



International Journal of Recent Scientific Research Vol. 6, Issue, 7, pp.5027-5035, July, 2015 International Journal of Recent Scientific Research

RESEARCH ARTICLE

ENSURING BETTER HUMAN RESOURCE DEVEOPMENTAL CLIMATE IN SERVICE SECTOR: AN EMPERICAL COMPARISON IN HOSPITALS

Qurrat A Hamdani^{1*} and S Mufeed Ahmad²

¹The Business School, University of Kashmir ²Director Business School, University of Kashmir, Srinagar

ARTICLE INFO

Article History:

Received 2nd, June, 2015 Received in revised form 10th, June, 2015 Accepted 4th, July, 2015 Published online 28th, July, 2015

Key words:

Human Resource (HR), Human Resource Development (HRD), HRD Climate.

ABSTRACT

HRD is concerned with the development of employees on the one hand and optimum utilization of these existing human resources on the other hand. Today, there are high expectations from HRD. Good HRD requires well-structured function, appropriately identified HRD systems, and competent staff to implement and facilitate the change process. Development is the soul of human resource management function, which affects the organization's effectiveness. HRD in a growing economy like India is the need of the time. It demands a specific and congenial climate to take root. It enriches the work life in an organization and aims to link productivity with a sense of personal fulfilment. Various studies have been conducted on HRD Climate, be it at a micro or macro level. Some have studied organization climate while some have laid stress on culture of the organizations. The present study is focussed on two hospitals i.e. GMC Jammu and Fortis health care. The study covers the HRD Climate of the two hospitals and covering the perception of employees of all hierarchies' i.e. junior, middle and senior staff towards HRD climate. The results show that the hospitals have a satisfactory HRD Climate and there is a common perception of junior, middle and senior level employees towards HRD Climate.

Copyright © **Qurrat A Hamdani and S Mufeed Ahmad.**, This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION

Good human resource practices and policies are necessary to influence the business growth and development of the concerned industry. Employees are considered as the most important and valuable resources and the HRD department should be in a continuous process to ensure the development of competencies, employee dynamism, motivation effectiveness in a systematic way. Therefore, HRD is concerned with the development of employees on the one hand and optimum utilization of these existing human resources on the other hand (Agarwal 2009). It, as a function has evolved in India indigenously from the year 1975 when Larsen & Toubro (L&T) conceptualized HRD as an integrated system and decided to separate it from the personnel function. Since then, most organizations have started new HR departments or redesigned their personnel and other departments as HRD departments. Today, there are high expectations from HRD. Good HRD requires well-structured function, appropriately identified HRD systems, and competent staff to implement and facilitate the change process. Performance appraisal, potential appraisal, feedback and counselling, career development and career planning, and training and development get distinct attention as unique parts of an integrated system which we call the "Human Resources Development System". This system was proposed as a separate system with strong linkages with

the personnel (human resources) system. Structurally, HRD is to be a subsystem of HRF and integration of this with the other two subsystems (personnel administration and worker affairs) is to be done by a person at the director level (for example, vice-president - personnel & HRD), through task forces and subsystem linkages. Organization may use HRD both as a means of carrying out transactional activities like recruitment, training, appraisal, manpower planning etc. and also as an instrument of changing the culture and motivating employees. In run round situations it has been found as an effective means to reorient culture to communication, to change work practices to improve participation involvement and commitment. It is required by the organizations which intend to be dynamic and growth oriented or to succeed in a fast-changing environment. Organizations can become dynamic and grow immensely through the efforts and competencies of their human resource (Raavi 2011).

Development is the soul of human resource management function, which affects the organization's effectiveness. HRD in a growing economy like India is the need of the time. It demands a specific and congenial climate to take root. It enriches the work life in an organization and aims to link productivity with a sense of personal fulfilment. It involves all management decisions and practices that direct, affect or influence the HR in the organization. In recent years, increased

attention comes from the realization that an organization's employees enable an organization to achieve its goals and the management and development of these resources is critical to an organization's success. Economic, technological and social trends have created acute problems and challenges for business and industry and consequently focused on HRD as a key element in coping with these problems. The importance of HRD as a catalytic agent of growth has been increasingly recognized which makes necessary organizational effort to help the managers in adapting to the emerging changes of the environment.

HRD is concerned with the development of human resources and optimum utilization of existing human capabilitiesintellectual, technological, entrepreneurial and creation of new ones, in an organization. In order to involve the employees as active participants, HRD activities must be consistent with the development efforts of the organization, only then the enthusiasm and creative potential of the employees can be mobilized. The national and international organizations have introduced a number of policies and tools for the benefit of the employees at each level (Sonal 2006). Values, beliefs, attitudes and aptitudes of employees are moulded to perform their roles with optimum potential so that they can contribute positively to the individual, group, organizational and social goals. The three aspects of HRD are, enabling factors for helping and motivating individuals, techniques or methods to acquire, develop and mould human resources and outcomes of the HRD processes that help in achieving the desired goals at various levels.

HRD is the human environment within which the members of any organization perform their functions. It facilitates the employees to acquire capabilities required to perform various functions associated within their present and future expected roles, develop general capabilities in individual capacity and exploit their inner potential for organizational development. It is being viewed as an important strategic approach to improve productivity, efficiency and profitability. It is a planned and continuous effort by management to improve employee competency levels and organizational performance through training and development programs. Development refers to the acquisition of knowledge and skills and behaviors that improve employee's ability to meet changes in job requirement and in client and customer demands. 'Training usually focuses on employees' current jobs, whilst development helps prepare them for a variety of jobs in the company and increases their ability to move into jobs that may not exist. HRD is important at all level, be it, economic, social, cultural, societal, political or organizational level. All organizations whether government departments, public, private, or academic institutions - are equally concerned with HRD, which is very critical for survival and growth of today's organizations. All HRD drivers such as openness, trust, role clarity, financial health, higher human resource utilization, and HRD interventions can increase productivity, improve quality, ensure cost effectiveness, enhance creativity and sharpen competitive edge. In spite of tremendous technological developments 'human element' continues to be most important driver for raising production and productivity. Recent research studies show that rapid technological development in globalization era cannot substitute for the role of human resources which is the 'core resource' and all other resources are subservient to it as it is main driver for all others. Thus, HR is critical for organization's health and well being (*Mufeed & Garkoo 2006*). Leading MNCs such as ABB, GE, IBM, Motorola, etc. have introduced numerous HR interventions and achieve organizational excellence. Human resources thus need to be constantly developed in keeping with the changing environmental needs by updating their knowledge, skills and abilities (KSAs). HRD is a continuous and cyclical process where human resources are continuously developed to meet the present and future challenges through proper update of KSAs. It in broader sense aims in improving competency i.e. knowledge, skills and abilities (*Mufeed & Garkoo 2006*).

HRD is a process by which the employees of an organization are trained to (a) Acquire and sharpen capabilities that are required to perform various functions associated with their present or expected future roles,(b) Develop several capabilities as individuals and discover and exploit their inner potentials for their own and/or organizational development purposes, and (c) Develop an organizational culture in which supervisorsubordinate relationships, teamwork and collaboration among subunits are strong, and contribute to the professional wellbeing, motivation and pride of employees. Employees are an integral part of the organization, & must be motivated according to the needs of the organization. A company that is interested in growth and profits must establish relationships with employees. In order to improve the employees' participation, HRD activities must be consistent with the development efforts of the organization; only then the enthusiasm & creative potential of the employees can be mobilized. The organizations today have introduced a number of policies & tools for the benefit of the employees. HRD is intended to make changes or improve individuals' learning, behavior, work performance, attitudes and cognitive skills (Agarwal 2009).

If the Indian organizations are to develop and maintain their competitive edge, the potential value of the employees needs to be increased by enhancing and linking their skills and capabilities in tune with the contemporary requirements of the market. The HRM function has emerged as one of the most important areas of organizational practice. It has not been developed in isolation but rather in the context of industrial change and economic development. The uniqueness of HR requires a totally different type of attention from management. The HR function has the characteristics that provide the greatest challenge as well as the opportunity (Singh 2005). The concept of HRD is gaining widespread popularity in India as well as in many other countries around the globe. In a changing environment an organization can only be dynamic and growth oriented by developing its employees (Kennedy 2007). The concept of HR is multi dimensional. It has been defined by economists, social scientists, industrialists, managers and other academicians in different ways and from different perspectives. In a broad sense, it is the process of increasing knowledge and skill of the people in a given society. In the national context, it is a process by which the people in various groups are helped to

improve their competencies continuously to make them more self reliant and develop a sense of pride in their performance. In economics, it means accumulation and qualitative up gradation of human capital and its effective utilization for the development of economy. In politics, HRD refers to preparing people for active participation in the political process. From the social and cultural points of view, it enriches life. In industrial organizations, HRD focuses on three aspects of people i.e. the 'human aspect' where people are seen as having skills, potential and ability to grow, change and develop, the 'resource aspect' where individuals are considered as resources rather than problems and the 'development' aspect where the emphasis is on discovering and nurturing of human potential (*Kennedy 2007*).

REVIEW OF RELATED LITERATURE

Truong & Chit (1999) conducted a research on HRD issues of State Owned Enterprises in the Lao people's democratic republic. The study revealed that 9 out of 10 SOE's under survey agreed that the role of the HR department is very important in contributing to the overall success of the enterprise and only one found it important. Johanna, Tuula, Juha (2010) aimed their study to describe primary health care managers' attitudes and views on recruitment and human resource development in general and to ascertain whether there were any differences in the views of managers in the southern and northern regions of Finland. There were few differences in managers' attitudes and views on recruitment and human resource development. Assessment of human resources management practices in Lebanese hospitals by Fadi, Victoria & Diana (2009) revealed that HRM in Lebanese hospitals should be strengthened in order to build capacity to better manage and retain health workers. The findings showed that not all hospitals clearly delineated the departmental responsibilities for its HRM function. Raavi (2011) examined the impact of HR practices on the human resource development process at Singareni collieries company limited. The study aimed to examine the various aspects related to training programs. A study on the human resource development for health in Ethiopia, Samuel, Asfawesen (2007), tried to put squarely the human resource for health crises within the framework of the development efforts of the country and to examine the steps taken by the government to mitigate this critical problem and its implementation in the future.

Rao, Raju &Taru (2007), studied HRD concepts, structure of HRD departments and HRD practices in India. The paper examined the current status of structuring of the HRD function and HRD subsystems in India against the "integrated HRD systems" framework. The paper also commented on the recent approaches to HRD. Data from HRD audits of 12 Indian organizations indicated that HRD function was not well structured, was inadequately differentiated, poorly staffed, and failed to meet the requirements of this framework. In the light of these experiences of Indian organizations in implementing this framework, the paper pointed out the prerequisites for success of other HRD frameworks in India. Research on performance and HRD: a study among various types of banks by Priyadarshini, Geetha, Venkatapathy (2005), aimed to study the extent of HRD practices in the banking industry pertaining

to differences in ownership and performance. It was found that there is significant difference between types of ownership (nationalized, private) of banks with respect to the subsystems of HRD. The levels of performance (top performing and low performing) of banks exhibited significant differences between all the subsystems of HRD. The HRD practiced in the banks had a strong influence on their performance. Private banks have placed low emphasis on HRD practice in their organizations. Top performing banks had a higher extent of HRD practice in their organizations, which influenced the effectiveness of their organizations. An analytical study on the impact of technological change on human resource development practices in Pakistan, Imran, Komal & Gulfam (2007), investigated the human resource development practices of organizations in Islamabad. Findings showed that mostly HRD practices were the same among different organizations; however some differences were found in educational institutions and telecom sector. On the job training was reported the most reliable tool for the human resource development.

Manish, Tapan (2009), studied human resource development scenario in Indian information technology companies. The study showed that there is no significant difference in HRD climate among the sample IT organizations. Haslinda & Hiok (2009) examined the extent and nature of HRD and to model HRD in manufacturing firms in Malaysia. The findings showed that HRD practices in manufacturing firms in Malaysia were strongly associated with the size of firms. Singh (2005), attempted to identify the relationship between human resource practices and the philosophy of management of the Indian business organizations. The results showed that there was no significant relationship between the variables of HR practices and the philosophy of management in the public sector organizations whereas in the private sector, the variables of HR practices, particularly training and development and rewards, were highly but negatively related to that philosophy of management. Vijila (2007), examined whether HRD practices differed among the categories of Indian commercial banks in Coimbatore. The results showed a difference in the practices. A review on integrating HRD with organization strategy as a precursor to strategic management by Arhan (2010) concluded that the organizations should make their HRD function more strategic in nature. Satya & Rao (2007), write up sought to cover the issues related to the changing trends in human resource development initiatives in select companies in an emerging metropoly, the perceptions of human resource on the human resource initiatives and some suggestions for effective human resource management. A comparative study of human resource development climate in health care sector in J&K, by Mufeed & Qurrat (2014) is found to be average and there is difference in the HRD Climate of the two organizations. The study covered two hospitals of J&K with medical and papa medical staff as the focus of study. HRD Climate in SMHS was found better than that of SKIMS. Managers perceived general climate to be dissatisfactory and Non Managers felt it to be average. Managers seemed dissatisfied with the general climate in SKIMS and the opposite held true for SMHS. Perception of medical and paramedical staff in the two organizations fell in the average range of scale. Medical staff of both the organizations was less dissatisfied than paramedical staff of sample study organizations. Medical staff of SKIMS scored

comparatively less value than the medical staff of SMHS and inverse applied for the Para medical staff of the two organizations. Medical staff of SMHS Hospital was less dissatisfied than medical staff of SKIMS but Para medical staff of SKIMS was less dissatisfied than Para medical staff of SMHS.

Sample Organizations At A Glance

The World Health Organization has always given priority to the development of human resources as a critical way to achieve self reliance and sustainability. Development of this important resource is considered as the top most priority of any organization especially a service sector like health care, so the study on this sector is important. The sample study organizations include; 1) GMC Jammu & 2) Fortis Chandigarh. Government Medical College Jammu. The Govt. Medical College, Jammu, the premier institution for delivery of health care in this region was started in May, 1973. From the make shift sheds of yesteryears, with meagre staff and equipments, to the present day mammoth complete with chain of adequately staff and fully equipped associated hospitals, this college is now credited to be amongst a few top institutions in the Northern India. At present, govt. medical college, Jammu is catering to the patients from whole of Jammu region, parts of Kashmir valley and adjoining areas of neighbouring states of Punjab and Himachal Pradesh.

Fortis Health Care: - The Fortis Hospital at Mohali in Punjab with a 209 - bed capacity was the first facility of its kind in the region. Amongst other specialties, it runs the largest cardiac program in North-West India. The hospital is a super specialty cardiac hospital. It is the largest cardiac care hospital in the region. Fortis, a leading healthcare provider in India has a vision of creating a world-class integrated healthcare delivery system in India, entailing the finest medical skills combined with compassionate patient care.

Objectives of The Present Study

- 1. to study the existing HRD Climate in the sample study hospitals, i.e.(a) GMC and (b) Fortis,
- 2. to examine the perception of junior, middle and senior level staff towards HRD Climate and
- to draw conclusions and to provide result oriented guidelines and suggestions to the sample study hospitals for improvement of their existing HRD Climate.

Hypothesis

In consonance to the above objectives, the hypotheses formulated for the present research are as under:

- 1. HRD Climate in the hospitals is satisfactory.
- There exists no perceptual difference in the opinion of junior, middle and senior level staff members towards HRD Climate in the hospitals.

Research Approach And Design

The tool used for obtaining the information was a 'Structured Non Disguised Questionnaire', a close format questionnaire was used. This questionnaire is proposed by Dr. Udai Pareek. It consisted of two Sections and 39 statements. Sec "A" consisted of 38 statements, the rating for each to be done on a scale from 5 to 1,(5)=Almost always true,(4)=Mostly true,(3)=Sometimes true,(2)=Rarely true,(1)=Not at all true. Sec "B" sought for suggestions and name, gender, age, pay scale, designation of the respondent.

Simple Random Sampling Method (SRSM) was used to cover employees from Medical, Administrative, Supportive and Technical cadres in the sample selected organizations. A sample of 100-125 was targeted from each organization covering doctors, officers, engineers, nurses and other operative staff. Thus the total sample for the study was 200-250.

Data Analysis And Interpretation

Environment for HRD Climate in the sample study organizations.

Table I reveals that the mean score for HRD Climate in the sample study organizations falls in a satisfactory range of scale with mean > 3. GMC scores a total mean of 3.1(52.5%), Fortis a total score of 3.2(55%). Comparing the two organizations, it is clear from table I that GMC scores a mean of 3.1 which is less than the mean score of Fortis 3.2.

Statement 24 i.e. "When employees in health care sector are sponsored for training, they take it seriously and try to learn from the programs they attend", scores the largest mean score of 3.5(62.5%) for GMC. For Fortis again a highest mean score of 3.5(62.5%) is scored by number of statements i.e. statement 2, "The top management on this organization believes the human resources are an extremely important resource and that they have to be treated more humanly", statement 8 "Managers in this organization believe that employee's behaviour can be changed and people can be developed at any stage of their life", statement 12, "Seniors guide their juniors and prepare them for future responsibilities/roles that they are likely to take up", statement 15, "There are mechanisms in this organization to reward any good work done or any contribution made by employees", statement 22, "When behaviour feedback is given to employees in health care sector, they take it seriously and use it for development", statement 23, "Employees in this organization take pains to find out their strengths weaknesses from their officers and colleagues" and statement 26, "Employees are sponsored for training programs on the basis of genuine training needs in health care sector".

On the other hand, statement 15, i.e. "There are mechanisms in this organization to reward any good work done or any contribution made by employees" and statement 30, i.e. "Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors" score the least mean score

of 2.8(45%) for GMC. Statement 28, i.e. "Employees in health care sector are not afraid to discuss or express their feelings with their supervisors" scores the same least mean of 2.8(45%) for Fortis.

OCTAPACE culture (P value=0.77) > 0.05 and HRD Mechanisms (P value=0.05) falls > 0.05. It is inferred from P values that Ho, "HRD Climate in the sample study organizations is satisfactory" is accepted.

Table I Environment for HRD Climate in the sample study organizations

St.No	Statements	(.	GMC (No. 100)			Frtis (No. 70)		
Statto	Statements	M.S	S.D	%	M.S	S.D	%	
1	The top management in health care sector goes out of its way to make sure that employees enjoy their work.	2.9	1.1	age 47.5			age 52.5	
2	The top management on this organization believes the human resources are an extremely important resource and that they have to be treated more humanly.	3.1	1.1	52.5			62.5	
3	Development of the subordinates is seen as an important part of their job by the managers/officers in health care sector.	2.9	1.1	47.5	3.3	0.9	57.5	
4	The personnel policies in this organization facilitate employee development.	2.8	1.0	45	3.3	1.1	57.5	
5	The top management in health care sector is willing to invest a considerable part of their time and other resources to ensure the development of employees.	2.7	1.1	42.5	3.0	1.1	50	
6	Senior officers/executives in this organization take active interest in their juniors and help them to learn their job.	3.1	1.1	52.5	3.2	1.2	55	
7	People in the health care sector lacking confidence in doing their job are helped to acquire competence rather than being left unattended.	2.9	1.1	47.5	3.2	0.9	55	
8	Managers in this organization believe that employee's behavior can be changed and people can be developed at any	3.0	1.1	50	3.5	1.2	62.5	
9	stage of their life. People in this organization are helpful to each other.	3.4	1.1	60	3.2	1.0	55	
	Employees in the health care sector are very informal and do not hesitate to discuss their personal problems with their							
10	supervisors.	3.2	1.1	55	3.0	1.2	50	
11	The psychological climate of the health care sector is very conducive for any employee interested in developing himself by acquiring new knowledge and skills.	3.0	1.1	50	3.3	1.0	57.5	
12	Seniors guide their juniors and prepare them for future responsibilities/roles that they are likely to take up.	3.4	1.2	60	3.5		62.5	
13	The top management in the health care sector makes efforts to identify and utilize the potential of employees.	3.1	1.1	52.5	3.3		57.5	
14	Promotion decisions in this organization are based on the suitability of the promotee rather than on favoritism.	2.9	1.3	47.5	2.9		47.5	
15	There are mechanisms in this organization to reward any good work done or any contribution made by employees.	2.8	1.2	45	3.5		62.5	
16	When an employee in the health care sector does good work his supervising officers take special care to appreciate it.	3.0	1.2	50	3.4	1.1	60	
17	Performance Appraisal reports in this organization are based on objective assessment and adequate information and not on favoritism.	3.1	1.0	52.5		1.1		
18	People in health care sector do not have any fixed mental impressions about each other.	3.2	1.0	55	3.3		57.5	
19	Employees in this organization are encouraged to experiment with new methods and try out creative ideas.	2.9	1.2	47.5	3.3	1.2	57.5	
20	When an employee in health care sector makes a mistake, his supervisors treat him with understanding and help him to learn from such mistakes rather than punish him or discourage him	3.1	1.1	52.5	3.3	1.2	57.5	
21	Weaknesses of employees in this organization are communicated to them in a non threatening way.	3.0	1.1	50	3.4		60	
22	When behaviour feedback is given to employees in health care sector, they take it seriously and use it for development	3.2	1.0	55	3.5		62.5	
23	Employees in this organization take pains to find out their strengths weaknesses from their officers and colleagues.	3.2	1.0	55	3.5	1.0	62.5	
24	When employees in health care sector are sponsored for training, they take it seriously and try to learn from the programs they attend.	3.5	1.2	62.5.	3.0	1.1	50	
25	Employees in this organization when returning from training programs are given opportunities to tryout what they have learnt	3.2	1.1	55	3.4	1.2		
26	Employees are sponsored for training programs on the basis of genuine training needs in health care sector.	3.2	1.0	55			62.5	
27	People trust each other in this organization.	3.1	1.1	52.5	3.0		50	
28	Employees in health care sector are not afraid to discuss or express their feelings with their supervisors.	3.3	1.1	57.5	2.8	1.1		
29 30	Employees in health care sector are not afraid to discuss or express their feelings with their subordinates. Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for	3.4 2.8	1.1	60 45	3.1		52.5 50	
31	instructions from their supervisors. Delegation of authority to encourage juniors to develop and handle higher responsibilities is quiet common in this	3.0	1.0	50		1.0		
	organization.							
32	When seniors in health care sector delegate authority to juniors use it as an opportunity for development.	3.3	1.0	57.5			57.5	
33	Team spirit is of high order in this organization.	3.2	1.1	55	3.3	1.1	57.5	
34	When problems arise in health care sector, people discuss these problems openly and try to solve them rather than keep accusing each other behind their backs.	3.1	1.2	52.5	3.1		52.5	
35	Career opportunities are pointed out by juniors to senior officers in this organization.	3.1	1.0	52.5	3.1	1.0	52.5	
36	The health care sector's future plans are made known to the managerial staff to help them to develop their juniors and prepare them for future.	3.2	1.0	55	3.3	1.0	57.5	
37	This organization ensures employee's welfare to such an extent that the employees can save a lot of their mental energy for work purposes.	3.0	1.0	50	3.0	1.2	50	
38	Job rotation in health care sector facilitates employee development.	3.3	1.2	57.5	3.4	1.1	60	
20	TOTAL		1.0	52.5				

Notes M.S: mean score, S.D: standard deviation, %age: percentage to M.S.

Existing status of HRD Climate in the sample study organizations using \boldsymbol{T} values

Using T test for evaluating the significance level, it is inferred from the table II that HRD Climate in the health care sector falls above satisfactory level for all dimensions of HRD Climate. P values for general climate (P value=0.06) > 0.05,

Perception of junior level staff towards HRD Climate in the health care sector

Table III, represents the perception of junior level staff, towards HRD Climate in the sample study organizations. The table represents that the perception of junior staff towards HRD Climate, falls above the satisfactory range.

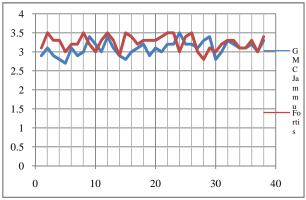


Figure I Environment for HRD Climate in the sample study organizations.

Table II Existing status of HRD Climate in the sample study organizations with T values.

Dimensions	GMC		Fortis		T Value	D Walna	
Dimensions	M.S	S.D	M.S	S.D	1 value	r value	
General Climate	3.1	0.6	3.3	0.7	-1.8	0.06*	
OCTAPACE Culture	3.1	0.7	3.2	0.7	-0.2	0.77*	
HRD Mechanisms	3.2	0.8	3.4	0.8	-1.9	0.05*	

Notes
1. Scoring Scale: same as in table 1
2. *Ho is accepted (p>0.05)

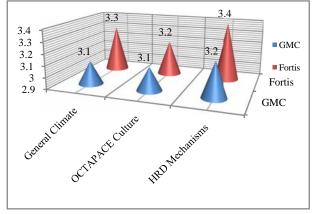


Figure II Existing status of HRD Climate in sample study organizations with T values

The overall mean values of junior staff is >3 (3.2)55% as revealed from table III, which falls above the satisfactory range of scale. Junior staff scores the highest mean score of 3.7(67.5%) for statement 24 i.e. "When employees in health care sector are sponsored for training, they take it seriously and try to learn from the programs they attend". Least mean score of 2.9(47.5%) is scored by junior staff for statement 1 i.e. "The top management in health care sector goes out of its way to make sure that employees enjoy their work" statement 5, "The top management in health care sector is willing to invest a considerable part of their time and other resources to ensure the development of employees", statement 14. "Promotion decisions in this organization are based on the suitability of the promotee rather than on favouritism" and statement 30, "Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors".

Table III Perception of junior level staff towards HRD Climate in the health care sector.

St.No		Junior level Staff (No.84)	
	M.S	S.D	%age
1	2.9	1.1	47.5
2	3.4	1.0	60
3	3.1	1.0	52.5
4	3.1	1.0	52.5
5	2.9	1.1	47.5
6	3.3	1.1	57.5
7	3.2	1.1	55
8	3.4	1.0	60
9	3.5	1.1	62.5
10	3.1	1.2	52.5
11	3.1	1.1	52.5
12	3.7	1.1	67.5
13	3.2	1.0	55
14	2.9	1.3	47.5
15	3.1	1.2	52.5
16	3.3	1.1	57.5
17	3.1	1.1	52.5
18	3.2	1.0	55
19	3.2	1.2	55
20	3.3	1.1	57.5
21	3.2	1.0	55
22	3.5	0.9	62.5
23	3.5	1.0	62.5
24	3.7	1.1	67.5
25	3.3	1.2	57.5
26	3.4	1.0	60
27	3.1	1.2	52.5
28	3.2	1.2	55
29	3.2	1.1	55
30	2.9	1.1	47.5
31	3.1	1.0	52.5
32	3.2	1.0	55
33	3.3	1.0	57.5
34	3.2	1.2	55
35	3.1	0.9	52.5
36	3.3	0.9	57.5
37	3.0	1.1	50
38	3.4	1.2	60
Total	3.2	1.0	55

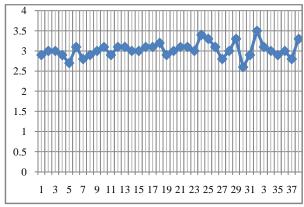


Figure III Perception of junior level staff towards HRD Climate.

Perception of middle level staff towards HRD Climate in the health care sector

Table IV, represents the perception of middle level staff, towards HRD Climate in the sample study organizations. The table represents that the perception of middle staff towards HRD Climate, falls in the satisfactory range. The overall mean

values of middle staff is = 3 (3.0)50% as revealed from table IV, which falls in the satisfactory range of scale. Middle level staff scores the highest mean score of 3.5(62.5%) for statement 32 i.e. "When seniors in health care sector delegate authority to juniors use it as an opportunity for development" Least mean score of 2.6(40%) is scored by middle level staff for statement 30, "Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors".

Perception of middle level staff towards HRD Climate in the health care sector

	Middle level Staff					
St. No		(No. 56)				
	M.S	S.D	%age			
1	2.9	1.0	47.5			
2 3	3.0	1.2	50			
	3.0	1.1	50			
4	2.9	1.1	47.5			
5	2.7	1.1	42.5			
6	3.1	1.2	52.5			
7	2.8	1.0	45			
8	2.9	1.1	47.5			
9	3.0	1.0	50			
10	3.1	1.2	52.5			
11	2.9	1.0	47.5			
12	3.1	1.2	52.5			
13	3.1	1.1	52.5			
14	3.0	1.2	50			
15	3.0	1.3	50			
16	3.1	1.2	52.5			
17	3.1	1.0	52.5			
18	3.2	1.0	55			
19	2.9	1.2	47.5			
20	3.0	1.2	50			
21	3.1	1.0	52.5			
22	3.1	1.1	52.5			
23	3.0	1.1	50			
24	3.4	1.2	60			
25	3.3	1.1	57.5			
26	3.1	1.1	52.5			
27	2.8	1.0	45			
28	3.0	1.1	50			
29	3.3	1.1	57.5			
30	2.6	1.2	40			
31	2.9	0.9	47.5			
32	3.5	0.9	62.5			
33	3.1	1.1	52.5			
34	3.0	1.1	50			
35	2.9	1.0	47.5			
35 36	3.0	1.1	50			
37	2.8	1.1	45			
38	3.3	1.2	57.5			
Total	3.3 3.0	1.2 1.1	50			
10141	3.0	1.1	30			

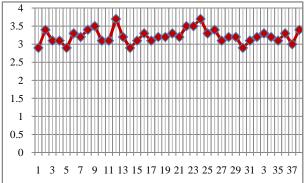


Figure IV Perception of middle level staff towards HRD Climate.

Perception of senior level staff towards HRD Climate in the health care sector

Table V, represents the perception of senior level staff, towards HRD Climate in the sample study organizations. The table represents that the perception of senior staff towards HRD Climate, falls above the satisfactory range. The overall mean values of senior staff is >3 (3.2)55% as revealed from table V, which falls above the satisfactory range of scale. Senior staff scores the highest mean score of 3.8(70%) for statement 24 i.e. "When employees in health care sector are sponsored for training, they take it seriously and try to learn from the programs they attend". Least mean score of 3(50%) is scored by senior staff for statement 5, "The top management in health care sector is willing to invest a considerable part of their time and other resources to ensure the development of employees", statement 6, "Senior officers/executives in this organization take active interest in their juniors and help them to learn their job", statement 7, "People in the health care sector lacking confidence in doing their job are helped to acquire competence rather than being left unattended" statement 14, "Promotion decisions in this organization are based on the suitability of the promotee rather than on favouritism" and statement 16, "When an employee in the health care sector does good work his supervising officers take special care to appreciate it".

Perception of senior level staff towards HRD Climate in the health care sector

Gr N	Senior level Staff (No.30)						
St. No —	M.S	S.D	%age				
1	3.3	1.1	57.5				
2	3.2	1.1	55				
3	3.1	1.1	52.5				
4	3.2	1.2	55				
5	3.0	1.2	50				
6	3.0	1.4	50				
7	3.0	1.1	50				
8	3.3	1.3	57.5				
9	3.2	1.0	55				
10	3.1	1.1	52.5				
11	3.5	0.9	62.5				
12	3.4	1.7	60				
13	3.4	1.0	60				
14	3.0	1.5	50				
15	3.3	1.1	57.5				
16	3.0	1.3	50				
17	3.3	1.2	57.5				
18	3.3	0.9	57.5				
19	3.3	1.4	57.5				
20	3.3	1.2	57.5				
21	3.4	1.0	60				
22	3.4	1.1	60				
23	3.6	1.0	65				
24	3.8	1.0	70				
25	3.6	1.1	65				
26	3.3	1.2	57.5				
27	3.3	1.2	57.5				
28	3.1	1.0	52.5				
29	3.4	0.8	60				
30	3.3	1.0	57.5				
31	3.2	1.1	55				
32	3.6	1.0	65				
33	3.3	1.3	57.5				
34	3.3	1.8	57.5				
35	3.5	1.1	62.5				
36	3.5	1.0	62.5				
37	3.3	1.1	57.5				
38	3.4	1.2	60				
Total	3.2	1.0	55				

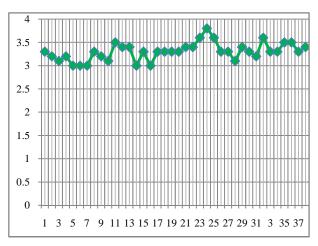


Figure V Perception of senior level staff towards HRD Climate.

Existing status of HRD Climate for junior, middle and senior level staff in the sample study organizations with T values

Using ANOVA test for evaluating the significance level, it is inferred from table VI that the mean for junior and senior level of staffs for HRD Climate >3 and = 3 for middle level of staff. The P values scored are >0.05, (0.7= juniors, 0.8= middle and 0.8=seniors). Thus it can be inferred that there is no significant difference in the perception of junior, middle and senior staff of the sample study organizations, hence the hypothesis that "there exists no perceptual difference in the opinion of junior, middle and senior level staff members towards HRD Climate" is accepted.

Table VI Perception of junior, middle and senior level staff towards HRD Climate with Z values

Dimensions	Gen	eral	OCTA	PACI	E HI			
	Clin	nate	Cul	ture	Mecha	nisms	T Volue	P Value
Hierarchy	M.S	3.D	101.5	3.D	IVI.D	3.D	1 value	e r value
Junior Staff	3.2	0.6	3.2	0.7	3.3	0.7	1.9	1.14*
Middle staff	3.0	0.7	3.0	0.7	3.1	0.8	1.2	0.29*
Senior staff	3.3	0.7	3.3	0.7	3.4	0.8	1.3	0.27*

Notes

Scoring Scale: same as in table I *Ho is accepted (p>0.05)

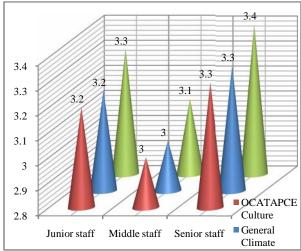


Figure VI Perception of junior, middle and senior level staff towards HRD Climate with Z values.

CONCLUSIONS AND SUGGESTIONS

It can be concluded from the findings that HRD Climate in the hospital sector is above satisfactory. An overview of the study is that,

- HRD Climate in the sample study organizations falls in a satisfactory range of scale.
- GMC has HRD climate less satisfactory in comparison to Fortis.
- When employees in GMC are sponsored for training, they take it seriously and try to learn from the programs they attend.
- For Fortis the top management believes that human resources are an extremely important resource and that they have to be treated more humanly.
- Managers in Fortis believe that employee's behavior can be changed and people can be developed at any stage of their life.
- Seniors guide their juniors and prepare them for future responsibilities/roles that they are likely to take up in Fortis.
- There are mechanisms in Fortis to reward any good work done or any contribution made by employees.
- When behavior feedback is given to employees in Fortis, they take it seriously and use it for development.
- Employees in Fortis take pains to find out their strengths weaknesses from their officers and colleagues.
- Fortis ensures that employees are sponsored for training programs on the basis of genuine training needs.
- There are no mechanisms in GMC to reward any good work done or any contribution made by employees.
- Employees in GMC are not encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors.
- Employees in Fortis are afraid to discuss or express their feelings with their supervisors.
- Perception of junior staff of the health care sector towards HRD Climate is above satisfactory.
- Junior staff believes that the top management in health care sector does not go out of its way to make sure that employees enjoy their work and they are not willing to invest a considerable part of their time and other resources to ensure the development of employees.
- For junior and senior level employees, promotion decisions are not based on the suitability of the promotee but on favoritisms.
- Juniors as well as middle level staff in health care sector is not encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors.
- Middle staff in the health care is satisfied towards HRD Climate.
- When seniors in health care sector delegate authority to middle level, they use it as an opportunity for development.
- Perception of senior staff towards HRD Climate falls above the satisfactory range.

- Senior officers/executives do not take active interest in their juniors and don't help them to learn their job.
- Seniors believe that employees in the health care sector lacking confidence in doing their job are not helped to acquire competence rather left unattended.
- Senior staff is of the concept that when an employee in the health care sector does good work his supervising officers do not take special care to appreciate it.

The hospitals show a satisfactory HRD Climate but should keep themselves up to date and try to enhance the satisfaction level of all levels of staff. There should be mechanisms in GMC Jammu to reward any good work done or any contribution made by employees. Employees should be encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors. Fortis should move towards developing a climate where in employees are not afraid to discuss or express their feelings with their supervisors. Top management in health care sector should go out of its way to make sure that junior staff enjoys their work and they should invest a considerable part of their time and other resources to ensure their development. All promotion decisions should be based on the suitability of the promotee and not on favouritisms. Senior officers/executives should take active interest in their juniors and help them to learn their job. Employees in the health care sector lacking confidence in doing their job should be helped to acquire competence rather left unattended. When an employee in the health care sector does good work his supervising officers should take special care to appreciate it.

References

- Abdullah, H., & Ong, Mek. Hiok. (2009). Modelling HRD Practices in Malaysian Manufacturing Firms. *European Journal of Social Sciences*, Volume 8, Number 4, 2009, 40-651
- Agarwal, M., & Nayak, T. K. (2009). Human Resource Development scenario in Indian information technology companies. *Saaransh*, *Vol 1*, *No. 1 July 2009*, 64-67.
- Agarwal, M., & Nayak, T. K. (2009). Human Resource Development scenario in Indian information technology companies. *Saaransh*, *Vol 1*, *No. 1 July 2009*, 64-67.
- Banu, C. V. (2007). A study on HRD Climate with special reference to public sector cement corporation. *The Icfaian Journal of Management Research, Vol. VI, No.* 10,2007, 37-51.
- Fadi, Victoria, & Diana. (2009). Assessment of Human Resource Management Practices in Lebanese Hospitals. *Human Resource for Health*, 2009, 7:84.
- Imran, A., Shahzad., Bhatti, K. K., and Khalid, G. K. (2007).
 Impact of Technological Change on Human Resource
 Development Practices in Pakistan: An Analytical Study.

- International Review of Business Research Papers Vol.3 No.2 June 2007, 400 419.
- Kennedy, V. (2007). Do HRD practices differ among the categories of Indian commercial banks? *The Icfaian Journal of Management Research, Vol. VI, No.12*, 2007, 33-42
- Lammintakanen, J., Kivinen, T. & Kinnunen, J. (2010). Managers perspectives on recruitment and HRD practices in Primary Health Care. *International Journal of Circumpolar Health* 69:5, 462-464.
- Mufeed, S. A., & Garkoo, F. A. (2006). Enhancing educational institutions effectiveness through HRD climate: an empirical assessment. *Management and Change, Vol. 10, No. 2, 2006, 25-53.*
- Mufeed, S.A., & Qurrat, A. H. (2014). A comparative study of human resource development climate in health care sector in J&K. *Radix international Journal Of Social Science, ISSN* 2250-3994.
- Priyadarshini, R. Rani Geetha, Venkatapathy, R. (2005).

 Performance and HRD: A Study among Various Types of Banks. South Asian Journal of Management / Jul-Sep 2005
- Raju, R. S., & Rao, P. N. A. (2007). Changing trends in HRD initiatives in the new millennium. *Indian Journal of Training and Development XXXVII: 1, January-March* 2007, 56-70.
- Rao, T. V., Raju Rao, & Taru, Yadav. (2001). A Study of HRD concepts, structure of HRD departments and HRD practices in India. Vikalpa, Vol.26, No. 1, January-March 2001, 49-63.
- Ravi, Radhika. (2011). HRD processes at Singareni Collieries Company limited Kothagudem. *International Journal of Innovation, Management and Technology, Vol2, No. 1, February, 2011, ISSN: 2010-0248,* 1-4.
- Samuel, G., & Hailay, D. (2007). Human Resource Development for health in Ethiopia: Challenges of achieving the millennium development goals. *Ethiopia Journal of Health Development*; 21(3), 216-231.
- Singh, A. K. (2005). HRD practices and philosophy of management in Indian organizations. *Vikalpa, Vol. 30, No. 2, April- June 2005*, 71-79.
- Sonal, S. (2006). Human resource development climate in Indian IT companies. *The Icfaian Journal of Management Research, Feb* 2006, 57-64.
- Sthapit, A. (2010). Integrating HRD with organization strategy as a precursor to strategic management: a review. Administration and Management Review Vol. 22, No. 1, January 2010, 1-25.
- Thavisay, C., & Quang, T. (1999). Privatization and HRD issue:-A preliminary study of state owned enterprises in the Lao people's democratic Republic. Research and Practice in Human Resource Management-Curtin University of Technology, 7(1), 101-123.

How to cite this article:

Qurrat A Hamdani and S Mufeed Ahmad., Ensuring Better Human Resource Deveopmental Climate In Service Sector: An Emperical Comparison In Hospitals. *International Journal of Recent Scientific Research Vol.* 6, *Issue*, 7, pp.5027-5035, *July*, 2015
