

## A study on planning process in primary health centres

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### Abstract

Planning is an activity. Planning as a process involves the determination of future course of action, that is why an action, what action, how to take action and when to take action. 1) To study the planning procedures in the PHCs 2) Plan should be well coordinated 3) To know the changes in policies & procedures are circulated and made available in the PHCs. planning is an enterprise in an on-going process and planning is a predetermined course of action to achieve specified aim or goal. It is a blue print of action. The modern health service organizations are facing the feature of uncertainty. Observations with respect to planning in sample PHC reveals that healthcare organisation operate in an environment of change where it is an inevitable concept. Innovation is becoming a regular feature of the PHC's the sizable increase in the volume of work in PHC's created pressure on administration staff.

**Keywords:** PHC (primary health centres, duncun post hoc test)

### Introduction

Planning is an activity. Planning as a process involves the determination of future course of action, that is why an action, what action, how to take action and when to take action. Planning is the process of setting goals and choosing the means to achieve those goals. Terry has defined planning in terms of future course of action. "Planning is the selection and relating of facts and making and using of assumptions regarding the future in the visualization and formalization of proposed activities believed necessary to achieve desired result".

### Nature of Planning

The basic nature of planning may be understood in terms of it being a rational approach, open system approach and its pervasiveness.

### Planning: A Rational Approach

Planning is a rational approach for defining where one stands, where one wants to go in future and how to reach there. The concept of rationality denotes the choice of appropriate means for achieving stated objectives. In organizational context, planning as a rational approach tries to fill the gap between actual status and desired status as shown in Figure No.1

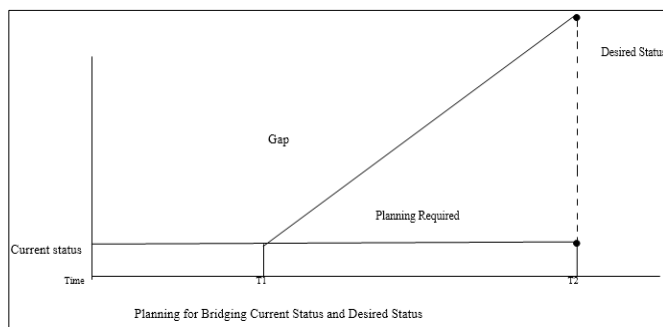


Fig 1

### Planning: An Open System Approach

Planning adopts an open system approach. The open system approach of planning indicates that the identification of gap between current status and desired status in the future and the action required to bridge this gap is influenced by a variety of environmental factors – economic, political, legal, technological, socio-cultural and competitive.

### Pervasiveness

Planning is pervasive and extends throughout the organization. The pervasiveness of planning is commonly overlooked and planning is frequently considered as being the function of top level managers. It is true that managers devote more of their time in planning and work more vital issues than the managers of the middle and the lower levels do.

### Steps in planning

The work of planning should have the knowledge of possible future opportunities, where it stands, its strengths and weaknesses and what it expects to gain. The actual task of planning which follows such information comprises of the following steps.

### Establishing Goals

The first step in planning is to establish goals for the organization and then for each subordinate unit. Goals indicate the end point of what is done, where the primary emphasis is to be placed, and what is to be accomplished by the network policies, strategies, procedures, rules, budgets and programmes. Drucker proposed eight key areas in which objectives or goals performance and results have to be set: (i) market standing (ii) innovation (iii) productivity (iv) physical and financial resources (v) profitability (vi) workers performance and development (vii) work performance attitude (viii) public responsibility.

**Identify Premises**

Premises are simply assumptions on which plans are based. It involves gathering of all data about trends and rates for the purpose of isolating potential problems. Premising enables the planner to analyse his assumptions and eliminate, as much as possible, the elements of chance. Premising is the assessment of future, planner should give due consideration to factors which are controllable and uncontrollable.

**Identify Alternatives**

A planning problem arises when an alternative course of action discovered and hence planning is not necessary unless there are alternatives. The number of alternatives should be reduced so that the most prominent may be analysed or it may be too difficult and costly.

**Evaluating Alternatives**

For identifying and choosing between the available alternatives, the technique known as decision tree has come to occupy a place of great prominence. The decision tree begins with a single root question and adds alternatives of alternatives until a sizeable chart exists to show that all alternatives have been explored and compared. The simple mathematical tool enables the planer to consider various courses of action, assign financial results to them, modify these results by their

probability and then make comparisons <sup>[3]</sup>.

**Selecting the Best Alternative**

After a careful comparison of several alternatives, the best alternative possible under the circumstances is selected. The point at which the plan is adopted- the real point of decision making.

**Working out Details**

The best alternative is decided, detailed programming is done and calls for working out its details, formulate the steps in full sequence, to break it down for each department or branch, for each product and component of a product, for each month or quarter, etc.

**Objectives**

1) To study the planning procedures in the PHCs. 2) Plan should be well coordinated. 3) To know the changes in policies & procedures are circulated and made available in the PHCs. The PHCs in Guntur district were categorized into A, B & C, researcher took five PHCs in each category which were categorised into a cluster in each division i.e. 15 PHCs were taken as sample in each division. In total, 45 PHCs were taken as sample in Guntur district. The basis for selecting the sample is random sampling method.

**Duncan’s test for the difference of the means of the perceptions towards the Planning function in Guntur division.**

**Table 1**

Management Function	PHC	Means	Between	Duncan’s test for difference
Planning	A	47.63	A-B	NS
	B	47.36	B-C	S
	C	48.77	C-A	NS

From the ANOVA of management function ‘Planning’ it may be concluded that there is significant difference between the average overall perception scores of administration staff and doctors of A, B and C PHC categories on ‘Planning’. However, by applying Duncan post hoc test we may notice that there is no significant difference in the overall perception scores of

administration staff and doctors of category A and B PHCs on planning. In other words, between A and B PHCs categories the average overall perception scores of administration staff and doctors on planning is same and in C PHCs category the same is higher than that of A and B PHC categories.

**Duncan’s test for the difference of the means of the perceptions towards the Planning function in Narasaraopet division.**

**Table 2**

Management Function	PHC	Means	Between	Duncan’s test for difference
Planning	A	41.28	A-B	NS
	B	40.39	B-C	NS
	C	39.53	C-A	S

From the ANOVA of management function ‘Planning’ it may be concluded that there is a significant difference in the perception of the administration staff and doctors on planning between A, B and C PHCs category in Narasaraopet division. However by applying Duncan post hoc test we conclude that

there is no significant difference between A and B PHC categories in the perception of administration staff and doctors on planning are same in A PHCs category is higher than that of B and C PHC categories.

**Duncan’s test for the difference of the means of the perceptions towards the Planning function in Tenali division.**

**Table 3**

Management Function	PHC	Means	Between	Duncan’s test for difference
Planning	A	42.21	A-B	NS
	B	42.95	B-C	NS
	C	41.61	C-A	NS

From the ANOVA on 'Planning' it may be concluded that there is no significant difference in the perception of administration staff and doctors on planning between PHC categories of Tenali division. In other word the average overall perception of administration staff and doctors on planning is almost same in all three PHC categories.

From the discussion, it can be concluded that planning is a process which begins with setting up of objectives, defining strategies, policies and detailed plans to achieve them, which establishes an organization to implement decisions and includes a review of performance and feedback to introduce a new planning-action-control cycle. Thus planning is an enterprise in an on-going process and planning is a predetermined course of action to achieve specified aim or goal. It is a blue print of action. The modern health service organizations are facing the feature of uncertainty. Observations with respect to planning in sample PHC reveals that healthcare organisation operate in an environment of change where it is an inevitable concept. Innovation is becoming a regular feature of the PHC's the sizable increase in the volume of work in PHC's created pressure on administration staff. It necessitates systematic planning. In category B PHCs it is observed that objectives are not known to the PHC members. As a result interim arrangements becoming necessary and the activity of planning in category B PHCs is at lowest ebb, where as in category C PHCs it is observed that because of varied reasons it is becoming difficult to formalize planning on long term basis. There are no priorities or procedures. There exists excessive emphasis on uniformity and rigidity in both the PHCs are not using scientific methods in preparation of budgets. In category A PHCs it is observed that there exists a separate planning which works on a continuous basis with perfect vision and mission.

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