7
Nurses	20	27.0
Technicians	14	18.9
Others (Clarks and managers)	18	24.3
Total	74	100.00

Out of the 74 respondents 26 have more than 10 years of experience. In some private hospitals retired nurses are employed who have experience of more than 30 to 35 years. The comparison between age and years of experience is reflected in the following table (Table 2).

Table 2**Cross tabulation between age and years of experience:**

Age group	Years of experience				
	1 to 3 Years	4 to 6 Years	7 to 9 Years	10 years or more	Total
21 years to 25 Years	6	1	0	0	7
26 years to 30 Years	7	3	1	3	14
31 to 35 Years	10	8	02	12	32
More than 36 Years	2	5	3	11	21
Total	25	17	6	26	74

The table 3 explains about the information regarding the employees' education level and their earning level.

Table- 3**Cross tabulation of Income level and Educational level**

Monthly Earning (In Rs)	Educational level					
	HSL C	HSSL C	Graduate	Post Graduate	Other	Total
Below Rs. 5000		1	2	1	9	13
Between Rs. 5000 and Rs. 10,000	1	1	7	2	16	27
Between Rs. 10,000 and Rs. 15,000			2		7	9
More than Rs. 15,000			8	15	2	25
Total	1	2	19	18	34	74

In survey it was found that few doctors earn more than Rs. 15,000 per month. During the process of investigation it was found that it is not the education or the experience but the grade of the town or metro decides their salary levels. In

Guwahati City there are few good private hospitals that provide better salary. In some smaller towns of the state even the post graduate doctors are getting salary between Rs. 10,000 to Rs. 15,000. Few doctors admitted that they get less than Rs.10,000. They are not provided with other amenities of life also.

Employees' perception regarding their capacity to handle problems with existing knowledge

Out of the total 74 persons interviewed, 65 persons said that they can handle any kind of patient related problems with their existing knowledge. This is represented in the table 4 with the help of a cross tabulation between different professionals and their confidence level.

Table-4

Confidence on own capability:

Capacity to handle problems with existing knowledge	Doctors	Nurses	Technicians	Others	Total
Yes	16	19	14	16	65
No	6	1	**	1	8
No idea	**	**	**	1	1
Total	22	20	14	18	74

As shown in table 4, 6 doctors out of 22, said that he/she cannot handle all the medical related problems with his/her existing knowledge, yet 14 out of 14 technicians are confident about their knowledge and capability to solve the problems. Out of 20 nurses only 1 said that she/he cannot handle all the problems. While going through conversations, the doctors explained about the emergence of new types of diseases, new machineries for treatment, ever changing chemical and drug compositions and changing methods of treating the patients are the reasons for which they cannot handle all the problems with their existing knowledge. The doctors have more outer exposure than the nurses and the technicians. Therefore doctors are well aware about the latest changes in the medical technology and they favour the fact that

medical professionals need to be updated with the ever changing scenario of health care sector. The respondent Doctors always stay in connection with their contemporary doctors and go through the medical journals whereas the nurses and the technicians do not get such opportunities frequently.

Importance of training in the Hospitals:

Training is a process that attempts to improve employees on a currently held job by providing them with knowledge and skills needed for their present job. It is designed to bring about change in specific knowledge, skill, attitudes or behavior.

Regarding the necessity of the training programmes, the employees of the hospital feel in the following way. A big percentage of 89.2% people felt training programme are necessary. In conversations it was found that some respondents do not like training programmer as they feel these are time consuming which hampers their regular activities.

Table: 5,
Need of Extra Training:

Profession	Opinion regarding the need of extra training			Total
	Yes	No	No Idea	
Doctors	22	0	0	22
Nurses	17	2	1	20
Technicians	13	1	0	14
Others	14	3	1	18
Total	66	6	2	74

Going through the discussions it is found that out of the total 74 respondents 37 have received extra training whereas 37 persons did not receive any training. Doctors are trained by different medicine companies whereas the nurses are trained by the internal mentors like the doctors' staff and the management representatives. The technicians are trained by different companies who supply new machineries to the private hospitals. Apart from these the rest of the employees are trained only occasionally to

deal with certain situations as per the hospitals' needs. Some of the things they learn over their regular job.

Table-6

Sources of learning one's responsibilities

Employees learn their duties and responsibilities in the following way:	Frequency	Percentage	Cumulative percentage
Seniors' guidance	33	44.6	44.6
Hospital authority directly taught them	29	39.2	83.8
They learnt at their own	10	13.5	97.3
All of the above mentioned sources helped them in learning	2	2.7	100.00
Total	74	100.00	

As shown above (table 6), 83.8 percent of the respondents in the private hospitals said that hospital authority and senior colleagues taught them their duties. The respondents said training were minimum and confined to their specific portions of jobs only. 13.5 percent of the respondents said that they learnt it at their own. While investigated it was found that such people are either very experienced or are the people who are there in the hospital from its inception. The people who enter into a hospital in the beginning did not receive any formal orientation programme. 2.7 Percent respondents said that they received help from seniors, management and at the same time they learnt from their own understanding as well.

Working hours in the hospitals:

Medical professionals spend more than the normal duty hours in the hospitals. The problem is more with the doctors and while talking to the doctors it was found that they are ready to accept this reality as they are very much aware of the dedication required for the medical profession. Apart from their normal duty hours, they have to remain alert for the whole day since they may be called to the office at any time (on

call duty). But the problems is not so burdensome with the nurses, although the senior nurses, the O.T. (operation theatre) nurses and the causality nurses, the gynecological department nurses, the matron nurses have to stay in the hospital even after normal duty hours but in no cases it exceeds 10 hours a day.

Table 7

Working hours

Working Hours	Frequency	Percentage
6 to 8 hours	31	41.9
8 to 10 hours	32	43.2
More than 10 hours	11	14.9
Total	74	100

Many technicians as found throughout the process of research said their duty hours always exceed normal 8 hours. But 3 technicians said that they can leave on time. According to them it is not possible to leave on time because there is always rush of patients in the hospitals. The number of patients is increasing day by day but the hospital authority is not appointing increased number of employees to deal with increased workload. The machineries and hospital spaces are less. Hence they have to work with lesser number of people. The people who are working in managerial and executive positions have to give enough time to the hospital. From the observations it was found that Superintends, Deputy Superintendents, Marketing Officers, Executive Officers have to spend more than 12 hours of the day in the hospital.

Holidays and private hospital employees of Assam:

The table 8 shows that 50 percent of the interviewees said that they get normal 4 days holiday in the Sundays but 7 interviewees said that they get only 3 days holiday. These holidays may not fall on Sundays but these are adjusted according to their needs and after the night shift duties. 6 interviewees can avail only 2 holidays. 24 respondents said that they do not have holidays. These respondents are mostly

doctors, few technicians and few managers. They can avail holidays whenever required. Therefore it is seen that in the case of the sample private hospitals of Assam, there are no hard and fast rules for the administration regarding the holidays

Table- 8**Availability of Holidays**

Nos. of Holidays	Frequency	Percentage
2 days in a month	6	8.1
3 days in a month	7	9.5
4 days in a month	37	50.0
No holidays	24	32.4
Total	74	100.00

Happiness over the relationship with the employer:

It was found that 70 persons out of 74 respondent interviewed are either simply happy or highly happy with the employer (employer means boss/ owner/management). According to the respondents the owners or the management understand their personal problems and take actions in view of that. Some of the respondents said that they are working in that particular hospital from its inception and hence they have extremely good relation with their employer and hence can avail some favour from the authority on goodwill.

Table- 9**Happiness over the relationship with the employer**

Relationship with the employer is good here	Doctors	Nurses	Technicians	Others	Total
Highly agree	6	13	5	5	29
Agree	14	6	9	12	41
Cannot say	2	1		1	4

Disagree					0
Highly Disagree					
Total	22	20	14	16	74

Satisfaction over the present Salary:

Out of 74 respondents 32 persons said that they are satisfied with the salary levels while none of them is highly satisfied. The respondent Doctors and Technicians enjoy a better status then others regarding the salary matters.

Table: 10

Satisfaction over the present Salary

Happiness over prevailing salary	Names of the posts				
	Doctors	Nurses	Technicians	Others	Total
Highly satisfied	**	**	**	**	**
Satisfied	5	11	7	9	32
Cannot say	11	3	5	9	28
Dissatisfied	6	5	2	**	13
Highly dissatisfied	**	1	**	**	1
Total	22	20	14	18	74

But, the employees are interested to join various other jobs for various reasons.

Table:11

Opinion regarding changing present workplace:

Reasons behind willingness to change the present job	Frequency	Percentage	cumulative percentage
For better salary	6	8.1	8.1
For better status	2	2.7	10.8

For better working environment	6	8.1	18.9
For Career Development	21	28.4	47.3
Not thinking about the above mentioned reasons seriously	25	33.8	81.1
Both salary and career	11	14.9	95.9
Both salary and environment	2	2.7	98.6
Both status and career	1	1.4	100
Total	74	100	

Opinion regarding increase job challenge:

Regarding the job challenge, 85% respondents (63 Nos.) say that the hospital job has become challenging over the years. Out of them 39 respondents said that it has become highly challenging.

Respondents pointed toward the following reasons for the increased job challenges:

- (I) Newer types of diseases,
- (II) Changing attitude of the patients,
- (III) Application of Consumer Protection Act in the hospitals,
- (IV) Use of RTI or other legal aspects
- (V) Changing demands of the attendants of the patients,
- (VI) Increasing use of complicated machinery and their quick obsolescence,
- (VII) Remarkable nature of change in the Research and Development work of the pharmaceutical companies, etc

Other Findings related to observation of Human Resource Management Issues:

- It was found in respondent private hospitals that sometimes the government doctors and retired government doctors are engaged by private hospital.
- Few retired nurses are also found working with the private hospitals, but nowhere in the study it was found that government nurses are working in private hospitals.

- Some of the technicians of the respondent private hospitals are also working in government hospitals as permanent employees.
- In the sample hospitals it is seen that the equal employment opportunity is there.
- Although most of the people working in the sample hospitals have technical degrees, diplomas and certificates, yet no management training or education is given to these people later on. .
- Although the private hospitals say that they employ ANM and GNM nurses yet it was found that most of the time they take the nurses passing out from private institutions so that they do not have to pay them high salary. Sometimes private hospitals employ from their own nursing institutes which are run at the hospital premise for the same reason of paying them less as salary.

Suggestion:

- Doctors and technicians are the pillars of hospital industry; therefore the private hospitals should try to form their own brand of people. Excessive dependency on government doctors and technicians reduces the credibility of the private hospitals.
- Proper care should be taken while giving employment to the nurses. Since the nurses are the faces of the hospital industry therefore appointment should be given to the nurses who have completed their degrees under the government institutes. Compromising with under-quality nurses cannot ensure service quality.
- Private hospitals should follow a specific salary structure which they can decide at their own or can set by looking at the inter industry and intra industry wage differentials.
- The state government should introduce a definite salary structure. The directorate of health care should have some control over the issues like how the private hospitals are handling human resources, how are they paid, whether they get other benefits or not etc. Regular and legitimate increments should be ensured.
- Since medical industry is ever growing therefore to cope with the changing scenario the medical professionals should be given constant upgradation trainings.

- The private hospitals should take care of the duty hours of the human resources employed there. Appropriate facilities regarding holidays and leaves should be provided. It should obey Government Regulations regarding maternity leave etc.
- Organisational structure or organogram should be more detailed showing all the responsibilities and authority. The span of control should be reasonable. Larger span of control at lower positions of the organogram is not a good sign. Constant upgradation of the organogram is very necessary. Newer departments should properly be placed under the organogram.
- In the private hospitals there should be a full fledged human resource department which will work for the development of the people working in the hospital.
- The private hospitals should have their own strong security force. Because to face the increasing number of hospital vandalism cases the hospitals need more security forces to protect their property and employees.
- Changing demands of the clients, their purchasing power, awareness level, government rules and laws, consumer protection rights should be studied thoroughly by the managers.

From the survey done on the private hospitals of Assam it was felt that this sector provides employment to a good number of citizens of the state of Assam. With the increase in the income level of the common people the dependency on private health care will rise more as the people become very health conscious and they demand customized health care services. There is enough scope for the development of this industry in the state. If the private hospitals give sufficient emphasis to the development of the human resources of these hospitals, they can grab a good share in the private health care market of the country and attract foreign clients too.

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