

## **Challenges of Human Resource Management in Hospitals and their probable solutions: A study based on review of literature**

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### **Abstract**

*Human resource management (HRM) is concerned with the development of both individuals and the organization in which they operate. HRM is engaged not only in securing and developing the talents of individual workers, but also in implementing programs that enhance communication and cooperation between those individual workers in order to nurture organizational development. In a sector like Healthcare, the human resource is relatively diverse and requires a high level of skill and competency. The quality of the human resource has a great impact on the efficiency and performance of the health care delivery system. Also with the diverse group of workforce, the individual goals and motivation level of the workforce also varies. Thus it becomes quite challenging for the human resource personnel to effectively handle this diverse workforce. This paper attempts to identify the challenges faced by the human resource units of the healthcare organisations and hospitals and puts an effort to suggest some probable solutions to address the challenges. The paper identifies 10 challenges faced by the human resource management of the healthcare organisations more specifically the hospitals in managing the workforce.*

**Keywords:** *Healthcare sector, Hospitals, Human Resource Challenges, Public Health Resource Network, Health workforce*

### **Introduction**

Human Resource Management (HRM) is described as the formal systems devised for the management of people within an organization. The responsibilities of a human resource manager include staffing, employee compensation and benefits, defining/designing work and overall development of the workforce. Essentially, the purpose of HRM is to maximize the productivity of an organization by optimizing the effectiveness of its employees.

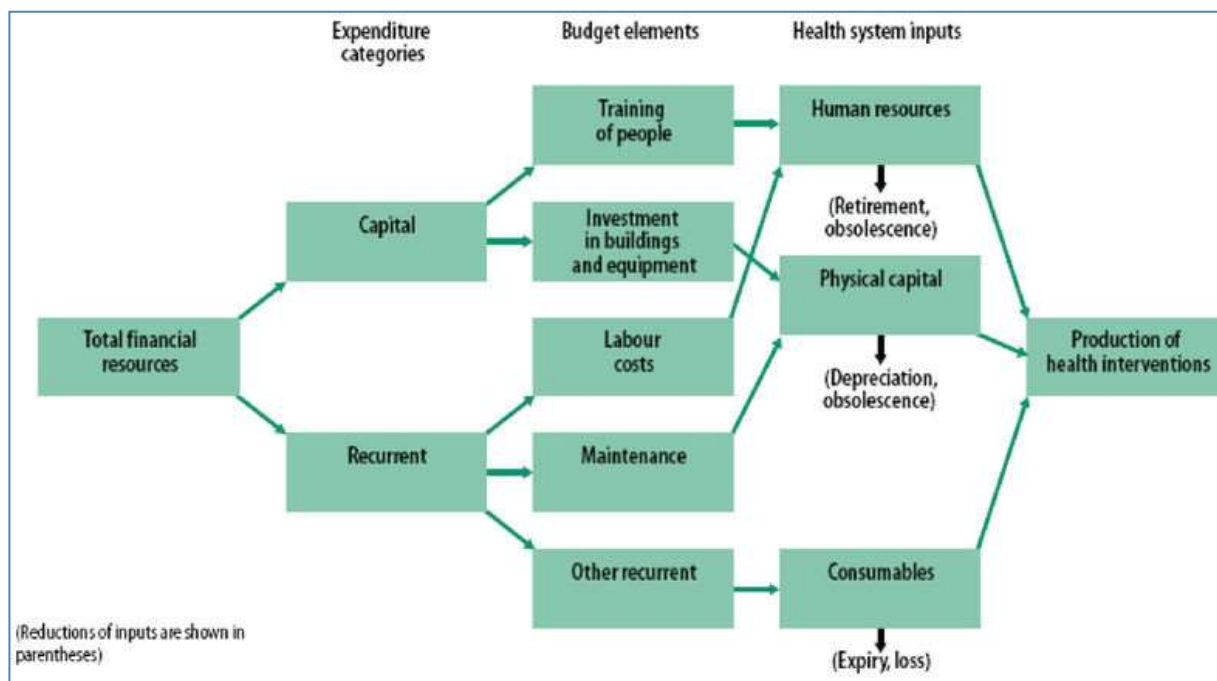
McKinnies (2012) has stated that HRM comprises five broad functions, which are:

- i. Resourcing: Activities include HR planning, talent management, succession planning and ending the employment contract (including managing retirement and redundancy).
- ii. Performance: Managing individual and team performance and the contribution of workers to the achievement of organizational goals, for example, through goal-setting and appraisals.
- iii. Reward system: Designing and implementing reward systems covering individual and collective, financial and non-financial rewards, including pay structures, parks and pensions.
- iv. Learning and Development: Identifying individual, team and organizational development requirements and designing, implementing and evaluating training and development interventions.
- v. Employment relations: Managing employees, communication, handling union management relations, managing employee welfare and handling employee grievance and discipline.

Human resources with regards to the health care industry can be defined as the diverse group of clinical and non-clinical employees responsible for providing health care services at different levels of the health care delivery system. The knowledge, skills and the motivation level of the individuals responsible for delivering the health services has a great impact on the performance and the benefits that the system can deliver to the beneficiaries.

Specifically, human resources are considered to be one of the three principle health system inputs, with the other two major inputs being physical capital and consumables.

Figure 1 depicts the relationship between health system inputs, budget elements and expenditure categories.



**Figure 1: Relationship between health system inputs, budget elements and expenditure categories.**

(Source: World Health Report 2000, Figure 4.1 pg.75.

[http://www.who.int.proxy.lib.uwo.ca:2048/whr/2000/en/whr00\\_ch4\\_en.pdf](http://www.who.int.proxy.lib.uwo.ca:2048/whr/2000/en/whr00_ch4_en.pdf))

The above figure (Figure 1) identifies human resources, physical capital and consumables as the three principal health system inputs. It also shows how the financial resources to purchase these inputs are of both a capital investment and a recurrent character. As in other industries, investment decisions in the healthcare industry are critical because they are generally irreversible: they commit large amounts of money to places and activities that are difficult, even impossible, to cancel, close or scale down.

It is essential to maintain an appropriate mix between the different types of health promoters and caregivers to ensure the success of the entire healthcare delivery system. The relationship between human resources and health care is very complex, and it becomes quite a challenge to effectively manage the human resources in the healthcare organisation. Hence it merits further examination and study.

This paper makes an effort to identify the challenges faced by the human resource managers in the healthcare organisations and also attempts to suggest some probable solutions to overcome the challenges. The challenges have been identified by reviewing various related articles and papers which have been published in the past.

## Objectives

1. To review some existing literature related to HRM in hospital.
2. To identify the challenges in managing the human resources of hospitals from existing literature review.
3. To suggest probable solutions that can help in overcoming the challenges.

## Research design

The study mainly involves a Descriptive Research as it gives a description of the challenges faced in managing the human resources of the hospitals and an effort has been made to suggest the probable solutions. In this study, the researcher has no control over the variables and can only report the state of affairs that has happened.

This study is based on Secondary Data and 10 literatures have been reviewed from various publications, websites, books, etc. From this secondary data, the challenges faced by the hospitals in managing its human resources have been identified.

## Review of literature

*Priya Sinha and Sigamani P (2016)* in their paper “*Key challenges of human resources for health in India*” have revealed that the government expenditure on health has remained at not more than 1% of Gross Domestic Product which is very less compared to world standard. The biggest challenge is the shortage of skilled human resource in the healthcare delivery system at all levels. Another challenge that they have highlighted is the attrition of the workforce in the healthcare industry and emigration of skilled health workforce.

*Christoph Aluttis et al (2014)* in their paper “*The workforce for health in a globalized context – global shortages and international migration*” highlights that the World Health Organisation has estimated a global shortage of almost 4.3 million doctors, midwives, nurses and other healthcare

professionals. The study also focuses on the current scope of health workforce migration patterns and its effect on both high and low income countries in an interdependent world. It also reviews the internal and external factors that make an impact on the migration of health workers.

In the paper “*HRM issues and challenges in healthcare*”, Dr. E. Mubarak Ali et al. (2016) reveals that the human resource management has a strong impact on health care quality and improving the performance of the hospital workforce. The authors explained that the workforce of a hospital is relatively large, diverse and includes separate occupation and above that they have to work round the clock in a service sector organisation like a hospital. Hence, to manage this vast workforce and to motivate them to work efficiently and effectively to achieve patient satisfaction is a great challenge for the human resource managers. The authors also highlight an important challenge of inadequate training among the healthcare workers. They have stated that there is a lack of training for health education, interpersonal communication, doctor- patient and doctor-staff interactions and counselling leading to a gap between the healthcare workforce (including the doctors) and the clients which includes the patients and the patient parties.

Anuska Kalita et al. (2009) in their study “*Empowering health personnel for decentralized health planning in India: The Public Health Resource Network*” have highlighted that there is a lack of technical knowledge, skills and absence of a supportive network or educational opportunities among some categories of health worker and these inadequacies act as a hindrance for the health personnel from making professional and career improvements. Hence there is a strong need for trained, motivated, empowered and networked health personnel. The authors have emphasized on the importance of the Public Health Resource Network to motivate and empower often isolated health workers.

McAlearney (2006) in the study “*Leadership Development in Healthcare: A qualitative study*” has emphasized on the leadership challenges in the healthcare organisation. The study reveals that healthcare organisations experience major challenges in designing and delivering Leadership Development Programmes.

Guest and Woodrow (2012) in their study “*Exploring the Boundaries of Human Resource Managers’ Responsibilities*” emphasizes on the longstanding challenges for human resource managers as how far it is realistic for them to represent the interest of both management and workers.

In an interesting study “*Working While the World Sleeps: A Consideration of Sleep and Shift Work Design*” authors Robert D. Oexman et al. (2002) have focused on the problem of sleep deprivation and related problems facing shift workers and the organizations employing them. The study discusses the move towards shift work and some sleep problems associated with it. The authors have also suggested some alternative schedules for shift work implementation like Fixed or Rotating Schedule, Straight shifts & Oscillating shift. In the paper the authors also highlight the fact that a lack of attention to the sleep needs of employees leads to higher absenteeism, a decrease in health (with an increase in health care costs), lower employee morale, an increase in accidents, and a decrease in productivity. The consequences associated with sleep problems may be even greater than those associated with drug and alcohol abuse on the job

A. Manimaran et al. (2016) in their paper “*Human Resource Management in the Healthcare Industry – A Literature Review*” have studied about the various viewpoints on the multiple issues regarding the human resource management of a health care professional. They have identified

some critical challenges faced in the healthcare industry, which are- Change management, Leadership Development, Staffing Challenges, Performance Management Challenges and Challenges related to rewards and recognitions.

*Farokhzadian J et al (2017)* in their study *Challenges of Human Resources Management in Quality Improvement by Clinical Risk Management: A Qualitative Study on Iranian Nurses' experiences* carried out a survey of 22 nurses from three hospitals in the South East of Iran. The study highlights on six dimensions of the challenges faced by human resource management in the hospitals- (1) Inadequate productivity. (2) Recession of empowerment. (3) Inappropriate evaluation of performance. (4) Lack of motivation. (5) Personal Characteristics and Professional competencies. (6) Ethical and professional commitments.

*Cogin et al. (2016)* in their paper “Controlling healthcare professionals: how human resource management influences job attitudes and operational efficiency”, provide insights into the HR approach adopted by Australian Hospitals and the implications of employee attitudes and hospital operations. The study revealed that behavioural control has been used as the predominant form of control used to manage nurses, allied health workers and junior doctors. However the senior physicians were managed with an element of commitment based HRM and a mix between behaviour and input controls. The study also throws light on the negative job attitudes of the employees as a challenge of HRM which at times leads to inefficient operations.

## **Challenges of hrm in hospitals identified from review of literature and their probable solutions**

Based on the review of literature, the following challenges have been identified which are often faced in managing the human resources in the healthcare sector and the hospitals. An effort has been made to suggest some probable solutions in order to overcome the challenges.

### **1. Shortage of Skilled workforce**

#### **Discussion**

Although there is a rapid expansion of health care infrastructure, especially in the private sector healthcare organisations, yet there is an acute shortage of medical professionals. According to the 2013 report by the WHO and the Global Health Workforce Alliance, titled ‘*A Universal Truth: No Health Without Workforce*’- 83 countries fall below the threshold of 22.8 skilled health professionals per 10,000 population; 100 countries fall below the threshold of 34.5 skilled health professionals per 10,000 population; 118 countries fall below the threshold of 59.4 skilled health professionals per 10,000 population. However 68 countries are above the threshold of 59.4 skilled health professionals per 10,000 population. As per the report, the health workforce is ageing and replacement of this workforce is also a major challenge.

#### **Probable Solution**

To impart need based technical training in hospitals and healthcare organisations. Proper forecasting as well as creation of healthcare professionals that would be required in the future years to support the healthcare system is also an important solution to this challenge. In this regard

the Human Resource Information, Data and systems have a great role to play in order to help the policymakers to design a proper healthcare workforce planning.

## **2. Attrition of workforce**

### **Discussion**

The basic factors of attrition are identified to be- job factors, socioeconomic factors, policies and infrastructure facilities, opportunities within and outside the organisation, recognition and motivation of the employees, work culture and working conditions of the organisation. (Sinha & Sigamani, 2016). Emigration of skilled health workforce also contributes to the problem of attrition.

### **Probable Solution**

Talent Management Practices and promoting retention techniques would be useful in controlling attrition and emigration of skilled workforce. Proper promotion policies and career development initiatives would also contribute as an important solution to this challenge.

## **3. Diversified workforce in hospitals**

### **Discussion**

It is evident that the hospitals have a diversified workforce, including the medical and non medical professionals. The different categories of healthcare professionals, including the doctors, nurses, clinical technicians, and other non medical and support staffs like the administrative staff, housekeeping staffs, electrical staffs etc. have different level of work motivation. Although this diversified workforce is important in a sector like hospital and can be regarded as strength from the operations and patient service point of view, yet it might appear as a challenge for the human resource managers if proper care is not taken in the HR front.

### **Probable Solution:**

It is important for the management and the human resource managers to deal with each category separately keeping in view their motivational levels and trying to align their personal goals with the organisational goals. Since the work motivation of each of the categories is different, hence in this case a generalised policy may not serve the purpose. The HR managers might have to come up with category specific policies as far as their career goals and work motivation levels are concerned.

## **4. Round the clock support**

### **Discussion**

The hospital sector provides services on a 24 hour basis. This demands the health care workforce to provide round the clock service support. An improper duty schedule gives rise to the problem of sleep deprivation among the shift employees, which might also lead to inadequate productivity. This comes out to be a big challenge for the human resource management of the hospitals in terms of the health and productivity of the employees.

## Probable Solution

A well designed duty shift schedule would act as a probable solution to this challenge. *Robert D. Oexman et al. (2002)* has suggested some alternative schedules for shift work implementation.

Alternative shift schedules:

a. *Fixed or Rotating Schedule*: Fixed schedules consist of working hours and working days that are the same from week to week. Rotating schedules are normally composed of “fixed length” schedules with varying start times. The rotating shift generally begins on days, moves to evenings and then to nights.

b. *Straight shifts*: Each crew has its own set of hours that do not change. A standard schedule is 7:00 a.m. to 3:00 p.m., 3:00 to 11:00 p.m., and 11:00 p.m. to 7:00 a.m.

c. *Oscillating shift*: In an oscillating shift, there is one shift that is on a fixed schedule and the remaining groups rotate

## 5. Inadequate training

### Discussion

From the study of the existing literature it was evident that, inadequate technical as well as interpersonal training among the healthcare workers contributes as another HR challenge in the healthcare sector. Lack of proper communication training leads to conflict between medical professionals and the clients (patient and patient parties). Lack of updated skill trainings in the remote areas also leads to low quality of health care services in those areas.

The Independent Commission on Health in India observed that the standard of teaching in training schools for auxiliary nurse-midwives were very low and that “the main reasons for substandard patient and community care are: substandard training, especially in the staff-nurse, midwife, and auxiliary nurse-midwife training courses, the lack of a proper system of training; and absence of regular reorientation courses.” (*E Mubarak Ali et al, 2016*)

### Probable Solutions

- a. Regular re-orientation courses for the healthcare staffs.
- b. As per the 2013 report of the WHO and the Global Health Workforce Alliance, titled ‘*A Universal Truth: No Health Without Workforce*’; a pre-service education or training guided by a curriculum providing good healthcare practices will lead to better quality of performance of healthcare workers.
- c. Conducting more of Continuing Medical Education (CME) and Continuing Nursing Education (CNE) Programmes in order to update the medical professionals on the recent technical advancements in their respective fields.

## 6. Lack of proper networking among healthcare personnel

### Discussion

The lack of a proper networking of the health care personnel hinders their professional as well as career advancements. As a result the health personnel are unaware of the field realities which discourage them from pursuing effective strategies.

## Probable Solution

The introduction and implementation of the Public Health Resource Network among the health workers can act as a solution to this challenge. The Public Health Resource Network is an innovative distance-learning course which trains, motivates, empowers and builds a network of health personnel from government and civil society groups. Its aim is to build human resource capacity for strengthening decentralized health planning. It interacts with, and works to empower, health personnel within the government health system as well as civil society, to meaningfully participate in and strengthen decentralized planning processes and outcomes. The technical content and contact programmes have been specifically developed to build perspectives and technical knowledge of participants and provide them with a variety of options that can be immediately put into practice within their work environments and everyday roles. (Anuska et al, 2009)

## 7. Leadership Challenge in healthcare organisations:

### Discussion

It has been evident from the existing studies that there is a great deal of leadership development challenges in the hospitals and healthcare organisations. Failing to identify and develop potential leaders might lead to a situation where the hospitals or the healthcare organisations might lack efficient leaders to guide the organisation. This might result in the downfall of the organisation or deterioration of the services.

### Probable Solution

Designing and delivering of Leadership Development Programmes for the employees and potential leaders is a key solution to this challenge. *The Imperative for Strategic Workforce Planning and Development: Challenges and Opportunities*, by the American Hospital Association's 2016 Committee on Performance Improvement recommend that health care leaders must be willing to invest in the workforce for training on new care models. They should ensure that there are appropriately trained care teams, and should identify up-coming leaders for mentoring and career advancement opportunities. Attracting new employees and helping existing staff learn and understand how they contribute to excellent patient care in a transformed care environment are key tactics for leaders. Senior leaders can be instrumental in creating a strong and committed culture in a health care organization.

## 8. Interface between Management & Workers

### Discussion

The HR acts as an interface between the management as well as the workforce. Thus, one of the greatest responsibilities of the HR is to communicate properly the problems, ideas and thoughts of the management to the workforce and vice versa. In situations of conflict between the management and the workforce or workforce representatives (eg: employee unions) it is important for the HR to represent the interest of both the sides in an unbiased manner. Although theoretically the HR acts as the interface between the management and the workforce, but in a



realistic situation, sometimes the HR is provided with limited power and has their own boundaries which comes up as a challenge for the HR managers

## Probable Solution

As per the Ulrich model given by Dave Ulrich, the HR in an organisation plays a transformational role and hence it is also called a Change Champion or Employee Champion. The champion role of the HR demands that the HR professional should build trust between him or her and the employees. This trust can help the HR professional to act as an effective liaising agent between the management and the employees.

## 9. Negative job attitudes of employees and lack of motivation

### Discussion

Negative attitude to work might include laziness, rudeness, tardiness, rumour mongering or any other activity or behaviour that deters the overall organizational goals and objectives (*Othman et al., 2013*). In a study by “Employee Benefit News”, a unique emotion based research technique called Resonance was used to identify the causes of employee negativity at work. The causes they could identify in their study included- excessive workload; concerns about management’s ability to lead the company successfully; anxiety about the future, long term job, income, retirement security; frustration about work load; a lack of challenge in work and insufficient recognition for contribution. The negative attitude among employees might lead to adverse effects like dissatisfying the customers, decreased performance, less productivity and also spreading the negativity among fellow employees.

### Probable Solutions

The challenge of negative work attitude can be addressed by developing the workforce in the following ways:

- a. Recruiting staffs with skills in service transformation
- b. Redesigning and creating new job roles
- c. Linking self development to service needs and priorities
- d. Creating opportunities for shared learning and knowledge exchange
- e. Recognition for contributing employees

## 10. Inappropriate evaluation of performance

### Discussion

A just and fair performance evaluation system is always expected in any organisation as the outcome of the performance evaluation has a direct relation to the compensation decisions, promotion decisions and career development of the employees. However, some problems are always associated with the performance evaluation system which comes up as a challenge for the HR managers. The problems associated with performance evaluation might include- lack of clarity in the evaluation criteria, lack of competent evaluator, biases of the evaluator as they might be influenced by recency effect, horn effect, halo effect, stereotyping and leniency; errors in rating and evaluation and resistance from the employees.

## Probable Solutions

The problems associated with the performance evaluation system can be addressed with the help of the following solutions:

- a. Determining a quantifiable and measurable evaluation criteria and creating an effective rating instrument
- b. Selecting competent evaluators having expertise and knowledge to decide the criteria accurately.
- c. Avoiding judgement errors while evaluating the employees
- d. The standards of the appraisal system should be clearly communicated to the employees and they should be made aware as what is expected from him/ her. The employees should be made clear about the purpose of the appraisal.
- e. Since there is a diverse workforce in the hospitals and healthcare organisation, the performance parameters should be clearly defined for each category of employees and should not be generalised for all employees.

## Conclusion

Managing the human resource effectively is a challenging task for the management as well as the human resource personnel of the healthcare organisations and the hospitals. The paper identifies the major human resource challenges faced by the hospitals and other healthcare organisations. The researchers in due course have conducted many theoretical, empirical and exploratory studies across a variety of samples to identify these challenges. From the reviewed literature, it is evident that the major challenges faced by the human resource management of the healthcare sector includes shortage of skilled workforce, attrition of workforce, round the clock service, diversified workforce, inadequate training, lack of proper networking among the health workforce, leadership challenges in the hospitals and healthcare organisations, negative work attitude etc. The human resource planners and the senior leaders of the hospitals and the healthcare organisations should have clear strategic directions and clear objectives in order to overcome these challenges. It is essential for the healthcare organisations to invest in the development of the human resources and to have a more futuristic approach in the planning of skilled health workforce which in turn will lead to a better and more efficient healthcare delivery system.

## References:

1. Kabene, S., Orchard, C., Howard, J., Soriano, M., & Leduc, R. (2006). The importance of human resources management in health care: a global context. *Human Resources For Health*, 4(1). <http://dx.doi.org/10.1186/1478-4491-4-20>
2. Guest, D., & Woodrow, C. (2012). Exploring the Boundaries of Human Resource Managers' Responsibilities. *Journal Of Business Ethics*, 111(1), 109-119. <http://dx.doi.org/10.1007/s10551-012-1438-8>
3. McAlearney, A. (2006). Leadership development in healthcare: a qualitative study. *Journal Of Organizational Behavior*, 27(7), 967-982. <http://dx.doi.org/10.1002/job.417>

4. Oexman, R. D., Knotts, T. L. and Kock, J. (2002) Working while the world sleeps: a consideration of sleep and shift work design. *Empl. Responsib. Rights J.*, **14**: 145–157
5. Ali, E. M., Aameed, S. A, (2016) HRM Issues and Challenges in Healthcare. *International Journal of Management*, **7**(2), 2016, pp. 166-176. <http://www.iaeme.com/IJM/index.asp>
6. Aluttis, C., Bishaw, T., & Frank, M. (2014). The workforce for health in a globalized context – global shortages and international migration. *Global Health Action*, **7**(1), 23611. <http://dx.doi.org/10.3402/gha.v7.23611>
7. Kalita, A., Zaidi, S., Prasad, V. and Raman, V. (2009). Empowering health personnel for decentralized health planning in India: The Public Health Resource Network. *Human Resources for Health*, **7**(1). <https://doi.org/10.1186/1478-4491-7-57>
8. A Manimaran, S. A. Senthil Kumar. (2016). Human Resource Management in the Healthcare Industry – A Literature Review. *American Journal of Information Management*. Vol. 1, No. 2, 2016, pp. 24-28. doi: 10.11648/j.infomgmt.20160102.12 <http://article.sciencepublishinggroup.com/pdf/10.11648.j.infomgmt.20160102.12.pdf>
9. Farokhzadian, J., Nayeri, N., & Borhani, F. (2015). Rocky milieu: Challenges of effective integration of clinical risk management into hospitals in Iran. *International Journal Of Qualitative Studies On Health And Well-Being*, **10**(1), 27040. <http://dx.doi.org/10.3402/qhw.v10.27040>
10. Farokhzadian J, Borhani F, Poorchangizi B, et al (2017) Challenges of Human Resources Management in Quality Improvement by Clinical Risk Management: A Qualitative Study on Iranian Nurses' experiences. 2017; **7**(Suppl 1): bmjopen-2016-015415.31
11. Cogin, J., Ng, J., & Lee, I. (2016). Controlling healthcare professionals: how human resource management influences job attitudes and operational efficiency. *Human Resources For Health*, **14**(1). <http://dx.doi.org/10.1186/s12960-016-0149-0>
12. Othman, A., & Suleiman, W. (2013). An Analysis of Causes of Poor Attitude to Work. *Procedia - Social And Behavioral Sciences*, **97**, 194-200. <http://dx.doi.org/10.1016/j.sbspro.2013.10.222>
13. Sinha, P., Sigamani, P. (2016). Key challenges of human resources for health in India. *Global Journal Of Medicine And Public Health*, **Vol:5 (4)**
14. Kothari, C., & Garg, G. (2016). *Research methodology*. New Delhi: New Age International (P) Limited.
15. Park, K. *Park's textbook of preventive and social medicine*.
16. Park, J. (1991). *Textbook of preventive and social medicine [by] J E Park and K Park*. Jubalpur: Banarasidas Bhanot.
17. Aswathappa, K. (2013). *Human resource management*. New Delhi: McGraw Hill Education.

18. World Health Organization: World Health Report 2003: Shaping the Future. Geneva. 2003, [<http://www.who.int.proxy.lib.uwo.ca:2048/whr/2003/en/Chapter7-en.pdf>]View  
[ArticleGoogle Scholar](#)
19. World Health Organization: World Health Report 2000. Health Systems: Improving Performance. Geneva. 2000, [http://www.who.int/whr/2000/en/whr00\\_annex\\_en.pdf](http://www.who.int/whr/2000/en/whr00_annex_en.pdf)
20. Human Resource Management. Inc.com. Retrieved 11 May 2018, from <https://www.inc.com/encyclopedia/human-resource-management.html>
21. (2018). Human-resources-health.biomedcentral.com. Retrieved 11 May 2018, from <https://human-resources-health.biomedcentral.com/track/pdf/10.1186/s12960-016-0149-0>
22. (2018). Who.int. Retrieved 11 May 2018, from [http://www.who.int/workforcealliance/knowledge/resources/GHWA\\_AUniversalTruthReport.pdf](http://www.who.int/workforcealliance/knowledge/resources/GHWA_AUniversalTruthReport.pdf)
23. Pioneer, T. (2018). Mind the gap: Health workforce shortage. The Pioneer. Retrieved 11 May 2018, from <http://www.dailypioneer.com/columnists/oped/mind-the-gap-health-workforce-shortage.html>
24. (2018). Calhospital.org. Retrieved 11 May 2018, from [https://www.calhospital.org/sites/main/files/file-attachments/report-cpi\\_-\\_final.pdf](https://www.calhospital.org/sites/main/files/file-attachments/report-cpi_-_final.pdf)
25. Trustee. (2018). Planning the workforce of the future. [online] Available at: <https://www.trustemag.com/articles/1246-planning-the-hospital-workforce-of-the-future> [Accessed 11 May 2018].
26. Want to Know the 5 Causes of Employee Negativity?. (2018). The Balance Careers. Retrieved 11 May 2018, from <https://www.thebalancecareers.com/the-5-causes-of-employee-negativity-1919385>
27. Challenges Of Performance Appraisal | Performance Appraisal | Evaluation. (2018). Scribd. Retrieved 11 May 2018, from <https://www.scribd.com/document/51690559/Challenges-Of-Performance-Appraisal>
28. Kabene, S., Orchard, C., Howard, J., Soriano, M., & Leduc, R. (2006). The importance of human resources management in health care: a global context. *Human Resources For Health*, 4(1). doi:10.1186/1478-4491-4-20
29. (2018). Shodhganga.inflibnet.ac.in. Retrieved 11 May 2018, from <http://shodhganga.inflibnet.ac.in/bitstream/10>
30. Suhail, A. and Azhar, A. (2016). Managing Human Resources in Public Health Care System in South Asia: Case Study of Pakistan. [online] SAGE Journals. Available at: <http://journals.sagepub.com/doi/full/10.1177/2322093716640024> [Accessed 11 May 2018].

31. Aluttis, C., Bishaw, T., & Frank, M. (2014). The workforce for health in a globalized context – global shortages and international migration. *Global Health Action*, 7(1), 23611. doi:10.3402/gha.v7.23611