ORGANIZATIONAL DEVELOPMENT OF EDUCATIONAL INSTITUTION: A STUDY IN PASCHIM MEDINIPUR DISTRICT OF WEST BENGAL

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ABSTRACT

The present study analyzes the organizational diagnosis of educational institution in Paschim Medinipur district of West Bengal. The study is based on a government aided teachers' training college named Vidyasagar Teachers' Training College, Midnapur, and West Bengal and is interested to improve present condition of its organizational health. Organizational Health Survey Scale and Mukhopadhyay's Institutional Profile Questionnaire (MIPQ) was administered to the 5 full-time teachers and 5 part-time teachers following random sampling procedure.

Keywords: Organizational Development

Introduction:

Organizational development is a generic term embracing a wide range of intervention strategies in the social processes of an organisation. These intervention strategies are aimed at the development of individuals, groups and the organisation as a total system.

As Organisational development is a generic term, therefore, it can be defined in many possible ways. An example of a comprehensive definition of OD in the behavioural science sense of the term is given by Alderfer,1981:

Organizational diagnosis is a process based upon behavioral science theory for publicly entering a human system, collecting valid data about human experiences with that system, and feeding that information back to the system to promote increased understanding of the system by its members (Alderfer, 1981). Purpose of organizational diagnosis is to establish a widely shared understanding of a system and based upon that understanding to determine whether change is desirable.

In a very general sense, OD is concerned with attempts to improve the overall performance and effectiveness of an organisation. Essentially, it is an applied behavioural science approach to planned

change and development of an organisation. The very broad nature of OD means that, for example, it can be related to Morgan's idea on the use of metaphor to see organisation and management.

When we talk about organisation development it is important to emphasize a pluralistic approach and remember that, in practice, we are referring to the development and performance of those individuals and groups of people who comprise the organisation. OD programmes are aimed not only at improving organisation effectiveness and efficiency, but also at:

Motivational climate, consisting of the set of employee attitudes and morale which influence the level of performance.

Concept of system

System can be viewed as a linkage of input flows (energy, materials, information, human resources, economic resources) from sources in the external environment, a transforming mechanism (a machine or a technical-human organization), and flows of outputs or outcomes provided to users. System may include one or more feedback mechanisms for self-regulation.

Focus of attention

Diagnostic activities should focus its attention to two areas : (a) subsystem areas (top management, department, group, individual unit) (b) organization processes or organizational health (decision-making process, communication patterns and styles, relationships between interfacing groups, the management of conflict, the setting of goals and planning methods).

Who will diagnose?

People cannot be diagnosticians in systems in which they are full-fledged members due to overt or covert vested interests. Diagnosticians must maintain role of researcher (systematic, objective and result-oriented investigation) and must establish some type of liaison system between the researcher and the elements of the systems. The liaison may be an individual or a group.

Internal researchers can work in parts of a larger system in which they have not been or currently are not members. But they cannot study their own groups and they generally have a great deal of difficulty with parts of the system in which they have recently been members

Phases of organizational diagnosis

Entry

Primary objectives of entry are to determine which units of the system (individual, group and organization) will participate in the diagnosis and to determine whether the researcher and respondent can reach agreement about their respective roles during data collection and feedback. Researchers may experience anxiety related to potential acceptance or rejection by the respondent system. The more self-awareness and experience the researchers have, the less these feelings will interfere with their effectiveness during entry.

Data collection

The primary objectives of data collection are to gather valid information about the nature of the system systematically and to prepare an analysis of that data for delivery to respondents during feedback. Collection of data proceeds from less (unstructured observation) to more structured methods (qustionnaires) to produce more valid data.

In unstructured observation, researchers will be concerned with the relevant documents offered by the respondent, newsletters, chairman reports, roaming around relevant selected places, interviewing individuals or group. He must decide how much emphasis to give to theoretical concepts for understanding the observational data. Researcher besides observation and theoretical concepts should pay attention to respondent's own explanation of the data. Repeated unstructured observation, explanation of respondents and use of theory lead the researcher to develop hypothesis about the causal relationship of the specific events, relationships among the independent, dependent and moderating variables.

It is better to take a case history of the organization before observational data collection. The case history should cover the followings:

1. **Identification data**: It includes organization name, location, type of organization, organization affiliation, size (financial condition, stockholders, employees).
2. **Historical data**: Cheap complaints, duration and possible determinants, short-range and long-range problems, major crisis of the organization (natural catastrophy, loss of key personnel, labour problems, financial emergencies, technological changes), product service history (change and development of organizational goals, sequence of development in product or service), organizational folklore.
3. **Structural data**: Organizational chart, formal job description, ecology of the organization (spatial distribution of individuals, activities), financial structure, personnel (size, various educational levels, average tenure, range or skills, absentee rate, turnover rate, accident rate), structure for handling personnel (recruitment, orientation, training, growth of the job, promotion,

compensation, performance analysis), rules and regulations (medical, safety, retirement, recreation, other fringe benefits).

4. **Organizational functioning**: Organizational perceptions (alertness, accuracy and vividness), organizational knowledge (acquisition, use and dissemination of knowledge), organizational language, emotional atmosphere of the organization and organizational action.

5. **Attitudes and relationship**: Attitudes towards the task agents, relations to things and ideas, attitudes about self, inter-organizational relationships.

6. **Analysis and conclusions**: Appraisal of the effect of the environment on the organization, appraisal of the effect of the organization on the environment, reactions, appraisal of the organization, impairments and level of integration.

Feedback

Primary objective of feedback is to promote increased understanding of the client system by its members. Effective feedback design relates the content of the feedback to the process by which the analysis is delivered to the system. The process of feedback is the composition of feedback meetings (i.e., who is present with whom), the ordering of the meetings (i.e., which groups receive information first, which is second, etc.), the behavior of the system during feedback and the behavior of the researchers within and between feedback meetings. feedback is probably the period of maximum anxiety during the entire diagnosis. If the system could tolerate the anxiety, system could learn its self.

In sum, the methodology of organizational diagnosis calls for the researcher to be competent in the conventional use of social science tools (observation, interviews, questionnaires and archives) ant to possess a sophisticated theory and the related behavioural skills to enter, collect and feedback information to complex multi group systems.

CASE STUDY

A Government-aided teachers' training college named Vidyasagar Teachers' Training College, Midnapur, West Bengal is interested to improve present condition of its organizational health. Organizational health survey scale and Mukhopadhyay's Institutional Profile Questionnaire (MIPQ) was administered to the 5 full-time teachers and 5 part-time teachers following random sampling procedure.

TABLE 1: **Mukhopadhyay's Institutional Profile Questionnaire(MIPQ) results**

	1	2	3	4	5	6	7	8	9	10	AVERAGE
PRINCIPAL AS LEADER	-14	-11	-9	-7	-12	-11	-8	-10	-14	-14	-10
TEACHER QUALITY	5	6	-2	4	5	3	6	6	5	2	4
LINKAGES AND INTERFACE	-5	-5	-11	-7	3	-12	-13	-8	-9	-3	-7
STUDENTS	18	14	14	15	16	10	8	19	10	11	15
CO-CURRICULAR ACTIVITIES	-6	-7	-2	-4	-3	-8	-2	-5	-4	-3	-4
TEACHING	2	9	-3	4	2	3	-5	8	3	7	3
OFFICE MANAGEMENT	-6	-12	-4	-8	4	-11	-14	-9	2	-12	-7
RELATIONSHIPS	-6	-5	-7	-3	-8	4	-11	-4	-12	2	-5
MATERIAL RESOURCE	7	5	0	8	4	5	-6	11	9	7	5
EXAMINATION	-2	-5	3	5	0	-4	-3	7	2	-3	1
JOB SATISFACTION	5	8	11	12	4	5	6	-3	8	4	6

Table 1 results show weaknesses in the areas of management (Principal as leader, office management and linkages and interface), strengths in the areas of students, teachers and material resources. Poor satisfaction level of organization with co-curricular activities and relationships exist. The authority has been suggested to (i) join leadership development programme for principal (ii) introduce sensitivity training programme for interpersonal conflict reduction (iii) introduce forum for linkages and interface and relationship development programme in order to improve the team spirit of the institution.

TABLE 2 : ANSWER SHEET OF ORGANISATIONAL HEALTH SURVEY

	Your Score	Your Ranking	Group Average	Group Ranking	Areas
I	4	8	6	8	RESULT ORIENTATION
II	4	3	2	1	LEADERSHIP
III	3	6	5	7	ORGANISATIONAL

					STRUCTURE
IV	4	7	5	6	COMMUNICATION
V	2	2	2	2	CONFLICT MANAGEMENT
VI	3	4	4	5	HUMAN RESOURCE MANAGEMENT
VII	3	5	3	3	PARTICIPATION
VIII	2	1	4	4	CREATIVITY

BELOW LIST MY PERSONAL THREE LOWEST SCORES		
	SCORE	AREA TITLE
1	2	CREATIVITY
2	2	CONFLICT MANAGEMENT
3	3	LEADERSHIP

BELOW LIST GROUP AVERAGE THREE LOWEST SCORES		
	AVERAGE SCORE	AREA TITLE
1	2	LEADERSHIP
2	2	CONFLICT MANAGEMENT
3	3	PARTICIPATION

Table 2 (given above) results show that leadership and conflict management areas of the institution has to be addressed first. The authority is suggested to (i) introduce quality circle for efficient housekeeping and for awareness of democratic participation (ii) introduce sensitivity training programme for interpersonal conflict reduction (iii) introduce creativity development programme in order to collect quality equipment and tools from various suppliers.

THE IMPLEMENTATION OF OD

In order to bring about effective change, OD makes use of a number of approaches-often referred to as intervention strategies-including survey research and feedback and teambuilding.

1. Survey research and feedback involves the use of questionnaire surveys to help determine the attitudes of members to the functioning of the organisation. Results of the surveys are fed back to top management and then to work groups for interpretation and analysis. Group members participate in discussions on the implications fo the information, the diagnosis of problems and the development of action plans to help overcome the problems identified.

2. Sensitivity training involves small, unstructured, face-to-face groupings who meet without a planned agenda or set activities. Training is intended to concentrate on process rather than content: that is, on the feeling level of communication rather than the informational value of communication. With the guidance of the trainers, participants' patterns of behaviour become the focus of attention for the group. The objectives are usually to increase participants' sensitivity to the emotional reactions in themselves and others, their diagnostic ability, and their behavioural flexibility and effectiveness.

3. Teambuilding is the process of diagnosing task procedures and patterns of human interaction within a work group. The basic objective is to improve the overall performance of the organisation through improvements in the effectiveness of teams. Attention is focussed on work procedures and interpersonal relationships, and especially the role of the leader in relation to other members of the group.

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