CHAPTER 3
RESEARCH METHODOLOGY

3.1 Introduction:
Status of health at national as well as across the state has improved during the liberalization, privatization and globalised time but still it is a form from developed countries. Across the state we find that states which have higher level of per capital income are spending more on health expenditure and they have better health indicators and human development index. The economic survey 2007-08 (1) shows that high income states are enjoying better health outcomes and low income states are deprived of good health. Maharashtra falls in developed state with per capital income Rs.29204 (in 2006); doctor-population ratio 1:1213 and Nurse – population ratio 1 : 955 respectively which is better than all India ratio (2). This in turn reflects the state government policy, efforts and concern in this direction. The researcher interested to investigate human resource management practices in government hospital. To know an endeavor of human resource practices adopted by hospital; a perfect research methodology is needed. Therefore in this chapter, an endeavor is made to understand the research methodology adopted for this study purpose. Two hospitals from Mumbai were selected as respondent to investigate their human resource practices. To know this, the following research methodology is adopted.

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Health is one of the most fundamental needs of an individual. It assumes even more significance when health becomes a key indicator of a nation’s progress in social, economic and political spheres. Health is both an end and a means to development. Equitable economic development in itself is a good health input and are adequate and equitable health care system stimulates development by improving human productivity(3). This is depends upon human resource development department. How well this department is equipped and functioning?

A healthy human resource development is an assets to a community while a sick person is liability. Inadequate trained and severe shortage of manpower of all levels in the public health delivery system, stands out as another challenge. Every health functioning is consider a lot of pressure on account of large numbers that he/she is expected to serve and it has not proper and time to time training, transfer policy, recruitment policy, promotion avenues, salary package, and working hours etc. This has a direct bearing on the quality of services rendered and uptake services. This research focused to understand the human resources practices adopted by public sector hospital and designed research methodology helps to understand the perceptions of managerial and non-managerial staff towards human resources practices existing in Government hospitals in Mumbai. Therefore the main objective of this chapter is to describe and present adopted research methodology for the present study. This research methodology will be helpful in finding the recruitment, transfer, promotion, welfare practices in selected government hospitals in Mumbai.
3.2 Problems to be investigated:

Human resource is the main aspect of any hospital management though it is government or private or corporation or trust hospital. Only Hi-technology is not useful to run hospital in full speed but to operate this Hi-technology with efficient, a skillful human resource system is a must. If there is no such system, then Hi-technology has no use. Human resource practices includes planning, organizing, directives, controlling the recruitment, selection, transfer, promotion, performance appraisal training system incentives, salary packages, social or economic proper motivation and welfare facilities. So the present study attempted to answer the following basic problems.

1. To what extent employees of hospital know the manpower planning practices adopted in hospital?
2. Whether employees of hospital know the existence of manpower planning department, manpower planning process undertaken, and duration of human resource planning practiced by hospital?
3. What factors are considered in manpower planning in hospital?
4. Whether job analysis description practices or not in hospital? If yes, then to what extent?
5. What are the sources of recruitment in hospital?
6. What is a pattern of external sources of recruitment adopted or practiced in hospital?
7. What methods are followed by hospital in selection of human resource?
8. Which training - on the job and off the job had received by hospital employees and to what extent? What is outcomes of such a training?
9. What is a outlook of hospital employees towards training?
10. Whether performance appraisal followed or not in hospital? If yes, then what is a need for making performance appraisal?
11. What is current status of performance appraisal practiced in hospital?
12. Whether job rotation is practiced in hospital for their employees?, If yes then to what extent?
13. Whether employees of hospital are aware career planning, career paths and its adequacy, if yes to what extend?

14. Whether promotion practices are followed or not in hospital? What is opinion of employee of hospital towards promotion practices in term of
(a) Promotion as a part of career planning,
(b) Existence of promotion policy for employees in hospital,
(c) Basis of promotion practiced in hospital
(d) Factors influencing promotion etc.

15. What welfare practices are followed in hospital for employees in respect of
(a) Salary structure,
(b) Perquisites, (c) Social Security,
(d) Leave facility enjoyed,
(e) Deductions from salary,
(f) Infrastructural facility,
(g) Reward and recognition,
(h) Learning culture and climate,
(i) Additional welfare facility etc.

16. What is the level of human resource practices regarding
(a) Manpower planning, recruitment and training,
(b) Career planning, performance appraisal and promotion,
(c) Employees welfare facilities, and
(d) Overall for hospital.

Therefore the statement of problems is “Human resource practices in hospitals in Mumbai during 2010-2012”.

3.3 Objectives of the study:
The objectives of the study refer to what the researcher specifically want to do in the course of the study. Formulating proper objectives is essential for research due to the fact that the whole design of research is depends on it and it
gives speed and proper direction to research investigation. It helps to examine the existing phenomenon. It gives proper and logical direction to research work. It can also suggest the ways and means to overcome all related problems; if gap(s), so as to improve overall quality of research. Health care in India has witnessed a change in patient behavior and their attitude towards government health centre. Hospital preference of the consumers (patient) are generally guided by their facilities. All these benefits had tempted the researcher to form the following objectives.

1. To study and evaluate manpower planning practices in hospitals.
2. To study and examine recruitment and training practices in hospitals.
3. To study and analyse the performance appraisal practices in hospitals.
4. To study and assess the career planning and promotion practices in hospitals.
5. To study and examine the salary structure and welfare practices in hospitals.
6. To investigate and analyse the learning culture and climate practices in hospitals.
7. To measure and identify the levels of human resource practices in hospitals.
8. To compare and analyses the inter-hospital variation levels in human resource practices in hospitals.

3.4 Hypotheses of the study:
In the light of the above cited objectives the following hypotheses have been set by the researcher for the present study purpose.
Hy-1: There is no separate manpower planning department in studied hospitals.
Hy-2: Political concern and government policy are the main two factors influencing the manpower planning of studied hospitals.
Hy-3: External sources are adopted / practiced in recruitment in studied hospitals and within it, advertisement source is highly practiced.
Hy-4: On the job training is highly practiced in studied hospitals.
Hy-5: Performance appraisal is highly practiced in studied hospitals.
Hy-6: Performance appraisal has average consideration in promotion.
Hy-7: Moderate level career planning practices are adopted in studied hospitals.
Hy-8: High level manpower planning, recruitment and training practices are followed in studied hospitals.
Hy-9: High level career planning, performance appraisal and promotion practices are followed in studied hospitals.
Hy-10: Average level employee welfare practices are adopted in studied hospitals.
Hy-11: Moderate level human resource practices are followed/ adopted in studied hospitals during study period.

3.5 Significance of the study:
1. Development of any health service is totally depends on the quality of employees who are serving the hospital. Today’s globalised world success mantra is use of proper human resources. Because without the efficient use of human resource hospital management cannot accomplish organizational objectives. It does not matter how perfect the planning organization and modern information and communication technology are. If the people do not want to work, management will not able to earn profit and complete desired task. Therefore, it is essential to manage the employee force efficiently and form this point human resource
management practices were more significant for the overall development of hospital.

2. This study would be significant for medical industry supply chain management of Pharma business, Government - state, quasi, central, private and public business partnership, private and public business entrepreneurship, and retailing sector in pharma. It would also help to retailer, partnership, company, co-operative, Joint venture organization, Multinational companies etc. set up. It would also helpful to all medical practitioner concerns directly and indirectly.

3. This study helps to find out the human resource practices adopted by hospital and employee’s level of satisfaction towards it and help to know the experiences of employees towards overall human resource development practices adopted by Government hospitals.

4. It will help to pharma manufacturers, wholesalers, distributors, doctors, private and public health care practitioners, patient, retailers etc.

5. It helps to know the human resource management behavior.

6. There is a general tendency in the organizations to lay emphasis on materials and financial management to the after neglect of the personnel. What are the consequences? It is observed that the process of development takes longer, sometimes even fails. Why? The main reason for this is that we are not attending to the administration of personnel earnestly and forget that they are the real agents of development and ultimately the beneficiaries of the process of development. This study attempt to know the human resource practices adopted by government hospitals. Hence it significant from manpower, planning, promotion, transfer, performance appraisal point of view.

7. Sharp has aptly remarked regarding personnel that good administration and management is a composite of effective organization, adequate material facilities and qualified personnel even poorly devised machinery may be made to work if it is manned with well trained, intelligent, imaginative and devoted staff. On the other hand, the best
planned organization may produce unsatisfactory result if it is operated by Medicare or disgruntled people (4). Therefore this study will help the hospital administrators and officers to understand the underlying human resource practices adopted by them and satisfaction of employees on it and help them to craft their strategies.

Thus this study is of great significance for state and district level health functionaries, to manage health personnel efficiently, to optimize the health services offered by government, to the benefit of the people and the nation.

3.6 Research design:
This study seeks to explore and investigate the response of employees towards human resource practices adopted by Government hospitals on recruitment, promotion, transfer, welfare facilities, performance appraisal etc. For his purpose, questionnaires were used. The sample was drawn using the simple random sampling technique. For the purpose of conducting the research a set of objectives and hypothesis were made. Required data was collected through primary as well as secondary source. Primary data was collected by administering questionnaire among the respondents; to be filled in, who are serving hospitals. Secondary data was collected through books, journals and other important reports and surveys. The dully filled questionnaires were studied and analysed with the help of tables and graphs. Finally findings were logically drawn. Thus following is the research design employed in the present study.
Research Objective
To study the human resource practices in hospitals in Mumbai

Research Survey Method
Simple, random and convenient survey method

Types of Research
Qualitative and Quantitative research

Research Sample
2 Government Hospitals – ESIS & J.J. Hospital

Sample size
700 respondents i.e. class I to IV employees (i.e. ESIS -200, J.J -500)

Data Collection
Primary: Questionnaire, observation & personal interview
Secondary: Books, Journals, consumer surveys and research articles.

Statistical tools used
Percentage (Ratios), average

Interpretation & analysis tool
Tables, Frequency distribution and graphs

Conclusion
Findings
3.7 **Scope of the study:**
Mumbai is selected as a study area. Two hospitals namely ESIS hospital and J.J. Hospital is selected for study purpose. There are 4 government hospital and 4 ESIS hospital in Mumbai. Out of them, one each is selected as sample. The data was collected from them. ESIS hospital located at Mulund and J.J. Hospital which is located at Byculla is selected 200 and 500 respondents from ESIS and J.J. Hospital are considered as a universe or samples. Chart 3.2 shows exact study area.

**Chart 3.2**

**Scope of the study**

- **Area of the study:** Mumbai
  - ESIS hospital: Mulund, Mumbai
    - 200 employees: Class I - IV
  - J.J. hospital: Byculla, Mumbai
    - 500 employees: Class I - IV

Male & Female staff members of ESIS and J.J. hospital consists of 700 respondents
Thus the scope of the study covers:

1. Mumbai – Mulund and Byculla
2. 2 hospitals – ESIS and J.J. Hospital
3. 700 respondents – 200 from ESIS and 500 from J.J. Hospital.
4. Male and Female employees of class I to IV from Government hospitals i.e. ESIS and J.J.
5. Period of the study is 2010 to 2012
6. Overall study is extensive and purposeful.

3.8 Period of Primary data collection for the study:
April 2010 to December 2011 (i.e. one year and nine month) was the survey period. This long period was due to seeking permission for data collection from concern government authority was a must. Secondary doctors, nurses and other paramedical staff was busy in patient treatment, getting filled questionnaires was difficult. However we successfully collected more than 750 questionnaires from respondents. During April – 2010 and December 2011 data was collected by administering questionnaires. Doctor, nurses, officers, clerks, peons, supervisory staff, para medical staff, technicians, assistant, duty, registrar, superintendents, Deans, professors, Lecturers, were contacted and information was collected. Permanent, temporary contractual etc. personnel were surveyed. Social workers, patients and their relatives, psychologist, social councilors, councilors, NGOs were contacted and information was gathered. Few experts were also interviewed to know their expert opinion on human resource culture and development in hospital. Before April 2010, in the month of March 2010, a pilot survey was conducted Government medical and ESIS hospital and final sample was fixed and questionnaire to study human resource practices was finalized. Thus practically the period of data collection was nearly 2 years i.e. March 2010 to December 2011 respectively. The chart 3.3 shows the actual period of primary data collection for the study purpose.
## Chart 3.3

### Period and Schedule of primary data collection

<table>
<thead>
<tr>
<th>Period</th>
<th>Nature of work completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. January, 2010</td>
<td>General area visit, observations and verification of potentiality of study area and sample.</td>
</tr>
<tr>
<td>2. February, 2010</td>
<td>Second visit for locations of hospitals and observing physical facilities and managerial and administration.</td>
</tr>
<tr>
<td>4. April 2010 to August 2010</td>
<td>Application for getting permission to collect data from Government hospitals and secondary data was collected after permission granted to do so.</td>
</tr>
<tr>
<td>5. September to Nov. 2010</td>
<td>Had general observations, discussions and special interviews with various medical and para medical and ESIS hospital staff like, officers, union leaders, Doctors, Deans, experts, guides, industrialist, shop owners of pharma or medical patients and their relatives.</td>
</tr>
<tr>
<td>6. December 2010</td>
<td>Questionnaire finalized with the help of guide and expert in field.</td>
</tr>
<tr>
<td>8. March – June 2011</td>
<td>Collected questionnaires after proper survey</td>
</tr>
<tr>
<td>10. September – October 2011</td>
<td>Finalized complete questionnaires and rejected incomplete questionnaire made data entry.</td>
</tr>
<tr>
<td>11. November, 2011</td>
<td>Data processing was undertaken with Tata Institute of Social Science (TISCO) Deonar, Mumbai</td>
</tr>
<tr>
<td>12. December, 2011</td>
<td>Data output received checked and final data output received.</td>
</tr>
</tbody>
</table>
3.9 Sample and sample size of the study:
The present research work, in fact is an investigation into the actual human resource management practices which are currently employed in government hospitals in Maharashtra. The present study covers the whole population of government medical and ESIS hospitals in Mumbai. It was found that there were 4 government medical hospital and 4 ESIS hospitals in Mumbai at the end of 2010. Out of them, 1 each have been selected as sample hospital for detail study. The stratified random sample method was applied for selecting samples. Chart 3.4 present selection of sample.

Chart 3.4
Selection of Sample hospital

<table>
<thead>
<tr>
<th>Location</th>
<th>Name of hospital</th>
<th>Sample size determined</th>
</tr>
</thead>
<tbody>
<tr>
<td>Byculla</td>
<td>J.J. Hospital</td>
<td>550</td>
</tr>
<tr>
<td>Mulund</td>
<td>ESIS Hospital</td>
<td>250</td>
</tr>
<tr>
<td>Mumbai</td>
<td>2 hospital</td>
<td>800</td>
</tr>
</tbody>
</table>

In all, 800 questionnaire were distributed in 2 hospitals and 2 localitis. 750 questionnaires were received and out of these 700 were complete in all respect. The questionnaires which were incomplete were rejected. In order to determine the sample and sample size, a list of government hospital and ESIS were prepared with location and their names Doctors and Para medicinal and administrative staff were covered as sample. 700 respondents who are working in ESIS – Mulund and J.J. Hospital, Byculla were selected as samples. Thus total sample consists of 700 respondents. Chart 3.5 shows the final selection of respondents.
In all, 800 questionnaire distributed / administered, out of it, 700 were finally selected as they are complete in all respects and 100 were rejected due to incomplete information. Thus total and final sample size consists of 700 respondents belong from ESIS hospital 200 and J.J. hospital 500 respectively. The respondents were selected on the basis of availability and convenience to access by using sample random method.

### 3.10 Sources of data collection:

The present study is both descriptive and analytical for accomplishing the objectives of the study. The data have been collected from primary as well as secondary source.

#### 3.10.1 Primary data:

The primary data has been collected through following ways:

(a) Questionnaire was administered among doctors, and officers. With the help of this questionnaire information regarding policy matter of human resource management practices have been collected through personal interviews.

(b) Questionnaire was also administered among employees like nurses, clerks, peons, assistant staffs, para medical staff etc. The technique of observation was also utilised for data collection. Informal discussion with hospital staff were also undertaken.
3.10.2 Secondary data:
Secondary data was collected through publication of RBI, and All India. Medical association, Books, Journals, websites, newspapers, circulars, reports etc.

3.11 Statistical tools and techniques used:
For the present study, the collected data is processed with the help of statistical tools and techniques. Simple frequency distribution, frequency distributed converted into percentage, average, means, standard deviation are used.

3.12 Data analysis and interpretation:
The data is interpreted and analysed with the help of statistical tools and techniques such as frequency, percentage, average, tables, charts and comparative approach. Logical conclusions were drawn and these were presented in the respective chapters as well as in summary conclusions.
References