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A COMPARATIVE STUDY OF FEMALE **DOCTORS SATISFACTION LEVEL IN GOVERNMENT AND PRIVATE HOSPITALS OF DISTRICT GAUTAM BUDHA NAGAR (U.P)**

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Abstract: Health is a critical component of a country's development, as well as its economic progress and internal stability. In terms of income and employment, healthcare is currently one of India's top service businesses. Hospital administrators, doctors and staff members manage all of a health care unit's department under standard practices. However, in today's era of international health care facilities, it is widely understood that hospital management is a full-time position and it requires every person participation as a team member in work. Private hospitals account for more than 80% of overall healthcare spending, making them the most powerful player in the industry. Inadequate public investment in health infrastructure has allowed private hospitals to capture a large share of the market. For the growth and development of the hospital industry, whether it is a private or government healthcare unit, it is necessary to identify the factors that increase the satisfaction level of the hospital's doctors, because the hospital's staff and their interactions with the patients determine the impression that the latter carry with them. It will determine whether they want to return to the same hospital in the future. It is expected that the study's findings will contribute in the interest of the government, medical institutions, hospital administrators, and management, inspiring them to work tirelessly to bring about a new revolution in hospital management in the country as a whole, and in the district of Gautam Budha Nagar in particular.

Keywords: Working Climate, Job Satisfaction, HR Practices, Quality Services.

I. INTRODUCTION

Doctors and patients are the true evaluators of quality services of any hospital. Doctors and patients perceptions can be used to assess any hospital. Doctors level of satisfaction after receiving good HR practices and working climate is referred to their perception. In hospitals, the level of doctors happiness influences the success of any given health-care institution. It's usually based on personal experience, word-of-mouth exposure, or reliable information from a trusted source. Doctor's satisfaction with the quality of treatment and good working climate offered by a healthcare units is determined by a number of variables, including punctuality, efficiency, authenticity and genuine treatment of stress level of doctors, reasonable salary, respect and caring, safety and security. Female Doctor's happiness with a hospital is also influenced by the attitude of healthcare providers and the hospital's atmosphere.

II. REVIEW OF LITERATURE

Feras Alkaa (2011) the study intends to investigate the role of socioeconomic factors in determining healthcare quality. In contrast, the study found that private hospitals had higher quality than state hospitals. The level of doctors satisfaction is believed to be the most important factor in determining a healthcare organization's service quality (Cronin & Taylor, 1992; Connor et al., 1994). It indicates that staff satisfaction is a key factor in making essential decisions about healthcare services (Gilbert et al., 1992), and the quality of services provided to clients must match their expectations (Parasuraman et al., 1985, 1988; Reidenbach & Sandifer-Smallwood, 1990; Babakus & Mangold, 1992; Zeithaml et al., 1993).

According to Rajendran et al. (2010), doctors and patients priorities the interpersonal element of care since they are unable to properly assess the technical quality of healthcare services. In order to get a comprehensive view of their services, hospital service providers must understand the demands of doctors, staff members and patients, according to the study.

According to Sharmila (2013), service quality in private hospitals meet patients' expectations and private hospitals provide superior healthcare services than government hospitals. The hospitals can utilize the information to reengineer and restructure their quality management systems, their staff members satisfaction, as well as the future direction of their more successful healthcare quality plans.

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According to their research, accreditation certification is required to improve the quality of hospital services, and it provides international recognition and guaranteed quality to healthcare units. It also not only provides care, safety and security to female doctors, but also improves quality and attracts new markets.

For several reasons, the doctors job satisfaction has always been an important issue in empirical pedagogical research. Job satisfaction is considered to have an effect on the quality of services and their professional achievements (Smooch and Drach-Zahavy 2000).

III. RESEARCH METHODOLOGY

The questionnaires were distributed to one hundred forty female doctors from government and private hospitals of Gautam Budh Nagar such as – Dr. Bhim Rao Ambedker Hospital, ESI Hospital, Air Force Hospital, Indraprastha Medical Corporation, Indo Gulf Diagnostics and Research Centre, Fortis Hospital, Apollo Hospital, MAX Hospital, Jaypee Hospital, Prakash Hospital etc., out of which ninety one female doctors were taken from government Hospitals and forty nine were taken from private Hospitals. Total sixteen Hospitals were taken out of which ten were from government and six were from private Hospitals of Gautam Budh Nagar. The research design was descriptive in nature and convenience sampling was used to collect data from selected private and government Hospitals of Gautam Budh Nagar. Five Point Likert scale was used to measure Doctors responses towards working climate and HR practices of the private and government Hospitals. Wilcoxon signed rank test and Sandler's A-test were used to find out whether the differences between both the Hospitals working climate and HR practices was similar or different from each other.

IV. OBJECTIVES OF THE STUDY

Following objectives are identified for the present study,

- To study the various factors who are responsible for good working climate and HR practices in government hospitals and private hospitals towards female doctors.
- To compare the working climate and HR practices in between government hospitals and private hospitals for female doctors
- To examine the impact of working climate and HR practices on female doctors job satisfaction level in government hospitals and private hospitals.
- To suggest suggestions and recommendations in order to improve the HR practices and working climate with a view to make the
 female doctors more satisfied and responsive towards their job and helpful in delivering quality services to the society. THE
 HYPOTHESIS BUILD AS PER THE ANALYSIS
- Both the government and private Hospitals' female doctors have no difference in their attitude for the implementation of job satisfaction practices in both the Hospitals.
- There is no difference between the working climate and HR practices of both government and private Hospitals towards female doctors.

V. ANALYSIS OF DATA

Responses of female doctors towards Working Climate and HR practices on a Five Point Likert Scale

1. Work Environment and Resource Adequacy:

Table 1.1 Work Environment and Resource Adequacy							
	No.	of Female Do	ctors	Total Scores of the Response			
Level of Agreement Score Point	Gov.	Pvt.	All	Gov. Pvt.		All	
	Hospitals	Hospitals	Hospitals	Hospitals	Hospitals	Hospitals	
	91	49	140	Hospitals	Hospitals	Hospitais	
Very Satisfied (5)	36	23	59	180	115	295	
Some What Satisfied (4)	50	17	67	200	68	268	
Neutral (3)	1	0	1	3	0	3	
Some What Dissatisfied (2)	4	6	10	8	12	20	
Very Dissatisfied (1)	0	3	3	0	3	3	
Total	91	49	140	391	198	589	

	% of All Hospitals Response					
	Gov.	Pvt.	All			
Very Satisfied (5)	46.03	58.08	50.08			
Some What Satisfied (4)	51.15	34.34	45.50			
Neutral (3)	0.76	0	0.50			
Some What Dissatisfied (2)	2.04	6.06	3.39			
Very Dissatisfied (1)	0	1.51	0.50			
Total	100	100	100			

Result Interpretation:

The female doctors of private hospitals were very satisfied (58.08) in comparison to government hospitals female doctors (46.03). The female doctors of government hospitals were somewhat satisfied (51.15) than female doctors of private hospitals (34.34). If talk about neutral response then the figure shows that the female doctors of both hospitals were almost equally neutral (0.76 and 0). Female doctors of private hospitals somewhat dissatisfied (6.06) more than government hospitals female doctors (2.04). The female doctors of private hospitals were more very dissatisfied (1.51) than government hospitals (0).

2. Level of Autonomy:

Table 1.2 Level of Autonomy							
	No. of Female Doctors			Total So	Total Scores of the Response		
Level of Agreement & Score Point	Gov. Hospitals	Pvt. Hospitals	All Hospitals	Gov. Hospitals	Pvt. Hospitals	All Hospitals	
	91	49	140	Hospitals	Hospitals	Hospitais	
Very Satisfied (5)	20	5	25	100	25	125	
Some What Satisfied (4)	46	36	82	184	144	328	
Neutral (3)	2	0	2	6	0	6	
Some What Dissatisfied (2)	18	8	26	36	16	52	
Very Dissatisfied (1)	5	0	5	5	0	5	
Total	91	49	140	331	185	516	

	% of All Hospitals Response					
	Gov.	Pvt.	All			
Very Satisfied (5)	30.21	13.51	24.22			
Some What Satisfied (4)	55.58	77.83	63.56			
Neutral (3)	1.81	0	1.16			
Some What Dissatisfied (2)	10.87	8.64	10.07			
Very Dissatisfied (1)	1.51	0	0.96			
Total	100	100	100			

Result Interpretation:

Female doctors of government hospitals were very satisfied (30.21) than private hospitals (13.51). Female doctors of private hospitals (77.83) were somewhat satisfied than government hospitals (55.58). Female doctors of government hospitals (1.81) were more neutral than female doctors of private hospitals (0). According to responses of both hospitals female doctors, government hospitals female doctors were somewhat dissatisfied (10.87) than private hospitals female doctors (8.64). Government hospitals female doctors were very dissatisfied (1.51) in comparison to female doctors of private hospitals (0).

3. Reward & Recognition:

Table 1.3 Reward & Recognition							
	No. o	No. of Female Doctors			Total Scores of the Response		
Level of Agreement & Score Point	Gov.	Pvt.	All	C P-4		A 11	
	Hospitals	Hospitals	Hospitals	Gov.	Pvt. Hospitals	All Hospitals	
	91	49	140	Hospitals	nospitais	nospitais	
Very Satisfied (5)	54	27	81	270	135	405	
Some What Satisfied (4)	28	18	46	112	72	184	
Neutral (3)	2	0	2	6	0	6	
Some What Dissatisfied (2)	7	2	9	14	4	18	
Very Dissatisfied (1)	0	2	2	0	2	2	
Total	91	49	140	402	213	615	

	% of All Hospitals Response						
	Gov.	Pvt.	All				
Very Satisfied (5)	67.16	63.38	65.85				
Some What Satisfied (4)	27.86	33.80	29.91				
Neutral (3)	1.49	0	0.97				
Some What Dissatisfied (2)	3.48	1.87	2.92				
Very Dissatisfied (1)	0	0.93	0.32				
Total	100	100	100				

Result Interpretation:

Government hospitals female doctors were very satisfied (67.16) in comparison to private hospitals female doctors (63.38). The private hospitals female doctors were somewhat satisfied (33.80) than female doctors of government hospitals (27.86). In comparison to both hospitals, female doctors responses, female doctors of private hospitals less neutral (Nil) than female doctors of government hospitals (1.49). Female doctors of government hospitals were somewhat dissatisfied (3.48) than private hospitals female doctors (1.87). The responses of very dissatisfied were almost equal government and private hospitals subsequently (0) and (0.93).

4. Role Stagnation:

Table 1.4 Role Stagnation							
	No. o	of Female Do	ctors	Total So	Total Scores of the Response		
Level of Agreement & Score Point	Gov. Hospitals	Pvt. Hospitals	All Hospitals	Gov. Hospitals	Pvt. Hospitals	All Hospitals	
	91	49	140	Hospitals	Hospitals	Hospitais	
Very Satisfied (5)	42	25	67	210	125	335	
Some What Satisfied (4)	42	17	59	168	68	236	
Neutral (3)	2	0	2	6	0	6	
Some What Dissatisfied (2)	5	4	9	10	8	18	
Very Dissatisfied (1)	0	3	3	0	3	3	
Total	91	49	140	394	204	598	

	% of All Hospitals Response					
	Gov.	Pvt.	All			
Very Satisfied (5)	53.29	61.27	56.02			
Some What Satisfied (4)	42.63	33.33	39.46			
Neutral (3)	1.52	0	1.00			
Some What Dissatisfied (2)	2.53	3.92	3.01			
Very Dissatisfied (1)	0	1.47	0.50			
Total	100	100	100			

Result Interpretation:

Private hospitals female doctors were very satisfied (61.27) in comparison to government hospitals (53.29). Female doctors of government Hospitals were somewhat satisfied (42.63) than the female doctors of private Hospitals (33.33). The ratio of neural responses of both the hospitals female doctors are (1.52) from government and (0) from private hospitals. If we come on somewhat dissatisfied than the female doctors of private hospitals are more dissatisfied (3.92) than government Hospitals (2.53). The female doctors of private hospitals are very dissatisfied (1.47) than the female doctors of government doctors (0).

5. Job Security:

Table 1.5 Job Security							
	No. o	of Female Do	ctors	Total Scores of the Response			
Level of Agreement & Score Point	Gov.	Pvt.	All	Gov. Pvt.		. All	
	Hospitals	Hospitals	Hospitals	Hospitals	Hospitals	Hospitals	
	91	49	140	Hospitals	Hospitals	Hospitals	
Very Satisfied (5)	32	16	48	160	80	340	
Some What Satisfied (4)	51	20	71	204	80	284	
Neutral (3)	2	5	7	6	15	21	
Some What Dissatisfied (2)	6	4	10	12	8	20	
Very Dissatisfied (1)	0	4	4	0	4	4	
Total	91	49	140	382	187	669	

	% of All Hospitals Response					
	Gov.	Pvt.	All			
Very Satisfied (5)	41.88	42.78	50.82			
Some What Satisfied (4)	53.40	42.78	42.45			
Neutral (3)	1.57	8.02	3.13			
Some What Dissatisfied (2)	3.14	4.27	2.98			
Very Dissatisfied (1)	0	2.13	0.59			
Total	100	100	100			

Result Interpretation:

Private Hospitals female doctors were very satisfied (42.78) than private Hospitals female doctors (41.88). If we discussed about somewhat satisfied than government Hospitals female doctors responses (53.40) more than private Hospitals (42.78). The female doctors of private hospitals are more neutral (8.02) than the government hospitals female doctors. The female doctors of government Hospitals (4.27) more somewhat dissatisfied than government Hospitals (3.14). The female doctors of private hospitals are very dissatisfied (2.13) than the government hospitals.

6. Training and Development:

Table 1.6 Training and Development							
	No.	No. of Female Doctors			Total Scores of the Response		
Level of Agreement & Score Point	Gov. Hospitals	Pvt. Hospitals	All Hospitals	Gov. Pvt. Hospitals Hospitals		All Hospitals	
	91	49	140			Hospitals	
Very Satisfied (5)	48	35	93	240	175	465	
Some What Satisfied (4)	34	13	47	136	52	188	
Neutral (3)	3	0	3	9	0	9	
Some What Dissatisfied (2)	6	0	6	12	0	12	
Very Dissatisfied (1)	0	1	1	0	1	1	
Total	91	49	140	397	228	675	

	% of All Hospitals Response					
	Gov.	Pvt.	All			
Very Satisfied (5)	60.45	76.75	68.88			
Some What Satisfied (4)	34.25	22.80	27.85			
Neutral (3)	2.26	0	1.33			
Some What Dissatisfied (2)	3.02	0	1.77			
Very Dissatisfied (1)	0	0.43	0.14			
Total	100	100	100			

Result Interpretation:

Private Hospitals female doctors were very satisfied (76.75) than government Hospitals female doctors (60.45). Female doctors of government Hospitals (34.25) were somewhat satisfied than private Hospitals (22.80) and the neutral responses of government Hospitals (2.26) more than private Hospitals (Nil). According to responses of both Hospitals female doctors, there were a difference between government hospitals (3.02) and private Hospitals (Nil). The female doctors responses of both the hospitals regarding very dissatisfied were almost equal (0) and (0.43) respectively.

7. Valued Participation:

Table 1.7 Valued Participation						
	No. of Female Doctors		Total Scores of the Response			
Level of Agreement & Score Point	Gov. Pvt. All Hospitals Hospitals Hospitals		Gov. Pvt Hospitals Hospitals		All Hospitals	
	91	49	140	Hospitals	Hospitals	Hospitals
Very Satisfied (5)	50	32	82	250	160	410
Some What Satisfied (4)	38	14	52	152	56	208
Neutral (3)	2	1	3	6	3	9
Some What Dissatisfied (2)	1	1	2	2	2	4
Very Dissatisfied (1)	0	1	1	0	1	1
Total	91	49	140	410	222	632

	Gov.	Pvt.	All
Very Satisfied (5)	60.97	72.07	64.87
Some What Satisfied (4)	37.07	25.22	32.91
Neutral (3)	1.46	1.35	1.42
Some What Dissatisfied (2)	0.48	0.90	0.63
Very Dissatisfied (1)	0	0.45	0.15
Total	100	100	100

% of All Hospitals Response

Result Interpretation:

Female doctors of private hospitals were very satisfied (72.07) than government hospitals female doctors (60.97). Private Hospitals female doctors were less somewhat satisfied (25.22) than government Hospitals (37.07). If we discussed about neutral responses than there were little difference between both Hospitals responses, both were equal (1.46) and (1.35) respectively. The responses of government Hospitals and private Hospitals for somewhat dissatisfied were almost equal (0.48 and 0.90). There were little responses for very dissatisfied from both Hospitals female doctors.

8. Delivering Quality Services and Maintaining Balance Between Family and Work-Life:

Table 1.8 Delivering quality services and maintaining balance between Family and Work-Life								
	No. o	No. of Female Doctors			Total Scores of the Response			
Level of Agreement & Score Point	Gov.	Pvt.	All	Gov.	Pvt. Hospitals	All Hospitals		
	Hospitals	Hospitals	Hospitals	Hospitals				
	91	49	140					
Very Satisfied (5)	49	26	75	245	130	375		
Some What Satisfied (4)	32	17	49	128	68	196		
Neutral (3)	2	0	2	6	0	6		
Some What Dissatisfied (2)	6	6	12	12	12	24		
Very Dissatisfied (1)	2	0	2	2	0	2		
Total	91	49	140	393	210	603		
·				0/ of A	ll Hognitals D	ocnonco		

	% of All Hospitals Response					
	Gov. Pvt. All					
Very Satisfied (5)	62.34	61.90	62.18			
Some What Satisfied (4)	32.56	32.38	32.50			
Neutral (3)	1.52	0	0.99			
Some What Dissatisfied (2)	3.05	5.71	3.98			
Very Dissatisfied (1)	0.50	0	0.50			
Total	100	100	100			

Result Interpretation:

Analysis of responses on a five point likert scale for the factor delivering quality services and maintaining balance between family and work-life showed equal response for the category very satisfied for both government Hospitals (62.34) and private hospitals (61.90) were very satisfied (62.34) than private Hospitals female doctors (61.90). The responses of both hospitals female doctors regarding somewhat satisfied (32.56) and (32.38) were almost equal. If we discussed about neutral responses, government Hospitals female doctors were more neutral (1.52) than the private Hospitals (0). The female doctors of private Hospitals were somewhat dissatisfied (5.71) in comparison to government Hospitals (3.05). Almost negligible response was observed for the category very dissatisfied in both the hospitals.

9. Career Planning and Development Opportunities:

Table 1.9 Career Planning and Development Opportunities							
	No. of Female Doctors			Total Scores of the Response			
Level of Agreement & Score Point	Gov.	Pvt.	All	Gov.	Pvt.	All	
	Hospitals	Hospitals	Hospitals	Hospitals	Hospitals		
	91	1 49 140		Hospitals	Hospitals	Hospitals	
Very Satisfied (5)	33	26	59	165	130	295	
Some What Satisfied (4)	52	18	70	208	72	280	
Neutral (3)	3	1	4	9	3	12	
Some What Dissatisfied (2)	3	3	6	6	6	12	
Very Dissatisfied (1)	0	1	1	0	1	1	
Total	91	49	140	388	212	600	

	% of All Hospitals Response				
	Gov. Pvt. Al				
Very Satisfied (5)	45.52	61.32	49.16		
Some What Satisfied (4)	53.60	33.96	46.66		
Neutral (3)	2.31	1.41	2		
Some What Dissatisfied (2)	1.54	2.83	2		
Very Dissatisfied (1)	0	0.47	0.16		
Total	100	100	100		

Result Interpretation:

Female doctors of private Hospitals (61.32) were very satisfied than female doctors of government Hospitals (45.52). Government Hospitals female doctors were somewhat satisfied (53.60) than private Hospitals female doctors (33.96). Government Hospitals female doctors were more neutral (2.31) than private Hospitals female doctors (1.41). Responses for somewhat dissatisfied (2.83) for government hospitals were more than (1.54) for private hospitals. The responses of very dissatisfied from both Hospitals female doctors members were almost equal (0 and 0.47).

Table 1.11Average Scores & Differences

Contents	Government Hospitals	Private Hospitals	All Hospitals
Work environment and resource adequacy	4.29	4.04	4.20
Level of autonomy	3.63	3.77	3.68
Reward & recognition	4.41	4.34	4.39
Role stagnation	4.32	4.16	4.27
Job security	4.19	3.81	4.06
Training and development	4.36	4.65	4.46
Valued Participation	4.50	4.53	4.51
Delivering quality services and maintaining balance between family and work-life	4.31	4.28	4.30
Career planning and development opportunities	4.26	4.32	4.28
Average Scores	4.25	4.21	4.23

Calculation: -

Level of Significance 5% Degree of Freedom 9 - 1 = 8Wilcoxon's Matched Pairs Test (Wilcoxon Test) Calculated value of T statistics 17 Table value of T statistics 04 Sandler's Test

$$A = \frac{\sum D^2}{(\sum D)^2}$$

Calculated value of A statistics 0.346/0.1369 2.53

0.278 Table value of A statistics

: No difference between the scores of private and government Hospitals. Ho Ha : There is a difference between the scores of private and government Hospitals

As per (Table 1.11), the average scores of all the 9 elements of working climate and HR practices were 4.25 for the government Hospitals female doctors while 4.21 for private Hospitals female doctors on a 5 point likert scale. The difference between the two scores appeared almost negligible and the same had been shown as per the Wilcoxon Test and the Sander's Test at 5% level of significance. For, the calculated value of T – statistics was 17 as against its table value is 4 and the calculated value A – statistics was 2.53 as against its corresponding table value of 0.278 at 5% level of significance for a 9 degree of freedom, a condition leading to acceptance of Null Hypothesis denoting that average scores of all the 9 elements of working climate and HR practices did not differ between the average scores of government Hospitals and private Hospitals at higher level.

Wilcoxon Test Result **Hypothesis Test Summary**

ſ		Null Hypothesis	Test	Sig.	Decision
	1	The median of differences between Government and	Related Samples Wilcoxon Signed	0.553	Retain the null hypothesis
		Private equals 0.	Rank Test		119 0011 10313

Asymptotic significances are displayed. The significance level is .05.

HYPOTHESIS VIEWED AS PER THE ANALYSIS

From the above discussion it is evident that -

- Both the government and private Hospitals' female doctors have no difference in their attitude for the implementation of job satisfaction practices in both the Hospitals. Thus, the first hypothesis of the study stands accepted.
- The female doctors consider working climate and HR practices inevitable in both the government Hospitals and private Hospitals, and there is no difference in the working climate and HR practices in government Hospitals and private Hospitals, and as such second hypothesis stands accepted.

VI. FINDINGS OF THE STUDY

- From the Analysis of Data (Table 1.1) it can be concluded that female doctors of government Hospitals have shown 85.92% level of agreement for work environment & resource adequacy and 80.8% female doctors of the private hospitals showed their agreement for their inclusion in HRD practices.
- From the (Table 1.2) it can be concluded that 72.74% female doctors of government Hospitals have shown their level of agreement for autonomy and 75.4% of the female doctors of private hospitals showed their agreement for their inclusion in HRD practices.
- From the (Table 1.3) it can be concluded that 88.2% of the female doctors of government hospitals have shown the level of agreement for reward and recognition and 86.8% of the female doctors of the private hospitals showed their level of agreement which is not a big difference.

- 86.4% of the female doctors of government hospitals showed the degree of agreement for role stagnation and 83.21% of the female doctors of private hospitals showed the degree of agreement for role stagnation.
- 83.8% of the female doctors of government hospitals have showed their level of agreement in job security and 76.2% female doctors of private hospitals have showed their level of agreement in job security.
- 87.2% of the female doctors of government hospitals have showed the degree of agreement for training and development and 93% of the private hospitals female doctors have showed the degree of agreement in training and development.
- 90% of the female doctors of government hospitals have showed their agreement for valued participation and 90% of the female doctors of private hospitals have also showed their level of agreement in valued participation.
- From the (Table 1.8) it can be concluded that 86.3% of the female doctors have showed their level of agreement for delivering quality services and maintaining balance between family and work-life and 85.6% of the female doctors showed their level of agreement in delivering quality services and maintain balance between family and work-life which is not a big difference.
- 85.2% of the female doctors have showed their level of agreement for career planning and development opportunities and 86.4% of the female doctors of private hospitals have showed their level of agreement for career planning and development opportunities.

VII. SUGGESTIONS OF THE STUDY

- Top management authorities should give importance to more openness, transparency in their interpersonal relations with their staff member, give high value to human dignity, implements people oriented management system, creative belongingness and trust on staff members and two way communication.
- Management of the hospitals should seriously consider the needs of the doctors and take initiative to meet them so that they can easily cultivate the satisfaction of the doctors & staff and enhance the quality services in the hospitals. Management must provide a healthy working environment and facilities to their female doctors in the hospitals such as proper physical facilities, adequate salary, proper support of colleagues, training & development in services, personal attention, flexi working hours for female, job security, recognition for work etc. When female doctors perceived support from administrators than only they are motivated to do their best in their profession, and when female doctors are not satisfied with their working climate and HR practices than they are more likely to change the hospitals so good working climate and HR practices influence them and their desire to remain in hospitals throughout their career.
- Timely and Appropriate recognition & treat staff members fairly with integrity, this treatment will act as motivating factor for doctors and staff members to keep on giving good performance and enhance their level of job satisfaction. Everyone appreciates getting credit when it is due. The occasions to share the success of employers with others are almost limit less. The work of meritorious doctors and staff members should be given the recognition in form of publicized recognition and financial and nonfinancial rewards socializing and interaction at personal level could enhance the bonding.
- Female doctors should be given proper orientation regarding team work and they should be encouraged to take joint team projects. This will increase the intimacy among the female doctors and in future they will not be reluctant to work in teams because team work is the duty of this medico profession.
- There should be uniform, balanced and impartial doctors performance review system based on feedback of patients, their work performance in a year. This system in fact needs a total review.

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