

Effect Of Culture On Organizational Working: An Empirical Study On The Health Care Sector.

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ABSTRACT

Culture is the set of beliefs, attribute and values which the organization employees perceive. It is a set of values not visible but shared by the members of the organization. Every organization bears a culture essential for its growth and identity in the society. A conducive culture effects the working of the employees and hence the efficiency and effectiveness of the organization which eventually reflects on the outcome. Culture can be termed good or bad depending upon the perception of the workers. Culture is an important attribute for the overall development of the organization in today's dynamic environment. Study on the developmental aspect of the organization is limited, particularly on the health care sector. The present study is focussed on the Culture of the health care sector taking into consideration three hospitals i.e. Fortis, SMHS and GMC. The study revealed that the health care sector has a satisfactory environment for OCTAPACE and both the genders perceive the culture of the hospitals to be conducive for working with females being more satisfied than males.

Keywords: HRD Climate, Culture, Openness, Confrontation Trust, Pro-activity, Autonomy, Authenticity, Collaboration and Experimentation.

INTRODUCTION

Every organization is characterized by a different culture. Company's culture is manifested in the values and business principles that management preaches and practices in employee's attitudes and behavior, in the legends people repeat about happenings in the organization. The core of culture is formed by values which are not visible

but shared by people even when membership in group changes. Culture appears to be transmitted among employees through behavioral expectations and normative beliefs than through "deeper" values and assumptions (Ashkanasy, Broabfoot & Falkus, 2000). An organization's culture is an important guiding force in an organization. It grows and remains stable over relatively long periods and is

often discernable at all levels of an organization (Schein,1990; Lundberg, 1996). Shared values and norms focus employees' attention on organizational priorities and guide their behavior and decision making. Individuals may be attracted to organizations they perceive as having values akin to their own. The successful organizations consider the ideal employees as those who have internalized the organization culture into their cognitive and effective make up (Peters 7 Waterman Jr., 1982).

Work culture is an incredibly powerful force that determines how the employees treat problems, opportunities and the people that the organization comes in contact with. Work culture is like the mood of the organization- it can be upbeat or depressing, respectful or belligerent, empowering or stifling-with many shades in between. One can design processes to make people happy, but if those processes are out of sync with the work culture one will miss the desired result every time (Santosh 2012). Culture is the behaviors and beliefs characteristic of a particular social, ethnic or age group. Understanding organizational culture helps to increase the organizational effectiveness and development. Organization culture has an increasing importance because of its impact on employee performance and satisfaction. It helps to

develop strong corporate identity. It is a system of shared meaning .It is the set of assumptions, beliefs, values and norms that are shared by an organizations' members. Culture comprises the symbolic side of an organization and it shapes the human thought and behavior in the system (Subrahmanian 2012).

Organizational culture is being recognized increasingly as an important determinant of organizational performance. Culture serves as one of the most effective managerial control mechanisms in organizations because performance standards are enforced by the employees rather than by top down bureaucratic rules and regulations (John E., Kralewski, Terence D.Wingert, MichaelH. Barbouche, 1996). The culture and support system that cultivates confidence surrounds high performers and helps them avoid temptations. They can put troubles in perspective because they are ready for them. They rehearse through diligent practice and preparation, they remain disciplines and professional. Their leaders put facts on the table and review what went wrong in the last round, in order to shore up strengths and pinpoint weaknesses and encourage personal responsibility for actions. They stress collaboration and team work- common goals, commitment to a joint vision, respect and

support for team members, so when someone drops the ball, someone else is there to pick it up and responsibility for mentoring, so the performers lift everyone's capabilities. They seek creative ideas for improvement and innovation, favoring widespread dialogue and brainstorming. Teams that are immersed in a culture of accountability, collaboration and initiative are more likely to believe that they can weather any storm (Rosabeth 2011).

Thus, establishing a culture of excellence is vital for success, and organizations must review and create a compatible culture for business excellence. In the journey of excellence, the most important facilitator is the people working in the organization. And people are directed by the culture of the organization. Organizational culture is a major challenge that companies face in their mission tracks. Incompatible and weak cultures have proved to be a major obstacle for companies aspiring to be excellent. Most organizations are actually cocooned in time warps. Merely adopting a new mantra won't do. The older mindset has to be shaken up; otherwise it just turns out to be an encapsulated exercise. For transforming people, organization's culture has to be first transformed (Sinha & Arora 2012). (French and Bell 1999)

advance that organizational culture must be fundamentally altered for planned change to become permanent, otherwise organization's return to their old ways. Understanding one's organizational culture, therefore, is an important aspect of an HRD practitioner's work.

REVIEW OF RELATED LITERATURE

Sanjeev and Aditi (2010) conducted a study on the textile industry in the North Indian states of Himachal Pradesh and Punjab covering a sample of 300 permanent employees. The study reflected the presence of a strong value based culture in the organizations under study. The organizations should aim at creating a culture of trust. *Lad & Mark (2002)* surveyed 23 organizations from US air force to assess organizational culture and factors known to influence knowledge transfer efficacy. The results revealed that organizations with cultural traits exhibiting an openness to change and innovation as well as a task centred orientation tend to be conducive to knowledge transfer. Conversely it was found that organizations with cultural traits exhibiting a confrontational and competitive orientation tend not to be conducive to knowledge transfer. Study on 62 banks operating in Delhi and NCR by *Santosh (2012)* found that disciplined and enterprising culture has a far

reaching impact on employee satisfaction. Once this culture is made an integral part of the banks work culture, it will be beneficial for the growth of bank and its employees as well.

Subrahmanian (2012) selected 200 software employees to study the achievement of high involvement and satisfaction through OCTAPACE culture in IT companies. The results revealed that some of the OCTAPACE culture dimensions show values lower than the norms specified and there is variation in dimensions in the organization. Collaboration and trust among employees should be cultivated among employees which is essential for every organization for its effectiveness. Thus, the management should work for developing the organizational culture that requires the culture of OCTAPACE. Comparative analysis of organizational culture: the empirical study of IT organizations in the region of Mohali by *Vaneet, Vohra & Kaur* on 100 employees working in four organizations covering IT sector uncover the culture of the organizations under study. The analysis shows that the employees perceive almost the same pattern in which the various values exist in the organizations. Employees should be considered as important stakeholders as far as organization culture is concerned.

An exploratory study and discussion with experts from BHEL by *Sinha & Arora (2012)* to determine the dimensions of culture required for achieving excellence, revealed that organizational culture profile (OCP) was found to be the best suited culture framework. A structure of empowerment has to be built up in the organization which HEEP presently lacks. *Elisabeth*, studied a community hospital with the pseudonym, Beacon Community Hospital (BCH). As with many hospitals, BCH is open 24 hours a day, 7 days a week, and 365 days a year, which can make workforce management a challenging; it is difficult to strike a balance between coverage to ensure quality patient care and work-life balance for employees. The results revealed that the hospital had a People-centered approach, which includes the properties Respecting People, Recognizing People, and Protecting People. Beacon's culture was highly congruent with values espoused by the hospital. A primary conclusion of this study is that integrating cultural characteristics aligns a pluralistic organization. Participants reported that the hospital valued their opinions and was more democratic in comparison to other organizations.

SAMPLE ORGANIZATIONS AT A GLANCE

Since hospitals are a widespread and an important sector of the society and this sector continuously deals with both, its own human resource and humans from outside the organization, to be managed and handled tactfully. So the study on this sector is important. The sample organizations include; 1) SMHS Hospital Srinagar. 2) GMC Jammu & 3) Fortis Chandigarh.

Shri Maharaja Hari Singh (S.M.H.S) Hospital, Srinagar. The S.M.H.S Hospital was established in 1948 in the heart of Srinagar city as a Government-owned General Hospital to provide patient care to needy patients. In 1959, after the inauguration of Government Medical College on the same campus, S.M.H.S hospital became a major teaching institution imparting undergraduate and postgraduate medical training in all allied specialties of Medicine, Surgery and Gynaecology. Hospital is supported by well organized and fully equipped diagnostic, therapeutic and support service departments.

Government Medical College Jammu. The Govt. Medical College, Jammu, the premier institution for delivery of health care in this region was started in May, 1973 in a temporary building (Barracks), as an undergraduate institution with an aim to train sixty five medical students for MBBS course per

year and to serve as referral hospital for Jammu province. . At present, govt. medical college, Jammu is catering to the patients from whole of Jammu region, parts of Kashmir valley and adjoining areas of neighbouring states of Punjab and Himachal Pradesh.

Fortis Health Care: - The Fortis Hospital at Mohali in Punjab with a 209 - bed capacity was the first facility of its kind in the region. Amongst other specialties, it runs the largest cardiac program in North-West India. The hospital is a super specialty cardiac hospital. It is the largest cardiac care hospital in the region.

OBJECTIVES OF THE PRESENT STUDY

- 1) To study the difference in the OCTAPACE Culture of the sample study organizations i.e. (a) SMHS Srinagar (b) GMC Jammu and (c) Fortis, Chandigarh.
- 2) to examine the perceptual difference in the opinion of male and female staff and
- 3) to draw conclusions and to provide result oriented guidelines and suggestions to the sample study hospitals for improvement of their existing Organizational Culture.

Hypothesis

In consonance to the above objectives, the hypotheses formulated for the present research are as under:

- 1) OCTAPACE Culture in the health care is satisfactory.
- 2) There is a difference in the perception of both genders towards OCTAPACE Culture.

RESEARCH APPROACH AND DESIGN

The tool used for obtaining the information was a 'Structured Non Disguised Questionnaire', a questionnaire was designed keeping in view both major and minor objectives of study. A close format questionnaire was used. Closed format questions offer many advantages in time and money. Questionnaire was used to measure the organizational ethos. This questionnaire is proposed by Dr. Udai Pareek. It consisted of two Sections and 39 statements. Sec "A" consisted of 38 statements, the rating for each to be done on a scale from 5 to 1,(5)=Almost always true,(4)=Mostly true,(3)=Sometimes true,(2)=Rarely true,(1)=Not at all true. Sec "B" sought for suggestions and name, gender, age, pay scale, designation of the respondent.

Simple Random Sampling Method (SRSM) was used to cover employees from

Medical, Administrative, Supportive and Technical cadres in the sample selected organizations. A sample of 100-125 was targeted from each organization covering -**Doctors** including HOD's, Professors, Associate Professors, Asst Professors, Lecturers-**Officers** including Administrative Section ,Materials Management, Library etc-**Engineers** including Civil, Electric, Mechanic, Architect-**Nurses** covering Superintendents, Nursing aids-**Others** covering Operators, Attendants, Technicians, Technologists, Drivers, Gardeners and other fourth class employees. Thus the total sample for the study was 300-375.

DATA ANALYSIS AND INTERPRETATION

Prevailing OCTAPACE Culture in the health care sector.

Table I reveals that the mean score for OCTAPACE Culture falls in the satisfactory range for SMHS (M.S=3.0, 50%) and above satisfactory level for GMC Jammu (M.S=3.1, 52.5 %) and Fortis (M.S= 3.1, 52.5%). Collaboration scores the largest mean score of 3.6(65%) for SMHS. It shows that the organizations have a satisfactory environment for collaboration followed by openness with a mean score of 3.4(60%) for GMC Jammu and Fortis respectively. The element of

proactivity scores the least mean score of 2.6(40%) for SMHS and 2.8(45%) for GMC Jammu. Fortis scores the least mean score of 2.8(45%) for openness. A look at the dimensions of OCTAPACE reveals that collaboration scores the maximum total score (M.S=3.4) for all the three organizations and proactivity score the least mean score (M.S=2.8 & M.S=2.9) for all the hospitals. Maximum statements

score a total mean score >3 depicting a satisfactory OCTAPACE Culture in the health care sector.

Statements 2, 3, 5, 6 and 10 score a mean of <50 for SMHS while as only statements 5 and 10 score a mean <50 for GMC Jammu and for Fortis only statement 8 scores mean <50 revealing that Fortis has a satisfactory OCTAPACE Culture in comparison to GMC and SMHS.

Table I: Prevailing OCTAPACE Culture in the health care sector.

St. No	Statements	SMHS (No. 121)		GMC Jammu (No. 100)		Fortis (No. 70)		Total
		MS	% age	M.S	% age	M.S	% age	
1	People in this organization are helpful to each other	3.4	60	3.4	60	3.2	55	3.3
2	Employees in the health care sector are very informal and do not hesitate to discuss their personal problems with their supervisors	2.9	47.5	3.2	55	3.0	50	3.0
3	The psychological climate of the health care sector is very conducive for any employee interested in developing himself by acquiring new knowledge and skills.	2.9	47.5	3.0	50	3.3	57.5	3.0
4	People in health care sector do not have any fixed mental impressions about each other.	3.1	52.5	3.2	55	3.3	57.5	3.2
5	Employees in this organization are encouraged to experiment with new methods and try out creative ideas.	2.6	40	2.9	47.5	3.3	57.5	2.9
6	Weaknesses of employees in this organization are communicated to them in a non threatening way.	2.9	47.5	3.0	50	3.4	60	3.0
7	People trust each other in this organization.	3.2	55	3.1	52.5	3.0	50	3.1
8	Employees in health care sector are not afraid to discuss or express their feelings with their supervisors.	3.1	52.5	3.3	57.5	2.8	45	3.1
9	Employees in health care sector are not afraid to discuss or express their feelings with their subordinates	3.1	52.5	3.4	60	3.1	52.5	3.2
10	Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors	2.7	42.5	2.8	45	3.0	50	2.8

11	Delegation of authority to encourage juniors to develop and handle higher responsibilities is quiet common in this organization	3.0	50	3.0	50	3.2	55	3.1
12	When seniors in health care sector delegate authority to juniors use it as an opportunity for development.	3.4	60	3.3	57.5	3.3	57.5	3.3
13	Team spirit is of high order in this organization.	3.6	65	3.2	55	3.3	57.5	3.4
14	When problems arise in health care sector, people discuss these problems openly and try to solve them rather than keep accusing each other behind their backs	3.0	50	3.1	52.5	3.1	52.5	3.1
Total		3.0		3.1		3.1		3.1

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.
3. Statements: - Openness= 2, 6,8, 9,14. Confrontation=14. Trust=7. Authenticity=4. Proactivity=3, 5, 10. Autonomy=11, 12. Collaboration=1, 13 and Experimentation=5.

Figure I: Status of OCTAPACE Culture in health care sector.

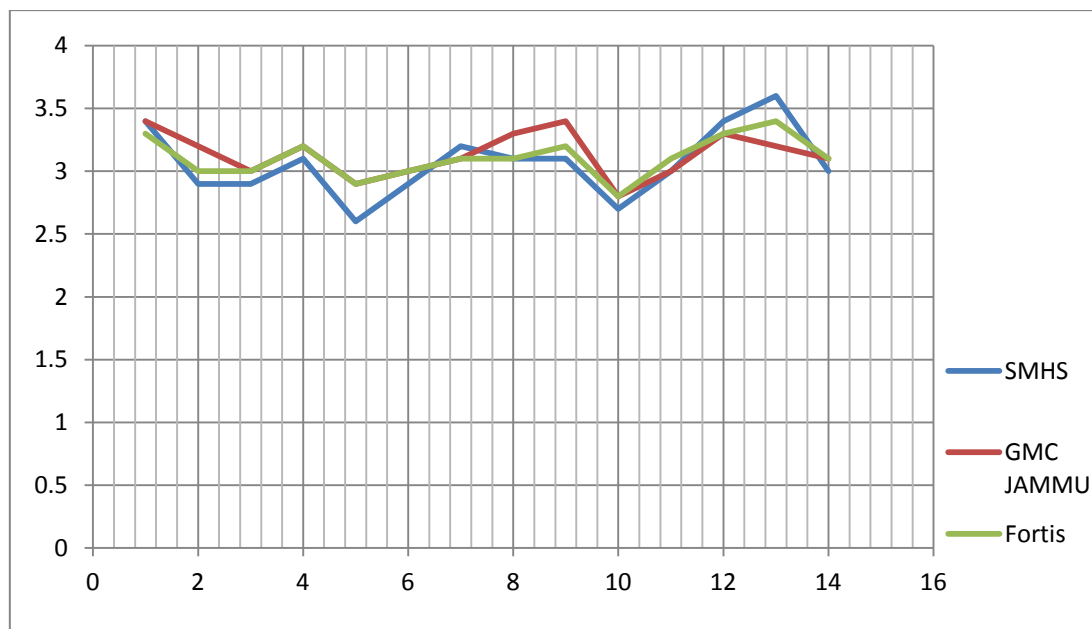


Table II reveals the status of OCTAPACE Culture in the sample study organizations using ANNOVA values for evaluating the significance level. It is inferred from the table II, that OCTAPACE Culture in all the three hospitals falls above satisfactory level (M.S= 3.1). F test reveals that Ho i.e. “OCTAPACE

Culture is satisfactory in the health care sector” is accepted at 5% level of significance for seven dimensions of OCTAPACE while as Ha i.e. “OCTAPACE Culture is dissatisfactory in the health care sector” is accepted for the dimension of proactivity.

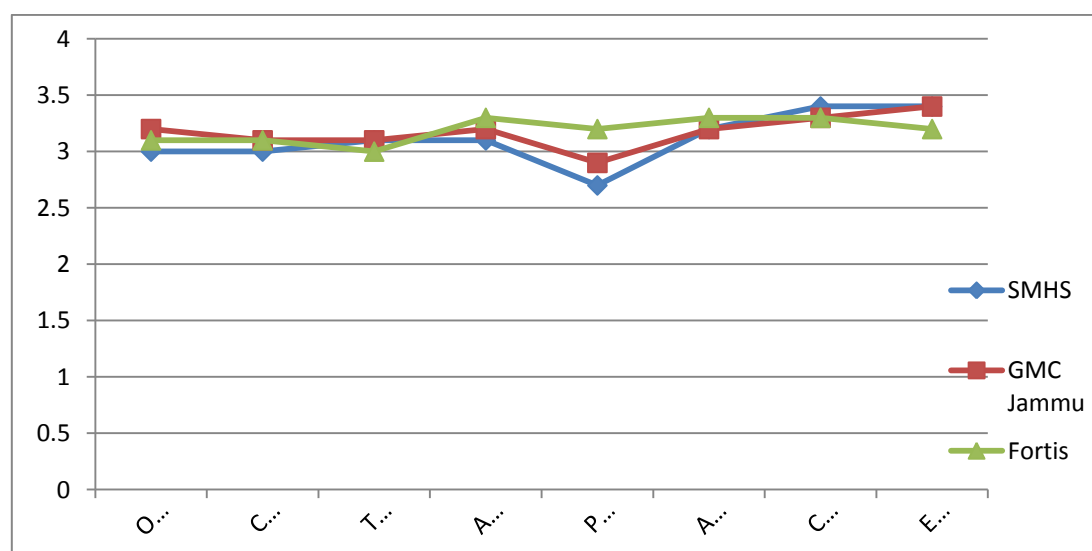
TABLE II: OCTAPACE Culture in the health care sector with Z values.

Variables	SMHS N. 121	GMC Jammu N. 100	Fortis N. 70	M.S Total	F Value	P value
	M.S	M.S	M.S			
Openness	3.0	3.2	3.1	3.1	1.9	0.1*
Confrontation	3.0	3.1	3.1	3.0	0.2	0.7*
Trust	3.1	3.1	3.0	3.0	0.4	0.6*
Authenticity	3.1	3.2	3.3	3.2	0.8	0.4*
Proactivity	2.7	2.9	3.2	2.9	6.3	0.0**
Autonomy	3.2	3.2	3.3	3.2	0.3	0.7*
Collaboration	3.4	3.3	3.3	3.3	0.5	0.5*
Experimentation	3.4	3.4	3.2	3.3	1.1	0.3*
TOTAL	3.1	3.1	3.1	3.1		

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.
3. *P Value >0.05= statement is accepted at 5% level of significance.
4. **Ha is accepted at 5% level of significance.

Figure II: OCTAPACE Culture in the health care sector with Z values.



Perception of Male and Female staff towards

Table III, represents the OCTAPACE

OCTAPACE Culture.

Culture, with respect to male and female staff in the

health care sector. The table represents that the perception of male staff towards OCTAPACE culture falls within satisfactory level while as for female staff culture falls above satisfactory level. The overall mean values for Male group is =50 as revealed from table III, which falls in satisfactory range of scale. The table also reveals that the overall mean values of female staff falls above satisfactory level with the mean score of >50. Male staff scored the highest mean score of 3.4(60%) for statement 12 i.e. “When seniors in health care sector delegate authority to juniors use it as an opportunity for development” and second highest mean score for statement 13 i.e. “Team spirit is of high order in this organization” 3.3(57.5%) and

statement 1 i.e. “People in this organization are helpful to each other” 3.3(57.5%). Female staff scored the highest mean score of 3.4(60%) for statement 1 i.e. “People in this organization are helpful to each other” and statement 13 i.e. “Team spirit is of high order in this organization” On the other hand, least score of 2.6(40%) was scored by the male staff for statement 5 i.e. “Employees in this organization are encouraged to experiment with new methods and try out creative ideas”. Statement 10 i.e. “Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors” scored the least mean of 2.8(45%) for female staff in the health care sector.

Table III: Perception of Male and Female staff towards OCTAPACE Culture.

S.No	Male staff No 122		Female staff No. 169		M.S diff
	M.S	% M.S	M.S	%M.S	
1	3.3	57.5	3.4	60	-0.1
2	3.1	52.5	3.0	50	0.1
3	2.9	47.5	3.1	52.5	-0.2
4	3.1	52.5	3.2	55	-0.1
5	2.6	40	3.1	52.5	-0.5
6	3.0	50	3.1	52.5	-0.1
7	3.1	52.5	3.1	52.5	0
8	3.1	52.5	3.1	52.5	0
9	3.2	55	3.2	55	0
10	2.7	42.5	2.8	45	-0.1
11	2.9	47.5	3.1	52.5	-0.2
12	3.4	60	3.3	57.5	0.1
13	3.3	57.5	3.4	60	-0.1
14	2.9	47.5	3.2	55	-0.3
Total	3.0	50	3.1	52.5	-0.1

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.

Figure III: Status of OCTAPACE Culture in health care sector.

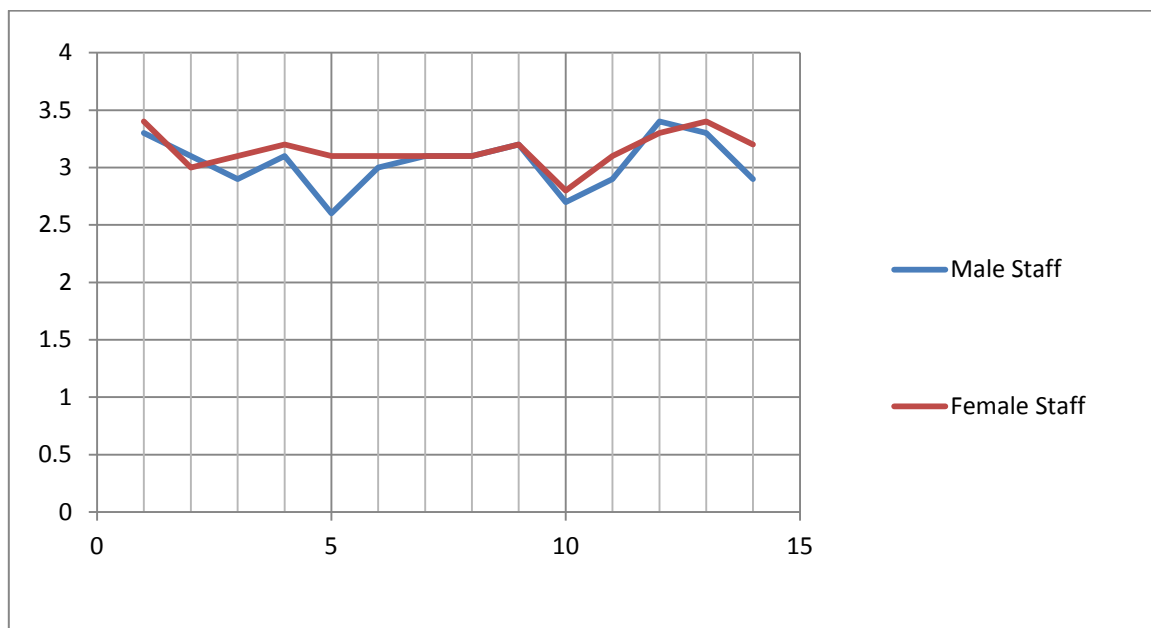


Table IV reveals that Collaboration and experimentation scores the maximum mean score for both Male (M.S=3.3) and female staff (M.S=3.4). Next highest score was scored by the dimension of autonomy for the male staff (M.S=3.2) and Authenticity, Autonomy and collaboration score the second highest score for female staff (M.S=3.2). Least satisfaction is seen for the dimension of Proactivity (M.S=2.7, M.S=3) for Male and female staff respectively for the health care sector.

Application of T Test revealed that six dimensions (openness, trust, authenticity, autonomy, collaboration and experimentation) scored the P Value > 0.05 hence Ho i.e. “there is a difference in perception of male and female staff towards OCTAPACE Culture is accepted” while as Ha i.e. “there is no difference in perception of male and female staff towards OCTAPACE Culture is accepted” for two dimensions (confrontation and proactivity).

Table IV: Perception of Male and Female staff towards OCTAPACE Culture in the health care sector with Z values.

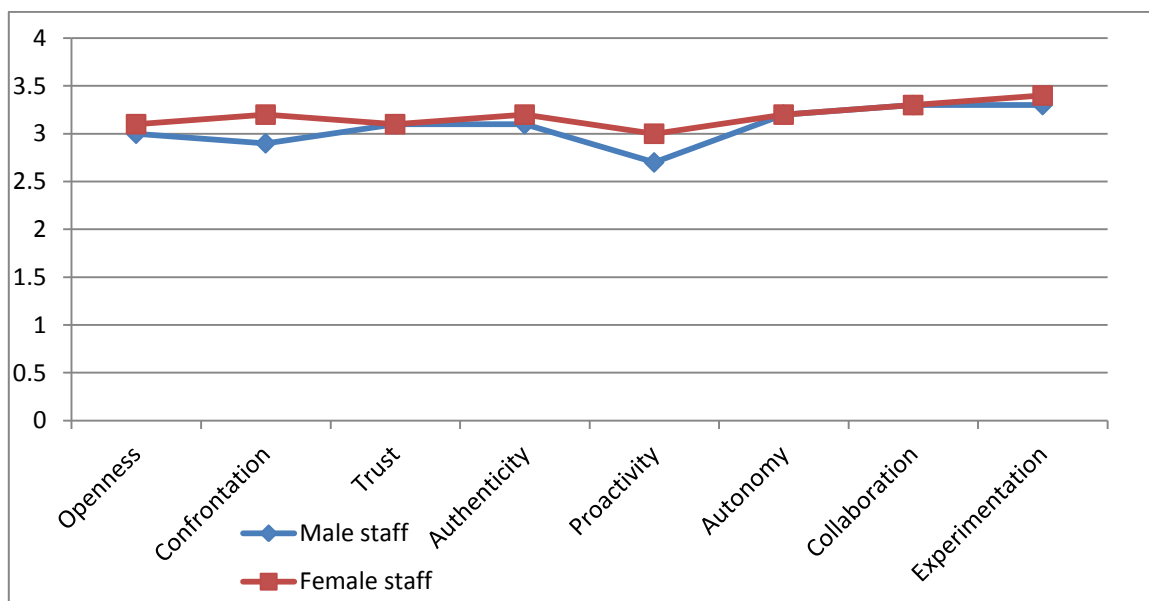
Variables	Male Staff N. 100		Female Staff N. 127		M.S Diff	T Value	P value
	M.S	S.D	M.S	S.D			
Openness	3.0	0.7	3.1	0.8	-0.1	-0.9	0.3*
Confrontation	2.9	1.2	3.2	1.2	-0.3	-2.5	0.0**

Trust	3.1	1.1	3.1	1.1	0	0.0	0.9*
Authenticity	3.1	1.1	3.2	1.1	0.1	-0.7	0.4*
Proactivity	2.7	0.8	3.0	0.8	-0.3	-2.6	0.0**
Autonomy	3.2	0.7	3.2	0.8	0	-0.4	0.6*
Collaboration	3.3	0.7	3.4	0.9	-0.1	-0.2	0.7*
Experimentation	3.3	1.1	3.4	1.1	0.1	-1.0	0.2*
TOTAL	3.0	0.9	3.2	0.9	-0.2		

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.
3. T Value= T Test, P Value= Significance level.

Figure IV: OCTAPACE Culture within Male and Female staff in the health care sector with Z values



CONCLUSIONS AND SUGGESTIONS

An overview of the study is that,

- Health care sector has an above satisfactory environment for OCTAPACE culture.
- Fortis scores the maximum mean for culture followed by GMC Jammu and SMHS.

- Only the dimension of Collaboration scores the highest mean for SMHS.
- GMC Jammu scores the highest mean for the environment of Openness, Collaboration and Autonomy.

- Fortis scores the maximum mean for the dimensions of openness, proactivity, autonomy and authenticity.
- SHMS and GMC Jammu has the environment of Proactivity falling below the level of satisfaction.
- Collaboration and autonomy score the maximum total mean for the health care sector.
- Perception of both genders towards OCTAPACE Culture fall in the satisfactory range.
- Perception of male staff towards OCTAPACE culture falls in the satisfactory level while for female staff culture is found above the level of satisfaction.
- Male staff is highly satisfied with the elements of autonomy and collaboration and the same holds true for the female staff.
- Least score is scored on the element of proactivity by both the genders in the health care sector.

Medicine has a longstanding history as a profession with its own culture of practice. In the past, physicians have often exercised unquestioned authority, which built basic assumptions in hospital culture that directed how other professional

groupings interacted within hospitals. There is a growing focus on non-punitive problem reporting and increased staff empowerment to stop potentially unsafe procedures. This is meant to allow for the reporting of near-misses so that the system of care can be improved, leading to improved patient safety and decreased costs due to mortality and morbidity. The trend requires a culture change in many hospitals predicated on questioning medical practices. Culture forms an important part of any organization and when it comes to a service sector where 24 hour service is to be provided

Management in health care sector should focus on the issue that employees should be very informal and should not hesitate to discuss their personal problems with their supervisors. The culture should be made very conducive for any employee interested in developing himself by acquiring new knowledge and skills. In addition to developing the culture of health care sector, employees should be encouraged to experiment with new methods and try out creative ideas. A non-threatening way should be used to communicate weaknesses of employees to them. An open culture should be encouraged where employees in health care sector are not afraid to discuss or express their feelings with their supervisors. Employees should

be encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors

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