

PGDM 2022-24
Organizational Behaviour
DM-109

Trimester – I, End-Term Examination: September 2022

Time allowed: 2 Hrs
Max Marks: 40

Roll No: _____

Instruction: Students are required to write Roll No. on every page of the question paper; writing anything except the Roll No. will be treated as **Unfair Means**. All other instructions on the reverse of Admit Card should be followed meticulously.

Sections	No. of Questions to attempt	Marks	Total Marks
A	4 short answer questions with internal choices and all COs covered Note: Attempt either (a) or (b) from each question in this section.	4*5	20
B	Compulsory Case Study	2*10	20
			40

SECTION A

A1a. Often we judge people differently depending on the meaning we attribute to a behaviour. Justify the statement with reference to the Attribution Theory. (CO1)

OR

A1b. Argue why personality is an important factor in deciding the occupation of a person using the Big Five Model. (CO1)

A2a. Illustrate with examples the implications of Expectancy theory in an organizational setting. (CO1)

OR

A2b. Critically evaluate the ERG Theory and Herzberg's two factor theory of motivation. (CO1)

A3a. Blake and Mouton came up with a 9 X 9 matrix to explain different types of behaviours displayed by leaders. Describe the Managerial Grid and the outcomes achieved in the designated five styles. (CO2)

OR

A3b. Describe the situations where a transactional leader is more effective. Also highlight the situations where a transformational leader is desirable. (CO2)

Please Turn Over

A4a. Work groups are not organised mobs; they have properties/structures that shape members' behaviour. Justify the statement using any two group properties/structures. (CO2)

OR

A4b. Intentions is a critical stage of conflict management. Elaborate this statement giving examples. (CO2)

SECTION B

Note: Analyze the case and answer the following two questions. [Marks: 2*10 = 20]

GANDHI MEDICAL CENTRE

Gandhi Medical University Centre is engaged in full time teaching and medical research for a medical college, dental college, nursing college and other health related professions. It is attached to the university which enrolls approximately 2,000 students. It has about 800 beds in medical, surgical and psychiatric wings. It is funded by the state government. It is widely recognized as a top institution providing medical services in the state. However, the medical centre faced consistent financial problems; especially the teaching is unable to break-even. The state government has brought Dr. Rao, previously Director of a large private hospital, by offering lucrative salary and perks. Lured by an excellent salary, favourable climate and the opportunity to test his abilities, Dr. Rao accepted the post of Director of the centre.

In the post of Director, Dr. Rao holds control of administration of the teaching, hospital and the college of health related professions. He is accountable for both its management and its budget. While Dr. Rao enjoys free hand in the internal affairs of the university, all long range plans and budgets are approved by the state legislature and the university. The medical centre is expected to obtain approval for major programs from both the university and the state; it is subject to their rules, regulations and priorities. While the state favours expenditure on health care, the university prefers a budget structure supporting teaching and research.

This being the external intricacies, Dr. Rao found that the teaching and health care personnel directly reporting to him have conflicting priorities. While the former group emphasizes teaching and research, the latter stresses on health care. A sluggish bureaucracy entrenched in the organization, most of the important people respect it as it provides necessary resources. However, many individuals within the bureaucracy flap well-conceived plans because they lack initiative or have interest in the effective management of the institution.

In this back drop, Dr. Rao found Mr. Das was handling all procurements; a unique personality, he being a retired military person. While purchasing, he buys exactly what every physician orders with no regard to cost. Many of his purchases are dictated by state specifications. This frequently resulted in running out of budget allocation within eight or nine months, contributing to deficit. This forced the centre to borrow supplies from local hospitals. Mr. Das, it seems neither made an attempt to change state specifications nor persuaded physicians and teaching staff to order less expensive items of equal quality. However, he is not violating the rules, but discharging his duties perfectly with the bureaucracy. Dr. Rao recognized that he is not the only person with such working style in the centre.

Questions:

B1. What are the organizational structural problems of the centre? Suggest an appropriate organization structure for the centre. (CO3/CO4) **(10 marks)**

B2. Suggest corrective actions that Dr. Rao can take to bring change in the organization. (CO3/CO4) **(10 marks)**
