

Building Knowledge, Skills, and Abilities (KSAs) for Healthcare Administration Human Resource Management (HRM): A Development Plan

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Abstract

This discussion identifies knowledge and competency areas requiring occupation-specific training for line (department) managers who might assume much of the responsibility in a health-related organization [1,2]. In addition, the discussion highlights where responsibility is best retained by Healthcare Administration Human Resource Management (HRM) professionals [3].

Keywords: *Knowledge; Skills; Abilities; KSAs; Healthcare Administration; Human Resource Management; HRM; Development Plan; Staffing; Training; HR; Learning; Education; Healthcare; Recruitment; Leadership; SHRM Body of Competency and Knowledge; SHRM BoCK*

Introduction

This evaluation includes: (1) the role of line (department) managers in Healthcare Administration Human Resource Management (HRM); (2) the role of the Healthcare Administration HRM professional and (3) the requirements for coordination and cooperation between the two [4-7]. A development plan to build knowledge, skills and abilities (KSAs) for Healthcare Administration Human Resource Management (HRM) is included. Appendix includes the SHRM Body of Competency and Knowledge (SHRM BoCK) [8] and Knowledge, Skills and Abilities (KSAs) Framework.

KSAs requiring occupation-specific training for line (department) managers

In keeping with the Society for Human Resource Management (SHRM) body of knowledge and competency, line (department) managers in Healthcare Administration HRM should possess the following characteristics and training to lead successfully.

Technical competency - HR expertise (HR knowledge domains)

- Workplace,
- Organization and
- People [8].

Behavioral competencies

- Business:
- Business acumen,
- Critical Evaluation and

- Consultation [8].
- Interpersonal:
 - Communication,
 - Strategic mindset/effective individual performance and
 - Successful business outcomes.
 - Relationship management and
 - Global and cultural effectiveness [8].
- Leadership:
 - Ethical practice,
 - Leadership and navigation [8].

Where responsibility is best retained by healthcare administration HRM professionals

Conforming to the SHRM body of competency and knowledge, responsibility is best retained by Healthcare Administration HRM professionals in the following areas,

HR functional areas

- Labor and employee relations,
- Inclusion and diversity,
- Management of workforce,
- HR in the global context,
- HR strategic planning,
- The acquisition of talent,
- Employee retention and engagement,
- Development and learning,
- Total rewards,
- Management of risk,
- Organizational development and effectiveness,
- The structure of the HR function,
- Management of technology,
- U.S. employment regulations and laws,
- Corporate social responsibility [8].

Role of line (department) managers in healthcare administration HRM

The role of line (department) managers in Healthcare Administration HRM should include technical and behavioral competencies important to leading and managing others successfully. In addition, competencies in relationship management can help line (department) managers lead organizations effectively. Line (department) managers in Healthcare Administration HRM can have training in HR functional areas as well. Relationship management is comprised of five sub-competencies which include the following areas:

- Negotiation,
- Conflict management,
- Teamwork,
- Relationship building and
- Networking [8].

Role of the healthcare administration HRM professional

The role of the Healthcare Administration HRM professional should include HR functional areas in addition too technical and behavioral competencies. Furthermore, the Healthcare Administration HRM professional should master competency categories such as leadership and navigation of an organization. Leadership and navigation is comprised of four sub-competencies which include the following areas:

- Influence,
- Managing HR initiatives,
- Vision and
- Navigating the organization [8].

Requirements for coordination and cooperation between line (department) managers and healthcare administration HRM professionals

Although there are many areas and categories where line (department) managers and Healthcare Administration HRM professionals can cooperate and coordinate, the following areas highlight a few main concepts important to successful collaboration in any organization:

- Basic approaches to HR strategy,
- Common HR strategies [4-7],
- Aligning HR strategies with business strategies that are competitive [3],
- Viewing individuals as a strategic resource:
- Creating value through human resources,
- Making human resource management strategic and
- Ensuring equal employment opportunity and safety [4-7].
- Attaining effective employees:
- Designing productive and satisfying work,
- Recruiting talented employees,
- Selecting employees who fit and
- Managing employee retention and separation [9,10].
- Advancing and developing employee performance:
- Developing employees and careers,
- Training for improved performance and
- Measuring performance and providing feedback [9,10].
- Managing and motivating employees:
- Aligning strategy with practice,

- Working effectively with labor,
- Designing compensation and benefits packages and
- Motivating and managing employees through compensation [1,2].

Building knowledge, skills and abilities (KSAs): Development plan

Organizations and individuals can work on building knowledge, skills and abilities (KSAs) in developmental plans addressing group needs and individualistic needs. Professional development plans can be created by organizations to train groups to help employees build on new skills needed in the workplace. In addition, personal development plans can be significant aids in helping individuals build on new skills needed in the workplace. Ulrich, Brockbank, Younger, Nyman and Allen [11] and Lussier [12] identified important various steps involved in developing (KSAs) for professional and personal development plans.

Ulrich, Brockbank, Younger, Nyman and Allen [11] introduced a four-step model for building HR competencies which include the following:

- **Step 1:** Define a set standard or theory. Prepare a statement of what standards are required for HR professionals to be successful.
- **Step 2:** Measure organizations and individuals. Create a methodology for examining how able HR professionals may meet or fail established required standards.
- **Step 3:** Commit to the improvement of talent. Assemble a collection of development activities intended to upgrade HR professionals.
- **Step 4:** Track and follow up on competence. Integrate changes required for HR professionals to respond to increased expectations by applying a developed methodology.

Lussier [12] developed a learning outcome map designed to help HR professionals create one's own human relations plan which could include the following components:

- **Step 1:** Assess personal and professional abilities and skills. Choose a human relations area that could use the most improvement.
- **Step 2:** Develop new skills. Educate oneself by developing the skill to improve by using the behavior to develop new habits. Speak with others for ideas and go to the library to research articles and books on the skill. Invest in taking a course or workshop on the subject. Write down helpful notes on skills one might need to develop.
- **Step 3:** Change one's behavior. Describe what actions might be needed to change one's behavior. Be specific. Examine and assess the habit cue, the changed behavior and the rewards.
- **Step 4:** Obtain feedback and reward oneself. Examine how to obtain feedback on one's changed behavior. Assess how one might know if one has succeeded in changing behavior. Define when and how one might reward oneself for a successfully changed behavior.

Additional plans

Use the same system and develop additional plans if one believes he or she can handle addressing more than one change. However, take the time needed and address each developmental change with education, research, care, due diligence and substance so the results can be lasting and effective.

Conclusion

This discussion identified knowledge and competency areas requiring occupation-specific training for line (department) managers who might assume much of the responsibility in a health-related organization [1,2]. In addition, the discussion highlighted where responsibility is best retained by Healthcare Administration Human Resource Management (HRM) professionals [3]. The evaluation included: (1) the role of line (department) managers in Healthcare Administration Human Resource Management (HRM); (2) the role of the

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Healthcare Administration HRM professional and (3) the requirements for coordination and cooperation between the two [4-7]. Finally, a development plan to build knowledge, skills and abilities (KSAs) for Healthcare Administration Human Resource Management (HRM) was included. Appendix includes the SHRM Body of Competency and Knowledge (SHRM BoCK) [8] and Knowledge, Skills and Abilities (KSAs) Framework.

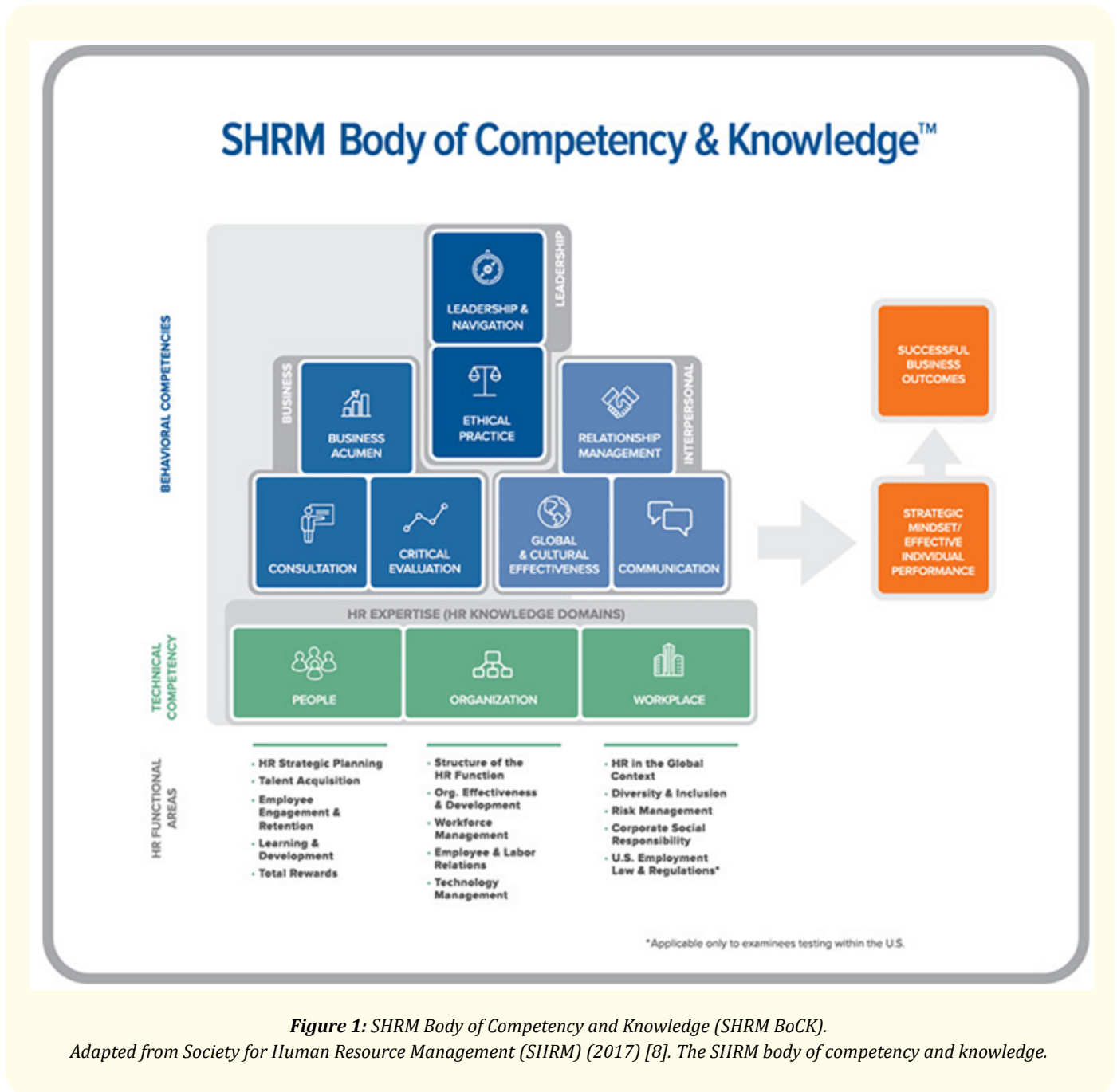


Figure 1: SHRM Body of Competency and Knowledge (SHRM BoCK).

Adapted from Society for Human Resource Management (SHRM) (2017) [8]. The SHRM body of competency and knowledge.

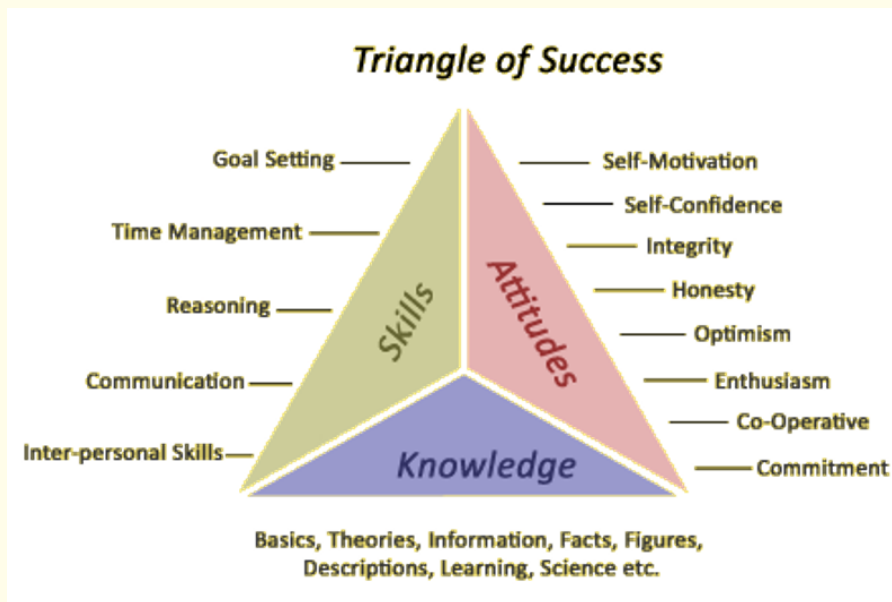


Figure 2: Knowledge, skills and abilities (KSAs) framework #1. Adapted from Lussier R (2019) [12]. Human relations in organizations: Applications and skill building (11th edition). New York, NY: McGraw-Hill Higher Education.

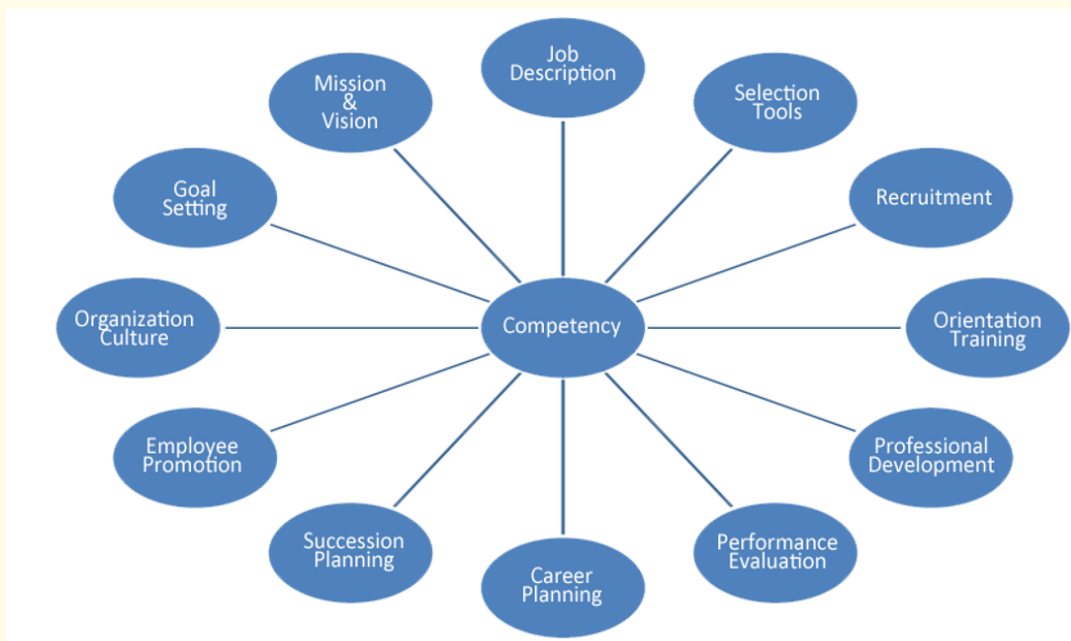


Figure 3: Knowledge, skills and abilities (KSAs) framework #2. Adapted from Lussier R (2019) [12]. Human relations in organizations: Applications and skill building (11th edition). New York, NY: McGraw-Hill Higher Education.

Bibliography

1. Brewster C., *et al.* "The institutional antecedents of the assignment of HRM responsibilities to line managers". *Human Resource Management* 54.4 (2015): 577-597.
2. Gilbert C., *et al.* "Strong HRM processes and line managers' effective HRM implementation: A balanced view". *Human Resource Management Journal* 25.4 (2015): 600-616.
3. Noe R., *et al.* "Fundamentals of human resource management (8th edition)". New York, NY: McGraw-Hill Higher Education (2018).
4. Andersen TJ and Minbaeva D. "The role of human resource management in strategy making". *Human Resource Management* 52.5 (2013): 809-827.
5. Kaufman BE. "Evolution of strategic HRM as seen through two founding books: A 30th anniversary perspective on development of the field". *Human Resource Management* 54.3 (2015): 389-406.
6. Purcell J and Boxall P. "Strategy and human resource management (4th edition)". New York, NY: Red Globe Press (2016).
7. Stewart GL and Brown KG. "Human resource management: Linking strategy to practice (3rd edition)". Hoboken, NJ: Wiley (2014).
8. Society for Human Resource Management (SHRM). The SHRM body of competency and knowledge (2017).
9. Gowan M and Lepak D. "Human resource management: Managing employees for competitive advantage (4th edition)". Chicago Business Press (2020).
10. Nkomo SM., *et al.* "Human resource management applications: Cases, exercises, incidents, and skill builders (7th edition)". Mason, OH: Cengage Learning (2011).
11. Ulrich D., *et al.* "HR transformation: Building human resources from the outside in". New York, NY: McGraw-Hill Education (2009).
12. Lussier R. "Human relations in organizations: Applications and skill building (11th edition)". New York, NY: McGraw-Hill Higher Education (2019).

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