Hospital Administrators' Roles in Public and Private Hospital

*Dr. Arif Syed **Dr. Chandra Sekhar S.F

ABSTRACT

Hospital administration has come of age since the last 50 years. During this period, there have been ample efforts expended by researchers across the world in attempting to understand the nature of work performed by the administrators in general and hospital administrators in specific. Surprisingly, as evident from literature survey, not much work has been done to understand what are the roles performed by the hospital administrators either by type of hospitals employing them or by specialization by which they perform their tasks. Further, how much of time do they spend in such roles while performing their tasks? Understanding the roles performed by them not only contributes to their personal and professional effectiveness, but also contributes to higher quality treatment outcomes satisfying to the patients and to the superiors in the hospitals, encouraged by such views, the present study explores the roles performed by the administrators representing public and private hospitals, medical and non-medical units, senior, middle and junior levels of management. Interestingly, the Implications for practice and future research have been drawn.

Introduction

Ever since the publication of "the social psychology of organizations" by Katz and Khan (1966), the roles, tasks, functions and responsibilities of managers and administrators have become the buzzword when attempts made over understanding the managers and managerial work all overYenersoy G(1997).

Further, since "The practice of management "authored by Peter F. Drucker (1965), there has been a plethora of studies conducted and published attempting to understand the work performed by the administrators and managers across a wide spectrum of businesses. It was

only during the late 70s; Henry Mintzberg's (1973) seminal work on "the nature of managerial work" captured the attention of the researchers and practitioners world-wide for the most practical evidences of the nature of the work of the managers. Mintzberg (1973) states that there are three sets of roles- the interpersonal, informational and decisional roles, managers and administrators perform irrespective of their specialization and sectors of business in which they operate, on a regular basis. On further examination of the literature survey, it is surprising to come to grips with the scenario of not having much of the scientific literature on the nature of hospital managers, leaving a wide gap in the

Naturopathy Consultant and Hospital administrator,
 Healing Hands – Naturopathy and Yoga center, Hyderabad, Andhra Pradesh - 500016.

^{**} Professor and Chair (HR Area) Siva Sivani Institute of Management, NH7, Secunderabad - 500014.

literature on hospital managers' nature of work (Sperry L., 2003; Lyles IR, Joiner C., 1986). This has been the underlying motivation to conduct a study that could throw more light on understanding the roles performed by the hospital managers (Adair J., 2000).

The Present Study

Hospitals usually operate on a unique organizational structure called the three-legged wobbly stool structure, namely, medical, paramedical and administrative functions (Darr and Rackich, 1985). In each of these functions, there are managers and administrators who perform certain roles, often causing interpersonal conflict arising out of less understood the interdependent nature of their job (Zuckerman, 1989). Eventually, the hours of time spent in conflict resolution was only giving the way for harmonizing such interpersonal relations, often ignoring the fact that the patients are at a loss during their interpersonal wrangles (Quina, 1988).

In the absence of research studies on roles of hospital managers, there is a lack of understanding about the effectives of administration, quality of work performed, and patient satisfaction, all of which will negatively effect the hospital effectiveness (Lorange, 1980). Encouraged by such views, the present study was conducted in two select public and private hospitals.

Thus, the present study has threefoldpurpose. Firstly, it will assess the roles performed by the hospital managers representing public and private hospitals in the twin cities of Hyderabad and Secunderabad. This way, the inter-sectorial variations in the roles performed by the mangers come to surface while attempting to understand the nature of work performed in hospitals. Secondly, how do the roles performed, differ across medical and non-medical managers in these hospitals? This is a very crucial question to address as medical and nonmedical managers are known for frequently in conflicts with each

other in their daily work. Thirdly, how are these roles performed by the mangers according to the level of functioning? For examples, are these roles performed by the seniors same as those performed by the middle and the junior managers. These issues are addressed further in this research. In view of these purposes, the following objectives are formulated.

- To assess the roles performed by the hospital managers in the select hospitals of the twin cities of Hyderabad and Secunderabad.
- To analyses these roles according to the type of hospitals, type of specialization and level of functioning of the managers.
- How are the roles per se performed and the time spent in performing these roles are related.

Hypotheses

In view of the objectives stated, the following hypotheses have been formulated for further testing.

- Roles performed by hospital administrators do not vary according to the hospital type and administrators' specailisation type.
- Roles performed by hospital administrators do not vary according to the hospital type and administrators' level of functioning.

The Method

84 hospital managers, 60 each from select public and private hospitals, were contacted and a structure questionnaire was administered to them seeking information about their roles performed and the time spent in performing those roles. However, only 49 from private and 40 from public hospitals have returned the filled-in questionnaires. The roles identified from the theory and research studies are i) Budgeting, ii) Patient Care, iii) Planning, iv) Organisation, v) Staffing, vi) Supervising, vii) Evaluating and viii) External

relations. All of these roles were converted into a single item scale resulting in an 8-item scale for the assessment of the hospital mangers roles. Further, time spend on i) Decision making, ii) supervising and motivating people, iii) Receiving and reviewing information, iv) Patient care, v) External relations and vi) Other activities. A 6-item scale developed by Brandt (1996) was adopted to assess all the managerial roles in hospital context. Coefficient of alpha reliability of the scales was computed to know the internal consistency of the scale. The alpa coefficient of .78 provided sufficient support for the reliability of the scale. Having established the reliability of the scales used to assess the roles performed and the time spent in performing, a detailed analysis was done with the help of mean and standard deviations. In order to know about the significance of mean variations, f-values are computed.

Results and Discussions

In order to test the null hypothesis "Roles performed by hospital administrators do not differ according to the hospital type and administrators' specailisation type", the roles performed by the Hospital Managers are analysed according to the type of hospital and the functional Specialization of the managers. Further, their roles are categorically listed as Interpersonal, Informational, Decisional, Treatment roles. Means and standard deviations for each of the roles according to the type of hospital and type of specialization of the managers are presented in table 1. Further, for the significance of variance in the mean scores, f-test values have been computed and presented in the same table.

Hospital Administrators' Roles by Hospital Type and Specallisation Type:

With regards to the interpersonal roles it was identified that there are two important roles that are performed by the managers namely, Staffing and Supervising. Firstly, Staffing in which the supportive managers from the private hospitals (4.33) are found performing such role more

frequently than the Administration (3.85) and Medical (3.50) besides, when compared to their counterparts in the public hospital whose mean (3.67) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words staffing roles is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Similarly, staffing the supportive managers from the public hospitals (3.67) are found performing such role more frequently than the Administration (3.48) and Medical (3.00) besides, when compared to their counterparts in the private mean (4.33) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words staffing roles is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Considering interpersonal roles it was identified that there are two important roles that are performed by the managers namely, Staffing and Supervising. Secondly, supervising in which the supportive managers from the private hospitals (4.00) are found performing such role more frequently than the Administration (3.58) and Medical (3.17) besides, when compared to their counterparts in the public hospital whose mean (4.33) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words supervising roles is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Furthermore, supervising role of the supportive managers from the public hospitals (4.33) are found performing such role more frequently than the Administration (3.84) and Medical (3.22) besides, when compared to their counterparts in the private mean (4.00) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words supervising roles is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Table 1: Roles by Type of Hospital by Managerial Specailisation

S. No.			Private			Public		F- value	D.F	P=
		Administration	Medical	Supportive	Administration	Medical	Supportive			
_	Interpersonal									
а	Staffing	3.58	3.17	4.33	3.48	3.00	3.67	.270	2,88	.764
q	Supervising	3.85	3.50	4.00	3.84	3.22	4.33	.229	2,88	962.
=	Informational									
v	External Relations	2.63	2.83	3.67	2.60	2.56	1.83	3.64	2,88	.03
≡	Decisional									
q	Planning	3.53	3.67	3.33	3.28	3.56	3.33	.052	2,88	.949
Ф	Organising	3.62	3.66	3.00	3.32	3.27	3.33	.300	2,88	.742
-	Budgeting	2.80	2.66	4.33	2.68	2.27	3.00	1.15	2,88	.320
2	Treatment									
g	Patient Care	3.88	4.00	4.67	3.88	4.22	4.00	.554	2,88	.577

With regards to the Informational roles it was identified that there is only one important rolewere performed by the managers namely, External Relations. In External Relations the supportive managers from the private hospitals (3.67) are found performing such role more frequently than the Administration (2.63) and Medical (2.83) besides, when compared to their counterparts in the public hospital whose mean (1.83) and the others. Interestingly variations in such mean scores are statistically significant. In other words an external relation role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

On the other hand, the external relation role of Administrative managers from the public hospitals (2.60) are found performing such role more frequently than Medical (2.56) and supportive (1.83) besides, when compared to their counterparts in the private mean (2.63) and the others. Interestingly variations in such mean scores are statistically significant. In other words an external relation role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Regarding, the Decision roles, it was identified that there are three important roles that are performed by the managers namely, Planning, Organising, Budgeting. Firstly, planning role, here medical managers from the private hospitals (3.67) are found performing such role more frequently than the Administration (3.53) and supportive (3.33) besides, when compared to their counterparts in the public hospital whose mean (3.56) and the others. Interestingly variations in such mean scores are statistically insignificant. Thus, planning role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Subsequently, planning role of medical managers from the public hospitals (3.56) are found performing such role more frequently than supportive (3.33) and administrative (3.28) besides, when compared to their counterparts in the private mean (3.67) and the others. Interestingly variations in such mean scores are statistically insignificant. Hence, planning role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

For instance, the Decision roles, it was identified that there are three important roles that are performed by the managers namely, Planning, Organising, Budgeting. Secondly, Organising role, here medical managers from the private hospitals (3.66) are found performing such role more frequently than the Administration (3.62) and supportive (3.00) besides, when compared to their counterparts in the public hospital whose mean (3.27) and the others. Interestingly variations in such mean scores are statistically insignificant. Thus Organising role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Consequently, the Organising role of supportive managers from the public hospitals (3.33) are found performing such role more frequently than administrative (3.32) and Medical (3.27)besides, when compared to their counterparts in the private mean (3.00) and the others. Interestingly variations in such mean scores are statistically insignificant. Therefore, Organising role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Speaking about, the Decision roles, it was identified that there are three important roles that are performed by the managers namely, Planning, Organising, Budgeting. When it comes to budgeting role, the supportive managers from the private hospitals (4.33) are found performing such

role more frequently than the Administration (2.80) and Medical (2.66) besides, when compared to their counterparts in the public hospital whose mean (3.00) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words budgeting roles is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Furthermore, budgeting role of the supportive managers from the public hospitals (3.00) are found performing such role more frequently than Administrative (2.68) and Medical (2.27) besides, when compared to their counterparts in the private mean (4.33) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words budgeting roles is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Subsequently, the Treatment role, it was identified that there is only one important role were performed by the managers namely, patient care. The inpatient care role, the supportive managers from the private hospitals (4.67) are found performing such role more frequently than medical (4.00) and Administration (3.88) besides, when compared to their counterparts in the public hospital whose mean (4.00) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words patient care role is a universally performed role in all the hospitals by their managers irrespective of their specialization.

Finally, the patient care role of the medical managers from the public hospitals (4.22) are found performing such role more frequently than supportive (4.00) and Administration (3.88) besides, when compared to their counterparts in the private mean (4.00) and the others. Interestingly variations in such mean scores are statistically insignificant. Hence, patient care roles are universally performed role in all the hospitals by their managers irrespective of their specialization.

Hospital Administrators' Roles by Hospital Type and Level of Function:

In order to test the null hypothesis "Roles performed by hospital administrators do not differ according to the hospital type and administrators' level of functioning", the roles performed by the Hospital Managers are analysed according to the type of hospital and by level of function of the managers. Further, their roles were listed accordingly as Interpersonal, Informational, Decisional, Treatment roles. Results in this regard are presented in table 2.

To start with interpersonal roles it was identified that there are two important roles that are performed by the managers namely, Staffing and Supervising. Firstly, Staffing in which the Lower level managers from the private hospitals (3.88) are found performing such role more frequently than middle level managers (3.70) and senior level managers (3.14) besides, when compared to their counterparts in the public hospital whose mean (3.10) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words staffing roles is a universally performed role in all the hospitals by their managers irrespective of their level function.

Similarly, middle level managers from the public hospitals (3.52) are found performing such role more frequently than senior level managers (3.43) and lower level managers (3.10) besides, when compared to their counterparts in the private mean (3.70) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words staffing roles is a universally performed role in all the hospitals by their managers irrespective of their level of functioning.

With regards to interpersonal roles, it was identified that there are two important roles that are performed by the managers namely, Staffing and Supervising. Secondly, supervising in which

the lower level managers from the private hospitals (4.13) are found performing such role more frequently than middle level managers (3.81) and senior level managers (3.64) besides, when compared to their counterparts in the public hospital whose mean (3.60) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words supervising roles is a universally performed role in all the hospitals by their managers irrespective of their level function.

Furthermore, supervising role of the middle level managers from the public hospitals (3.91) are found performing such role more frequently than lower level managers (3.60) and senior level managers (3.57) besides, when compared to their counterparts in the private mean (3.81) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words supervising roles is a universally performed role in all the hospitals by their managers irrespective of their level function.

Considering Informational roles it was identified that there is only one important role which was performed by the managers namely, External Relations. In External Relations the senior level managers from the private hospitals (2.79) are found performing such role more frequently than middle level managers (2.74) and lower level managers (2.50) besides, when compared to their counterparts in the public hospital whose mean (2.43) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words external relations roles are universally performed role in all the hospitals by their managers irrespective of their level function.

Furthermore, external relations role of the middle level managers from the public hospitals (2.57) are found performing such role more frequently than senior level managers (2.43) and lower level managers (2.30) besides, when compared to their counterparts in the private mean (2.74) and the others. Interestingly variations in such mean

scores are statistically insignificant. In other words external relations roles are universally performed role in all the hospitals by their managers irrespective of their level function.

For instance, Decision roles, it was identified that there are three important roles that are performed by the managers namely, Planning, Organising, And Budgeting. Firstly, planning role, here Lower level managers from the private hospitals (3.75) are found performing such role more frequently than middle level managers (3.59) and senior level managers (3.29) besides, when compared to their counterparts in the public hospital whose mean (3.00) and the others. Interestingly variations in such mean scores are statistically insignificant. Thus, planning role is a universally performed role in all the hospitals by their managers irrespective of their level function.

Subsequently, planning role of middle level managers from the public hospitals (3.57) are found performing such role more frequently than senior level managers (3.14) and lower level managers (3.00) besides, when compared to their counterparts in the private mean (3.59) and the others. Interestingly variations in such mean scores are statistically insignificant. Hence, planning role is a universally performed role in all the hospitals by their managers irrespective of their level function.

Speaking about, Decision roles, it was identified that there are three important roles that are performed by the managers namely, Planning, Organising, And Budgeting. Secondly, Organising role, here Lower level managers from the private hospitals (3.87) are found performing such role more frequently than senior level managers (3.85) and middle level managers (3.37) besides, when compared to their counterparts in the public hospital whose mean (2.85) and the others. Interestingly variations in such mean scores are statistically insignificant. Thus Organising role is a universally performed role in all the hospitals by their managers irrespective of their level function.

Table 2: Roles by Type of Hospital By Level of Function

P=			.305	.566		936		.515	.221	.683		.624
D.F			2,88	2,88		2,88		2,88	2,88	2,88		2,88
F- value			1.206	.573		0.067		899.	1.537	.384		.474
	S		3.43	3.57		2.43		3.14	3.57	2.71		3.86
Public	Σ		3.52	3.91		2.57		3.57	3.43	2.69		3.96
	Γ		3.10	3.60		2.30		3.00	2.85	2.45		4.10
	S		3.14	3.64		2.79		3.29	3.85	2.57		3.50
Private	M		3.70	3.81		2.74		3.59	28.8	20.8		4.11
	Γ		3.88	4.13		2.50		3.75	3.87	2.75		4.13
		Interpersonal	Staffing	Supervising	Informational	External Relations	Decisional	Planning	Organising	Budgeting	Treatment	Patient Care
S. No.		_	В	q	=	O	=	р	Ө	Ψ.	2	ĝ

Consequently, the Organising role of the senior level managers from the public hospitals (3.57) are found performing such role more frequently than middle level managers (3.43) and lower level managers (2.85) besides, when compared to their counterparts in the private hospital whose mean (3.85) and the others. Interestingly variations in such mean scores are statistically insignificant. Therefore, Organising role is a universally performed role in all the hospitals by their managers irrespective of their level function.

Regarding, the Decision roles, it was identified that there are three important roles that are performed by the managers namely, Planning, Organising, Budgeting. When it comes to budgeting role, the middle level managers from the private hospitals (3.07) are found performing such role more frequently than lower level managers (2.75) and senior level managers (2.57) besides, when compared to their counterparts in the public mean (2.69) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words budgeting roles is a universally performed role in all the hospitals by their managers irrespective of their level function.

Furthermore, budgeting role of the senior level managers from the public hospitals (2.71) are found performing such role more frequently than middle level managers (2.69) and lower level managers (2.45) besides, when compared to their counterparts in the private hospital whose mean (2.57) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words budgeting roles is a universally performed role in all the hospitals by their managers irrespective of their level function.

Subsequently, the Treatment role, it was identified that there is only one important role which were performed by the managers namely, patient care. The inpatient care role, the Lower level managers

from the private hospitals (4.13) are found performing such role more frequently than middle level managers (4.11) and senior level managers (3.50) besides, when compared to their counterparts in the public hospital whose mean (4.10) and the others. Interestingly variations in such mean scores are statistically insignificant. In other words patient care role is a universally performed role in all the hospitals by their managers irrespective of their level function.

Finally, the patient care role of the Lower level managers from the public hospitals (4.10) are found performing such role more frequently than middle level managers (3.96) and senior level managers (3.86) besides, when compared to their counterparts in the private hospital whose mean (4.13) and the others. Interestingly variations in such mean scores are statistically insignificant. Hence, patient care roles are universally performed role in all the hospitals by their managers irrespective of their level function.

Surprisingly, all the null hypotheses have been accepted, indicating that the roles performed by the hospital managers do not vary across type of hospitals, type of specailisation and also the level of functioning of the managers, suggesting that the roles performed by them are global in nature and do not have any variations in them attributed to the ownership of the hospitals.

Implications

Managerial work is replete with programmed and non-programmed decisions carried out incessantly in hospitals. However, it may be very difficult to analyse how much of time they spend in performing each of these roles. Therefore, what matters is reminding of self of consciously performing all of the roles. This way, the effectiveness of managers and the effectiveness of the hospitals would be realized.

As regards Interpersonal roles, managers have to be conscious of improving their image in the presence of their people including patients. This is very crucial since building image of self as a manger in hospitals would derive respect and acceptance from others. Further, they need to cultivate humility and develop empathy as they influence people around them. Besides, enhancing leadership skills, and networking skills need to be a regular feature. All of these would eventually make a manager a role model in his work place for all of his subordinates, colleagues and the clients.

With regard to informational roles, many a time, patients and their attendants are in dark as they do not get adequate and transparent information from the hospital authorities. As a result, they are restless and desperate. Similarly, employees in hospital seem helpless since, they receive instructions periodically which are difficult to respond to and act on them. Therefore, managers in hospitals have to build good communication systems which can address the element of noise and its elimination as far as possible. Using information technology, transparency of communication may be made possible for all the stake holders of a hospital. Lastly, on behalf of the hospital, they need to represent many forums to speak about the hospital. They should be consciously improving the image of the hospital through their address to the audience and to the media.

Lastly, with regard to Decisional roles, Hospital managers need to be the change masters when it comes to improve the quality treatment outcomes. Doctors and managers both have a major responsibility, infact, doctors also are the mangers in many sense, performing managerial roles of making ethical decisions with regard to the treatment of the patients. They also need to

be conscious of the fact that today's healthcare is very costly, therefore, make attempts to build their budgets keeping the costs in mind and also the surplus for the further working capital reserves of the hospital. They also should cut costs not at the cost of tears in the eyes of the employees. Many times, they are compelled to involve in negotiations for wide range of issues ranging from medical, clinical and administrative matters. As far as possible, they need to keep Win-win proposition in their mind while negotiation with a wide number of stake holders including employees, suppliers and the like.

Conclusion

This study addressed one of the most crucial questions about the managerial work in the context of hospitals of public and private ownership. Further, it attempted at addressing the hypotheses claiming invariance in such roles performed by the hospital administrators across two types of hospitals, two specailisation and three levels of functioning. Thus, an interesting lesson emerged from this study that unlike mangers in other sectors of business, the hospital managers do not have any uniqueness in performing their roles in hospitals, creating a new paradigm that the roles are global in nature for both public and private settings.

References

- Adair J., (2000). Problem solving and decision making.[Translate Nurdan Kalaycý]. Ankara: GaziKitabevi; In Turkish.
- Brandt, Edward N, Jr;Broyles, Robert W;Falcone, David J, (1996). Roles of hospital administrators in South Carolina, Hospital & Health Services Administration, 41, 3;,pg. 373.

- Henry Mintzberg's, (1973). The Nature of Managerial Work. New York: Harper & Row.
- Katz, D., & Kahn, R. L., (1966). The social psychology of organizations. New York: Wiley.
- Lorange, (1980). Corporate Planning: An Executive view point Englewood cliffs, NJ: Prentice-Hall, Inc.
- Lyles IR, Joiner C., (1986). Supervision in health care organizations. New York: Delmar Publishers Inc.
- Peter F. Drucker, (1965). The Practice of Management. New York: Harper & Row.
- Quina, R.P., (1988). Beyond rationale management: Mastering the paradoxes and

- competing demands of high performance. San Francisco Jossey-Bass.
- Rakich, Jonathon S., and Kurt Darr, (1985).
 Hospital Organization and Management:
 Text and Readings. Jamaica, NY: Spectrum
 Publications, 1978. Print.
- Sperry L., (2003).Becoming an effective health care manager:The essential skills of leadership. Baltimore: HealthProfessions Press.
- Yenersoy G., (1997) ToplamKaliteYönetimi,
 Rota Yayýnlarý Ýstanbul.
- Zuckerman, H S., (1989). Redifining the role of the CEO: Challenges and conflicts". Hospital and Health Services Administration 34 (1): 25-38.