

(DHAM21)

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M.B.A. (2 Years)DEGREE EXAMINATION, DEC- 2016

(SecondYear)

HOSPITAL ADMINISTRATION

Strategic Management

Time : 3 Hours

Maximum Marks : 70

SECTION– A

(3x5 = 15)

Answer anythree

- Q1)** a) Strategic management.
b) IABS matrix.
c) SWOT.
d) Ethics.
e) CSR.
f) Diversification.

SECTION–B

(3 x 15 = 45)

Answer any three

- Q2)** Describe the need for strategic management in hospitals.
- Q3)** Whatdo you mean by strategic management model? What are its components?
- Q4)** What is the need for incorporating ethics in hospitals?
- Q5)** Whatdo you understand by value chain analysis in hospitals?
- Q6)** Describe any strategic alliance in hospital sector with the help of an example.
- Q7)** What is meant by balanced score guard methodology?

SECTION-C

(10)

(Compulsory)

Q8) Case Study:

Study the following case and answer the questions given at the end:

Before an organization can devote resources to socially desired objectives, it must make enough profit to maintain the confidence and support of its shareholders and bankers. To the extent that socially oriented actions strengthen the organization by preventing conflict with environmentalists, government agencies, and consumer groups, and enhance the organization's public image as a supplier, customer and employer, the resources allocated to social action also serve the organization's self-interest. But when corporations go too far beyond their self-interest, or when the financial costs of social activism run too high, then the tension between the desire for public acceptance and the need for profits is heightened.

The costs of socially responsible actions can be borne by organizations in four major ways : increased efficiency, higher prices, lowered wages or reduced profits. The first and most fortunate one occurs when the socially responsible action is actually more profitable for the firm than doing "business as usual". Situations like this do not arise as often as advocate of social responsibility would have us believe, but they do exist.

But in most situations, behaving in a socially responsible manner will boost the firm's costs with no equivalent gain in efficiency. In these cases the company may try to pass the costs along to the consumer in higher prices, to workers by holding the line on wage increases, or to shareholders by accepting the reduced profits and lowering the dividends at the risk of causing a fall in share prices. Should profits fall too drastically, then the continued survival of the organization may be in doubt? Recognition that someone must eventually bear the costs of social responsibility is the crux of Milton Friedman's argument that managers should focus on what they know best : how to make a profit. The same consideration also influences many of the business managers who criticize the growing constraints and pressures placed on business by government agencies and consumer and environmental advocates. Business managers can never forget that every resource allocated to a given activity costs something and that those costs must be recaptured in some way.

Questions:

- a) What exactly do you understand by the term Social Responsibility of Business Corporation?
- b) Why there is a tension between the organization's efforts in pursuing social activism and goal of maximizing profits?
- c) What argument has been put forward by Milton Friedman?
- d) Do you think it is in the interest of organization to behave in a socially responsible way?



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M.B.A. (2 Years) DEGREE EXAMINATION, DEC - 2016

(Second Year)

HOSPITAL ADMINISTRATION

HRM & Quality Management

Time : 3 Hours

Maximum Marks : 70

SECTION– A

(3 x 5 = 15)

Answer any three

- Q1)** a) Job description.
b) Dismissals.
c) Induction.
d) Transfers.
e) Training needs.
f) Employee's health services.

SECTION–B

(3 x 15 = 45)

Answer any three

- Q2)** What is the role of HRM in hospitals?
- Q3)** What is meant by recruitment policy? What are the sources related to it?
- Q4)** What are the methods involved in training of employees? How are they evaluated?
- Q5)** What is the purpose of developing a wage and salary structure?
- Q6)** Write down the features of payment of Gratuity Act, 1972.
- Q7)** Describe the salient features of Minimum Wages Act, 1948.

SECTION-C

(10)

(Compulsory)

Q8) Case Study:

Authority of HR Manager at Regional Level

National Bank of India is the biggest commercial bank in the country with its head office at Mumbai. It has 6,000 branch offices across the country. It has been managing these branches with 20 regional offices located in important places in the country. One of those regional offices is located in Agra.

Mr. Kamlesh Sharma is the regional manager of Agra Region and Mr. SankarDayal is the HR Manager at the Agra Regional Office. Mr. Purohith is working as the Chief HR Manager at the Central Office, Mumbai. Earlier the central office is used to select candidates for different jobs and allot them to different regions. But the bank has recently decided to decentralize the hiring process and hence asked all the regional managers to select their own candidates. Mr. Kamlesh Sharma asked various departmental heads at regional office and branch managers to rewrite job description, job specification, estimate man power needs and send them directly to him. Mr. SankarDayal has received a letter to this effect in the capacity of head of personnel department in the regional office immediately he met Mr. Kamlesh Sharma and told him that his job was to prepare job description, job specification, estimate manpower for the entire region and as such, he would be authorized to do all those functions instead of departmental heads at regional office and branch managers. But the regional manager did not accept his request and told Mr. SankarDayal that things would go according to his own instructions. Mr. SankarDayal told the regional manager not to discount his request and restore his positional authority.

Questions:

- a) What is the main problem in this case?
- b) What should be done to resolve the conflict between the Regional manager and Regional HR manager?



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M.B.A. (2 Years) DEGREE EXAMINATION, DEC - 2016

(Second Year)

HOSPITAL ADMINISTRATION

Counselling Skills for Managers

Time : 3 Hours

Maximum Marks : 70

SECTION– A

(3 x 5 = 15)

Answer any three questions

- Q1)** a) Clients.
b) Counsellors.
c) Performance Improvement.
d) Counselling problems.
e) Counselling strategies.
f) Counsellor attitude.

SECTION–B

(3 x 15 = 45)

Answer any three questions

- Q2)** What do you mean by counselling strategies and interventions?
- Q3)** What are the approaches and process involved in counselling services?
- Q4)** “Counselling services can help in performance improvement in hospitals”. Comment.
- Q5)** What are the characteristics required to carry out counselling skillfully?
- Q6)** What is the role and importance of counsellor’s attitude in counselling?

Q7) Enumerate various general and special problems in counselling.

SECTION-C

(10)

(Compulsory)

Q8) Case Study:

Rajesh is a counsellor appointed at King George Hospital (KGH), Vizag for mobilising organ donation for NGO based organization. Mr. Rajesh would approach patient attendants of critically ill patients on a daily basis. On a particular day, he had met patient attendants of a patient (Ram Kumar) who died following an accident. Mr. Rajesh approached patient attendants for organ donation but could not convince the patient attendants for organ donation. Being head of the organization how do you plan.

- c) Counselling Department.
- d) Induction training.
- e) Counsellor Aids.
- f) Infrastructure.
- g) Recruitment of counsellor.



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M.B.A.(2 Years) DEGREE EXAMINATION, DEC – 2016

Second Year

HOSPITAL ADMINISTRATION

Research Methods in Hospitals

Time : 3 Hours

Maximum Marks : 70

SECTION – A

(3 × 5 = 15)

Answer any Three of the following

- Q1)** a) Primary scales of measurement
- b) Sampling distribution and determination of size of sample
- c) Census versus sample
- d) Types of frequency distributions and their construction
- e) Factor analysis model and uses of factor analysis
- f) Sources of vital statistics

SECTION – B

(3 × 15 = 45)

Answer any three of the following

- Q2)** Discuss the criteria for scale evaluation and explain how to assess validity and reliability. Explain Likert's scales and Thurstone's scales with suitable examples.
- Q3)** Distinguish between probability and non – probability sampling techniques. Explain stratified random sampling and cluster sampling. What are their advantages and disadvantages? Explain judgement sampling.
- Q4)** Explain the methods of collecting primary data. What is a longitudinal design? What is simulation? What are its advantages and disadvantages.
- Q5)** What is classification? What are its objectives? Explain.
- a) Bar chart
- b) Histogram and
- c) Pie - chart
- with suitable examples.

Q6) Describe in detail the procedure for conducting conjoint analysis. Distinguish between conjoint analysis and MDS.

Q7) Describe the problems in collection of sickness data. Explain rates and ratios and their use in measuring sickness.

SECTION – C

(10)

Compulsory

Q8) In a Pre - test respondents were asked to express their preference for an out - door life style using a seven - point scale, 1 = not at all preferred, (7) = greatly preferred (V_1). They were also asked to indicate the importance of the foregoing variables on a seven - point scale, 1 = not at all important (7) = very important. V_2 = enjoying nature, V_3 = relating to the weather, V_4 = living in harmony with the environment, V_5 = exercising regularly, V_6 = meeting other people. The sex of the respondents (V_7) was coded as 1 for females and 2 for males. The location of resident (V_8) was coded as 1 = Urban, 2 = Rural. The data were obtained on a sample of 30 respondents.

- a) Explain an appropriate analysis to study whether the two groups based on location of residence differ on the importance attached to the variables V_2 to V_6 .
- b) Write steps to input the data and to conduct the analysis as you explain in using SPSS. (a)



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MBA(2 Years) DEGREE EXAMINATION, DEC – 2016

Second Year

Hospital Administration

Patient Care and Behaviour

Time : 3 Hours

Maximum Marks : 70

SECTION – A

(3 × 5 = 15)

Answer any three

- Q1)** a) Grief counselling
b) Fort liability
c) Disaster plan
d) Patient motivation
e) Psycho graphics
f) Audit administration

SECTION – B

(3 × 15 = 45)

Answer any three

- Q2)** Explain the role of resident medical officer in hospital administration
- Q3)** Explain the salient features of pollution control board Act.
- Q4)** Explain the policies and procedures essential for general safety and fire safety.
- Q5)** Explain patient behaviour and its relation to market strategy.

Q6) Explain different models of patient behaviour in brief.

Q7) What is the role of self regulating committees in audit of patient behaviour?

Q8) What is the need for and procedure involved in audit and audit administration?

SECTION – C

(10)

Compulsory

Q9) CASE STUDY

KYJ is a 200 bedded Multi – speciality hospital situated at Nampally, Hyderabad. The hospital is equipped with most modern equipment, staffed by efficient nursing staff and Doctors.

On 20th January 2010, a patient by name R. Rajesh was admitted under Gastroenterologist. The patient was admitted in ICU and later shifted to single room on 23rd January 2010, due to slight deterioration of patient condition on 24th January 2010 evening at about 10 p.m. the nursing Incharge called on the specialist for attention, specialist has given telephone orders on medication for injecting 0.5 mg of fiblin. Injection, Which was heard by the nurse as 5 mg and the wrong dosage was administered to the patient subsequently, the patient became unstable the next day morning. Resident doctor immediately shifted the patient and went through the case sheet. Medication orders were verified and cross – checked with the specialist and rectified the medication error and stabilized the patient to normalcy.

- a) Being medical superintendent of the hospital, draft standards for telephone orders in this situation.
- b) Being the Administrator, how do you convince the patient attendants about the situation?



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MBA(2 Years) DEGREE EXAMINATION, DEC – 2016

Second Year

HOSPITAL ADMINISTRATION

Managing Hospitals - II

Time : 3 Hours

Maximum Marks : 70

SECTION – A

(3 × 5 = 15)

Answer any three

- Q1)** a) ECG
b) Zoning
c) Intensive care
d) OPD
e) Centralization
f) Radiology Dept.

SECTION – B

(3 × 15 = 45)

Answer any three

- Q2)** What do you mean by work flow? Explain staffing and distribution system related to it.
- Q3)** Enumerate the differences between centralization and decentralization among hospital staff.
- Q4)** What is the importance of OTs in hospitals? Explain the process of zoning related to OTs.
- Q5)** What are the medical equipments used in hospitals? Explain some of them.

Q6) Enumerate the laboratory services that should be present in hospitals.

Q7) What is meant by waste disposal? Discuss its importance in hospitals.

SECTION – C

(10)

Compulsory

Q8) Case study

Miracle Hospital is one of the biggest hospitals in Hyderabad city having all specialized Departments and about 5000 patients are visiting the hospital every day apart from huge member of inpatients and number of surgeries are undertaken every day. It is almost like a large scale industrial organisation. Every activity in the hospital is well organized systematically under the leadership of Dr. Active. He is regularly monitoring the whole activities of the Hospital throughout the day.

Unfortunately, Dr. Active has been facing a problem in the recent days about disposal of Bio-Medical waste material from the Hospital. Since the Hospital is located in the heart of the city, he is undergoing many number of problems from different Government organizations like Municipality, etc. Though, he is taking care of all measures for the disposal of Bio-Medical waste material, but the problem has become above his capacity in the recent days. He is in a dilemma and feeling lot of worry about disposal of Biomedical waste material.

Hence, advise Dr. Active, about the following :

- a) Do you advise the change of location from heart of the city to sub – urban area?
- b) What suitable measures do you suggest Dr. Active regarding disposal Bio - Medical waste material keeping in view the Bio-Medical Rules of 1998?



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MBA(2 Years) DEGREE EXAMINATION, DEC – 2016

Second Year

Hospital Administration

Legal and Ethical Issues

Time : 3 Hours

Maximum Marks : 70

SECTION – A

(3 × 5 = 15)

Answer any three of the following

- Q1)** a) Para Medical Staff
- b) Valid contract
- c) Medical negligence
- d) Medical ethics
- e) Physicians
- f) Infant Milk Substitutes

SECTION – B

(3 × 15 = 45)

Answer any three of the following

- Q2)** Enumerate the differences between tortuous liability and vicarious liability.
- Q3)** Give a brief note on prescriptions and administration of drugs.
- Q4)** Explain the importance and functions of Medical Council of India.
- Q5)** Briefly explain some of the post treatment services provided in hospitals.

- Q6)** Explain some diagnostic techniques under regulation and prevention of Music Act, 1994.
- Q7)** What are the medical ethics and code of conduct to be observed in rendering hospital services?

SECTION – C

(10)

- Q8)** Case study

After going through the Case study, answer the questions given at the end. Substantiate your answers with the applicable law, where necessary.

Twenty five year old Rama Krishnan suddenly complained one morning in July at 5.00 a.m. of pain of legs and his inability to move them. His father called a local doctor, and on his advice took him to a private hospital at about 6.30 a.m. By then the patient was complaining of extreme weakness and decreased power in the upper limbs. Even as he was examined by a cardiologist and neurologist, he complained of difficulty in breathing, following which he was moved to Intensive Care Unit (ICU) and then to the Intensive Cardio Care Unit (ICCU).

Subsequently, a senior consultant neurologist who examined him at about 9 a.m. said the probable diagnosis was Acute Infective Polyneuritis or Hypopotassemic paralysis or acute Myasthenia Gravis. He suggested further tests, immediate line of treatment including intubation and also informed to parents that Since a new mode of treatment, plasmapheresis was not available at the hospital, it was advisable to move him to a ‘Specialty’ hospital.

He also gave a letter to the concerned doctor at the ‘Specialty’ hospital, but the young man died at 12.10 hours before he could be moved there. The nurse on duty also failed to notice that the oxygen tube been pulled out by the patient, who was extremely restless, till it was brought to her notice by the ‘Patient’s mother’.

Questions :

- a) What is the appropriate law for handling the case?
- b) Where does Mr. Rama Krishnan’s remedy lie?
- c) Is there any negligence on the part of the doctors?
- d) Was the Hospital staff that was required to carry out the directions of the doctors, negligent?



	Cost	Depreciation
	Rs.	Rs.
Plant and machinery	1,50,710	62,850
Furniture and fixtures	26,450	11,500

He purchased a machine for Rs. 10,000 on 1st April 2004 and furniture for Rs. 3,000 on 1st June, 2004.

A machine costing Rs. 6,000 purchased on January 1, 2002 was sold for Rs. 5,500 on 30th June, 2004.

Depreciation is provided @10% on written - down - value method. Show the relevant accounts for the year ended 31st December, 2004.

- Q4)** Explain normal loss and abnormal loss and their treatment in cost accounting.
- Q5)** What is method of costing involved for food and beverages?
- Q6)** Explain the special features of hospital as multi division with multi product in each division.
- Q7)** Give a brief note on journal, ledger and trial balance maintenance for a hospital.

SECTION – C
Compulsory

(10)

- Q8)** Case study
From the following trial balance of Shri. Ram, prepare trading and profit and loss account for the year ended 31st December 2007 and a balance sheet as on that date :

Dr. Balances	Rs.	Cr.Balances	Rs.
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Opening stock	20,000	Sales	2,70,000
Purchases	80,000	Purchase returns	4,000
Sales return	6,000	Discount	5,200
Carriage inwards	3,600	Sundry creditors	25,000
Carriage outwards	800	Bills payable	1,800
Wages	42,000	Capital	75,000
Salaries	27,500		
Plant and Machinery	90,000		
Furniture	8,000		
Sundry debtors	52,000		
Bills receivable	2,500		
Cash in hand	6,300		
Travelling expenses	3,700		
Lighting (factory)	1,400		
Rent and taxes	7,200		
General expenses	10,500		
Insurance	1,500		
Drawings	18,000		
	<u>3,81,000</u>		<u>3,81,000</u>

Adjustments :

- Stock on 31st December, 2007 was valued at Rs. 24,000 (market value Rs. 30,000)
- Wages outstanding for December, 2007 amounting to Rs. 3,000
- Salaries outstanding for December, 2007 amounted to Rs. 2,500
- Prepaid insurance amounted to Rs. 300
- Provide depreciation on plant and machinery at 5% and on furniture at 20%.

