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## A STUDY OF PERCEPTION OF NURSES ON WORKING ENVIRONMENT IN TERTIARY CARE HOSPITAL IN MUMBAI

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### ABSTRACT

**Background:** Nurses forms an important health care delivering force in tertiary care hospitals. Positive working environment in hospital has enhancing effect on work efficiency and quality of care provided by nurses.

**Aim:** The aim was to find out perception of nurses on working environment and related problem of tertiary care hospital in Mumbai.

**Objectives:** To know the perception of nurse on problems related to work load, patient related problems and problems due to lack of resources.

**Materials and Methods:** A work site cross-sectional descriptive study was conducted amongst 202 consented nurses of tertiary care hospital in Mumbai. Data was collected by personal interview. Pre-designed semi-structured standardized interview schedule consisting of questions related to Socio-demographic factors, work load, patient related problems and to lack of resources included.

**Results:** In this study 104/202 (51.5%) subjects always perceived work load was too much. 84/202 (41.6 %) subjects had to always compromise quality of work because of work load. 47/202 (23.3%) subjects always face difficulty in dealing with serious patient. 33/202 (16.3%) always face difficulty when patient do not recover for long time. 136/202 (67.3%) subjects always feel that the staff was inadequate to accomplish work properly. 97/202 (48.0%) subjects always feel that equipments and supplies were never adequate.

**Conclusions:** Components of working environment in the present tertiary care hospital play a major role interfering with work efficiency of nurses and patient care. Proper training and management support needed to make service successful perceived by nurses.

**Keywords:** Working environment, work load, tertiary hospital, work efficiency performance, patient care.

### INTRODUCTION

Working environment of the hospital is sum of prevailing external factors which has bearing on the working population. Nursing profession is recognised as stressful profession involving skillful and multitasking work which include to follow orders of clinicians, timely management of patients, the wards, getting work done by class four employees, communicating with patient, relatives, higher authorities and administration

etc. Nurses face difficult working conditions with limited resources, health hazards, over work and certain special situation causing detrimental effects on physical, mental and social health.<sup>1</sup> Healthy work environment is very important to potentiate the work efficiency and for providing quality care. A number of studies conducted within past decade have shown that the nurses in hospitals with better care environments reported more positive job experiences and fewer concerns

with care quality.<sup>2</sup> This study was undertaken in tertiary care public hospital which has speciality departments such as Medicine, Surgery, Paediatrics, Obstetrics & Gynaecology etc. and super speciality departments such as Neurology, Cardiology, Neurosurgery, Plastic Surgery etc. The hospital is catering to the large number of population, often exceeding to its bed and human resource capacity which result in overburdening of work on nursing staff. Thus the present study was conducted among nursing staff to explore different components in hospital care environment which may have influence on work efficiency of nurses and the quality of patient care. Outcome of this study might enable concern authority to provide the appropriate environment, supervision, guidance & training programs and to evaluate the additional human resource need for healthcare facilities.

## MATERIALS AND METHODS

This is a cross-sectional, questionnaire based, observational study carried out in a tertiary care hospital under Municipal Corporation, Sion, Mumbai, India. The sample size comprised of 202 staff nurses, Permanent employee of place of study, working at least for two years, were selected using a convenience sample. The study tool was a Pre-designed, Pre-tested, semi-structured questionnaire. Confidentiality was assured interview schedule consisting of questions related to Socio-demographic factors, questions related to work load, problems related to patient care and lack of resources are included. The ethics committee of the institute approved the study. The pilot study was done in which questionnaire was pre-tested on subsample of 20 nurses. None of the subject was forced or reimbursed. The Subjects who were on any leave or in probation period or on contractual basis and staff nurses intermittent night duties every 3 months were excluded from the study

Data was collected by personal interview method by visiting the subjects at their workplace by prior

appointments i.e. wards, operation theatres, and departments or at nursing station. The care was taken that they do not get disturbed during emergency care of patients. Attempts were made to establish good rapport with the study subjects by personal contact. The objectives and of the study were explained in details to the subjects in the language understand best and written informed consent is taken from the participants. Even after prior appointments, if subjects were found busy in their emergency work, care was taken not to interrupt them in their work and again suitable time was taken. Study tool was filled personally by interviewing the subjects. Recruitment and collection of data continued for six months and the process was carried out by the author and one assistant professor and one second year resident medical officer who were previously trained. The details regarding socio-demographic factors, work load problems, patient related difficulties, work place problems, problems due to lack of resources, conflict with other health professionals were obtained from study subjects. Lastly study subjects were asked to give their suggestions too

## RESULTS

In relation to workload problems it was observed from table no.1 that 104/202 (51.5%) subjects always perceived work done by them was too much. 129/202 (63.9%) of subjects feel that their job is multitasking. 41/202 (20.3%) subjects felt that they never get enough time to complete task on the same day. 150/202 (74.3%) feel that they always had to take care of too many patients. 50/202 (24.75%) feel that their duty hours were always too long & 67/202 (33.16%) feel the same sometimes. 89/202 (44.1 %) of subjects always feel that they do not get time to relax during duty hours & 72/202 (35.6%) feels the same sometimes. 62/202 (30.7%) subjects always compromise lunch hours for completing their work while 109/202 (54%) do the same sometime. 84/202 (41.6%) subjects had to always compromise quality of work because of work

load.48/202 (23.1%) perceived that they or their colleagues always compromise patient care. 32/202 (15.8%) always came across confusion for doing different things because of work load and 75/202 (37.1%) sometimes while 97/202(47%) never came across confusion.

Patient related problems as perceived by study subjects shown in table no.2, it shows that 47/202 (23.3%) subjects always and 72/202 (35.6%) sometimes face difficulty in dealing with serious patients.47/202(23.3%) subjects always 98/202 (48.5%) sometime face difficulty in dealing with situation when patient expires.33/202 (16.3%) always and 104/202 (51.5%) sometimes face difficulty when patient do not recover for long time 42/202 (20.8%) always and 94/202 (46.5%) sometimes face difficulty in maintaining nurse-patient relationship.14/202 (6.93%) always and 97/202 (48.01%) sometimes feel that patient might be physically abusive. 23/202 (11.4%) always and

46/202( 22.8) sometimes feel not to work while taking care of dirty, stinking, bed sores patients.

As regards with perception on lack of resources, observation in table no.3 shows that 136/202(67.3%) subjects always feel that the staff was inadequate to accomplish work properly & 55/202 (27.2%) sometimes and 11/202 (5.4%) never feels the same.105/202 (52.0%) subjects always feel that there was lack of enough training and workshops sessions & 49/202 (24.3%) sometimes while 48/202 (23.8%) never feels the same 97/202 (48.0%) subjects always feel that equipments and supplies were always inadequate while taking care of the patient 71/202 (35.1%) sometimes while 34/202 (16.8%) never feels the same 65/202 (32.2%) subjects always feel that working conditions were always poor or not pleasant at workplace & 92/202 ( 45.5%) sometimes while 45/202 (22.3%) never had such feeling

**Table no.1 Distribution of perception of subjects on problems related to work load**

Sr. no.	Questions	Response of subjects					
		Almost always		Sometimes		Almost never	
		No.	%	No.	%	No.	%
1.	Do you feel that work done by you was too much?	104	51.5	92	45.5	6	3.0
2.	In your opinion whether your job includes multi-tasking?	129	63.9	54	26.7	19	9.4
3.	Do you get enough time daily to complete tasks on same day?	77	38.1	84	41.6	41	20.3
4.	Do you feel that you had to take care of too many patients?	150	74.3	36	17.8	16	7.9
5.	Do you feel that your duty hours were too long?	50	24.75	67	33.16	85	42.07
6.	Do you feel that because of your job you do not get enough time to relax during duty hours?	89	44.1	72	35.6	41	20.3
7.	Do you compromise your lunch hours for completing your work?	62	30.7	109	54.0	31	15.3
8.	Do you feel that you compromise your quality of work because of work load?	84	41.6	83	41.1	35	17.3

9.	In your opinion, you or your colleagues compromise patient care?	48	23.8	74	36.6	80	39.6
10.	Because of work load, do you come across confusion or doing different things?	32	15.8	75	37.1	95	47.0

**Table 2: Distribution of subjects according to their perception on patient related difficulties**

Sr no.	Questions: Patient related difficult areas	Response of subjects					
		Almost always		Sometimes		Almost never	
		No.	%	No.	%	No.	%
1.	Dealing with serious patients	47	23.3	72	35.6	83	41.1
2.	Dealing with situation when patient expires.	47	23.3	98	48.5	57	28.2
3.	Patient who do not recover for long time or do not recover at all.	33	16.3	104	51.5	65	32.2
4.	Maintaining nurse-patient relationship while taking therapeutic care?	42	20.8	94	46.5	66	32.7
5.	Do you feel patient might be physically abusive?	14	6.93	97	48.01	91	45.04
6.	Do you feel not to work while taking care of dirty, stinking, bed sores etc. patients?	23	11.4	46	22.8	133	65.8

**Table 3: Distribution of subjects according to their perception on problems due to lack of resources**

Questions	Response of subjects					
	Almost always		Sometimes		Almost never	
	No.	%	No.	%	No.	%
Do you feel that staff was inadequate to accomplish work properly?	136	67.3	55	27.2	11	5.4
Do you feel that there was lack of enough training and workshops sessions?	105	52.0	49	24.3	48	23.8
Do you feel that equipments and supplies were inadequate while taking care of the patient?	97	48.0	71	35.1	34	16.8
Do you feel that working conditions were poor or not pleasant at your workplace?	65	32.2	92	45.5	45	22.3

## DISCUSSION

As shown in Table no 1, 51.5% subjects always perceived work done by them was too much and 74.3% perceived that they always had to take care of too many patients. 44.1 % of subjects always perceived that they do not get time to relax during duty hours. 30.7% always and 54% sometimes had to compromise lunch hours for want of completing

their work. 41.6% accepted that they had to always compromise quality of work because of work load. 15.8% of the subjects always and 37.1% sometimes came across confusion because of work load. Lambert V.A. Lambert C.E. Ito M. (2002) in their study showed workload on the first step of regression analysis and it was accounted for 1.7%.<sup>3</sup> This study also support current study

findings of workload was a major factor. A study by Al-Hussami M et al<sup>4</sup> supports the findings of present study who examined concentration as one of the psychological concepts related to work environment that 28% of respondent felt that their concentration is low. The nurses experience physical and mental workload since their job involves standing, walking, bending, lifting and making decisions about patient care and other administrative work. All this leads to exhaustion, which disturbs concentration.<sup>103</sup> Present study finding also comparable with study by O. Orji et al which revealed that 83.3% of health care workers had work-related stress.<sup>5</sup>

Table no 2 shows that 23.3% subjects always face difficulty in dealing with serious patients and in case of death of a patient. 16.3% when patient do not recover for long time. 20.8% in maintaining nurse-patient relationship and 6.93% always feel that patient might be physically abusive while 11.4% always feel not to work while taking care of dirty, stinking, bed sores patients. The survey of 2,00,000 physicians and nurses from 130 general hospitals in Netherlands revealed that 90% have suffered mental and physical violence, 78% have sexual intimidation & over 50% hospital staff have been threatened with weapons.<sup>6</sup> Our study finds less percentage of perception of physical violence which may be due to poor patients taking treatment from this public hospital who are usually helpless and dependent on hospital staff.

The above table 3 shows that out of total study subjects (n=202), majority i.e. 67.3% feel that staff was always inadequate to accomplish hospital work. 48.0% feel that equipments and supplies were always inadequate while taking care of the patient. 52.0% feel that there was always lack of enough training and workshops sessions. 32.2% feel that working conditions were always poor or not pleasant at workplace. Study by Pratibha Kane indicated that 66% percent of the nurses were interested in training for new skills and 60% desired more training for their present job. Ongoing training and job rotation are yet not an

established initiative taken up by HR managers in hospitals.<sup>7</sup> The current study findings about perception of lack of enough training sessions supported by this study. Our study shows even higher percentage for need of training and workshop sessions. Similar findings like current study stated by Nikbakht<sup>8</sup> who found that Iranian nurses were confronted with many difficulties in two domains: (1) difficulties relating to work settings, such as personnel shortages, heavy workloads, unclear tasks, lack of registered and auxiliary nurses, equipment deficiencies and low salary; and (2) difficulties relating to a poor public image and a low social status of nurses<sup>8</sup>. In India, some of the issues related to nurse retention still remain to be tackled – job insecurity for the contractual staff, low pay in both the government and private sectors, lack of a conducive work environment and infrastructure facilities.<sup>9</sup> This statement of WHO strongly support our current study findings related to problems due to lack of resources.

## CONCLUSION

Workload of the indoor patients in the hospital is the one of the main factor as perceived by the nurses. Dealing with serious, chronically ill and in case of death of patients is another major factor perceived by them causing physical and mental stress. Inadequate staff, inadequate equipment and supplies make the work of the nurses and working conditions poor and unpleasant. It can be concluded that components of working environment in the present tertiary care hospital play a major role interfering with work efficiency of nurses and patient care.

## RECOMMENDATIONS

There should be limit of admitting patients in municipal hospitals which distort the nurse patient ratio or by increasing indoor facilities including increasing the nursing post so that more patients can be admitted. In service training in personal management, communication skill, stress

management and support by the administration needed to make service successful perceived by nurses.

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