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Dimensions of Quality of Work Life: A Literature Review In Health Care Sector

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ABSTRACT

Quality of Work Life gained an importance in the current context of organizations due to the changes in economic scenario around the world. Quality of Work Life has evolved as an important aspect, which affects an organizational efficiency and productivity. It is very important to any organisation to achieve its objectives. Quality of work life is the core factor of success of organisation. If the organisation give more importance to improve quality of work life of employees, it will surely improve the quality of the organisation. QWL is a multi-dimensional term which provides a good work life balance and gives a qualitative boost to total work environment of any organization. In this paper we are trying to analyse some reviews related on quality of work life in health care industry.

KEY WORDS: quality of work life, work environment, socio-economic factors

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INTRODUCTION

Quality of work life (QWL) fathoms the building of work environments that are physically and mentally alluring in order to encourage the representatives in fulfilling basic individual needs through their work encounters while accomplishing authoritative objectives. Joy of the representatives will credit from their work lives just when the essential assumptions regarding their working environment and occupation are reasonably satisfied. In this way, associations need to canter around the work part of the representatives also, animate inspirational demeanours and conduct through self-esteem, confidence and positive personality at the work environment. Further, their work job ought to incorporate the ideas of participative administration, self-initiative and representative strengthening in order to encourage representatives to practice their maximum capacity in accomplishing the organizational objectives. Quality of Work Life, as the word goes it is all about how the work and personal life is being managed and meaningfully meet the needs of both work and life. It is a set of principles or the elements that are relevant to an individual's well being in the organization which consists of the task, the physical work environment, social surroundings inside the organization, body system and relationship between life on and off the work.

LITRATURE REVIEW

Brooks and Anderson (2004)¹ in their article explored how acute care nurses in a mid-western state assessed the quality of their work-life. Through a simple random sample technique, 1500 registered nurses were selected and surveyed and they collected data for the survey by employing Brook's Quality of Nursing work-life. Their finding shows that nursing workload was too heavy, and there was not enough time to do the job well. They conclude that there remain on going and essential work-life concerns for staff nurses that the occupation has neither addressed nor solved in any expression, long-term way.

Pryce et al.,(2006)² aimed to assess the impact of an open-rota scheduling system on health, work-life balance and job satisfaction of nurses working in the psychiatric ward in Denmark. The primary data was collected with the help of a structured questionnaire was distributed to control and intervention groups. Nurses with intervention group trailed an open-rota system in which nurses designed their own work-rest schedules. Participants in both the control and intervention groups were invited to fill a questionnaire survey at the onset of the research study and 20 months succeeding. The collected data were analysed using repeated measures analysis MANOVA. Their results show that nurses in the intervention group reported that they were more satisfied with their work hours, minimum prospective to switch their working shift when working within the open-rota system and

reported substantial upsurges in work-life balance, job satisfaction, social support, and community spirit when compared with nurses associated in the control groups. They conclude that the ownership and choice over work-rest schedule were more beneficial for both nurses and potentially the hospital. Hsu and Kernohan (2006)³ carried out a descriptive study with a convenience sample to analyse the dimensions of hospital nurses' quality of working life. They selected sample size of 16 focus groups, each containing 3-5 registered nurses with minimum 2 years of experience in one medical centre and five regional hospitals. They know fifty six QWL classes and fitted into half-dozen dimensions, namely, socio-economic relevance, demography, organizational aspects, work aspects, human relation aspects and self-actualization. Most important issues accentuated by focus groups were managing shift work within the demands of family life; accommodation; support resources; and nurses' clinical ladder system and salary system.

Chang et al., (2009)⁴ in their study reviewed the methodological choices (sampling frames, constructs investigated and measures used) in 245 empirical work-life balance papers published in a range of discipline-based peer-reviewed journals between 1987 and 2006. Results show that work-life balance studies ought to establish bigger consistency between the conceptualization of constructs and therefore the operationalization of measures. There is additionally scope for well-designed field experiments to determine clear causative relationships between variables. Sampling alternative in previous literature is somewhat affected and will be increased by targeting single and same sex parent families, manual and lower-skilled service workers, and employees providing eldercare. Researchers ought to even be a lot of clear in providing rationales for his or her selections of organizations or cluster lists wont to target respondents. The findings have significant implications for understanding, interpreting, and utilizing contemporary work and family literature.

Kossek et al. (2010)⁵ in their article examined perspectives on employer work-life policies and procedures as potential organizational change phenomena. Work-life policies of an organization will help in enhancing organizational structural and cultural support for work, family and personal life and empower employees to control and get on their work and caregiving, which will increase work augmentation and bring about typecasts of ideal workers. Structural support was in the practice of redesigning of the job, reducing workloads, occupational safety, and formal policies on absenteeism, vacations and sick time whereas cultural support includes informal workplace social and relational support from supervisors and co-workers.

Nayeri, et.al (2011)⁶, in their research conducted a descriptive study to examine the relationship between the quality of work-life and productivity among 360 clinical nurses working in the hospitals of Tehran University of Medical Sciences. Their findings exhibited that the QWL was

at a moderate level among 61.4% of the participants. Only 3.6% of the nurses rumored that they were glad with their work. None of these United Nations agency rumored the productivity as low rumored their work life quality to be fascinating. Spearman-rho test shows that there exists a significant relationship between productivity. The results revealed that top management and managers must adopt suitable policies to stimulate the quality of work life to increase productivity.

Munir et al., (2011)⁷ in their paper explored the mediating effects of work-life conflict between transformational leadership and job satisfaction and psychological well-being. They have applied longitudinal design in their study and the respondents were asked to rate on transformational leadership behaviours of their formal leader. Totally 30 leaders were rated by their followers and their regression results show that transformational leadership style was directly associated with the perception of work-life conflict, job satisfaction, and psychological well-being among those working in health – care settings for elderly people. It was also found that work-life conflict mediated the association between transformational leadership and psychological well-being. Their findings also suggested that implications of transformational leadership style will reduce work-life conflict and improve perceptions of work-life balance and employee well-being.

Lakshmi et al., (2012)⁸ examined the work-life balance of female nurses in hospitals by conducting a comparative study of Government and Private hospitals in Chennai, India. The results show that 53% of the women were struggling to achieve WLB. The objectives of the study were to identify the influence of workplace environment and stress-related issues on the emotional status of female nurses, to analyse the features of motivation initiatives adopted by the hospitals, and to examine the factors which determine the satisfaction of female nurses working in two or three specific fields. The primary data required for the study was collected from 400 female nurses in Government and Private Hospital. Statistical analysis like Multiple Regression and t-test were applied to analyse the data collected. It was concluded that the work-life balance of both the Government and private nurses was a challenging one and there was a need for both hospitals to address the work-life balance related issues and support the female nurses to manage their work-life balance. Their need to be reviewed periodical in terms of their work and personal life satisfaction which would increase their performance, otherwise, they would be subjected to severe stress.

Emadzadeh et al., (2012)⁹ made an attempt to study the quality of work life of primary school teachers in Isfahan city and observed that their quality of work life is less than average. But, their motivation was high in spite of dissatisfaction in salaries paid. They employed descriptive survey method and collected data through a questionnaire from 120 teachers were selected on a random basis from a population size of 862 teachers in Isfahan city. The questionnaire was tested for

reliability; the Cronbach's alpha coefficient of 87% was significant at alpha 1%. The collected data were analysed using ANOVA, Levin test and t-test.

Brown and Patricia (2012)¹⁰ in their research investigated nurse's work-life balance in public sector hospitals in Ireland, focusing on nursing employees and their experiences of HRM policies and practices of management which help them to have good and positive work, life experience or balance which results in a decrease in work-life conflict. The research question was framed with three themes under the heads of; Availability, Management Implementation and Usage of work life balance policies and practice for the respondents regardless of their present work situation. Their study shows that few respondents believe that it is nurses own accountability to ensure that they have a satisfactory work-life balance. It was found that nurses who were working in the acute hospital have a range of work hours and they want to deliver health services on a continuous 24/7 basis. Clinical nurse manager finds personal benefit in managing their work-life balance as they were not demanded to do night duty, but with this higher managerial role comes with additional accountability to confirm safe staffing levels were provided at all times on the ward to have good patient care.

Almalki et al., (2012)¹¹ made an attempt to assess the Quality of Work-life among PHC nurses in the Jazen region, Saudi Arabia. They used cross-sectional survey and they have applied convenient sampling techniques and data were collected from 134 PHC centers in Jazan, Saudi Arabia by using Brook's survey of quality of nursing life. The identified the factors like unsuitable working hours, lack of amenities for nurses, inability to balance work with family needs, insufficiency of vacations time for nurses and their families, poor staffing, management and supervision practices, absence of professional development prospects, inadequate salary and an improper working environment in terms of the level of security were influencing their work life and their findings revealed that majority of the respondents were dissatisfied with their work life. It was found that the majority of the respondents have a positive and satisfied relationship with their co-workers and had a sense of belonging in their workplaces.

Noor and Abdullah (2012)¹² in their research paper Quality of Work Life among Factory Workers in Malaysia found that the relationship of workers' job satisfaction with their perception about organizational climate was most significant. Workers perceiving organizational climate will upsurge job satisfaction as compared to those who perceived organizational climate as autocratic or undecided.

Das and Akhilesh (2012)¹³ in their study in order to determine the work-life balance of Indian women both in research and managerial careers they have developed a multi-construct a conceptual model. They strongly support that constructing sectorial occupational specific model instead of

generic gender centric models. Their study looked at the input-output framework and considered variables on a Likert scale and they have felt that there was a requirement to extend the research to include other variables like, age, caretaking responsibilities, and so on for a better understanding of how the multi construct factor model are influenced.

Ranjan and Prasad (2013)¹⁴ in their article examines the working conditions and quality of life of Indian railway drivers and the variables that lead to disproportion, causing a high likelihood of an accident. They reviewed the literature of work-life balance of an Indian railway driver's to find out the working environment and level of their work-life balance which is having very high consequence and impact on their total well-being and productivity and entire growth of an Indian railway. They suggested that in order to formulate initiatives that safeguard railway drivers against work stress the Indian railway should work with researchers, trade unions, policymakers and railway drivers themselves; as a result, the quality of their work-life could be enhanced. Along with valuable insights towards the deteriorating condition of the railway drivers and highlight their work this study also provides a tentative start off point towards the greater understanding of present scenario under which the Indian railway drivers were carrying out their duty.

Gayathiri and Ramakrishnan (2013)¹⁵ made an attempt to review the literature on quality of life and identified the concept and measurement variables likewise linkage with job satisfaction and performance. They conclude that there were objective (physical and structural design) factors provides the work-place setting and intervening policy factors that affect work-processes of employees. They found that factors like Job design , Work environment and facilities, Job security, Health, stress and safety, Wages and rewards, Aesthetics and creativity Conflict, Learning and development, Leadership and employee empowerment, better place to work and better motivation leads to quality of work life and jobs satisfaction which results in performance in the way of Growth in sales, assets and ROAG, stakeholder value, business sustainability, competitive advantage, employee knowledge, technological leadership and flexibility.

Goyal (2014)¹⁶ in conducted a study on work-life balances of Nurses and Lady Doctors in clinics and private hospitals with a sample size of 134 nurses and lady doctors working in Punjab hospitals. The main objective of the study was to find the factors that will support nurses and lady doctors in managing their work-life balance and to know the obstacles they were facing. Factor analysis and one-way ANOVA test were used to analyse the data. The study concluded that the provision of work-life balance policies and practices followed in the hospitals will help nurse and lady doctors in employing their full capability and potential. It was also found that family-friendly policies should be provided in the organization such as parental leaves, job sharing arrangements,

provision of childcare facilities etc. so that women can be motivated and encouraged to prove their competence. Also, work flexibility and autonomy makes nurses and lady doctors more highly committed towards their work results in high productivity and job satisfaction.

Jensirani and Muthumani (2017)¹⁷ conducted a study on Work Life Balance of Nurses in Kovillpatti town with a sample size of 100 respondents from 20 private hospitals in Kovilpatti town. The study is predicated on each primary and secondary knowledge. Their objective of the study was to identify the problems of the respondents with regard to work-life balance. Their findings revealed that the majority of the nurses realized that they were more pressurized due to family respondents and their job leaves less time to spend with their kids and husband. Nearly 81% of respondents were in the favour of flexible work arrangements that should be provided to every working woman to manage their household and office responsibilities and also they wanted the organization to offer the child care facilities.

Thakre et al., (2017)¹⁸ conducted a study with an objective to know the perceptions about quality of work-life and the factors influencing quality of work-life of nurses working in Government Medical College and Hospital, Yavatmal. Cross sectional study was carried out with a sample size of 100 nurses selected randomly working at the tertiary health care institution. In order to determine the relationship between quality of work-life and demographic factors an independent t-test and one-way ANOVA was used. They conclude that the majority of nurses indicated that they were satisfied with the items in the dimension of work environment life. The study revealed that the quality of work life of nurses was on the moderate level. This study also reveals that there exists a significant association with socio-demographic characteristics of nurses and QWL. Work-life balance will aid to make out issues of work-life conflict.

Hemalatha and Shumugasundaram (2018)¹⁹ in their research article studied the socio-economic profiles of 300 employees working in the government hospital sector, Coimbatore district and identified the factor's that affects the quality of life in terms of career and family with the application of statistical tools like frequency table, rank analysis, factor analysis and percentage analysis. Their results revealed that work-life balance has much impact on employee job satisfaction, and it was inferred that on the basis of psychological factors, the employee's first priority was to complete expectation towards work, second priority to personal harassment in the form of unkind words or behaviour and third priority to impractical time pressures and fourth priority to positive feedback. They also conclude that to lead balanced successful happy life with their family the employees should have the satisfied and positive environment in the workplace, which improves

productivity and makes employee energetic and successful which will gain profit to the government hospital sector and patients in the hospital.

Anand et al²⁰., in their research article aimed to study the concept of quality of work-life and the role it plays in increasing the productivity and performance of an employee in the private hospital by applying multiple regression analysis, with a sample size of 104 employees with different designation such as Staff nurse, Technician, Executive and Manager in a private hospital. They applied statistical tools like Chi-Square, ANOVA, Regression, and Correlation to analyse the collected data. Their results show that there was no significant relationship between demographic factors such as age, marital status, qualification, position, and experience with Quality of Work Life. It was also found that the Independent factors training and development and Job Satisfaction are statistically significant towards welfare opportunities. And the Independent factors Compensation & Rewards, Organizational Commitment are statistically significant towards Organization Cooperation.

RESULT AND CONCLUSION

The studies done in work environment, work place and job satisfaction could make drastic improvements in nursing profession related to turnover and shortage. Majority of studies in nursing that evaluated job satisfaction wasn't ready to build any enduring contributions within the nursing work environments. They are facing a lot of problems like work pressure and workload was too heavy.

It found that family-friendly policies should be provided in the organization such as parental leaves, job sharing arrangements, provision of childcare facilities etc. so that women can be motivated and encouraged to prove their competence. Also, work flexibility and autonomy makes nurses and lady doctors more highly committed towards their work results in high productivity and job satisfaction. Work-life policies of an organization will help in enhancing organizational structural and cultural support for work, family and personal life and empower employees to control and get on their work and caregiving, which will increase work augmentation and bring about typecasts of ideal workers.

REFERENCES

1. Brooks BA, Anderson MA. Defining quality of nursing work life. *Nurs Econ.* Nov-Dec; 2005; 23(6):319-26.
2. Hsu, Kernohan. Dimensions of hospital nurses quality of work life. *Journal of advanced nursing.* 2006; 54(1):120-131.

3. Fahmida Munir. Mediating the effects of work life conflict between transformational leadership and health care workers job satisfaction and psychological well being. *Journal of nursing management*. 2011; 20(4): 512-21.
4. Lakshmi. Analysis of work life balance of female nurses in hospital-Comparative study government and private hospitals in Chennai. *International journal of trade ,economics and finance*. 2012; 3(3): 213-218.
5. Brwon, Patricia. An investigation of nurses work life balance in public sector hospitals in Ireland. 11 th world congress of the international federation of scholarly associations of management.
6. Almalki MJ, FitzGerald G, Clark M. The relationship between quality of work life and turnover intention of primary health care nurses in Jazan region, Saudi Arabia. *Human resources for health*. 2012;5(2) doi:10.1186/1472-6963-12-314.
7. Noor, Abdhullah. Quality work life among among factory workers in Malasia. *Procedia-social and behavioral*. 2012; 35:739-743.
8. Madhurimadas, Akhilesh. Work life balance of women researchers and women managers in India- A multi construct view. *Singapore management journal*. 2012; 1(2):54-78.
9. Rajesh ranjan, T. Prasad. Working condition and quality of work life of Indian railway drivers. *European journal of business and management*. 5(19)17-27.
10. Gayathri, Ramakrishnan. Quality of work life linkage with job satisfaction and performance. *International journal of business and management invention*. 2013;2(1):1-8.