

EVALUATE THE MANAGEMENT AND REGULATORY CAPACITY OF DISTRICT HOSPITAL TUMKUR KARNATAKA STATE-INDIA

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ABSTRACT

A study was conducted in Tumkur District Hospital of Karnataka state to evaluate the Management and Regulatory Capacity to how Resources like men, money, materials are used effectively to achieve goals / objectives. A sample of 100 respondents was selected randomly from Specialists, Ministerial Staff, Staff Nurse, technical / supporting staff and group D staff of 20 each. If the recourses not utilized properly resulted in failure of organizational objectives and programme failed. Coordination effort is essential to utilize recourses effectively by motivation.

It was revealed that 87 % of staff expressed the good availability of funds (money) and 13 % not knowing the fund availability. There is a vacancy of 118 posts (35.65 %) against the 331 sanctioned post and 66 equipments (13 %) out of 508 were not working as a result patients treated reduced to 3302 in 2013-14 with a total of 104679 patients against the total patients treated in 2012-13 were 107981. From the study it is clear that 33.56 % vacant posts and 13 % of the equipments not in working condition resulted in treatment of patient reduced by 3302 compare to last year 2012-13 of 107981.

Key words: Management and Regulatory Capacity, Resources, Men, Materials, Management.

INTRODUCTION

The term management is a generic term used often by one and all, and plays a very important role in any organization in successor failure over a period of time management has gained importance because of the following reasons (VSP. Rao & Narayana, 1983).

- (a) Expectation of the society.
- (b) Growing complexities of business.
- (c) Huge size of business requirement heavy investment.
- (d) Increasing competition in the market.
- (e) Eves changing technology.
- (f) Tough social marketing and sensitive issues like health.

Human resource management (HRM, or simply HR) is a function in organizations designed to maximize employee performance in service of their employer's strategic objectives. HR is primarily concerned with how people are managed within organizations, focusing on policies and systems. HR departments and units in organizations are typically responsible for a number of activities, including employee recruitment, training and development, performance appraisal, and rewarding (e.g., managing pay and benefit systems).[HR is also concerned with industrial relations, that is, the balancing of organizational practices with regulations

arising from collective bargaining and governmental laws.

HR is a product of the human relations movement of the early 20th century, when researchers began documenting ways of creating business value through the strategic management of the workforce. The function was initially dominated by transactional work, such as payroll and benefits administration, but due to globalization, company consolidation, technological advancement, and further research, HR now focuses on strategic initiatives like mergers and acquisitions, talent management, succession planning, industrial and labor relations, and diversity and inclusion.

Management capacity in its practical sense is the Capacity building to enhance efficiency of stake holder's at all level viz., admin, finance, secretaries, executives and management staffs etc., to undertake activities properly across all functional areas, by

- Drafting clear-cut roles and responsibilities of each staff/ members without any ambiguity and overlapping.
- Provisions for specific capacity building (training, workshop etc..) programs for all staffs based on their need and work, general management principles, introduction of new

methods and technologies etc.,

- Provision of sensitization programs for attitude change (for better service delivery or output) of different staffs (Satyajeet Nanda, 2006).

The father of scientific management was Fredric W. Taylor in the year 1878 to 1890 studied workers efficiency and attempted to discover the "one best way" one fastest way to do a job". He exhorted the drastic changes in technology, the growth of organization, the rise of union and the government concerns and interventions concerning working people resulted in the development of personnel departments. Improvement in the health status of people requires co-coordinated efforts of the health sector and supportive activities of other sectors such as nutrition, education, housing, water supply and sanitation Health and family welfare Department established by government (Central as well as state) which is responsible for formulating policies and implementing health care programme, providing promotive, preventive, curative and rehabilitative services accordingly and includes at least the followings.

- Education concerning prevailing health problems and the methods of preventing and controlling them.
- Promotion of food supply and proper nutrition.
- Adequate supply of safe water and basic sanitation.
- Maternal and child health care and family planning.
- Immunization programme.
- Prevention and control of endemic diseases.
- Appropriate treatment of common diseases and injuries.
- Provision of essential drugs.

Tumkur district is about 70 Kms to the west of Bangalore, the capital city of Karnataka, three national highways run through the district connecting many districts of Karnataka to Bangalore. Tumkur is at 818.51 metres from the sea level has 10596 Sq km land area and it is in the third place in land area of Karnataka state occupying 5.53% of total area consisting of 10 taluks, for the smooth administration district divided into three revenue divisions.

According to 2001 census Tumkur district is having a population of 2584711 [rural 2077509, urban 507202] out of which males are 1313801 females are 1270910 with a literacy rate of 76.10% and 56.90% respectively.

Tumkur district has 10 towns and 2708 villages where 5.50 lakh families resides, out of which 4.41 lakh (80.18%) and 1.09 lakh (19.82%) families resides in rural and urban areas respectively.

From the table-1 it is clear that in Tumkur District 01 District Hospital, 09 Taluk Hospitals, 04 Community health centers, 131 Primary Health centres, 02 Urban health centers, 477 sub centers, 22 Ayurvedic hospitals, 01 Homeopathic and 01 unani hospital were providing health facilities.

Tumkur District Hospital was started in 30-01-1948 by Mysore Kingdom Prince Sree Jayachamaraja Odeyar Bhahaddoor. It is a 250 bedded Hospital and in 2001 it is upgraded to 400 bedded hospital with sanctioned posts of 331, out of which 41 are Specialists / Sr specialists, 12 ministerial, 93 Staff nurses, 08 lab technicians, 12 Health Assistants, 48 technical / supporting Staff and 117 group D posts.

Table -1: Government Health facilities in Tumkur district

Health facilities	No.
District hospital	01
Taluk Hospitals	09
Community Health Centers	04
Primary Health Centers	131
Urban Health centres	02
Sub Centers	477
Ayurvedic Hospitals	22
Homeopathy Hospital	01
Unani Hospital	01

The concept of **management regulatory capacity** in District Hospital Tumkur helps in finding the solutions for, why not achieved objectives. Why do policies fail, why do not programme sustain and effective utilization of resources.

Resources like men, money, materials are to be used effectively to achieve goals, Fail to use resources effectively leads to organization failure and for any successful system following accomplishments here to be there, they are-

- (1) Structure,
- (2) Function,
- (3) Human interests.

METHODOLOGY

The study was carried out in Tumkur District Hospital of Karnataka state in India. The current study was based on both primary and secondary sources of data. The primary data was collected with the help of a survey questionnaire. The population consisted of all the District hospital Departments like Specialists, Ministerial Staff, Staff Nurse, technical / supporting staff and group D staff of 20 each. The final sample consisted of 100 staffs selected randomly from the each Department. The data collected for the study was tabulated, processed and analysed using simple statistical tools like frequency and percentage.

RESULTS

A cursory look at the Table 2 indicates that a majority of Technical / Supporting Staff (50%) posts were vacant against the sanction posts of 48 followed by Group D Staff (48.71%) posts were vacant against the sanction posts of 117 and only 60 Group D staff (51.29) were working. 29.26% of Specialists, 23.65% of staff nurse posts were vacant. Against the total sanction posts of 331, only 213 staffs were working and 35.65% of posts were vacant.

Table-2: Details of Staff in District Hospital Tumkur

Categories of posts	Sanctioned	Working	Vacant
Senior Specialists / Doctors	41	29	12
Ministerial	12	12	00
Staff Nurse / Sr staff Nurse	93	71	22
Lab Technicians	08	06	02
Health Assistants	12	11	01
Technical / Supporting Staff	48	24	24
Group D	117	60	57
Total	331	213	118

It is evident from Table 3 that out of 508 equipments only 442 equipments were working and 66 equipments (13 %) were not working.

Table -3: Details of Equipments in District Hospital Tumkur

Departments	Total Equipments	Working	Not Working
Emergency ward	48	44	4
Maternity care	18	17	1
Major OT	59	51	8
Laboratory	66	64	2
Eye Department	18	17	1
ICCU	25	18	7
Radiology	4	3	1
Burns Ward	23	23	0
Physiotherapy	13	13	0
OPD	48	26	22
Electric laundry	7	7	0
Haemodialysis Ward	18	18	0
NICU	60	60	0
Telemedicine	21	18	3
IPP OT ward	8	7	1
Regional Diagnostic lab	51	41	10
Art Centre	15	15	0
Geriatric Ward	6	0	6
Total	508	442	66

Table-4:Details of Patients in District Hospital Tumkur during 2013 & 2014

Month	2012 - 2013	2013 - 2014
April	19107	18561
May	21081	21542
June	20956	23869
July	20888	26831
August	22217	24440
September	21794	23551
October	21959	21905
November	20947	21558
December	21999	3283
January	21183	22978
February	17721	20825
March	20938	21775
Total	107981	104679

DISCUSSIONS

It is clear from Table 4 that the patients treated reduced to 3302 in 2013-14 with a total of 104679 patients against the total patients treated in 2012-13 were 107981 as a result of and 35.65 % of vacant posts and 13 % the equipments were not working even though funds / money availability is good. It is evident from the study that 33.56 % vacant posts and 13 % of the equipments not in working condition resulted in treatment of patient reduced by 3302 compare to last year 2012-13 of 107981.

CONCLUSION

From the findings it can be concluded that even though good availability of funds / money were there resources like Human & equipments shortfall resulted in failure to achieve the objectives / goals.

Patients treated reduced to 3302 in 2013-14 with a total of 104679 patients against the total patients treated in 2012-13 were 107981 due to 35.65% of vacant posts and 13% of the equipments not in working conditions. Coordinated effort is needed to utilize all recourses effectively by motivation, training, incentive etc to achieve organizational goals.

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