

# **SPECIAL TRAINING PROGRAMS GIVEN TO THE EMPLOYEES WITH REFERENCE TO MULTI SPECIALITY HOSPITALS IN COIMBATORE**

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## **ABSTRACT**

Training is imparted to take care of an individual's career development as well as functional and skill enhancement. Development of skills and knowledge, a variety of training inputs are used, including the development of specific abilities as well as a more general increase in performance. It is the responsibility of functional departments to identify training needs, while corporate HR is responsible for organising competency and developing input. To be considered trained, an individual must have some level of formal education prior to being placed in a training programme. It is essential for any hospitals to ensure that its personnel are well-trained. As a result of training, personnel are better able to carry out their duties. As a result, management is able to achieve greater results. In the event of poor work performance, a decrease in productivity, a redesign of the job, or new technology advancement, some sort of training is required. The main aim of the study is to find out the employees attitudes towards training and development in various hospitals, focus on finding out efficiency of employees after training programme and also find out the opinion of the trainees toward the programme, trainer, contents and multi-speciality hospitals and to suggest the best and effective training method to be followed in the multi-speciality hospitals. For this purpose descriptive research was used to survey the employees were percentage analysis, chi square, Anova, descriptive statistics and rank correlation were used as tools to analyse the data and the conclusion is that if the multi speciality hospitals tries to increase the working time of part time employees in the multi-speciality hospitals and if they are paid with good remuneration then the productivity of the employees can be developed further which leads to increase in profit of the multi-speciality hospitals and the hospitals can focus on operational management which provides knowledge to the employees of the firm and leads to satisfaction with the employees which also get impacted in productivity of the multi-speciality hospitals.

## **INTRODUCTION ABOUT THE TRAINING**

Skills-building and performance-enhancement activities aimed at enhancing the performance of certain jobs or responsibilities. An informal, participatory approach such as group discussion or role acting may be just as effective as more formal, lecture-style instruction. Classroom-based courses, on-the-job training, and business or simulation games are only few of the methods used to teach employees. Videos and CD-ROMs, as well as other forms of multimedia, may be used. There are many different types of training organisations, including those inside and beyond an organization's walls. To get the most out of training, it's important to do a requirements analysis first and then evaluate the results. Individual growth and improved productivity are the intended outcomes of training.

### **TYPES:**

#### **On-the-job Training and Lectures**

On-the-job training and lectures are the most often utilised training methods, however there is no evidence to support either of their efficacy. It's almost hard to impart all of an employee's knowledge in a setting other than the workplace. This is why on-the-job training is typically supplemented by other forms of training, such as classroom or off-site training, although it is often the sole kind of training. This implies that the trainer may not have a clear vision of what the beginner needs to learn, and the trainer may not be able to focus on the training as much as she should.

While on-the-job training may be a valuable component of a well-planned training programme, it is not a substitute for drafting a formal training plan.

They are employed because they are inexpensive and may reach a large audience. Lectures, which rely on one-way communication rather than participatory methods of learning, have long been critiqued for their effectiveness as a teaching tool.

#### **Programmed Instruction (PI)**

Reward concepts are used in the design of these gadgets, which give information to the learner and solicit a response. Back in the 1950s, when PI was first established, it was regarded to be only beneficial for elementary school courses. A wide range of abilities, from air traffic control to tax return analysis, may be taught using this manner.

#### **Computer-Assisted Instruction (CAI)**

As with PI, CAI allows workers to study at their own speed. ” Many people consider computers to be more dynamic teaching tools because they allow students to engage with them. It is possible to swiftly identify educational options that fit a student's ability, and their progress is constantly checked. In order to keep track of student progress and make necessary adjustments, instructors collect data during the course of education.

#### **Audio-visual Techniques**

A wide variety of skills and information may be taught and presented via television and cinema. Electric boards and slide projectors may be seen in many schools. This sort of training has been given a new name, tele training, due to the use of audio-visual equipment like closed circuit television and telephones. The segment on "Sesame Street" shows how one of television's most popular children's shows is used as a teaching tool.

## Simulations

For both learning and transfer of new information and skills, simulations must reflect the basic qualities of a real-world environment. Simulations may be created using machines or in other ways. Physical authenticity is a common feature of machine simulators, which mimic the workings of real-world machinery. However, the primary goal of simulation is to generate psychological realism, which is to replicate in training the processes that will be needed on the job. Among the many reasons we use simulation is to maintain control over the training environment, to ensure student safety, to integrate teaching strategies such as immediate feedback and reinforcement, and to save money.

## Business games

Hospitals have been trained in fighting skills for hundreds of years via the usage of war simulations that gave rise to these new creations. In the early days of business games, the primary goal was to educate the fundamentals of business, but today's games also emphasise interpersonal skills. Monopoly may be regarded the classic business game for aspiring entrepreneurs. It is likely the first location where children were exposed to terms like mortgage, tax, and prison.

## TRAINING METHODS:-

All training methods can be grouped into two categories:-

- a) Training methods for operatives and
- b) Training methods for managers

### Training Methods for Operatives:-

New employees are allocated to particular jobs at a machine or workshop or laboratory under these procedures. Employees who have worked there for a long time or a special supervisor teach him how to use the equipment.

**Vestibule Training:** - Rather than setting up a separate facility to teach new hires, this approach has the facility itself serve as a training centre for them. This course will be overseen by an experienced professional. At order to simulate the working circumstances of a workshop, various services provided are maintained in the training centre.

**Advantage:** - There will be no interruptions in normal output.

**Disadvantage:** - Useless for productions during education because of its high cost and ineffectiveness.

**Apprenticeship Training** For trades and crafts that need extensive training, this approach is intended to provide the student with the necessary information and skills.

Apprenticeships often last between two and seven years, with trainees working under the direct supervision of experienced professionals. Real-world experience and academic knowledge are imparted via classroom lectures, which may be held either at the plant or at a university affiliated with it. All-around craftspeople may be trained using this system. However, this approach is prohibitively costly, and there is no assurance that a worker who has finished training would remain employed by the same hospitals after graduation.

**Internship Training:** - This is a common approach of instructing highly skilled and technical workers. As a way to bring theoretical and practical knowledge into balance, personnel from a technical university who only have theoretical knowledge are assigned to work in a firm to get practical experience. As a result, hospitals personnel are sent to technical schools to learn the most current theoretical information on a certain topic.

**b] Training Methods for Managers:-**

The most valuable asset a service sector hospital can have is executive skill. But even though service sector businesses' balance sheets show it, it has a much greater impact on the hospitals' profitability and stock price than any other asset it has.

## STATEMENT OF THE PROBLEM

To get the job done, any organisation must have staff that are both well-trained and well-versed in the tasks at hand. Training isn't necessary if those in the position can achieve this criterion now or in the future. Employees' skill levels must be raised via training if this is not the case. When it comes to training, it's all about understanding where you are now and where you want to go in the near future. Enhances a person's ability to do tasks. Improves one's technical skills. Increases the ability to compete. Increases self-assurance. Boosts the expansion of service sector firms. Behavioural and attitude shifts may be achieved through enhancing the entire competence of service sector organisations above all.

## OBJECTIVE OF THE STUDY

- To assess the level of special training given to employees.
- To identify effective special training programs those are easy for employees to learn and enhance their computer skills.
- To decide what specific training each employee needs and what will improve his or her job performance.

## NEED FOR THE STUDY

Because of this study, my interests in Human Resources have broadened. This study also includes comments from those who are directly engaged in the training and development process. In addition, it would provide me the opportunity to meet and connect with some of the most prominent executives in the hospital industry.

## SCOPE OF THE STUDY

The study's primary goal is to discover how different firms' workers feel about training and development, as well as how well trained they are after completing a training programme and what they think about the programme, trainer, materials, and hospitals that provided the training.

## RESEARCH METHODOLOGY

### Type of research

In this study descriptive research design is used for testing.

### Research instrument

The research instrument used in the study is a 'structured questionnaire'.

### Data collection

The two types of data used for the purpose of the study are

- Primary data
- Secondary data

### Sampling design

Simple random sampling technique was used as sample design and the sample size is 250 employees.

### Tools for analysis

The data collected are analyzed by using the following tools:

1. Chi-square test
2. Percentage analysis
3. Anova
4. Descriptive statistics
5. Rank correlation

### LIMITATIONS OF THE STUDY

- Only a small portion of the data was analysed.
- It's possible that the respondents' views are skewed.
- It's possible that some of the data was obtained incorrectly or not at all, because the questionnaire was used to acquire it.

### ANALYSIS AND INTERPRETATION

#### Demographic variables of the respondents

Demographic variables	Particulars	Frequency	Percent
Age	20-30	110	44
	31-40	33	13.2
	41-50	88	35.2
	51-60	19	7.6
	Total	250	100
Educational qualification	10th	40	16
	12th	49	19.6
	Under graduate	73	29.2
	Post graduate	88	35.2
	Total	250	100
Experience	<5yrs	100	40
	5-10 yrs	57	22.8
	11-15 yrs	30	12
	More than 15 years	63	25.2
	Total	250	100
Income of the respondents	<8000	58	23.2
	8001-12000	90	36.0
	12001-16000	82	32.8
	More than 16000	20	8.0
	Total	250	100.0

Out of 250 respondents 44% are from the age group of 20-30, 13.2% are from the age group of 31-40, 35.2% are from the age group of 41-50, 7.6% are from the age group of 51-60. 16% have completed their 10<sup>th</sup> standard, 19.6% have completed their 12<sup>th</sup> standard, 29.2% are under graduates, and 35.2% are post graduates. 40% are having less than 5 years of experience, 22.8% are having 5-10 years of experience, 12% are having 11-15 years of experience, 25.2% are having more than 15 years of experience. 23.2% are earning less than 8000, 36% are earning from 80001-12000, 32.8% are earning from 12001-16000 and 8% are earning more than 16000.

### Time spent to work in hospital

	Frequency	Percent
Less than 5 hours	100	40.0
Upto 8 hours	50	20.0
8-10 hours	31	12.4
More than 10 hours	69	27.6
Total	250	100.0

The above table shows about time spent to work in hospital were out of 250 respondents 40% spend less than 5 hours in hospital, 20% spend up to 8 hours in hospital, 12.4% spend from 8-10 hours, and 27.6% spend more than 10 hours in hospital. It shows that most of the respondents spend less than 5 hours in hospital.

### Opportunities in the market

	Frequency	Percent
Good Pay Package	95	38.0
Growth Prospects	73	29.2
Location	21	8.4
Flexi working Hours	40	16.0
Brand Equity	21	8.4
Total	250	100.0

The above table shows about opportunities in the market were out of 250 respondents 38% said that the hospitals are paying good pay package, 29.2% said that there is a chance of growth prospectus, 8.4% said as location, 16% said as flexi working hours, 8.4% said as brand equity. It shows that most of the respondents said that the hospitals are paying good pay package.

### Satisfaction of employees towards training given by the hospitals

<b>Descriptive statistics</b>	Mean	SD
Satisfaction on changing circumstances and work environments	2.08	1.086
Satisfaction on work load and pressure from superiors	1.89	1.286
Satisfaction on work with limited supervision	<b>2.79</b>	.795
Satisfaction on work and responsibility	2.10	.993
Satisfaction on knowledge of service quality in hospitals	2.22	1.277
Satisfaction on operational knowledge of various services provided	<b>3.94</b>	1.111
Satisfaction on knowledge on standard and specification	<b>4.26</b>	1.006
Satisfaction on knowledge on testing	<b>3.05</b>	1.366
Satisfaction on work with an attitude to learn new things	<b>4.04</b>	.759
Satisfaction on positive attitude to produce qualitative result	1.90	1.405
Satisfaction on existing and potential problems at the work place	<b>2.74</b>	1.102
Satisfaction on enjoy working in groups	2.50	1.127
Satisfaction on communicate clearly with other	<b>3.38</b>	1.421
Satisfaction on receptive to corrections	<b>3.06</b>	1.121
Satisfaction on exercise the responsibilities with trust	<b>2.67</b>	1.070

The above table shows about the descriptive statistics for major factors of the study and the factors above average mean (2.57) are taken in to consideration for the decision making process of the study. The factors are Measures taken by the organization to improve employees competency level, Satisfaction on work with limited supervision, Satisfaction on operational knowledge of various services provided, Satisfaction on knowledge on standard and specification, Satisfaction on knowledge on testing, Satisfaction on work with an attitude to learn new things, Satisfaction on existing and potential problems at the work place, Satisfaction on communicate clearly with other, Satisfaction on receptive to corrections, Satisfaction on exercise the responsibilities with trust, Acceptance on improve employees performance towards the job, Acceptance on enhance organizational effectiveness, Acceptance on increasing the relationship between the employee and the superior, Acceptance on minimizing the grievances, Acceptance on safety, health, and welfare measures, Acceptance on increasing the organizational commitment, Acceptance on improving decision making skills, Acceptance on the statement training required for promotion, Acceptance on developing competencies at all level, Acceptance on increasing initiative, Acceptance on increasing the capacity to earn higher amount, and Acceptance on training help to reduce your mistake

## DEMOGRAPHIC VARIABLES VS LEVEL OF SATISFACTION

**Table showing demographic profiles (age) and level of satisfaction of employees**

H01: There is no significant relationship between age and level of satisfaction of employees.

Level of acceptance of employees	CHI-Square Value	P Value	Result
Satisfaction on changing circumstances and work environments	29.429	0.005	Reject
Satisfaction on work load and pressure from superiors	26.325	0.010	Reject
Satisfaction on work with limited supervision	10.941	0.534	Accept
Satisfaction on work and responsibility	18.725	0.095	Accept
Satisfaction on knowledge of service quality in hospitals	13.386	0.342	Accept
Satisfaction on operational knowledge of various services provided	26.306	0.010	Reject
Satisfaction on knowledge on standard and specification	26.742	0.002	Reject
Satisfaction on knowledge on testing	27.826	0.006	Reject
Satisfaction on work with an attitude to learn new things	28.111	0.005	Reject
Satisfaction on positive attitude to produce qualitative result	39.641	0.000	Reject
Satisfaction on existing and potential problems at the work place	10.695	0.555	Accept
Satisfaction on enjoy working in groups	15.414	0.220	Accept
Satisfaction on communicate clearly with other	10.512	0.571	Accept
Satisfaction on receptive to corrections	8.445	0.490	Accept
Satisfaction on exercise the responsibilities with trust	9.255	0.681	Accept

The above table shows about the relationship between demographic profile age and level of satisfaction of employees. The factors Satisfaction on changing circumstances and work environments, Satisfaction on work load and pressure from superiors, Satisfaction on operational knowledge of various services provided, Satisfaction on knowledge on standard and specification, Satisfaction on knowledge on testing, Satisfaction on work with an attitude to learn new things, and Satisfaction on positive attitude to produce qualitative result are taken in to consideration for the decision making process of the study as the level of significance is less than 0.05.

**Table showing demographic profiles (educational qualification) and level of satisfaction of employees**



H02: There is no significant relationship between educational qualification and level of satisfaction of employees

Level of acceptance of employees	Chi-Square Value	P Value	Result
Satisfaction on changing circumstances and work environments	19.511	0.077	Accept
Satisfaction on work load and pressure from superiors	16.156	0.184	Accept
Satisfaction on work with limited supervision	16.295	0.178	Accept
Satisfaction on work and responsibility	18.971	0.089	Accept
Satisfaction on knowledge of service quality in hospitals	19.570	0.076	Accept
Satisfaction on operational knowledge of various services provided	18.813	0.093	Accept
Satisfaction on knowledge on standard and specification	30.442	0.000	Reject
Satisfaction on knowledge on testing	36.657	0.000	Reject
Satisfaction on work with an attitude to learn new things	24.184	0.019	Reject
Satisfaction on positive attitude to produce qualitative result	30.174	0.003	Reject
Satisfaction on existing and potential problems at the work place	21.659	0.042	Reject
Satisfaction on enjoy working in groups	5.777	0.927	Accept
Satisfaction on communicate clearly with other	10.206	0.598	Accept
Satisfaction on receptive to corrections	6.193	0.720	Accept
Satisfaction on exercise the responsibilities with trust	14.498	0.270	Accept

The above table shows about the relationship between demographic profile age and level of satisfaction of employees. The factors Satisfaction on knowledge on standard and specification, Satisfaction on knowledge on testing, Satisfaction on work with an attitude to learn new things, Satisfaction on positive attitude to produce qualitative result, and satisfaction on existing and potential problems at the workplace are taken in to consideration for the decision making process of the study as the level of significance is less than 0.05.

### **RANK CORRELATION**

Ho3: There is a significant relationship between the rank given and the desirable traits of any employee from the employer's perspective

### Rank correlation of desirable traits of any employee from the employer's perspective

S.NO	FACTORS	X	Y	R1	R2	D	D <sup>2</sup>
1	Ethical Values	32	42	6	3	3	9
2	Loyalty	43	37	3	6	-3	9
3	Hard work	18	23	9	9	0	0
4	Professionalism	41	36	4	7	-3	9
5	Experience	58	61	1	1	0	0
6	Communication skills	22	27	8	8	0	0
7	Leadership Skills	28	39	7	5	2	4
8	Presentation Skills	39	41	5	4	1	1
9	Business Management Skills	49	51	2	2	0	0
							32
N	9					1-R	0.27
						R	0.73

From the above table its inferred that the significance level is greater than .5 where there is a no significant relation between the rank give and desirable traits of any employee from the employer's perspective.

### FINDINGS

- 44% of the respondents are from the age group of 20-30 in our survey.
- 35.2% of the respondents are post graduates in our study.
- 40% of the respondents are having less than 5 years of experience in our survey.
- 36% of the respondents are earning from 8001 to 12000 in our survey.
- 42.8% of the respondents are earning labours in survey.
- 50.4% of the respondents are working part time.
- 40% of the respondents spend less than 5 hours in hospital.
- 38% of the respondents said that the hospitals are paying good pay package.
- 33.2% of the respondents said that employer's involvement is very important for the multi-speciality hospitals.
- 62% of the respondents said that they are aware on competency survey taken in the organization.
- 48.8% of the respondents said that job shifting is the measure taken by the organization to improve employee's competency level.
- 58.8% of the respondents said that they accept on improving competency level of the employees.
- 58.4% of the respondents said that they accept the training needs identified through competency gap.
- 42% of the respondents said that the time period of training in a year is 1 month.
- 72.4% of the respondents said that they are satisfied with effectiveness of training in the organization. of the respondents are satisfied on working in groups.
- 63.6% of the respondents said that they accept for special attention during training period.

## SUGGESTIONS

**Targeted Training Programs:** Since 35.2% of respondents are postgraduates and 40% have less than 5 years of experience, consider offering specialized training programs that cater to their educational background and experience level. These could include advanced medical techniques, patient care methodologies, and leadership skills tailored to their career stage.

**Competency Surveys and Training Needs Analysis:** Since 62% of respondents are aware of competency surveys, and 58.4% agree with the training needs identified through competency gaps, continue conducting regular competency assessments to identify specific skill gaps. Use these assessments to design training programs that address these gaps effectively.

**Job Rotation and Job Shifting:** As 48.8% of respondents see job shifting as a measure to improve employee competency levels, consider implementing job rotation programs that allow employees to gain exposure to different departments and roles within the hospital. This can help broaden their skill set and increase their adaptability.

**Increased Training Duration:** While 42% of respondents feel that one month of training per year is sufficient, consider offering extended training periods for more in-depth skill development, especially in specialized areas. This could include longer-term training programs or ongoing professional development opportunities throughout the year.

**Individualized Attention during Training:** Since 63.6% of respondents value special attention during the training period, ensure that training programs are designed to provide personalized support and guidance to each employee. This could involve mentorship programs, one-on-one coaching sessions, or small group training sessions.

**Enhanced Employer Involvement:** Since 33.2% of respondents emphasize the importance of employer involvement in multi-specialty hospitals, ensure that management actively participates in training programs and supports employees' career development initiatives. This could involve regular check-ins, performance feedback sessions, and opportunities for advancement within the organization.

**Flexible Work Arrangements:** Given that 50.4% of respondents work part-time and 40% spend less than 5 hours in the hospital, consider offering flexible work arrangements to accommodate diverse scheduling needs. This could include flexible hours, telecommuting options, and job-sharing arrangements to support a healthy work-life balance for employees.

## CONCLUSION

In conclusion, the survey findings shed light on the various facets of special training programs for employees within multi-specialty hospitals in Coimbatore. The results underscore the importance of targeted training initiatives that align with employees' educational backgrounds and experience levels, emphasizing the need for personalized skill development pathways. Regular competency assessments and training needs analyses emerge as valuable tools for identifying specific areas of improvement and tailoring training programs accordingly. Additionally, the implementation of job rotation schemes and extended training durations can foster a dynamic learning environment, enriching employees' skill sets and adaptability. Individualized support through mentorship programs and employer involvement in training initiatives are pivotal for nurturing employee growth and fostering a supportive workplace culture.

Furthermore, offering flexible work arrangements acknowledges the diverse scheduling needs of employees, contributing to a balanced work-life dynamic. By addressing these key findings and implementing strategic enhancements to training programs, multi-specialty hospitals in Coimbatore can bolster employee satisfaction, elevate patient care standards, and remain competitive in the dynamic healthcare landscape.

## REFERENCES

- [1].Anitha, R., & Kumar, M. A. (2016). A study on the impact of training on employee performance in private insurance sector, Coimbatore district. *International Journal of Management Research and Reviews*, 6(8), 1079.
- [2].Brindha, K. (2013). A study on employee morale in textile industries with reference to Coimbatore city. *EXCEL International Journal of Multidisciplinary Management Studies*, 3(8), 42-54.
- [3].Jayaraj, A. M., & Dharmaraj, A. (2017). A Study on Stress Management Practices Adopted by Small Scale Service sector Units in Coimbatore. *International Journal of Pure and Applied Mathematics*, 117(21), 613-620.
- [4].Kathirvel, N. (2010). A Study on the Morale of Employees with Reference to Textile Industries in Coimbatore. *IUP Journal of Management Research*, 9(3).
- [5].Krishnan, M. M., & Abirami, V. (2017). Quality of work life among employees in textile industry with reference to Coimbatore District. *Asian J Management*, 8(3), 572-576.
- [6].Muthukumar, E., & Vidhya, S. (2015). Enriching Human Resources Capital through Training and Development in Hotel Industries at Coimbatore. *International Journal of Emerging Research in Management & Technology*, 4(6), 85-91.
- [7].Singu, M. B. (2018). Marketing practices of women homepreneurs with special reference to Coimbatore district. *International Journal of Research in Economics and Social Sciences (IJRESS)*, 8(3).
- [8].Srinivasan, K. (2021). The Effect of Participative Decision Making on Job Satisfaction of the Employees of Multi speciality hospitals in Coimbatore. *Annals of the Romanian Society for Cell Biology*, 2061-2077.
- [9].Sumathi, V., & Velmurugan, D. R. (2017). Quality of work life of employees in private hospitals with reference to Coimbatore. *International Journal of Multidisciplinary Educational Research and development*, 4(5), 128-131.
- [10]. Thamaraiselvi, P., Visagamoorthi, D., & Shobana, A. (2018). A Study on Competency Mapping in Service sector MSME Sector using Mathematical Model. *Indian Journal of Science and Technology*, 11(48), 1-6.
- [11]. Thangamani, S., & Muthuselvi, S. (2013). A study on women empowerment through self-help groups with special reference to Mettupalayam Taluk in Coimbatore District. *Journal of Business and Management*, 8(6), 17-24.

- [12]. Usha, M., Nandhini, M., & Palanivelu, P. (2016). Effective employee training impart employee retention. *International Journal of Management Research & Review*, 6 (3), 416-421.
- [13]. Vijayan, M. (2017). Impact of job stress on employees' job performance in aavin, Coimbatore. *Journal of Organisation & Human Behaviour*, 6(3).
- [14]. Vijaykarthigeyan, K. T., & Giriprakash, A. (2019). Green HRM practices followed by selected service sector industries in Coimbatore. *International Journal of Recent Technology and Engineering*, 8(2), 659-662.