

**HEALTH SERVICES 431: MANAGEMENT PROCESSES AND PRACTICES FOR  
HEALTH SERVICES ORGANIZATIONS**

Tuesday/Thursday, 3-5 PM

Spring Quarter, 2005

CHS 41-268

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Organizations are held accountable to multiple stakeholders. New systems to manage the changing face of organizational processes are continually being created. New theories about workforce management and demands by today's workforce for empowerment are altering how managers organize for task accomplishment. Today's health care manager requires a clear understanding of the complexity in which health care organizations function and a commensurate stable of knowledge, skills and abilities with which to manage the complexity of health services organizations and the people who work in them.

This class will introduce you to the principle skills related to effectively working with and managing people in the accomplishment of your responsibilities. It will focus on the application and practices of organizational and interpersonal behavior. This is a follow-on class to HS 234, in which you were introduced to the basic principles of Organization and Management Theory and the relationship between management and the organization. In this class, we will move from the theoretical aspects of understanding organizations to learning behavioral skills and practicing them. In addition, we will practice specific skills related to managing work and the work of others, in the context of selected human resources concepts and regulatory guidelines.

While it takes close to a lifetime of work in such an exciting and ever evolving field of practice to really master the art of health care organization management, this class will introduce you to some of its basic practices and skills. To that end, the objectives of this class are to:

1. Provide the student with an introductory level of understanding of the basic principles and skills of healthcare management as they relate to human resources and the development of organizational human capital, developing and monitoring effective work processes, utilizing and maintaining effective interpersonal behaviors and relationships, and managing people – both superiors and subordinates;
2. Provide practice in new skills and knowledge through in-class exercises and role-plays of simulated real life situations;
3. Provide the students an opportunity to express both in writing and orally their acquisition of knowledge and skills by assigning case studies for analysis and class discussion;
4. Apply to real-life situations the concepts learned in class sessions through field research conducted for the group project.

### **COURSE ORGANIZATION:**

This class strives to permit the maximum amount of input by the students in the class either individually or in groups through the use of structured exercises, case analyses and interactive discussion.

Working in groups is a basic organizational paradigm. Students in this course will spend a lot of time in work groups. Students will be assigned to their group based on a variety of categories. We will deliberately make the groups as diverse as possible. These assigned groups will work together during group exercises conducted in class and they will organize and present to the class a powerpoint presentation for a given topic. This project will require students to interview managers in the field regarding key concepts for their topic. Groups will remain together throughout the quarter. A portion of the students' grade will derive from a peer assessment of the person's contribution to the group.

### **LEARNING OBJECTIVES:**

By the completion of this course, the student will have a basic understanding of and ability to demonstrate:

1. Interpersonal and organizational competencies related to the management and development of themselves and others. Examples of these skills are effective communication, group problem solving and decision making, motivation, team management, conflict management, negotiation, and meeting facilitation;
2. Techniques for monitoring the performance supervisory subordinates;
3. Project management and task organization skills;
4. The basic principles of change management, the ability to generate alternative workable solutions to problems, and the processes, barriers and facilitators to effective organizational change.

### **GRADING:**

Group Project & Presentation	25 Points	98-100 = A+
3 Cases @10 points	30 Points	92 - 97 = A
Peer Evaluation	10 Points	90 - 91 = A-
Class Participation	10 Points	88 - 89 = B+
Final Examination	<u>25 Points</u>	82 - 87 = B
	100 Points	80 - 81 = B-
		<80 = You are not paying attention

## **REQUIRED READINGS:**

1. Whetten, D.A. and K.S. Cameron, DEVELOPING MANAGEMENT SKILLS, 6E, NJ: Prentice Hall, 2005
2. Reader for HS 431: Course Reader Material, 1141 Westwood Blvd., 310/443-3303.

All of the readings will not be covered in class. You will, however, be responsible for reading the material, reflecting on it, and integrating it into class discussion, question and answer, case analyses and final exam. A copy of the texts will be on reserve in the Biomed library.

### **Recommended**

Shortell, S.M. and A.D. Kaluzny, HEALTH CARE MANAGEMENT: ORGANIZATION DESIGN AND BEHAVIOR, Albany, NY: Delmar Publishing, 2000.

### **Class Participation**

Class participation is an extremely important aspect of this class. Therefore, a large portion of the grade is dependent upon it. Group exercises depend upon the attendance of all group members. The class participation grade will depend not only upon attendance in class but also upon pertinent contribution to class discussions.

### **Peer Evaluation**

Using the principles of group process and applying the principles of performance appraisal and assessment, design as a group your group's peer review performance system using at least 5 criteria. Define the criteria and a basis for evaluation. The performance system should be based on a potential 5 points per criterion. Each group member should then use the criteria developed by the group to individually rank each of the other members of your group on each criterion and provide a mean/average score for that individual of 1-5. I should receive a copy of all the grading sheets. I have purposely left out examples of the kind of criteria you might want to use to evaluate your group members. Your group should determine what is important to them. These grades count. However, if you need suggestions after you have drafted the assessment instrument, I will be happy to help.

#	DATE	TOPIC	READINGS
1	April 5	Introduction to Class	<b>W&amp;C:</b> Chpt 1: pp 41-81; Chpt. 2: pp 95-136 <b>Reader:</b> Quinn, pp. 117-132
<b>Managing Yourself: The Self As a Management Skill</b>			
2	April 7	Personality Theory and the Kiersey Temperament Sorter	<b>Reader:</b> Saulo – Type Theory. Parts I, II Quinn, pp. 31-35
<b>Managing People And Groups</b>			
3	April 12	Communication	<b>W&amp;C:</b> Chpt. 4: pp 207-236 <b>Reader:</b> Quinn, pp.40-43; 241-245 (See readings under Job specifications) Parsons, p. 3-17
4	April 14	Groups and Work Teams	<b>W&amp;C:</b> Chpt. 9: pp 443-473, 200-209 <b>Reader:</b> Ray: “Shared Borders...” Delbecq & Gil: Justice as a prelude...” B&G: Chpt. 8: “Small Group Leadership” <b>Review:</b> S&K: Chpt. 6 – “Groups and Teams
5	April 19	Problem Solving Decision-Making	<b>W&amp;C:</b> Chpt. 3: pp 153-191 <b>Reader:</b> B&G Chpt. 11: Decision-Making ... Quinn, pp. 80-86 <b>DUE:</b> <b>Hartland Memorial Hospital</b>
6	April 21	Negotiation and Managing Conflict	<b>W&amp;C:</b> Chpt. 7: pp 341-373 <b>Reader:</b> Fisher and Ury, Chpt. 1; Laubach, Chpts 1, 2, 6 <b>Review:</b> S&K: Chpt. 5: Conflict Management and Negotiation
7	April 26	Power, Influence and Leadership	<b>W&amp;C:</b> Chpt. 5: pp. 247-276 <b>Reader:</b> McDaniel: “Strategic Leadership” <b>Review:</b> S&K: Chpt. 4: Leadership
8	April 28	Motivation	<b>W&amp;C:</b> Chpt. 6: pp 295-325; Chpt. 8: pp 397-431 <b>Reader:</b> Hertzberg: “One More Time...” McClelland: “Power...” McNeese-Smith: “. Employee Productivity” <b>Review:</b> S&K: Chpt. 3 – “Motivation”
9	May 3	Meeting Essentials <b>Guest: Nancy Hays, MPH, Kaiser Permanente</b>	<b>W&amp;C</b> – Appendix C: pp. 583-591 <b>Reader:</b> B&G – Chpt. 9 “Designated Leader”
10	May 5	Managing Projects; Rollout and implementation	<b>Reader:</b> Quinn: pp. 170-184; Frame, “Operating Within the Realities of Organizational Life.”

<b>Human Resources</b>			
11	May 10	Change Management  Case Discussion: Renal Department	<b>W&amp;C:</b> Chpt. 10: pp 485-515 <b>Reader:</b> Quinn, pp 338-345; 360-370; Kotter: "Transforming Organizations: Why Firms Fail;" Nutt: "Views of Implementation;" Topping: "The Dynamics of Org Change;" <b>Review:</b> Chpt.12: Organizational innovation, change and learning <b>Case Due: Renal Department</b>
12	May 12	Strategic Human Resources Diversity: Bafa Bafa  <b>Lead: Randal Henry</b>	<b>Reader:</b> Fottler, "Strategic Human Resources Management," McGee & Shewchuck – "Managing a Diverse Workforce" in Fottler et al, 1994. Dreachslin, "Diversity Leadership and Organizational Transformation..."
13	May 17	Recruitment and Retention <b>Guest: Jeanne Flores, MPH Sr. VP for Human Resources at Cedars-Sinai</b>	<b>Reader:</b> Landau and Abelson – "Recruitment and Retention" in Fottler et al, 1998.
14	May 19	Employee Job Design and Specification Performance Assessment	<b>Reader:</b> Quinn, pp. 188-198; 50-54; 241-245; Fried, "Performance Management", in Fried and Johnson, 2002; <b>Review:</b> S&K: Chpt. 7 – "Work Design,"
15	May 24	Interviewing potential employees	<b>W&amp;C:</b> Appendix C – Conducting Interviews <b>Case Due: Employee Retention Case</b>
16	May 26	Lakeview Hospital Simulation	<b>Reader:</b> Rubino and Freshman, "An Experiential Learning Simulation..."
17	May 31	Lakeview Hospital Simulation	
18	June 2	Disaster Preparedness <b>Guest: Dr. Len Friedman, Professor and Director, MHA Program, OSU</b>	Special reading to be distributed
19	June 7	Student Group Presentations	
20	June 9	Student Group Presentations	
	June 15	Final: 3-6 PM	

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## **ASSIGNMENTS:**

### **Group Project & Presentation:**

The purpose of the group project is for you to apply the concepts learned about a specific topic as they relate to health care policy and management organizations.

Each group in the class will have the responsibility for presenting a major segment of the key health care management concepts and integrating identified skills and theory with findings from interviews in the field. Students must structure the presentation within a selected conceptual framework and discuss the findings as they relate to the framework. Groups will interview two different organizations around the topic of their key health care management concept. The group will gather the information and present it in an analytical manner by, for example, comparing or contrasting the two organizations with each other and with the materials, identifying differences and gaps between theory and practice, and/or making suggestions about how the organizations might change if they were to apply the concepts identified in the readings. Make these presentations as lively as you can. Dull, pedantic presentations will be graded down under the “quality of public speaking” criterion. To ensure an effective presentation, be sure to review your presentation with Randal or me at least 2 weeks prior to the presentation date.

#### **Topics:**

1. Diversity
2. Recruitment and Retention
3. Managing Change
4. Project Management
5. Interdisciplinary teams and team building

#### **Process:**

We strive for a diversity of organizational representatives. Therefore, prior to selecting the organizations you will interview, sign-off with Dr. Hilberman before making a final decision.

1. Select topic.
2. Research topic and identify major conceptual principles and/or framework to guide your analysis.
3. Identify two organizations that support the conceptual ideas you are presenting. These may be the same kind of organization (2 hospitals) or two different kinds of organizations (hospital/health plan, health plan/consulting organization).
4. Interview representatives of chosen organization regarding the concepts you have identified as important.
5. Analyze information according to conceptual framework you are using.
6. Compare/contrast your organizations on the basis of your collected information.
7. Present conclusions, draw implications, or make recommendations based on your assessment of how the organizations align with the principles that guide you.
8. To help the class prepare for the Q&A, please prepare and provide to the class an outline and study guide, preferably from your computer-based presentation, including readings. This will be used to help your colleagues prepare for the final exam and correctly respond to questions about your topic.

### **Presentation Guidelines**

1. 30 Minutes/presentation
2. Professional Presentation with appropriate dress and behavior. presentation will be graded as follows:

Quality of Public Speaking	1
Organization of Presentation (Including a framework within which to present the material)	2
Clear Articulation of Key Management Concepts	5
Application of Readings to Field Findings (Does organization follow principles you are learning?)	5
Agenda and Minutes for project meetings	<u>2</u>
<b>Total Points</b>	<b>15</b>

### **CASES**

Three cases will be assigned during the course. A properly prepared case is a joy to read. Case analysis provides the student an opportunity to integrate and apply newly learned concepts to real situations and to make decisions and judgments without injuring real people or becoming embarrassed.

All students must come to class with their written assignment and prepared to discuss the case. The cases will be submitted in class on their due date. If the student has NOT completed the written assignment, he or she will be asked to leave class so as not to have the extra benefit of class discussion before preparing the case.

Cases are to be no more than 4 pages long double-spaced in 12-point font. In preparing the cases, the student will address the questions posed in the case description or by the faculty. In support of the analysis, cases require that applicable theory and learning from the readings and class sessions be integrated into the write-up. Writing should be clear, concise, demonstrating strong written English in terms of grammar, syntax and format of the case. Part of the case grade will depend upon your grammar. The key to successful communication is to be able to articulate ideas clearly and concisely.

Case analysis should be presented in Memo format as if you are making recommendations to your executive. Cases will be evaluated based upon the student's:

- 1) Demonstrated understanding of the case and the issues involved, including an objective assessment of the situation from all points of view represented in the case. The student should indicate the facts of the case and their relative importance, and the relationships among the players.
- 2) Application and specification of readings, theory, models, and research into the analysis,
- 3) Consideration of variety of viable alternatives to the problem and an assessment of these alternatives. This is one of the most important parts of the case. Remember that a choice to do nothing is still a choice, and will have (sometimes serious) ramifications.
- 4) The student's recommended course of action, and the defense of that course of action.
- 5) Quality of written communication including grammar, diction, syntax and spelling. Be sure to proofread. Spell check does not identify incorrectly used words or typos that are still words.

## UNDERSTANDING AND PREPARING CASE ANALYSES

Learning by the case method is an intellectually stimulating method of integrating classroom, theory, and experience. Using cases is designed to:

- Synthesize knowledge and theory with application;
- Develop critical thinking and analysis skills; and
- Encourage interaction and discussion among students thereby challenging your experiences and values.

In return, you will obtain the following benefits:

- Sharpen your assessment and problem solving skills;
- Use a variety of disciplines learned in the School of Public Health and elsewhere; and
- Cultivate your group interaction skills.

A “case” is a description of a situation or problem actually faced by a manager and one requiring analysis, decision, and planning of a course of action. A decision may be to delay action or a planned course of action may be to take no action. A case takes place in time and must have an issue. Generally, a case has no one right answer because, in dealing with issues, there are at least two sides to a question. However, not any answer is the correct one. Some answers lead to better management decisions than others.

As with “real life”, most cases are ambiguous, presenting many viable alternatives, some of which are better than others. As with “real life”, most cases present a lot of information and data, not all of which will be relevant or necessary to the analysis. As with “real life”, most cases will lack important information upon which decisions rely. As with “real life,” the future and chosen outcome goals are uncertain. You will have to make assumptions about the data and its effect on the outcome of the analysis. Decisions about the future involve uncertainty. Because of the complexity of the health care system and health care organizations, the future is uncertain and decision success is uncertain. Therefore judgment is risky. All managers are faced with risk in decision-making. This is an accurate reflection of the “real world.” Be creative with your solutions, but be realistic. Identify your assumptions and the logic of your analysis.

Solving a case is much like solving any problem. First, the issues are defined, information is gathered, and alternatives are generated, evaluated, selected and implemented. The following set of steps might be helpful in your analysis:

1. Summarize the facts, organize the information, and classify the information into groups of available data and gaps in data. Illustrative categories might include but not be limited to: expectations about the organization by stakeholders, financial performance indicators, internal organizational strengths or weaknesses, and environmental issues, demands and challenges. Getting the facts may mean performing analyses, such as financial analyses, with the data presented in the case.
2. Infer other information from the facts. For example:
  - Who are the major players and what are their perspectives and interrelationships?
  - What are the critical issues as defined by the key players?
  - How does the influence of the player affect or alter the importance of the issue?
3. Identify themes, issues, and problems raised by the case. Generally, the cases have many issues that can be addressed. Some are more important than others. Cull out and prioritize the important issues. Questions to contemplate might include:

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- Why do these problems exist?  
Who needs to be involved in the solution?  
From where will support or resistance come in resolving the issue?  
To what extent are the necessary solutions long or short term?  
To what extent are these system problems or people problems?
4. Generate alternatives to solve the problem or address the issues.
  5. Evaluate the alternatives. Examine the rationale and data to support each alternative. Criteria helpful in evaluating alternatives include judging the alternative's relative merits and suitability in solving a problem. Questions to guide decision-making might include:
    - Which alternative provides the greatest benefits?
    - What are the relative costs of each alternative?
    - Is there consistency of choices with organizational mission, culture, philosophy, and objectives?
    - Is there consistency of skill mix and organizational competency to carry out recommendations?
    - How acceptable are the possibilities to the internal and external stakeholders?
    - What are the expectations of support or resistance?
  6. Make a recommendation, if the case calls for one. Do not sit on the fence. Do not bunt. Do not abstain. Do not pass. Commit.

\* Steps in analyzing cases used in this guide are adapted from: Richardson, Mary, "Using and Analyzing Case Studies" in Austin Ross and Mary Richardson, *AMBULATORY HEALTH CARE: CASES FOR THE HEALTH CARE EXECUTIVE*. Health Administration Press, 1996. And Rakich Jonathon S., Longest, Beaufort B., and Darr, Kurt, *CASES IN HEALTH SERVICES MANAGEMENT*, 3<sup>rd</sup> Edition. "Introduction." Health Professional Press, 1995.

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## **BOOKSHELF.**

### **BOOKS**

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Quinn, R.E., S.R. Faerman, M.P. Thompson, M.R. McGrath, BECOMING A MASTER MANAGER: A COMPETENCY FRAMEWORK, 2E, NY: John Wiley and Sons, 1996.

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### **ARTICLES**

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McDaniel, Reuben R. 1997. "Strategic Leadership: A View from Quantum and Chaos Theory." HEALTH CARE MANAGEMENT REVIEW. 22:1, Pp.21-37.

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