

ISSN: 2278 - 0211 (Online)

An Empirical Investigation On Doctors' Perception Of HR Planning Practices At Government Hospitals In Kerala

K. R. Rehin

Research Scholar, Department Of Management Studies, Kannur University, Thalassery Campus, Kannur, Kerala, India **Dr. P. T Raveendran**

Professor, Department Of Management Studies, Kannur University, Thalassery Campus, Kannur, Kerala, India

Abstract:

One of the pre-requisites for an organization to be successful is that it should have the right kind of human resource at its disposal. For that, an organization should first have a clear idea about the number and type of people that it requires depending on the type of its operations, the extent of competition etc. A well-designed human resource plan helps any organization to ensure that it possesses the optimum number and type of human resources. The case of hospitals is no different from this. It is extremely important for hospitals to ensure that they have the optimum number of doctors, nurses as well as support staff. This underlines the importance of effective human resource planning at hospitals. This paper attempts to analyse the perception of doctors regarding the existence of human resource practices of government hospitals through a descriptive study wherein data were collected from 240 doctors at government hospitals across Kerala. Chi-square analysis indicated that doctors felt that effective human resource planning hardly existed at government hospitals in Kerala.

Key words: manpower planning, rationalization of manpower, succession planning.

1.Introduction

For any organization, be it in the public or in the private sector, to be successful, it should have the right kind of manpower with the right skills in the right numbers. The manpower requirements of an organization keep changing from time to time. The personnel requirements of an organization keep varying subject to change in various internal and external factors like its operations, competition, government regulations etc. Hence, for an organization to operate at its best, its human resources should match with its demands. Most countries have a partial approach to planning and pay no attention to the interrelationships between the health professions, in particular substitution possibilities and the expansion of complementary skills (Cooper et al. 1998). Workforce planners unconditionally assume that prevailing systems of health care delivery are well-organized and make forecasts based on these existing systems, assuming existing staff: patient ratios are suitable. Often it is thought that the historical supply of human resources, particularly doctors, reflects demand. This ignores the fact that doctors can influence the services they provide and other health care services used by patients (Barer, 2002). In all health care mechanisms, there are considerable variations in clinical practice, which may indicate inapt care and the unproductive use of resources (Wennburg, 1999).

An effective human resource planning system is a precondition to ensure that the existing human resources match the requirements. A good human resource plan will aid organizations in assessing future manpower requirements, designing and implementing training modules, developing promotion as well as career growth programs, anticipating and preventing redundancies where ever possible, developing a staff strength to meet the changing needs, controlling HR costs etc. Like any other firm, it is important for government hospitals have an effective manpower planning system. But to what extent proper human resource planning practices exist in government hospitals is a question. The present study attempts to assess the perception of doctors regarding the existence of human resource planning systems at government hospitals in Kerala

2. Review Of Literature

Human resource planning refers to foreseeing future business and environmental pressures on organizations and fulfilling the personnel needs dictated by those factors and is an important input into strategic plans (Cascio, 2003).

Armstrong (2006) states that hard human resource planning focuses on quantitative analysis to make sure the right number of the right sort of people while soft is focused on creating and shaping the culture of the organization so that there is a clear integration between

corporate goals and employees values, beliefs and behavior thus ensuring availability of people with the right kind of altitude and motivation who are committed to the organization are engaged in their work and behave accordingly.

The outcomes of employee surveys help in developing plans for improving work environment, providing opportunities to develop skills and careers and adopting a total reward approach which focuses on non-financial "relational" rewards as well as the financial "transactional" rewards. They can also lead to the creation of a high loyalty strategy which integrates such approaches as creating functional flexibility, designing jobs to provide inherent motivation, accentuates team working, de-emphasizing hierarchies and status differentials, enhancing employment security, gratifying people on the basis of organizational performance and enacting organizational specific values and culture that fastens the organization together and gives it focus (Marchington & Wilkinson, 2005). Birch (2003) states that conventionally, several techniques for human resource planning have been used, ranging from workforce to population ratios to standard staffing norms for individual institutions. Different methods have taken care of either the supply side or the demand side of the workforce or both. These methods have however failed to identify the effects of shared competencies, the potential of substitution between employees and the multiple tasks performed by employees. These approaches to addressing workforce unevenness, attrition rates and changes in client needs may still be useful for organizational planning. However new thinking is required for the emerging competitive environments.

The above literature clearly highlights the need to have effective human resource planning mechanisms at organizations.

3. Significance Of The Study

For a hospital to be capable of serving its customers well there should be enough number of competent staff comprising of doctors, nurses and support staff to offer timely service to patients. There should a mechanism to make sure that there are adequate filled-in vacancies at present as well as to generate and fill supplementary vacancies as and when required. All these will be possible only if there is an efficient human resource planning and management system. As the clients at a hospital are either physically or mentally unwell, even a minute delay in the delivery of service as well as provision of below par service may lead to unfortunate consequences. Timely delivery of quality service will be possible only if there are sufficient number of trained staff members at the hospital at any given point of time which can be ensured only by having a proper human resource planning system at the hospital. Hence, the present study tries to analyse the perception of doctors regarding the existence of the human resource planning system at government hospitals in Kerala.

4. Methodology

The researcher followed a descriptive approach in conducting the study. Data was collected from doctors at various district and general hospitals across Kerala. A pre-tested structured questionnaire was administered among a sample of 240 doctors from various districts and general hospitals across Kerala selected based on the convenience of the researcher. The questionnaire tried to solicit the opinion of respondents on various aspects relating to the human resource planning system at hospitals like existence of the proper manpower planning system, existence of a mechanism to ensure adequate supply of manpower when required etc. The collected data was analysed using SPSS (Version 16). Chi-square test at 95 percent confidence interval was used in the present study to understand whether there existed a significant difference in the perception of respondents regarding the existence of human resource planning at government hospitals in Kerala.

Five hypotheses were formulated for the study which were as follows:

- H1: There is no significant difference in the perception regarding the existence of the proper manpower planning system at government hospitals as far as gender of respondents is considered.
- H2: There is no significant difference in the perception of male and female respondents regarding the existence of succession planning at government hospitals.
- H3: There is no significant difference in the perception of male and female respondents regarding the existence of a mechanism to ensure adequate supply of manpower when required at government hospitals.
- H4: There is no significant difference in the perception about the existence of a mechanism to ensure optimum utilization of existing manpower at government hospitals across gender of the respondents.
- H5: There is no significant difference in the perception regarding the existence of a mechanism to rationalize the manpower requirements and workload of different departments as far as gender of respondents is considered.

5. Results And Discussion

Cronbach's Alpha	N of Items
.838	5

Table 1: Reliability Statistics Source: Survey Data

Cronbach's alpha was used to measure the reliability of the questionnaire. Malhotra (2008) mentioned that the coefficient varies from 0 - 1.A value of 0.6 or less generally signifies unsatisfactory internal consistency and reliability. Alpha coefficients below 0.6 are weak in reliability, 0.6-0.8 is moderately strong and 0.8-1.0 is very strong in reliability. For the questionnaire used in the study, the

value of Cronbach's alpha coefficient was obtained as 0.838 (Table 1). Hence it was concluded that the questionnaire enjoyed acceptable reliability level.

The hypotheses were tested using Chi square tests and are shown in Tables 2 to 11

• H1: There is no significant difference in the perception regarding the existence of proper manpower planning system at government hospitals as far as gender of respondents is considered.

		Existence of proper manpower planning system					Total
		Strongly Agree	Agree	Moderat e	Disagree	Strongly Disagree	
Gender of Respondents	Male	5	9	18	38	63	133
Respondents	Female	6	11	19	20	51	107
Total		11	20	37	58	114	240

Table 2: Cross Tabulation Of Gender Of Respondents And Existence Of Proper Manpower Planning System Source: Survey Data

From Table 2, it was observed that only 10.52 percentage of male respondents and 15.88 percentage of female respondents agreed that there existed proper manpower planning system at government hospitals. So in general doctors felt that proper manpower planning system hardly existed at government hospitals.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	6.167 ^a	4	.187
Likelihood Ratio	6.957	4	.138
Linear-by-Linear	.526	1	.468
Association			
N of Valid Cases	240		

Table 3: Chi-Square Tests Source: Survey Data

Table 3 indicated that Pearson Chi-Square value was insignificant (P>.05). Hence H1 is accepted. That is, there is no significant difference in the perception regarding the existence of proper manpower planning system at government hospitals as far as gender of respondents is considered.

• H2: There is no significant difference in the perception of male and female respondents regarding the existence of succession planning at government hospitals

		Exi	Existence of Succession Planning Process				
		Strongly Agree	Agree	Moderate	Disagree	Strongly Disagree	
Gender of	Male	5	18	18	49	43	133
Respondents	Female	5	13	17	26	46	107
Total		10	31	35	75	89	240

Table 4: Cross Tabulation Of Gender Of Respondents And Existence Of Succession Planning Process Source: Survey Data

From Table 4, we can infer that only 17.29 percentage of male respondents and 16.82 percentage of female respondents agreed that succession planning existed at government hospitals. So majority of the respondents perceived that succession planning process was not there at government hospitals.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	5.835 ^a	4	.212
Likelihood Ratio	6.263	4	.180
Linear-by-Linear	.288	1	.591
Association			
N of Valid Cases	240		

Table 5: Chi-Square Tests Source: Survey Data

Table 5 indicated that Pearson Chi-Square value was insignificant (P>.05). Hence H2 is accepted. That is, there is no significant difference in the perception of male and female respondents regarding the existence of succession planning at government hospitals.

• H3: There is no significant difference in the perception of male and female respondents regarding the existence of mechanism to ensure adequate supply of manpower when required at government hospitals.

		Existence	Existence of mechanism to ensure adequate supply of manpower when required					
	-	Agree	Moderate	Disagree	Strongly Disagree			
Gender of Respondents	Male	14	17	42	60	133		
	Female	18	21	23	45	107		
Total		32	38	65	105	240		

Table 6: Cross Tabulation Of Gender Of Respondents And Existence Of Mechanism To Ensure Adequate Supply Of Manpower When Required Source: Survey Data

Table 6 clearly showed that only 23.3 percentage of male and 36.4 percentage of female respondents opined that there existed effective mechanism at government hospitals to ensure adequate supply of manpower when required. Majority of respondents perceived that effective mechanism to ensure adequate supply of manpower hardly existed at government hospitals.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	5.870 ^a	3	.118
Likelihood Ratio	5.887	3	.117
Linear-by-Linear	.051	1	.821
Association			
N of Valid Cases	240		

Table 7: Chi-Square Tests Source: Survey Data

Table 7 indicated that Pearson Chi-Square value was insignificant (P>.05). Hence H3 is accepted. That is, there is no significant difference in the perception of male and female respondents regarding the existence of effective mechanism to ensure adequate supply of manpower when required.

• H4: There is no significant difference in the perception about existence of mechanism to ensure optimum utilization of existing manpower at government hospitals across gender of the respondents.

		Existence of	Existence of mechanism to ensure optimal utilization of existing manpower				Total
		Strongly Agree	Agree	Moderate	Disagree	Strongly Disagree	
Gender of	Male	6	47	12	29	39	133
Respondents	Female	7	30	11	17	42	107
Total		13	77	23	46	81	240

Table 8: Cross Tabulation Of Gender Of Respondents And Existence Of Mechanism
To Ensure Optimal Utilization Of Existing Manpower
Source: Survey Data

From Table 8, it was concluded that only 39.84 percentage of male respondents and 34.57 percentage of female respondents agreed that effective mechanism to ensure optimum utilization of existing manpower existed at government hospitals. Rest of the respondents felt that effective mechanism to ensure optimum use of existing manpower was not there at government hospitals.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	3.510 ^a	4	.476
Likelihood Ratio	3.523	4	.474
Linear-by-Linear	.052	1	.819
Association			
N of Valid Cases	240		

Table 9: Chi-Square Tests Source: Survey Data

Table 9 indicated that Pearson Chi-Square value was insignificant (P>.05). Hence H4 is accepted. That is, there is no significant difference in the perception about existence of mechanism to ensure optimum utilization of existing manpower in the hospitals across gender of the respondents.

• H5: There is no significant difference in the perception of respondents regarding the existence of mechanism to rationalize the manpower requirements and work load of different departments as far as gender of respondents is considered.

		Existence of mechanism to rationalize manpower requirements and workload of different departments					Total
		Strongly Agree					
Gender of	Male	8	21	16	37	51	133
Respondents	Femal e	10	18	34	29	16	107
Total		18	39	85	66	32	240

Table 10: Cross Tabulation Of Gender Of Respondents And Existence Of Mechanism To Rationalize Manpower Requirements And Workload Of Different Departments Source: Survey Data

From Table 10, it was found that only 21.8 percentage of male respondents and 26.16 percentage of female respondents opined that effective mechanism to ensure rationalize manpower requirements and workload of different departments existed at government hospitals. Majority of respondents opined that mechanism to rationalize manpower requirements of different departments was not present at government hospitals.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.583 ^a	4	.630
Likelihood Ratio	2.959	4	.565
Linear-by-Linear	.014	1	.906
Association			
N of Valid Cases	240		

Table 11: Chi-Square Tests Source: Survey Data

Table 11 indicated that Pearson Chi-Square value was insignificant (P>.05). Hence H5 is accepted. That is, there is no significant difference in the perception of respondents regarding the existence of mechanism to rationalize the manpower requirements and work load of different departments as far as gender of respondents is considered.

6. Conclusions And Limitations Of The Study

From the above discussion we can conclude that effective human resource planning system hardly existed at government hospitals. Human resource planning practices like succession planning were missing at government hospitals. Effective mechanisms to ensure optimum use of available manpower as well as to rationalize the workload of different departments were also not there at government hospitals. As the findings of the study were purely based on the inputs given by the respondents, there may be bias in the input provided which may get reflected in the findings as well. Hence the findings of the study should be generalized with caution. However, as effective human resource planning is very essential for the smooth functioning of hospitals, the authorities concerned should try to implement the manpower planning system at government hospitals.

7. References

- 1) Armstrong. (2006) A Handbook of Human Resource Management (10th ed.). London: Kogan Page Publishers.
- 2) Barer, M. (2002). New Opportunities for Old Mistakes. Health Affairs, 21(1), 169-171.
- 3) Birch, S., O'Brien-Pallas, L., Alksnis, C., Murphy, G. T., & Thomson, D. (2003). Beyond Demographic Change in Human Resources Planning: An Extended Framework and Application to Nursing. Journal of Health Services Research & Policy, 8(4), 225-229.
- 4) Cascio, W. (2005). Managing Human Resources (7th ed.). India: Mcgraw Hill.
- 5) Cooper, R. A., Henderson, T., & Dietrich, C. L. (1998). Roles of Non-physician Clinicians as Autonomous Providers of Patient Care. JAMA: The Journal of the American Medical Association, 280(9), 795-802.
- 6) Malhotra, N. K. (2008). Marketing Research: An Applied Orientation (5th ed.). India: Pearson Education.
- 7) Marchington, M., & Wilkinson, A. (2005). Human Resource Management at Work: People Management and Development. CIPD Publishing.
- 8) Wennberg, J. E. (1999). Understanding Geographic Variations in Health Care Delivery. The New England Journal of Medicine, 340(1), 52.