

Building an Organisation Efficiency Framework for the Workforce in Bankstown Hospital (Experimental Six Sigma)

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Abstract: This research paper discusses Bankstown Hospital's Human Resource Management (HRM) in relation to its organizational objectives and performance, and provides sustainable solutions for improvement. It has been identified that there is underperformance in the Bankstown Hospital system, and critical analysis of its organisational systems and processes have revealed several key issues affecting workplace performance and efficiency. The paper proposes several recommendations for improvement using the Six Sigma Quality Control Framework and World Health Organisation (WHO) standards. The paper underlines the implementation of solutions in the areas of strategic goals and objectives, as well as analyses the strengths and weaknesses of specific HRM strategies. In conclusion, improved HRM strategies in Bankstown Hospital are needed to survive in an increasingly changing environment and to improve workplace performance, and hence can result in the best health care outcomes.

Keywords: Human Resource Management (HRM), World Health Organisation (WHO), Risk of Investment (ROI), Key Performance Indicator (KPI).

1. INTRODUCTION

The purpose of this essay will be to discuss Bankstown hospital's HRM system, in regards to its organisational strategic goals and objectives, steps required to implement a process improvement for organisational performance, most suitable approach to improve performance, performance indicators or measures used, and the strategies to successfully motivate and engage stakeholders in ongoing performance improvement. The reason why the HRM department of the organisation was selected is because it is an integral and vital department of the functioning of any organisation and its staff. Due to underperformance in the hospital system, the target has been on improving this performance. Also, the equipment and tools will not work without effective employees who are competent with their job roles and capable of using them.

The medical errors and medication are the responsibility of the employee; there no medical errors in the hospital, without staff errors, which means that it is solely a human caused problem.

Through the critical analysis and evaluation of internal systems and processes we were able to identify a number of issues as areas where improvement must be facilitated, each with varying degrees of seriousness. The key problem areas identified were : chronic under funding by the government, obsolete hospital facilities, excessive debt and weak budgeting controls, disproportionately higher costs than other hospitals, lack of certain key HR skills/competencies by staff, and various internal operating problems.

By applying the six sigma quality control framework, World Health Organisation standards, and the works of various other prominent health care authors and consultants, we have devised a comprehensive and long term solution for improvement within this organisation. The use of HRM controls and tools, such as employee motivational framework is also highly beneficial to improving staff morale and work performance.

Factors Causing HRM performance and efficiency problems:

- Insufficient knowledge about a health care organisation or its core services.
- Lack of information with regards to the practitioners own role and what they want to achieve .
- Poor leadership and guidance within the hospital.
- Employee disputes with management and working conditions
- Lack of appropriate and functional systems to support employees
- OH&S Issues
- Lack of commitment or motivation
- Limited opportunities for training and career development
- Lack of management support

Solutions/Remedies Available:

- Specialisation of the work force – all health care practitioners, including doctors, nurses, and scientists should have specialised work available for their areas of expertise, to allow for more focus and efficiency.
- Authority with corresponding responsibility – allow health care workers to work autonomously and with sufficient empowerment and responsibility.
- Discipline – discipline of health care workers is paramount to a smooth running hospital. All policies, protocols, and procedures must be strictly adhered to. The threat of disciplinary action and reprimands must be enforced.
- Unity of command – The concept of command and control within the hospital organisation should be focused on delegating instructions and tasks to a team from a single superior. Having multiple superiors may cause conflicting communication and problems.
- Unity of direction – strong direction coming from a command unit of the hospital with cohesive ideas, objectives and purposed and the distilling of activities is clear and transparent for health care workers.
- Subordination of individual interest to the greater interest – individual health care workers should operate in the best interests of the wider organisation and suppress personal feelings or sentiments if they are contrary to unified goals and objectives.
- Staff remuneration – staff salary and remuneration packages should be fair and reasonably compensated for their efforts to ensure good staff attitude and to maximise staff retention.
- Centralisation of the organisational structure – to flatten the structure and improve the elements of the whole, away from decentralisation.
- Scaleable chains/lines of authority – reporting and communicating from top management of the hospital to low level subordinates must be sensible, clear, basic, and understandable.
- Order – Every staff member should be individualised and have a clearly defined place in the organisation. This sense of order and harmony will contribute to clear standards and smooth operating procedures.
- Equity – This should be a central concept underpinning the organisation because of the need to treat all staff as equally and humanly possible.
- Stability of employment – Starting a new employment position may involve some minor issues that need to be fixed so that new employees can adapt to the dynamism of the organisation. Stability is good for long term prospects.
- Initiative - health care worker should display a positive mind, zeal, enthusiasm and high levels of energy in regards to their work.

- Unified Spirit – the organisation and its collective body of health care workers, managers, and other employees should work together harmoniously and in partnership to achieve shared goals, objectives and strategies.

2. STRATEGIC GOALS AND OBJECTIVES

The strategic goals and objectives of the hospital are multiple and complex. At a base level it wants to continue to expand the range of services it provides to its population and continue to deliver good health outcomes. There is also a responsibility to reduce the rates of medical errors and deliver high performance gains. There is also ongoing pressures to keep costs within a containable limit and practice good budgetary control. In HRM terms, it is also wise to be able to retain and manage staff by building and developing a diverse and highly skilled workforce of health care practitioners. Another objective of the hospital is a renewed commitment to public health and operating in the best possible interests of the community of the Bankstown area. This will allow us to measure performance levels, identify any possible problem areas within the organisation, identify areas for organisational learning and development opportunities, identify any inefficiencies within the system or its associated internal processes, highlight capital expenditure requirements, provision of essential operational and performance feedback to management, and improve the organisation's overall performance (Casey, 2006).

Implementation of a Process to Improve Organisational Performance:

The key to success in the field of performance management is the creation of an environment that fosters an employee's growth and nourishment, whilst simultaneously focusing on the achievement of organisational goals and objectives. This superb level of advanced performance is attainable through a combination of effective communication, strong leadership, and robust organisational planning, as well as a sophisticated performance management system. There are 9 key steps required to implementing a process improvement, as envisioned by (Casey, 2006).

The following steps are :

- Clarify basic employment conditions
- Provide a safe workplace that is free from discrimination and harassment
- Foster a sense of commitment and purpose
- Provide guidance and leadership
- Communicate with staff members
- Ensure staff members stay motivated
- Provide necessary tools and technologies
- Offer opportunities for training and development
- Develop and implement a performance management system

For the Bankstown hospital to be successful with the performance improvement initiative; will require more than merely staff commitment and competency, but also that managers invest considerable time and effort into the planning phase. This planning phase will occur at three different organisational levels :

- Strategic level
- Tactical level
- Operational level

Strategic planning involves the ability to develop and implement long term plans for achieving your organisation's key objectives, and planning for contingencies that may arise. The managers of the hospital should have a large-scale strategic plan that encompasses all parts of the whole hospital. This should be developed in consultation with key stakeholders of the hospital, such as governments, health care associations, and the wider local community. This strategic plan must clearly outline and define clear objectives to be met and a course of action to achieve them. The development of a mission

statement, can also be used to support this. The strategic plan can also be used as an overall framework of organisational goals and allow managers to refer back to them for clarification and reaffirmation.

Tactical planning involves further refinement of broader, strategic goals, distilled into a form that is appropriate and decisive for the hospital. This stage is usually carried out by middle or departmental managers of the hospital, depending on the relevant part of the organisation it refers to. The importance of mobilising human resources in this stage should not be underestimated or overlooked.

Operational planning refers to the day to day activities of the hospital and are therefore short term in nature. This will frequently contain deadline dates and budget controls which are authorised by middle managers of the hospital. These plans will provide vital micro information about certain departments of the hospital and will clearly define resource allocation. Both quantitative and qualitative methods of information presentation and acquisition are atypical, and should be devised to address all areas of the hospital system.

Approach Best Suited/Most Feasible :

The best approach for the Bankstown Hospital to adopt is a long term solution that is sustainable and realistic to achieve. It must be one that encompasses the entire organisation and should be closely compatible with its organisational structure and strategic goals and objectives. Through thorough and comprehensive preliminary assessment of requirements, feasibility studies, cost-benefits analysis and a range of other managerial controls and tools, the hospital should be able to devise a solution that is for their best interests and will provide genuine long term advantages. The degree of implementation and change will depend on the current magnitude of the problems the hospital faces and what needs to be done to rectify this. In light of considering all the current problems the hospital faces, in terms of its HRM department , both minor and major problems, we have concluded that they should assess each one on its merits and prioritise them based on the seriousness of the individual issue, extent of the problem, and its potential to inhibit performance and operations of the hospital.

Performance Indicators and Measures:

The Bankstown hospital must devise a set of key performance indicators and/or measures to regularly assess and evaluate the effectiveness of their HRM strategies. These will be in the form of performance standards and benchmarks, relevant frameworks utilised, and various other managerial metrics. It is essential that the Bankstown hospitals goals and objectives are being met and this is a good indication of such outcomes. Not only used as a performance evaluation tool, it also allows for a clear identification of problematic areas of the organisation and will provide direction in order to overcome these impediments. Another advantage, especially to the HRM department, is its usefulness in terms of assisting managers with the allocation of work. Furthermore, it will allow managers to narrow problems down to specific areas or causes e.g. structural/systematic problems which are long term, or operational/ performance which are short term. With this sophisticated information, managers can then plan and adapt for continuous improvement and growth, based on a proactive function of regular assessments and re-assessments of the organisation, based on the 3 core P's of ; performance, productivity, and problems.

Now that we have identified and provided reasons for the purpose and use of these tools we will explain performance indicator metrics.

These can either be financial or non-financial. Financial is concerned with quantitative data including revenue, profits, and ROI, etc. Non-financial includes such metrics which are qualitative in nature and more abstract to measure such as quality, service, communication, reputation, etc.

Some of the KPI's and measures that will be used in the Bankstown Hospital include :

- Employee retention levels
- % of medical error rates
- Staff productivity
- Hospital waiting times
- Patient satisfaction

- Patient throughput times
- Compliance standards

Once this is done the managers can integrate this into a performance management system which takes the same concepts but is higher level and more formalised in its approach.

The Strategies for Motivating and Engaging Stakeholders in an Ongoing

Performance Improvement:

There are a number of ways that we can improve staff motivation and allow all our stakeholders to benefit from performance improvement initiatives. The provision of strong staff incentives linked to performance and productivity is one such measure. This is a central concept of HRM and involves providing your staff members with incentives to do well and exceed requirements. Motivation explains why some people will work hard and excel whilst others will perform poorly. Motivation is multi-faceted and comes in many forms, and many theorists have attempted to theorise such a grey area with various theories in existence (See appendix 3). The basic theory theorized by Skinner is that external influences in the environment/organisation will trigger a response by employees, as either positive or negative influences on performance, which in turn, will lead to either positive or negative consequences and reinforcements (See appendix 2). The manifestation of needs theory, devised by Murray, asserts that all people have a set of basic needs which they need to have fulfilled to lead a happy and healthy life. Managers can exploit this human requirement to gain mastery over their employees, most notably, their need for power, achievement and affiliation.

3. CRITICAL ANALYSIS

Martha (2008) makes some sound judgements about what entails total performance management, throughout her theory which explains the following. The Bankstown hospital, should adopt many of the following measures to improve its HRM system. These include:

- A clear, compelling corporate mission
- Shared organisational values
- Shared accountability

These are built on the following processes that the hospital needs to seriously evaluate and undertake :

- Assess the organisation's starting point
- Communicate and translate key missions and values
- Modelling your values
- Inspire and align employees
- Align business practices
- Execution stage

The authors Kaplan and Norton(2001) make five underlying assertions regarding the essential principles of a strategy focused organisation. Whereby, strategic execution is part of every employee, requires constant finetuning, leadership driven, translates into operational objectives, aligned with organisational cultural practices and policies (Finney, 2008).

Structure:

The organisational structure of the hospital is characterised by being hierarchical, topdown traditional management style. There are multiple tiers in the hospital and these correspond with different departments and managers within the organisation (Fried, 2008). The lines of authority and power within the hospital are vested at the top tiers of the organisation. Generally, each preceding tier has authority over the ones below it, as subordinates.

Disagreements and conflict frequently arise in the hospital and are therefore an inevitability of this organisational structure in the hospital. This hospital is also known as having a unified system whereby semi-autonomous elements try to

maintain some degree of independence and work based sovereignty. The main sources of power within the hospital are structurally acquired, rather than personally. This power is derived through the divisions of labour and communication system of the organisation (Fried, 2008). Invariably, health care organisations require significant resources to operate daily and to achieve long term goals and objectives. There may exist a power complex, whereby different departments of the organisations are fighting over a finite and limited amount of funding and resources (Leiyu, 2006). Departmental managers of the hospital typically have the decision making propositions to allocate funds to where it is needed the most, which is authorised by top level management. This overbearing control and restraint on resource distribution and allocation may create a dependency relationship, whereby certain departments or individuals depend on extra-departmental resources to achieve their goals (Leiyu, 2006). Frequently, the acquisition of power is begotten through alliances and coalitions which are formed to achieve these goals and objectives.

Another factor is organisational decision making processes in the hospital. Strategic goals which impact upon the whole organisation are conceived by top management (Patriccias, 2007). The control of information can also be construed as a source of power. This is primarily derived from the hospital's medical staff. Patients are vital to the hospital's continued operations and this source of expertise gives them a strong power base within the organisation. Middle- and low level managers may also have some inference or manipulation with the integrity of information that they provide to top level managers, in order to influence decisions or distort facts to their advantage.

One important function of HRM is creating, revising and disseminating accurate job position descriptions for all employees. Employees should also be very familiar with all company policies and procedures, especially in regards of recruitment and training initiatives (BC Jobs Online, 2009). These HRM activities should be governed by an extensive set of guidelines and rules of procedure. Performance appraisals are an excellent way to evaluate employees annually and to merit good areas and focus on areas of improvement in the criteria (Armstrong, 2006). Procedures relating to disciplinary action and punishments must be stipulated for any times that they may arise within the work environment (Armstrong, 2006).

They hospital may also wish to utilise the services of arbitrators which provide an efficient and cost effective alternative for resolving disputes, which are often stipulated in a collective agreement or employment contract. Terminations are another HRM function which must be dealt with carefully and professionally, over due time, to consider any possible alternatives. Legal action should be proceeded with caution due to any potential implications and the general hostility of commencing (Armstrong, 2006). The HRM function of the hospital must also focus on any union matters and deal with various labour groups. Training of employees is multileveled and there is a wide span of training programmes in the hospital (BC Jobs Online, 2009).. Essential training can be provided in-house, with additional training coming from outside the organisation (Armstrong, 2006).

Strengths and Weaknesses of HRM Strategy:

The HRM strategy entails: clear job descriptions, recruitment and selection processes, performance requirements/ standards/measures, individual performance plans, performance monitoring, end of year performance reviews/appraisals, implementation new initiatives (Casey, 2006). A HRM system involves the use of certain documents and procedures which are designed to help guide and support managers and their employees through the performance management and review process, key outcomes, and important feedback to the organisation (Casey, 2006).

Bankstown hospital is facing certain key problems which must be addressed. These are attributed to the :

- Highly centralised, hierarchical structure of the organisation – This can be viewed in light of (Buchanan, 2000), who provides an excellent thesis on the British public health care system where this is clearly defined as a deficiency of their system. Buchanan asserts that the widespread problem with this issue is that it is not productive and assertive to have a system that involves multiple chains of command and lines of authority. The vital problem is involved with information dissemination and communication which may be hindered by having such a large autocratic organisational structure. The main solution to this problem and by applying WHO standards is to radically redesign the structure of the health care organisation that will feature flatter management and less tiers of hierarchical authority, based on key principles and best practices espoused by the WHO. By using and adopting different organisational structures within an organisation can greatly lead to an improvement in HRM and work performance. This will also have the added benefit of improving the quality of work. Structure should be dynamic and adaptable to changes in the hospital's internal and external environments, which is also endorsed by the WHO. It may also be necessary for the Bankstown hospital to change its

structure to be aligned or realigned with strategic goals and objectives of the organisation in question. The main proposition is to transform from a centralised-functional-hierarchical structure to one that is decentralised, organic and flatter in nature. Another possibility is to shift towards to a divisional structure, which will allow the hospital to be structuralised according to different professionalist areas. Although this option is more expensive, it is highly sophisticated and will lead to better health outcomes and management of skilled personnel. In Bankstown hospital there is poor staff retention because there aren't good motivational systems available. In the article of by AUTHOR we can see the challenge of trying to retain staff levels within the hospital. The main ways to achieve this is by having strong incentives and remuneration that is linked to performance, and long term career options and training/development programs available.

- High wages expenses and productive inefficiencies. This blowout in wages is possible to conclude that it has resulted as a failure to link wages with employee productivity and performance levels. The author

Buchanan(2000),has identified this as a persistent and fundamental problem in the British Health System in the 1990s, for very similar reasons which were quite large in magnitude. The main solution to this problem was by the highly concentrated composition of staffing arrangements and multiple levels of remuneration. Although he recognised the need for remuneration in line with skills and expertise of individual personnel, the importance of proven efficiencies and productivities was just as vital to ensuring dollar value of wages expenditure. When this was implemented a better situation occurred within the hospital system and there was a simultaneous decrease in wages expenditure, and increase in performance levels associated with most of the staff.

- Waiting/lead times of patient processing through the hospital – Heavy patient intakes and waiting times, specifically in the emergency departments of the hospital, has been exacerbated due to a lack of medical staff on hand, at any one time. Patient intake varies from day-to-day and on the certain times. We confer that waiting times must be reduced in the Bankstown hospital as the national average for emergency departments is 24 mins approximately, and for Bankstown hospital it is well over 30 minutes, at times. (Department of Health and Ageing, 2009). This has the negative effect of high patient dissatisfaction, poorer health outcomes and reduced chances of critical condition patient survival rates. By applying the various ISO standards we can significantly reduce lead/waiting times by using the concepts and philosophies of defective rate reductions and quality improvement initiatives.

The aboveforementioned three points of contention and remediation are directly impactful on the hospital's strategy and bottom line. This element does not affect staff performance solely, we must also apply the best possible frameworks in existence for the hospital. If the hospital wants to use or apply the international standards, for instance WHO or six sigma standards. This will directly affect the HRM department and will increase the achievement and performance and protect the hospital from any mismanagement or poor decision making. The best framework can be applied.

According to the World Health Organisation's(WHO) recommendations, there are 4 key factors which lead to improvements to a HRM system and processes in any hospital. These include :

- Development of highly sophisticated evidence-informed policy making – basing policy formulation on empirical evidence, historical data, and comparative analyses with other health systems worldwide .
- Establishment of a degree of staff autonomy within the workplace – which allows workers space and prerogative to flourish by working with degree of independence, whilst not giving them too many liberties and ensure adequate supervision and monitoring.
- A hospital-wide monitoring and evaluation plan – which will specify core indicators, data collection measures, data management, analyses, and communication and information usage.
- Arrangements to make information highly accessible to all stakeholders within and outside the organisation – including regulatory health care bodies, the general public, health professionals and politicians.

(WHO, 2010).

The WHO also provide a number of practical recommendations which are likely to lead to improved HRM within the hospital system. Such recommendations include :

- Arrangements for achieving optimum numbers for the right combination of personnel, in regards to the numbers, skills, and competencies
- Reward and monetary systems which provide positive incentives for enhanced productivity and performance by personnel, and does not simply differentiate pay limits on the basis of skills or qualifications.
- Regulatory mechanisms to ensure system wide deployment and distribution in accordance with hospital requirements.
- Establishment of job standards, development of support systems and dynamic work environments.
- Mechanism to ensure cohesiveness and cooperation of all stakeholders within the system to work together for unified goals and objectives which are believed and supported by everyone affiliated with the organisation, both internally and externally. (WHO, 2010).

The key benefits of applying the six sigma method, as advised by (Bertels, 2007) are the following :

- Since it measures and evaluates every process in a business, it provides senior management with an effective gauge to manage performance for such distinctly different processes.
- It may also reduce variability in the service delivery and service levels because of its effect to standardise and measure such performance indicators. Use of its advanced statistical techniques can also help to achieve best practices and gain substantial improvements.
- It provides a method of study one organisational unit or department, in isolation of all others, and then being able to replicate the most effective approach across the whole organisation. Its use of common language and processes makes it easier to make more informed and qualified decisions regarding strategy and long-term planning.

In relation to the bankstown hospitals key strategies, we can see that it will require a comprehensive set of measures that will be aligned and compatible with current organisational requirements and needs. The main components of their strategy is to encourage universal prevention measures, optimise patient experiences, forming strong primary care system, cultivating harmonious partnership, utilising smart costbenefit areas and budget control, development and retention of a strong health workforce, adaptability and dynamism to respond to emerging external environmental changes and influences which will impact upon the hospital. We can apply some of the recommendations offered by Mathauer with his key points of motivation and performance incentives. He also has a framework(see appendix 1) which shows the macro level interrelationships and interactions between HRM, motivational systems and the organisation. By modifying and deploying various HRM tools, management can effectively shift individual attitudes and encourage pro-active motivated employees to be more compliant and lead to a subsequent increase in job satisfaction and work performance. He also asserts the need for both financial and non-financial incentives to all hospital employees. Job descriptions in the Bankstown may need to be revised and remuneration levels should be closely tied to job performance and productivity, rather than merely on qualifications and/or experience. Training courses for medical and administrative staff should also be developed to ensure the highest standards of employee skills and qualifications (BC Jobs Online, 2009). (Bartram, T, 2005) completely endorses and supports these recommendations according to the Bankstown Hospital's Organisational strategy. This can only be achieved by a clear and well defined linkage between strategic direction and health care outcomes and objectives (Bartram, T., 2005). An additional set of solutions is also provided by another author, named Mathauer(2006) from the German Technical Magazine identifies a number of issues that must be overcome in a hospital HRM system. This author provides a range of complimentary solutions that go beyond the immediate and obvious scope of the problem ,but nevertheless remain completely important and relevant for analysis. A few key findings from Mathauer's critical analysis include the following ;

Mathauer's low motivation theory is one identified area which can have a crippling effect on the organisation's HRM system because morale is such a key indicator of performance and satisfaction of the staff. Mathauer(2006) also emphasises the need to have strong financial incentives to provide a motivational boost and encourages higher levels of productivity and performance by the staff. Using the framework in [appendix 1] combined with various HRM tools, it will allow managers to make effective strategic decisions that trickle down to the individual employees and their role in the organisation.

Recommendations to improve the hospital's HRM strategy and workforce plan. The first methodology we used is the 6 sigma approach. Six Sigma approach is a relatively new concept to the health care industry, despite being used in

manufacturing industries for years. Schmidt(2008) informs that there are three key stages in applying the methodology to a health care institution. These involve the deployment or strategic level where the initiative must be canvassed across the entire organisation and seriously contemplated how it is going to be compatible and fit. Second stage is the project or tactical level, where the selection, conduct, and projects will be used. The third stage, is the methods and tools, which occurs at an operational level and defines to how to properly apply the analytical techniques of six sigma and overcome various technical problems and data collection measures.

Recommendations for the hospital include:

- Pay attention to six sigma concepts and emphasize its usage in the hospital.
- Invest in training initiatives and provide the employees with some experience in the field of Six Sigma.
- Provision and allocation of financial resources to use and develop the Six Sigma in hospital. (Bertels, 2007)

Implement a Policy/Coordination:

It would be prudent to use the Six Sigma method for several reasons. It is a very good method and has useful applications in a health care setting because it will effectively reduce the rate of errors and enhance staff productivity and performance. It is clear that the Bankstown hospital is not currently using any sophisticated management tools or theories to improve performance. There is also a definite and congruent link between HRM and quality management/assurance theories, because the key outcomes and objectives of both fields are similar. As previously stated, six sigma has traditionally been used as a theory in manufacturing industries, but now health care and other fields have recognised its vast benefits and are starting to apply it as a viable alternative to more traditional HRM concepts, or in conjunction with them (Bertels, 2007) . The Bankstown hospital would benefit greatly from adopting such a system and would represent the beginning of a shift to modernise and transform the hospital for the 21st century, whereby advanced management techniques and theories adapted from the business world are becoming prerequisites for optimal performance and service delivery measurement (Belcher, 1987). On a more practical level, we can see how the high medical error rates by staff in the hospital could be measured and controlled using the six sigma approach, by setting a maximum tolerable threshold on mistakes and errors by hospital personnel, based on a number of different criteria and variables, such as per number of patients, per particular type of operation, per staff member, etc. These should not have the aim of varying and offending problem areas or individuals, but seek to address it in a manner which is harmonious and linked with positive outcomes for the whole hospital (Bertels, 2007). It should also be noted that implementing six sigma techniques carries considerable cost and therefore the decision to invest in or not should be thought out carefully by the organisation, weighing all the positive and negative factors (Schmidt, 2008). For the Bankstown Hospital, they would need to look at their financial budgets and cash flows, and possibly seek additional funding and support from the state or Commonwealth governments. All these costs will need to be justified and there should be a corresponding performance indicator to make the cost of investing in each function feasible and justifiable.

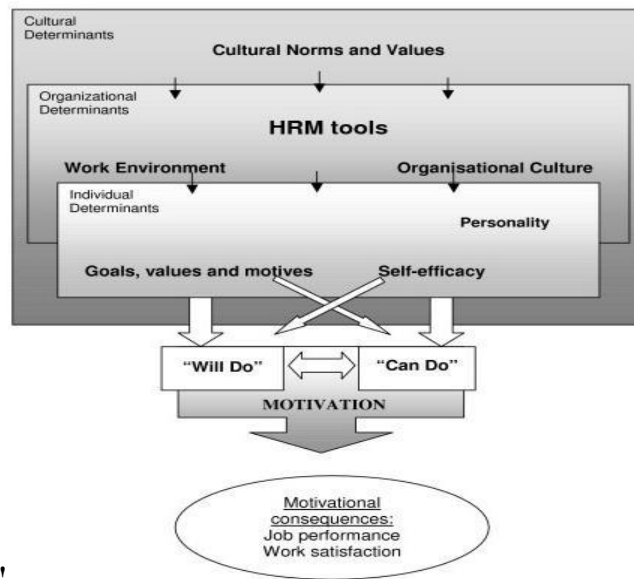
As a leading international body of health care, we believe the WHO offers some invaluable advice regarding HRM in a health care setting. Although the information is terribly broad and generalised for its sense of universal applicability, there are some key points and recommendations, and practical measures that are almost foolproof and have been used and applied extensively around the world in many leading hospitals. These recommendations will give the Bankstown Hospital a good starting point and base to further develop HRM reform in particular areas and provide best practices that can be adopted by the organisation for future growth and development.

These recommendations are both operational and strategic in nature.

4. CONCLUSION

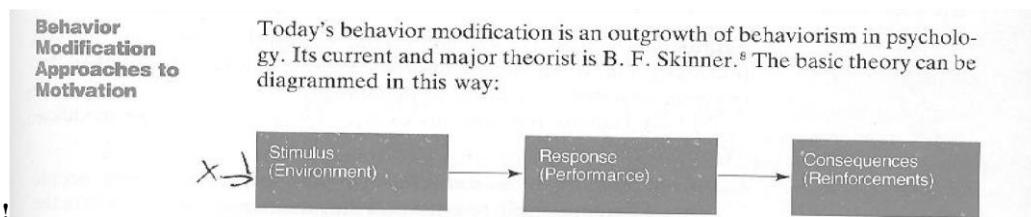
A health workforce is vital to achieving strong health outcomes. It is one which is highly responsive to the requirements and expectations of individuals and provides a level of fairness and efficiency to achieve the best possible health care outcomes using the allocated resources and funding available. There is an ongoing and perpetual requirement for improved training, recruitment, education, and personnel development initiatives, aswell as staff retention and productivity and performance measures to support and foster a highly skilled and modernised health care workforce.

APPENDICES

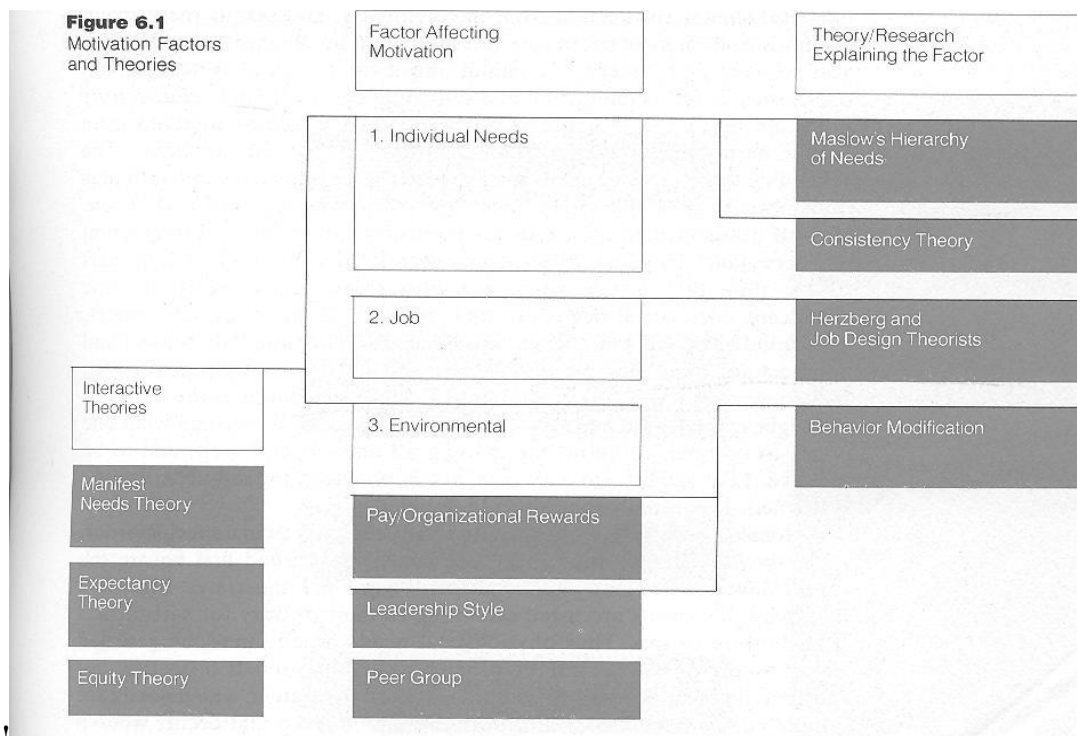


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Appendix 1 : Mathauer (2006), “Health Worker Motivation in Africa : the role of non financial incentives and human resource management tools”, German Technical Corporation, website accessed on 15/5/10, available from : <http://www.human-resources-health.com/content/4/1/24>



Appendix 2 : Glueck, W. (2002), “Management”, Drysdren Press, Library of Congress Catalog Card



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