

## Nurses' Perceptions of their Working Environment at Emergency Departments in Nepalese Tertiary Level Private Hospitals

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Nurses dealing in a capricious working environment of emergency department with myriad of challenging uncertain cases are exposed to variety of physical and emotional work stress. "Aspects of work environment" was reported as the most common cause of work stress in E.D. These regular taxing circumstances can hazardously impact nurses' physical as well as mental health, working and coping abilities. Ineffective coping mechanisms may lead to burnout, decreased concentration and decision-making skills further impacting the quality of care exhibited by decreased compassion, increased errors and increased adverse events.

A cross sectional research was done using work environment scale-10 scale to explore the perception of emergency nurses (N=83) regarding their work environment from 7 tertiary level private hospitals. Descriptive statistics, Pearson correlation and one-way ANOVA was done to analyze the data.

Experienced nurses felt more workload at statistically significant levels (p value= 0 .000002). The significant correlation was found between self-realization and conflict. These two factors were negatively related with significance value of 0.016. Marital status and education were both significant with workload at significance level of 0.046 and 0.043 respectively.

Nursing is a stressful profession. Given that emergency department is a sensitive and chaotic one, more experienced nurses are needed. More nurses should be retained in the department by making working conditions better.

**Keywords:** emergency department, nurses, working environment.

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**E**mergency services in Nepal started in 1889 in the country's oldest hospital, Bir Hospital. Emergency department is a risky and a stressful department in hospitals all over the world, and the situation in Nepal is no different. In Nepal, patients are mostly accompanied by friends and family members at all times. Health professionals have to deal not only with patients but also with their kins simultaneously. Patients insist on staying for longer period until they are fully recovered, making emergency department more crowded. The constant interruptions due to overcrowding adds more distractions, decreases efficiency and effectiveness of the care provided.<sup>1</sup> A team of qualified health professionals like physicians, nurses deal everyday with challenging cases and situations increasing their stress level. Work environment is considered a major factor for stress in staffs of emergency department. Aspects of work environment causing stress includes lack of opportunities, heavy workload, conflicts, traumatic events etc. impacting their physical as well as mental health. Decreased support and decreased coping mechanism results in decreased job satisfaction, decreased morale, increased fatigue, increased burnout, increased absenteeism, increased propensity to leave and increased turnover rate of nurses.<sup>2-4</sup> In spite of the high demand of nurses for quality patient care, there is shortage of nurses all over. Unhealthy working environment has been marked as a reason for shortage.<sup>5</sup> Though World Health Organization (W.H.O.) identified shortage

of nurses as critical, the number of nurses has not increased. This reflects that the working condition of nurses has not improved.<sup>6</sup> 21 % of emergency nurses tend to leave their job within a year of their clinical exposure and the number rises in second year.<sup>7</sup> This circumstances are not only affecting nurses' performance, job satisfaction and their retention, but it is also creating a threat for patient safety as there is an increased chance for human errors/adverse events, decreased quality of patient care, decreased patient satisfaction and unsatisfactory patient outcome. Ultimately the effect is more visibly seen through organizational insufficiency with staff shortage, lesser productivity, decreased patient flow, decreased profitability and decreased reputation.<sup>8,9</sup>

Despite the importance of healthy working environment and retention of nursing workforce in emergency departments, there are not much researches done to examine the perceptions of working conditions among nurses in emergency department; and almost none in Nepal. The purpose of the study was to explore nurses' perceptions of their working environment based on 4 subscales (Self-realization, Conflict, Nervousness, Workload) using Work Environment Scale (WES)-10 at Nepalese tertiary level private hospitals.

#### ***Core concepts used in the study***

A cross-sectional descriptive research design was done to identify the nurse's perceptions of their working environment at emergency department in Nepal using WES-10 scale consisting 10 questions on a 5-point Likert scale. The 10 questions are

based on the four core concepts that reflect their perceptions of the working environment at emergency department.<sup>10</sup>

Working environment indicates the emergency department; Nurses under study are the emergency staff nurses. The four core concepts are: a) Self-realization, which is the extent of support received by the nurses in their workplace; b) Conflict, which represents the disagreements between nurses or other team members in workplace; c) Workload, which is the amount of work-done in workplace; and d) Nervousness, which is the extent of worries felt by emergency nurses before going to or at workplace.<sup>10</sup>

Support by nursing leaders or administration is very vital in order to minimize the arising work-place stress and conflicts within the profession or between the team. Teamwork is critical to minimize conflicts, ensure patient safety and it also helps to boost the confidence and self-realization of nurses or other health care professionals in general. Empowerment given to nurses can increase their satisfaction as they could use their knowledge and skill into practice for problem solving or quick decision making. The autonomy given increases the self-confidence, decreases nervousness and increases their ability to take best possible desired actions. By this way employees feel they are being valued which in return helps in their retention and good job performance. Good working environment could aid in delivering quality patient care, patient satisfaction, good outcome for patients, health-care professionals and

organization.<sup>3,11-13</sup>

### Methodology

This is a cross-sectional descriptive study in which Nurses who gave permission across all shifts (Number of nurses=83) of 7 private tertiary level hospitals (6 hospitals within Kathmandu valley and 1 outside the valley), which granted the permission participated in the study from July-August, 2017 using convenience sampling. Reliable and valid WES scale<sup>10</sup> was used for data collection following ethical principles laid by National Advisory Board on Research Ethics. Similarly, ethical approval was also taken from National Health Research Council (NHRC), hospital boards and verbal consent was obtained from research participants. Coding/Recoding and data analysis were done using Statistical Package for Social Sciences (SPSS-version 20). Descriptive analysis was done to summarize the result and inferential statistics like Pearson's correlation and Analysis of Variance (ANOVA) were done to analyze the data.

### Results

Average age of nurses in the study was found to be 25.51 years with an average experience of 3.18 years in emergency department. The majority of nurses working at emergency departments have intermediate education and are relatively younger in age. This could probably be related to the requirement set by Nepal Nursing Council (NNC) to earn at least two years of practical experience in clinical area after completion of intermediate nursing

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**Perception of Work Environment with Qualification**


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Dimensions	Qualification	N	Mean	Standard Deviation	Sig.
<b>Self-realization</b>	PCL <sup>1</sup>	63	3.698	0.486	0.100
	BN/B.Sc. <sup>2</sup>	19	3.447	0.653	
	MN <sup>3</sup>	1	3.000		
<b>Nervousness</b>	PCL <sup>1</sup>	63	3.714	0.600	0.463
	BN/B.Sc. <sup>2</sup>	19	3.763	0.586	
	MN <sup>3</sup>	1	3.000		
<b>Conflict</b>	PCL <sup>1</sup>	63	3.547	0.801	0.310
	BN/B.Sc. <sup>2</sup>	19	3.868	0.925	
	MN <sup>3</sup>	1	4.000		
<b>Workload</b>	PCL <sup>1</sup>	63	3.047	0.536	<b>0.043***</b>
	BN/B.Sc. <sup>2</sup>	19	2.815	0.447	
	MN <sup>3</sup>	1	2.000		

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**Perception of Work Environment with Marital Status**


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<b>Self-realization</b>	Married	27	3.537	0.562	0.263
	Unmarried	56	3.678	0.523	
<b>Nervousness</b>	Married	27	3.759	0.561	0.655
	Unmarried	56	3.696	0.615	
<b>Conflict</b>	Married	27	3.555	0.923	0.593
	Unmarried	56	3.660	0.792	
<b>Workload</b>	Married	27	2.814	0.622	<b>0.046***</b>
	Unmarried	56	3.062	0.467	

\*\*\*The mean is significant at the 0.05 level

<sup>1</sup>PCL: Proficiency Certificate Level; <sup>2</sup>BN: Bachelor of Nursing/B.Sc: Bachelor of Science in Nursing; <sup>3</sup>MN: Master of Nursing

*Table 1: Perception of Work Environment with Qualification and Marital Status*

education in order to get qualified for bachelor's degree in Nursing. The lesser average experience showed sign of high turnover either for achieving higher qualification or leaving the job for better opportunities like tutoring in nursing colleges which is less demanding than working at hospitals especially in E.D. Better working conditions with better opportunities must be given to retain new and experienced nurses who can easily tackle with complicated cases arising on daily basis. Encouragement for higher education with job security and better facilities could help retain highly qualified nurses with sound knowledge, high critical thinking ability and greater self-confidence. All of the nurses have 12 hours night shift, 6 hours morning and evening shifts. Nurses felt more workload at their workplace. Hence, more staffs need to be hired or staffs from other departments must be appointed to maintain nurse-patient ratio for quality patient care, patient satisfaction and staff satisfaction. Nurses ought to be treated equally with clear job descriptions to ensure equal work division for effective and efficient workflow.

Older nurses perceived more workload. The reason for this could be, decrease in tolerance and stamina with increasing age. Hence exercises, yoga, meditation could be encouraged to strengthen mental, physical and spiritual health. Similarly, married nurses tend to feel more workload. This

may be the result performing dual responsibility. Periodic assessment is essential to ascertain the perceptions of work environment. Rotation in task delegation could be done depending upon their work environment perception.

Experienced, qualified nurses are capable and are more in demand to work at E.D. Thus, they may have perceived more workload. Timely trainings should be given not only to old staffs but new staffs should also be acquainted with knowledge and skills. Opportunities for higher education and empowerment produces confident and competent human resources. Along with experienced nurses, new nurses with updated information are resilient, can act promptly and function independently at any time critical situation saving a life (**Table 1, 2**).

Increase in conflict was related with decrease in self-realization. With increasing conflicts, nurses felt less support. Transparent behavior, good interpersonal /professional relationship, equal opportunity for personal and professional growth irrespective of caste, religion, and color should be initiated and maintained. Trainings to resolve conflicts and coping styles to manage stress, constructive feedbacks, counseling, cooperation within the profession or team, acknowledgement of opinion/suggestions given is beneficial to enhance self-realization (**Table 3**).

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		<b>Self-Realization</b>	<b>Nervousness</b>	<b>Conflict</b>	<b>Workload</b>
<b>Age</b>	Pearson Correlation	-0.110	-0.027	-0.122	<b>-0.340**</b>
	Sig. (2-tailed)	0.322	0.812	0.270	<b>0.002</b>
	N	83			
<b>Experience</b>	Pearson Correlation	-0.166	-0.050	0.088	<b>-0.491**</b>
	Sig. (2-tailed)	0.133	0.651	0.427	<b>0.000002</b>
	N=	83			

\*\* . Correlation is significant at the 0.01 level (2-Tailed)

*Table 2: Perception of Work Environment with Age and Experience*

<b>Dimensions of Work Environment</b>	<b>Self-Realization</b>	<b>Nervousness</b>	<b>Conflict</b>	<b>Workload</b>
<b>Self-Realization</b>	Pearson Correlation	1	0.204	<b>-0.263*</b>
	Sig. (2-tailed)		0.064	<b>0.016</b>
	N	83		
				0.158
<b>Nervousness</b>	Pearson Correlation	.204	1	0.214
	Sig. (2-tailed)	.064		0.052
	N	83		
				0.138
<b>Conflict</b>	Pearson Correlation	<b>-0.263*</b>	0.214	1
	Sig. (2-tailed)	<b>0.016</b>	0.052	
	N	83		
				-0.036
<b>Work load</b>	Pearson Correlation	0.158	0.138	-0.036
	Sig. (2-tailed)	0.154	0.215	0.746
	N	83		
				1

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

*Table 3: Inter-relationship between the Dimensions of Work Environment*

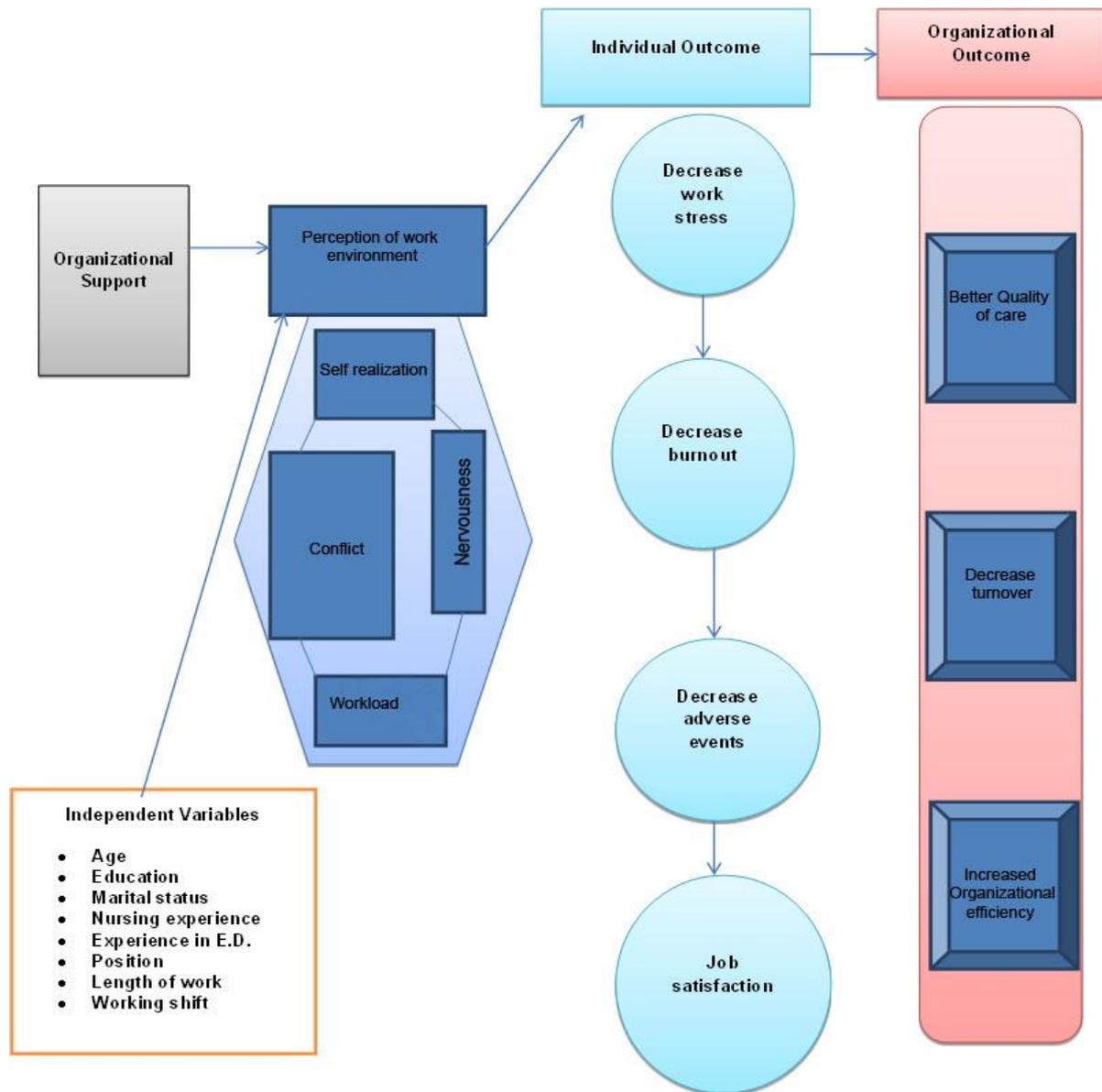


Figure 1. Conceptual Framework

**Conclusion**

Simulation training is carried out in virtual setting for enhancing knowledge, skills and learning from mistakes which could be detrimental if allowed in reality. From my training experience for simulation, I strongly recommend to run it in an emergency setting. It would enhance knowledge, develop skill, and build teamwork with proper, clear closed loop communication. Its regular implementation

in E.D. increases self-confidence of the team, decreases nervousness, increases self-realization and decreases conflicts and decreases workload in work environment. The diagram (Figure 1) below represents a brief summary of the study. The organizational support is imperative for favorable working condition at all times. The work environment is perceived good when there is lower conflicts, higher self-realization, lower workload and lower

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nervousness. Good perception of work environment is beneficial to all including patients, health professionals and organization.

To reflect my learning, healthy working environment reciprocates happiness and healthiness to healthcare team including nurses, patient and forms a robust organization determined to deliver quality patient care.

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