Study of Job Satisfaction and Work Environment Perception among Doctors in a Tertiary Care Hospital Chhattisgarh, India



Medical Science

KEYWORDS : JS- Job satisfaction, CIMS-Chhattisgarh Institute of Medical Sciences, PP-Private Practice

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ABSTRACT

Background: Job satisfaction refers to how well a job provides fulfillment of a need or want or how well it serves as a source or means of enjoyment. The prevalence of dissatisfaction among doctors has been given considerable importance in recent years as it affects patient satisfaction and leads to reduced quality of care. The quality of performance in health facilities to a large extent depends on whether health care providers are job satisfied or dissatisfied as the work force is one of the most important inputs to any health system and has a strong impact on the performance of health facilities. In this study the level of job satisfaction among doctors working in tertiary care teaching hospital CIMS, Bilaspur(C.G.). The various factors affecting the job satisfaction among doctors working in tertiary care teaching hospital CIMS, Bilaspur(C.G.). The association between sociodemographic characteristics and job satisfaction.

Objectives: To study the level of job satisfaction among doctors working in tertiary care teaching hospital CIMS, Bilaspur(C.G.). To study the various factors affecting the job satisfaction among doctors working in tertiary care teaching hospital CIMS, Bilaspur(C.G.). To study the association between socio-demographic characteristics and job satisfaction.

Introduction: Job satisfaction among healthcare professionals is increasingly being recognized as a measure that should be included in quality improvement programmes. (1). The subject of job satisfaction is particularly relevant and of interest to public health practitioners due to the fact that organizational and employee's health and well-being rest a great deal on job satisfaction (2).

The evidence from published research points to specific determinants and correlates of job satisfaction and productivity. Various studies have established that dissatisfaction with one's job may result in higher employee turnover, absenteeism, tardiness and grievances. Improved job satisfaction, on the other hand, results in increased productivity.(3) Every individual has unique needs and desires that to be satisfied, which are related to the behavior they exhibit, and these play a significant role in their preferences in different areas such as their workplace. Social, cultural and job factors all influence employees' behavior.(4)

Satisfied employees tend to be more productive and committed to their jobs.(5) In a healthcare setting, employee satisfaction has been found to be positively related to quality of service and patient satisfaction.(6) Employees can directly influence patient satisfaction in that their involvement and interaction with patients plays a significant role in quality perception. A number of studies have looked into job satisfaction in the healthcare setting.(7) and the focus was on the need to understand job satisfaction of healthcare providers.

These are factors that are intrinsically rewarding to the individual. Extrinsic factors, described as "hygiene" factors, leading to job dissatisfaction include pay, physical working conditions, job security, company policies, quality of supervision and relationship with others.(8) Factors contributing to high levels of employee satisfaction have been identified as: supportive colleagues, supportive working conditions, mentally challenging work and equitable rewards.(9) Privatization has taken the Indian health care market by storm, with 75% of our doctors employed in private sector.

Material & Methods: A cross-sectional survey was conducted by self administered questionnaire to determine the factors influencing job satisfaction among doctors working in the CIMS Hospital Bilaspur (C.G.). 80 doctors were available for the study.

The study population was grouped into three categories: Clinical, Para clinical and Non-clinical. The period of data collection was 6 weeks, between 05 May 2013 and 20 June 2013. Over the 6 week period, 80 participants were available for the study. The questinnaires were distributed to 80 participant out of which 64 were returned.

Of the 80 questionnaires printed and distributed, 64 were returned (a response rate of 80%). All 64 questionnaires were available for analysis. The statistical software SPSS version 11.5 was used to analyze the generated data.

Results: A total of 64 respondents participated in the study. Table 1 indicates that the number of male and female participants were almost equal (M-51.6%, F-48.4%). Majority of respondents were from the age group 22-35 (65.6%). More than half (62.5%) of the respondents were married. Most of the participants were from the hindu religious background. More than half of the respondents were from Demonstrator/JR group (59.4%) and majority of respondents are from the clinical departments. With regard to level of education, 53.1% of the participants were graduate (MBBS) and 46.9% were PG (MD/MS) degree holder. Most of the respondents had the short duration (<2 years) of work experience (42.2%) while 35.9% of respondent had the experience of > 5 years. Table 2 shows the results from the first section, general satisfaction. The results indicated that 28.1% of participants strongly agreed and 46.9% agreed (total 69%) that if they had to choose a career again, they would choose the same career. Almost three fourth of participants (a total of 78.1%) agreed or strongly agreed that their job had more advantages than disadvantages. About 43.8% of respondents did not think that their income was the reflection of the job they do. While a total of 36% of the respondents believed that there was personal growth in their work, over half (35.9% + 20.3%) did not experience any personal growth. The study showed that over half of respondents (40.6+25 %) had no intention of changing their career. Nearly twenty seven per cent (26.6%) strongly agreed that they enjoyed their work, with another 53.1% saying they agreed they enjoyed their work, while only 1.6% strongly disagreed. More than half the respondents (26.6% + 53.1%) indicated that in general they were satisfied with their jobs. It can be seen in Table 3 that more than half the respondents (a total of 64.1%) agreed or strongly agreed that there were sufficient opportunities for self-development, while over half of the respondents (a total of 57.9%) agreed or strongly agreed that

they were satisfied with the variation within their work. A clear majority (a total of 62.3%) reported that they were agreed or strongly agreed that they experienced frustration in their work due to limited resources. The proportions agreeing and disagreeing about lack of stimulation were nearly 50%. More than half of respondents (a total of 51.5%) indicated that too much was expected from them at work. The results in Table 4 show that while over three fourth of respondents (20.3% + 62.5%) enjoyed their status in the community as healthcare professionals, and nearly eighty percent of respondents (17.2% + 59.4%) perceive that they carry great responsibility. More than half (15.6% + 50%), agreed or strongly agreed that they receive recognition for tasks well done. In total well over half the participants agreed or strongly agreed that they have to perform many non-clinical tasks (10.9% + 39.1%). Views about freedom to decide how they do their work about 60 percent were agreed or strongly agreed (48.4%+9.4%). Just under half of all participants agreed or strongly agreed (40.6% + 7.8%) that they spend time doing tasks that could be done by lower cadres. The results show that a good majority (42.2% + 53.1%) reported having a good working relationship with their colleagues. Well over half agreed or strongly agreed (21.9% + 56.3%) agreed that there is an atmosphere of co-operation between staff and management and similar proportions (20.3% + 53.1%) indicated that there is a clear channel of communication. More than three fourth (a total of 82.8%) agreed or strongly agreed that their managers are concerned about their well-being, while the proportions who believed that management involves staff in decision-making(46.8%) were more than those who said they did not involve them(20.5%). Nearly eighty three per cent (82.9% taken together) agreed or strongly agreed that they can depend on their colleagues for support, but opinions on management style nearly half of respondents were agreed or strongly agreed.

Discussion & Conclusion: The findings of this study have limited generalizability and may need to be confirmed by further research in other hospitals in India. However numerous studies in different parts of the world allow for direct comparison with the current study. With this limitation in mind, the study evaluated factors influencing job satisfaction among doctors in CIMS Hospital and the results highlighted overall dissatisfaction. The finding of a low level of job satisfaction is consistent with the results of the 2003 study by Gigantesco et al in Rome. (19)

No association was found between socio-demographic characteristics and job satisfaction. The study also found that there was a positive medium association between job satisfaction and opportunity to develop responsibility and staff relations among both clinical and clinical support staff.

Recommendations:

Although the results of a single survey cannot in themselves be considered as a solid foundation for making decisions in health planning, the results of this study suggest that interventions should be carried out to increase levels of job satisfaction among healthcare professionals at Chhattisgarh Institute of Medical Sciences, Bilaspur (CG).

Since job satisfaction has a strong correlation with job performance, it is imperative to reinforce relevant human resources policies, improving working conditions and compensation.

Priority should be given to improving relationships between

management and staff and increasing decision-making attitude among staff members.

Involving staff in a cooperative, team approach will allow for consideration of ways to improve aspects relating to job satisfaction.

TABLE 01. SOCIO-DEMOGRAPHIC CHARACTERSTIC OF PARTICIPANTS

TICIPANTS	1		T
VARIABLES		NUMBER	PERCENTS
	22 – 35 years	42	65.6
AGE	36 – 50 years	17	26.6
	50 – 70 years	05	7.8
GENDER	Male	33	51.6
	Female	32	48.4
MARITAL STATUS	Married	40	62.5
31A1U3	Unmarried	24	37.5
	Hindu	63	98.4
RELIGION	Muslim	1	1.6
	Christian	0	0
	Others	0	0
	Professor	2	3.1
JOB TITLE	Asso. Professor	7	10.9
	Asst. Professor	8	12.5
	Senior Residents	9	14.1
	Demonstrator/ Junior Residents	38	59.4
	Clinical	35	54.7
DEPARTMENTS	Para-clinical	12	18.8
	Non-clinical	17	26
EDUCATION	MBBS	34	53.1
LEVEL	MD/MS/Post doctorate	30	46.9
	PG Diploma	0	0
	< 2 Years	27	42.2
YEARS OF EXPERIENCE	2 – 5 Years	14	21.9
	>5 Years	23	35.9

TABLE - 02 LEVEL OF GENRAL SATISFACTION

VARIABLES	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree	P value		
If I could choose the career again I will make same decision.	18 (28.1%)	30 (46.9%)	07 (10.9%)	07 (10.9%)	02 (3.1%)	Highly significant		
My job has more advantages	18 (28.1%)	32 (50.0%)	09 (14.1%)	04 (6.3%)	01 (1.6%)	Highly significant		

My income is reflection of my work	06 (9.4%)	22 (34.4%)	08 (12.5%)	21 (32.8%)	07 (10.9%)	Highly significant
There is no personal growth in my work	03 (4.7%)	20 (31.3%)	05 (7.8%)	23 (35.9%)	13 (20.3%)	Highly significant
Intention to change career	03 (4.7%)	07 (10.9%)	12 (18.8%)	26 (40.6%)	16 (25%)	Highly significant
I really enjoy my work	17 (26.6%)	34 (53.1%)	06 (9.4%)	06 (9.4%)	01 (1.6%)	Highly significant
Overall Job satisfaction	08 (12.5%)	39 (60.9%)	09 (14.1%)	06 (9.4%)	02 (3.1%)	Highly significant

TABLE - 03 OPPORTUNITY TO DEVELOP

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VARIABLES	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree	P value		
I have sufficient opportunity to develop in my work	09 (14.1%)	32 (50%)	13(20.3%)	09 (14.1%)	01 (1.6%)	Highly significant		
Variation in my work is satisfactory	04 (6.3%)	33 (51.6%)	16 (25%)	10 (15.6%)	01 (1.6%)	Highly significant		
I experience frustration in my work due to limited resources	11 (17%)	29 (45.3%)	08 (14.1%)	15 (23.4%)	00 (00%)	Highly significant		
My work routine is non- stimulating	05 (7.8%)	27 (42.2%)	10 (15.6%)	19 (29.7%)	03 (4.7%)	Highly significant		
Too much is expected from me at work	10 (15.6%)	23 (35.9%)	11 (17.2%)	19 (29.7%)	01 (1.6%)	Highly significant		

TABLE - 04 LEVEL OF RESPONSIBILITY

VARIABLES	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree	P value
I enjoy status in the community as doctor	13 (20.3%)	40 (62.5%)	06 (9.4%)	04 (6.3%)	01 (1.6%)	Highly significant
I get recognition for task well done	10 (15.6%)	32 (50%)	13 (20.3%)	07 (10.9%)	02 (3.1%)	Highly significant
I am entrusted with great responsibility in my work	11 (17.2%)	38 (59.4%)	11 (17.2%)	03 (4.7%)	01 (1.6%)	Highly significant

TABLE 05 - TIME PRESSURE

VARIABLES	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree	P value
Many non-professional tasks that I have to do	07 (10.9%)	25 (39.1%)	06 (9.4%)	20 (31.3%)	06 (9.4%)	Highly significant
I have enough freedom to do work	06 (9.4%)	31 (48.4%)	18 (28.1%)	07 (10.9%)	02 (3.1%)	Highly significant
I spend more time doing lower level of job	05 (7.8%)	26 (40.6%)	09 (14.1%)	20 (31.3%)	04 (6.3%)	Highly significant

TABLE 06 STAFF RELATION

VARIABLES	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree	P value
I have good working relationship with colleagues	27 (42.2%)	34 (53.1%)	02 (3.1%)	01 (1.6%)	00 (00%)	Highly significant
There is atmosphere of cooperation between staff and management	14 (21.9%)	36 (56.3%)	08 (12.5%)	04 (6.3%)	02 (3.1%)	Highly significant
There is clear channel of communication at my work palce	13 (20.3%)	34 (53.1%)	08 (12.5%)	09 (14.1%)	00 (00%)	Highly significant
My managers concern about my well being	10 (15.6%)	43 (67.2%)	07 (10.9%)	04 (6.3%)	00 (00%)	Highly significant
Management does involves staff in decision making	07 (10.9%)	23 (35.9%)	21 (32.8%)	10 (15.6%)	03 (4.7%)	Highly significant
I can depend on my colleagues for support	12 (18.8%)	41 (64.1%)	07 (10.9%)	04 (6.3%)	00 (00%)	Highly significant
I am happy with management style in my institution.	03 (4.7%)	28 (43.8%)	18 (28.1%)	10 (15.6%)	05 (7.8%)	Highly significant

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