

# Standardization of Process for Soft Skill Competencies Training Program for Future Health Care Administrators to Enhance the Quality of Care

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## Abstract

A training program for healthcare managers on soft skill competencies enhances knowledge, attitude, practices, skills, and abilities. The objective of the study is to assess the process and develop steps, and suitable methods to adapt the standardization of the training program. To enhance the quality of care in the healthcare organization, training of the workforce has to be effective and need-based. The process needs to be set in by conducting relevant literature searches and by taking relevant suggestions from industry experts and academic personnel. The study is conducted by taking expert opinions regarding the standardization of the process for the soft skill training program for future healthcare professionals. The study results conclude by developing a framework of standardization of the process for soft skill competencies training programs for future health care professionals which is specific and appropriate as per the policies and procedures of health care organizations. The organizational impact on the health care professionals to enhance their standards in terms of competencies, skill-sets, and health care and safety at the workplace. These trainings aid in building human capital management metrics such as employee engagement. This adds to a social pillar by building relationships with the company with the stakeholders. This training and development provide an opportunity to show leadership incentivizes to align with the stakeholders to promote transparency and accountability. The training program articulates that an organization is led and managed with continuous improvement of employees, which in turn leads to corporate governance and corporate sustainability.

**Keywords:** Training, Standardization, Health Care, Quality, Soft Skill Competency

## 1. Introduction

In today's health care management, which is a service sector, with effective strategies in quality improvement programs, soft skills have a variety of usability which is expanding exponentially. These are value-added activities that are usually provided to medical and para-medical personnel for better measurable outcomes in terms of quality care and patient safety is considered (Pronovost, Sutcliffe, Basu, & Dixon-Woods, 2017a). When these skills are adopted by the health care management personnel, the working culture becomes well-defined, and a systematic and conducive environment is created for proper clarity in communication. A well-laid understanding of the working pattern can be adapted by a multidisciplinary approach with repeated training.

In this era of evidence-based medicine and practices, competencies mapping and skill enhancements are used as a tool that has contributed to providing quality care in healthcare organizations. It has a wider scope in training and development and continuous improvement for inculcating technical skills. The use of soft skills has a larger dimension in incorporating the patient-centricity concepts for their benevolent measures. This pays way to build company relationships with internal and external stakeholders as a social pillar. The human capital investment metrics (HCM) as employee engagement has a huge impact on health care professionals. These training programs enhance the environment of the organization and also the employee standards. This helps in building company relationships with both internal and external stakeholders. These enhance internal controls and standards of the health care organization. The training programs promote

participants' transparency and accountability as a part of leadership.

### Importance of the Study:

**Need for training healthcare care team members in soft skill competencies for better quality care:** Healthcare management aspects require intense thought process improvement (Wiedner, Croft, & McGivern 2020a). All value-added activities in healthcare management (Bakir, 2014) have to be structured. The service industry requires intense planning and execution. The day-to-day activities are a series of tasks, which are planned and executed. Knowledge, attitude, and practices (KAP) are of utmost importance for every touchpoint in the patient care area (Rav-Marathe, Wan, & Marathe (2016)).

**Overview of the training program:** Over the last few decades, there have been fruitful efforts in developing optimization models for solving healthcare management problems and improving the quality (*Delivering Quality Health Services*, n.d.) of inpatient care areas. With well-defined roles and responsibilities, the intensity of training is to be customized as per the defined job role (Crawford, 2004). The specific set of skills is to be imbibed and cultivated as the industry is making a fast phase to patients' delight and outcomes (Paper-Simulation as a Tool 10, n.d.).

Step 1	Develop Requirements
Step 2	Write and Document Requirements
Step 3	Check Completeness
Step 4	Analyze, Refine, and Decompose Requirements
Step 5	Validate Requirements
Step 6	Manage Requirements

Table 1. Steps of Standardization of process of the soft skill training program.

Use of competencies and soft skill training and its benefits: The first step in skill development and training program implementations is a required survey.

**What are the impacts of the soft skill competencies and management roles in hospital settings:** The need and requirements-based study on competencies and soft skills as training and development as newer techniques that are undertaken for the betterment of the organization at large. Under proper leadership by mentors, with well-laid strategies, well-defined systems are created leading to well-defined outcomes that aid in training and development, and capacity building.

The use of competencies is identified that helped in skill enhancement programs. Betterment of communications skills for developing a discussion, interpersonal skills, and bridging and upskilling the team-building competencies. Skills of decision-making and problem-solving attitudes can be learned. Functional, technical expertise, and competency skills are uplifted.

The learnings have become an experiential and hands-on program that is concept-based to improve the quality of care in the service industry. Communication skill enhancement can be used in healthcare management aiming at studying how to improve quality and safety in healthcare from the patient perspective who are the end-users. The training program improves employees' safety standards which in turn leads to corporate sustainability.

## 2. Review of Literature

### 1. Framework of literature search:

**a. How the literature search was performed:** To identify the resources for research, some multidisciplinary databases were identified. With a broad search of literary journals, the access was performed online. Some of the databases that had full texts were identified and contents from various abstracts, mixed, and full texts were sorted as resource materials.

Among these multidisciplinary databases, it is restricted to the subject-specific database, and their relevance for analysis was categorized. Boolean operators used "AND, OR, and NOT" were utilized for searching the research as a framework. The "AND, OR" is used to connect and combine the terms in the research documents to know the competencies and skills involved in the healthcare management sector. The "NOT" operator is used to exclude the terms from the search for the databases.

By using specific keywords for the research thesis and streamlining the source-gathering process, and also by identifying relevant literature keywords that are listed, search for relevant sources through the university library and/or databases like Google Scholar, JSTOR, EBSCO, and field-specific databases like Project Muse and EconLit are utilized. By using relevant keywords, such as "Communication skills, Competencies for health care managers, Soft skill training modules, and Enhancing patient care", a literature search was continued for appropriate literature as databases and references.

By linking the terms together such as "AND" or connecting the word "OR" and by linking two terms were undertaken and a

search was undertaken. By reading a quick preview of each source (and taking note of recurring authors, contributors, and citations) the search was pared down and the list to a collection of works that provided the data, insights, and additional content that was needed to conduct the research was identified.

Other literature search options utilized: Along with the Boolean terms for searching, search strategies for other options that include Proximity indicators such as NEAR, ADJ, and PRE were utilized. The truncation which is also called Wild card symbols (question mark? and Asterix\*), hyphen (-) were utilized. The specialized options (EXACT or SAME) were also utilized for the literature review and search.

The keywords search utilized, such as “Communication skills, Competencies for health care managers, Soft skill training modules, and Enhancing patient care”, were the keywords that were adapted to do the literature search.

Indexed database search was utilized by using the one that had subject headings and topics mentioned specifically as per the terms. The indexed databases are manually applied to every individual citation. The subject headings that are related to the search were utilized. Adding keywords and related domain-specific topics to the search has enhanced the chances of retrieval of research materials. By using the keywords and subject-specific headings the relevant research articles and reference material as publications are obtained and were utilized for citations appropriately.

The number of articles and research journals that were identified is 128 as a bank and saved in the reference manager tool. Among these, specific references of 34 articles are utilized as appropriate once for citations.

The framework for documents and literature review used is as follows: Depending on the subject and specific area, the resources were chronologically identified and listed. The sources were organized according to the specific themes. Accordingly, by creating the shared themes and research review journal publications were identified and categorized. The citations for the research publication were utilized for developing insights and understanding the concepts related to competencies and skill sets that are required for healthcare managers.

**b. The reasons for the in-depth literature search were performed:** To identify, understand, and analyze as to what are all the sets of competencies that are required for future healthcare managers to inculcate. To answer the question: How to adapt to their skill developments and enhancements for their career opportunities? This supporting literature search was undertaken.

In health care management, competencies are acquired through skill development programs or Management development programs (MDP)/advanced management training (AMTs). They are structured in the B-school as experiential learning programs with hands-on training and as corporate readiness programs to empower and enhance the students' outcomes. These trainings are conducted at regular intervals for providing specific skill developments.

## **2. By literature search on the relevant website, the specific skill sets that are important and that can be imbibed were as follows:**

**a. Identification of competencies as soft skills:** Competencies are identified as a

training and development tool and as an experience for the participants. It can be used to improve the quality of care in the healthcare management sector. Different types of soft skill development techniques can be utilized for the betterment of care, cure, and communication aspects.

By creating scenarios for regular normal working conditions and exclusively for emergencies, process improvisation can be achieved. By utilizing communication as a skill set, the tool helps in improving the quality of health care with measurable outcomes, it is a promising approach to be used for improving patient safety in healthcare organizations. The important and relevant competencies that were identified specifically from the literature search are as follows:

- Communication skills, interpersonal skills, and bridging the team-based competencies
- Skills of decision-making and Problem-solving attitudes
- Functional and technical expertise skills.
- Patient flow monitoring and tracking by minimizing health care costs.

These competencies were identified, to bring quality to healthcare service delivery and patient satisfaction.

**b. Importance of Quality in health care:** Priority in clinical care is focused on specific areas of patient safety and quality care through communication. The knowledge, skills, and attitudes of healthcare professionals can be transformed with the use of training techniques. By detecting the risks and the consequences in the process of quality assurance, we can improve patient-centric approaches (Mouncey, 2015). Risk assessment and management for system flaws detection and process improvement

will help in risk mitigation. Recreating the scenarios for training has a multifaceted approach that aids in improving the quality of health care (Tartaglia Reis, Paiva, & Sousa, 2018).

The training tools have a variety of functions in health care to improve the day-to-day operations and betterment of quality. This process will aid in enhancing the patient flow and minimizing healthcare costs. This will bring quality to service delivery and patient satisfaction. By using these techniques and optimization, we can deliver better productivity at work. This invariably leads to an increase in the number of patients that are satisfied and enhances the profitability of the business of healthcare. So, through better communication, a better value proposition can be achieved from a business perspective in healthcare organizations.

By understanding the needs and requirements of the healthcare organization, the training sessions can be planned and executed properly. The need of the individual and the department's mission and vision has to be in alignment with the organizational goals. Management finds it conducive to having a structured plan of action with proper strategies and systematically implementing the same. By analyzing these training programs, the understanding is better on the leadership skills and align with the stakeholders' expectations. The training programs also have a viewpoint on the employees as their rights/managers' viewpoints. This training is honored as internal checks and balances and internal controls exist. These components are built as a safety measure and to inculcate corporate governance.

**c. The necessity of health care teams:** A multi-disciplinary team comprises: the



core clinical team which is aided by a contingency team, a coordinating team, an ancillary and support services team, and general administration. These teams strive to deliver better patient care in terms of quality and safety (Lamé, Dixon-Woods, & Dixon, 2020). When their ideas and works, get sink and match together, better outcomes are factual. Adopting evidence-based practices, technical skills for better performances, and soft skills as a quality helps to play a pivotal role in developing proper communication (Markides, 2011), situation monitoring (Opinion, 2010), and mutual support (Bridges, Sherwood, G., & Durham, 2014), and developing the creative style of leadership (Vohra, Rathi, & Bhatnagar 2015).

**d. Documentary search with specific concepts:** The concept of upskilling has been prevalent in health care for ages (Commonwealth Productivity Commission, 2017). Skill development is an integral part of the training and development program in the talent management area (Sachan, 2017). The mode of training has to be structured as per the need and the requirement of health care services (*Delivering Quality Health Services*, n.d.). Situational and scenario creation in training by adaptation is not new to the health-care domain. Training and development as a tool have been utilized in aviation practices for a long time (Goteman & Dekker, 2006).

By definition, situation creation and scenarios performed mean mimicking real life (Poola, 2017), or the situation is created that is similar to the actual potential of near normal (Bostrom, 2003). The functioning of one system or process is as per the requirements to aid in training to near normal situations (Nishijima, Wisner, Holmes,

2016). As we can examine the situations; the problems are solved with the help of technology and computers for process setting (Shudo, n.d.). One can examine the problem and not be subject to direct experimentation, which is risky. In health care, the training is to be conducted in a conducive atmosphere (Thibault, 2016) and not risk the lives of the patients (ANA Center for Ethics and Human Rights, 2015).

The WHO definition of patient safety is “Prevention of errors and adverse effects to patients in association with health care” (La Pietra, Calligaris, Molendini, Quattrin, & Brusafarro, 2005). It is said the basic concept in health care is not to do any harm-*primum non-nocere* (first, do no harm) (Stoller, Inayat, Sultan, Lingard, & Levinson, 2020). Multiple studies show that patients are at risk and are harmed (Gesme & Wiseman, 2012), which can be preventable (Stoller et al., 2020). The preventability can be accounted for by learning and by providing attention and appropriate supportive care (Brazil et al., 2008). We are moving on the path of “Not to err” and enhancing patient safety and confidentiality (Tartaglia Reis et al., 2018). The training and development have provided provision for continued and repeated provision for practice to make it adaptable and more approachable. The ability to minimize and reduce errors (Becher & Chassin, 2001) has made health-care management build modules (Berridge, 2014) and techniques for improvisation (Hoffmann-Longtin, Rossing, & Weinstein, 2018). The risk to the patients as well as to the learners is to be minimized and mitigated. The opportunity for reshaping the care delivery aspects has repeatedly been streamlined for better process control by healthcare authorities for improving efficacy and efficiency (*Efficacious\_Versus\_Effective\_What\_s\_in\_an*, n.d.). By creating

clinical pathways, the moments of patients are well planned and streamlined.

### Objectives:

1. To identify the soft skill competencies that are required for enhancing the communication skills of future healthcare administrators in the hospital sector.
2. To understand the training program followed in health care organizations.
3. To study the soft skill competencies training program and ways to standardize in health care organizations.

## 3. Research Methodology

The research paper is descriptive in nature.

### Source of Data:

1. Literature research on the relevant website.
2. Documentary search with specific concepts as training manuals.
3. Semi-structured interviews with experts in the hospital and health care management sector and inputs and suggestions from academic experts.

**Study Setting:** A structured methodological approach in developing a complex intervention health care setting is been incorporated. It includes the evaluation of search results by the subjects that are specific to the field of research. It aims to analyze how the personnel of health care management develop their skills and management competencies. This is a focused group approach that is undertaken in this research (Katherine Garzonis, 2015) In the focused group discussion, which was conducted systematically, the purpose was to identify and discuss the soft skill

competencies that are required for health care managers. The results depend upon the study subject's response and also the gaps in the literature reviews.

**Study tools:** Based on objectives, a set of questions were asked to understand the set expectations in the competencies and soft skills that are relevant to today's era in the healthcare sector. To explore the research domain, specific research questions were asked by gathering focused and contextual data from stakeholders and experts in the healthcare management sector.

This helped to gain insights, improve domain-specific understanding, and learn from the personal experiences of the interviewees. This also allowed them to present themselves during the interview.

### Steps that were involved in conducting the semi-structured interview:

1. A list of expected interviewees was created along with their designations, organizations, and relevant qualifications with healthcare management experiences.
2. A set of short, open-ended questions as a bank was developed before the focused group discussion. This included general and open-ended questions that had easy-to-understand terms and terminologies that would encourage open discussions.
3. The bank of questions as a list was categorized into smaller sections and had been shared 2 to 3 days in advance with the interviewee.
4. The interview was structured with a start of simple questions and then followed by more complex questions at the far end of the interview with a systematic approach.

5. Listening and understanding carefully for unexpected answers and having a free hand for further explanations was an ingredient at the meetings. Making a shift for unexpected topics if necessary and required was also thought of.
6. After the interview, a meeting of a round table with colleagues and academicians was conducted to discuss all the topics that went well what went wrong, and how can we improve the next interviews.

**Standard Operating Process used for semi-structured Interviews:**

1. Identification of stakeholders and health care consultants with experience in the administration sector from a pool of contacts.
2. Determining the number of interviews to be conducted.
3. Interview preparation: Contact correspondence, obtain permission to communicate, schedule an appointment, agree on where the interview is conducted, confidentiality, and consent form for performing the interview.
4. Prepare for online video recording of the interviews and their equipment, IT technical support obtained through proper channels, and prior permissions for the same.
5. Contact the respondent to confirm the date and time of the interviews.
6. A set of questionnaires was prepared for the interview which had both open-ended and closed-ended questions which gave precise and logical reasons for the answers.

**Results:** To assess the face validity of the training process, 12 experts in the field of health care management as external and industry experts and 12 teaching faculty who were professionals evaluated the

course content, module framework, semantic, cultural, and conceptual equivalence of the training program.

As primary data, the cumulative responses of the experts are taken as the narrative essence and mentioned below:

**1. By asking the subject experts and industry experts to validate the training process:**

As hospitals are labor-intensive organizations and health care management is multi-dimensional in operational mode. The present trends are to combine the hospitality component of a star hotel with health care with complex patient care. To enhance the level of care, training in hospitals is integral and is performed specifically for the targeted group of professionals.

A big question was put forth: **So, what is needed in the training and why?** By using the training manual and asking the subject experts' opinions and discussion to validate the training process, semiformal, semi-structured interview sessions with pre-defined questions were asked and the inputs and specific suggestions received are mentioned as follows:

- A) **How can the trust deficit be narrowed in hospitals?**
- B) **Importance of soft skill training among the hospital personnel, and its implementation.**

Some hospital chains are trying hard to reduce the trust deficit. The dissatisfaction rate was about 72% for non-medical and paramedical aspects such as misbehavior of staff, issues in quality of care, and billing disagreements. More worrying and a bigger ice-burg for hospitals was that 67% were dissatisfied with medical care. "Medical negligence, apathy, inadequate and ineffective communication" were commonly used



words in the patient's posts and bystanders' feedback. To build trust, corporate hospital CEOs asked doctors to take a call on ordering a battery of tests or a family test when they prescribe anything: Do the actions and decisions impact one of their family members as patients in the same shoes and they feel uncomfortable? Better to avoid or not do the tests. Some hospitals have their phone numbers and email addresses displayed to establish trust and for patients' convenience to complain. Any untoward incidents and complaints should be verified through CCTV footage, as cameras have been installed at different locations and action can be taken immediately, As said by one of the medical directors who was a subject expert in the panel. There is one point of contact as a patient welfare officer who visits the inpatients when admitted. Patients are encouraged to speak up to the guest relations officer in case they have a problem. There are many such consumer websites, for example, MouthShut.com, which analyze consumer feedback. Any benevolent moves by a company as a healthcare organization to enhance the internal processes have to be welcomed. As most private providers sector accounts for two-thirds of all the hospitals in India which is one of the major sub-continent. To build trust, strategies are plenty, but optimization of resources needs to be sorted out.

The important questions are regarding the Art of soft skills:

- **Do we need or is there a requirement for communication skill training?**

Most professional doctors/Paramedics assume and believe that they have good communication skills and are good communicators too. There are reports of several embarrassing situations faced when the communication skill sets are evaluated.

These also have led to unhelpful behaviors in healthcare organizations. As per the subject experts' suggestions which states that there is a need and requirement for exceptional communication skills. There is a need to sharpen the skill sets that are already present, as honing these skill sets is a continuous improvement process.

- **Why are soft skills important in the hospital and healthcare management sector?**

As health care and hospitals have to function in a competitive market, soft skills are necessary. It helps to reduce the risk of litigation and fosters goodwill and relationship-building with the patients and their family members. Communication bridges the gap between the healthcare provider and patients. Adequate and effective communication is a prerequisite for conflict management and moderating discussions.

- **Is there a need for a Humane approach to patients?**

The new age mantra in the healthcare sector is consumerism which has made global advancements in all service industries. Health care is no exception as consumer satisfaction, consumer protection, and patient safety components are necessary. For effective, relevant, reliable, interpersonal communication (IPC) training and teaching the staff periodically is the utmost requirement and essential. Communication as interactions and the actual "therapy" begins at the entrance of the gates of the hospital. Credibility in Communication commences from the time patients and their families ask for information/appointments for consultations. An integrated approach involving the staff from ambulance assistants to word boy to safai-wala/housekeeping personnel to nursing assistants to nursing staff

to medical officers to specialists, therapists, and super-specialists to hospital managers to top management personnel.

- **What is meant by an integrated approach a humane approach to patient care?**

The various tiers are involved to guide the non-medical personnel (Customer care receptionist, ambulance support group and assistants, drivers, etc.) patients are received at the reception. To clarify whether adequate, relevant information and guidance are provided to patients. It involves how exactly the patients and caregivers are handled by nursing staff and nursing officers from the starting process of admission till discharge. Hospitals aim for seamless transactions that are flawless, risk-minimized, and error-free.

People in each tier should show dignified behaviors and effective communication skills to provide the patients with proper care and good health support and make the hospital stay/visit hassle-free and less painful. The goal of the integrated approach is to create an atmosphere where the hospital name and public image and the services rendered leave a trail of a good memory and help to build respect for the medical community. This is teamwork where the strength of the chain will also have its weakest links.

At the professional level for the doctors, it involves what treatment/therapy/surgical procedures are meted out to the patients, that are rendered outside the doctor's office at the OPD. To state a few of them, how doctors greet them, make the situation comfortable, how they are taken through the process of treatment/healing, how the diagnosis is communicated, the side effects and adverse effects of the drugs and medications are mentioned, how is the break of

undesirable or bad news are to be trained and practiced as day-to-day communication skills. The supporting staff such as the paramedics at the laboratory, the physio-therapist during the therapy sessions, and the pharmacists at the dispensary are all important people in the chain of communication. Their training needs are exclusive and job-specific depending upon the location of work and the role.

- **What do you mean by sending the right message to the hospital as an organization?**

At the outset of the encounter, conveying the expression of care, rapport building, and trust development with the patients when established is the right message. Showing openness, concern shown genuinely, and positive regard, strengthening the bond, and enhancing patient satisfaction from the provider's perspective is the collectively right message. From patients' perspective treatment compliance, truthful disclosures, and belief in the care provided are encouraged is called the right message conveyed. Patients need to develop trust and believe that the treating team is caring and committed to their welfare. The concern of the patients is addressed by both verbal and non-verbal communication.

- **What are the main requirements of Verbal communication?**

The softness of the voice, greeting the patients by use of "Namaste", "Good morning", "Please", and "Thank you", "May I". Maintaining the proper pitch, pause, volume, and avoidance of loud intimidating tones has to be put into practice. Bonding and lead laying with the patients are considered as going beyond and supporting the care and maintaining communication in the comfort zone required.

- **What emphasis is required for non-verbal communication?**

In non-verbal communication- proper eye contact rather than gaze is always better. A pleasing smile with a leaning forward posture reflects a positive attitude. The negative attitude of arms folded or sitting with crossed legs leads to non-bonding with the patients. Dressing shabbily, having untidy looks, and repulsive behavior toward patients put forth a damaging impression.

- **What practical points are the suggestions for training in communication for the health care managers?**

A noisy hospital may be perceived as an uncomfortable environment. Patients perceive the cluttered, unprofessional, disorganized environment as uncaring, uninventable, and uncomfortable at the hospitals. Basic things that make the patients inviting and comfortable to communicate are a clean, calm, seamless functioning environment that provides respect to the patients and is committed to catering to their needs. In the doctor's consultation chamber, a feel comfortable aspect has to be established for the patients. The professional conduct of the doctors has to assist so that the health problems can be shared to provide a solution-based approach. Listening carefully and intensely, clarifying by asking a few questions to clarify the issues for resolving has to be of the utmost importance. To be sure the posture needs to be firm, eye and physical contact have to be supportive, the tone of voice and gesture is to be maintained in comforting the patients, and attitude and manner have to be conducive and respectful to have a dialogue and productive communication has to be emphasized. While documentation or making notes focuses on the

patients, attention should be given to the speech rather than gazing at the window or the floor. It is professional to care for the patients show respect, honesty, and understanding nature, and provide clear, specific, accurate, and reliable information that the patient needs. If there is a paucity of time, communication in a hurried way and impolite or harsh disrespectful behavior has to be avoided. Without causing any offense, cutting short can be done subtly. Rather than being irritable and impolite, it is better to say that there are lots of patients waiting and justice needs to be done to all of the patients, and by saying "Sorry, and to rush through for any fresh complaints?" Any well-mannered and meaningful patients will be able to understand the situation and communicate briefly.

- **What are the common areas in hospital setups that need the utmost attention in terms of communication skill sets considered:**

Identifying the priority areas in the sequence for communication is considered: ICU, Pre-anesthetic check-up (PAC), Operation theater (OT), Surgical wards, during pre-op and post-op rounds are undertaken, and labor and delivery rooms.

- **Where can soft skills be acquired?**

By formal training courses, books that are self-training based, socialization with friends, and colleagues frequently, consultation with members of society, faculty training, and management development programs, Advance management development programs, master class series, and integration with teaching hard skills and technical skill-based programs, webinars, Industry academia consortium, corporate readiness training programs, leadership development training, certificate programs

which are held in hybrid modalities both in-person and online mode, asynchronised and pre-recorded learning management system (LMS) for businesses engagements.

- **What are the advantages of soft skill training?**

While having one-to-one interaction, people take the speaker seriously. Active listening and getting engaged in conversation and dialogue which is influencing, contributing to discussions, influencing, productive negotiation, making impactful conversations, conflict resolutions, and dealing with challenges and difficult people as situations arise.

- **What is the take-home message/ Summary?**

Effective communication may not always be performed naturally. Communication can be acquired as a skill set practiced and implemented as an application for interpersonal communication by following the principles. These ideas could look difficult to achieve initially but to say that the first step is never easy, ultimately putting it to practice matters most.

## 4. Discussion

1. A systematic approach for the training in health care quality as a model with proper sequencing of the training requirements in the hospitals and health care management organizations. It is discussed under four subheadings as follows:

**a. Communication skill-based training:** The use of communication as a skill enhancement in health care management can be included in the following:

- Verbal communication skills, and interpersonal skills for bridging the team-based competencies.
- Skills of decision-making and Problem-solving attitudes.
- Functional and technical expertise skills.

Based on the expert group discussions and suggestions, a framework can be incorporated for implementation. In health care management, resources are to be selected and then procured. For this analysis of the training, the model is required. The decision-making aspects are very integral. The dual advantages are to increase the quality of services and enhance patient satisfaction. By utilization of skill sets as competencies, resource allocation, and applications can be enhanced in the training and development field.

**b. Conducting Semi-structured interviews with experts in the hospital and healthcare management sector:** Making the training specific to the domain and matching the same with the organizational goals is a prerequisite for every business in this fast-changing healthcare setting. To achieve this objective, training must be effective to enhance performance. The solution is to prepare the back-end team/ staff and the training personnel to achieve these competencies & and improve organizational outcomes.

To improve managerial staff's performance, evidence-based training, seamless integration, systematic scheduling, and regular performance tracking will provide better utilization of soft skills. The training for these individuals has to be relevant and constantly monitored to achieve higher productivity.

As a data-gathering process, a semi-structured interview was conducted with 12

experts in the field of healthcare management and communication domain. Their valid inputs and suggestions were considered for the competency mapping and skill development program. The domain-specific knowledge was discussed in detail as discussions.

As there was further classification and clarity needed, subject experts and teaching professionals interacted and a semi-structured interview was conducted for the competencies that can be distinguished as appropriate soft skills that can be taught and imbibed by the health care managers. The entire interview of the focused group discussion was video recorded for documentation and also as inputs and suggestions were incorporated for betterment. The recorded video was re-played in Asynchronized mode to incorporate the inputs and suggestions as ingredients in training module formation.

In health care research and development, the blueprint technique is used as a technique in multicentric study design. For the collection of data, skill set enhancement along with mixed-method strategy and design in a controlled environment will be considered on speaking-up behavior. Researchers consider soft skill competencies to be integrated with a mixed-method strategy to raise the bar of ethics. This will have a distinction in situation awareness, decision making, team building and teamwork, task management, and task completion aspects.

Non-technical communication skills aspects for the frontline managers in hospitals and health care personnel add to their performances. A variety of topics were put forth during the brainstorming session as communication issues related to a hospital. To mention a few, Factors like adversities of loss of sleep, building self-confidence,

and teamwork play a significant role. Team structuring, assembling, identifying, assigning roles and responsibilities, observation and performance tools, holding the team members accountable for patients and families to seek information, specific communication tools like SBAR for doctors and staff nurses, call-outs, check-backs or read-back protocols, hand-over and take over techniques plays an important aspect while adapting simulation tools. Preventing errors, monitoring equipment for safety, error monitoring for a safe environment, task-related support and timely providing constructive feedback to team members for enhancing their efficacy, utilizing assertive and positive affirmative statements, conducting briefings, post-training debriefing role models teamwork behavior patterns, shared mental model, support and task-related providers assistances, constructive feedback to resolve conflicts by two-challenge rule techniques can be incorporated and training can be provided for health care managers as a group activity.

The training manuals and standard operating procedures were referred to for data collection. The inputs for data were collected from the schedules prepared by the coordination team members. The remaining period is spent on data analysis and compilation of the work. Inference of the data was utilized for process improvisation and implementation of strategies in health care management.

**2. Training programs as proposed by hospital personnel:** Many healthcare management sectors require training and proper execution for upskilling. The range is from complex clinical cases to the real use of medical equipment. From simple mask-wearing which requires repeating coaching to complicated surgical procedures, which



require intense training. The learnings of classroom training in real-life situations will enhance accuracy and effectiveness.

One needs to learn, unlearn, and relearn the requirements and techniques of health care management. When we refer to learning, the period needs to be considered and the subjects have to be specific. The skill sets are to be properly defined. The learning curve refers to all these factors concerning the period, individual learning ability, the sequence of the subject taught, concept clarity, and specific skills with proper techniques. Upskill and reskill are integral parts of learning that have been performed strategically.

**a. The Training Goal:** The main goal for training and development is that it brings in changes. Today's requirements are many in terms of improving quality and standards. For upskilling and delivering better outcomes, the training programs are tried on different members of the health care organizations. Piloting the project makes the system robust. The challenges and pitfalls of the process can be tested with the measurability of time and resources. With multiple sessions and performing iterations, from students as participants, we can gauge their knowledge, attitude, and practices.

The trade of health care has been transforming from the past days of care concept to providing a comfort zone in multidimensional approaches. The most important concept is to recognize the individual who has trained in the domine-specific and design-specific areas. In health care management, the modality of teaching and training is to be applied aspects. Each case scenario-based learning adds value to participants and the concepts can be rooted much deeper. These examples of used cases

add value in having different domination of thoughts and perceptions. These give way to out-of-the-box thinking concerning problem-solving methods.

Training tools in health care management are for excellence, which has become the norm for frosting the innate spirit of problem-solving and creating an opportunity for creativity to blossom.

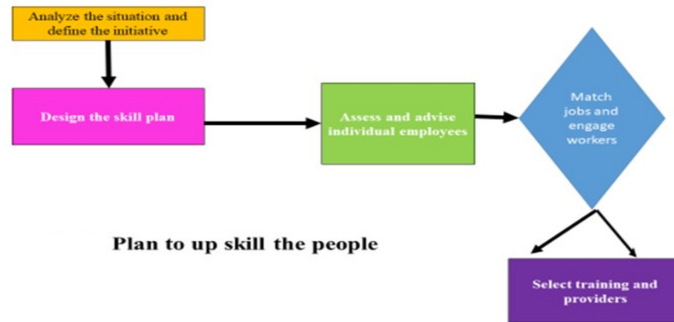
**b. Training tools:** Desktop exercises are convenient to perform and we can draw good learning without the patients being involved.

Comprehensive storytelling as a simulation exercise is effective. It becomes easy to structure the course modules for a better understanding of the staff of different categories.

Changes in a scenario with or without patients are best for implementation of protocols such as evacuation process in disaster management, and implementation of codes in hospitals has been integral. With standard operating procedures in place and with components of quality of caretaking of prime importance, communication during fire safety management, emergency handling during baby abduction, code blue situation handling, external bomb threat, and evacuation process are considered scenario-based training in the process. The logical reasoning and ability to think and act in an emergency have been to be well planned and executed. In health care management, the back-end support system is to be robust and awareness of functionality in the situation aroused with emergencies has to be tackled strategically.

By understanding the needs and requirements of the healthcare organization, the training sessions can be planned and executed properly. The need of the individual and the department has to be in alignment

## ACTION PLAN TO INCORPORATE TRAINING FOR HEALTH CARE MANAGERS:



**FIGURE 1.** Action plan of Training program for health care managers. Authors' source.

with the organizational goals. Management finds it conducive to having a structured plan with proper scheduling and in a systematic fashion.

For the benefit of the health care managers and getting the appropriate deliverables, brainstorming sessions with the team members at different departments will add value. Road maps and the proper agenda of the training programs will have a concrete plan for executions. The learning outcomes and benchmarking become clear for the achievable aspects of the framework for designing, implementing, and evaluating the set process.

**c. Data collection tool used:** Full-scale communication skill is an important component in health care management. Starting from debriefing sessions, the module of the learning program becomes structured and well-planned. Debriefing focuses on the involved process with the development of cognitive behavior. The technical level of understanding can be enhanced multiple times. The learner can adapt to the soft skill module and constructively build

the response without any stressful situation. The evaluation process becomes more robust with a well-defined framework.

Technological advancements, changes in communication patterns, and an innovative mindset will bring a change in business demands. The diverse skills, qualities, and right attitude help to bridge the gaps in training and development programs in health care management.

With an estimated 80% of medical errors resulting from miscommunication among healthcare teams, organizations can significantly improve outcomes with better communication. A communication methodology outlines the essential information clinicians and health care managers need to share, giving care teams the knowledge, they need, when they need it, to make informed treatment decisions.

### 3. Analysis of the training program:

**a. Critical thinking and logical reasoning:** There are qualities such as critical thinking and logical reasoning that are enhanced with a soft skill module as a training tool. Teamwork and organizational

developmental skills are incorporated. With the advent of information and technology, skill enhancement has become a part of day-to-day activities.

Learning and concept retention capacity is better when soft skills such as communication tools are used as quality tools in health care management. Repeated practice sessions will allow the mindset to be transferred from the training session classroom scenario to a real-life situation and diagnose the educational need appropriately. Communication skills as a tool in training offer useful opportunities to reduce risks to patients and enhance patient safety. Learners are in a safe zone for experimentation. This is to improve learners' competence and confidence. This tool reduces health care costs. The trainer can make mistakes too. To avoid these mistakes, standardization is required which leads to a better approach and redefining the processes for refining the modality.

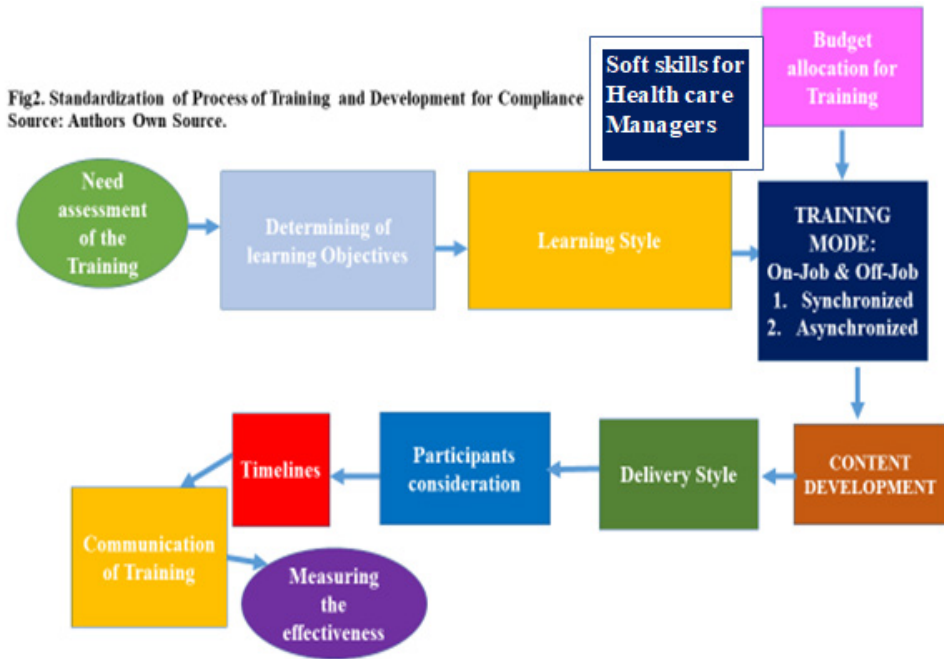
Embracing the diversity of ideas and ideologies from the perspective of board members, directors, and future healthcare professionals, helps in tracking their performances. There is a combination of values with organizational-led values with the investment of time. This leads to corporate transparency and governance.

**b. Scenarios and developing new entrants:**

There are multiple opportunities for innovation in health care management. With the increase, inclination in process management and research is always evolving and expanding. With the intensity of the growth of knowledge and technological advancements, the expectancy of the people has broadened. In-depth planning, monitoring, and executions are required. Formulating training programs can improve the life expectancy of humankind. There are new

dimensions for the challenges arising. Multiple scenarios do arise for infectious and chronic lifestyle diseases. There is a transition from demographic, and epidemiological to environmental hazards. The contribution of health care professionals has to reshape from basic need-based to a safe and professional manner. The complex situations that arise with patient safety and confidentiality lead to more advancements in training and preparedness for emergencies. When the right amount of training is provided with the right personnel at the right platform with building skills and competencies, it leads to realistic, measurable, and actionable outcomes.

Learning and training are more engraved and entangled in healthcare management schools. Hospitals and healthcare organizations as an industry prefer practical, application aspects. There is a huge gap between training and teaching in management schools. The industry requirements are changing. To minimize the gap, a relationship needs to be built through networking and collaboration. In health care management, the communication skills technique is a learning tool for a valid process setting and structuring the training components strategically. Health care is a pool of diversified people who are exposed to different situations and the personnel is of different categories. During the point of greater risk for the patient care process, training in communication skills mode is vital. Competency-based education is desired as a tool for the training on technical and nontechnical aspects under a standardized training plan and by using a controlled environment for the evaluation process. The resources and elements that are desired can be planned for interventions. The experiences can be incorporated into a safe modality. Healthcare systems are



**FIGURE 2.** Standardization of process of training program: soft skills for health care managers. Authors’ source.

evolving as complex and putting the patient at risk is not advisable. The medico-legal liability is extremely becoming critical and is becoming a liability issue. These incidents are provided as an educational topic in the curriculum of health care management. Communication as a competency and as an acquired skill for development allows important amalgamation of organizations and between countries for collaboration and networking to provide better job opportunities. These training programs are beneficial as pro-social and good corporate governance to health care industry. These trainings develop companies’ relationships with internal and external stakeholders as a social pillar. These help enhance workplace conditions and aid in the betterment of employee safety and well-being. It enhances the standards of oneself

and brings good governance to the society at large.

### Findings of the training program:

**As an integrated model, imparting the soft skill competencies along with hard skills by using training manual and standard operating procedure.**

The Research study usually involves taking relevant data from a review of existing materials (text material, publications, review articles, project report), and survey planning tools were incorporated.

- a) **Standardization of the process of training and development for compliance:** As a depiction, a flow diagram representing the standardization process with each important step:

**b) Study variables:**

- All parameters from the Training manual and training schedule checklist and internet access.
- Awareness among Health care Managers was observed
- Implementation and the working behavioral pattern were monitored
- Maintenance of standards was incorporated
- A regular prospective evaluation was performed

**c) Outcome variable:**

- Improvement of Training and Development and productivity
- Elimination of unwanted steps and additional Training needs and participants' unintended desires
- Optimization of resources and a safe environment.

with industry experts and academicians, training and development programs can add value to learning.

6. These training programs are building blocks of social pillars and also help in developing transparency, accountability, and leadership skills.
7. These training programs provide insights into employee engagement as abenevolent measure of human capital management (HCM) metrics. To build and have an impact on the organizational relationship with the stakeholders, these trainings are a necessity.
8. The training programs are inclined to view employee-led safety standards and corporate sustainability.

**Ethics:** Ensuring that the contents incorporated in this article are the original work of an author and contain unpublished material. The research article submitted for publication is carefully read by the author and is for publication purposes. There are no ethical issues involved in this research article.

## 5. Conclusion

1. To enhance competencies in health care: Training helps in enhancing the competencies in health care management as experts in the medical field, as managers while communicating, and as a collaborator during mergers and acquisitions for health care organizations.
2. This helps us to develop professionalism and build trust and confidence.
3. The training mechanism is pronounced for incorporating health advocacy. Communication competency makes us a facilitator and refined collaborators between front-line healthcare professionals and healthcare management.
4. Standardized training can be for the hospital staff and health care organization to help in enhancing safety measures.
5. Understanding the situations and trends is more important. Through interactions

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