



Challenges and potentials of introducing a Human Resource Management model in Iraqi Kurdistan Hospitals.

A Re-engineering case study of "Thatya" sections in learning hospitals

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What is Human Resources Management (HRM)?

What?

The design of **formal systems** in an organization to ensure **effective** and **efficient** use of human talent to accomplish organizational goals.

(Robert L. Mathis , John H. Jackson, 2003)

HRM Functions

- HR Strategic Planning and Analysis
- Selection, Placement and Orientation of HR
- Training and Development of HR
- Performance Evaluation of HR
- Compensation and Benefits
- Equal Employment Opportunity
- Health, Safety, and Security
- Employee and Labor/Management Relations



Why? HRM

- More Educated workforce
- Hospitals are Learning Organizations
- Patient vs. Customer perspective
- Technology
- Family/Individual issues
- Competition!



HRM Evolution

Personnel Management

(19th century, Scientific Management 1911-1970s)

- Bureaucratic role (Book keeping)
- Collective bargaining role
- Implementation of legislation role
- Growing performance improvement role

Human Resource Management

(Human Relations School, Hawthorne Studies 30s) 1947

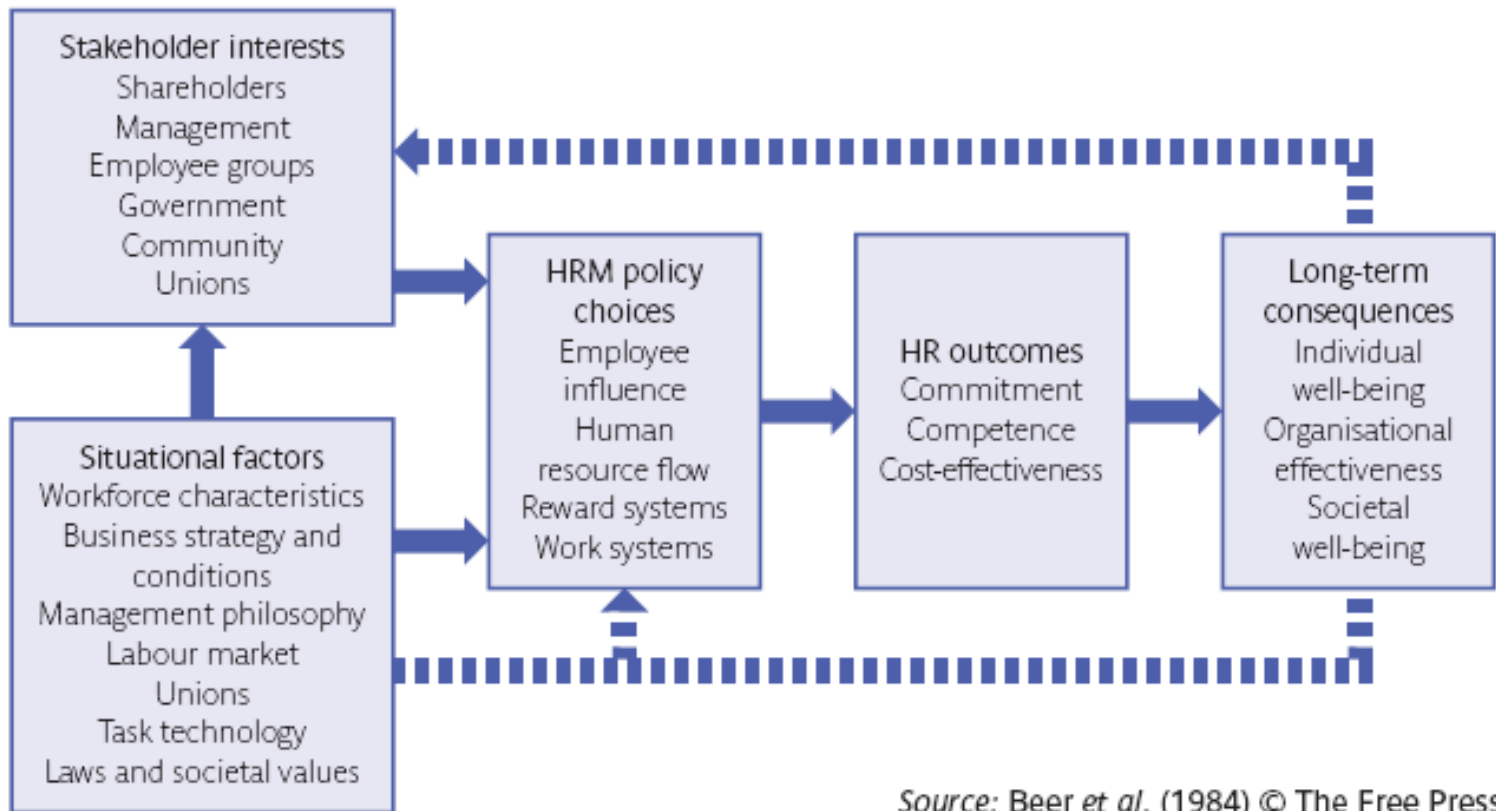
- Strict and rigorous selection and recruitment
- High level of training, especially induction training and on the job training
- Team working
- Multitasking
- Better management-worker communications
- Use of quality circles and an emphasis on right first time quality
- Encouragement of employee suggestions and innovation



Personnel Management vs.HRM

	Personnel	HRM
Time and planning	Short term, reactive ad hoc marginal	Long term, proactive, strategic, integrated
Psychological contract	Compliance	Commitment
Control systems	External	Self-control
Employee relations	Pluralist, collective, low trust	Unitarist, individual, high trust
Structures and systems	Bureaucratic/mechanistic, centralised, formal	Organic, devolved, flexible
Roles	Specialist/professional	Largely integrated in management
Evaluation criteria	Cost minimisation	Maximum utilisation (human asset accounting)

HRM Models: The Map of HRM territory





Rizgari and Azadi Case Studies

Rizgari Teaching Hospital

- Based in Erbil province
- built in 1984
- 493 beds
- 726 employees(1050 !)

Azadi Teaching Hospital:

- Based in Dohuk province
- built in 1984
- 490 beds
- 742 employees

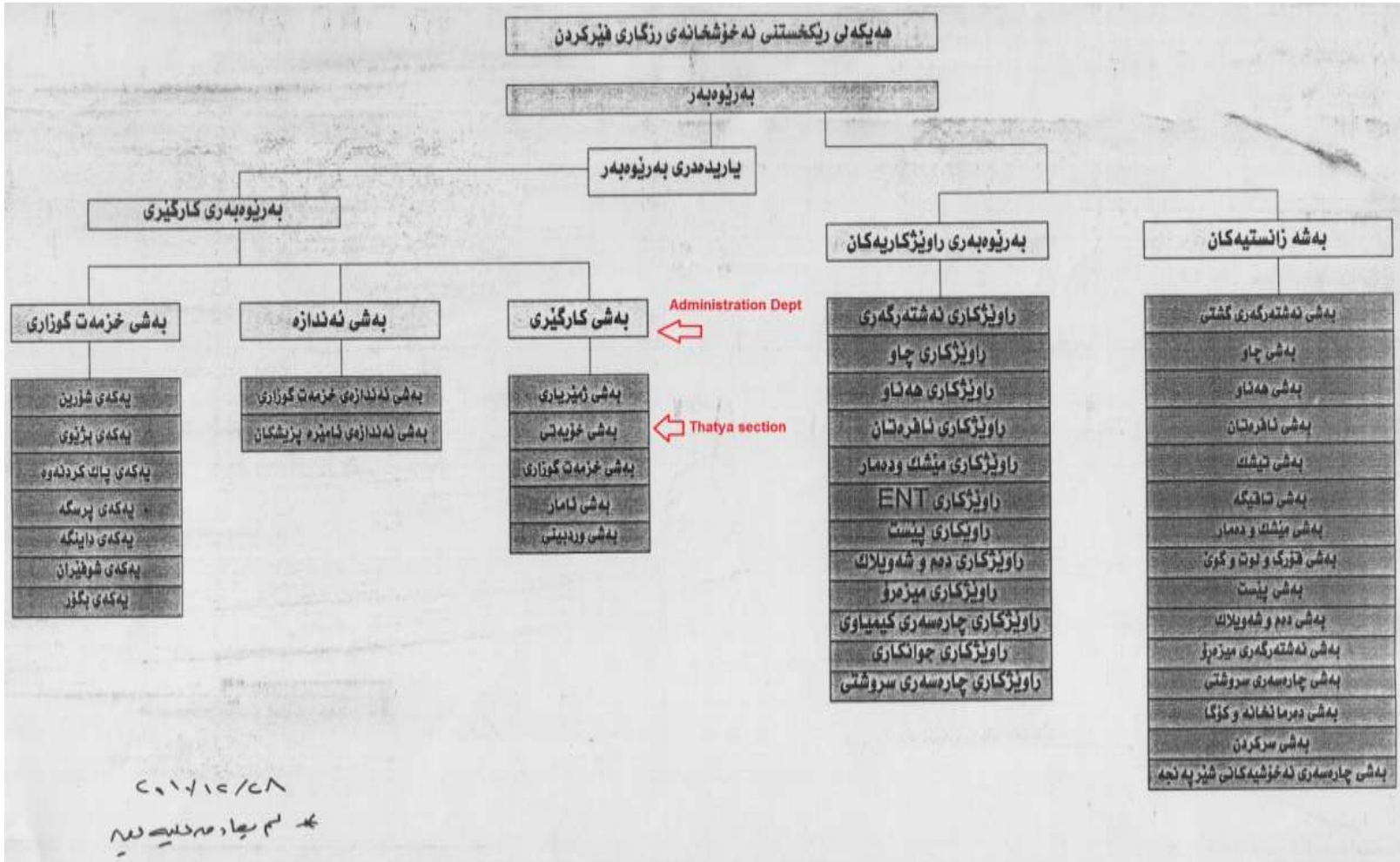


The “Thatya” or ‘Khoyti’ Sections

- Sections/Departments affiliated with the Directory of Administration
- Origins of “Thatya”. Personal vs. Personnel.



Organization Chart for Rizgari Hospital





Thatya vs. HRM functions

Thatya Functions

- Managing employee vita (archiving)
- Registering and issuing letters (mail)
- Distributing the mail (Formal letters)
- Typing formal letters
- Photo copying documents

HRM Functions

- HR Strategic Planning
- Selection, Placement and orientation of HR
- Training and Development of HR
- Performance Evaluation of HR
- Compensation



Workforce profile in Thatya Sections (Rizgari and Azadi Hospitals)

Rizgari Hospital

Credentials	No. Type	Total
Diploma	(1) Health (2) Agri.	3
High School	3	3
Intermediate School	3	3
		9
Utility Ratio for 726/1050		1 HR Emp per 80.6/116.6

Azadi Hospital

Credentials	No. Type	Total
BA, BSC	(1) Law (1) Economics (1) Bus. Admin	3
Primary School	(2)	2
		5
Utility Ratio for 742 employee		1HR Emp. Per 148.4

Job Evaluation by line managers in studied cases.

Doctor's Evaluation Form (Senior Resident)

مستشفى الملك سعود (الرياض)

الاسم	الدرجة	الرقم الوظيفي	التخصص
د. محمد بن عبد الله	أخصائي	1000000000	الطب الباطني

الاسم	الدرجة	الرقم الوظيفي	التخصص
د. محمد بن عبد الله	أخصائي	1000000000	الطب الباطني

الدرجة الوظيفية	الدرجة الوظيفية	الدرجة الوظيفية	الدرجة الوظيفية
100	100	100	100

أ. د. محمد بن عبد الله

Doctor's Evaluation Form (Rotator Resident)

مستشفى الملك سعود (الرياض)

الاسم	الدرجة	الرقم الوظيفي	التخصص
د. محمد بن عبد الله	أخصائي	1000000000	الطب الباطني

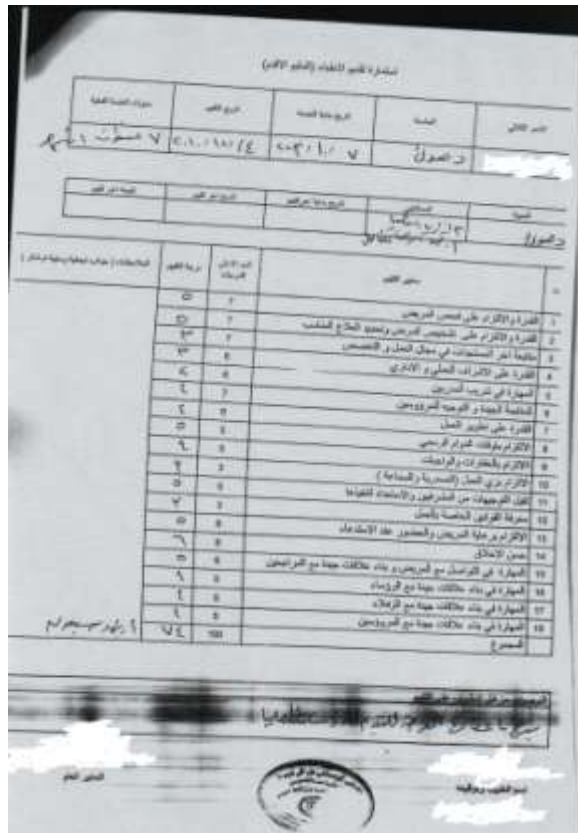
الاسم	الدرجة	الرقم الوظيفي	التخصص
د. محمد بن عبد الله	أخصائي	1000000000	الطب الباطني

الدرجة الوظيفية	الدرجة الوظيفية	الدرجة الوظيفية	الدرجة الوظيفية
100	100	100	100

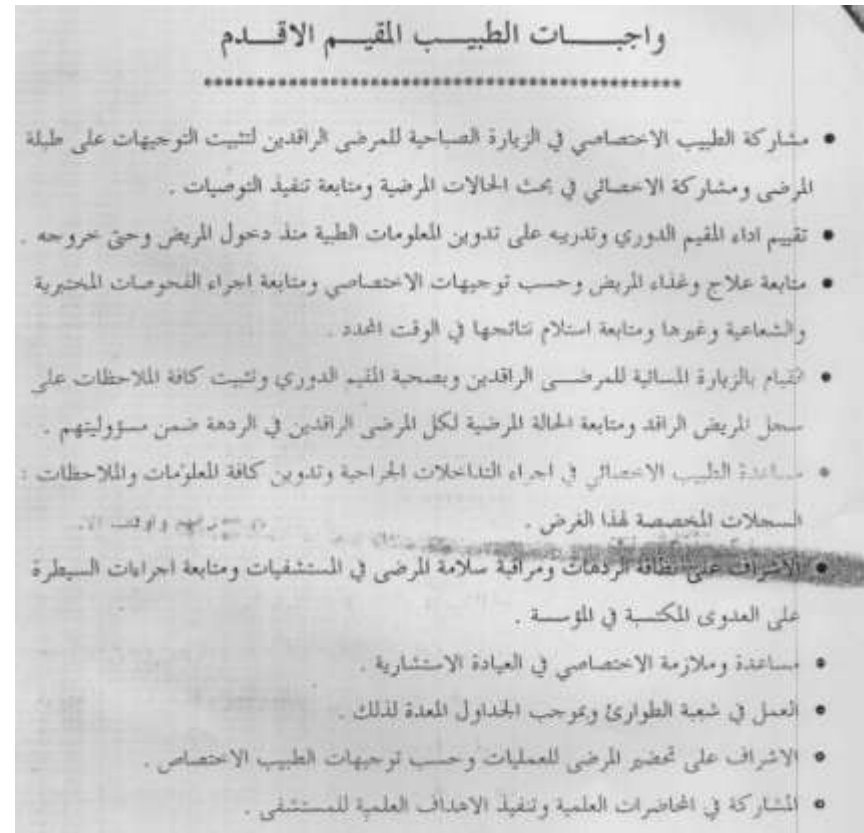
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Job Evaluation vs. Job Duty forms

Doctor's Evaluation Form (Senior Resident)



Job Duties for Senior Resident



واجبات الطبيب المقيم المتقدم

- مشاركة الطبيب الاختصاصي في الزيارة الصباحية للمرضى الراقدين لتثبيت التوجيهات على طلبة المرضى ومشاركة الاخصائي في بحث الحالات المرضية ومتابعة تنفيذ التوصيات .
- تقييم اداء المقيم الدوري وتدريبه على تدوين المعلومات الطبية منذ دخول المريض وحتى خروجه .
- متابعة علاج وغذاء المريض وحسب توجيهات الاختصاصي ومتابعة اجراء الفحوصات المختبرية والشعاعية وغيرها ومتابعة استلام نتائجها في الوقت المحدد .
- القيام بالزيارة المسائية للمرضى الراقدين وبصحة المقيم الدوري وثبتت كافة الملاحظات على سجل للمريض الراقذ ومتابعة الحالة المرضية لكل المرضى الراقدين في الردهة ضمن مسؤوليتهم .
- مساعدة الطبيب الاخصائي في اجراء التناخلات الجراحية وتدوين كافة المعلومات والملاحظات :
السجلات المحصنة لهذا الغرض .
- الاشراف على نظافة الردهات ومراقبة سلامة المرضى في المستشفيات ومتابعة اجراءات السيطرة على العدوى المكتسبة في المؤسسة .
- مساعدة وملازمة الاختصاصي في العيادة الاستشارية .
- العمل في شعبة الطوارئ وبحسب الجداول المعدة لذلك .
- الاشراف على تحضير المرضى للعمليات وحسب توجيهات الطبيب الاختصاص .
- المشاركة في المحاضرات العلمية وتنفيذ الاهداف العلمية للمستشفى .



Job Evaluation and Job Duty forms implication

1. No consistency in the one form and between forms
2. Quantity and quality of duties in both is significantly different
3. Job Duties are more specific (relatively) but still lack detailed criteria (Per each duty)
4. Inaccurate Job discretions lead to inaccurate Job duties letter means that job evaluation will be inaccurate (evaluating for other than the real reasons)
5. One way evaluation. “Note: Employes may respond to the evaluation by completing the following page. The signature above does not necessarily indicate agreement with the evaluation outcome.”



Gaps!

- On the HRM evolving scale, this function is almost in the 1934, i.e. almost (77) years behind
- On the practice level, almost beginnings of Personnel Management.
- On the workforce level, only (1) employee from both case studies is qualified to run HRM functions.
- On the organization level and authorities:
Marginalized and narrow responsibilities




Change Management!

- Continuous Improvement vs. Re-engineering
- Re-engineering Defined: The Fundamental re-design of a process
- Best practice is more oriented toward universal practice vs. Best fit is a based on contingency approach
- Re- engineering based on benchmarking best practices



Best practice Hospitals

THE JOHNS HOPKINS HEALTH SYSTEM CORPORATION AND THE JOHNS HOPKINS HOSPITAL HUMAN RESOURCES POLICY and PROCEDURE MANUAL		Policy Number	HR001
 Subject Table of Contents		Effective Date	August 1, 2009
		Page	1 of 2
		Supersedes	July 1, 2006

POLICY	POLICY NAME:	CONTACT FOR CLARIFICATION:	PHONE:
HR001	Table of Contents	HR Administration	4-3721
HR002	Introduction	HR Administration	4-3721
HR003	Organizational Structure	HR Administration	4-3721
HR004	Performance Management System	Compensation	5-6780
HR100	Employment	Career Services	5-6529
HR101	Promotional Opportunities and Other Job Changes	Career Services	5-6529
HR102	Interaffiliate Transfer	Career Services	5-6529
HR103	Reduction in Force	Career Services	5-6529
HR104	Dual Employment	Career Services	5-6529
HR105	Outside Activities For Compensation	Career Services	5-6529
HR200	Employment Verification, References and Requests for Information	HR Service Center	4-5150
HR201	Employee Records	HR Service Center	4-5150
HR202	Personnel Action Form (PAF)	HR Service Center	4-5150
HR300	Compensation	Compensation	5-6781
HR301	Independent Contractor	Compensation	5-6781
HR326	Paid Time Off (PTO)	HR Service Center	5-6208
HR327	Holidays	HR Service Center	5-6208
HR328	Family & Medical Leave (FML)	HR Service Center	5-6208
HR329	Leaves of Absence	HR Service Center	5-6208
HR330	Military Leave	HR Service Center	5-6208
HR331	Civic Responsibility Leave	HR Service Center	5-6208
HR332	Tuition Assistance Policy	HR Service Center	5-6208
HR333	Emergency Loan	HR Service Center	5-6208
HR334	Short Term Disability	HR Service Center	5-6208
HR335	Dependent Tuition Program	HR Service Center	5-6208
HR400	New Employee Orientation	Organization Dev & Training	5-6748
HR401	Training Policy	Organization Dev & Training	5-6748
HR501	Equal Employment Opportunity Policy & Complaint Procedures	HR Consultants & Labor Relations	5-6783
HR601	Attendance Management	HR Consultants & Labor Relations	5-6783
HR602	Demotion	HR Consultants & Labor Relations	5-6783
HR603	Discipline	HR Consultants & Labor Relations	5-6783
HR604	Employee Appeals Process (NBU)	HR Consultants & Labor Relations	5-6783
HR605	Employee Recognition	HR Consultants & Labor Relations	5-6783
HR606	Nepotism	HR Consultants & Labor Relations	5-6783
HR608	Separation	HR Consultants & Labor Relations	5-6783
HR609	Solicitation & Distribution Policy	HR Consultants & Labor Relations	5-6783
HR610	Staff Requests Not To Participate In Patient Care	HR Consultants & Labor Relations	5-6783
HR611	Workplace Anti-Violence	HR Consultants & Labor Relations	5-6783
HR612	Appearance Standard	HR Administration	4-3721
HR613	Personal Communication Device Use	HR Consultants & Labor Relations	5-6783
HR614	Photographing, Recording or Videotape Device Use	HR Consultants & Labor Relations	5-6783
HR700	Workforce Diversity	HR Consultants & Labor Relations	5-6783



Best fit Human Resource Management Policy? Afghanistan Case

4. Human Resource Management

4.1. **Staff planning** ensures the hospital is staffed with properly **trained** staff and the **appropriate number** of staff.

4.2. Staff are appointed through a **recruitment, selection** and **appointment** procedure that is consistent with **human resources policy of MOH.**



Best fit Human Resource Management Policy? Cont.

4.3. Staff will adhere to high ethical standards and **code of conduct** in performance of their duties.

4.4. A comprehensive program of **staff development** and in-service training meets individual and hospital needs.

4.5. Effective **workplace relations** are developed through use of **teams**

Policy Statement Hospital Policy for Afghanistan's Health System
February 2004



Hospital Standards for Accreditation for Afghanistan

Section 5: Administration and Management

Human Resource Management in Hospitals

Hospital Standards for Accreditation for Afghanistan: Assessment of Progress in Achieving the Standards

Hospital Department or Area: **Human Resource Management in Hospitals**

Hospital Facility: _____

Assessor: _____

Date of assessment: _____

Human Resource Management in Hospitals						
Standard Number	Standard	Criteria for Verification of Meeting Standard	Compliance in Meeting Standard (Score)			Basis for Evaluation Score/ Comments/Action Plan
			Full 2	Partial 1	None 0	
1	Staffing: The roles, functions and hierarchy of each employee is clearly defined	Verify the existence of at least:				
		<ul style="list-style-type: none"> The staffing patterns for the hospital organizational structure and the levels of each post are clearly indicated and are displayed in each department 	2	1	0	
2	Recruitment: Staff have been recruited utilizing a competitive recruitment process (e.g., Civil Service Commission PRR)	Verify whether:				
		<ul style="list-style-type: none"> Posts are advertised widely 	2	1	0	
		<ul style="list-style-type: none"> There is a short-listing process based upon the criteria outlined in the job description. This may include skills testing and /or written examination 	2	1	0	
		<ul style="list-style-type: none"> An interviewing panel of a minimum of 3 persons interviews the short-listed candidates 	2	1	0	
		<ul style="list-style-type: none"> Interview questions are relevant to the job 	2	1	0	

Section 5: Administration and Management. Human Resource Management in Hospitals
Hospital Standards Manual—Afghanistan

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Hospital Standards for Accreditation for Afghanistan

Section 5: Administration and Management

Human Resource Management in Hospitals. Cont.

Human Resource Management in Hospitals						
Standard Number	Standard	Criteria for Verification of Meeting Standard	Compliance in Meeting Standard (Score)			Basis for Evaluation Score/ Comments/Action Plan
			Full 2	Partial 1	None 0	
		being filled				
		<ul style="list-style-type: none"> Results of both testing and interview are combined and highest scoring candidate is offered the post. 	2	1	0	
3	Staffing: Each health worker is fully aware of his/her job description.	Verify whether:				
		<ul style="list-style-type: none"> Each health worker has received a copy of his/her job description 	2	1	0	
		<ul style="list-style-type: none"> Support staff who have literacy problem have job description explained to them 	2	1	0	
		<ul style="list-style-type: none"> The job description is compatible with the job the health worker is doing 	2	1	0	
		<ul style="list-style-type: none"> The job description clearly shows the main functions and level of responsibility 	2	1	0	
4	Performance: The performance of each member of staff is evaluated annually	Verify whether:				
		<ul style="list-style-type: none"> A staff appraisal process is implemented annually 	2	1	0	
		<ul style="list-style-type: none"> Management staff and supervisors are trained in implementation of appraisal system 	2	1	0	
		<ul style="list-style-type: none"> Results are communicated to hospital Board, PHD and MOPH GD of Human Resources (if government hospital) 	2	1	0	

Section 5: Administration and Management. Human Resource Management in Hospitals
 Hospital Standards Manual—Afghanistan

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Laws governing HRM functions in Iraqi Kurdistan Region

1. Civil Service Law 1960 (Amended)
Item (8) article (19):
“participation in training courses for the employee who has been **nominated by the ministry** is compulsory”
2. Law of Ministry of Health No.(15) 2007
Item (9) article (2): “ to develop health studies and medical learning due to Developmental Plans need of the region”

Item (13) article (2): “change the current health system into a modern one”



Recommendations

- MOH to run workshops in order to introduce a Health Policy Document on Human Resources Management
- Decentralize the Planning, Staffing and Compensation functions of HRM on the hospital level
- On the short run, hospitals need to take the initiative in having proper systems in evaluation, development and training need assessment



Recommendations. Cont

- Promote Hospital Management and Health Policy education and practice
- Place graduates of Management studies in HR Departments
- MOUs with USAID and MOHI (The Tatweer experience)

Thank you

Special Thanks to:

1. Azadi Hospital Administration
2. Rizgari Hospital Administration
3. The Directory of Health in Dohuk