Evolution and analysis of management theories

The evolution of management today is significantly different from what it was a century ago. A time ago healthcare was one dimensional. Minimal could be done to improve the health of patients. People who had enough money received care, those who had financial hardships and terminally ill had no one to care for them went to hospitals. During that time health care was based primarily on what the patient wanted. Both patients and providers were limited in their choices of care delivery. For instance, hospitals had little to no real patient support simply because these facilities funded by charitable donations or lack of knowledge of professional treatment. (McConnell, 2003, p. 27) The management of healthcare all changed with innovations in medicine, and the apparent need for training programs to prepare individuals on how to care, diagnose and manage responsibilities of the staff and facilities. The biggest example of this is one of our readings (Bellevue Hospital, 1915, p. 27) " Miss Louisa Lee Schyuler organized a committee to visit the public hospital in 1872 and report upon their conditions to the State Board of Charites. For many months sixty of the most intelligent women passed hours in the wards of Bellevue, carefully considering its conditions and consulting the highest hospital authorities. As a result of their report, it was decided that no permeant reform could be effected under the actual system of nursing that existed. The women employed and no prior experience in healthcare and many could neither read or write. Later in the year a sub- committee was organized to propose a plan for a training school for nurses". Bellevue Hospital was primarily developing a way for its organization to deal with the complex challenges that were confronting them. In today's increasingly growing population, healthcare organizations are " multi-dimensional" so that it can provide the

best possible healthcare, solve problems efficiently, achieve excellence, and foster innovation.

Renis Likert developed two theories of management in an organization; product-centered and people-centered He expressed much of his work in the form of a " scale of Organizations" running from one extreme type to another (McConnell, 2003, p. 26).

Each of these styles of management has their pros and cons, and either one can be ideal for any given situation. Product-centered managers have several characteristics that help make sure that things get done in a manner that is both proficient and on time. These managers usually create clear, easy-to-follow work schedules with specific requirements and deadlines. The pros of this leadership style are that it maintains high standards with optimal efficiency (Huddleston, 2014). Case in point, employees who need structure and who struggle with time management during work thrive under this kind of leadership because it's more organized and is deadline driven. The negatives of product-centered leadership that it can lead to a lack of employee " autonomy and creativity," that can result in low morale in the office. When an employee must work under very strict deadlines and excessive direction, it can bring the company development down. Self-motivated employees tend to rebel in this type of environment. The lack of creativity under excessively product-centered management can hurt a company's products as well since it tends to dampen innovation. The cons can sometimes outweigh the positives. An example of Product-Centered setting is a large hospital housekeeping departments. For instance in the reading HealthCare: How is it Different from Industry (McConnell, 2003, p.

27) " The housekeeping function of a hospital is highly procedural. There is a protocol prescribed for cleaning a room, and the same people repeat the same pattern room after room, day after day".

A people-oriented management gravitates to be considerably less refine per Likert's scale. One of the considerable benefits of people-centered management is that the focus on employee relationships, employees feel that they make a difference in the company. More effective efforts come from people who believe that they're a part of a company's success. People-oriented leadership comes with some challenges. Occasionally employees may feel that the responsibilities they're given can be overwhelming, and they may need more direction. Ineffective decisions may result if the focus is on the manager and employee relationships, rather than the critical business decisions that are to be made. An example of this is in the reading HealthCare: How is it Different from Industry (McConnell, 2003, p. 27) " the physician office or with patients of widely varying needs entering the system in a random order. Also, a Hospital setting, although we can make reasonable estimates based on experience it may be difficult to schedule outputs." (McConnell, 2003, p. 26)

Growing regulations, financial constraints, and mounting public attention to health care costs have combined to create a Healthcare managers' job more difficult and demanding, and it's only getting tougher. Per HealthCare: How is it different from Industry (McConnell, 2003, p. 32) certain forces have entered the healthcare system and are reshaping the way that supervisors do their jobs: Healthcare costs are " capped in several ways in a continuing effort to prevent them from growing unchecked." McConnell, C. R. (2003)

Competition, once a minimal factor in healthcare, has become a way of life and continued high-quality health care will demand despite constant pressure to contain or reduce costs. Healthcare is one of the countries most governed activities, and this puts increased pressure on the managers to continually strive to produce more with less. Since healthcare tends towards Likert's cooperative motivation system with its dependence on induvial employees to keep the work progressing, it means for the manager must continue to inspire the employees to work under rising pressure while conserving scarce resources willingly.

References

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