The Evaluation Of Hospital Administrators Decision-Making And Problem-Solving Abilities

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Abstract

This study aims to identify the levels of decision making and issue solving, as well as determine the interrelationships and explain the differences in decision-making and problem-solving skills based on socio-demographic. This survey included 250 hospital administrators (chief physicians, hospital administrators, and chief nurses) from different hospitals of Karachi, Pakistan. The questionnaire was used to assess the hospital administrators' decision-making, problem-solving, and other administrative skills. While there was no correlation between socioeconomic status and the decision-making and problem-solving abilities of administrators, there was a statistically significant correlation between their use of the Hospital Information System.

Keywords: Administrators, Hospital, Decision Making and Managers.

Introduction

Problem-solving ability is vital for management. Problems are an integral part of a manager's job. Problem-solving is a manager's responsibility; in fact, a manager's value is determined by her or his ability to do so (Toygar and Akbulut, 2013). Prior to a decade ago, the decision-making and problem-solving issues faced by healthcare administrators were non-existent. Currently, they are far more numerous and difficult (Sperry, 2003). As concepts, problem-solving and decision-making may be viewed as the outcome of strategic thinking. Consequently, it is necessary to analyse the notions of strategy and strategic thinking first. It is well knowledge that the conclusion of strategic thinking is decision making. A decision is, in the simplest words, a choice made between available alternatives. However, decision making is more than simply deciding what should be done. Aspects of decision making, creative thinking, and problem solving are shared ((Toygar and Akbulut, 2013). These are the three categories of effective thought. According to (Marquis and Huston, 2009) problem-solving is a component of decision-making. The decision-making phase is a component of problem

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solving, which is a systemic method for analysing a problem at hand. Strategic thinking is very practically applied in decision making. According to (Drucker and Maciariello, 2007), active decision making involves a disciplined procedure and is specifically a manager's responsibility.

Strategic, administrative, and operational levels of decision making in healthcare organisations are strongly tied to strategic, long-term, and operational levels of organisational planning. Additionally, there are two fundamental types of decisions. The first category, programmed decisions, comprises situations that are routine or repeated and are simply referred to as "standard operating procedures." Nonprogrammable decisions, on the other hand, are conditions that occur infrequently within the organization's procedures. This type of choice requires the manager's undivided attention and typically entails a formal, multi-step decision-making process (Sperry, 2003).

Material and Method

This study included 250 hospital administrators (chief physicians, hospital administrators, and chief nurses) from different hospitals of Karachi, Pakistan. The problem-solving and decision-making capabilities of administrators vary based on age, sex, education level, duration worked as an administrator, and whether they use the Hospital Information System (HIS) in their daily decisions. The data was collected by assessing problem solving and decision-making skills questionnaire and evaluated in form of percentages and mean scores.

Results

The respondents comprised 34% of the chief physicians, 42% of the hospital administrators, and 24% of the chief nurses. Most administrators that participated in this survey were between the ages of 36 - 45 (36%), and male (84%). Most respondents held a master's degree (56%). 46% of the administrators who participated in this study had between 10 to 20 years of experience. 38% of individuals report using the HIS frequently when making daily decisions Table: 1.

A glance at the average problem solving and decision-making scores of the 46-55 age group of administrators reveals that they have the highest scores (82.46). The male administrators (84.36) were found to have better problem-solving and decision-making skills than the female participants (79.26). The master's degree holders were found to have the highest problem solving and decision-making scores (84.96). However, no statistically significant difference was found among the groups according to Sex, age and education level (P > 0.05). The administrators who admit never using the HIS for everyday decisions received the highest mean ratings on average (78.26). In contrast, the average ratings of administrators who rarely utilise the HIS to make everyday decisions were the lowest (69.76). In addition, there was a statistically significant difference (P = 0.028) between the administrator groups based on the frequency with which they use the HIS to make daily decisions in terms of their problem-solving and decision-making abilities.

Table: 1. Demographic and Social Profiles of Respondents

Variables	Categories	Respondents	Percentage
Gender	Male	210	84%
	Female	40	16%
Age	26-35 Years	35	14%
	36-45 Years	90	36%
	46-55 Years	70	28%
	55-65 Years	55	22%
Educational Details	Graduation	100	40%
	Master	140	56%
	PhD	10	4%

Discussion

This study aimed to determine the decision-making and problem-solving abilities of hospital administrators in Karachi, Pakistan, as well as any socio-demographic amongst these administrators. Numerous research on the management-related skills of healthcare administrators have been published.

Nonetheless, (Aslan's, 2009) study indicates that as managers age, their transformative leadership skills improve. Our findings do not align with this finding. It is believed that administrative expertise enhances problem-solving and decision-making abilities. The belief that managing is a career for men has weakened in recent years, and the number of female administrators has increased. In a study of school administrators, most respondents claimed that sexual orientation was not a significant influence in management (Can, 2010). The study discovered that men hospital executives have superior problem-solving and decision-making abilities compared to their female counterparts. (Erigüc et al., 2008) found in their study that administrators with graduate degrees have superior decision-making abilities. This study discovered that managers with a postgraduate degree were better at problem solving and making decisions than those without a postgraduate degree.

This research also uncovered a statistically significant distinction between administrators' decision-making abilities and the extent to which they employ the HIS. This disparity was traced to administrators who claimed to have never used the HIS. Administrators who have never used the HIS may subjectively overestimate their own problem-solving and decision-

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making abilities. However, any scientific understanding of management would deem it unethical for an administrator to disregard the HIS when making managerial judgements.

Conclusion

This study was done to identify the problem-solving and decision-making ability levels of hospital administrators, as well as the sociodemographic and skill levels. This study demonstrated a statistically significant difference between the problem-solving and decision-making skills of administrators who reported 'never using' the HIS in their everyday decision-making and those of other administrators.

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