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UNIT I

PHILOSOPHIES AND PRINCIPLES OF MANAGEMENT.

Introduction:-

One of the most important human activities is managing. Management is the process of designing and maintaining an environment in which individuals, working together in groups, efficiently accomplish selected aims, managers are changed with the responsibility of taking actions that will make it possible for individuals to make their best contributions to group objectives. Management thus applies to small and large organizations.

Management:-

Management is the process involving planning, organizing, staffing, directing and controlling human efforts to achieve stated objectives in an organization.

(L.M.Prasad 2001).

To manage to forecast and to plan, to organize, to co-ordinate and to control (Henry fayol, 2002).

Philosophy:-

According to Brightman, "philosophy is an attempt to think truly about human experience or to make experience intelligence".

In Raymond's opinion, "philosophy is unleashing effort by discern the general truth that lies behind the particular facts, discern also the reality that lies behind appearance", this definition more preciously deals with the reality of life and truth.

The management philosophy:-

Peter F. Drucker viewed as

> the term "innovation in a broader sense".

The development of new ideas, combining of old ideas and new ideas adaptation of ideas from other field or even to act as a catalyst and encourage others to carryout innovation, also constitute innovation.

- > treats tasks as management
 - He also treats management as a discipline. In management, according to him, people are most important.
 - He emphasizes "performance" and "practice". In his own words, "In the last analysis, management is practice; its test is not logic but result. Its only authority is performance".
- Management is independent of ownership.
 - The work of managements is generic and continuous management is a discipline with its own yardstick for measurement.
 - Management as a discipline has its own tools, skills, techniques and approaches. It is practice rather than a science.
- > 'empirical school' of management.
 - Manager cannot solve their problems in a purely scientific way.
 - Scientific principles, methods and form of organization for performing managerial activities should derive through systemic study analysis generalization and on the job practical experience.
 - The philosophy of management is designed not only for businessman but for the ordinary citizen also.
 - The ignorance about the knowledge of management in his view is one of the most serious weaknesses of an industrial society and it is almost universal, Business makes knowledge productive.
- managers must not be equipped only with skill, tools and techniques.
 - The manager must be more than a technocrat.
 - Management is not a culture –free party of the world of nature. It is a social function. It is, therefore both socially accountable and culturally embedded.
- > pointed out the challenges which management is facing at present.
 - Management over the years has emerged as a social leadership group and a new social institution.
 - Management has by now proved its indispensability. Management has become highly controversial, but it is become more and more important.

Modern philosophy:-

• In its essence, scientific management involves a complete mental revolution on the pert of the working man engaged in any particular establishment or industry – a complete mental revolution on

the part of these men as to their duties towards their work, towards their fellow men and towards their employees.

- Taylor and his followers meant by "scientific management" is that they were interested in reforming
 the management system and its working process. They were interested in developing an inquiring
 frame of mind that refuses to accept past practices as necessarily correct.
- The ideas about management can be called scientific, and are likely to produce better results in management situations. At the hands of Taylor, they urged for their specific applications such as the elimination of wasteful efforts, more emphasis on fitting workers to particular tasks, greater care in training workers to the specific requirement of their workers and greater specialization of activities.
- The manager can improve many operations by a simple reflection of the way in which the work is being done. Observation usually indicates that there is always room for improvement.
- The management has been looking for larger possible profit and the work men have been looking for larger possible wages for themselves.
- Taylor suggests that the objectives of management must be to pay high ways and have low unit production costs to achieve the increased industrial efficiency.
- The management has to apply scientific method of research and experiment to the management problems. Like standardization of working condition and placing the workers on the basis of scientific criteria moreover it must give formal training to workers and specific instructions to perform the prescribed motions with standardized tools and materials.
- The management has a responsibility to develop friendly co-operation between workers and management on the basis of scientific system of labour organization.
- To emphasis that the work becomes easier, more effective and production if it is planned before being executed has been a greater contribution to America's industrial rise than the stop-watch or time and motion studies attributed to Taylor's scientific management.

PRINCIPLES OF MANAGEMENT:-

Hendri Fayol's suggested fourteen principles of management which he found most frequently to apply in his work. He, however, recognized that there was no limit to the number of principles of management and the principles laid down by him were flexible and capable of adaptation to every need.

These principles are:

1) DIVISION OF WORK:

- 1. It refers to the division of work among various individuals engaged in collective output under the umbrella of an organization.
- 2. This principle is equally applicable to managerial work as to technical work. It refers to the division of work among various individuals in the organization to bring about specialization in every activity.

- 3. Fayol observed that specialization belongs to the natural order. It tends to increase efficiency. It helps to avoid waste of time and effort caused by changes from one work to another. But when carried too far, it leads to loss of skill and crafts man ship of the employee and makes the job monotonous and less interesting.
- 4. Division of work makes the job less satisfaction, management practice of today gives serious thought to the possibility of job enlargement as a tool of job satisfaction.

2. AUTHORITY AND RESPONSIBILITY:-

- 1. Authority and responsibility according to Henri Fayol should go together, though generally speaking responsibility is favored as much as authority is sought after in practicing.
- 2. Authority is the right or power to give orders to the subordinates. Responsibility means the duty which the subordinate is expected to perform by virtue of his position in the organization.
- 3. Responsibility must be expressed either in term of functions or in terms of objectives. When a subordinate is asked to control the working of a machine, the responsibility is in terms of function and when a subordinate is asked to produce a certain number of pieces of a product, the responsibility is created in terms of objectives.

3. DISCIPLINE:-

Discipline means getting obedience to rules and regulation of the organization. According to fayol discipline is obedience, application, energy and outward marks of respect.

Discipline is necessary for the smooth running of the organization depends upon the quality of leadership, clear and fair agreements and a judicious application of sanctions.

Discipline can be classified as,

- 1. Self imposed discipline
- 2. Command discipline.
- According to Fayal, 'discipline is what leader makes it, and accepts discipline as an outward mark
 of respect.
- It is absolutely essential for the smooth running of business and the best way of maintaining discipline according to fayol is to keep a system in which,
- 1. Good supervisors are available at all level
- 2. Penalties are judiciously applied.
- 3. The agreements with employee are as clear and fair as possible.

4. UNITY OF COMMAND:

- 1. This principle implies that for one action an employee should receive orders from one superior only.
- 2. The more completely an individual has a reporting relationship to a single superior, the less is the problem of conflict in instructions.
- 3. By observing the principles of unity of command, the following benefits may be delivered.
- ➤ It helps clarity authority responsibility relationship in the organization.

- There will be no possibility of the subordinate receiving conflicting orders.
- ➤ The organization structure will be simple and management will be more effective because there will be no confusion as to who is responsible to whom.

5. UNITY OF DIRECTION:-

- ❖ Fayol expressed this principle to mean one head and plan for a group of activities having same objectives.
- ❖ It is the condition essential to the unity of action, co-operation of strength and focusing of efforts.
- Unity of direction is provided by sound organization of the body corporate, while unity of command turns of the functioning of personal.

6. SUBORDINATION OF INDIVIDUALS INTEREST TO GENERAL INTEREST:-

- 1. The interest of one employee or group should not prevail over that of the whole organization.
- 2. It is true that factors like ambition, laziness, weakness, tend to reduce the importance of general interest, but the principle calls for reconciliation of the objectives of individual with that of organization.
- 3. The interest of one employee or a group of employees can be held under check and balance it;
- Firmness and good example of conduct and behavior are laid down by the supervisors.
- > Agreement are rendered fair
- ➤ Constant supervision is exercised over the total activities of the enterprise.

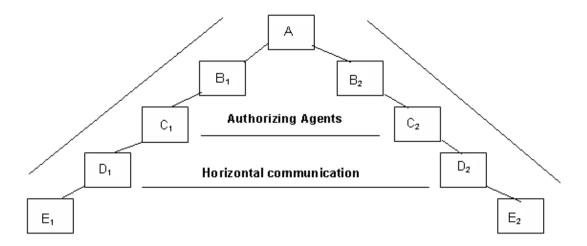
7. REMUNERATION OF PERSONNAL:-

- 1. This principle stands for a fair wage a remuneration which should ensure satisfaction to the personal and to the firm.
- 2. Fayol insisted on fair wages and salaries which had to be neither too low nor high.
- 3. Fayol insisted not only on the fairness and justice ability of the quantum of remuneration for service rendered.
- 4. Fair wages and salaries be the medium and the method of payment might depend upon the circumstances.

8. CENTRALIZATION:-

- 1. It means concentration of authority at one place or at one level in the organization refers dispersal of authority to the lower levels in the organization.
- 2. According to fayol, the question of centralization or decentralization is a simple question of proportion.
- 3. In small organization, order go directly to subordinates, in a big organization authority has been delegated to lower levels to the maximum possible extent.

9. SCALARCHAIN:-



- 1. This is the line of authority from superiors to subordinate, from the very top to the bottom of the business.
- 2. In each aspect of the business, the chain must be unbroken, ie at each level a man must have an immediate boss, who himself has a boss, and so on up to the managing director.
- 3. The scalar chain is the channel of authority, for communication up and down, and for decision-making. The one exception to its use is when, with the consent of their respective bosses, two men on different chain can make direct contact across' the gang plank', reach a decision, and inform their bosses of the decision reached.
- 4. Fayol suggested that a "Gangplank" or the Horizontal communication like could be used without weakening the chain of common. By this D1 can contact directly D2 or D2 contact with D1 directly, i.e. D1&D2 to deal with each other in few hours with some question otherwise the scalar chain will pass through transmission.

10. ORDER:-

- 1. There must be "a place for everything and everything in its place" that is what is meant by order.
- 2. Fayol dealt with order in material things and also social order.
- 3. There is a place for everything and everyone then everything and everyone are to be put in their place, the right man will automatically find the right job.

11. **EQUITY**:-

- 1. Equity refers fair judgment in dealing with human resources.
- 2. Personal must be related with kindness and equity if devotion and loyalty are expected of them.
- 3. The principle of equity suggests that manager should treat their employees with 'kindness' because the desire for equity and equality reprents aspirations which should be taken in to account while dealing with the employees. A manager must strive to install a "sense of equity" at all level of scalar chain.

12. STABILITY OF TENURE OF PERSONNAL:

1. Organization should provide a career structure so that its manager may continue to stay and progress with in the organization.

- 2. Unnecessary turnover is the cause as well as effect of poor management.
- 3. This principle calls for lowest possible turnover of personal for the well being of the concern. Moreover the employees should not be roated at different jobs very frequently because considerable time is required to learn each job.

13. INITIATIVE;-

- 1. The employees with initiative should be encouraged within limits of authority and discipline.
- 2. Fayol wanted that the subordinates should be given an opportunity to take some initiative in thinking out and executing. The Plano. Employees get satisfaction when they are followed to take initiative.

14. ESPIRIT DE CORDS (union is strength)

The phrase 'Espirit de corps' means 'the spirit of loyalty and devotion' which unites the members of the honour of the group to which one belongs. This principle calls for harmonious human relations in the organization so that the employees are loyal to the organization.

TAYLOR'S PRINCIPLES OF MANAGEMENT:-

Taylor's has given certain basic principles of scientific management.

The fundamentals are as follows:

1. Replacing rule of thumb with science:

- Taylor has emphasized that in scientific management, organized knowledge should be applied which
 will replace rule of thumb, while the use of scientific method denotes precision in determining ant aspect
 of work, rule of thumb emphasis estimation.
- Since exactness of various aspects of work like day's fair work, standardization of work, payment etc.

2. Harmony in group action:

Taylor emphasized on this principles suggests that there should be mutual give and take situation and proper understanding, so that group as a whole contributes to the maximum.

3. Co-operation:-

Scientific management is based on mutual confidence, co-operation and good will. Co-operation between management and workers can be developed though understanding and change in thinking.

4. Maximum output:

- 1. Scientific management involves continuous increase in production and productivity.
- 2. Taylor's advised the management and workers to turn their attention towards increasing the size of surplus becomes so large that is necessary to quarrel over how it shall be divided.

5. Development of workers:

In scientific management all workers should be developed to the fullest extent possible for their own and for the company's highest prosperity development of workers requires their scientific selection and providing them training at the work place.

NATURE OF MANAGEMENT PRINCIPLES:

The principles If management has the following distinctive features.

1. General statements:

Management principles are derived out of experience and analysis not been tested under laboratory or controlled conditions.

2. Dyanamic Guidelines:

The principles of management are flexible in nature. Refinement in principles take place continuously, this is made possible by ever increasing research.

3. Based on situation:

The application of management principles depends upon the specific situation being faced by manager, thus, they can be modified by the manager to meet the needs of the situation. The principles are neither absolute nor stable for all times to come.

4. Careful application:-

- 1. Management principles are relative and not absolute laws which can be applied bindly in all situation.
- 2. They must be applied carefully depending on organizational requirement and situational demands.

5. Universal application:-

- 1. Most of the management principles can be applied in all kinds of organizations.
- 2. In other words they are applicable to business organization, social, political, religious and other non-profit organizations.

SUMMARY:-

So far in this topic, it had been discussed about philosophy, principles of management given by Fayol, Taylor, and Drucker, some principles of the nursing management, need for management principles and nature of management principles.

Conclusion:-

It may be concluded that differences of opinion on transferability of management knowledge between countries and cultures has largely arisen from semantics. Management know how refers to the effective application of knowledge, it includes knowledge of management principles, its nature, needs also and art of applying it in a given situation.

Concept of management

Introduction

One of the human activities is managing ever since people began forming groups to accomplish aims they could not achieve as individuals, managing has been essential to ensure the coordination of individual efforts concepts are building blocks of they and principles. The concept of management must be clear to those who use them.

Definition of management

Management is the process of designing and maintaining an environment in which individuals, working together in groups, efficiently accomplish selected items.

Management has been defined as the creation and maintenance of internal environment in an enterprise where individuals working together in groups, can perform efficiently and towards the attainment of group goals.

- Koontz and O'Donell

Management may be defined as the art of applying the environment principles that underline the control of men and material in the enterprise under consideration.

Kimball and Kimball

Important reasons for management concepts

То

- 1) Increase managerial efficiency
- 2) Develop a science of management and to crystallize the nature of management
- 3) prepare and study research projects every year
- 4) acquire social achievement

To increase managerial efficiency

The establishment rules, principles and techniques of management increase managerial efficiency as they provide managers the important guidelines as how they should operate and work in different situations.

To develop a science of management and to crystallize the nature of management

Lack of understanding of the management concepts, principles and techniques make it difficult to analyze job and to design programmes to train and develop managers. Therefore, it's essential to develop a science of management.

To prepare and study research projects every year

Research work must undertake to expand and improve the horizons of management knowledge if structural frameworks of management theory exist. Major research projects must be pursued every year by the students of management to test various aspects of the validity of management.

To acquire social achievement

Broadly speaking, a management function is to co-ordinate the efforts of the people so that individual objectives may be translated into social achievements.

Management organization and administration:

At the very outset it should be made clear that the three works are neither synonymous nor interchangeable. They have their own field of operation. All convey different meanings. In common language they are taken as one and the same. In practice however they have different meanings.

According to G.E Millswork all three defined as

Administration is primarily the process and the agency used to establish the object or purpose which an understanding and its staff are to achieve, secondly, administration has to plan and stabilize the broad lines of principles which will govern action. The broad lines are called polices.

Management is the process the agency through which the execution of policy is planned and supervised.

Organization is the process of dividing work into convenient tasks and duties, of grouping such duties in the form of posts of delegating authority to each post and of appointing staff to be responsible that work carried out as planned.

Distinction between administration, management and organization

Administration	Management	Organization
i) It is the process of	It is the process of	It is the process of dividing
determining the object to	planning the work as per	tasks and duties as planned
be achieved	the object laid down by	by the management within
	administration.	the objectives.
ii) It lay down the polices	It executes the polices and	It organize the work
and principles	programmes	
iii) It prepares the	It supervise and controls	It draw out the line and
framework under which	the execution of assigned	determines the line of
one is asked to work and	work	action.
execute.		
vi) It provides	It controls activities	It delegates the authority
Direction		and determine the line of
Guidance		action. Fixes responsibility
> Leadership		therefore.

V) Thus it is the first and	It comes second follows	It occupies the third place
provides to the	the administration and	and solely responsible for
management and	derives strength from	what the management has
organization	administration	planned and administration
		has set.

Stages of management

- i) Top management
- ii) Middle order management
- iii) Lowest level management

i) Top management

Responsible for planning. It lays down the polices and programmes for the enterprise. It thus, provides a framework within which the entire enterprise works. Top management is responsible for providing leadership, guidance and supervision.

ii) The middle order management

Responsible for executive work at the second tier which certainly functions as the second order to the top management.

iii) The lowest level management

Like the middle order responsible for the execution for the plans, polices and programmes. This level is directly involved in the operation of job while the middle order management, the second tier, is indirectly responsible for execution.

The term management is used in three alternative ways

- 1. Management as a discipline
- 2. Management as a group of people
- 3. Management as a process

1. Management as a discipline

Discipline refers to a field of study having well-defined concepts and principles. When we refer to management as a discipline, we include in it the various relevant concepts and principles, the knowledge of which aides in managing. From this point of view, management can be treated either as an art or science.

2. Management as a group of people

Sometimes, we refer to management as a group of people in which we include all those personnel who perform managerial functions in organizations.

E.g When we talk about relationship between management and labour in an organization, we refer to two distinct classes or group of personnel in the organization. In the first category, we include all those person

who are responsible for managerial functions and in the second category, we include non-managerial personnel.

Management as a process

A process can simply defined as systematic method of handling activities. How ever the management process can be treated as a complex one which can be referred to as an identifiable flow of information through interrelated stages of analysis directed towards the achievement of an objective or set of objectives.

Principles and importance of management

Management id a living science. From time to time various thinkers of the subject have expressed their opinion on the principles.

According to Urwick, Keith and fayol there are 15 principles

1) Principles of policy making

An effective management needs, clear and well thought out policy. The evolved polices should be such which may be acceptable to all and may be able to arouse the interest of the workers and provide incentives to all those who are responsible giving the polices a practical shape.

2) Principles of Improvement and adjustment

An enterprise is a going concern, it grows step by step steadily but surely. The management has, therefore, to prove itself a living science. It should be flexible, able to accept improvement and adjust itself according to the dictate of the situation.

3) Principles of balance

In order to develop on proper lines with high degree of efficiency and economy the enterprise is required to have a balanced structure. Here, at least for this purpose the chief executives is required to go through all the details minutely and he is also to ensure that a proper balance between the duties, responsibilities rights and authority is well established.

4) Principle of Individual effectiveness

According to Henri Fayol proper training on scientific lines for increasing the individual effectiveness. Proper training, good wages policy, human relations, and healthy surroundings also help the enterprise in increasing the effectiveness of an individual.

5) Principles of relationship of task and accomplishment

Everyone should be placed in his assigned job according to his skill, knowledge, aptitude and experience so as to ensure efficiency and understanding. The scientific selection of workers helps the management in placing the workers at places where they are fitted suitably.

6) Principles of simplicity

Working of any organization should be as simple as possible. From principle of simplicity we mean that plants used in production, procedure followed in routine jobs and the way in which materials and of course the mean are put to use should be simple enough.

7) Principles of specialization

Standardization is a focal point of scientific management and it comes through specialization. Specialization increases the productivity. Quality of product improves due to specialization.

8) Principles of standardization

Specialization makes standardization possible. Standardization helps in marketing the product. Quota and quality production is ensured with the help of standardization. Cost calculation becomes easy. The principle of standardization is of utmost importance to the management from the point of view of production, marketing, supervision and best utilization of available resources.

9) Principles of financial Incentives

Sound wages policy based on financial incentives elicits maximum co-operation of the workers. This obviously ensures growth and prosperity to the enterprise. Serving the society is best possible manner in another goal of management which it can attain if the workers are satisfied and interested in serving the enterprise to their fullest capacity. The principle of financial incentives helps the management in achieving these objectives as well.

10) Principles of planning

Planned work ensures smooth running of an enterprise. Plans decide as to what, when, how and of course whom a work is to be accomplished. Pre-determined objectives and thought give the point of achievement and success.

11) Principle of control

However reasonable, discipline efficient and responsible worker might be needs a supervision and proper control. Effective control decides the future of the organization, standardization of jobs and product helps in better control over both men and materials.

12) Principles of leadership

Supervision and control precedes the leadership, guidance and direction. Unless these are provided properly and as per the requirement of the enterprise no amount of supervision and control can vouch safe the smooth running of the enterprise. A good leadership, better direction, required direction also ensure cooperation and good human velocities.

13) Principle of co-operation

Co-operation begets confidence and ensures mutual respect. Both of them are a must for proper and smooth working hence the principle and need for co-operation among all of the confidence.

14) Principle of responsibility and authority

Duties and responsibilities, rights and authority go together. Rights and authority cannot be exercised, unless they are clearly spelled out. It necessary that each workman and each section of the enterprise must be supplied a list of their duties and responsibilities which is to be performed and rights and authority they would enjoy while shouldering the burden of their duties and fulfilling their responsibilities.

15) Principe of exception

According to this principle top management should be made free from routine nature of jobs so that it may devote its time in studying the problems and solutions to solve them.

Trends in management

Management development

During the last hundred years, management has become a more scientific discipline with certain standardized principles and practices. It is two parts-

- 1) Early management
- 2) Modern management

1) Early management

- i) Scientific management
- ii) Administrative management
- iii) Human relation movement
- iv) Illumination experiments

2) Modern management

- i) Classical approach
- ii) Behavioural approach
- iii) Quantitative approach
- iv) System approach
- V) Contingency approach

CURRENT TRENDS IN MANAGEMENT

Introduction:

From an almost unrecognized position nearly two centuries age, management has risen today to the central activity of our age and economy a powerful and innovative force on which our society depends for material support and national well being.

Meaning:-

Management is the art of getting things done through others (Parker. F.M)

Definition:-

- 1) Management is the art of getting things done through and with people in formally organized groups (Harold koontz)
- 2) Management is a multipurpose organ that manages a business and manager and manager's workers and work. (Druker)

MANAGEMENT DEVELOPMENT:-

During the last hundred years, management has become a more scientific discipline with certain standardized principles and practices. The evaluation of management thought during this period can be studied in two parts as under.

- 1) Early management approaches represented by scientific management administrative management theory and human relations movement
- 2) Modern management approaches represented by behavioral approach quantitative / management science approach, systems approach and contingency approach.

1) Early management approaches:-

A) Scientific management:-

Frederick Winslow Tylor (1856 - 1915) is considered to be the father of scientific management. He exerted a great influence in the development of management thought, through his experiment and writings.

Principles:-

- a) Development of true science for each element of man's job to replace the old rule of thumb method
- b) Scientific selection, training and development of workers for every job.
- c) An almost equal division of work and responsibility between management and workman, management entrusted with the planning of work and workman to look after execution of plans.

Techniques:-

1) Time study:-

Time study group or work management designed to established the standard time required to carryout a job under specified conditions. It involves analysis of a job in to a constituents elements and recording the time taken in performing each elements.

2) Motion study:-

It is a systematic and critical study of the movement of both the worker and the machine.

3) Differential payments:-

Taylor introduced a new payment plan called the differential piece work in which he linked incentives with production under this plan a worker received low piece rate if he produced the standard number of pieces and high rate if he surpassed the standard. So the attraction of high piece rate would motivate workers to increase production.

4) Drastic reorganization of supervision:-

It has two concepts.

- a) separation of planning and doing
- b) Functional foremanship.

In these days it used to be customary for each worker to plan his own work. The work himself used to select his tools and decide the order in which the operations were to be performed.

Taylor suggested that the work should be planned by a foreman and not by the worker. Further, there should be as many foreman as there are special functional involved in doing a job and each of these foreman should give orders to the workers on his specialty.

5) Scientific recruitment and training:-

The management should develop and train every worker to bring out his best facilities and to enable him to do a higher, more interesting and more profitable class of work than he has done in the past.

6) Intimate friendly co – operation between the management and workers.

Rather than quarrel over whatever profits there were, they should both try to increase production. By doing so, profits would be increased to such an extent that labour and management would no longer have to complete for them. So the management and labourhas a common interestin increasing productivity.

B) Administrative management:-

Fayol wrote that all activities of business enterprise could be divided into six groups.

- a) Technical
- b) Commercial
- c) Financial
- d) Accounting
- e) Security
- f) Administrative or management

2) MODERN MANAGEMENT APPROACHES;-

Modern management has developed through several stages of approaches. These approaches to the study of management may be classified as under.

a) Classical approach:-

The classical or empirical approach is based on the following tenets.

- Management is a continuous process consisting of interrelated functions performed to achieve the desired goals.
- 2) From the experience of managers in different organization, principles or guidelines can be derived.
- 3) Principles are basic truths which can be applied in different organizations to improve managerial efficiency.
- 4) Managers can be developed through formal education and training
- 5) People are motivated by mainly by incentive and penalties. Therefore, managers use and control economic rewards.
- 6) Theoretical research in to management helps to develop a body of knowledge which is necessary to improve the act of management.

Merits:-

- ➤ It offers a convenient framework for the education and training of future mangers.
- It focuses attention on what mangers actually do i.e. functions of management
- ➤ It highlights the universal nature of managements
- ➤ It provides a foundation for further research in management

Demerits:-

- 1) It is a mechanical approach which under mines the role of human factors in management. The focus on technical and economic aspects at the socio psychological issues in management.
- 2) The validity and universality of management principles is doubtful due to environmental changes
- 3) There is a danger in relying too much on past expense as two managerial situations are never identical.

b) Behavioral approach:-

This approach is an improved and a more mature version of the human relations approach to management. Dougles MC. AbrahamMaslow, kurtlewin are some of the foremost behavioral scientists who made signal contributions to the development of the behavioral approach to management. These scientist were more rigorously trained in various social sciences (such as psychology, sociology and anthropology) and used more sophisticated research method, the main propositions of this approaches are

- 1) A Business organization is not merely a techno economic system. It is much more a social system of interpersonal and intergroup relations.
- 2) The attitudes and performance of an employee are dominated by the social group to which he belongs. Members of an organization behave not an individuals but as members or some group.
- 3) Social and psychological incentives exercise a greater influence on employee motivation than working conditions and economic rewards.

- 4) Management must understand and develop harmonious interpersonal relations among his subordinates. There should be harmony between human needs and organizational goals.
- 5) Employees are capable of self direction and control. Therefore, participate leadership is more productive than task centered leadership.
- 6) Management requires social skills to make employees feel apart of the organization.

Merits:-

- 1) It is much disciplinary
- 2) It has made significant contributions to our understanding of people at work and groups in organizations.
- 3) It recognizes an organization as a social organization subject to the attitudes, culture of people.
- 4) Motivation, leadership, work designs, group dynamics and participation are the main concept of behavioral science approach.

Demerits:-

- 1) It lacks the precision of classical theory because human behavior is conpredictable
- 2) It conclusions lack scientific validity and suffer from a clinical bias. Its findings are tentative.
- 3) Management is much wider than organizational behavior.

c) Quantitative approach:-

The Management science approach was evolved after the second world war. It involves the application of sophisticated Quantitative / mathematical techniques for solving problems. Several mathematicians, engineers and economists like Herberk. A Simon, Von Newman, R. M. Cyert made significant contributions to this approach. This is known by several names, eg – Decision theory approach, mathematical approach operation research etc.

The Quantitative approach differs from the classical and behavioral approaches in several ways. It distinguishing features are given below.

i) Rational decision making:-

An organization is considered a decision making unit and the main job of a manger is to make decision and solve problems. The quality of information system and other techniques should be used for making rational decisions.

ii) Mathematical model.

A model is a simplified representation of a real life situation. If understand mathematical symbols and relationships. It reduces a managerial decision to mathematical form so the decision making process can be simulated and evaluated before the actual decision is made.

iii) Computer applications:-

The use of computers has been the deriving force in the development of management science approach.

iv) Evaluation criteria;-

As the main focus of the management science approach is on scientific decision making models are evaluated for effectiveness against the set criteria like Cost reduction, return on investment, schedules and deadlines etc.

- > The management science approach has made a significant impact on the practice of management.
- > The method and techniques developed under it are being increasingly used for managerial decision making.
- > This approach has contributed a lot in developing orderly thinking in management leading to more exactness.
- ➤ The management science approach has given effective tools to solve problems of planning and control.
- ➤ The approach covers only a part of the mangers job as it cannot effectively deal with interpersonal and group relationships. Decision making is only a part of management.

d) The system approach:-

The system approach management was developed during the late 1950. The few many pioneers such as E.S. Trist, A.K. Rise, F.E. kast have made significant contributions to this made approaches. The fundamental features to this system approach are as follows.

- An organization is a system consisting of many interrelated and interdependent parts or orderly according to some scheme such as that the whole is more than sum of the parts. This is called "synergy"
- 2) As a system an organization draws inputs (energy, information, materials, etc.) from its return the output into the environmental. It transforms these inputs and returns the output into the environment in the form of goods and services.
- 3) Energy system is a part of a supra system (environment)
- 4) Organization is an open system and it interacts with its environment. It is also dynamics systems as the equilibrium in its always changing. An organization operates in a dynamic environment which certainty, it is probabilistic.
- 5) Management is expected to regulate and adjust the system to secure better performance.
- 6) Management is multi disciplinary as it draws and integrates knowledge from various disciplines.

Types of system approach:-

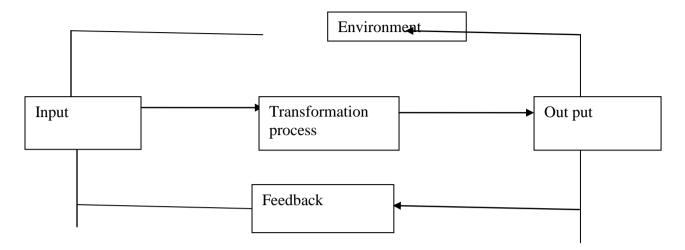
1. Closed system

A system is considered closed if it doses not interact with the environment physical and mechanical system are closed systems because they are insulated from their external environment.

2. Open system

A system is considered open if it interacts with its environment. All the biological, human and social systems are open system because they interact with the environment.

Organization are open systems, constant interacting with their environment.



Organization an open system

Merits:-

- The system approach highlights the multidimensional and multidisciplinary nature of management.
- > It provides a better conceptual framework for analyzing and understanding organizations and their management.
- > It helps to focuses on dynamic interdependency between specialized functions.
- > It is conductive to better understanding of the complicated interlocking network of institutions.

Demerits:-

- Systems concepts are said to be abstract and usage.
- Too many subsystems and interdependence among them make the task of manager very difficult.

e) Contingency approach:-

The contingency approach to management emerged from the real life experience of managers who found that no single approach worked consistently in every situation. John wodwad, P. R. Lorsch, J. Burns, T.M. have made significant contributions to the contingency approach.

The main determinants of a contingency are related to the external and internal environment of an organization.

a) External:-

Environment comprises, economic, social, technical and political factors influencing the organization.

b) Internal:-

Internal environment or state of the organization refers to various constraints and resources that are available. These includes

1) Technological constraints:-

Nature and type of the process used to produce goals and services.

2) Task constraints:-

Nature of task performed by individual workers.

3) People constraints;-

Type of individual employed and their level of competence.

Features of contingency approach:-

1) Management is entirely situational:-

There is no one best way managing an organization.

- 2) No one organization design can be suitable for all situations. The suitable design should be determined keeping in views the size, technology, people and environment of the enterprise.
- 3) An organization interacts with its environment and must therefore, adopt itself to environmental changes.
- 4) Management style and practice should match the requirements of the situation.
- 5) Success in management depends upon the ability to cope with environment demands.

Summary:-

Management is the act of gathering things done through others. Management development is divided in to two type's early management and modern management. In modern management there are five approaches, classical behavioral science, management science, systems and contingency approach.

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INDIAN CONSTITUTION

The majority of the <u>Indian subcontinent</u> was under <u>British colonial rule</u> from 1858 to 1947. This period saw the gradual rise of the Indian nationalist movement to gain independence from the foreign rule. The movement culminated in the formation of the on 15 August 1947, along with the <u>Dominion of Pakistan</u>. The constitution of India was adopted on 26 January 1950, which proclaimed India to be a <u>sovereigndemocraticrepublic</u>. Constitution of India is the supreme law of <u>India</u>. It lays down the framework defining fundamental political principles, establishing the structure, procedures, powers and duties, of the <u>government</u> and spells out the fundamental rights, <u>directive principles</u> and duties of citizens. Passed by the Constituent Assembly on 26 November 1949, it came into effect on 26 January 1950.

Evolution of the Constitution

Acts of British Parliament before 1935

After the <u>Indian Rebellion of 1857</u>, the <u>British Parliament</u> took over the reign of India from the <u>British East India Company</u>, and <u>British India</u> came under the direct rule of <u>the Crown</u>. The British Parliament passed the <u>Government of India Act of 1858</u> to this effect, which set up the structure of British government in India. It established in <u>England</u> the office of the <u>Secretary of State for India</u> through whom the Parliament would exercise its rule, along with a <u>Council of India</u> to aid him. It also established the office of the <u>Governor-General of India</u> along with an Executive Council in India, which consisted of high officials of the British Government.

Government of India Act 1935

The provisions of the Government of India Act of 1935, though never implemented fully, had a great impact on the constitution of India. Many key features of the constitution are directly taken from this Act. The federal structure of government, provincial autonomy, bicameral legislature consisting of a federal assembly and a <u>Council of States</u>, separation of legislative powers between center and provinces are some of the provisions of the Act which are present in the Indian constitution.

The Cabinet Mission Plan

In 1946, at the initiative of British Prime Minister Clement Attlee, a cabinet mission to India was formulated to discuss and finalize plans for the transfer of power from the British Raj to Indian leadership and providing India with independence under Dominion status in the Commonwealth of Nations. [6][7] The Mission discussed the framework of the constitution and laid down in some detail the procedure to be followed by the constitution drafting body. Elections for the 296 seats assigned to the British Indian provinces were completed by August 1946. The Constituent Assembly first met and began work on 9 December 1946.

Indian Independence Act 1947

The Indian Independence Act, which came into force on 18 July 1947, divided the British Indian territory into two new states of India and Pakistan, which were to be dominions under the Commonwealth of Nations until their constitutions were in effect. The Constituent Assembly was divided into two for the separate states. The Act relieved the British Parliament of any further rights or obligations towards India or Pakistan, and granted sovereignty over the lands to the respective Constituent Assemblies. When the Constitution of India came into force on 26 January 1950, it overturned the Indian Independence Act. India ceased to be a dominion of the British Crown and became a sovereign democratic republic. 26 November 1949 is also known as national law day.

Constituent Assembly

The Constitution was drafted by the <u>Constituent Assembly</u>, which was elected by the elected members of the provincial assemblies. [8] Jawaharlal Nehru, C. Rajagopalachari, Rajendra Prasad, SardarVallabhbai Patel, Maulana AbulKalam Azad, Shyama Prasad Mukherjee and NaliniRanjanGhosh were some important figures in the Assembly. There were more than 30 members of the scheduled classes. Frank Anthony represented the Anglo-Indian community, and the <u>Parsis</u> were represented by H. P. Modi and R. K. Sidhwa. The Chairman of the Minorities Committee was <u>HarendraCoomarMookerjee</u>, a distinguished Christian who represented all Christians other than Anglo-Indians. Ari BahadurGururng represented the Gorkha Community. Prominent jurists like <u>AlladiKrishnaswamyIyer</u>, B. R. Ambedkar, <u>BenegalNarsing Rau</u> and <u>K. M. Munshi</u>, <u>Ganesh Mavlankar</u> were also members of the Assembly. <u>Sarojini Naidu</u>, Hansa Mehta, <u>DurgabaiDeshmukh</u> and <u>RajkumariAmritKaur</u> were important women members. The first president of the Constituent Assembly was <u>SachidanandSinhalater,Rajendra Prasad</u> was elected president of the Constituent Assembly. [8] The members of the Constituent Assembly met for the first time in the year 1946 on 9 December. [8]

In the 14 August 1947 meeting of the Assembly, a proposal for forming various committees was presented. Such committees included a Committee on Fundamental Rights, the Union Powers Committee and Union Constitution Committee. On 29 August 1947, the Drafting Committee was appointed, with <u>DrAmbedkar</u> as the Chairman along with six other members. A Draft Constitution was prepared by the committee and submitted to the Assembly on 4 November 1947.

Parts

Parts are the individual <u>chapters</u> in the Constitution, focused in single broad field of laws, containing articles that addresses the issues in question.

- Preamble
- **Part I** $^{[9]}$ Union and its Territory
- Part II^[10] Citizenship.
- Part III Fundamental Rights
- **Part IV**^[11] <u>Directive Principles and</u> Fundamental Duties.
- Part $V^{[12]}$ The Union.
- Part VI^[13] The States.
- **Part VII**^[14] States in the B part of the First schedule (*Repealed*).
- **Part VIII**^[15] The Union Territories
- Part IX^[16] Panchayat system and Municipalities.
- Part X The scheduled and Tribal Areas
- <u>Part XI</u> Relations between the Union and the States.

- Part XII Finance, Property, Contracts and Suits
- <u>Part XIII</u> <u>Trade</u> and <u>Commerce</u> within the territory of India
- <u>Part XIV</u> Services Under the Union, the States and Tribunals
- Part XV Elections
- <u>Part XVI</u> Special Provisions Relating to certain Classes.
- Part XVII Languages
- Part XVIII Emergency Provisions
- Part XIX Miscellaneous
- Part XX Amendment of the Constitution
- <u>Part XXI</u> Temporary, Transitional and Special Provisions
- <u>Part XXII</u> Short title, date of commencement, Authoritative text in Hindi and Repeals

Federal Structure

The constitution provides for distribution of powers between the Union and the States.

It enumerates the powers of the <u>Parliament</u> and State Legislatures in three lists, namely Union list, State list and Concurrent list. Subjects like national defense, foreign policy, issuance of currency are reserved to the Union list. Public order, local governments, certain taxes are examples of subjects of the State List, on which the Parliament has no power to enact laws in those regards, barring exceptional conditions. Education, transportation, criminal law are a few subjects of the Concurrent list, where both the State Legislature as well as the Parliament have powers to enact laws.

Changing the constitution

Amendments to the constitution are made by Parliament. However they must be approved by a <u>supermajority</u> in each house, and certain amendments must also be ratified by the states. The procedure is laid out in Article 368. Despite these rules there have been over ninety amendments to the constitution since it was enacted in 1950. The Supreme Court has ruled, controversially, that not every constitutional amendment is permissible. An amendment must respect the "<u>basic structure</u>" of the constitution, which is immutable.....

In 2000 the National Commission to Review the Working of the Constitution (NCRWC)^[19] was setup to look into updating the constitution of India.

Judicial review of laws

This section requires expansion.

Judicial review is actually adopted in the Indian constitution from the constitution of the United States of America. In the Indian constitution, Judicial Review is dealt under Article 13. Judicial Review actually refers that the Constitution is the supreme power of the nation and all laws are under its supremacy. Article 13 deals that

- 1. All pre-constitutional laws, after the coming into force of constitution, if in conflict with it in all or some of its provisions then the provisions of constitution will prevail. if it is compatible with the constitution as amended. This is called the Theory of Eclipse.
- 2. In a similar manner, laws made after adoption of the Constitution by the Constituent Assembly must be compatible with the constitution, otherwise the laws and amendments will be deemed to be void-ab-initio. In such situations, the Supreme Court or High Court interprets the laws as if they are in conformity with the constitution.

HEALTH ADMINISTRATION AT THE CENTRE AND STATE LEVEL

Introduction

Constitutionally, every individual in India has the right of availing health services to protect his/her basic right of being healthy. To this effect, the Government of India has developed health administration machinery and mechanism to plan, organise, and deliver healthcare services to the people in rural and urban areas.

For the purpose of achieving health goals and dealing with health subjects, the Government of India has evolved healthcare organisation at the centre, state, district, and local level.

Meaning and definition

Health administration is a branch of public administration which deals with matters relating to the promotion of health, preventive services, medical care, rehabilitation, the delivery of health services, the development of health manpower, medical education, and training.

Public health administration is the science and art of organising and coordinating government agencies whose purpose is to improve the physical, mental, and social wellbeing of people. It aims at the prevention of disease, preservation, and promotion of health.

History of health administration in India

Health administration is a part of public administration of the country and is one of the aspects of social welfare activities of the government. Modern public health organisation and administration is designed to prevent disease, prolong life, and to promote physical and mental efficiency through organised community efforts.

During the independence period the medical and public health service at the centre were administered by two separate department heads – Director General of Indian Medical Services and Commission of Public Health Service respectively, but after independence these two offices were amalgamated into Directorate General of Health Services which was headed by the Director of Health Services.

Post-independence era

For public health in post-independence year in 1947 after independence a democratic regime was set up in India with new concept aimed towards the establishment of a welfare state. The Bhore Committee report and recommendations became the basis for most of the planning and measures adopted by the National Government.

- 1947: Ministries of health were established at the centre and states.
- 1948: India became the member of WHO.
- 1949: The post of Registrar General of India was created in the Ministry of Home Affairs.
- 1950: The Government of India set up a planning commission to make an assessment of material, capital, human resources of the country and to draft developmental plans for the most effective utilisation of these resources.

Five year plan: Planning commission has formulated successive five-year plans to rebuild rural India to lay foundation of industrial progress and to secure the balanced development of all parts of the country.

National health policy: The Ministry of Health and Family Welfare, Government of India, evolved a national health policy in 1983 keeping in view the national commitment to attain the goal of health for all by the year 2000. The main objective of this policy was to achieve an acceptable standard of good health amongst the general population of the country.

Objectives of health administration

- 1. To increase the average length of human life.
- 2. To decrease the mortality and morbidity rates.
- 3. To increase the physical, mental, and social wellbeing of the individual.
- 4. To provide total healthcare to enrich quality of life.
- 5. To increase the pace of adjustment of the individual to his environment.
- 6. To make provision of primary healthcare services to everyone.
- 7. To develop healthy manpower to provide proper services to the community.
- 8. To formulate health policies and their periodic revision from time to time.

Principles of health administration

- i. Centralised director and decentralised activity.
- ii. When a special function is to be undertaken, it should be undertaken by or in cooperation with the official body.
- iii. There should not be duplication and overlapping in rendering combined _____.
- iv. Treatment and prevention of diseases should be administratively combined.
- v. Administration must be based on a sound economic consideration and practicable financial budgeting.
- vi. A clear picture of the complete plan must be made before starting a programme.

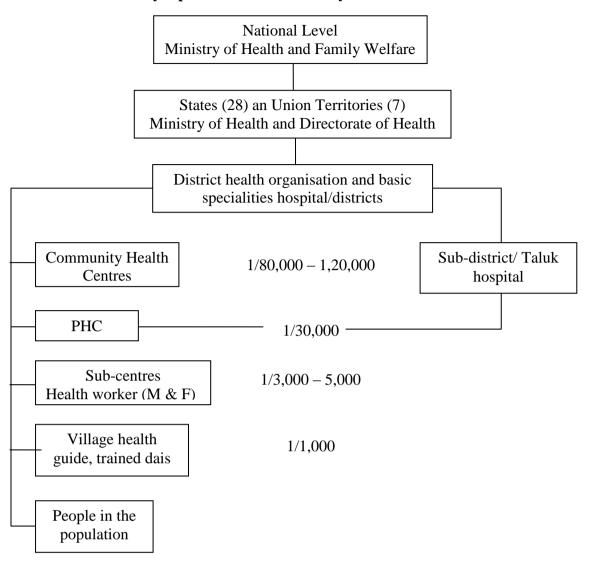
- vii. A programme of continuing staff education is essential.
- viii. Programme should be planned on a scientific priority basis.
- ix. Periodic appraisal of services rendered, effectiveness of the programme, and evaluation of the results is the major responsibility of the health administration.
- x. Provision must be made for desirable working conditions for all members of the staff.
- xi. There should be sound national health policy.
- xii. Sound healthy administrative structures may be designed for the implementation of various health policies.
- xiii. There should be integration of preventive and curative services at all administrative levels.
- xiv. Health should not be considered in isolation from other socioeconomic factors.
- xv. Health opportunities need not be related to the purchasing power of the people.
- xvi. Health consciousness should be fostered through education and by providing opportunities for participation of people in the health programmes.
- xvii. All the systems of medicine must be encouraged to provide decent health to people in a coordinated fashion.
- xviii. Health services should be organised form the bottom up and not from the top down.
- xix. There should be a provision for staff development programmes.

Health system in India

India is a union of 28 states and 7 union territories. Under the constitution of India, the states are largely independent in matters relating to the delivery of health care to the people. Each state, therefore, has developed its own system of healthcare delivery independent of the central government. The central responsibility consists mainly of policy making, planning, guiding, assisting, evaluating, and coordinating the work of the state health ministries so that health services cover every part of the country and no state lags behind for want of these services.

The health system in India has 3 main links: central, state, and local or peripheral.

Synoptic view of the health system in India



Health administration at the central level

The official organs of the health system at the national level consist of 3 units:

- 1. Union Ministry of Health and Family Welfare.
- 2. The Directorate General of Health Services.
- 3. The Central Council of Health and Family Welfare.

I. Union Ministry of Health and Family Welfare

Organisation

The Union Ministry of Health and Family Welfare is headed by a Cabinet Minister, a Minister of State, and a Deputy Health Minister. These are political appointment and have dual role to serve political as well as administrative responsibilities for health.

Currently the union health ministry has the following departments:

- 1. Department of Health
- 2. Department of Family Welfare
- 3. Department of Indian System of Medicine and Homoeopathy

a. Department of Health

It is headed by a secretary to the Government of India as its executive head, assisted by joint secretaries, deputy secretaries, and a large administrative staff.

The Department of Health deals with planning, coordination, programming, evaluation of medical and public health maters, including drug control and prevention of food adulteration.

Functions

The functions of the Union Health Ministry are set out in the seventh schedule of the Article 246 of the Constitution of India under union list and concurrent list.

Union list

1. International health relations and administration of port-quarantine

All the matters related to the international agencies, and coordination of their activities in the country are undertaken by the DGHS. All the major ports in the country such as Calcutta, Vishakapattanam, Chennai, Mumbai, Kandla and international airports like Mumbai, Santa Cruz, Dum Dum, Meenambakkam, Trissur, and Palam are directly controlled by DGHS.

- 2. Administration of central health institutes such as All India Institute of Hygiene and Public Health, Kolkata; National Institute for Control of Communicable Diseases, Delhi, etc.
- 3. Promotion of research through research centres and other bodies.
- 4. Regulation and development of medical, nursing and other allied health professions.
- 5. Establishment and maintenance of drug standards.

- 6. Census, and collection and publication of other statistical data.
- 7. Immigration and emigration.
- 8. Regulation of labour in the working of mines and oil fields and
- 9. Coordination with states and other ministries for promotion of health.

Concurrent list

The functions listed under the concurrent list are the responsibility of both the union and state governments. The centre and states have simultaneous powers of legislation. They are as follows:

- 1. Prevention of extension of communicable diseases from one unit to another.
- 2. Prevention of adulteration of food stuffs.
- 3. Control of drugs and poisons.
- 4. Vital statistics.
- 5. Labour welfare.
- 6. Ports other than major.
- 7. Economic and social health planning
- 8. Population control and family planning.

Department of Family Welfare

It was created in 1966 within the Ministry of Health and Family Welfare. The secretary to the Government of India in the Ministry of Health and Family Welfare is in overall charge of the Department of Family Welfare. He is assisted by an additional secretary and commissioner, and one joint secretary.

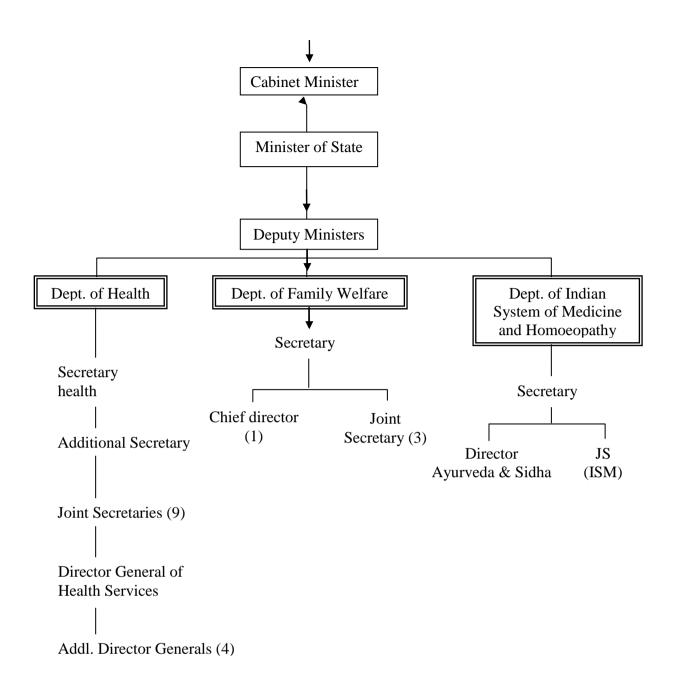
The following divisions are functioning in the department of family welfare.

- 1. Programme appraisal and special scheme
- 2. Technical operations: looks after all components of the technical programme viz. Sterilization/IUD/nirodh, post partum, maternal and child health,UPI, etc.
- 3. Maternal and child health
- 4. Evaluation and intelligence: helps in planning, monitoring and evaluating the programme performance and coordinates demographic research.
- 5. Nirodh marketing supply/ distribution
- 6. Transport
- 7. Universal immunization programme
- 8. Area project
- 9. Mass education and media: responsible for providing educational publicity and extent support to education.

Functions

- a. To organise family welfare programme through family welfare centres.
- b. To create an atmosphere of social acceptance of the programme and to support all voluntary organizations interested in the programme.
- c. To educate every individual to develop a conviction that a small family size is valuable and to popularise appropriate and acceptable method of family planning
- d.To disseminate the knowledge on the practice of family planning as widely as possible and to provide service agencies nearest to the community.
- e. To organise basic research of human fertility, genetics and population dynamics and to on the evolution of easy and reliable method of contraception.
- f. To study the social factors that affect fertility and to take such steps as will reduce the number of children in a family.
- g.To coordinate the family planning programme with the child welfare and maternal health services throughout the country.
- h.To organise production of contraceptive device in adequate quantities to maintain the supply at all levels at a minimum cost.
- i. Indian system of medicine and homeopathy helps to promote/ISM in the country through training, research and use.

Ministry of Health and Family Welfare



3. The department of Indian system of medicine and homeopathy

It was established in march 1995 and had continued to make steady progress. Emphasis was on implementation of the various schemes introduced such as education, standardisation of drugs,

enhancement of availability of raw materials, research and development, information, education and communication and involvement of ISM and Homeopathy in national health care.

Most of the functions of this ministry are implemented through an autonomous organisation called DGHS.

II. Directorate General of Health Services

Organisation

The DGHS is the principal adviser to the Union Government in both medical and public health matters. He is assisted by a team of deputies and a large administrative staff. The Directorate comprises of three main units:

- i. Medical care and hospitals
- ii. Public health
- iii. General administration

Functions

1. **General functions:** The general functions are surveys, planning, coordination, programming and appraisal of all health matters in the country.

2. Specific functions

- a. **International health relations and quarantine:** All the major ports in the country and international airports are directly controlled by the Director General of Health Services. All matters relating to the obtaining of assistance from international agencies and the coordination of their activities in the country are undertaken by the Director General of Health Services.
- b. **Control of drug standards:** The drugs control organisation is part of the DGHS and is headed by the Drugs Controller. Its primary function is to lay down and enforce standards and control the manufacture and distribution of drugs through both Central and State Government offices. The Drugs Act (1940) vests the central Government with the powers to test quality of imported drugs.
- c. **Medical store depots:** The Union Government runs medical store depots at Mumbai, Chennai, Kolkata, Karnal, Gouhati and Hyderabad. These depots supply the civil medical requirements of the Central Government and of the various state governments. These depots also handle supplies from foreign agencies. The medical stores organisation endeavours to ensure the highest quality, cheaper bargain and prompt supplies.
- d. **Postgraduate training:** The DGHS is responsible for the administration of national institutions, which also provide postgraduate training to different categories of health personnel.
 - All India Institute of Hygiene and Public Health, Kolkata.
 - All India Institute of Mental Health, Bangalore.
 - National Institute of Communicable Diseases, Delhi, etc.

- e. **Medical education:** The DGHS is directly in charge of the following medical colleges in India:
 - Lady Hardinge
 - Maulana Azad
 - Medical colleges at Pondicherry and Goa.

Besides these, there are many medical colleges in the country which are guided and supported by the Centre.

f. **Medical research:** Medical research in the country is organised largely through the ICMR, founded in 1911 in New Delhi. The council plays a significant role in aiding, promoting and coordinating scientific research on human diseases, their causation, prevention and cure. The research work is done through the councils, and several permanent research institutes, e.g., Cancer Research Centre, TB Chemotherapy Centre at Chennai. The funds of the council are wholly derived from the budget of the Union Ministry of Health.

g. Central Government Health Scheme.

It started in Delhi in 1954 to provide comprehensive care to the central government employees stationed at delhi. The scope of the scheme has been gradually extended over the years to cover cities outside Delhi,Bombay,Allahabad, Meerut, Kanpur, Patna,Calcutta, Nagpur, Msdras,Hyderabad, Bangalore,Jabalpur, Jaipur, Pune, Lucknow ahmedabad, as well as other sectors of population, such as the employees of the autonomous organisations, retired Central Government pensioners, existing and ex- MPs,ex-Governors, and retired judges of supreme court and high courts.the services provided are comprehensive and include:

Laboratory investigations

Outdoor treatment

In-patient treatment

Specialist care

Emergency services

Domicilary services

Supply of medicines

Ambulance services

Ante-natal confinement and post natal care

Optical and dental care

Family welfare services

h. **National Health Programmes:** The various national health programmes for the eradication of malaria and for the control of tuberculosis, filarial, leprosy, AIDS and other communicable diseases involve expenditure of crores of rupees. The central directorate plays a very important part in planning, guiding and coordinating all the national health programmes in the country.

- i. **Central Health Education Bureau:** An outstanding activity of this Bureau is the preparation of education material for creating health awareness among the people. The bureau offers training courses in health education in different categories of health workers.
- j. **Health intelligence:** The Central Bureau of Health Intelligence was established in 1961 to centralise collection, compilation, analysis, evaluation, and dissemination of all information on health statistics for the nation as a whole. It disseminates epidemic intelligence to states and international bodies.
- k. **National Medical Library:** The Central Medical Library of DGHS was declared the National Medical Library in 1966. The aim is to help in the advancement of medical, health and related sciences by collection, dissemination and exchange of information.

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III. Central Council of Health

The Central Council of Health was set up by a Presidential Order on August 9, 1952, under Article 263 of the Constitution of India for promoting coordinated and concerted action between the centre and the states in the implementation of all the programmes and measures pertaining to the health of the nation. The Union Health Minister is the chairman and the state health ministers are the members.

Functions

- 1. To consider and recommend broad outlines of policy in regard to matters concerning health in all its aspects such as the provision of remedial and preventive care, environmental hygiene, nutrition, health education and the promotion of facilities for training and research.
- 2. To make proposals for legislation in fields of activity related to medical and public health matters and to lay down the pattern of development for the country as a whole.
- 3. To make recommendations to the Central Government regarding distribution of available grants-in-aid for health purposes to the states and to review periodically the work accomplished in different areas through the utilisation of these grants-in-aid.
- 4. To establish any organisation or organisations invested with appropriate functions for promoting and maintaining cooperation between the Central and State Health administrations.

AT THE STATE LEVEL

Historically, the first milestone in the state health administration was the year 1919, when the states (provinces) obtained autonomy, under the Montague-Chelmsford reforms, from the central Government in matters of public health. By 1921-22, all the states had created some form of public health organisation. The Government of India Act, 1935 gave further autonomy to the states. The state is the ultimate authority responsible for health services operating within its jurisdiction.

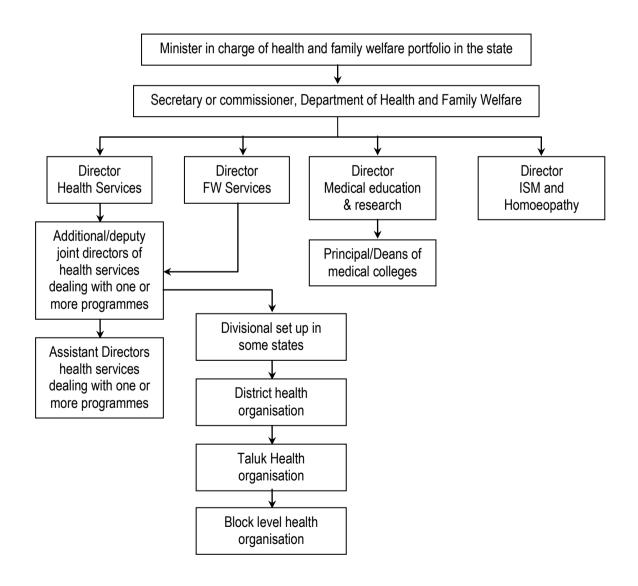
State health administration

At present there are 31 states in India, with each state having its own health administration. In all the states, the management sector comprises the state ministry of Health and a Directorate of Health.

1. State Ministry of Health

The State Ministry of Health is headed by a Minister of Health and FW and a Deputy Minister of Health and FW. In some states, the Health Minister is also in charge of other portfolios. The Health secretariat is the official organ of the State Ministry of Health and is headed by a Secretary who is assisted by Deputy Secretaries, and a large administrative staff.

Organisational structure of the health and family welfare services at state level



Functions: health services provided at the state level

Rural health services through minimum needs programme

Medical development programme

M.C.H., family welfare & immunization programme

NMIP(malaria) & NFCP(filaria)

NLEP, NTCP, NPCB, prevention and control of communicable diseases like diarrhoeal disease, KFD, JE,

School health programme, nutrition programme, national goitre control programme

Laboratory services and vaccine production units

Health education and training programme, curative services, national Aids control programme

2. State Health Directorate

The Director of Health Services is the chief technical adviser to the state Government on all matters relating to medicine and public health. He is also responsible for the organization and direction of all health activities. With the advent of family planning as an important programme, the designation of DHS has been changed in some states and is now known as Director of Health and Family Welfare. The Director of Health and Family Welfare is assisted by a suitable number of deputies and assistants. The Deputy and Assistant Directors of Health may be of two types –

Regional

Functional.

The **regional directors** inspect all the branches of public health within their jurisdiction, irrespective of their speciality. The **functional directors** are usually specialists in a particular branch of public health such as mother and child health, family planning, nutrition, tuberculosis, leprosy, health education, etc.

AT THE DISTRICT LEVEL

The district is the most crucial level in the administration and implementation of medical /health services. At the district level there is a district medical and health officer or CMO who is overall responsible for the administration of medical /health services in the entire district.

Bhore Committee (1946) recommended integrated services at all levels and the setting up of a unified health authority in each district. The principal unit of administration in India is the district under a collector. There area 619 districts in India. Each district has 6 types of administration areas.

- i. Subdivisions
- ii. Tehsils (talukas)
- iii. Community development blocks
- iv. Municipalities and corporations
- v. Villages

vi. Panchayats

Most of the districts in India are divided into two or more **subdivisions**, each in charge of an **assistant collector or sub-collector**. Each division is again divided into **tehsils** in charge of a **Tehsildar**. A tehsil usually comprises between 200 and 600 villages.

Since the launching of the community development programme in India in 1952, the rural areas of the district have been organised into blocks known as **community development blocks**. The block is a unit of rural planning and development and comprises approximately 100 villages and about 80,000 to 1,20,000 population in charge of **a block development officer**.

Finally, there are the village panchayaths, which are institutions of rural local self-government.

The urban areas of the district are organised into the following local self-government:

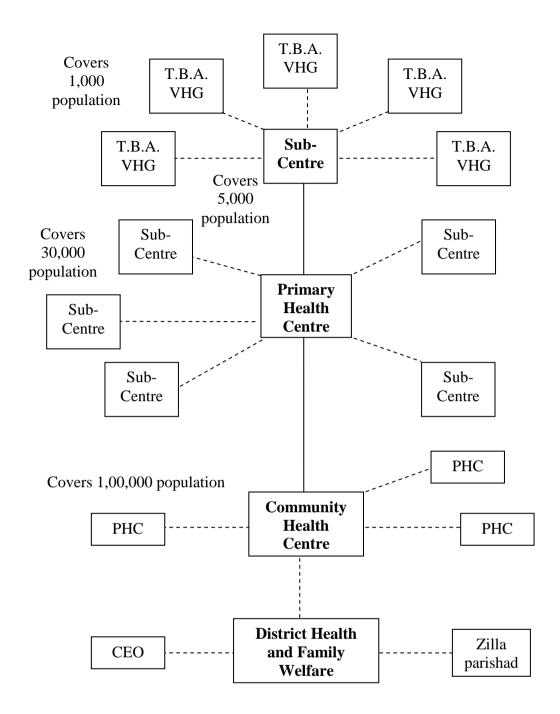
- Town area committee -5,000 10,000
- Municipal boards 10,000 2,00,000
- Corporations population above 2,00,000.

The **towns area committees** are like panchayaths. They provide sanitary services.

The **municipal boards** are headed by a **chairman/president**, elected usually by the members. The term of a municipal board ranges between 3 and 5 years. The functions of a municipal board are construction and maintenance of roads, sanitation, and drainage, street lighting, water supply, maintenance of hospitals and dispensaries, education, registration of births and deaths, etc.

Corporations are headed by **mayors**. The councillors are elected from different wards of the city. The executive agency includes the commissioner, the secretary, the engineer, and the health officer. The activities are similar to those of the municipalities but on a much wider scale.

Primary Healthcare Infrastructure of District Level



PANCHAYATHI RAJ

The panchayath Raj is a 3-tier structure of rural local self-government in India linking the villages to the district. The three institutions are:

- a. Panchayath at the village level.
- b. Panchayath samithi at the block level.

c. Zilla parishad – at the district level.

The panchayathi Raj institutions are accepted as agencies of public welfare. All development programmes are channelled through these bodies. The panchayathi Raj institutions strengthen democracy at its root and ensure more effective and better participation of the people in the government.

At the village level

The panchayathi Raj at the village level consists of:

- 1. The gram sabha
- 2. The gram panchayath
- 3. The nyaya panchayath

At the block level

The panchayathi raj agency at the block level is the panchayath samithi. The panchayathi samithi consists of all sarpanchs of the village panchayaths in the block. The block development officer is the exofficio secretary of the panchayath samithi.

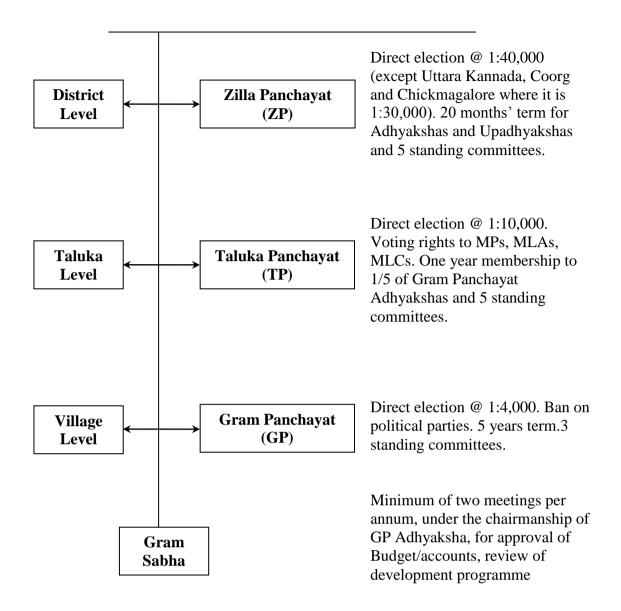
The prime function of the panchayat samiti is the execution of the community development programme in the block.

The block development officer and his staff give technical assistance and guidance to the village panchayaths engaged in the development work.

At the district level

The zilla parishad is the agency of rural local self-government at the district level. The members of the zilla parishad include all leaders of the panchayath samithis in the district, MPs, MLAs of the district, representatives of SC, SD and women, and 2 persons of experience in administration. The collector of the district is a non-voting member. Thus, the membership of the zilla parishad is fairly large varying from 40 to 70.

The zilla parishad is primarily supervisory and coordinating body. Its functions and powers vary from state to state. In some states, the zilla parishads are vested with the administrative functions.



Healthcare systems

The healthcare system is intended to deliver the healthcare services. It constitutes the management sector and involves the organisational matters. It operates in the context of the socioeconomic and political framework of the country. In India, it is represented by five major sectors and agencies which differ from each other by the health technology applied and by the source of funds for the operation.

- i. Public health sector
- ii. Private sectors
- iii. Indigenous system of medicine
- iv. Voluntary health agencies
- v. National health programmes

Primary healthcare in India

It is a three-tier system of healthcare delivery in rural areas based on the recommendations of the Shrivastav Committee in 1975.

- 1. **Village level:** The following schemes are operational at the village level:
 - a. Village health guides scheme
 - b. Training of local dais
 - c. ICDS scheme
- 2. **Sub-centre level:** This is the peripheral outpost of the existing health delivery system in rural areas. They are being established on the basis of one sub-centre for every 5000 population in general and one for every 3000 population in hilly tribal and backward areas. Each sub-centre is manned by one male and one female multipurpose health worker.

Functions

- a. Mother and child healthcare
- b. Family planning
- c. Immunisation
- d. IUD insertion
- e. Simple laboratory investigations
- 3. **Primary health centre level:** The Bhore committee in 1946 gave the concept of a primary health centre as a basic health unit to provide as close to the people as possible. The Bhore committee aimed at having a health centre to serve a population of 10,000 to 20,000. The national health plan, 1983 proposed reorganisation of primary health centres on the basis of one PHC for every 30,000 rural population in the plains, and one PHC for every 20,000 population in hilly, tribal and backward areas for more effective coverage.

Functions of the PHC

- a. Medical care.
- b. MCH including family planning.
- c. Safe water supply and basic sanitation.
- d. Prevention and control of locally endemic diseases.
- e. Collection and reporting of vital statistics.
- f. Education about health.
- g. National health programmes as relevant.
- h. Referral services.
- i. Training of health guides, health workers, local dais, and health assistants.

j. Basic laboratory services.

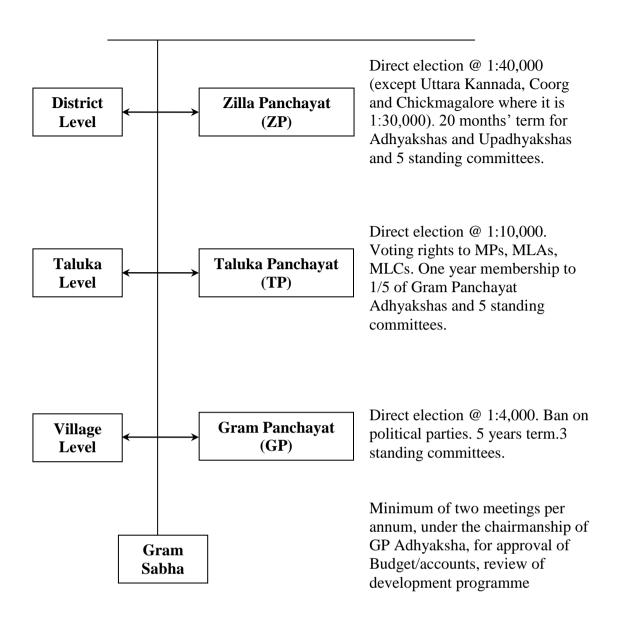
Community health centres

As on 31st March 2003, 3076 community health centres were established by upgrading the primary health centres, each CHC covering a population of 80,000 to 1.20 lakh with 30 beds and specialist in surgery, medicine, obstetrics and gynaecology, and paediatrics with x-ray and laboratory facilities.

Functions

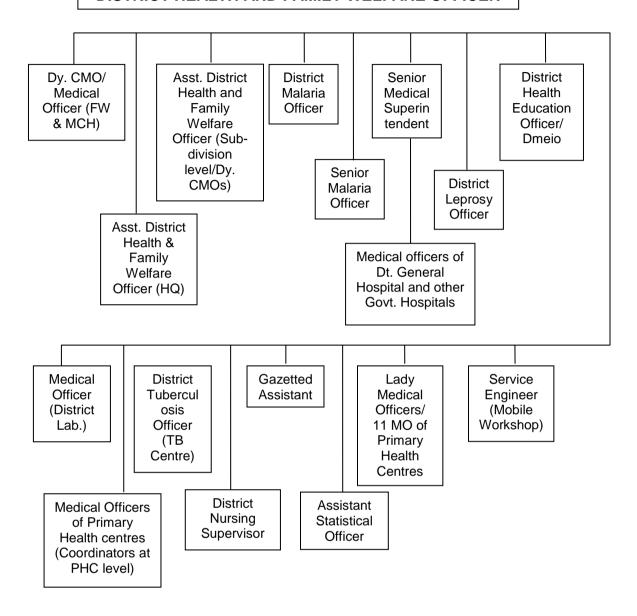
- 1. Care of routine and emergency cases in surgery.
- 2. Care of routine and emergency cases in medicine.
- 3. 24-hour delivery services including normal and assisted deliveries.
- 4. Essential and emergency obstetric cases including surgical interventions.
- 5. Full range of family planning services including laparoscopic services.
- 6. Safe abortion services.
- 7. Newborn care.
- 8. Routine and emergency care of sick children.
- 9. Other management including nasal packing____, tracheostomy, foreign body removal, etc.
- 10. All national health programmes should be delivered.
- 11. Blood shortage facility.
- 12. Essential laboratory services.
- 13. Referral services.

Organisational Structure of Panchayat Raj Institutions



Organisational structure of health department at district level

DISTRICT HEALTH AND FAMILY WELFARE OFFICER



Planning and organising nursing service at various levels – local, regional, national, and international

Placement of nurses in the healthcare organisation

A high power committee on nursing and nursing profession was set up by the Government of India in July 1987 under the chairmanship of Smt. Sarojini Vasadapan, an eminent social worker and former chairperson of Central Social Welfare Board with Smt. Rajkumari Sood, Nursing Advisor to Government of India, as the member secretary. The terms of reference of the committee were as follows:

- a. Looking into the existing working conditions of nurses with particular reference to the status of the nursing care services both in rural and urban areas.
- b. To study and recommend the staffing norms necessary for providing adequate nursing personnel to give the best possible care, both in the hospitals and community.
- c. To look into the training of all categories and levels of nursing, midwifery personnel to meet the nursing manpower needs at all levels of health service and education.
- d. To study and clarify the role of nursing personnel in the healthcare delivery system including their interaction with other members of the health team at every level of health services management.
- e. To examine the need for organisation of the nursing services at the national, state, district, and lower levels with particular reference to the need for planning and implementing the comprehensive nursing care services with the overall healthcare system of the country at their respective levels.
- f. To look into all other aspects which the committee may consider relevant with reference to their terms of reference.
- g. While considering the various issues under the above norms of reference, the committee will hold consultations with the state governments.

The findings of this committee give a grim picture of the existing working condition of nurses, staffing norms for providing adequate nursing personnel, education of nursing personnel to meet the nursing manpower needs at all levels and the role of nursing personnel in the healthcare delivery system.

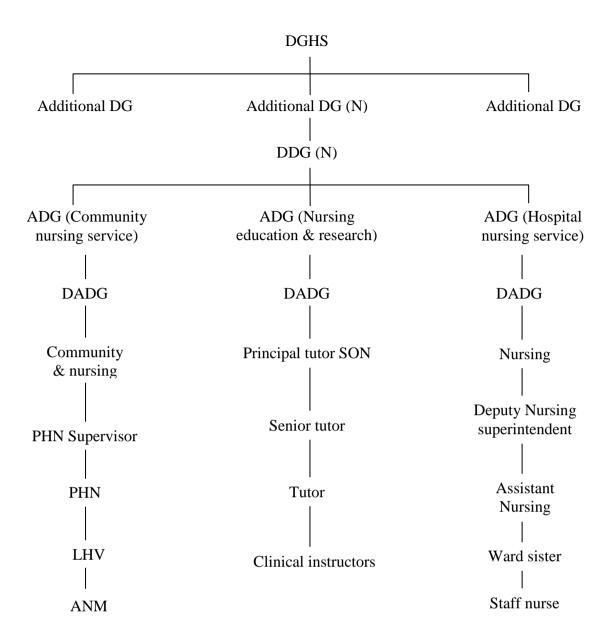
Their recommendations on the organisation of nursing services at central, state and district levels, and the norms of nursing service and education are given below.

Placement of nurses at the central level

At the central level there is a post of nursing advisor in the medical division of Directorate General of Health Services. The nursing advisor is directly responsible to the Deputy Director General (Medical). The nursing advisor is assisted by nursing officer and support staff for all his/her work. She/he advises the DGHS, Ministry of Health and Family Welfare as well as other ministries and departments, for example, railways, labour, Delhi Administration, etc. on all matters of nursing services, nursing education, and research. The nursing advisor also takes care of administration aspects of Raj Kumari Amrit Kaur College of Nursing and Lady Hardinge Health School, Delhi.

There is a post of deputy nursing advisor at the rank of Assistant Director General (ADG-Nsg) in the training division of Department of F. W. Presently the deputy nursing advisor deals with training of ANMs, dais, health supervisor, etc. There is no direct linkage between the nursing advisor and deputy nursing advisor as there are independent posts.

Nursing organisational set up at the central level



Note

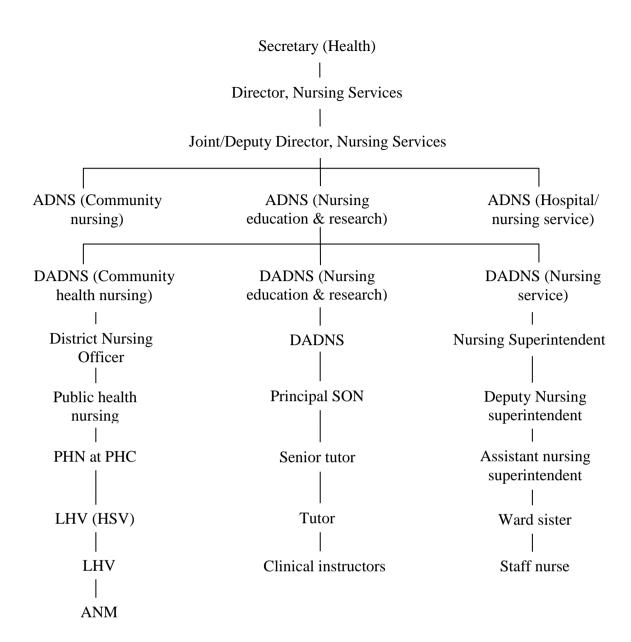
- a. The positions up to the DADG level are proposed to be at the office of the directorate general of health services. Positions below the level of DADG are to exist at the institutions governed by the central government.
- b. The principal of the College of Nursing will be equal to the rank of ADAG (N) and will be eligible for promotion to the post of DDG (N) addl DG (N).

Placement of nurses at state level

There is no proper and definite pattern of nursing structure in the state directorates except the state of West Bengal. Usually one or two nurses are posted with varying designations, e.g., in Tamilnadu there is one assistant director nursing who is responsible to Director, Medical Services, and Director, Medical Education.

In Maharashtra, two nurses work, one each in the office of the Director, Medical Education, and Director, Health Services.

Recommended organization at state level (union territory level)



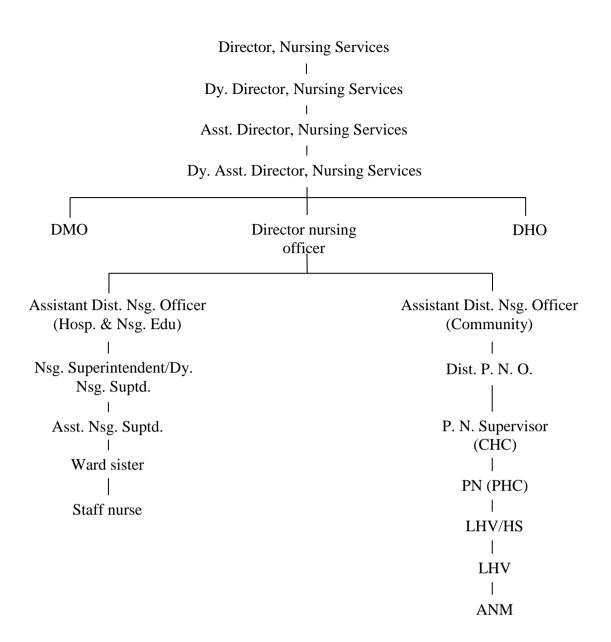
Note

The Principal, College of Nursing will be equal to the rank of ADNS and will be eligible for promotion to the post of DDNS/DNS. The salary scales and structure of the staff of colleges of nursing will be as per norms of the Indian Nursing Council and the UGC.

Placement of nurses at district level

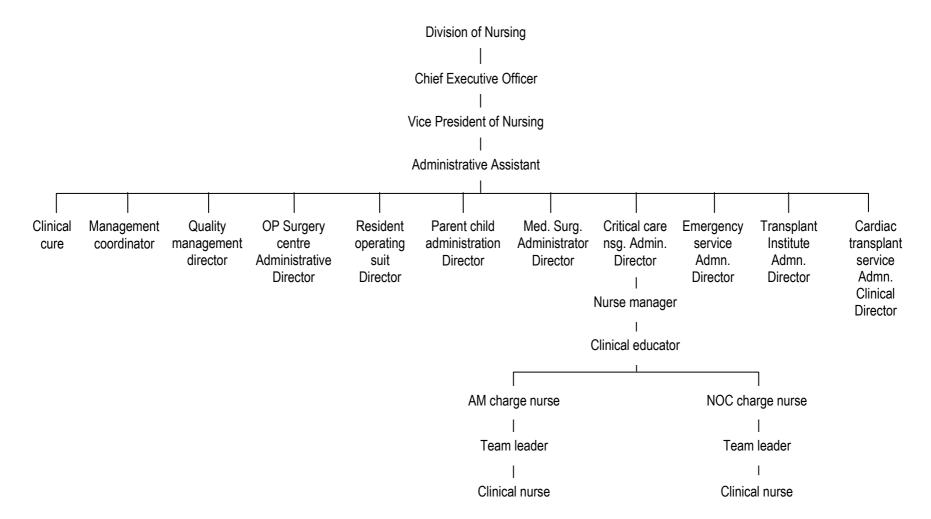
Nurses, public health nurses, lady health visitors, auxiliary nurse midwives, etc. have played vital role in providing healthcare services at various levels in both urban and rural areas of the district. They have been the mainstream in providing primary healthcare services in the rural and urban areas from the very beginning.

Today, the ANM designated as multipurpose health worker is the key health worker rendering multipurpose healthcare services in the rural area. In this context, the professional nurses have a major role to play in providing support, guidance, supervision to ANMs (MAPHW-F) and also in rendering direct comprehensive healthcare services which is beyond the competency of the ANMs.



The above recommended organisational set up will need full administrative and financial support of the government. It will look after the overall nursing components, development of nursing standards, norms, policies, ethics, recruitment, selection and placement roles__ for both hospitals and community health nursing, development in speciality nursing, higher education in nursing, and research. These will promote professional autonomy and accountability.

Loma Linda University Medical Centre, USA



Conclusion

The purpose of health administration at the centre and local level is to improve the health status of the population. The scope of health services varies widely from country to country and is influenced by general and ever-changing national, state, and local health problems.

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