

Quality of Work Life of Nurses in Vellore City

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Abstract - The quality of work is always related to the activities which takes place at every level of an Organization and which simultaneously enhance human dignity, growth and promote greater organizational effectiveness. The job natures of nurses are hectic one. The Longer working hours, Emergency, various kinds of patients, shifts and the problems from other healthcare workers are all affecting the Nurses' productivity and performances. The productivity and performances significantly related with the quality of Work Life. The Descriptive Study is utilized to portray the attributes of Nurses in Private Hospitals. A Simple Random inspecting procedure are utilized for essential information assortment. The examination has inspected 150 Nurses. The examination instruments are questionnaire technique. This examination centers around study the issues identified with Quality of Work Life of Nurses, which may enable the wellbeing to mind part to radically lessen the wearing down rate and to give elevated level of employment fulfillment to their Nurses.

Index Terms - Organization, productivity, performance, quality, Vellore

I.INTRODUCTION

A person who enjoys the work and derives Fulfillment alone can perform well and create more. The accomplishment of tasks and goals leads for job satisfaction. The accomplishment of objectives and targets, work fulfillment, satisfaction of individual needs drives prosperity and bliss, which is the fundamental significance of individual life. The efficiency and exhibitions altogether related with the Quality of work Life. Nature of Work Life is a worry not exclusively to improve life at work, yet in addition life outside work. Attendants possess the biggest utilizing bunch in medical care industry. The activity idea of an attendant is essentially they need to work in

shifts, work for longer moves with not many breaks or without breaks. The examination revealed here planned to give bits of knowledge into positive and negative parts of attendants working in Private Hospital in Vellore city from their Quality of Work Life and its effect on their Performance.

II. STATEMENT OF THE PROBLEM

The Quality of Work Life means to create, upgrade, and use human recourses viably, to improve nature of administrations and lessen cost brought about to fulfill the Nurses so as to inspire them. Among different assistance divisions, the medical services industry has developed altogether for as long as thirty years, especially after Globalization. Still the medical care part is in developing stage with specific constraints, which makes a weighty weight on nursing experts and it might influence their Work Life. In this unique situation, it would be more applicable to make an Endeavour to contemplate the issues identified with Quality of Work Life of medical caretakers. Lion's share of the medical caretakers feels that their clinics are not giving sufficient compensation and measures to adjust their work and individual life and, in this manner, battling to give an agreeable atmosphere to the representatives to accomplish the Quality of Work Life. This made the scientist to consider the nature of work life of Nurses working in the private Hospitals in Vellore city.

III. REVIEW OF LITERATURE

Chandrasekar (2007) led an investigation called Quality of Work Experience fundamentally the same as that of Quality of Work Life, since dissimilar to the Quality of work life considers which are exceptionally

wide idea and his examination limits Quality of work life to Quality of work understanding to evaluate the representatives' discernments about their involvement with workspace to do facilitate examination. In his examination he conceptualized the inborn and extraneous estimation of nature of workplace and led in three clinics of Hyderabad and Secunderabad and he further included that a restored research approach is expected to comprehend the positive side of work and its more extensive impacts on the individuals' work lives just as their different areas of public activities.

Gunawathy and Suganya (2007) features that Work life balance is turning into a basic issue in BPOs, on the grounds that it is having sizable extent of ladies representatives and it is significant for associations to advance work life balance best with the end goal that it reflects in term of lower wearing down or terrible showing or low worker inclusion at last influencing the benefit and gainfulness of the associations According to Richard E.Walton, "Quality of work life is a process by which an organization responds to employee needs for developing mechanisms to allow them to share fully in making the decisions that design their lives at work".

IV. OBJECTIVES OF THE STUDY

1. To study the Demographic profile of the Nurses in Vellore city
2. To study the dimensions of Quality of Work Life.
3. To study the association between Work quality and Life quality
4. To explore the impact of quality of Work life on Nurses performance in the Private Hospitals.

V. HYPOTHESES

1. The demographic profile of the Nurses (age, income, educational qualification)
2. does not influence the Quality of Work Life.
3. There is no significant difference in the Work quality, Life quality, Quality of work life and Nurses' performance among the group of respondents based on age.
4. There is no relationship between work quality and life quality.

VI. SCOPE OF THE STUDY

The examination targets' investigating the issues related with Quality of Work life of Nurses in Vellore City and is relied upon to give discernment into the issues of Quality of work Life of the medical caretakers. The medical services industry will have the option to distinguish the issues identified with the Quality of work life of its attendants, their activity fulfillment and work life balance. The medical services industry would be in a situation to step forward to improve the Quality of Work Life of its representatives and to encase reasonable core value and arrangements to modify Quality of Work Life programs effectively and to make intermittent study to gauge the nature of work life.

VII. LIMITATIONS OF THE STUDY

The current exploration has limited to Vellore city as it were. It has not engaged the whole region. The examination has centered nurses working in private Hospitals and it has not engaged the Nurses working in Government Hospitals and Diagnostic centres. The asset restriction of the scientist did not permit leading the examination all the more intricately with a bigger size of test.

VIII. TABLES

Reliability Test:

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.911	.895	14

The table 1: shows that all the variable's reliability values are greater than 0.6, which ensures the reliability of the tools.

TABLE -2 SOCIODEMOGRAPHIC PROFILE OF THE NURSES

Age	Age	No. of Respondents	Percentage
	Below 25 years	4	2.6
	26-35 years	32	21.2
	36-45 years	70	46.4
	Above 46 years	44	29.3
	Total	150	100.0
Marital status	Marital status	No. of Respondents	Percentage
	Married	90	60.0
	Unmarried	53	35.3
	Divorcee	7	4.7
Total	150	100.0	
Educational level	Education	No. of Respondents	Percentage
	Upto +2	40	26.7
	Diploma	70	46.7
	B.Sc Nursing	32	21.3

	M.Sc Nursing	8	5.3
	Total	150	100.0
Designation	Designation	No. of Respondents	Percentage
	Head Nurse	13	8.7
	Senior Staff Nurse	58	38.7
	ANM	65	43.3
	GNM	14	9.3
	Total	150	100.0
Total Working Experience	Experience	No. of Respondents	Percentage
	Less than 5 years	23	15.3
	5-10 years	27	18.0
	11-15 years	100	66.7
	Total	150	100.0
How much time to take relax	Time to take relax	No. of Respondents	Percentage
	15-30 min	82	54.7
	30-60 min	51	34.0
	Nothing	17	11.3
	Total	150	100.0
Working in	Working in	No. of Respondents	Percentage
	Medical college Hospital	20	13.3
	Private Hospitals	97	64.7
	Nursing Home	33	22.0
	Total	150	100.0
Monthly Income	Monthly Income	No. of Respondents	Percentage
	Below 10000	88	58.7
	10000-20000	18	12.0
	20000-30000	27	18.0
	Above 30000	17	11.3
	Total	150	100.0
Having parents at home	parents at home	No. of Respondents	Percentage
	Yes	116	77.3
	No	34	22.7
	Total	150	100.0
No of Children	No of Children	No. of Respondents	Percentage
	1	108	72.0
	2	30	20.0
	3 and above	12	8.0
	Total	150	100.0

Interpretation: The socio-demographic characteristics (Table:2) of the nursing personnel showed that majority 46.4% of them are in the age group of 36-45 years and the least 2.6% of respondents are in the age group of below 25 years. Analysis revealed that the highest 60 % of nurses are married and the least 4.7% of respondents are divorcee. 46.7 % or the majority of the respondents are in educational level of Diploma and only 5.3% have a post graduate degree of M.Sc (Nursing). Out of total 150 nurses participated in this

study 43.3% are serving as ANM and 8.7 % or the least number of respondents are in the status of head nurses. 66.7% or the majority of the respondents are in 11-15 years of work experience and 15.3% respondents are in Less than 5 years of work experience. The majority 54.7% of respondents are getting 15-30 min time to relax, and 11.3% of respondents do not get time to relax, 64.7% or the majority of the respondents are working in private hospitals, and the least 13.3% of respondents are working in medical college hospitals. The majority 58.7% of private sector nurses are earn below 10,000 and the least 11.3% of nurses obtain more than 30,000 per month. The majority of 77.3% respondents are having parents at home. 72% or the majority of the respondents have 1 child and the least 8.0% respondents have more than three children. ANOVA Test for Age group, Work Quality, Life Quality, Quality of Work Life and Nurses' Performance

Null Hypothesis (Ho):

There is no significant difference in the Work Quality, Life Quality, Quality of Work life and Nurses' performance among the group of respondents based on Age.

Alternative Hypothesis (Ha):

There is a significant difference in the Work Quality, Life Quality, Quality of Work life and Nurses' performance among the group of respondents based on Age.

Table 3: ANOVA

Dimension		df	Mean Square	F	Sig.	Remarks
Work quality	Between Groups	3	17.864	6.308	.000	< 0.01 Reject the Null Hypothesis
	Within Groups	146	2.832			
	Total	149				
Life quality	Between Groups	3	49.424	71.798	.000	
	Within Groups	146	.688			< 0.01 Reject the Null Hypothesis
	Total	149				
Quality of work life	Between Groups	3	49.424	71.798	.000	< 0.01 Reject the Null Hypothesis
	Within Groups	146	.688			

	Within Groups	146	.688			
	Total	149				
Nurses performance	Between Groups	3	19.490	6.305	.000	
	Within Groups	146	3.091			< 0.01 Reject the Null Hypothesis
	Total	149				

Interpretation: Table: 3, shows that the Significance value of Work Quality, Life Quality, Quality of Work Life and Nurse’ Performance were less than the $\alpha = 0.01$, hence the Null Hypothesis is rejected, and it was concluded that the respondents belonging to various age group differ in their opinion on Work Quality, Life Quality, Quality of Work life and Nurses’ Performance.

CORRELATIONS BETWEEN THE WORK QUALITY AND LIFE QUALITY OF NURSES

Null Hypothesis (Ho):

There is no relationship between Work Quality and Life Quality of the Nurses.

Alternative Hypothesis (Ha):

There is a relationship between Work Quality and Life Quality of the Nurses.

Table 4: Correlations

		Work Quality	Life Quality
Work Quality	Pearson Correlation	1	.172*
	Sig. (2-tailed)		.036
	N	150	150
Life Quality	Pearson Correlation	.172*	1
	Sig. (2-tailed)	.036	
	N	150	150

*. Correlation is significant at the 0.05 level (2-tailed).

Interpretation: Table: 4 It is cleared that, there is a significant ($p < 0.05$) relationship between Work Quality and Life Quality of Nurses working in the Private Hospitals.

IX. CONCLUSION

The Characteristics of the Study to the representative’s observation with respect to the Quality of Work life is very acceptable. Plainly the segment characters, for example, the age, Educational qualification, Marital status, Experience, Designation, working place, pay level, kinds of hospital and employee size are impact the Quality of Work Life. The connection

demonstrates that the harmony between the Work Quality and Life Quality by its positive relationship. In future the environment may be quite dynamic, and the health care sector needs to give more consideration to plan HR arrangements to upgrade and to help the Quality of Work Life of the Nurses.

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