Quality Work Life - Health Care Professions

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Abstract

Quality of life is a very generic expression. It depends a lot on the individual choices, options, and the values that take into account. What are the values at stake, ethical and moral behavior such an individual assumes for himself for quality of life to exist or not? Quality of life is physical, mental, and psychosocial wellbeing. In the field of health care QWL of health care professionals to the satisfaction of people's needs and alluded to various dimensions of their lives. The nurses emphasized the life dimensions related to work and the balance between their personal and work lives. The health care professions presented expanded conceptions about quality of life includes lack of material, human and environmental resources. To face problems and improve the QWL healthcare nurses proven to be successful. They also indicated other potential interventions encompassing a wide scope of opportunitie.s

Key words: QWL, Health Care Professionals, Positive factors & Negative factors Biography of the Author

Introduction

Today there is a global health workforce crisis - one marked by critical imbalances. Many countries are faced shortages of health care professionals because of unemployed health professions, geographical imbalance between supply and demand of health care professions and planning inadequacies are some of the reasons. The reason of this crisis is complex and unhealthy work environment and poor organizational climate are the reasons in many work places. Under investment, poor employment conditions of policies and procedures, insufficient remuneration, limited career development and opportunities are unfavorable for balanced work life. These factors leads to negative impact on recruitment and retention on healthcare professions and ultimately on patents outcomes.

Some major components in work place that support outcomes organizational patient and effectiveness. These factors, when in work place supported by both financial and human aspects to ensure the over all quality of good healthcare system. Establishing positive practice of work environment in health care sectors is vital on patient's safety and health workers wellbeing are to be guaranteed. All health sector stake holders, government and public have ensured their active involvement in positive work practices to be achieved .Positive Practice Environments (PPEs) are settings that support excellence of work and to ensure the health, safety, and personal wellbeing of staff, support quality patient care and the individual and organizational performance.

Objectives of the study:

- To study about working environment of healthcare professionals.
- To know the factors influence in quality of work life of health care professionals.
- To study about the remedies of hindering factors of quality of work life.

Need

Positive changes in the work environment leads to high employee reduction, better team work, increased patient care and ultimately improvements in patient outcomes. Value the quality rather than quantity that focus long term outcomes. Maintaining a level of diplomatic nature of staff leads to retention of respected and valued members in their places of employment.

Research Methodology

The research design employs descriptive, explorative and analytical methods. The basic information is obtained through the survey method by administering a questionnaire and through personal enquiries. Certain analytical tools are applied for identifying factors affecting quality of work life of women in health care sector.

Data Primary Data

The first hand information on work life quality was collected directly from the sample respondents working in health care industry.

Secondary Data

Secondary data sourcing is done from institutions, the reports of various organizations, research articles in various national, international journals, reports from daily papers and websites.

Sampling Unit

The sample for the study is drawn from the health care companies. The survey is conducted in health care companies located in Chennai city. The city consists of health care giants, medium and small health care units as well.

Sample Size and Design

The primary data are collected through survey method.

Survey is conducted using well formulated questionnaire. Samples for the purpose of study are selected systematically.

More than 570 questionnaires are distributed to women employees working in 5 major health care companies in Chennai city namely TTK, Apollo, Chettinad Health Care, Vasan Eye Care & Global Hospital.525 questionnaires are returned of which 500 completed questionnaires are found usable.

Questionnaire Design

The questionnaire on quality of work life is divided in to 8 parts.

- ·I Demographic factors with optional questions.
- ·II VII The factors like job satisfaction, working condition, general well-being, home-work interface, career prospects and compensation and training and development that are used to measure the quality of work life.

·VIII - Optional questions to be answered by the employees.

Elements of Positive Practice Environments

- ·Occupational health
- ·Safety
- ·Wellness policies
- ·Gender indiscrimination,
- ·Personal security;
- ·Fair and manageable workloads
- ·Job demands/stress;
- ·An organizational climate
- ·Leadership practices,
- ·Good peer support,
- ·Worker participation in decision making,
- ·Shared values;

Factors influence in work-life balance

- Equal opportunity and treatment;
- Opportunities for professional development and career advancement;
- Professional identity, autonomy and control over practice;
- Job security;
- Decent pay and benefits;
- Safe staffing levels;
- Support, supervision and mentorship;
- Open communication and transparency;
- Recognition programmes; and
- Access to adequate equipment
- Benefits of Positive Practice Environments

The positive work environment influence in good health service delivery, healthy worker

performance, and innovation in particular, are well documented.

Positive changes in the work environment result in a higher employee retention rate, which leads to better teamwork, increased continuity of patient care, and ultimately improvements in patient outcome. A review of performance in more than 3000 UK businesses identified high performing organizations- and one of their characteristics was that they Value quality rather than quantity, and keep the focus on the long-term and on outcomes; establish a climate of employee relations that is characterized but not codified by pride, innovation and strong interpersonal relations: and understand that collective mechanisms support this.

Table 1: Overall Satisfactory Level (Both Positive and Negative Factors)

Factor	S	Tetal		
Factor	Highly Satisfied	Satisfied	Highly Dissatisfied	Total
Positive Factors	180(36%)	230(46%)	90(18%)	500
Negative Factors	100(20%)	110(22%)	290(58%)	500

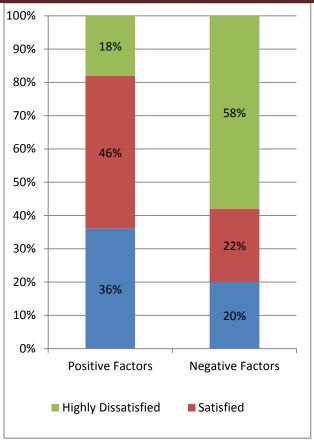


Figure 1 - Overall Satisfactory Level (Both Positive and Negative Factors)

Table 2: Positive Factors Influence in QWL Vs Satisfactory Level

Positive	Sat			
Factors Influence in QWL	Highly Satisfied	Satisfied	Highly Dissatisfied	Total
Occupational Health	350(70%)	100(20%)	50(10%)	500
Safety	400(80%)	75(15%)	15%) 25(5%)	
Policies	300(60%)	100(20%)	100(20%)	500
Gender Discrimination	450(90%)	25(5%)	25(5%)	500
Personal Security	400(80%)	75(15%)	25(5%)	500
Job Stress	200(40%)	100(20%)	200(20%)	500

Time Flexibility	200(40%)	25(5%)	275(55%)	500
Leadership Practices	300(60%)	100(20%)	100(20%)	500
Peer Group Support	350(70%)	100(20%)	50(10%)	500
WPM	200(40%)	50(10%)	250(50%)	500
Org Climate	425(85%)	50(10%)	25(5%)	500

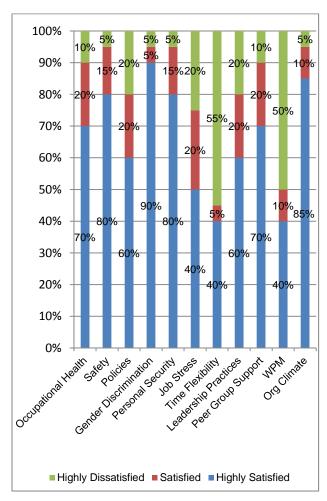
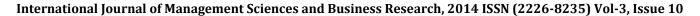


Figure 2 Positive Factors Influence in QWL Vs Satisfactory Level

Table 3: Negative Factors Influence in QWL Vs Satisfactory Level

	VL Vs Satisfactory Level Satisfactory Level			
Negative Factors Influence in QWL	Highly Satisfied	Satisfied	Highly Dissatisfied	Total
Job Strain Affect Personal Relationship	50(10%)	100(20%)	350(70%)	500
Sickness Absence	40(8%)	60(12%)	400(80%)	500
Job Dissatisfaction because of time flexibility	55(11%)	95(19%)	350(70%)	500
Turn over	54(10.8%)	148(29.6%)	298(59.6%)	500
Burn over	48(9.6%)	204(40.8%)	248(49.6%)	500
Insufficient Salaries	100(20%)	150(30%)	250(50%)	500
Unavailability of Medicine Frequent interruptions	120(24%)	110(22%)	270(54%)	500



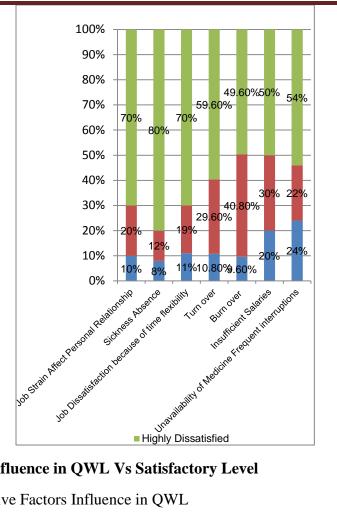


Figure 3 Negative Factors Influence in QWL Vs Satisfactory Level

Chi-Square Analysis for Positive Factors Influence in QWL Inference:

For 4 dof @ 5% level of signification + 9.488, since the calculated value is greater than the table value, we rejected the hypothesis.

ANOVA TABLE

Source	Sum of	df	Mean	Variation
of	squares		sum of	ratio
Variance			Squares	
Between	SSC =	(C -	2533 / 2 =	F = MSC
Columns	2533	1) =	1266.5	/ MSE
		2		
Errors	SSE =	(N -	30400 / 3	1266.5 /
	30400	C) =	=	10133.33
		3	10133.33	=
Total		5		0.125

Chi-Square Analysis for Positive Factors Influence in QWL

## ## ## ## ## ## ## ## ## ## ## ## ##				
О	Е	$(O-E)^2/E$		
70	74	0.216		
116	95	4.64		
20	37	7.81		
68	56	2.57		
60	72	2.00		
28	28	0		
42	50	1.28		
54	63	1.29		
42	25	11.56		
		31.366		

Ndf = (2,3) at 5% level of significance, the table value is 9.55

Inference:

Accept Ho is at 5% level of significance, the calculated value of F is less than the table value. So there is no relationship between the satisfactory level and the factors influence in QWL.

Findings:

- Evidence indicates that long periods of job stress that affect personal relationship, increased sick time, conflict, dissatisfaction, turnover, and inefficiency.
- A survey of healthcare practitioners reported that 1/3 of the professionals are moderately or highly burnout, which was mainly associated with work-related stressors.
- A study in reported that workplace bullying of staff is related to an increase in sickness absence. Another by the same research group poor team work leads to increase sickness absence rates.
- Research on pharmacists reported that stressors that had high severity ratings included the unavailability of medicine frequent interruptions, high levels of workload and insufficient salaries.

Discussions and Conclusions

 A commitment to safety in the workplace, leads to overall job satisfaction. When health professionals are satisfied with their

- jobs, quantity of labor absenteeism and turnover will be reduced and it improve staff morale and productivity.
- Maintaining a level of autonomy over their work allows staff to feel that they are respected and valued members in their places of employment.
- Research shows that health care should be attracted and retains in their workplace and gain autonomy and participate in decision making. A richer mix of qualified nurses is linked to reductions in patient mortality, rates of respiratory, wound and incidence of pressure sores and medication errors.
- Effective teamwork is essential to the work in health care organizations. It improves the quality of work life as well as patient care.
- Unhealthy environments affect health professional's physical and mental health through heavy loads, low status, problems carrying out professional roles, and a variety of workplace hazards. The development of positive practice environments by:
- Improving the recruitment and retention:
- Continue to promote the role of healthcare professionals.
- Define the scope of practices so that healthcare professionals work to their full patient care. The enforcement of law is used to raise the awareness of other disciplines, as well as the public, of the professions competencies and evolution.

- Lobby for professional recognition and remuneration.
- Support research which focuses on why workers will retain rather than they leave and it is termed as job embeddedness; i.e. the extent to which the individual worker is embedded within the organization.
- Develop and disseminate a position statement on the importance of a safe work environment.
- Promote the audit for monitoring the health care activities and staff welfare. An annual health checkup of National Health Service employers, which includes a survey of staff well being and organizational performance indicators are some of the activities. These findings are published annually.
- To build the capacity of health care professional in health care management and policy-making positions.
- To ensure health professional voices are heard.
- Have access to decision-making bodies.
- Supporting research, collecting data for best practice, and disseminating the data once it is available.
- Resenting awards to health care to demonstrate positive and effective practices of environment through recruitment and

- reduce drop-out rates, public opinion improved care and patient satisfaction.
- Ensure that Establishing alliances across different health professional groups and health sector stakeholders, e.g. patients/consumer associations. Other discipline is also interfering in safe work environments.

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