



ATTRITION OF NURSES IN CANCER CARE: ISSUES AND CHALLENGES

Dr. Tushti Bhardwaj

Asst. Professor, Department of Social Work, Dr. Bhim Rao Ambedkar College, University of Delhi.

ABSTRACT

Background: Nurse is an indispensable part of health care team. Indian health care system has severe shortage of nursing professionals. Further frequent change of jobs among nurses is not only a serious challenge for the hospital administration but also affects the quality of care to the patients.

Methods: The present article aimed to study the issues and challenges experienced by nurses in a private health care. The study followed a cross-sectional design and recruited respondents in two groups, one with more than one year of service length and another group those resigned from the service. A total of 55 respondents participated in the research. Data was collected using a self developed interview schedule. Raw scores of quantitative data were converted and categories for understanding job satisfaction and qualitative data was used to describe the issues.

Results: The study highlighted few factors contributing to problem of attrition among nurses. These included- less recognition of profession from Indian society, high work load, lack of growth opportunities, decent pay structure, other allowances and attractive job opportunities from other countries. Communication issues with doctors and unfulfilled expectations were also highlighted.

Conclusion: There is urgent need to improve the work atmosphere for nurses. The administration need to lower down their work load, make job enjoyable, give high scope for future study and career progression to the nurses.

KEYWORDS : Attrition, Cancer care, Nurse, Nursing care, job satisfaction

INTRODUCTION

Nurse is an integral partner of the health care team and serves as an important connecting link between the patient and the treating team. Nurse plays an important role in reducing patients' sufferings and improving their well being. India has severe shortage of nursing staff, currently we have 1 nurse for every 670 patients while the WHO recommended ratio is 1: 300¹. In such scenario, if nursing staff keep on changing frequently it will disturb the continuing of care to the patient. In a multidisciplinary team, different professionals work together to give holistic care to the patients. If a nurse does not remain part of team, the nursing care issues remain unfulfilled. It will be a challenge for other teammates including doctor, social workers, psychologist, physiotherapist and affect quality of care to the patients. Retaining nurse is becoming a major problem for the Indian hospitals as developed countries like UK, US and the Middle East are attracting nursing workforce with high salaries, better career prospects and standards of living². The private health sector is highly affected by nurses turnover as in government sector an employee feels security of job and do not want to change over frequently. Further, Indian health system is highly privatized, 80% of outpatient visits and 60% of hospitalized treatment is provided by private health sector³. So, private health sector is a major nursing workforce which experience frequent turnover too. Thus, this study has attempted to understand the issues of nurses in a private health sector so that appropriate measures can be initiated to retain the nursing workforce and strengthen their job satisfaction.

METHODS

The present study is descriptive in nature with main aim to study the expectations and challenges faced by the nurses. The study also aimed to identify the actors contributing to attrition of nursing staff. The study purposively chose a specialized cancer care hospital as such settings demand high skills sets and it will be very difficult to replace trained staff in a short span of time. In order to understand the concerns of the nursing staff over a period of their work service, the study followed a cross-sectional design and recruited respondents in 2 groups depending upon length of their service. One group (Group I) included those with more than one year of service length and another group (Group II) consisted of those extended their resignation from the service. A source list of eligible participants was prepared for sampling. The eligible participants included a total 88 nurses

with more than one years of experience and 30 nurses resigned from services during the study period. Considering small population size of those resigned from the services, it was decided to include all of them in the sample. An equal number of sample from service group was decided to be recruited through simple random sampling techniques. All the eligible participants were invited to participate but 5 nurses from group II (those resigned from the services) could not make themselves available during the study period. Thus a total of 55 participants formed the sample of the study. Data was collected using a self developed interview schedule which included both open and close ended questions about career aims, work profile, experience, supervision, training, communication, pay, allowances and promotion opportunities. Data was coded and analyzed using IBM SPSS 16 version. For the purpose of comparison, percentages and measures of central tendencies were used wherever required. For examining, job satisfaction of respondents related questions from the interview schedule were converted into numerical data and categorized for facilitating meaningful interpretations.

RESULTS

A total of 38 nurses (70%) were below 25 years of age, 13 (23%) between 25-30 years, 4 were above 30 years and only 2 were above 35 years of age (table 1). Majority of the respondents had General Nursing as their qualification while only 2 had a graduate degree in Nursing. Only one nurse was not comfortable in English language while two of them were not fluent with Hindi language. The mean year of service for those still working with the hospital was 2.2 years.

Table 1: Demographic characteristics of study participants

Demographic Attribute	Group I (n=30)	Group II (n=25)
Age (in years)		
Below 25	24	14
25-30	5	8
30-35	2	2
35+	1	1
Duration of services		
1-3	25	18
3-5	4	5
More than 5	1	2
Duration of services		
Total	30	25

Table 1 show that a big majority (78%) resigned from their services within first 3 years of work experience. Only 3 nurses were working in the hospital for more than 5 years. The main reasons for resigning from the services in order of priority were - high salary package, moving abroad for better opportunities, skill enhancement and study further for better career prospects. It was found that at the time of joining nurses did not have any specific expectations from their job. They joined the hospital either because of proximity, having friends in the institute, first job opportunities, exposure to new standards of care and receiving good salary. The career expectations were shaped while working with the hospital as they shared that oncology nursing experience, attractive pay package and working with a reputed hospital in permanent position will add to their career growth. Those resigned from the services expected a better work opportunity abroad with specific oncology nursing experience.

Table 2: Nature of work experience

Work experience	Group I N=30	Group II N=25	Total N =55(%)
Best friend at work	20	24	44(80)
Enjoy company of colleagues	26	25	51(93)
Colleagues committed to quality work	28	19	47 (86)
Bickering and fighting at work	6	14	20(36)
Comfortable with resident doctors	14	23	37 (67)
Comfortable with consultants	10	22	32 (58)
Hesitant / Suppressed	28	12	40(73)
Language barrier	8	4	12 (22)
Expectations fulfilled	12	14	26(47)
Learning and growth opportunities	26	19	45(82)
Value to nurse's job	22	13	35(64)
Self enjoyment of job	16	4	20(36)

Table 2 presents the work experience of those resigned from the services verses those still serving the hospital. Majority of respondents (80%) had their best friend at work and 93% enjoyed company of their colleagues, with a maximum representation being from those resigned from services in comparison to those still in service. A high proportion (86%) felt their colleagues were committed to work, majority of those were from service group while those resigned from the services did not favour colleagues' commitment. Bickering and fighting at work was experienced by 36% of respondents, high proportion being from those resigned from services. Nurses were asked about their comfort level with resident doctors and consultants. In comparison to consultants, percentage of nurses being comfortable with resident doctors was high. A high proportion (67%) shared that they were comfortable while interacting with resident doctors while only 58% felt comfortable with consultants. Maximum number of nurses being comfortable with resident doctors and consultants were those resigned from services. Among those still being in service only 50 % were comfortable with residents and only 1/3rd with consultants. A big majority (73%) felt hesitant and/or suppressed with doctors, maximum being from service group. Though language barrier was reported by only few nurses but their number was high in service group in comparison to those resigned from services. Only 47% respondents felt that their expectations were fulfilled and 36% could enjoy their work. A high majority (82%) felt that their work provided them learning and growth opportunities but their proportion was high in service group.

The common concerns which did not allow nurses to enjoy their work were- long duty hours, heavy work load which does not allow them to give quality time to each patients, unpleasant remarks by patients and their attendants and no

time for self study even senior nurses were not free to clear doubts. Placement with operation theatre was difficult for the beginners. Since nurses happen to be direct care providers to the patients so in case of poor coordination among different departments they had to take up additional responsibilities to satisfy the patient which led to extra burden on them especially during shifts. Nurses working in ICU and operation theatre were afraid of risk to their health despite best precautionary measures provided by the hospital.

Table 3: Job satisfaction scores

Job satisfaction	Group	
	Group I (%)	Group II (%)
High job satisfaction	12 (40.00)	2 (8.00)
Average job satisfaction	16(53.33)	20 (80.00)
Poor job satisfaction	2(6.67)	3(12.00)

Table 3 shows that only 8% of those resigned from the services were highly satisfied from their job, whereas the majority i.e. 80% had only average job satisfaction. Among those still in service only 40% were found to have high job satisfaction, whereas 53.33% scored average score on job satisfaction. The most common reasons for leaving job were -wide opportunities and much better job standard abroad, high and attracting salary package outside, dissatisfaction with job, demotivating work culture and getting settled in family life. Nursing staff expressed that they will be attracted to any institution of repute which will offer them few more benefits in addition to salary like provisions of LTA, risk coverage for ICU and OT placement, full mediclaim, twice a day refreshment to keep them energize, quality hostel facilities as majority of the nurses happen to be outstation candidates.

DISCUSSION

The major career aim reported by the nurses in this study were earning high salary package and moving abroad. In light of wide opportunities available in western countries, Indian nurses can easily find place there³, the only thing which they require is to improve their computing and English language skills before entering the workforce as has been observed by previous literature^{4,5}. A big majority (71.6%) felt hesitant or suppressed with doctors and nearly 1/4th proportion experienced language barrier while working with patients. In such situation quality of services to the patients may suffer. The findings of this study highlighted that more and more nurses were leaving job because of better work opportunities abroad. This can be best analyzed in pursuit of motivational theories which relate the role of extrinsic factors or pull force to this concern⁷. This is in relation with previous literature which emphasized that India produce the highest number of trained nurses in the world and increasingly mature nursing professionals are opting out of the system to follow growth opportunities^{5,8-10}.

Although high majority of respondents (88.3%) felt that their work has scope of learning the specialized skills despite that only 53% were able to fulfil their expectation and just 4% were satisfied from their job. This suggests that apart from learning and growth opportunities, other factors also contribute to job satisfaction and high attrition of nurses. This is supported by a report published in daily leading which highlighted that lack of decent pay and recognition of efforts put in by nurses are major factors behind exodus¹⁰. The same is also supported by literature from organizational behavior which emphasized that factors contributing to dissatisfaction are lack of explicit hospital policy and administration, lack of competent and sympathetic supervision¹¹. Findings highlighted that majority of the nurses had General Nursing qualification and did not have specialized oncology experience, therefore specialized orientation programmes, monthly refresher and/or advanced training programmes would be a great help to improve skills of the nurses. More emphasis is required to give improved skills to OT and ICU staff.

The findings highlighted the exhaustive work load, long hours of work, performance of non-nursing tasks due to poor coordination among different department and/or shortage of staff. Another studies revealed that in addition to increased patient acuity, nurse's perception of inadequate staffing levels are probably related to their being expected to perform non-nursing tasks such as delivering and retrieving food trays, transporting patients; and ordering, coordinating, or performing ancillary services^{12,13}. Thus, there is urgent need to improve work atmosphere. The administration need to lower down the work load, reduce working hours, maintain healthy relations among its employees, make job enjoyable and give more scope for self study and progress to the nurses.

CONCLUSION

The study highlighted factors accelerating the problem of attrition among nurses. First, the profession does not enjoy its rightful status in the society. Second, unhealthy working conditions like long working hours, heavy work load, non-recognition of work. Third, nurses' dissatisfaction with pay structure and other allowances. Fourth, little or no efforts for career advancement like refresher courses and training programmes for continuous education and skill development. The management should carefully develop appropriate policies and practices for promotions and transfers, enjoyable working conditions, wages, grievance handling, fringe benefits, satisfactory hours of work and adequate rest pausing. Management should also recognize and appreciate the good work done by the employees and give respect for their creative suggestions. Proper delegation of authority, freedom to work will also help increase job satisfaction.

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