

“A Study on Satisfaction Level Variations of Medical Officers in Haryana”

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Abstract: *The survival and growth of corporate in a highly competitive and turbulent global business environment is a tedious task. Organizations have been forced to redefine the definition of employee satisfaction. There are contradictions by HR professionals and managers on whether happy employees are productive also. The effectiveness of any organization is predicated on the quality of its personnel. Every organization requires competent personnel to be employed in the workplace. They also want the persons to be satisfied with the job as well but not that they are satisfied because they don't have to work. This problem is more serious in the government sector especially in the health sector where the medical officers have to deal with the patients and they have to face certain adverse conditions like unfavorable job environment, poor conditions and low earning levels. So here an attempt has been made to redefine the meaning of satisfaction, to know about fulfillment satisfaction, study the satisfaction level of the medical officers in Haryana state and to assess whether the satisfaction level of the medical officers differs with respect to Primary Health Centre, Community Health Centre and General Hospitals.*

Key words: *Fulfillment satisfaction, Hospital units, PHC, CHC, GH, Medical officers.*

I. INTRODUCTION

The success of every sector whether it is agriculture, industry, or services depends more on human assets than on physical or financial assets. Today organizations are stressing more on creating a suitable environment at the workplace where employees are enthusiastic and more committed to their work. They are doing this because of the fact that if a person is not satisfied, organizations suffer losses both in terms of tangible and intangible costs since human capital is the most valuable asset having lot of potentials and they can be a competitive advantage for the organizations. When healthcare sector is being reflected, it is seen that rapid scientific, technological and medical advances in recent years have transformed the health sector completely from conventional pattern. Hospitals now have become a dynamic industry. When we talk of the public hospitals in Haryana, we see that lot of medical officers leave the organization and those who are in the job are not performing their duties diligently. They perform them just for the sake of performing and there is a lack of employee engagement. In order to bring employee engagement, efforts must be done in order to make the employees satisfied, then on bringing fulfillment satisfaction and then only engagement can be expected from them.

Objectives of the Study

- To know about the concept of fulfillment satisfaction.
- To find the satisfaction level of the medical officers of various PHC's, CHC's and General Hospitals.
- To find whether the satisfaction level of the medical officers differ with respect to PHC's, CHC's and General Hospitals.

Hypothesis of the Study:

The following null hypothesis was postulated:

H₀₁: There is no significant difference in medical officers' satisfaction w.r.t PHC's, CHC's and General Hospitals.

II. REVIEW OF LITERATURE

Chopra, G. and G. Singh (1992) studied job satisfaction among doctors in ESI corporation, Delhi. He studied the job satisfaction of 40 doctors for different variable like experience, salary, age, gender, availability of medicines and equipments, opportunity to innovate, skill utilization, physical conditions, job security, fringe benefits etc. It was concluded that job satisfaction is a multi-dimensional phenomenon and there is no point in assigning one factor as a sole determinant of satisfaction/dissatisfaction with the job.

Chaudhury S, Banerjee A (2004) in their article “Correlates of Job Satisfaction in Medical Officers” carried out a study assessing the job satisfaction of medical officers. He analyzed the job satisfaction of Medical officers who were having atleast five years service with the help of a scale by Brayfield and Rothe. A total of 64

medical officers (22 administrative cadre, 26 specialists and 16 super specialists) were taken in the study and the researchers found a low level of job satisfaction among the medical officers. Even in the three groups, there was no significant difference in the level of job satisfaction. Only 3 each of administrative cadre and specialist officers were in the higher satisfied group. The factor most common stated (91.5% of the respondents), as contributing towards job satisfaction was an opportunity for self-development. Others in decreasing frequency were job security (51.6%), prestige of organization (38.5%), nature of work (28.8%) and opportunity for promotion (21.6%). Factors for dissatisfaction were poor utilization of skills (80.8%), poor promotional prospects (78.4%), inadequate redressal of grievances (72.7%), organizational policy (68.7%) and inadequate pay and allowances (48.7%). Overall it was concluded that job satisfaction is a phenomenon having multi-dimensional attributes and it is not easy to assign one factor as the sole determinant of satisfaction/dissatisfaction with the job.

Sinha Jai B P, Gupta Parvinder, Singh Sarita, Srinivas E S, and Vijaykumar VSR in their article “Societal Beliefs, Organizational Climate, and Managers' Self-Perceptions”(2001) stressed on how societal beliefs which were traditional affect organizational climate, and how these two, jointly or independently, shape managers' self perceptions.

III. CONCEPTUALISATION:

Job satisfaction constitutes a very popular concept not only in psychological but also in economic research activities for at least two reasons. Firstly, it has an impact on various organizational success factors such as commitment or intention to quit. Secondly, employers can influence job satisfaction by various human resource management (HRM) practices such as feedback, job design, participation or autonomy.

Locke (1976) has given the most-used research definition of job satisfaction and he defined it as “a pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences”. In Locke’s definition only, is the importance of both affect, or feeling, and cognition, or thinking. In simple words, it means “when we think, we have feelings about what we think”. Conversely, when we have feelings, we think about what we feel. So, Cognition and affect are thus linked, in our psychology and even in our biology. Thus, while we evaluate our jobs, both thinking and feeling are involved. Over the past several years, many organizations have focused on reigning in key financial indicators. Companies have improved their financial performance and created competitive advantage by searching the global labor market for the most efficient resources, creating improvements in the process and using latest technology to speed up operations, But downsizing, outsourcing, and off-shoring will soon reach upper limits on their ability to improve organizational performance. In addition, these actions are available to all competitors – making them, at best, temporary sources of competitive advantage. So, where will the next force for performance improvement come from? Where can organizations find sources of sustainable (not temporary) competitive advantage? There is only one answer to it i.e. with Fulfillment Satisfaction and research has repeatedly shown that there is a direct correlation between employee Fulfillment Satisfaction and job performance.

Difference between Traditional Satisfaction and Fulfillment Satisfaction

It was believed that employee satisfaction is necessary for high performance; studies in the past have not supported this belief. The dictionary defines satisfaction as “gratification of an appetite and pleasure.” In general, people most often associate satisfaction with happiness and comfort. It is likely that in most of the previous studies, people responded to the question “Are you satisfied?” by interpreting the question as “Are you comfortable in your work? Do you feel secure and content?” While this may not have been the intent of the question, this understanding of the question does suggest why organizational performance has not been linked statistically to employee satisfaction. We don’t often associate high performance with contentment, security, and comfort. However, we do tend to associate high performance with enjoyment of the work, fulfillment in accomplishment, and effective work relationships. Therefore, a powerful tool for creating a high-performance, high-fulfillment work environment was found which named as fulfillment Satisfaction” (or, just “fulfillment”) to differentiate it from the traditional definition of satisfaction (that is, satisfaction as being comfortable). It is believed that, if we can identify and measure a more meaningful definition of satisfaction, we will find a closer causal relationship to organizational performance. Thus five principal elements of fulfillment were identified which are as follows:

- **Satisfaction with the job:** To be fulfilled, people need to value their day-to-day work activities. People need to drive a sense of accomplishment or pleasure from the work itself.
- **Satisfaction with relationships:** People also need to value the relationships they have on the job to be fulfilled. People want to like working with their coworkers. While people know that conflicts will arise, they want to be assured that the focus is not on the interpersonal differences, but the task differences.
- **Satisfaction with leadership:** If people do not think that they are being managed or led effectively, it is hard to have fulfillment in the work.

- **Knowing that others are satisfied in their work:** One of the key findings from our research is the importance of the open expression of fulfillment in the workplace. Knowing that others gain fulfillment in their work is the most powerful motivator.
- **Knowing that others are satisfied with the organization’s leadership:** It is difficult to be fulfilled if there is not open trust and support for leadership. Equally, when that open trust and support is present, it helps create an environment where people feel empowered and willing to give their full engagement. This combination of both personal satisfaction and communication of group satisfaction is a critical distinction between Fulfillment Satisfaction and traditional definitions of satisfaction. In today’s work environment, few objectives are met solely through one individual’s efforts. In addition, as people work together in group settings, they are likely to influence each other’s attitudes and beliefs. Because of the roles that teamwork and joint effort play in organizational success today, tapping into these elements seems critical. One might feel personally satisfied, but not perceive satisfaction in others. As a result, the overall sense of fulfillment that one feels will be diminished. Organizations that encourage open communication, where employees discuss their level of satisfaction, promotes high performance.

Thus it is concluded that for the medical profession which is regarded as one of the noblest professions in the world where they are expected to demonstrate the highest standards of professionalism and to adhere to these high standards even in the face of such adversity as unfavorable job environment, poor conditions and low earning levels, it is difficult for them to be fair in their dealings with patients. In order to sustain the trust of the people, the medical professionals must prove their commitment to competence, integrity and morality. One of the best ways to strengthen their professionalism is to apply these attributes in their daily practices. However, the major changes in demographic patterns, composition of the employment sector, increasing consumerism coupled with declining moral standards are increasingly exerting pressure on professionalism and medical profession is no exception. The level of job satisfaction among doctors, especially young doctors, appears to be declining, as they are often found complaining about their inappropriate working conditions, lack of career development opportunities, inadequate compensation and exhaustive working hours etc. Thus there is a need to make them satisfied rather concentration should be on fulfillment satisfaction so that employee engagement can be brought.

IV. DATA ANALYSIS:

Data analysis usually involves reducing accumulated data to a manageable size developing summaries, looking for patterns, and applying statistical techniques. A small study was conducted to know the satisfaction level of the medical officers of various PHC’s, CHC’s and General Hospitals and whether the satisfaction level of the medical officers differ with respect to PHC’s, CHC’s and General Hospitals.

A questionnaire was prepared for the medical officers and after pilot testing it was finally administered for collection of primary data. Eight districts were selected as the representative sample. The respondents’ sample size chosen was 300 medical officers. The analysis of the data so collected was done with SPSS 17.00. The results of the study are presented as below.

The Chart 1, below is the representation of the mean scores of the satisfaction level of the Medical officers which shows that to all the categories of the work culture, they are having below average satisfaction except for the category “job according to interest and abilities” with a mean score of more than 3 on a 5-point likert scale.

Insert Chart 1 about here

In order to find whether the satisfaction level differ with respect to various hospital units (Primary Health Centre, Community Health Centre and General Hospital), the data was subjected to inferential statistical analysis where one way ANOVA (Analysis of Variance) was used. The table 1, below is the representation of the findings of the one way ANOVA.

Insert Table 1 about here

From table 1, it is clear that there exists no significant difference in medical officers’ satisfaction with respect to various hospital units.

V. FINDINGS:

It was found that in all the eleven categories of culture, the medical offices were having below average satisfaction i.e. with financial benefits, non-financial benefits etc. In this particular study, it was found that they were satisfied only with the “job according to interest and abilities” which is a clear indication of the poor health of the districts under study. Where it was seen that even for the facilities which were provided to them they

showed negative perception on the satisfaction level, it is difficult to expect fulfillment satisfaction from them. So it was seen that there was a need to motivate the medical officers to work and solve their problems in consultation with them only.

VI. CONCLUSION & RECOMMENDATIONS:

It was concluded that in future, some strong policy should be made related to the provision of financial benefits, non financial benefits, opportunities for development and Promotion etc In Haryana, there are certain facilities to be added in order to have a strong financial stability in the job so that more and more candidates are attracted to join HCMS. Also some provisions should be provided for job and personal security; chances to do responsible work etc. A feeling of empowerment should also be given so that they are more engaged in their job. It is also recommended that there should be some informal and formal meetings with the in-charge of various PHC, CHC and General hospitals to know about the problems which they face in day-to-day working of the institutions so that some clear policy can be made and communicated to all. It is also being recommended that the policy should be made in consultation with the medical officers, CMOs which would make the employees feel empowered and it would help to overcome the resistance to change if some new concept has to be introduced. The medical officers must know the latest technical up-gradations in the health care sector, participation in various seminars, workshops, conferences, symposium etc for their total personality development so that the overall effectiveness of any organization can be improved by enhancing the quality of its personnel.

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Chart 1: Representation of the mean scores of the Satisfaction level of the Medical officers

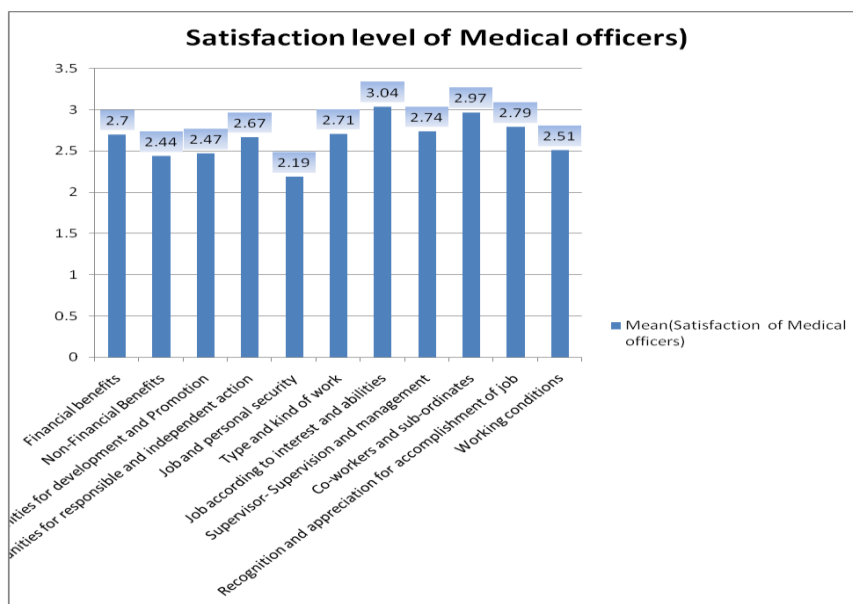


Table1: ANOVA results showing the Effect of Hospital units on satisfaction level of medical officers.

Categories of Work culture		F-value	Sig.
Financial benefits satisfaction	Between Groups	.034	.966
	Within Groups		
	Total		
Non-financial benefits satisfaction	Between Groups	.067	.935
	Within Groups		
	Total		
Opportunities for development and Promotion satisfaction	Between Groups	.977	.378
	Within Groups		
	Total		
Opportunities for responsible and independent action satisfaction	Between Groups	2.425	.090
	Within Groups		
	Total		
Job and personal security satisfaction	Between Groups	1.999	.137
	Within Groups		
	Total		
Type and kind of work satisfaction	Between Groups	.002	.998
	Within Groups		
	Total		
Job according to interest and abilities satisfaction	Between Groups	.683	.506
	Within Groups		
	Total		
Supervisor- Supervision and management satisfaction	Between Groups	.068	.934
	Within Groups		
	Total		
Co-workers and sub-ordinates satisfaction	Between Groups	.544	.581
	Within Groups		
	Total		
Recognition and appreciation for accomplishment of job satisfaction	Between Groups	.957	.385
	Within Groups		
	Total		
Working conditions satisfaction	Between Groups	.459	.632
	Within Groups		
	Total		