

## **HR Practices and Satisfaction of Healthcare Employees in Various Hospitals of Bareilly District in Uttar Pradesh**

**Praveen Bajpai, Hitendra Shukla  
Rajeev Singh Bhandari and Lalit Mohan Pant\***

*Department of Management Studies  
Invertis University, Bareilly*

**Abstract:** Healthcare organizations and the overall healthcare industry in India are witnessing significant growth for the last few years. The proliferation and the expansion of healthcare institutions is a testimony to the fact that the sector is growing at an increasingly fast pace; both in terms of annual revenue and its contribution to the economy. The work aims at exploring and analyzing the impact of various HR practices that can have on the overall satisfaction of doctors and staff members. The study is conducted on the employees of various hospitals in the Bareilly district of Uttar Pradesh and focuses on identifying the kind of HR practices being implemented in various hospitals in Bareilly and resulting satisfaction of employees with those practices. Results reveal that organizations, which are accredited and putting a strong adherence to the HR practices and their implementation are performing exceedingly well because of the superior performance outcomes of their employees in comparison to those organizations that are not accredited and not following the implementation of HR practices.

**Keywords:** Hospitals, Accredited, Non-Accredited, Bareilly, HR Practices, Employee Satisfaction.

### **1. Introduction**

The Healthcare Industry in India has become one of the largest sectors of our country – both in terms of annual revenue and in providing employment to the citizens of this country. The Healthcare Industry typically comprises of Hospitals, Devices used in Medical Services, Clinical Trials, Employee and Staff Outsourcing, Health Insurance Services, Medical Tourism, Equipment and Allied Services etc. The Indian Healthcare Industry has witnessed tremendous growth and development in the last few decades owing to the strengthening of its coverage, services and an exponential increase in the investment made by the Public and Private players of this sector. The Healthcare industry in India is typically classified into two components – Public and Private. Public component includes the medical and healthcare services provided by the Government of India as basic medical and healthcare services at district level and in the form of Primary Healthcare Centers at the rural level.

---

\*Email: [Impant33@gmail.com](mailto:Impant33@gmail.com)

The Private sector on the other hand provides basic, primary, secondary, tertiary and quaternary medical services across the metropolitan cities of the country, tier 1 and 2 cities and to a limited extent in tier 3 cities as well. The biggest competitive advantage for India in terms of the medical services lies in the fact that it has a very large pool of well trained and skilled medical professionals who are providing their services at extremely competitive rates. The cost of medical services in India is also very less as compared to some of its counterparts in Asia. Cost competitiveness is another advantage that India medical institutions have as compared to their competitors in Europe and America. However, one serious problem that our country is currently facing is its inability to provide better medical services to all the countrymen. India ranks 144<sup>th</sup> out of 200 odd nations in the world in terms of providing quality healthcare services and making it accessible to all. This is one area where our country has to put in a lot of efforts to improve its picture on a global level.

The current scenario of the healthcare services in our country is such that the existing healthcare institutions (primarily the private sector players) are focusing on expanding their coverage by opening newer institutions or expanding the existing chain of institutions in those parts of the country where there is huge demand and possibility of a flourishing business. This expansion in terms of coverage is backed by focus on quality, inclusion of latest tools and techniques, usage of information technology and modern gadgets to make the delivery process more exclusive and simple and building state of the art infrastructure to manage the expectations of the customers. The various dimensions of Human Resources Management that finds tremendous amount of scope and applicability in the Healthcare sector include:

- Careful assessment of the various types of jobs and employment opportunities available.
- Analyzing the manpower needs of an organization and simultaneously conducting the recruitment process for hiring competent people.
- Implementing the various kinds of training practices that are recommended by the Apex Industry Associations like NABH etc. to focus on building a skillful and talented pool of medical services professionals.
- Providing best in the segment compensation to attract the *crème-del-a-crème* of the segment and to manage their retention as well.
- Establishing strong communication with the employees and trying to build their commitment and loyalty towards the organization.

**NABH:** In the Healthcare sector of India, the apex body that provides accreditation to all the Healthcare institution and ensures strict compliance to the various HR related practices and standards are the National Accreditation Board for Hospitals and Healthcare Providers

(NABH). National Accreditation Board for Hospitals and Healthcare Providers is basically a constitutional body and an important arm of the Quality Council of India that was set up in 2005 to operate and establish various procedures and set guidelines for accreditation of Hospitals and Healthcare institutions in our country. NABH along with the Quality Council of India have relentlessly worked hard in preparing a comprehensive and exhaustive document that provide the standards and the guidelines for the hospitals and healthcare institutions to follow to get the accreditation from NABH.

These guidelines and the set of standards consists of a comprehensive set of around 650 plus objectives to be strictly followed and achieved by the hospitals and the healthcare institutions for getting the accreditation from the NABH. These set of comprehensively designed objectives are divided into two categories namely Employee/Organization focused objectives and Patient centric objectives. To strictly comply with these set of different objectives, the hospitals and healthcare institutions are required to adopt a quality centric, focused and process driven approach across all the activities related to the functioning of hospitals and healthcare institutions. Right from the entry and the registration of the patient to his admission, medication, surgery pre and post to the exit and the discharge of the patient, the hospital and the healthcare institution are required to follow guiding standards and the protocol objectives been designed by the NABH. Not only the various clinical aspects that are been required to be followed, but also the governance aspects should also be quality focused and process oriented. The broad classification of the various dimensions of those guidelines are focused upon the following elements

- Accessibility and Quality of Patient Care
- Clinical Assessments
- Medication Facilities and its Management
- Rights of the Patients and their protection and comprehensive coverage
- Infection control in Hospitals and Healthcare institutions
- Quality centric processes
- Sheer and strict compliance to all the policies and procedural guidelines
- Implementation of the various Human Resource Management practices for employees and the staff members of Hospitals and Healthcare institutions
- Proper management of data and information.
- Implementation of various training and development practice and initiatives as prescribed by the NABH
- Total Quality Management
- Continuous improvement
- Process driven approach backed by continuous monitoring and assessment.

## **2. Literature Review**

In the past few decades, many healthcare organizations and hospitals have shown a great amount of interest in appreciating the impending need for strengthening the various kinds of Human Resource Management practices for the holistic growth and development of their employees so that they can function in a better way and deliver superior performance.

As a result of which, healthcare institutions and hospitals have started spending a considerable amount of time and money in the effective planning, designing and implementation of all such practices that can significantly enhance the overall productivity of their employees. The current liberalized economy puts a strong connotation in front of the Indian Healthcare Organizations and expects them to compete in an effective manner not only at the local and national level with home grown competitors but also at the international level with several world class and global healthcare organizations. Human Resources are the biggest asset for any organization. Their satisfaction and their overall development determine the overall success of the organization. More so, in the field of healthcare, the role of employees or the internal customers of the organization become even more important. They are the saviors of human life and their satisfaction with their job and work-life is extremely important. Woodland (1996), While working on his research work on the importance of HRM practices in the Healthcare sector, elucidates that all those Healthcare Institutions and Hospitals that are investing a substantial amount of money and time in providing best in class training to its Doctors and Staff members are doing exceedingly well in comparison to those organization that are not paying any kind of attention on this fundamental dimension,. HRM practices are extremely important in raising or enhancing the Job-Satisfaction of employees and sufficiently motivating them to perform better in their jobs (Allens, 1999).The more the employees are satisfied with their jobs and able to strike a balance between their work and family life, the more it is better for the organization because it guarantees a superior performance from the employees that helps in having a substantial competitive advantage over its competitors (Bernard, 2003).

The work done by Yang (2002) confirms and establishes a fundamental relationship between the training of employees with their overall performance outcomes. It was clearly described in his research work that performance outcomes of employees determines the overall satisfaction of the patients.

A study conducted by Evans (2007) confirms that the performance of doctors and the nature of patient care in a healthcare institution largely depend upon the amount of contentment and satisfaction they derive from their job and the type of support they get from their organization. It is the fundamental responsibility of the administrators and the management to ensure this aspect of their overall work.

The management of an organization HRM practices is of utmost importance because it severely affects the overall profitability and the thorough competitiveness of the firm by because of its strong linkage with the overall satisfaction and performance of the employees (Blundell, 2009). The HRM audit and regular HRM inspection can assess and contemplate the effective role of such practices on the overall performance of the employees and significantly measures their relative impact on the growth of an organizations brand image and its competitiveness in the market (Yank, 2010).

Human Resource Management and its application in the field of Healthcare and administration of Hospitals has evolved from merely being a rubber stamp to a strategic partner helping the modern day organizations align their overall HR practices with core operations and processes to achieve excellence (Mchourghty, 2012). Particularly, in the Indian context, the role of HR has grown significantly in the past few years and it has been trying to establish itself as an enabler of superior organizational performance in this complex and ever changing business environment (Gupta, 2013). The modern day perspective on the role of HR views it as a strong proponent of identifying and developing talent in this volatile market and business environment (Amrita, 2015).

In research works that specifically focused upon the comparison of work-performance of doctors and staff members in accredited hospitals as compared to the performance of doctors and staff members in non-accredited hospitals, it has been largely found that doctors and staff members feel more secured and comfortable in working in accredited hospitals and vice-versa (Sengupta, 2017). Besides this, it has also been found out that job-satisfaction and feedback of patients with respect to the medical and therapeutic treatment, patient care and overall satisfaction of the patients was also high in the former (Brown, 2018).

This study is designed to identify the various Human Resource Management practices in the Hospitals of Bareilly District, to Analyzing the satisfaction level of employees about the HR practices in their organizations, to check whether there is any relationship between the satisfaction level of employees and the presence of HRM practices and to check whether there is any relationship between satisfaction of employees and their quality of life.

We formulate the following hypothesis:

**H<sub>01</sub>:** There is no association between the HR practices and the satisfaction of healthcare employees.

**H<sub>02</sub>:** There is no association between the satisfaction of healthcare employees with the HR policies in their organization and their overall quality of life (work/family).

### 3. Data and Methodology

**Sample Area and Size:** In Table 1 showing the respondents are divided in two parts, first part is related the doctors and staff members of accredited hospital in Bareilly district and second part is related the doctors and staff members of non-accredited hospital in Bareilly district.

**Table 1: Accredited and non-accredited hospital in Bareilly district**

S.N.	Hospital	No of hospital	No of respondents
1.	Accredited. Hospital	10	127
2.	Non.Accredited Hospital	10	127
	<b>Total</b>	<b>20</b>	<b>254</b>

**Sample Size:** Sample size used for the research study was 258 out of which 254 samples were considered appropriate for the purpose of data analysis and interpretation. The respondents selected for the research study belonged either from the accredited or from the non-accredited hospital in the Bareilly district.

**Data Collection:** This study has been based on both primary and secondary data. Primary data have been collected from the respondents the questionnaires/ Schedule and interview. The questionnaire consisted of three parts. First part belonged to the basic information of the respondents, second part consist of statements aimed at identifying the various HR practices being implemented in a particular hospital and the third part consisted of questions related to the satisfaction of employees with the HR policies. While secondary data has been collected from NABH website and other sources.

### 4. Data Analysis

In present research, the data have been analyzed through SPSS and chi square test has used for testing hypothesis.

#### 4.1. Demographic Profile of the Respondents

59.05% doctors and 40.95% staff members has been consider of research in which 70.07% respondents are male and rest 29.93% are females. According to table no 6.4, 64% doctors are married and 36% doctors are unmarried if we are taking about education of doctors than 58% doctors have MBBA and MD/MS while only 9.33% doctors have post-doctoral. 63.46% staff members are married and 55.76 % staff has paramedics and lab technicians.

#### 4.2. Demographic factors and their impact on employee satisfaction

**Age:** In context to the age of the respondents, the employees in the age bracket of 41-50 were the most satisfied (mean score – 2.74, std. deviation – 0.71) followed by the ones in the age bracket of 51 and above. The dissatisfaction was highest in the respondents

belonging to the age bracket of 31-40 (mean score – 3.23, std. deviation – 1.21) followed by the ones in the age bracket of 18-30. The explanation to such a pattern of responses can be attributed to the fact that 31-40 is that time in the life of a healthcare professional during which the challenges related to career development, job/employment and managing family affairs are at its peak.

This stage is usually followed by a comparatively relaxed phase (41-50) in which the employee is well settled and is in a better position to look after each and every aspect of his/her life.

**Marital Status:** As far as marital status is concerned, the impact of family responsibilities seemed more on married healthcare employee's professionals as compared to unmarried ones. While both single (mean score=4.13) and married respondents (mean score=3.89) agreed to the fact that commitment and involvement to/with family responsibilities does have a significant impact on their work and career advancement prospects of employees, the unmarried ones (mean score = 3.07) agreed less on this. Another difference was also observed in the preference of healthcare professionals regarding flexibility of work in terms of working in proper shift and aspects related to job sharing. Married ones (3.33) and unmarried ones (2.89) reflects that married healthcare professionals need more amount of work flexibility as compared to their unmarried counterparts.

**Gender:** The responses given by the respondents followed quite a similar structure and nature as it was in the case of the marital status. The responses were quite equivocal on various common aspects but it was female the respondents who raised a predominantly louder voice on aspects related to working hours, perceived support from the colleagues and overall working environment. The observation can be attributed to the very fact that female share a dual responsibility of managing their work and family responsibilities. While unmarried female respondent (mean score = 2.89) found themselves in a comparatively better position to handle the challenges of work and family, the married ones (mean score = 3.29) demanded several additional liberties and were not that much satisfied as compared to the former ones.

**Nature of work:** In terms of the nature of work, doctors (mean score 3.23, standard deviation = 0.76) were found to be more satisfied than the other healthcare staff members that included the nursing staff, paramedical staff, lab technician and other office staff members.

## **5. Results of Testing of Hypothesis**

### **5.1. HR practices and the satisfaction of employees**

H<sub>01</sub>: There is no association between the HR practices and the satisfaction of healthcare employees.

The association was tested using Chi-square and t-test at 5% level of significance. Both Chi-square and t-test are statistical tests which are designed to test and quite possibly reject the null hypothesis. While a t-test test the null hypothesis about two means, a chi-square test tests a null hypothesis about the relationship between two variables. Further, z –test is also applied to determine whether the population means are different because the sample size is large. The results indicate that null hypothesis was rejected and alternate hypothesis was accepted as there is association between the HR practices implemented in an organization and the satisfaction of healthcare employees.

**Table 2: Results of Chi-Square Test of hypothesis 1**

	<b>Value</b>	<b>df</b>	<b>p-value</b>
<b>Pearson's Chi-Square</b>	25.435	2	.000

Table 2 indicates that, p-value is 0.00 which is less than standard value 0.05. Therefore, chi square test is rejected. Hence, null hypothesis is rejected and alternate hypothesis is accepted. There is association between the HR practices and the satisfaction of healthcare employees.

**Table 3: Results of z-test of null hypothesis – 1**

<b>SE of Diff. of Mean</b>	<b>Diff. of Mean</b>	<b>Calculated z value</b>	<b>Table z value</b>	<b>Null Hypothesis</b>
<b>1.65</b>	6.24	4.17	1.96	Rejected

Table 3 shows that calculated z value 4.17 is greater than table z value 1.96 hence Null Hypothesis is rejected.

## **5.2. Satisfaction of employees and the quality of life**

$H_{02}$ : There is no association between the satisfaction of healthcare employees with the HR policies in their organization and their overall quality of life (work/family).

The association was tested using Chi-square and t-test. Both Chi-square and t-test are statistical tests which are designed to test and quite possibly reject the null hypothesis. While a t-test test the null hypothesis about two means, a chi-square test tests a null hypothesis about the relationship between two variables. Further, z –test is also applied to determine whether the population means are different because the sample size is large. The results indicate that null hypothesis is rejected and alternate hypothesis is accepted as there is association between the career decisions of the respondents and their work city.



**Table 4: Results of Chi-Square Test for hypothesis 2**

	Value	df	p-value
Pearson's Chi-Square	15.227	2	.000

Table 4 indicates that, p-value is 0.000 which is less than standard value 0.05. Therefore chi square test is rejected. Hence, null hypothesis is rejected and alternate hypothesis is accepted. There is association between the satisfaction of healthcare employees with the HR policies of the organization and their overall quality of life.

**Table 5: Results of z-test of hypothesis – 2**

SE of Diff. of Mean	Diff. of Mean	Calculated z value	Table z value	H <sub>0</sub>
1.64	8.16	3.92	1.96	Rejected

Table 5 shows that calculated z value 3.92 is greater than table z value 1.96 hence Null Hypothesis is rejected.

## 6. Conclusion

The providers of the medical services, need to be more focused on the various dimensions of Human Resource Management to bring more efficacy and superior performance outcomes in the overall service delivery process. Besides this, there has to be an inclusion of adequate amount of innovation in meeting the expectations of the customers at an affordable and competitive price, because it is something that bothers the Indian consumers a lot (considering the fact that almost 65% population of this country finds itself incapable of accessing better medical facilities because of their higher prices and because of their low levels of incomes). The profession of doctors and healthcare staff members is the noblest amongst all the professions; and the most challenging as well. It is imperative for organizations and management to continuously think about their individual needs and try to maximize their satisfaction by providing adequate amount of facilities in the form of HR practices that will not only enhance their satisfaction but also increase their commitment and loyalty towards the organization, which is extremely important for the perspective of a healthcare organization/hospital.

## References

- Allens, P., 1999, Antecedents of Employee Satisfaction. *Journal of Scientific and Technological Research*, 1(11), 42-53
- Amrita, M., 2015, Job Satisfaction among healthcare workers in the state of Karnataka and Tamil Nadu. *Journal of Psychological Health and Research*, 3(2), 167-181.

Atkins, P., 2005, A study on motivation and satisfaction of employees in various hospitals of Europe. *Journal of International Health Review*, 5(2), 111-123.

Bernard, S., 2003, Analyzing the impact of various HR practices on employee motivation and satisfaction – A cross-sectional study on the employees working in the leather industry. *Journal of Scientific Research*, 3(1), 212-220.

Blanck, W., 1987, Measuring the perception of healthcare professionals towards the HR practices in their organizations – An empirical study. *International Journal of Clinical Psychology*, 4(1), 21-34.

Blundell, T., 2009, Analyzing the various factors that impact the satisfaction of employees working in the healthcare sector. *Journal of Organizational Management*, 11(2), 104-123.

Brown, A., 2018, Measuring the work-place satisfaction of doctors and healthcare staff members – An exploratory study. *Journal of Remedial Medicine*, Euteledge, 119-134.

Evans, P., 2007, Work-place satisfaction and perception towards the HR practices – An exploratory study on the employees of various corporate hospitals in North America. *Journal of Clinical Research*, 2(1), 19-32.

Gupta, A., 2013, Managing workers at work-place, *IMR Reprint*, 23-30.

Mchoughty, W., 2012, Annals of Work-place satisfiers – *IMA Reprint*, 2(1), 32-44.

Woodland, J., 1996, Understanding the various factors that help an individual survive at the work-place – Study on doctors and nurses working in the healthcare industry in Minnesota. *Open Access Journal of International Healthcare Review*, 11(3), 123-142.

Yang, A., 2002, Descriptive Research on the mental well-being of healthcare workers in Western Australia. *International Journal of Psychological Research*, 12(1), 101-112.

Yank, P., 2010, Diagnostic strategies aimed at identifying the coping behavior of healthcare workers. *Journal of Multidisciplinary Research*, 2(1), 126-142.

Sengupta, A., 2017, Analyzing the satisfaction of doctors and healthcare staff members working in various hospitals of India. *Journal of Organizational Research*, 10(2), 192-208.

Singh, P., 2003, Measuring the satisfaction of hospital nurses towards the HR practices of their organizations in the state of Punjab – An exploratory study, *Journal of Health Sciences*. 21(4), 123-136.

Vishwas, R.T., 1999, Antecedents of work-life balance and satisfaction of employees. *Journal of Health Review*, 12(3), 34-47.