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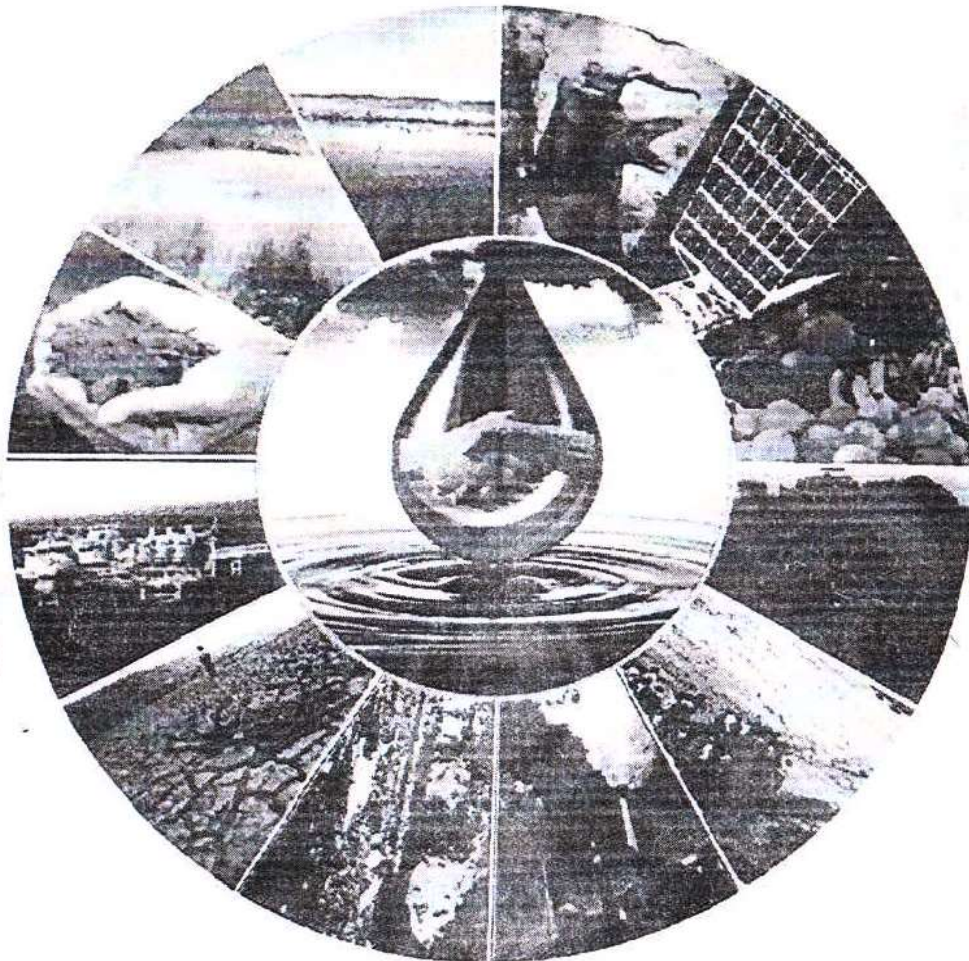
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HUMAN RESOURCE MANAGEMENT IN PRIMARY HEALTH CENTRES: A CASE STUDY OF KOLHAPUR DISTRICT

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Abstract

The present paper deals with Human Resource Management in Primary Health Centres in Kolhapur District. Human resource management is a part of management which is concerned with people at work and with their relationships with an organization. It applies not only to industry and commerce but to all fields of employment. The paper entirely based on primary data which is collected from the respective PHCs. Accordingly, overpopulation and lack of health workers management of human resource in the PHCs is too difficult. There is need of HR Department in every PHC to manage and planning the available human resource.

1.0 Introduction

The economic development cannot be accomplished in developing or backward countries unless they have well educated and trained, highly achievement motivated and properly developed human resources. Likewise an organization cannot make any progress unless it has a well trained, an efficient and adequately motivated team of workers.

Human resource management is that part of the process of management which is primarily concerned with people. In the past management was concerned mainly with the full and proper utilization of the physical factors of production like raw materials and machines. Little attention was paid to the human factor on which utilization of the physical factors depended. Materials may be purchased at most competitive rates, machines may be worked at maximum speed but the output can be maximized only when the workers work willingly (Batra, 1995).¹ Thus, the soundness of any organization depends upon its people. Therefore, managing people is very important. 'PEOPLE' are the subject matter of human resource management (Drucker, 2002).¹¹

2.0 Conceptual Term

Human resource management is a function in organizations designed to maximise employee performance in service of an employer's strategic objectives (Johnason, 2009).¹¹¹ Apart from this, human resource management is a process of hiring and developing employees so that they become more valuable organisation (Business Dictionary).^{1v}

2.1 Human Resource in General

Human resource management is a part of every organization that is concerned with the "People" dimension. Human resource management can be viewed in one of the two ways. First, Human resource management is a staff of support function in the organization. Its role is to provide assistance on the human resource management matters to line employees, or to those directly involved in producing the organization's goods and services. Second, human resource management is a function of every manager's job. Whether or not one works in a "formal" human resource management department, the fact remains, that to effectively manage employees, requires all managers to handle the activities (Coleman, 1970).^v

2.2 Human Resource in Hospital

Human resource management is working in health care (hospital) organization, which renders the highest and the noblest form of service to patient and public at large through a team of dedicated and committed hospital personnel. A hospital is an institution for the care, cure and treatment of sick or wounded people or for the study of diseases and trainings for the doctors and nurses (Goel, 2004).^{vi}

3.0 The Study Area

The area undertaken for the present paper is Kolhapur district, which situated in the extreme southern part of Maharashtra state. It lies between 15° 43' and 17° 17' north latitude and 73° 40' and 74° 42' east longitude. It surrounded by Sangli district to the north, Belgaum district (Karnataka State) to the east and south and Ratnagiri and Sindhudurg districts to the west. The Sahyadri ranges to the west and zigzag Warana River to the north form the natural boundaries.

4.0 Objective

The main objective of this paper is to study the human resource management in the selected Primary Health Centres (PHCs) of Kolhapur District.

5.0 Database and Methodology

The entire paper is based on primary data, which is collected from the sample PHCs in Kolhapur district. There are 73 PHC in the Kolhapur district out of them 36 PHCs (49.32 %) are selected for this study with the help of Complex Random Area Sampling. The collected data has been processed by using various appropriate quantitative and statistical techniques such as average, percentage, standard deviation, mode, skewness, etc.

6.0 Discussion

Human resource management is a part of management which is concerned with people at work and with their relationships with an organization. The human resource management has been viewed as a sub system of the hospital organization. It is concerned with acquisition, placement, maintenance and development and exists of human resource. In this paper, the overall human resource scenario in the Primary Health Centres in Kolhapur district has been studied.

6.1 Health Personnel in Primary Health Centres

A fulfilment of health personnel in any health institute is upgrading its performance. Therefore, health personnel in the PHCs are important to study.

Table 1
Kolhapur District : Health Personnel in Sample PHCs

| Sr. No. | Health Personnel | Required | Available | Vacant |
|--------------|---------------------------------|------------------------------|------------------------------|-----------------------------|
| 1 | Medical Officers | 72 (100.0) | 44 (61.11) | 28 (38.69) |
| 2 | Pharmacist | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 3 | Nurse - Midwife (Staff Nurse) | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 4 | Additional Staff Nurse* | 72 (100.0) | 51 (70.83) | 21 (29.17) |
| 5 | Health Worker / ANM (Female) | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 6 | Health Assistant (Male) | 36 (100.0) | 34 (94.44) | 02 (5.56) |
| 7 | Health Assistant / LHV (Female) | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 8 | Upper Divisional Clerk | 36 (100.0) | 32 (88.89) | 04 (11.11) |
| 9 | Lower Divisional Clerk | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 10 | Laboratory Technician | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 11 | Driver* | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| 12 | Class IV Workers | 108 (100.0) | 89 (82.41) | 19 (17.59) |
| 13 | Sanitary Worker* | 36 (100.0) | 36 (100.0) | 00 (00.0) |
| Total | | 612 (100.0) | 538 (87.91) | 74 (12.09) |

* on contract basis **Note** : Figures in Brackets are percentiles

Source : The data has been collected from respective centres

The above table represents the present situation of health personnel in the PHCs in Kolhapur district. As per the table, PHCs in Kolhapur district fulfil with Pharmacists, Staff Nurses, female Health

Workers, female Health Assistants, Lower Divisional Clerks, Laboratory Technicians, Drivers and Sanitary Worker.

On the other hand, almost 40.0 per cent posts of the Medical officers in the PHCs are vacant. Most of the Medical Officers sent on deputation to other PHC, where the post of MO is vacant. It means these few Medical Officers render their service for two PHCs. A Medical Officer or doctor is the soul of any Primary Health Centre; the 40 per cent deficiency means the crucks of Primary Health Centres are hampered.

As per IPHS, every PHC approved two additional staff nurses on the contract basis to deliver health care services more easily. However, in Kolhapur district 29.17 posts of the additional staff nurses are vacant. It means PHCs in the district are not fulfilling with staff nurses also. Similarly, PHCs in the Kolhapur district are also lack of male health assistants (5.56%) and upper divisional clerks (11.11%).

Hygiene, sanitation or cleanliness is important at the every health institute. Class IV workers are must be available for the health institute keep hygienic. Therefore, posts of Class IV workers have to fulfil in the PHC level also, but in the district 17.59 per cent posts of Class IV workers are vacant.

The overall scenario of the health personnel in PHCs in the Kolhapur district shows also a glooming situation. PHCs in the Kolhapur district are 12.09 per cent lack of health personnel and this lack mostly in the posts of Medical officers, additional staff nurses and class IV workers.

6.2 Doctor and Population Ratio

The World Health Organisation (WHO) recommendation of a doctor to population ratio of 1:1000 (Kinfu, Dal Poz, *et al.*, 2009),^{vii} similarly, Bhore Committee (1946)^{viii} suggested there should be one doctor per 2,000 citizens in India also. But reality differs; there is one government doctor per 11,355 people in India (Sharma, 2014).^{ix} All these things increases significance of this kind of study, hence the ratio of Doctors to the rural population in the Kolhapur district has been calculated.

Kolhapur District : Doctor Population Ratio in PHCs

| Sr. No. | Tahsils | Doctor Population Ratio | Excess Population per Doctor | |
|----------|--------------|-------------------------|------------------------------|---------------------------------------|
| | | | As Per Recommendation of WHO | As per Suggestions of Bhore Committee |
| 1 | Karveer | 1 : 6565 | 5565 | 4565 |
| 2 | Panhala | 1 : 9599 | 8599 | 7599 |
| 3 | Hatkanangale | 1 : 17554 | 16554 | 15554 |
| 4 | Shirol | 1 : 16296 | 15296 | 14296 |
| 5 | Kagal | 1 : 14467 | 13467 | 12467 |
| 6 | Gadhinglaj | 1 : 7780 | 6780 | 5780 |
| 7 | Chandgad | 1 : 13377 | 12377 | 11377 |
| 8 | Ajara | 1 : 23730 | 22730 | 21730 |
| 9 | Bhudargad | 1 : 10742 | 9742 | 8742 |
| 10 | Radhanagari | 1 : 9510 | 8510 | 7510 |
| 11 | Gagan Bavada | 1 : 3578 | 2578 | 1578 |
| 12 | Shahuwadi | 1 : 9265 | 8265 | 7265 |
| District | | 1 : 10042 | 9042 | 8042 |

Source : Calculation Based on District Statistical Review, Kolhapur 2013 and Official Records of Kolhapur Zillah Parishad

The above table depicts very dreadful scenario of the available doctors as per rural population. The Kolhapur district as a whole has one doctor for above 10,000 people. It means it has been 10 times greater than recommendations of World Health Organisation as well as 5 times greater than suggestions of Bhore Committee. Similarly, all the tahsils also shows worse situation in the availability of the doctors as per the rural population.

A tahsil-wise analysis indicate that, Ajara (1:23,730), Hatkanangale (1:17,554), Shirol (1:16,296), Kagal (1:14,467), Chandgad (1:13,377) and Bhudargad (1:10,742) tahsils having more than 10,000 population behind every doctor. Among them Ajara, Bhudargad and Chandgad tahsils are mostly hilly and inconvenient tahsils as doctors do not want to render their service there. Ajara taluka alone has doctor population ratio almost 23 times greater than the recommendations. Whereas Hatkanangale and Kagal tahsils are mostly industrialised tahsils and Shirol is well developed agricultural tahsil are dominated by rural population, hence there is a shortfall of doctors.

Again some taluhs such as Panhala (1:9599), Radhanagar (1:9510) and Shahuwadi (1:9265) having hilly and rigid topography also have doctor population ratio is almost 10,000. This taluhs also have a high doctor to population ratio due to unwillingness of the doctors to serve hilly rural area as there is lack of basic facilities. Apart from this, Gadhinglaj (1:7700) and Karveer (1:6565) taluhs also have a doctor to population ratio between 5,000 and 10,000. These two taluhs are urbanised taluhs, which impacted the surrounding rural population. The surrounding rural areas, therefore, are being densely populated as a result these areas facing a problem of lack of doctors.

Only Gagan Bavada (1:3578) taluhs has a doctor population ratio below the 5,000. This taluhs is very sparsely populated as very undulating and mountainous topography. It also economically, agriculturally as well as industrially backward taluhs, hence people from this taluhs is migrated towards surrounding developed areas in search of work and economical stability, it reduces the percentage of rural population. Hence, Gagan Bavada taluhs has a lowest doctor population ratio in the district.

6.3 Experience of Medical Officers

There are 44 Medical Officers render their services in the 36 sample PHCs of Kolhapur district. The experience of all the Medical Officers discussed in the table given below.

Table 3
Experience of Medical Officers in PHCs

| Sr. No. | Experience in Years | No. of Doctors | Percentage |
|----------|---------------------|----------------|------------|
| 1 | 0-5 | 13 | 29.55 |
| 2 | 5-10 | 21 | 47.73 |
| 3 | 10-15 | 4 | 9.09 |
| 4 | 15-20 | 2 | 4.55 |
| 5 | 20-25 | 4 | 9.09 |
| Total | | 44 | 100.00 |
| Mean | | 8.295 | |
| Mode | | 6.600 | |
| SD | | 5.833 | |
| Skewness | | 0.291 | |

Source: The data has been collected from respective centres

The above table shows, the experience of Medical Officers in the Primary Health Centres. Maximum number of doctors i.e. 77.28 per cent having service experience up to 10 years, while least number of Medical Officers (22.72 %) has service experience of above 10 years. It is observed from above table that the average variability in the experience of Medical Officers in PHCs is about 6 years. The Skewness is $0.291 > 0$, therefore large number of doctors having less than 8 years of experience. It means young doctors are in more number in the PHCs, it is mainly because of the government has made it mandatory for them, if they would like to do post graduation.

6.4 Experience of Other Paramedical Staff

Experience of other paramedical staff like Nurse - Midwife (Staff Nurse), Additional Staff Nurse, Health Worker / ANM (Female), Health Assistant (Male), Health Assistant / LHV (Female), etc. are discussed in the following table.

Table 4

Experience of Other Paramedical Staff in PHCs

| Sr. No. | Experience in Years | Frequency | Percentage |
|---------|---------------------|-----------|------------|
| 1 | 0-5 | 31 | 16.06 |
| 2 | 5-10 | 49 | 25.39 |
| 3 | 10-15 | 68 | 35.23 |
| 4 | 15-20 | 26 | 13.47 |
| 5 | 20-25 | 19 | 9.84 |
| Total | | 193 | 100.00 |

| | |
|----------|--------|
| Mean | 11.282 |
| Mode | 11.160 |
| SD | 5.843 |
| Skewness | 0.021 |

Source : The data has been collected from respective centres

The Table shows the practical work experience of the staff respondents in sample PHCs of Kolhapur District. The largest proportions of 76.68 per cent paramedical staff belong up to 15 years experience group, while only 23.32 per cent of paramedical staff has experience more than 15 years.

On the whole, the trend of experience wise distribution of the paramedical staff respondents shows increased in 10-15 years group. It is observed that the variability in the experience of the staff is about 5.8 years. Besides, the distribution of experience is positively skewed. Therefore, large numbers of paramedical staff members have experience below 11 years.

6.5 Daily Admissions in PHCs

Basically, Primary Health Centres are equipped with 5-6 beds, some health centre are increased their capacity with 9-10 beds. But flow of inpatients is large in number due to high population in jurisdiction area of PHCs. The average daily admissions in sample PHCs are given in the table below.

Table 5

Average Daily Admissions (Inpatients) in Sample PHCs

| Sr. No. | No. of Patients | No. of PHCs | Percentage |
|----------|-----------------|-------------|------------|
| 1 | 1-2 | 11 | 30.56 |
| 2 | 3-4 | 15 | 41.67 |
| 3 | 5-6 | 6 | 16.67 |
| 4 | 7-8 | 3 | 8.33 |
| 5 | 9-10 | 1 | 2.78 |
| Total | | 36 | 100.00 |
| Mean | | 3.722 | |
| Mode | | 4.538 | |
| SD | | 2.043 | |
| Skewness | | -0.400 | |

Source : The data has been collected from respective centres

It is observed from the fieldwork that, majority 41.67 per cent PHCs have between 3-4 patients and 30.56 per cent PHCs have 1-2 patients, where as the number of PHCs sharply decline for the last two groups, 8.33 per cent PHCs admit 7-8 patients and 2.78 per cent PHCs admit 9.10 patients. The average variability in the daily admission to the hospitals is between 2 to 3 patients. The skewness is -0.400. This indicates that large number of PHCs are admitted more patients than average. Maximum number of PHCs' daily admissions is between 4 and 5 patients. (i.e. Mode = 4.538).

6.6 Average Daily OPD Attendance

Primary Health Centres render their service to the rural area; hence, PHCs are the most important serve basic health facilities to the ruralites. Rural population in the Kolhapur district has benefited from these centres. The average daily number of outpatients clears the importance of Primary Health Centres in rural area.

Table 5 Average Daily OPD Attendance (Outpatients) in Sample PHCs

| Sr. No. | No. of Patients | No. of PHCs | Percentage |
|---------|-----------------|-------------|------------|
| 1 | 0-20 | 2 | 5.56 |
| 2 | 21-40 | 3 | 8.33 |
| 3 | 41-60 | 24 | 66.67 |
| 4 | 61-80 | 5 | 13.89 |
| 5 | 81-100 | 2 | 5.56 |

| | | |
|----------|--------|--------|
| Total | 36 | 100.00 |
| Mean | 51.111 | |
| Mode | 43.625 | |
| SD | 16.292 | |
| Skewness | 0.459 | |

Source: The data has been collected from respective centres

The above table shows the statistics about the per day OPD cases handled by the sampled PHCs in Kolhapur District. It is seen that, more than two third (66.67%) PHCs treat between 41-60 OPD cases; followed by in descending order 13.89 per cent PHCs receive OPD cases between 61 and 80, 8.33 per cent PHCs handled between 21 and 40 outpatients. Whereas 5.56 per cent PHCs treat to receive more than 80 outpatients per day and same number of PHCs treat to receive less than 20 outpatients daily. The average variability in the daily attendance of OPD in the PHCs is about 16 patients. This distribution is positively skewed (0.459). Therefore, large number of PHCs are having this number is below 51.

6.7 Human Resource Planning in PHCs

In the Kolhapur district, there is not any configuration of human resource management and planning in the Primary Health Centres. Due to the overpopulation, poor management, lack of manpower Primary Health Centres suffers a lot while rendering their services to the needy. Therefore, management of available human resource and recruitment of qualified, trained and capable health personnel is the need of time to the Primary Health Centres in the Kolhapur district.

7.0 Conclusion

It is observed form the above discussion that, Primary Health Centres are facing a many problems regarding the human resource. There is huge requirement of health personnel in the Kolhapur district. Population per doctor is also increased day by day and it broke all the norms. Medical Officers and other paramedical staff in the PHCs are less experienced to serve large number of inpatients and outpatients. Accordingly the human resource management and planning is a intense demand for Primary Health Centres in Kolhapur District.

There is not a Human Resource Department in the any PHC, thus government should address this problem and should start this kind of activity in the Primary Health Centres so rural population can avail a quality health service.

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