

## Research on The Administrative Skill Level of Hospital Managers: Ankara Example

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**ABSTRACT: Objective:** This research was carried out to reveal whether hospital managers have adequate managerial skill levels.

**Material-Method:** 184 managers from 233 managers contributed to the research. “Managerial Skill Scale” developed by Sperry (20) and adapted to Turkish by Şimşek (22) was used. In the data analysis, t-test and Kruskal Wallis H-Test, Mann Whitney U Test and Correlation analyses were used with SPSS 23 program.

**Results:** Managerial skill levels of hospital managers; highly developed ones, “communication” (15.99±2.04), “agreement” (16.98±1.67), “leadership” (16.61±1.98), and “making recommendations and negotiations” (15.96±1.49). Advanced level skills; “Motivation” (15.26±1.89), “loyalty” (13.71±1.99), “team performance” (16.01±2.01), “delegation of authority” (12.88±2.10), “strategic thinking and decision-making” (16.04±2.01), “budgeting” (14.89±2.77), “financial and human resources monitoring” (15.17±2.99), “Compliance with institutional and personal resources” (16.07±2.07), and “time and stress management” (15.38±2.00). 16-20 points were highly developed, 11-15 points improved and those below 10 were considered low Toygar (25).

**Conclusion:** It was determined that 5 of the 13 managerial skill levels of the hospital managers are highly developed and 8 of them are advanced. It is seen that “agreement” is one of the most advanced managerial skill sub-dimensions and “transfer of authority” is the most needed to be developed. As a result of the analyses, it has been found that hospital managers have sufficient managerial skill levels. However, it can be said that the relationship levels of the sub-dimensions should be improved.

**Keywords:** Hospital, Hospital Manager, Managerial Skill.

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### I. INTRODUCTION AND LITERATURE REVIEW

A wide variety of definitions related to management are included in the literature. It is possible to come across various definitions according to each discipline. For example, management scientists have defined it as the authority system (4). Sociologists have defined it as a system of class and dignity (5). Educational scientists, on the other hand, define Erdogan (6) as a scientific basis and a process of personal skills. The accepted management definition with all these definitions is the definition of “seeing business through others” (12). Sabuncuoğlu and Tokol (18), on the other hand, define them as a group of harmonious activities in cooperation with solidarity in order to reach their Management goals.

The managing definition is Tengilimoğlu et al. (24), who is working in harmony and cooperation in order to bring a group of people who are under his command to reach certain goals. Another definition is “someone who works and achieves success through others” (8).

Hospitals are the institutions that are responsible for providing outpatient or inpatient services while forming the basis of the health system (13). While performing these tasks, many functions work together: they can be grouped under six topics: “medical”, “administrative”, “financial”, “technical”, “education and research” and “social services” (14). Hospitals need resources to fulfil these functions. Therefore, a significant share of public resources is allocated to hospitals (15).

Hospital manager; People who manage departments divided into medical management and general management in hospitals are called hospital managers (15).

Managerial competence is achievements with personal skills (21). Hospital managers make easy decisions when they fulfil their duties and responsibilities with knowledge (3). The success of the hospitals depends on the managerial skills of the managers (26).

Today, where managers are unable to solve problems with their traditional abilities, hospital managers are able to keep up with the developments, take more responsibility and give importance to the interpersonal relationship(19-2).

The concept of managerial skills are the skills that differ according to each level of management. Nevertheless, the skills that all managers should have are: "conceptual", "human" and "technical skills" (10). According to Eren (9) the skills that upper-tier, middle-tier and first-tier managers should have are presented in table 1.

**Table 1: Managerial skill levels**

Upper Management	Technical skill	Communication skill	Human Relations skills	Analytical skill	Decision making ability	Decision making ability
Mid-Level Managers						
First Level Managers						

Source: Eren, 2011

**Table 2: Basic managerial skills that must have in health facility managers**

Operational	Strengthening motivation
	Strengthening loyalty
	Maximizing team performance
	Delegation of authority to maximize performance
	Effective management of stress and time
Relational	Effective and strategic communication
	Conflict and difficult people management and negotiation
	Coaching for maximum performance and development
	Maximum performance, guidance and negotiation for improvement
Analytical	Strategic thinking and decision making
	Dominate the budgeting process
	Controlling and controlling financial resources and human resources
	Evaluation of the company and personal resources

Source: Sperry, 2003

In the research, it is aimed whether the administrative skill levels of the hospital managers are sufficient, and the relationship levels of the sub-dimensions of the administrative skill level with each other were investigated. Sperry (20), evaluated the skills that managers should have in healthcare institutions in three main categories: operational, relational and analytical and under 13 titles. In the study, Skills (20) is based on the skills put forward. In this context, the managerial skills required by managers working in healthcare institutions are discussed under 13 titles.

## II. MATERIAL-METHOD

### 2.1. Purpose Of The Research.

The purpose of this research is to reveal whether the hospital managers' managerial skills are sufficient. For this purpose, answers to the following questions were sought.

1. Are the managerial skills levels of hospital managers sufficient?
2. Are the sub-dimension relationship levels of managerial skill levels sufficient?
3. Are administrative skill levels sufficient for administrative tasks?

### 2.2. Universe and Sampling.

The universe of this research is composed of those who work in the positions of senior management in the universities, private and Ministry of Health hospitals in Ankara province (Chief Physician, Deputy Chief Physician, Administrative and Financial Affairs Manager and Assistants, Medical Care Services Manager and Assistants). 184 out of 233 managers from 13 health institutions participated. The participation rate is 78.96%.

**Table 3: Data of the universe and sampling**

Hospitals	Managers in the Universe	Managers participating in the research
1. Ankara Yıldırım Beyazıt University Ankara Training and Research Hospital	42	37
2. Ankara Keçiören Training and Research Hospital	39	34
3. Ankara Dr.Abdurrahman Yurtaslan Oncology Training and Research Hospital	38	33
4. State Hospitals		

4.1. Ankara Kazan State Hospital	37	30
4.2. Ankara Polatlı State Hospital		
4.3. Ankara Ulus State Hospital		
4.4. Ankara Yenimahalle State Hospital		
5. Ankara Mamak Oral and Dental Health Hospital	15	10
6. Ankara Balgat Oral and Dental Health Hospital	15	9
7. Ankara Eye Hospital	16	11
8. Ankara Private 19 Mayıs Hospital	12	8
9. Ankara Private İlkın Medical Center	7	5
10. Ankara Private Yeliz Medical Center	12	7
Total	233	184

Source: The researcher was created by the author, 2019

### 2.3. Data Collection Tool.

There are a total of 75 questions, with 16 questions asking about the characteristics and demographic features of the institution where the managers work, and the managerial skills of the managers are measured. Other managerial skills are “motivation (1-5)”, “loyalty 6-10”, “team performance (11-15)”, “delegation of authority and empowerment (16-20)”, “effective and strategic communication (21 -25)”, “conflict management (26-30)”, “coaching (31-35)”, “consulting and interviewing (36-40)”, “harmony of corporate and human resources (41-45)”, While “time and stress management (46-50)” is measured with five questions, problem-solving and decision-making skills are measured with 25 questions (questions 51-75).

#### 2.3.1. Scale.

The scale developed by Sperry (20) and adapted to Turkish by Şimşek(22) was used to measure managerial skills. The questions regarding the measurement of the managerial skills of managers are “1: Never”, “2: Sometimes”, “3: Frequently”, “4: Always” are rated.

#### 2.3.2. Reliability Values of the Scale.

The internal consistency of the questions in the scale was tested by Şimşek (22) with the Cronbach Alpha coefficient and it was stated that the coefficients ranged between 0.60 and 0.83. In this study, the results regarding the reliability level of the scale are given in table 5. Accordingly, the level of reliability ( $\alpha=0.883$ ) was found high.

**Table 4: Reliability values of managerial skills scale**

	Item Number	Cronbach Alpha Coefficient
Motivation	5	0.825
Loyalty	5	0.816
Team performance	5	0.831
Delegation of authority	5	0.872
Contact	5	0.815
Contract	5	0.809
Leadership	5	0.821
Making recommendations and meeting	5	0.812
Strategic thinking and decision making	5	0.808
Budgeting	5	0.841
Financial and human resources monitoring	5	0.793
Compliance with corporate and personal resources	5	0.805
Time and stress management	5	0.814
Total (All sizes)	5	0.883

#### 2.3.3. Data Collection Process.

Data are from a university hospital, two education and research hospitals, four public hospitals, two oral and dental health centres, two private hospitals, two medical centres in Ankara province between 15 March and 15 August 2018. Gathered between.

## III. ANALYSIS OF DATA

The analysis of the data was done with the SPSS 22.0 (Statistical Package for Social Sciences) program. Firstly, “Cronbach Alpha” coefficient was used for reliability analysis. “t-test in independent samples” was used for the difference between the two averages in the data with no normal distribution, and the Mann Whitney U test and the Kruskal Wallis H test in the data without normal distribution. In the groups with a statistically significant difference as a result of the Kruskal Wallis H test, Mann Whitney U test was used to find out from which groups the difference originated. However, correlation analysis was used to determine the relationship between the sub-dimensions of the managerial skill scale. The results were evaluated within the 95% confidence interval and the significance level was ( $p<0.05$ ).

**Table 5: Average levels of management skills of managers**

	Average	SD	Minimum	Maximum
Motivation	15.26	1.89	9	20
Loyalty	13.71	1.99	7	18
Team performance	16.01	2.01	8	20
Delegation of authority	12.88	2.10	5	18
Contact	15.99	2.04	10	20
Contract	16.98	1.67	12	20
Leadership	16.61	1.98	10	20
Making recommendations and meeting	15.96	1.49	11	19
Strategic thinking and decision making	16.04	2.01	9	20
Budgeting	14.89	2.77	5	20
Financial and human resources monitoring	15.17	2.99	5	20
Compliance with corporate and personal resources	16.07	2.07	9	20
Time and stress management	15.38	2.00	9	19

SD : Standard Deviation

When the managerial skill levels of the hospital managers participating in the research are examined; It is seen that 8 of 13 managerial skills are at advanced level and 5 of them are at highly advanced level. Advanced level skills; “Motivation” (15.26 ± 1.89), “loyalty” (13.71 ± 1.99), “team performance” (16.01 ± 2.01), “delegation of authority” (12.88 ± 2 10), “strategic thinking and decision-making” (16.04 ± 2.01), “budgeting” (14.89 ± 2.77), “financial and human resources monitoring” (15.17 ± 2.99), “Compliance with institutional and personal resources” (16.07 ± 2.07), and “time and stress management” (15.38 ± 2.00). The highly developed managerial skills of the managers are; “Communication” (15.99 ± 2.04), “agreement” (16.98 ± 1.67), “leadership” (16.61 ± 1.98) and “making recommendations and discussing” (15.96 ± 1.49). (Table 6). When the scale is scored (Table 6), the scores that managers get from managerial skills are between 5 and 20. Managers with an average of 16-20 points are considered to be “high” with a high level of managerial skill, and managers with an average score of 11-15 are “medium” with an improved managerial ability, and “management” skills with a score of 10 or below are required to be developed (25).

**Table 6. Correlation analysis results regarding relationships between managerial skill levels of managers**

	1	2	3	4	5	6	7	8	9	10	11	12	13
Motivation													
Loyalty	0.204*	1											
Team performance	0.440*	0.279*	1										
Delegation of authority	0.199*	0.309*	0.279*	1									
Contact	0.349**	0.200*	0.429*	0.348*	1								
Contract	0.317**	0.277*	0.395*	0.319*	0.289*	1							
Leadership	0.357**	0.245*	0.281*	0.380*	0.489*	0.459*	1						
Making recommendations and meeting	0.371**	0.279*	0.400*	0.301*	0.419*	0.449*	0.379*	1					
Strategic thinking and decision making	0.351**	0.089	0.510*	0.299*	0.349*	0.370*	.0519*	0.439*	1				
Budgeting	0.120	0.115	0.349*	0.290*	0.299*	0.278*	0.265*	0.368*	0.519*	1			

Financial and human resources monitoring	0.380**	0.299*	0.480*	0.258*	0.400*	0.389*	0.368*	0.571*	0.509*	0.633**	1		
Compliance with corporate and personal resources	0.279**	0.269*	0.389*	0.379*	0.291*	0.311*	0.471*	0.222*	0.531*	0.369**	0.404**	1	
Time and stress management	0.110	0.115	0.329*	0.370*	0.279*	0.380*	0.321*	0.221*	0.544*	0.471**	0.400**	0.539**	1

\* Significant at the 0.05 level

\*\* Significant at the 0.01 level

As a result of the correlation analysis, between the dimensions of managerial skill levels: There was a statistically significant difference between the dimensions other than the relationship between motivation and time and stress management and budgeting, commitment and time and stress management, budgeting and strategic thinking and decision-making. While the dimensions with the highest relationship level were budgeting and financial and human resources monitoring dimensions, the dimensions with the lowest relationship level were determined between the commitment dimension and the communication dimension (Table 6).

**Table 7: Distribution of managerial skill levels of managers according to administrative tasks**

Managerial Skills	Chief Physician and Chief Physician Asst.		Hospital manager and assistant manager		Medical Care Services Manager and his assistants		KW	p	MW
	Average	SS	Average	SS	Average	SS			
Motivation	15.60	1.49	15.10	2.29	15.19	1.81	0.739	0.689	
Loyalty	13.59	1.92	13.49	2.21	13.82	1.92	0.106	0.950	
Team performance	15.60	1.91	16.32	1.99	15.58	1.94	7.310	0.028	2>1 2>3
Delegation of authority	13.90	1.96	13.56	2.31	13.99	1.96	0.451	0.800	
Contact	15.68	1.88	16.00	2.30	16.57	1.89	4.061	0.129	
Contract	17.44	1.61	17.09	1.86	17.39	1.49	0.719	0.700	
Leadership	16.89	1.89	16.29	1.99	16.51	2.00	2.233	0.330	
Making recommendations and meeting	15.66	1.41	16.39	1.59	16.37	1.68	5.340	0.070	
Strategic thinking and decision making	15.40	2.41	15.62	1.98	15.51	1.72	0.138	0.936	
Budgeting	15.45	2.69	14.81	3.52	15.19	1.76	1.051	0.590	
Financial and human resources monitoring	15.29	2.91	14.79	3.41	14.59	2.61	1.680	0.429	
Compliance with corporate and personal resources	15.89	2.49	15.96	2.36	15.77	2.19	0.139	0.929	
Time and stress management	16.21	2.20	15.66	2.09	15.30	1.79	3.039	0.220	

SD : Standard Deviation,

KW : Kruskal Wallis H-Test

MW : Mann Whitney U Test

p : Meaningfulness

In table 7. “Kruskal Wallis H-Test” was applied to determine whether there is a difference between the administrative skill levels of the managers in their administrative duties. As a result, a statistically significant relationship between managers' motivation, loyalty, authority, communication, agreement, leadership, advice and meeting, strategic thinking and decision-making, budgeting, financial and human resources monitoring, compliance and time and stress management skills averages not found (p>0.05). It was determined that there was a statistically significant relationship at the team performance skill level. (P=0.028). Mann Whitney U test was

performed to determine the source of the difference. As a result, the level of team performance skills of those who are in the positions of manager and vice-manager, and the assistants (assistant chief nurse and assistants) of the Medical Care Services, and the level of skill level of the team performance skills of the chief physician assistant ( $p<0.05$ ).

**Table 8: Distribution of managerial skill levels of managers according to assuming active or passive role in decision making**

Decision Making Managerial Skills	Active Role		Passive Role		MW	p
	Average	SD	Average	SD		
Motivation	15.09	1.96	16.13	1.66	460.00	0.080
Loyalty	13.60	2.08	14.15	1.49	549.00	0.391
Team performance	15.81	1.97	16.01	1.69	643.01	0.991
Delegation of authority	13.69	2.21	14.19	1.39	591.50	0.625
Contact	15.96	2.09	16.84	1.69	466.50	0.095
Contract	17.26	1.73	17.64	1.15	617.00	0.796
Leadership	16.46	2.06	16.89	1.41	598.00	0.669
Making recommendations and meeting	16.15	1.66	16.69	1.14	519.00	0.230
Strategic thinking and decision making	15.51	2.08	15.66	1.55	642.50	0.979
Budgeting	14.99	2.89	15.65	2.10	590.00	0.600
Financial and human resources monitoring	14.59	3.09	16.49	1.39	384.50	0.015
Compliance with corporate and personal resources	15.79	2.39	16.19	1.82	605.00	0.707
Time and stress management	15.58	2.07	16.15	1.85	537.00	0.310

SD : Standard Deviation

MW : Mann Whitney U Test

p : Meaningfulness

In table 8. “Kruskal Wallis H-Test” has been applied to determine whether there is a difference in the active or passive role of the managers in decision-making. It was determined that there was no statistically significant relationship in terms of agreement, leadership, advice and meeting, strategic thinking and decision-making, budgeting, compliance and time and stress management skills ( $p> 0.05$ ). According to whether they take an active or passive role in decision-making, there is a statistically significant difference. As a result, The average of financial and human resources monitoring skill levels of managers who take passive role in decision-making (=16.49) is higher than the average of financial and human resources monitoring skill levels of managers who take an active role in decision-making (=14.59) (MW=384.50;  $p=0.015$ ) (Table 8). It can be said that hospital managers who have an active or passive role in decision-making in general have similar managerial skills.

**Table 9: Distribution of managerial skill levels of managers according to uncertainty faces encountered in their daily decisions and actions**

Managerial Skills	Very Little Uncertainty or No Uncertainty		There is Uncertainty and Many		MW	p
	Average	SD	Average	SD		
Motivation	15.41	1.87	14.49	2.26	574.50	0.194
Loyalty	13.81	1.85	12.91	2.76	580.50	0.210
Team performance	15.99	1.81	14.76	2.39	488.00	0.038
Delegation of authority	14.09	1.87	11.79	2.27	278.50	0.001
Contact	16.39	1.91	14.41	2.39	377.00	0.002
Contract	17.43	1.55	16.71	2.19	599.50	0.276
Leadership	16.75	1.76	15.09	2.69	481.50	0.032
Making recommendations and meeting	16.38	1.44	15.21	2.06	447.50	0.015
Strategic thinking and decision making	15.86	1.61	13.49	2.91	339.50	0.001
Budgeting	15.52	2.39	12.78	4.25	433.50	0.009
Financial and human resources monitoring	15.18	2.51	12.88	4.65	519.50	0.073
Compliance with corporate and personal resources	16.19	2.06	13.89	2.85	377.50	0.002
Time and stress management	15.95	1.91	14.26	2.41	426.50	0.010

SD : Standard Deviation

MW : Mann Whitney U Test

p : Meaningfulness

In table 9, “Kruskal Wallis H-Test” was applied to determine whether there is a difference in the uncertainty situations faced by managers in decision actions. As a result, it was determined that there was no statistically significant difference in managers' motivation, commitment, agreement, leadership and leadership skills. giving advice and meeting, compliance and time and stress management, Team performance, financial and human resources, authority, communication, strategic thinking and decision-making, budgeting, monitoring, and skills differ statistically according to the uncertainty they face in decision actions. (p<0.05).

**Table 10: Breakdown of the works related to the failure to take all of the decisions to be taken at the managerial skill levels of managers**

Managerial Skills	Never		From time to time		MW	p
	Average	SD	Average	SD		
Motivation	15.47	1.89	15.21	1.97	998.50	0.749
Loyalty	14.39	1.61	13.41	2.10	691.50	0.010
Team performance	16.83	1.19	15.51	1.98	551.50	0.000
Delegation of authority	14.59	1.66	13.55	2.16	739.50	0.027
Contact	16.38	2.04	15.99	2.10	944.00	0.469
Contract	17.48	1.49	17.26	1.69	976.50	0.635
Leadership	16.95	1.81	16.40	2.06	907.00	0.319
Making recommendations and meeting	16.09	1.37	16.26	1.71	941.50	0.459
Strategic thinking and decision making	16.05	1.09	15.33	2.21	842.00	0.135
Budgeting	15.16	2.21	15.07	3.02	991.00	0.709
Financial and human resources monitoring	15.25	1.79	14.76	3.30	1032.50	0.959
Compliance with corporate and personal resources	16.09	2.08	15.79	2.38	988.50	0.698
Time and stress management	16.66	1.55	15.38	2.10	645.50	0.004

SD : Standard Deviation

MW : Mann Whitney U Test

p : Meaningfulness

In table 10. If all of the decisions to be taken at the end of the day are not taken, “Kruskal Wallis H-Test” has been applied to determine whether there is a difference in managerial skill levels according to failing jobs. As a result, If managers do not have all of the decisions to be taken at the end of the day, according to failing jobs, there is a statistically significant difference in motivation, communication, agreement, leadership, making recommendations and meeting, strategic thinking and decision-making, budgeting, financial and human resources monitoring and compliance management skills. Not found (p>0.05). If loyalty, team performance, authority, and time and stress management skills are not taken at the end of the day, a statistically significant difference has been determined according to disrupted jobs (p<0.05).

**Table 11. Distribution of similar units by workload in the unit in which managerial skill levels of managers are responsible**

Managerial Skills	Same as other units		Intensive from other units		t	p
	Average	SD	Average	SD		
Motivation	15.61	1.71	14.99	2.10	1.509	0.138
Loyalty	13.61	1.77	13.71	2.21	-0.218	0.831
Team performance	15.89	1.89	15.69	1.92	0.539	0.589
Delegation of authority	13.61	1.59	13.95	2.38	-0.835	0.407
Contact	16.21	1.99	15.99	2.09	0.365	0.721
Contract	17.49	1.38	17.21	1.85	0.979	0.331
Leadership	16.21	2.09	16.76	1.91	-1.469	0.143
Making recommendations and meeting	16.19	1.68	16.17	1.55	0.057	0.960
Strategic thinking and decision making	15.59	1.98	15.39	2.01	0.489	0.619
Budgeting	15.39	2.34	14.88	3.16	0.959	0.341

Financial and human resources monitoring	15.17	2.67	14.71	3.19	0.809	0.421
Compliance with corporate and personal resources	15.85	2.48	15.91	2.21	-0.049	0.958
Time and stress management	16.66	1.56	15.38	2.11	645.00	0.003

SD : Standard Deviation

t : t test

p : Meaningfulness

In table 11. “t test” is applied to determine whether there is a difference in the managerial skill levels of the units that the managers are responsible for and the similar units according to the workload. As a result, it was found that the managers did not have statistical significance in motivation, loyalty, team performance, delegation of authority, communication, agreement, leadership advice and meeting, strategic thinking and decision-making, budgeting, financial and human resources monitoring, and managerial and personal resource compliance managerial skill levels. ( $p>0.05$ ).

**Table 12. The distribution of managerial skill levels of managers according to the level of influence from other units in their daily decisions and actions**

Managerial Skills	Little or no affected		Affected or very much affected		t	p
	Average	SD	Average	SD		
Motivation	15.55	2.19	14.98	1.61	1.389	0.171
Loyalty	13.59	2.27	13.66	1.79	-0.077	0.990
Team performance	15.76	2.10	15.88	1.80	-0.299	0.770
Delegation of authority	13.80	1.98	13.78	2.19	-0.098	0.919
Contact	16.26	2.16	15.97	1.99	0.700	0.488
Contract	17.36	1.80	17.31	1.61	0.241	0.815
Leadership	16.31	2.10	16.69	1.88	-1.070	0.290
Making recommendations and meeting	16.31	1.81	16.09	1.38	0.681	0.500
Strategic thinking and decision making	15.51	1.96	15.49	2.07	-0.098	0.925
Budgeting	15.26	3.02	14.98	2.69	0.509	0.609
Financial and human resources monitoring	15.49	2.88	14.36	2.97	2.035	0.045
Compliance with corporate and personal resources	15.80	2.39	15.95	2.27	-0.345	0.733
Time and stress management	15.24	1.85	15.99	2.13	-1.989	0.051

SD : Standard Deviation

t : t test

p : Meaningfulness

In table 12. “t test” is applied to determine whether there is a difference in the managerial skill levels of managers according to the effect of other units in their daily decisions and actions. As a result, it was found that the managers did not have statistical significance in “motivation, loyalty, team performance, delegation of authority, communication, agreement, leadership advice and meeting, strategic thinking and decision-making, budgeting, financial and human resources monitoring, and managerial and personal resource compliance managerial skill levels”. ( $p>0.05$ ). Financial and human resources monitoring, as well as time and stress management skills, which differ significantly from the level of influence from other units, are observed.

#### IV. DISCUSSION

In the literature, Şimşek(22) and Toygar(25), who obtained similar results with this research, stated that the managerial skill dimensions of managers are positive.

Sperry (20) emphasized that decisions are complex and intense in daily decision actions. Similarly, Şimşek (22) found that hospital managers who take an active or passive role are at a similar level.

Şimşek (22), on the other hand, found that physician administrators, who differed from this study, were the highest in problem solving and decision-making. In this research a statistically significant difference was determined between the level of managerial skills in the disruption of the works related to the failure to take the



decisions to be taken by the hospital managers, according to the skills of “commitment”, “team performance”, “authority” and “time and stress management”.

With similar results with this study, Erdogan (7) stated that the Managers could not make the necessary decisions because they could not obtain the necessary information to make a decision. However, in a study conducted with nurses in Akboğa (1), it was determined that 75.0% of those who performed health management received the inadequate and very inadequate responses.

Şimşek (22) found that there is no statistically difference in the workload of the units that managers are responsible for.

Özkan and Orhaner (16), in their research, simple management practices of managers lead to improvement and improvement between units.

Polzer and Neale (17), on the other hand, stated that the conflicts between the rulers can affect the units and create various administrative problems.

## V. CONCLUSION

According to the questions that the research is looking for answers; The managerial skill levels of the hospital managers participating in the research are as follows; It was determined that 8 of the 13 managerial skills were at an advanced level and 5 of them were at an advanced level. It is stated that the most advanced managerial skills are “agreement” and the skills that they need to develop are “transfer of authority”. As a result, it was determined that there is a statistically significant relationship between the sub-dimensions of managerial skill levels. It can be said that managers have managerial skills to perform their duties, however, they must always improve their managerial skills and keep them updated in order to adapt to developing and changing conditions.

It has been determined that hospital managers do not have statistically significant differences in their managerial skill levels in taking an active or passive role in managerial decision-making. In general, it can be said that hospital managers who take an active or passive role in decision-making have similar managerial skills.

In this research, It was determined that there was no statistically significant difference between the administrative skills levels of the hospital managers according to their administrative duties. The skill that has a statistically significant difference is only “team performance”. It can be said that the difference between the managerial skills and the team performance according to the administrative duties is the harmony of the team members.

As a result of this study failure to take all of the decisions can lead to disruptions. The low level of “loyalty”, “team performance”, “authority” and “time and stress management” skills of managers who disrupt their work reveals that these skills should be improved.

In the research, it was determined that there was no statistically significant difference between the administrative skills levels of the hospital managers according to the units with similar workload.

With this work, it has been determined that the managerial skills levels of hospital managers affect the other units and that include statistical meaning skills are “financial and human resources monitoring” and “time and stress management” skills.

It has been determined that there is a difference in time and stress management skills according to the effect of other units in daily decisions and actions of hospital managers. The stress and time management skills of the managers, who stated that other units were affected in their decisions and actions, were more advanced than those who stated that other units would not be affected. It can be said that managers who think that they will be affected by other units in their decisions and actions are more successful in time and stress management. With this research, it can be said that hospital managers generally have sufficient managerial skills.

In addition, the authorities and delegations of the managers should be clearly stated, plans that are not in line with the hospital mission and vision should not be made, activities should be carried out to increase team performance, and communication channels should be used effectively. Regulations that will increase the loyalty of the employees should be made to increase the motivations to the highest level. The rules to be followed must be understandable and clear. It can be suggested to use the time effectively by reducing the stress level and to obtain maximum efficiency from resources and manpower.

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