

**ASSIGNMENT-1**

**M.B.A.(2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020**

**(Second Year)**

**HOSPITAL ADMINISTRATION**

**Strategic Management**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)**a) Vision and Mission.

b)Social Responsibility.

c)Political Environment.

d)Joint ventures.

e)IABS Matrix.

f)Mergers.

**Q2)** Define Strategic Management. Write the nature and significance of strategic management.

**Q3)** Discuss the need for strategic management in hospitals.

**Q4)** Discuss various factors involved in formulating the mission.

**ASSIGNMENT-2**  
**M.B.A.(2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020**  
**(Second Year)**

**HOSPITAL ADMINISTRATION**

**Strategic Management**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

- Q1)** Explain the factors influencing business under Technological Environment.
- Q2)** Discuss the forces which drive the competition among hospitals.
- Q3)** Explain Strategic Evaluation by Six Sigma Approach.
- Q4)** Case Study

Mr. Palani, Chairman of a company just had a discussion with a group of local people. The group known as 'Council for Environmental Action' demanded an immediate reduction of the pollutants thrown into the air by the plants of the company. Mr. Palani had explained the company's policy of gradual reduction of pollutants and promised to study the matter further. But the group has not satisfied and asked for another meeting in a week time. Mr. Palani reluctantly agreed.

- a) Suggest a suitable proposal to present before the group in the next meeting to convince it totally.
- b) What strategy should be followed by Mr. Palani.

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**(Second Year)**

**HOSPITAL ADMINISTRATION**

**HRM & Quality Management**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

- Q1)**a) Functions of HRM.  
b) Job Specification.  
c) Internal Recruitment.  
d) Promotions.  
e) Job Enrichment.  
f) Working Conditions.
- Q2)** Critically Examine the steps in Human resource planning.
- Q3)** Discuss the steps in Recruitment process.
- Q4)** Explain various training methods in brief?

**ASSIGNMENT-2**

**M.B.A.(2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020**

**(Second Year)**

**HOSPITAL ADMINISTRATION**

**HRM & Quality Management**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)** How do you develop wage and salary structure? Explain.

**Q2)** Explain the features of provident fund Act, 1952.

**Q3)** Critically Examine the methods in Job Evaluation.

**Q4)** Case Study :

‘Carcom’ is a supplier of automotive safety components employing around 700 staff which is located on two sites in Northern Ireland. The company was originally American owned but after a joint venture with a Japanese partner in the late 1980s, it was eventually bought out by the latter.

The quality initiative began in 1988-89 with a five-year plan based on the Kaizen philosophy, this concept having been picked up from the Japanese partner. This was driven by senior management in response to what they saw as increasing customer demand and operating considerations. The achievement of ISO 9001 registration in 1990 brought together processes carried out by departments which had previously been undertaken in isolation. The company is now focusing on Kaizen with the principles of improvement, customer delight, systems focus and participation. A range of quality management tools and techniques are used. A TQM steering committee is responsible for overall direction but there is also a further steering committee to oversee implementation

of the Quality Improvement Teams (QITs) as well as a full time coordinator. There are teams of shop floor operators based on natural workgroups, and these tend to focus on product problems and environmental issues (such as working conditions.) In contrast, Kaizen teams focus on process improvements (for example, die change) and problem-solving workgroups are established in response to specific customer concerns (for example, warranty claims).

Senior managers stress that a long-term approach is now being taken which is in contrast to some of the programmes in the early 1980s. These former piecemeal initiatives included quality circles which had been characterized by considerable changes in personnel, with a number of champions having moved on leaving behind a flagging initiative in contrast, the company is now taking time to get the processes right and providing a central focus through quality for change. Cultural change is the aim but it is recognized that only incremental progress can be achieved and that a supportive attitude is required from management Thus,QIT members are given extensive training and are encouraged to tackle problems which give early success and build teamwork, rather than put pressure on teams to deliver immediately on big issues.

### **The Impact of the TQM Initiative.**

While it is still early days, the initiative is already felt to have had a major impact. The management structure has been reduced by one layer, shop floor layout has been improved, and scrap rates, stock,work-in-progress and inspection times have been reduced, so too have the numbers of inspectors, whose role is now seen as one of analysts. Employee response to these changes has generally been positive, and the company has spent considerable effort in relating 'quality' directly to employees' work, particularly through the use of measures which are displayed adjacent to the workstation and maintained by staff themselves. The unions were assured that there would not be job losses as a result of Kaizen, although they continue to have concerns about this and also raise the issue of payment for changes in job roles-particularly in relation to SpC. The

company has adopted an open information policy to foster greater trust at the workplace, and business-related issues are given greater prominence at the joint works committee meetings. Management also believe that the quality initiative has led to a reduction in union influences although this was not an original objective.

### **The Strategic Nature of the Human Resource Function**

The human resource function has emerged from a welfare to a more strategic role in recent years. This has been assisted by an MD who is regarded as a 'people sperson' claiming that 'you can't divorce people from quality', and by the appointment of a personnel director to the board together with a new industrial relations manager. This has broadened the role of human resources and enhanced its status. The appointment of a training manager was significant, since under the previous regime little off-the-job training was conducted. Training budgets have actually increased in volume and monetary terms despite the company's recently recorded trading losses. Recruitment and selection are becoming more sophisticated as the company wish to identify team workers. The links between human resources and quality were made explicitly by the MD :“We cannot separate HR from TQM. and without HR the QIP will not work effectively.” In addition to the issues mentioned above, the function was also seen as being important in building the people aspect into the strategic quality planning process. addressing the problem of absenteeism, and supporting line management by helping to change employee attitudes/organizational culture. In addition, the function has provided appropriate training programmes for quality, in which there has been considerable investment in time and resources, it has counselled the mentors to the QIT, and ensured that managers communicate with staff by providing advice on the best means of doing this. Quality principles are also being developed in relation to the human resource function, with specific targets being set(for example, for absenteeism) as well as more general aims (for example, on training).

Questions:

- a) Analyse the links between TQM and HRM with reference both to this case study and more generally.

- b) What does the case study demonstrate about the contribution a personnel/HRM function can make to the development of TQM in an organization?
- c) How might the principles of TQM be applied to a personnel function?
- d) What general implications does TQM have for industrial relations?

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**M.B.A.(2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020  
(Second Year)**

**HOSPITAL ADMINISTRATION**

**Counselling Skills for Managers**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)**a) Attitudes.

b)What is a Strategy?

c)What is Performance?

d)What is Counselling?

e)What is Behaviour?

f) Emotions.

**Q2)** Discuss the steps in the process of counselling.

**Q3)** What are the skills required to the cancellors?

**Q4)** How do you change the behaviour of the client through counselling? Discuss.



**ASSIGNMENT-2**

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(Second Year)**

**HOSPITAL ADMINISTRATION**

**Counselling Skills for Managers**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

- Q1)** Explain the special problems in counselling.
- Q2)** Discuss the strategies in selecting counsellors.
- Q3)** Examine the applications of counselling in hospital situations.

**Q4)** Case Study :

Unfortunately in India, the concept and importance of counselling have been totally neglected, in particular in rural India. Though, medical facilities have been improved to some extent in rural areas, but the concept counselling has been found nowhere. The young generation in rural areas have been suffering from many problems and most of them might have been cured by counselling itself. The problem is, how to develop counselling skills in rural areas.

If you are appointed as counsellor in a rural areas, how do you solve the problems of young people in rural areas with your counselling skills, keeping into mind the following problems :

- a) Young people suffering from fobia of insecurity due to lack of medical facilities in rural areas.
- b) Young people suffering from fear of aids.

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**HOSPITAL ADMINISTRATION**

**Research Methods in Hospitals**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)**a) Cluster Analysis.

b) Likert Scale.

c) Sampling.

d) Simulation.

e) Histogram.

f) What is Regression analysis?

**Q2)** Discuss about attitude scales in detail.

**Q3)** What is Sampling? Explain the random Probability Sampling Techniques.

**Q4)** What are the differences between in Interview and observation methods ? Explain.

**ASSIGNMENT-2**

**M.B.A.(2 years) DEGREE EXAMINATION, JUNE/JULY - 2020  
(Second Year)**

**HOSPITAL ADMINISTRATION**

**Research Methods in Hospitals**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)** Explain the differences between a Questionnaire and a Schedule in detail.

**Q2)** What is factor analysis? Write the procedure of factor analysis.

**Q3)** Discuss various sources of health statistics in detail.

**Q4)** Case Study :

The following are the details of sales effected by three sales persons in three door-to-door campaigns.

Sales Person	Sales in door-to-door campaign			
A	8	9	5	10
B	7	6	6	9
C	6	6	7	5

construct an ANOVA table and find out whether there is any significant difference in the performance of the sales persons.

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**HOSPITAL ADMINISTRATION**

**Patient Care and Behaviour**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)**a) Grief counselling.

b)Resident Medical officer.

c)Segregation.

d)Disaster plan.

e)Patient perception.

f) Reference Group.

**Q2)** Explain the role and responsibilities of a medical superintendent.

**Q3)** Discuss the uses of investigational drugs.

**Q4)** Explain the general policies and procedures of the hospitals for patient care.

**ASSIGNMENT-2**

**M.B.A.(2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020  
(Second Year)**

**HOSPITAL ADMINISTRATION**

**Patient Care and Behaviour**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

- Q1)** What are the duties of Night duty executive?
- Q2)** What is medical Audit? Explain the procedure Medical Audit.
- Q3)** Define Motivation. Explain the theories of motivation in brief.
- Q4)** Case Study (Separate sheet enclosed)

Sankirtan was a runner, like his dad. One day he collapsed during a run and was hospitalised for five days. He went through lots of tests, but was given a clean report of health. Then, a month later, he collapsed again, fell into a deep coma and died. His father wanted to know-what had gone wrong? After his first collapse, Sankirtan was hospitalised for five days. He had various cardiac evaluations: numerous electrocardiograms, a cardiac ultrasound, an exercise stress test, and a cardiac MRI. He was also given a cardiac catheterization, which caused a painful hematoma, and an electrophysiology test, which led him to bleed. During his hospital follow-up visit five days after discharge, his doctor had given him a clean report of health.

After his first collapse, Sankirtan had low potassium. Two years earlier, a guideline from the national council of potassium in clinical practices called for potassium replacement in such patients. He never received potassium replacement, even though his dad had told his cardiologist about his low potassium.

His cardiologist had also missed a diagnosis of a treatable heart rhythm condition that sometimes requires patients to avoid exercise. A communication error was also found by his dad going through the records. No one warned Alex not to run, after the hospitalisation, after his first collapse. His written discharge instructions specified only that he not drive for 24 hours. There was no record of anyone warning him not to run when he had his follow-up visit, so he didn't realise he should not have resumed running after his wounds healed. This was a very oversight. A radiologist at the hospital also told his dad that Sankirtan's cardiac MRI was done incorrectly

because the technicians had not been trained on new software for the machine and this was critical.

- a) What were the errors in Sankirtan's case? What do you think was ultimately the cause of his death?
- b) Do you think that the hospital would have known about the errors in Sankirtan's case if his father hadn't investigate what happened? What does this mean for other patients?

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**HOSPITAL ADMINISTRATION**

**Managing Hospitals - II**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)**a) Staffing.

b)Distribution System.

c)Layout.

d)X-Ray rooms.

e)Operation theatre.

f) Clinical department.

**Q2)** Explain the functions of CSSD.

**Q3)** Explain the Ambulatory care services in detail.

**Q4)** Draw and Explain the layout for a laboratory.

**ASSIGNMENT-2**

**M.B.A.(2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020  
(Second Year)**

**HOSPITAL ADMINISTRATION**

**Managing Hospitals - II**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)** What is ECG? Discuss the role of ECG in diagnosis.

**Q2)** Discuss the facilities needed in an operation theatre.

**Q3)** Discuss various types of patients in OPG.

**Q4)** Case Study

You are medical superintendent in a hospital. The chief doctor wishes to maintain a standard in the hospital. The chief doctor assign a duty to you that you have to maintain different standards. Draft a proposal for various standards that a hospital should maintain.

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**HOSPITAL ADMINISTRATION**

**Legal and Ethical issues**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

**Q1)**a) Health care.

b)Food Act.

c)Physicians.

d)Patient relations.

e)Police investigation.

f) Contractual liability.

**Q2)** Write the procedure of Registration of health care organisation under A.P. medical care Establishment Act.

**Q3)** Discuss the laws pertaining to hospitals in detail.

**Q4)** Examine the requisites of a valid contract.

**ASSIGNMENT-2**

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(Second Year)**

**HOSPITAL ADMINISTRATION**

**Legal and Ethical issues**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

- Q1)** Explain the legal issues of Medico legal case.
- Q2)** Explain the post treatment services in detail.
- Q3)** Discuss the legal remedies available to patients.

**Q4)** Case Study

Apollo hospital is situated in Chennai. It is a multi-speciality corporate one. B. Muragan, resident of Chennai was admitted into the hospital and died after 30 days of treatment. On hearing the news, counsellor approached the family members of the deceased for donation of eye. Subsequently, cornea was retrieved from the patient.

Questions :

- a) State the documents required for the donation of eye.
- b) What are the provisions of law relating to it?
- c) Explain the legal parameters for eye donation.

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**M.B.A. (2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020**

**(Second Year)**

**HOSPITAL ADMINISTRATION**

**Hospital Cost and Financial Accounting**

**MAXIMUM MARKS: 30**

**Answer ALL Questions**

- Q1)** a) Sunk cost and opportunity cost.  
b) Balance sheet.  
c) Marginal costing.  
d) Hire purchase  
e) Make or Buy 'Decisions'  
f) Cost centers.
- Q2)** Define Cost accounting ? Explain briefly objectives of cost accounting?
- Q3)** Explain cost-volume-profit analysis in detail?
- Q4)** A company purchased a second hand machine on 1st April,2012 for Rs. 17,000 and spent immediately for its repairs Rs. 1,800 and for its crection Rs. 1,200. On 1st October, 2012 it purchased another machine for Rs. 10,000 on 1st April,2014 sold the first machine for Rs. 16,000. On the same day it purchased a new machine for Rs. 25,000. The company provides Depreciation on its machinery at 15% P.A. on diminishing Balance method and accounts were closed on 31st march, every year. Prepare machinery A/c for the period ending 31st March,2015.

**ASSIGNMENT-2****M.B.A. (2 Years) DEGREE EXAMINATION, JUNE/JULY - 2020****(Second Year)****HOSPITAL ADMINISTRATION****Hospital Cost and Financial Accounting****MAXIMUM MARKS: 30****Answer ALL Questions**

- Q1)** “Activity Based costing is an important tool in a corporate Hospital” Explain.
- Q2)** What is inventory valuation? Discuss effect of Inventory valuation on Profit?
- Q3)** From the following Particulars prepare a cost sheet showing cost per unit and profit for the period.

Raw Materials consumed	Rs. 1,20,000
Direct wages	Rs. 65,000
Machine hours works	Rs. 10,000 (hour rate is Rs. 5)
Office Overhead	10% on factory cost
Selling Overhead	Rs. 1.80 per unit.
Units Produced	10,000
Units Sold	8,500 @ 450 each.

- Q4)** From the following Trial Balance Prepare. Trading, Profit & Loss A/c and Balance sheet as on 31st March, 2015.

	Dr	Cr
	Rs.	Rs.
Capital		1,00,000
Drawings	18,000	
Buildings	15,000	
Furniture	7,500	
Motor van	25,000	
Loan from Karthik@12%interest	15,000	
Interest paid on above	900	
sales		1,00,000
purchases	75,000	

Opening stock	25,000	
Establishment Exp.	15,000	
wages	2,000	
Insurance	1,000	
Commission received	4,500	
Debtors	28,100	
Bank Balance	20,000	
Creditors		10,000
Discount Received		3,000
	2,32,500	2,32,500

Adjustments :-

- a) Stock on 31st march, 2015 was Rs. 32,000
- b) Outstanding wages Rs. 500
- c) Prepaid insurance Rs.300
- d) Depreciate on Buildings 2%, Furniture 10%, Motorvan 10%.