**A STUDY ON EMPLOYEE ENGAGEMENT IN SELECT HOSPITALS DURING PANDEMIC**

By

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**of Science, Humanities & Commerce**

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**DECLARATION**

I hereby declare that this project entitled “**A study on Employee Engagement in select hospitals during pandemic**” has been prepared by me in the partial fulfilment of the requirement for the award of degree, Bachelors of commerce( Honors).

I also hereby declare that this project report is the result of my own effort and that it has not been submitted to another university or institution for the award of any other degree or diploma.

Place: Secunderabad, Telangana

Date:

Name of the candidate: Simran Sharma

**CERTIFICATION**

This is to certify that the project report titled “**A study on Employee Engagement in select hospitals during pandemic”** submitted in partial fulfilment for the award of B.Com (Hons) course of Department of Commerce, Bhavan’s Vivekananda College of Science Humanities & Commerce, Sainikpuri, Secunderabad was carried out by **Simran Sharma** under my guidance. This has not been submitted to another university or institution for the award of any other degree, diploma or certificate.

Name of the Guide: Mrs. Sreemathi Raghunandan

Place of the Guide: Secunderabad, Telanagana Signature

**ACKNOWLEDGEMENT**

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**TABLE OF CONTENTS**

|  |  |  |
| --- | --- | --- |
| **Chapter No.** | **Particular** | **Page No.** |
| I | INTRODUCTION   * 1. Statement of the Problem   2. Significance of the Study   3. Need of the Study   4. Objectives of the Study   5. Scope of the study   6. Hypothesis of the Study   7. Period of the Study   8. Methodology   9. Limitations of the Study |  |
| II | REVIEW OF LITERATURE  Citing of Past Works |  |
| III | THEORETICAL BACKGROUND |  |
| 1V | DATA ANALYSIS AND INTERPRETATION |  |
| V | FINDINGS AND CONCLUSIONS |  |
|  | BIBLIOGRAPHY |  |
|  | ANNEXURE |  |

**CHAPTER 1**

**INTRODUCTION**

1. **INTRODUCTION**

The COVID-19 pandemic1, also known as the coronavirus pandemic, is an ongoing pandemic of coronavirus disease 2019 (COVID-19) caused by the transmission of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which was first identified in December 2019 in Wuhan, China. The outbreak was declared a Public Health Emergency of International Concern in January 2020, and a pandemic in March 2020.

In the present business situation during the COVID‐19 pandemic, employee engagement has become one of the utmost prominent primacies for human resource managers and practitioners in organizations due to lockdown.

Employee engagement2 seems to be the latest buzzword in healthcare and beyond.  Many have jumped on the bandwagon, claiming that an engaged workforce is the silver bullet to achieving optimal employee performance, superior quality patient care, and increased revenue.  Employee engagement is defined as the extent to which employees are emotionally attached or passionate about their work and loyal to their organization.  Engaged employees possess heightened motivation to make meaningful contributions above and beyond the status quo in order to help their organization achieve its goals.

The research is to determine the engagement of employees by various organisations in healthcare industry during coronavirus pandemic. Organizations nowadays are constantly developing innovative and effective means to engage the employees during this tough time. To conclude this research gives a proper employee engagement version primarily based on empirical findings with focus on handling crisis.

Thus, this chapter provides an overview of the research study. It gives an introduction to the healthcare industry, statement of the problem, significance of the study, objectives of the study, hypotheses of the study, period of the study and limitations of the study, and methodology used for the study.

* 1. **STATEMENT OF THE PROBLEM**

Government and private hospitals are locating it tough to recruit new and additional healthcare workers to care for Covid-19 patients even after they’re been given many facilities. The personnel of the hospitals are often exposed to challenging situations within their work life as they have to deal with a wide spectrum of operational problems in the crisis like Covid-19. As a end result, nurses, doctors, ward boys, lab technicians, sanitation people and different staff have been locating themselves stretched and insufficient safety towards Covid-19.

According to the news title “Telangana gives 150 doctors jobs to fight Covid-19, only three take up offer” by Times of India dated on May 14, 2020 states that at the same time as doctors bravely battle the novel coronavirus pandemic, recruitment of medical professionals by using the Telangana authorities seems to have hit a roadblock. Preserving this attitude in mind an attempt has been made on this look to analyse employee engagement in the course of the time of Covid-19 to remedy the trouble of shortage of employees within the hospitals.

The purpose of the study is to find the best operating employee engagement version for healthcare industry to deal with the crises. The look at additionally specializes in the regions wherein employee engagement may be improved inside the employer to hold personnel for long term.

* 1. **SIGNIFICANCE OF THE STUDY**

The significance of the study is to examine the effective approaches of employee engagement during the time of Covid-19 wherein the purpose is to resolve the shortage of personnel in the hospitals and retain them. This study is useful for making impact on healthcare industry to take right decision regarding handling the employees during crisis.

* 1. **NEED OF THE STUDY**

Inspite of the visible and well-known employee relations practices provided by the organizations belonging to the healthcare sector, there’s little or no research evidence regarding the present state and satisfaction towards the employee engagement programs provided by the hospitals located within the city of Hyderabad. This study has been designed so as to spot and analyse such opinions resulting in employee satisfaction towards employee engagement of hospitals in Hyderabad. The need of the study is to research and analyse the effective ways of employee engagement during the time of Covid-19 where the goal is to unravel the shortage of employees in the hospitals and retain them.

* 1. **OBJECTIVES OF THE STUDY**
* To understand the employee engagement adopted by the hospitals.
* To examine employee satisfaction towards employee engagement initiatives taken by the hospitals.
* To identify the vital elements to be included in an employee engagement model for handling crisis.
  1. **SCOPE OF THE STUDY**

The scope of the study is confined to the hospitals in the city of Hyderabad, Telangana in the category of employee engagement. The study is based on the responses collected from the employees and the HRs of the hospitals during the period of 2020-21 (coronavirus pandemic).

* 1. **HYPOTHESES OF THE STUDY**

**1.6.1**

**Null hypothesis (h0):** There is no significant relationship between Motivation of the employees and the retention in the hospitals.

**Alternate hypothesis (h1):** There is significant relationship between Motivation of the employees and the retention in the hospitals.

**1.6.2**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Management support and the Job attractiveness.

**Alternate hypothesis (h1):** There is significant relationship between Management support and the Job attractiveness.

**1.6.3**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Work life balance and mental stress of the employees.

**Alternate hypothesis (h1):** There is significant relationship between Work life balance and mental stress of the employees.

**1.6.4**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Availability of resources in the hospitals and mental stress of the employees.

**Alternate hypothesis (h1):** There is significant relationship between Availability of resources in the hospitals and mental stress of the employees.

**1.6.5**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Career development opportunities and Job attractiveness in hospitals.

**Alternate hypothesis (h1):** There is significant relationship between Career development opportunities and Job attractiveness in hospitals.

**1.6.6**

**NULL HYPOTHESIS (H0):** There is no significant relationship between participation of the employee and Job security.

**Alternate hypothesis (h1):** There is significant relationship between participation of the employee and Job security.

* 1. **PERIOD OF THE STUDY**

The period of the study was undertaken at the time of Covid-19 during the year 2019-2021.

* 1. **METHODOLOGY**
     1. **Sources of data:**

The present study is done by using primary data and secondary data.

1. **Primary Data :** The data has been collected from the employees working in the hospitals in the form of a well- structured questionnaire. The data was collected from the HRs of the hospitals by using online interview method.
2. **Secondary Data** : The secondary information was taken from the authenticated websites, articles and previous research papers.
   * 1. **Sample Design**

The data for this study were collected from the HRs of 6 hospitals, which were asked in the interview keeping the objectives of the study in sight. The sample size for this study was 276 hospital staff, and the main data collection method was by Google form.

* + 1. **Tools and Techniques**

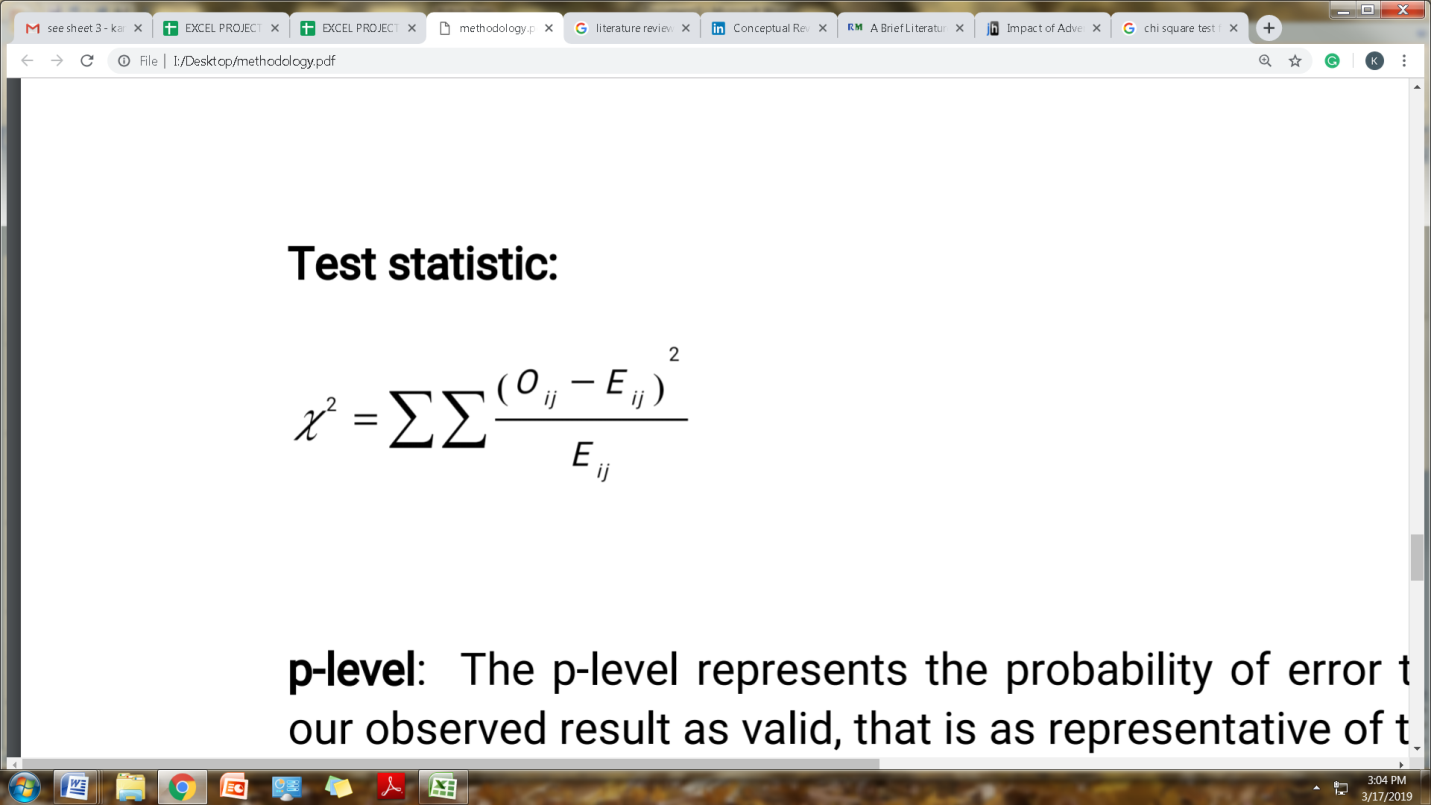
The analysis of data generated using the random sampling methodology is essentially descriptive in nature. Action research is used to conduct the analysis research.

* + 1. **Data Type**
* **Data :** The study relied on primary data for its findings. Questionnaires were used to collect primary data for the study, and secondary sources of information included authenticated websites and papers. The primary data was examined further using a Chi square test of independence between the questionnaire attributes.
* **Mode of Collection** : Data was collected through the questionnaire method.
* **Questionnaire** : The questionnaire was carefully crafted to be straightforward, concise, non-ambiguous, and free of offensive statements.
* **Population :** Employees employed in the hospitals during the covid pandemic are the study’s target population.
* **Sample** : A total of 276 people were chosen from a variety of occupations, including doctors, nurses, administrative support staff, technical staff, interns, lab technicians, ward boys, and so on.
* **Data Tabulation** : The data was coded and tabulated using Jamovi 1.6.23 after the questionnaire was serially numbered.
* **Statistical Analysis** : Analysis was done by using Jamovi 1.6.23.
  + 1. **Statistical Techniques used for Data Analysis**

**Frequency Distribution :** Constructing a frequency distribution table is the most important aspect of organising and summarising statistical data. This approach categorises items based on their quantitative magnitude.

**Chi Square test for Independence of Attributes :** The chi square test is used to determine whether or not two attributes are independent. This test can be used to determine the importance of the difference in observed and predicted frequencies being independent.

**Test Statistics :**

**

**p- level :** The p-level denotes the risk of error associated with accepting our observed finding as true, that is, representative of the population. The 0.05 p-level is commonly used as a level’s acceptable boundary line.

**Decision rule :** If the p is less than 0.05, we reject Ho, indicating that the attributes are not independent at the 5% level of significance.

* 1. **Limitations of the study**
* Since the data was collected only from the employees and HRs of the hospitals in Hyderabad, it could not be generalized to other parts of the nation.
* The data was collected using a schedule as per the convenience of the hospitals.
* The respondents might not have disclosed their actual opinions on certain issues related to the hospital which could be confidential in nature.
* The drawbacks associated with the use of primary and secondary data are also associated with the study.

This chapter on whole gives an overview of how employee engagement in the hospitals is an important element for wellness of the patients and the purpose for conducting this study is explained by defining the statement of the problem, objectives of the study, significance of the study, scope of the study, methodology of the study and limitations.

**CHAPTER II**

**REVIEW OF LITERATURE**

Numerous studies have been conducted in the past regarding the employee engagement. This chapter covers the citing of past works and examines how past works have been carried out. Based on the title, a review of researches on employee engagement initiatives adopted by hospitals has been thoroughly carried out.

**Citing of Past Works**

* Mosadeghrad, Ferlie and Rosenberg9 (2011) in their study titled “ A study of relationship between job stress, quality of working life and turnover intention among hospital employees”, the objective of this study was to discover the relationship among job stresses, QWL and turnover intention among medical institution personnel in Isfahan, Iran. The technique of the study utilized pass- sectional, descriptive and correlational layout, and survey methodology.

The finding was to collect data from hospital employees. Overall, 26% of employees graded their activity strain excessive. The most important sources of strain were insufficient pay, inequality at work, too much work, staff shortage, lack of recognition and promotion prospects, time strain, lack of job security and lack of management support. An inverse relationship was found between job stress and QWL among hospital employees.

The conclusion of the study was since job stress encompasses a strong correlation with employee QWL and turnover intention, it’s vital to use the correct human resources policies to extend employee’s QWL and reduce subsequent turnover. This study invites further research to investigate, introduce, and assess intervention strategies for preventing workplace stress and improving QWL.

* Lowe S Graham10 (2012) in his study titled “How Employee Engagement matters for Hospital Performance”, the objective of this study had been to perceive the managers more and more take into account that employee engagement is a prerequisite for excessive performance. The technique was authentic data come from the Ontario Hospital Association- NRC Picker Employee Experience Survey, involving over 10,000 employees in 16 Ontario Hospitals. The article presents a clear definition and measure of engagement relevant to healthcare.

The study discovered how task, work environment, management, and organisational variables affect employee engagement levels in healthcare.

The results indicate that high levels of employee engagement are linked to retention, patient- centred treatment, patient safety culture, and employee’s positive views of the quality of care or services rendered by their team, in addition to identifying the key drivers of engagement. The finding’s implications for healthcare leaders are briefly considered.

* Heilmann Pia11 (2013) in her study titled “To have and to hold : Personnel shortage in Finnish healthcare organization”, the objective of the study were to provide an outline regarding the bottlenecks in talent management in an exceedingly end hospital, and finds solutions for achievement and retention issues of aid professionals (nurses and physicians) as a result of the aid staffing shortage worldwide. The study’s approach was a qualitative case study, with group interviews as the primary research tool. The public media and healthcare trade associations were consulted for background information.

The study found that care management barriers in hospitals are related to the behaviour of senior staff. At the same time, the organization need to develop new practices to attract new employees. The internet has not been widely used and recruitment data is not sent to the nearest nursing school. Job rotation and leadership skills has not been used as tools for employment and professional development. Transfer of theoretical knowledge from retired nurses to younger nurses is problematic.

Recruitment and retention issues inspire organizations to implement innovative recruitment and commitment strategies, as well as management and leadership skills, according to the study’s findings.

* Shantz, Alfes, & Arevshatian12 (2015) in their study titled “Perceptions of HRM practices engagement healthcare”, the objective of this study was to present and test a model in which involvement mediates the relationship between four HRM activities and quality of care and safety in two separate types of healthcare staff, namely nurses and administrative support workers. The study’s approach was as follows: The National Health Service in the United Kingdom used structural equation modelling to analyse questionnaire data collected as part of their 2011 Staff Survey (n=69,018). Nurses and administrative support workers who had their theories tested separately.

The study’s findings were as follows: Via work engagement, quality of care and safety were positively linked to training, involvement in decision making, opportunities for growth, and communication. If an employee was a nurse or an administrative support worker determined the strength of the relationships.

The study’s goal was to look into the role of engagement as a mediating factor in the relationship between four specific HRM practices in the healthcare context and important outcomes for healthcare practitioners. Also, being one of the first to use the Job Demands Resources Model to clarify the effect of HRM activities on performance outcomes added value to the HRM literature.

* Mutsuddi Indranil13 (2015) in her study titled “Employee retention and employee practices in the healthcare sector: A study on Medica Super-specialist hospital, Kolkata”, the objective was to examine employee’s perceptions of the organization’s Employee Engagement activities, as well as to determine whether employees were pleased with the organization’s Employee Engagement initiatives and to analyse them. The descriptive research design was used as the methodology. The convenience sampling tool was used to collect data on employee perceptions of employee engagement activities.

The finding of the study was regarding the choice of the respondents on job engagement related issues in their organization. The highest levels of agreement were for “Work Attractiveness” and “Fair Compensation”, followed by “Goal Achievement”, “Participation”, and “Supervision Relationship”. The lowest mean in terms of agreement was given to “feedback”, indicating the respondent’s frustration with this factor.

The research culminated in the creation of a work engagement model based on empirical results from a study conducted at Medica Hospitals in Kolkata. The model identifies interrelationships between work commitment, job attractiveness and employee participation based on empirical findings( correlation analysis).

* Worringer, Genrich, Müller and Gündel,14 (2020) in their study titled “Hospital Medical and Nursing Manager’s Perspective on the Mental Stressors of Employees”, the objective of this qualitative study was to find out how hospital medical and nursing managers felt about their employee’s mental stress. Semi-standardized interviews with 37 chief physicians, senior physicians, and senior nurses were conducted in one German hospital as part of the study’s methodology. The interviews were content-analysed using the ‘Gemeinsame Deutsche Arbeitsschutzstrategie’ mental risk assessment guideline (GDA).

The findings show that managers try to make their employee’s lives easier, especially through personal support. Despite this, it seemed that managers need additional support to deal with stressors.

The study found that the majority of job characteristics identified were related to work structure, work assignment, and social factors. Staff shortages may be a source of tension for a variety of other issues. The key source listed was social support from managers and coworkers. Managers must endorse workplace health promotion initiatives in order for them to be effective and long-lasting.

* According to Perrin’s Global Workforce Study, employee’s desire and ability to help their organization thrive, primarily by making discretionary commitment on a sustainable basis. According to the research, commitment is influenced by a variety of factors, including both emotional and objective aspects of work and the overall work experience.
* Employee engagement is derived from two concepts : commitment and organisational citizen behaviour (OCB) (Robinson, Perryman, and Hayday, 2004; Rafferty et al., 2005). Both concepts have received academic recognition and have been the subject of empirical research. Employee involvement is similar to and overlaps with the two principles mentioned above.
* Meaning at work, according to a Penna research report(2007), has the potential to be a valuable way of bringing employees and employers closer together for the benefit of both. Employees want to work for organizations that provide them with a sense of purpose. Penna (2007) researchers have also come up with a new model called “ hierarchy of engagement” which resembles Maslow’s need hierarchy model. At the end, there are minimum wage and compensation requirements. If these needs have been met, the employee will search for development opportunities, the prospect of advancement, and finally, leadership style will be added to the mix in the model.
* J. Swaminathan in his study titled “Employee Engagement in Hospitals”, the objective of the study was to provide insights and information about employee engagement in hospitals so that the administrators can develop and implement strategies to improve the same thereby increasing employee commitment, service quality and customer satisfaction.

The methodology used was stratified random sampling. The statistical analysis was done with Statistical Package for Social Sciences (SPSS 20.0) using techniques like Descriptive statistics, Correlation, MANOVA and Multiple regression. Based on the findings certain suggestions to improve the employee engagement levels of the hospital employees are given. The conclusion of this study was that the management should ensure that the hospital environment should concentrate on fair and prompt service to their customers first and then the team members for any employee so that an employee can mingle with and deliver best services.

* J. Swaminathan in his study titled “Employee Engagement in Private Hospitals- A cross sectional study in Mayiladuthurai Town”, the objectives of this study were to ascertain the level of employee engagement, to identify the drivers of employee engagement and to analyse and recommend strategies for improvement.

The methodology adopted was descriptive research design for the purpose of survey. Mean score calculation and Pearson chi-square test were used for data analysis. The conclusion of this study was that if the hospital concentrates on work-life balance, training program and performance feedback, it will surely increase the level of employee engagement in the hospital.

* Antonia Wangui in the study titled “Influence of employee engagement on job satisfaction : a case study of M.P Shah Hospital, the main objective of this study was to determine and to investigate the influence of employee retention on job satisfaction. The methodology used was descriptive research design and convenience sampling technique was adopted. The major finding as revealed by the study was that employee retention had a statistical significant positive relationship with job satisfaction.

**Supporting Articles**

* According to an article in Health world15 (April 2019) titled “ India facing shortage of 6,00,000 doctors, 2 million nurses”, India has a shortage of 6,00,000 doctors and 2 million nurses, according to scientists who discovered that a lack of adequately qualified personnel in administering antibiotics is stopping patients from receiving life-saving drugs.

According to the news, there is one government doctor for every 10,189 people in India (the World Health Organization suggests a ratio of 1:1,000), indicating a 6,00,000 doctor shortage, and the nurse-to-patient ratio is 1:483, implying a two-million nurse shortage.

* According to a May 2020 report in the Times of India3  titled “Telangana gives 150 doctors jobs to fight Covid-19, only three take up offer”, the state government recently offered temporary contracts to 150 doctors after receiving more than 2500 applications. The doctors will be hired for as long as the pandemic needed their services. In addition to remuneration, doctors working on a contract will receive a special allowance. They can be stationed anywhere in the state according to their preferences mentioned in the application. Despite the fact that the pay is comparable to that of any government doctor at the entry level, only three doctors have accepted the offer.

The result was that because of the risks, some of these doctors are unable to take on Covid-19 responsibilities. A recruitment notice was released by the state department of health, medical, and family welfare; the majority of the applications came from nurses employed in private hospitals. There is a chance that nurses’ employment will be regularized, but doctors are well aware that this is unlikely.

The study concluded that the Covid-19 crisis had a large impact on the healthcare sector, making it difficult to engage workers. Understanding the staff and the situation is the only way to get through this crisis. Employee job stress has a direct link to employee productivity. It’s important to use the right tools to improve the quality of life at work. Employee retention, patient-centred treatment, patient safety culture, and employees’ positive views of the quality of care or services rendered by their team are all linked to high levels of employee involvement. According to the results of the factor study, “Participation” had the greatest effect on respondent’s perceptions of work involvement, followed by “Fair Compensation” and “Supervision Relationship”. Employers must understand that employee salaries and benefits must be competitive in the industry, as well as providing full flexibility to employees.

**CHAPTER 3**

**THEORETICAL**

**BACKGROUND**

This chapter provides an overview of the study’s theoretical foundation, focusing on employee engagement in the healthcare industry during Covid-19, as well as the importance, types, components, effects, categories, rewards, and motivation associated with employee engagement and job satisfaction.

**3.THEORETICAL BACKGROUND**

**3.1 COVID-19: A Global Crisis**

Coronavirus disease (Covid-19) is an infectious disease caused by a newly discovered coronavirus. On March 11th, 2020, the World Health Organisation (WHO) declared the novel Corona virus a pandemic. WHO has urged all countries to take urgent action and scale up responses to treat, minimise, and detect transmission of the disease among their people. While China was the first country to experience the crisis in December 2019, the rest of the world is currently experiencing a rapid and widespread spread of a novel virus. For the protection of their people, all the governments have suspended flights, locked down their cities and towns, and imposed numerous restrictions. About 4.5 billion people ( or half of the world’s population) are sitting at home and obeying social distancing according to AFB news agency.

After the first case of Covid-19 in India was registered on January 30, 2020 in Kerala, and signs of a sharp rise in cases began to emerge in mid-March 2020 across India, all government machinery began working on remedial and protective measures. Now that we are in the middle of the pandemic, we have learned a lot from the experiences of countries that have been particularly hard hit, such as China, Iran, Italy, Spain, and the United States. India has devised a number of policies, including expanding healthcare services, expediting the screening and quarantine of international visitors, and, most importantly, a national shutdown that began on March 25, 2020, stopping all conveyance means and sealing various borders inter and intra cities. Many businesses, industries, and economic operations have been shut down as a result of this. All has come to a halt, with the exception of basic facilities such as hospitals and pharmacies. The Indian government’s machinery is working around the clock to prepare for and respond to the crisis, which involves tracing suspicious cases, setting up a diagnosis centre, preventing community involvement, hospital logistics, and control and containment plans. India has reacted with resolve and urgency to address this unprecedented challenge under the bold and decisive leadership of its Prime Minister. Organizations are dealing with sinking productivity, labour wage payments, high labour turn-overs, overheads, and other issues as workers are forced to stay indoors at their homes. Low employee productivity and commitment have become a concern to organisations as a result of the pandemic. Virtual working environments are being pushed by all organisations to drive physical results. The pandemic situation is forcing all organisations to call for increased employee participation in order to improve productivity and efficiencies.

**3.2 Healthcare Industry introduction**

The health care industry, also known as the medical industry, is a sector that provides products and services to people who need curative, preventive, rehabilitative, or palliative care. The healthcare sector is made up of businesses dedicated to medical condition prevention, diagnosis, treatment, and recovery. Treatment can be delivered in the form of goods or services, and it can be done privately or publicly. To meet the health needs of individuals and communities, the current healthcare system is divided into several sub-sectors and relies on interdisciplinary teams of skilled specialists and paraprofessionals. The health-care sector encompasses a wide range of businesses, from small-town private practices with just one medical assistant to bustling inner-city hospitals with thousands of different employees. Since it is an industry that needs continuous creativity while also being subject to increased regulations, the healthcare industry is riddled with risks and challenges.

The health-care industry is one of the world’s biggest, and it has a direct impact on people’s quality of life in each country. The diagnosis, treatment, and prevention of disease, sickness, disability, and other physical and mental impairments in humans is known as healthcare. Practitioners of medicine, chiropractic, dentistry, nursing, pharmacy, allied health, and other medical providers deliver health care.

**Importance of Healthcare Industry:**

People all throughout the world rely heavily on the health-care industry. Hospitals, doctors, nursing homes, diagnostic laboratories, pharmacies, medical equipment makers, and other health care system components are among the various players in this market. The healthcare industry is discussed in this article. The primary causes driving demand for the expansion of lifestyle medical procedures and the healthcare industry are ageing populations and the increasing prevalence of chronic diseases. Medical technology products will continue to be in high demand for many years to come.

**Classification of Healthcare Industry:**

To satisfy the health needs of individuals and populations, the modern health care sector is organised into multiple sub-sectors and relies on interdisciplinary teams of trained professionals and paraprofessionals. The health-care industry is one of the world’s largest and fastest-growing sectors, accounting for a significant portion of a country’s GDP. Interdisciplinary teams of skilled professionals and paraprofessionals are essential to the delivery of modern health care. This comprises medical, nursing, dental, and allied health professionals, as well as public health practitioners, community health workers, and assistive employees who offer preventive, curative, and rehabilitative care to individuals and populations. The health-care industry is often separated into numerous divisions for financial and management objectives. The United Nations International Standard Industrial Classification (ISIC) classifies the health care sector as primarily consisting of :

* Hospital-related activities
* Medical and Dental Practice Activities
* Other activities related to human health

This third category includes services performed by or under the supervision of nurses, physiotherapists, scientific or diagnostic labs, midwives, pathology clinics, residential health facilities, or other allied health professionals, such as hydrotherapy, medical massage, yoga therapy, optometry, speech therapy, chiropody, homeopathy, or other allied health professions.

The industry is further divided into two sections by the Global Industry Classification Standard and the Industry Classification Benchmark:

* Healthcare equipment and services

Companies and entities that supply medical equipment, medical equipment, medical supplies, and health care services, such as hospitals, home healthcare providers, and nursing homes, fall under the category of healthcare equipment and services.

* Pharmaceuticals, biotechnology, and related life sciences

Sector companies that manufacture biotechnology, pharmaceuticals, and other scientific services make up the second industry group.

* Healthcare Providers and Professionals:

A healthcare provider is an organisation (such as a hospital or clinic) or individual (such as a nurse, physician, allied health professional, or community health worker) that offers people, families, or communities with preventive, promotional, curative, rehabilitative, or palliative care in a systematic manner.

**3.3 Employee engagement introduction**

An “engaged employee” is defined as one who is fully absorbed by and enthusiastic about their work and so takes positive action to further the organization’s reputation and interests. An engaged employee has a positive attitude towards the organization and its values. As a result, a company with “strong” employee engagement is likely to outperform one with “low” employee engagement. Human resource and internal relations management strategies for employee engagement are well-established.

Employee engagement has been interchangeable with words like “employee experience” and “employee satisfaction” in recent years. The importance is heightened by the fact that the vast majority of new generation workers are more likely to be ‘distracted’ and ‘disengaged’ at work. Employee engagement, according to HR professionals, has a lot to do with how employees feel about their job experience and how they are handled in the organization. It has a lot to do with emotions, which are inextricably linked to a company’s bottom line success.

**Importance of engaged employees**

* Employees who are engaged will stick with the company, become advocates for the company’s products and services, and contribute to the company’s bottom line performance.
* They would typically perform better and be more inspired.
* There is a substantial correlation between employee engagement and profitability.
* They develop an emotional bond with the company. This increases customer loyalty and service levels by changing their attitude towards the company’s customers.
* It fosters enthusiasm, dedication, and alignment with the organization’s strategies and objectives.
* Increases employees’ trust in the organization.
* In a competitive environment, it fosters loyalty.
* Promotes business success by creating a high-energy working environment.
* Makes workers effective brand ambassadors for the organisation.

The most important **types of employee engagement** are as follows:

* Cognitive Engagement

This involves the extent to which employees focus on their work tasks. An actively engaged employee is rarely distracted by small interruptions at work.

* Emotional Engagement

This consists of the here and now experience that the employees have while doing work. This involves their own feeling of the degree of involvement in the job.

* Physical Engagement

The extent to which employee takes steps for his own development. A voluntary nomination for a training program can be one of the means of identifying physical engagement.

There are three **components of employee engagement**, namely:

* Cognitive – It is the belief that an employee has about his company and its values.
* Emotional – It is the feeling an employee has about his colleagues, supervisors.
* Behavioural – Is what the employees exhibits at work commitment.

**Objective of employee engagement** in organizations is:

* To ensure the conversion of “Not engaged” employees into “engaged” employees.
* To facilitate planning for employee engagement.
* To ensure evaluation and measurement of employee engagement.
* To touch all aspects of employee engagement (cognitive, emotional, behavioural)

There are three organizational forces that **enhance employee engagement** as follows:

1. Lower attrition rate – An employee who is dedicated to his work is unlikely to leave the organization. A high attrition rate results in the squandering of a large number of talents that could have been well-groomed and retained if given the proper environment. In such a scenario, the likelihood of retention is high.
2. Better productivity – The importance of job quality over quantity cannot be overstated. In order to perform at his or her best in the company, an involved person must have a clear understanding of what is expected of them and what lies ahead.
3. Enhanced profitability – Any business wants to increase profits, which necessitates improving the abilities of its employees. A individual who is fully dedicated and committed, as well as more engaged, may make a greater contribution to the organization’s profitability.

**Categories of Employee Engagement:**

According to the Gallup Consulting organization, there are different types of people:

1. Engaged: Employees who are “engaged” are creators. They want to know what standards are expected of them in their position so that they can reach and exceed them. They are naturally interested in learning more about their organization and their position within it. They consistently deliver excellent results. They want to put their skills and abilities to work every day. They work with zeal, promoting creativity and propelling their organization forward.
2. Not Engaged: Employees who are disengaged are more likely to focus on tasks rather than the goals and outcomes they are supposed to achieve. They just want to be told what to do so that they can complete it and claim victory. Employees that are disengaged believe that their efforts are being ignored and that their full potential is not being realised. They often feel this way because they do not have positive working relationships with their managers or coworkers.
3. Actively Disengaged: The “cave dwellers” are workers who are “actively disengaged”. They are “consistently opposed to almost everything”. They’re not only unhappy at work; they’re still acting out their dissatisfaction. At any chance, they sow seeds of negativity.

**Types of Rewards** can be classified into-

**Intrinsic** benefits are those that please an employee on a personal level. Money alone will not motivate people; instead, it is critical to help them understand how important their commitment to the company is. Employees should be given meaningful jobs, given autonomy, allowed to take initiative in areas of their expertise, and given developmental opportunities as intrinsic incentives, while **Extrinsic** incentives are more tangible incentives like compensation, promotion, appreciation, time off, and so on.

**Motivation**

The mechanisms that account for an individual’s strength, direction, and persistence of effort toward achieving a goal are referred to as motivation. The majority of the time, motivation comes from a need that must be met, which then leads to a particular behaviour. The satisfaction of needs leads to some kind of reward, which can be intrinsic or extrinsic. The former stem from within the individual, such as pride and satisfaction from a job well done, while the latter refer to incentives bestowed by another entity. Job satisfaction, on the other hand, is defined as a pleasurable or positive emotional state, resulting from the appraisal of one’s job or job experiences.

* Work motivation among medical doctors – Medical personnel are more aware of the importance of job motivation than most government workers. One thing that all medical doctors have in common is that they deal with patients who require extra care and attention. This necessitates a high level of commitment and dedication, as well as the ability to cope with the emotional strain of dealing with stressful patient situations. Physicians who are more interested in their work achieve improved clinical results, as well as higher personal and patient satisfaction, than those who are less inspired, according to the World Health Organisation.
* Motivation of medical staff versus organizational performance of hospitals – The engagement and encouragement of medical staff are essential determinants of hospital success if changes are made to improve the hospital’s organisational performance, value, or quality, according to the results of studies examining the connection between medical doctor motivation and hospital organisational performance.
* To increase the medical personnel motivation and thereby ensure proper efficiency at both the individual and institutional levels, healthcare centres should adopt organisational and management processes that match healthcare professionals’ needs with organisational goals and objectives.

**Types of motivation** can be non-monetary factors and monetary factors –

* Non-monetary factors for employees comprises Encouragement and interaction from supervisors, opportunities for advancement, advanced training, participative goal setting, challenging/ creative job, learning opportunities, knowledge about the organization’s goals, opportunities to demonstrate innovation, and supportive coworkers.
* Monetary factors for employees comprises special recognition for exceptional success, individual incentive/ bonus, commissions, total pay, contests and travel.

**Job satisfaction** has a major effect on how they conduct their duties. Both factors influence workplace safety and employee perceptions of it. A satisfied employee is more committed to their job, executes orders more efficiently, and looks out for others as well as themselves. He feels secure in the organization. The study’s aim was to use questionnaires to measure employees’ job satisfaction and efficiency.

**Job satisfaction** is **essential** because happier workers lead to satisfied customers, lower voluntary turnover, lower HR costs, and loyalty.

As a result, this chapter provided an overview of the theoretical context of aspects relating to employee engagement. The next chapter examines the goal of assessing and analysing employee engagement in the healthcare industry, as well as their level of satisfaction with the different methods and techniques used for data collection and analysis using the Chi- square test and hypothesis of the study.

**CHAPTER 4**

**DATA ANALYSIS AND INTERPRETATION**

The following study addresses the multiple objectives of the study, which includes a thorough examination of the hospital’s employee engagement practices and employee satisfaction towards employee engagement initiatives taken by the hospitals. This research presents an employee engagement model based on longitudinal observations and an emphasis on crisis management.

* **Mode of Collection** : Data was collected through the questionnaire method.
* **Questionnaire** : The questionnaire was carefully crafted to be straightforward, concise, non-ambiguous, and free of offensive statements.
* **Population :** Employees employed in the hospitals during the covid pandemic are the study’s target population.
* **Sample** : A total of 250 people were chosen from a variety of occupations, including doctors, nurses, administrative support staff, technical staff, interns, lab technicians, ward boys, and so on.
* **Data Tabulation** : The data was coded and tabulated using Jamovi 1.6.23 after the questionnaire was serially numbered.

**4.1 The employee engagement adopted by the hospitals:**

**Major issues faced during Covid-19 crisis in hospital**

The covid has had a global impact on every sector, including healthcare. The following were some of the big issues encountered in the healthcare industry( particularly in hospitals) :

Chat 4.1 - Major issues faced during covid-19 crisis in hospital

\*Source: Primary data (Interview Method)

The number of patients in the hospitals was growing all the time, but staffing and services were not keeping up. Employees of hospitals, especially nurses, physicians, and housekeeping, were subjected to increased mental stress as a result of the Covid-19 crisis. Healthcare staff were available in some hospitals where there was a high level of hesitation but no desire to work for covid patients due to internal fear. Despite the severity of the pandemic, current hospital staff worked day and night to provide quality treatment to the patients. Employee and societal phobias, as well as a lack of awareness of Covid-19 precautions during the initial phase, have deterred many workers from working for healthcare organisations. Day by day, more precise details on Covid aids in the stabilisation of the situation. Because of the high risk in the early stages of Covid-19, hospitals had a number of problems with employee engagement.

Nurses were under more stress than other healthcare staff because they had to spend more time with covid patients, and the ratio of nurses needed was higher than that of physicians, which was inadequate. The majority of the nurses were HCWs who had left their jobs due to their work responsibilities during the covid-19 pandemic.

**Major issues overcomes in the hospitals**

* The main issue was resolved by following appropriate guidelines and instructions, as well as raising awareness of the Covid-19 precautions taken, so that the workers feel safe working in the hospital and new employees are recruited as required.
* The issue of resource availability was solved by categorising PTS (patient transport services) based on the seriousness of the infector. Employees in other hospitals were given solutions to the problem of non-availability of transportation, such as numerous buses collecting work from all over Hyderabad. Some hospitals have arranged hostels for the nurses to stay in during their shifts.
* The stumbling block of staff hesitation and a shortage of healthcare workers for treating and medicating covid patients was solved by offering adequate incentive and encouragement to existing employees to provide proper service to covid patients, resulting in improved work productivity per employee. During the crisis, several employees worked extra hours.

**Ways of employee engagement adopted**

* At the time, the only way to keep the existing workers engaged was to provide them with high-quality care and facilities. The importance of treating the patient was well explained to the healthcare workers for their safety, including avoiding direct physical contact with the patient and always wearing PPE kit and personal protection equipment. Patients with minor symptoms and a low severity score were also seen in real time and handled by doctors through video communication.
* In addition, hospital management made every effort to counsel and mentor healthcare staff who are at home or unable to begin work. Some employees in the management and quality departments were given the option of working from home if their physical presence was not required. These employees were also kept busy with constant follow-ups.
* Employee engagement has changed dramatically since the Covid crisis, with training not being adequately provided to all staff in many hospitals. Some hospitals have attempted training online, while others have approached class room programmes with minimal gathering and social distancing for the departments that were truly needed.
* No proper procedures for retaining workers have followed. It is the management’s duty to support workers who stepped forward to combat covid during crisis. On a basic level, what the workers needed was understood, and services were given accordingly.

**Motivation with health and safety**

In some hospitals, monetary and non-monetary benefits, special bonuses and appreciations were given for staff employed in covid regions, while in others, physicians and other healthcare workers were praised for their hard work and commitment during the difficult period. For better productivity, respective heads provided constant motivation and encouragement to their workers at work. Some hospitals have arranged motivational seminars from various organisations for better results for HCW.

Staff were provided with proper, high-quality facilities, with health and safety being one of the most important considerations for the employees. Employees were trained on how to stay healthy by following all safety precautions and maintaining a high level of hygiene. Employees were given a classroom curriculum that included a proper presentation and demonstration of how to clean themselves in some hospitals.

Some hospitals provided free use and throw PPE kits, masks, sanitizers, shields, and nutritious food of sophisticated luxurious quality to employees due to work overloading, while others did not even provide masks and PPE kits, forcing HCW to purchase them on their own for protection. Employees in hospitals who were infected with Covid-19 were given free treatment, paid leave, and adequate medication in addition to general medical care. Nurses are provided with free medical care, as well as significant discounts for all workers. Vaccines were also given free of charge to all hospital staff.

Healthcare workers were also motivated by honourable Prime Minister Mr. Narendra Modi, who took the approach of encouraging and motivating healthcare workers by all people of the country, in addition to providing proper facilities and encouragement. Prime Minister Modi has been urging people to express their support for the doctors and paramedical workers who have been working tirelessly to combat the Covid-19 threat.

Chat 4.2 – Motivation measures taken by various hospitals

\*Source: Primary data (Interview Method)

Apart from providing facilities for workers, most hospitals did not hold any other employee engagement activities because gathering is unsafe during the covid period. Since patient care is the yardstick by which a hospital’s performance is calculated, no specific motivational initiative was implemented at first since providing treatment to patients was the hospital’s top priority. Employee engagement was defined by reward and recognition, which most hospitals could do in short periods of time. Some hospitals practiced sending emails and celebrating festivals online with their employees. The star output was very successful as a part of compensation and appreciation in some hospitals, through which the workers worked effectively while still being motivated to work.

During the crisis, employee engagement has shifted from previous periods, when the primary emphasis was on providing medication to patients. When there was a high level of covid, the only aim was to save the patients and inspire them to battle the pandemic, and the management didn’t have the opportunity to hold a competition or a contest among the employees.

Following the situation’s stabilisation in January, several hospitals attempted to celebrate small festivals and competitions, such as the rangoli competition and the celebration of Women’s Day, with limited gatherings and precautions among employees as a small part of employee engagement. Some hospitals began a modest celebration as early as October, when Christmas and other holidays were celebrated with greater care as a way to encourage workers from their monotonous work hours.

**Work Environment**

Employee engagement practices that were not adequately conducted to the workers were discouraging and monotonous, but taking care of the patients first was considered a more significant prospect in hospitals.

* It was discovered that people who worked for themselves had a significant capacity to overcome their tension on their own. To begin with, only qualified staff were hired in hospitals during these difficult times, despite the fact that recruiting was a major challenge at the time. In order to draw freshers, HCW was hired with a double salary in some hospitals.
* Treating a patient is a team effort in which the entire hospital works together for the greater good. As a result, employee engagement improves as the situation improves. Even when under extreme stress, a safe work atmosphere was maintained, and workers did their best to work overtime due to a lack of HCW. Some HCW worked for 72 hours straight instead of 24 hours with PPE kits, and they were still giving it their all to provide the best service possible.
* Management had also received personal input from the HCW, allowing for a more accurate assessment of the situation. In a few hospitals, general input was received on a regular basis from staff during their shifts, and management took action based on the statements. Employees felt more related to their manager because he was open and honest with them, and everyone in the hospital was thought to be in the same position of giving and receiving.

And in the midst of the crisis, as there were a growing number of covid cases, management did all they could to keep track of the employees’ suffering and prevent them from having problems.

**Performance**

Individual employee performance has been recorded in certain hospitals by gathering patient feedback as well as continual input from the team, however in other hospitals, individual employee performance has not been recorded because employees were deemed to deliver their best service to the public during the pandemic. Hospitals also track patient service and feedback, with a specific in charge handling patient service feedback and ensuring that any holes in internal systems are addressed as soon as feasible. Employee motivation is ensured in some method within the organisation, where personal encounters from the HCW are practiced.

Employee performance can be difficult at times since patient feedback differs from one another. However, as a healthcare worker, the health and safety of the patients is always the top priority, and the hospital strives to provide the finest service possible.

Some hospitals also laid off personnel with poor performance (1-2 percent) since it was more important to focus on experienced personnel during these difficult times. Hospitals let go of personnel during the early stages of the Covid-19 pandemic, and attempts at employee engagement failed, but things are slowly returning to normal.

**Current level of employee engagement**

Despite the fact that the Covid-19 crisis has had a wide-ranging impact on the healthcare sector, the current level of staff involvement in hospitals is improving over time. Freshers go through proper screening of recruitment along with numerous examinations where their capabilities are tested with continual training, which is better than before. Hospital employees are also provided thorough training in preparation for future waves of Corona virus pandemic.

The most effective aspects in employee engagement, according to hospital HR is:

Chat 4.3 – The most effective aspects in employee’s engagement as per HR

\*Source: Primary data (Interview Method)

* 1. **Employee satisfaction towards employee engagement initiatives taken by the organization**
     1. **Frequency tables**
     + Gender of the respondents taken for the study

Table 4.1 Gender of the respondents Pie Chart 4.1 Gender of the respondents

|  |  |  |
| --- | --- | --- |
| **Gender** | **Frequency** | **Per cent** |
| Male | 140 | 49% |
| Female | 136 | 51% |
| **Total** | **276** | **100%** |

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.1 it is observed that out of 276 respondents 140 respondents (51%) were male and 136 respondents (49%) were female.

* Age of the respondents of the study

Table 4.2 Age of the respondents Pie Chart 4.2 Age of the respondents

|  |  |  |
| --- | --- | --- |
| **Age** | **Frequency** | **Percent** |
| Below 18 years | 1 | 0% |
| 18- 30 years | 166 | 60% |
| 30- 40 years | 52 | 19% |
| 40- 50 years | 41 | 15% |
| 50 years and above | 16 | 6% |
| **Total** | **276** | **100%** |

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.2 it is observed that out of 276 respondents and 140 being male and 136 being female, 1 is below 18 years, 166 (60%) are from 18-30 years, 52 (19%) are from 30-40 years, 41 (15%) are from 40-50 years and 16 (6%) respondents are 50 years and above for the sampling conducted.

* Occupation of the respondents of the study

Table 4.3 - Occupation of the respondents

|  |  |  |
| --- | --- | --- |
| **Occupation** | **Frequency** | **Percent** |
| Doctor | 53 | 19% |
| Nurse | 79 | 29% |
| Administrative support worker | 42 | 15% |
| Technical staff | 58 | 21% |
| Interns | 19 | 7% |
| HR | 3 | 1% |
| Medical transcriptionist | 4 | 1% |
| Lab technicians | 18 | 7% |
| **Total** | **276** | **100%** |

\*Source: Primary Data (Structured Questionnaire)

Pie Chart 4.3 - Occupation of respondents

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.3 it is observed that out of 276 respondents, 140 respondents were male and 136 respondents were female. 53 (19%) are doctors, 79 (29%) are nurses, 42 (15%) are administrative support workers, 58 (21%) are technical staffs, and 19 (7%) are interns, 3 HRs, 4 medical transcription and 18 (7%) lab technicians.

* Major issues faced by the employees during covid-19 of the study

Table 4.4 Major issues faced by the employees

|  |  |  |  |
| --- | --- | --- | --- |
| **Major issue** | **Selected** | **Not Selected** | **Total** |
| Mental Stress | 192 | 84 | **276** |
| Availability of resources | 124 | 152 | **276** |
| Work life balance | 132 | 144 | **276** |
| Job security | 100 | 176 | **276** |

\*Source: Primary Data (Structured Questionnaire)

Bar Chart 4.1 Major issues faced by the employees

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.4 It is observed that out of 276 respondents, 172 respondents voted for mental stress and 84 didn't select, 124 selected availability of resources and 152 didn’t select, 132 selected work life balance and 144 don't face mental issue because of work life balance, 100 are insecure of their job security and 176 didn't select job security as major issue faced.

* Factors considered to reduce mental stress by the employees during covid-19

Table 4.5 Factors considered reducing mental stress by the employees

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Selected** | **Not Selected** | **Total** |
| Availability of resources | 125 | 153 | **276** |
| Management support | 140 | 136 | **276** |
| Motivation | 165 | 111 | **276** |
| Time Flexibility | 132 | 144 | **276** |

\*Source: Primary Data (Structured Questionnaire)

Bar Chart 4.2 Factors considered reducing mental stress by the employees

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.5 it is observed that out of 276 respondents, 125 consider availability of resources can help in reducing the mental stress whereas 153 didn't consider it as a main factor. 140 respondents MT management support and 136 are ok as practiced, 165 face mental stress because of lack of motivation whereas 111 doesn't. 132 need time flexibility and 144 are fine.

* Awareness on company policies by the employees of the study during covid-19

Table 4.6 Awareness on company policies Pie Chart 4.4 Awareness on company policies

|  |  |  |
| --- | --- | --- |
| **Company policies awareness** | **Frequency** | **Per cent** |
| Yes | 157 | 57% |
| No | 49 | 18% |
| Maybe | 70 | 25% |
| Total | 276 | 100% |

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.6 It is observed that out of 276 respondents where 140 being male and 136 being female, 157 (57%) respondents are aware of company policies where is 49 (18%) and not having any idea also 70 (70%) are not sure about the company policies.

* Fair compensation as per the employees of the hospital during covid-19

Table 4.7 Fair compensation as per the employees Pie Chart 4.5 Fair compensation

|  |  |  |
| --- | --- | --- |
| **Fair compensation as per employees** | **Frequency** | **Per cent** |
| Yes | 189 | 76% |
| No | 87 | 24% |
| Total | 276 | 100% |

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.7 it is observed that out of 276 respondents, 189 (79%) respondents considered that the organization gives fair compensation where is 87 (24%) respondents feel that company don't give their compensation.

* Frequency of the employees getting promoted during covid-19

Table 4.8 Promoted during covid-19 pandemic Pie Chart 4.6 Frequency of getting promoted

|  |  |  |
| --- | --- | --- |
| **Frequency of being promoted** | **Frequency** | **Percent** |
| Within 6 months | 52 | 19% |
| 1 years | 99 | 36% |
| 2 years | 68 | 24% |
| 3 years and more | 57 | 21% |
| Total | 276 | 100% |

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.8 it is observed that out of 276 respondents, 52 (19%) respondents are promoted within 6 months, 99 (36%) are promoted within 1 year, 68 (24%) are in 2 months and 57 respondents (21%) are promoted after 3 years or above according to their performance.

* Scope for two-way communication and feedback for the employees of the hospital during covid-19

Table 4.9 Scope for two-way communication and feedback Pie Chart 4.7 Scope for two-way

|  |  |  |
| --- | --- | --- |
| **Scope for two-way communication and feedback** | **Frequency** | **Per cent** |
| Yes | 174 | 63% |
| No | 55 | 20% |
| Maybe | 47 | 17% |
| Total | 276 | 100% |

\*Source: Primary Data (Structured Questionnaire)

From the above table 3.9 it is observed that out of 276 respondents, 174 (63%) respondents aware of two-way communication and feedback facilities given by the organization whereas 55 (20%) don't know and 47 (17%) respondents select maybe.

* Productivity improved by efficiency of the employees in the hospital during pandemic

Table 4.10 Productivity improved by efficiency of the employees

|  |  |  |  |
| --- | --- | --- | --- |
| **Better productivity by** | **Selected** | **Not selected** | **Total** |
| Investments in future workforce | 117 | 159 | 276 |
| Retention | 80 | 196 | 276 |
| Opportunity to grow | 184 | 92 | 276 |
| Adapting techniques | 168 | 108 | 276 |
| Chance to be creative | 138 | 138 | 276 |

\*Source: Primary Data (Structured Questionnaire)

Pie Chart 4.4 Productivity improved by efficiency of the employees

\*Source: Primary Data (Structured Questionnaire)

From the above table 3.10 It is observed that out of 276 respondents, 117 believe in investing in future works, a t believe in retaining the employees, 184 wants opportunity to grow, 168 suggest for adapting techniques and 138 selected chance to be creative.

* Satisfaction level of the employees in the hospital during covid-19 pandemic

Table 4.11 Satisfaction level of the employees in the hospitals

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Rate | Highly satisfied | Satisfied | Neither satisfied nor dissatisfied | Dissatisfied | Highly dissatisfied |
| Job attractiveness | 49 | 151 | 62 | 8 | 6 |
| Job security | 42 | 153 | 59 | 18 | 4 |
| Opportunity to grow | 37 | 112 | 96 | 19 | 2 |
| Availability of resources | 31 | 135 | 87 | 20 | 3 |
| Recognization and promotion | 24 | 118 | 102 | 28 | 4 |
| Management involvement | 43 | 153 | 52 | 25 | 3 |
| Mutual respect for each other in the work environment | 89 | 134 | 36 | 9 | 8 |
| Your participation for goal achievement | 81 | 136 | 39 | 9 | 11 |

\*Source: Primary Data (Structured Questionnaire)

Bar Chart 4.4 Satisfaction level of the employees in the hospital

\*Source: Primary Data (Structured Questionnaire)

From the above table 4.11 It is observed that out of 276 respondents, 151 are satisfied with job attractiveness, 153 are satisfied with job security, 112 are satisfied by opportunity to grow, 135 are satisfied with availability of resources, 118 are satisfied with recognized and promotions, 153 e a satisfied with management, 134 are satisfied with mutual respect for each other in the work environment, 136 are satisfied with the participation for goal achievement.

* Priority to get vaccinated (frontline worker) as per government norms

Pie Chart 4.8 Priority given to get vaccinated

The healthcare workers in all the hospitals were given priority to get vaccinated (frontline workers) as per the govt norms.

* + 1. **HYPOTHESES OF THE STUDY**
* **Hypothesis -1**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Motivation of the employees and the retention in the hospitals.

**ALTERNATE HYPOTHESIS (H1):** There is significant relationship between Motivation of the employees and the retention in the hospitals.

The relationship between the motivation and retention of the employees in the hospital is depicted in table 4.12

Table 4.12 Chi square test analysis on Motivation and Retention in the hospital

| **Motivation and Retention in the hospital** | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | **"**Better productivity by Retention" | | | | |  | |
| "Reducing stress by Motivation" | | | Selected | | Not selected | | | **Total** | |
| Selected | |  | 63 |  | 102 | |  | 165 |  |
| Not selected | |  | 17 |  | 94 | |  | 111 |  |
| Total | |  | 80 |  | 196 | |  | 276 |  |
| Chi square test value (χ²): 16.9 | Df- 1 | | | | | P – 0.001 | | | |
| Results; H0-Rejected, H1- Accepted | | | | | | | | | |

\*Source: Primary Data (Structured Questionnaire)

**Level of significance:** The LOS for chi square test is 5% i.e., 0.05

In order to test the significant relationship between the motivation and the retention of the employees in the hospital, the Chi-square test with the help of Jamovi software is applied. As the calculated value of chi-square P(0.001) is lesser than significant value < (0.05). We reject Null Hypothesis (H0) and accept Alternate Hypothesis (H1). Thus, we conclude that there is a significant relationship between Motivation of the employees and the retention in the hospitals. Hence from the above table 4.12 it is observed that if the motivation is high in the organization then possibility of retaining the employees are also high for long run.

* **Hypothesis -2**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Management support and the Job attractiveness.

**ALTERNATE HYPOTHESIS (H1):** There is significant relationship between Management support and the Job attractiveness.

The relationship between the management support and job attractiveness in the hospital is depicted in table 4.13

Table 4.13 Chi square test analysis on Management support and Job attractiveness

| **Management support and Job attractiveness in the hospital** | | | | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | "Job attractiveness level" | | | | | | | | | | | | | |  | | | |
| "Management involvement level" | | Neither satisfied nor dissatisfied | | | Highly satisfied | | Satisfied | | Dissatisfied | | | Highly dissatisfied | | | | **Total** | | | |
| Satisfied |  | 19 |  | | 29 |  | 104 |  | 0 | |  | | 1 |  | 153 | |  |
| Dissatisfied |  | 8 |  | | 1 |  | 9 |  | 7 | |  | | 0 |  | 25 | |  |
| Neither satisfied nor dissatisfied |  | 31 |  | | 0 |  | 20 |  | 1 | |  | | 0 |  | 52 | |  |
| Highly satisfied |  | 4 |  | | 19 |  | 18 |  | 0 | |  | | 2 |  | 43 | |  |
| Highly dissatisfied |  | 0 |  | | 0 |  | 0 |  | 0 | |  | | 3 |  | 3 | |  |
| Total |  | 62 |  | | 49 |  | 151 |  | 8 | |  | | 6 |  | 276 | |  |
| Chi square test value (χ²): 282 | | | | Df – 16 | | | | | | P – 0.001 | | | | | | | | |
| Results: H0-Rejected, H1- Accepted | | | | | | | | | | | | | | | | | | |

\*Source: Primary Data (Structured Questionnaire)

**Level of significance:** The LOS for chi square test is 5% i.e., 0.05

In order to test the significant relationship between Management support and the Job attractiveness in the hospital, the Chi-square test with the help of Jamovi software is applied. As the calculated value of chi-square P(0.001) is lesser than significant value < (0.05). We reject Null Hypothesis (H0) and accept Alternate Hypothesis (H1). Thus, we conclude that there is a significant relationship between Management support and the Job attractiveness in the hospitals. Hence from the above table 4.13 it is observed that if the Management support is high in the organization then job attractiveness as well as the employees satisfaction is also high for long run which would result in retaining of the employees.

* **Hypothesis - 3**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Work life balance and mental stress of the employees.

**ALTERNATE HYPOTHESIS (H1):** There is significant relationship between Work life balance and mental stress of the employees.

The relationship between the work life balance and mental stress in the hospital is depicted in table 4.14

Table 4.14 Chi square test analysis on work life balance and mental stress in the hospital

| **Work life balance and mental stress in the hospital** | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | **"**Major issue - Work life balance" | | | | |  | |
| "Major issue - Mental Stress" | | | | Selected | | Not selected | | | **Total** | |
| Selected | | |  | 78 |  | 114 | |  | 192 |  |
| Not selected | | |  | 54 |  | 30 | |  | 84 |  |
| Total | | |  | 132 |  | 144 | |  | 276 |  |
| Chi square test value (χ²): 13.1 | Df- 3 | | | | | P – 0.001 | | | |
| Results: H0-Rejected, H1- Accepted | | | | | | | | | |

\*Source: Primary Data (Structured Questionnaire)

**Level of significance:** The LOS for chi square test is 5% i.e., 0.05

In order to test the significant relationship between work life balance and mental stress in the hospital, the Chi-square test with the help of Jamovi software is applied. As the calculated value of chi-square P(0.001) is lesser than significant value < (0.05). We reject Null Hypothesis (H0) and accept Alternate Hypothesis (H1). Thus, we conclude that there is a significant relationship between work life balance and mental stress in the hospitals. Hence from the above table 4.14 it is observed that if the work life balance is balanced then mental stress will also be less and vice-versa.

* **Hypothesis - 4**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Availability of resources in the hospitals and mental stress of the employees.

**ALTERNATE HYPOTHESIS (H1):** There is significant relationship between Availability of resources in the hospitals and mental stress of the employees.

The relationship between the availability of resources and mental stress in the hospital is depicted in table 4.15

Table 4.15 Chi square test analysis on Availability of resources and mental stress

| **Availability of resources and Mental stress in the hospitals** | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | "Reducing stress by Availability of resources" | | | | | |  | |
| "Major issue - Mental Stress" | | Not selected | | | Selected | | | **Total** | |
| Selected |  | 97 |  | | 95 | |  | 192 |  |
| Not selected |  | 56 |  | | 28 | |  | 84 |  |
| Total |  | 153 |  | | 123 | |  | 276 |  |
| Chi square test value (χ²): 6.17 | | | | Df – 1 | | P – 0.013 | | | |
| Results: H0-Rejected, H1- Accepted | | | | | | | | | |

\*Source: Primary Data (Structured Questionnaire)

**Level of significance:** The LOS for chi square test is 5% i.e., 0.05

In order to test the significant relationship between availability of resources and mental stress in the hospital, the Chi-square test with the help of Jamovi software is applied. As the calculated value of chi-square P(0.001) is lesser than significant value < (0.05). We reject Null Hypothesis (H0) and accept Alternate Hypothesis (H1). Thus, we conclude that there is a significant relationship availability of resources and mental stress in the hospitals. Hence from the above table 4.15 it is observed that if in the organization, the availability of resources along with employees health is been taken care then mental stress will also be reduced.

* **Hypothesis – 5**

**NULL HYPOTHESIS (H0):** There is no significant relationship between Career development opportunities and Job attractiveness in hospitals.

**ALTERNATE HYPOTHESIS (H1):** There is significant relationship between Career development opportunities and Job attractiveness in hospitals.

The relationship between the Career development (opportunity to grow) and Job attractiveness in the hospitals is depicted in table 4.16

Table 4.16 Chi square test analysis on Career development (opportunity to grow) and Job attractiveness in the hospitals

| **Career development (opportunity to grow) and Job attractiveness in the hospitals** | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | "Job attractiveness level" | | | | | | | | | | | |  | | |
| "Opportunity to grow level" | | Neither satisfied nor dissatisfied | | Highly satisfied | | | Satisfied | | Dissatisfied | | | Highly dissatisfied | | **Total** | | |
| Neither satisfied nor dissatisfied |  | 39 |  | 9 | |  | 46 |  |  | 1 | 1 | |  | | 96 |  | |
| Dissatisfied |  | 8 |  | 1 | |  | 2 |  |  | 7 | 1 | |  | | 19 |  | |
| Satisfied |  | 13 |  | 19 | |  | 90 |  |  | 0 | 0 | |  | | 122 |  | |
| Highly satisfied |  | 2 |  | 20 | |  | 13 |  |  | 0 | 2 | |  | | 37 |  | |
| Highly dissatisfied |  | 0 |  | 0 | |  | 0 |  |  | 0 | 2 | |  | | 2 |  | |
| Total |  | 62 |  | 49 | |  | 151 |  |  | 8 | 6 | |  | | 276 |  | |
| Chi square test value (χ²): 258 | | | | | Df – 16 | | | | P – 0.001 | | | | | | | |
| Results: H0-Rejected, H1- Accepted | | | | | | | | | | | | | | | | |

\*Source: Primary Data (Structured Questionnaire)

**Level of significance:** The LOS for chi square test is 5% i.e., 0.05

In order to test the significant relationship between Career development (opportunity to grow) and Job attractiveness in the hospitals, the Chi-square test with the help of Jamovi software is applied. As the calculated value of chi-square P(0.001) is lesser than significant value < (0.05). We reject Null Hypothesis (H0) and accept Alternate Hypothesis (H1). Thus, we conclude that there is a significant relationship Career development (opportunity to grow) and Job attractiveness in the hospitals. Hence from the above table 4.16 it is observed that if in the organization, the opportunity to grow as well as the career development of the employees are approached then the employees will also be attracted and satisfied with the job for the long run.

* **Hypothesis – 6**

**NULL HYPOTHESIS (H0):** There is no significant relationship between participation of the employee and Job security.

**ALTERNATE HYPOTHESIS (H1):** There is significant relationship between participation of the employee and Job security.

The relationship between the Performance/ participation and Job security in the hospitals is depicted in table 4.17

Table 4.17 Chi square test analysis on Performance/ participation and Job security in the hospitals

| **Performance/ participation and Job security in the hospitals** | | | | | | | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | "Participation for goal achievement in organization level" | | | | | | | | | | | | | | | | |  | | | |
| "Job Satisfaction level" | | Highly satisfied | | | Satisfied | | | | Neither satisfied nor dissatisfied | | | Dissatisfied | | | | Highly dissatisfied | | | **Total** | | | |
| Dissatisfied |  | | 6 |  | | 2 |  | | | 0 |  | | 8 | |  | | 2 |  | | 18 |  |
| Satisfied |  | | 34 |  | | 101 |  | | | 18 |  | | 0 | |  | | 0 |  | | 153 |  |
| Neither satisfied nor dissatisfied |  | | 8 |  | | 25 |  | | | 19 |  | | 1 | |  | | 6 |  | | 59 |  |
| Highly satisfied |  | | 33 |  | | 8 |  | | | 1 |  | | 0 | |  | | 0 |  | | 42 |  |
| Highly dissatisfied |  | | 0 |  | | 0 |  | | | 1 |  | | 0 | |  | | 3 |  | | 4 |  |
| Total |  | | 81 |  | | 136 |  | | | 39 |  | | 9 | |  | | 11 |  | | 276 |  |
| Chi square test value (χ²): 256 | | | | | | | | Df – 16 | | | | | | P – 0.001 | | | | | | | |
| Results: H0-Rejected, H1- Accepted | | | | | | | | | | | | | | | | | | | | | |

 \*Source: Primary Data (Structured Questionnaire)

**Level of significance:** The LOS for chi square test is 5% i.e., 0.05

In order to test the significant relationship between Performance/ participation and Job security in the hospitals, the Chi-square test with the help of Jamovi software is applied. As the calculated value of chi-square P(0.001) is lesser than significant value < (0.05). We reject Null Hypothesis (H0) and accept Alternate Hypothesis (H1). Thus, we conclude that there is a significant relationship Performance/ participation and Job security in the hospitals. Hence from the above table 4.17 it is observed that well performance and participation by the employee could result in job security of the same employee which indirectly will help the organization to retain employees.

* 1. **To identify the vital elements to be included in a employee engagement model for handling crisis**

Doctors, nurses, administrative personnel, technical personnel, housekeeping, and all other healthcare employees are expected to deliver quality care and save patient’s lives on a continual basis throughout this difficult period. HCWs have remained to work in this difficult period, risking their lives, while many others have given up their jobs. As the number of covid cases continues to rise, it is critical to both engage existing employees and recruit new personnel. Thus employee experience takes a back seat to the patient experience for obvious reasons.

Today, healthcare workers all across the world are making significant personal sacrifices in order to save the lives of people who have been infected. Some people have returned to work after retiring. Others have found themselves in new departments, requiring them to learn new procedures and protocols as they go. It is more important than ever to protect, equip, and invest in the healthcare frontline.

**One of the biggest barriers to employee engagement** in healthcare settings is ineffective internal communications along with high mental stress and unavailability of the resources because of the pandemic. Hospitals are having difficulty retaining healthcare personnel, particularly nurses, who are leaving due to internal fear and a lack of knowledge on how to combat the pandemic.

* Out of 276 respondents from the hospitals in Hyderabad including 140 male and 136 female with all the age group majorly employees from 18 to 30 years including all types of occupation in the hospital have responded highest for mental stress. Out of 276 respondents, 192 employees have selected metal stress is high and only 84 chose that mental stress was manageable during the COVID-19 crisis (table 4.4). So very clearly with the numbers it is clear that employee engagement initiative should be taken in terms of mental stress.
* Out of 276 respondents, 125 respondents states that mental stress can be reduced by available of resources whereas 140 wants management support along with quality motivation and time flexibility from the organization for reducing their stress.

**Effective measures**

Out of all, the most commonly selected option is **Motivation** where it can be concluded that the employees engagement be pushed up in the aspects of motivation where small approaches can be made for wellbeing such as reward and recognition, conducting of few activities and celebrating, providing monetary and non-monetary benefits along with appreciation even though it can be through any online mode like e-mails and messages.

* Not only fair compensation helps in retaining of the employees. During high covid situation, many hospitals have recruiting employees with double salary but still there was lack of Healthcare workers which at the end proves that money doesn't play the entire role. Of course money is important for which human work with this side that other factors also matters for running the system.
* Motivation can be considered the best way to keep the he employees retained where employees feel connected and encouraged to work even in hard times. From the hypothesis test (table 4.12) it is observed clearly that there is a significant relationship between the motivation happening in the hospital and resulting in retention of employees in the hospital. Thus with such approaches, the HCW's even in high time with always stick to the organization no matter what. Existing employees should also be retained in the same way along with more number of capable recruitments through with the insufficiency of HCW's can also be bring back to normal.
* With proper motivation in the organization, mental health of the employees can also be stable with sufficient encouragement to work happily. Mental health is responsible for direct affecting work life balance, where the individual must have health work-life balance to be happy. From the hypothesis test (table 4.14) it is observed clearly that there is a significant relationship between work-life balance of the employee and mental health of the individual. In simple terms for being productive in everything, mental health of the person should be stable.
* In spite of high mental stress for continuous working for doctors and nurses along with other HCW's has been working day and night fighting against the situation to save the world. It is the responsibility of the management to understand the HCW's basic needs and provide the management support.

Lack in **management support** could also result in Employee quitting their job for which directly leads to shortage of HCW's and resulting in high mental stress. Everything here is inter linked with each other in the organization to go health.

* Out of 276 respondents, 140 respondents feel connected to the organization by management support beside which 153 respondents appreciates the management involvement. Only 43 respondents are highly satisfied with the management support which is very less in number. Hypothesis test on management support and job attractiveness of the employees in the organization is been conducted (table 4.13) in which clearly it shows that there is significant relationship between support from the management and satisfaction of the job as per the employee.
* Management support is a huge term which includes number of things basically in favour of employees need. Availability of the resources, motivating and increasing employees along with their it career development and opportunity to growth with continuous promotion with constant reward and recognition, altogether the make a healthy working environment.

**Work environment** is the biggest encouragement for the Healthcare workers to function. The working atmosphere has altered dramatically as a result of covid, with all employee engagement practices being abandoned in favour of patients. Treating a patient is a collaborative effort in which the entire hospital works together to achieve a common goal. As a result, as the situation improves, employee engagement improves as well.

* Even in this heavy time, out of 276 respondents from the hospitals, 134 employees are satisfied with the mutual respect employees have for each other in the work environment and 89 is highly satisfied with the surrounding. In spite of having high stress and lack of resources, employees have managed to maintain healthy work environment which is indirectly affect the wellbeing of the patient.

Seeing the employees’ commitment and good attitude, it is the management’s job to give **career growth and opportunities** for employees to progress.

* It is been observed that out of 276 respondents, 184 respondents believe in growth of the organization along with the growth of the employees. Career development with constant upraises with promotions and future to glow in the organization of the employees could also result in high job attractiveness. From the hypothesis test conducted (table 4.16), it is observed that there is a significant relationship between Career development opportunities and Job attractiveness in hospitals. Attractiveness and satisfaction employees can we retain easily too.

In the midst of the corona virus outbreak, HCWs, primarily nurses, are leaving their jobs due to a lack of sufficient facilities from management. Employee retention rate will be high if management succeeds in providing proper care to the workers. The significant risk of coronavirus in hospitals could only be averted for employees if management provided them with adequate resources. **Availability of resources** in hospitals is one of the major factors that employee have rated high in the findings of the study.

* Out of 276 respondents, 125 HCW's are going through mental stress because of unavailability of resources in the organization. Hypothesis test (table 4.15) has been done and observed that there is a significant relationship between resources provided to the employees and their mental health.
* In many hospitals the employees are not even provided with the basic precaution equipment’s such as mask, sanitizer and PPE kits where HCW's has to buy their own which indirectly would create the inner fear inside the workers.
* Some basic approach on taking care of heath of the existing employees can be done through providing basic resources for their safety from coronavirus. By keeping the healthcare workers safe and happy by the management could only result in retaining them which will lead to treating of more number of patients in the world full of needs.

Motivation should also happen through excellent **communication** in the organization. Employees should be able to speak freely and discuss the issue without being confined to huddles. Management should be in charge of fostering a healthy environment that promotes productivity and eliminates communication gaps. The supervisor should be open and honest with employees, providing information about the hospital’s successes and issues. This fosters trust and builds community by allowing team members to feel more connected to their employers than just a pay check and chores performed.

* Two- way communication and feedback collection with face- to- face interaction between the upper and ground level should be approached. From the survey, it is observed that 17-20% of the employees in the hospitals don’t get the opportunity to speak as well as are not aware of the organizations way of reducing the communication gap. Two-way communication creates a more democratic environment, whereby employees can share their thoughts, ideas and opinions, regardless of corporate hierarchy, and improve relationships right across the structure. Effective two-way communication is required in order to solve problems better and invent besides doing daily work.

**Awareness about company policy** should be spread to the workers which would keep the employees in positive attitude towards the organization with the knowledge of all. Awareness can be spread throughout the organization through many ways such as training and development programmers, conducting workshops, daily meeting discuss and word of mouth too.

* Out of 276 respondents, 49 respondents are still not aware of any of the any company policy at all and 70 are not sure about the company policies followed in the organization even though they have been working in the hospitals from long time. Thus it is important to understand each and every employee and take care of them. As per the input, the performance out should also be measured based on employees participation in the organization.

Every individual employee should be determined to their work especially when work counts in healthcare industry. The **participation of the employees** should be high as per the facilities provided by the hospital. The hypothesis test had been conducted (table 4.17) to understand the performance and participation of the employee along with the job security in the hospital. It was determined that high employee performance and participation in the hospital would result in a high level of job security in the hospital. It is advantageous from the standpoint of the employee, who is expected to engage with the hospital at a high level of engagement and provide good results. With the secured job in hand, mental stress would also be reduced.

Based on all the findings from other two objectives of the study, the best way of employee engagement can be practiced in the hospital by taking the following vital elements into consideration while developing an employee engagement model for handling crisis.

Chat 4.4 –Vital elements to be included in an Employee engagement model

\*Source: Primary data( given according to the finding)

From the employee’s perspective, the above finding establishes interrelationships between job engagement with management support, motivation and a healthy work environment, whereas from the hospital’s perspective, job satisfaction and employee participation. The latter however has significant relationship between each other showing their influences in the hospitals of Hyderabad.

* **Management support** is not only e the well communication and being transparency towards the employee but also understanding the employee’s needs. Workers should be provided with resources for their health and safety, as well as opportunities for career advancement and ongoing training. Management support also includes living-in employees who are offered opportunities to advance inside the hospital.
* **Motivation** plays major role in in keeping the employees determined and encouraged towards their work. In spite of fair compensation in the organisation, monetary and non-monetary benefits, promotions and incentives with organised reward and recognition for employees and organising activities among the workers could help the HCW’s to get well motivated and result in reducing stress.
* Creating a **healthy work environment** (HWE) enables nurses as well as other workers to provide the highest standards of compassionate patient care while being fulfilled at work. Many things within the hospital can help to create a healthy work environment, such as building trust, having mutual respect for one another, proper communication, and team members work where employees should have fun and motivated while working too.
* **Job satisfaction** is extended further to which an employee feels self-motivated, contacted and satisfied with their job. Job satisfaction happens when an employee feels he or she is having job stability or job security, career growth in the hospital, good outcome from the inputs and most importantly having proper work life balance.
* At last from the perspective of HR, **the employee participation** should also be high according to which the job security and well management support will be provided. Employee participation is a process in which employees participate in decision-making rather than merely following commands. Employee performance should benefit the hospital, and the employees should be well aware of the hospital they work for.

Thus, this chapter gave the analysis of the data collected from HR’s and employee respondents from the hospitals through the survey method with the help of a well-structured questionnaire.

The current pandemic has a “serious impact” on the mental wellbeing of healthcare workers all across the world, with burnout and anxiety rates. Employee engagement is important in any industry, but it’s especially important in healthcare, where mistakes may lead to serious injury or even death. COVID-19 has already been met with dignity, bravery and compassion by healthcare personnel. They are working long hours, constantly revising how they provide care, and putting their lives at risk to protect the world. Their employee experience must be safeguarded at all costs because the world is impotent without them. Workers in the healthcare sector are the troops who can help us win the war of covid-19.

**CHAPTER 5**

**FINDINGS AND CONCLUSIONS**

To summarize “ **A STUDY ON EMPLOYEE ENGAGEMENT IN SELECT HOSPITALS DURING PANDEMIC”** the study was conducted with a sample of 276 employees and 6 HRs from hospitals where the study is restricted to Hyderabad only. The findings in the study are based on online personal interview from HRs and the survey google form filled by the respondents. Statistical tools such as Chi-square test and hypothesis were used to analyse the collected data with the help of the Jamovi Software 1.6.23.

* The employee engagement adopted by the healthcare industry through the qualitative analysis which states that mental stress was faced a lot during the covid-19 crisis in the hospitals. Many employees especially nurses have quit their job where employees were little difficult to engage during the initial time of the crisis. In spite of that the management tried their level best to overcome the issues by various engagement ways.
* Through quantitative analysis employee satisfaction is been looked into dept. towards employee engagement initiatives taken by the organization. According to the HCW’s responses, the hypotheses are been tested and observed that there is a significant relationship between motivation and retention in the hospital, management support and job attractiveness, work life balance with mental stress, availability of resources and mental stress, career development and job attractiveness, participation and job security.
* The study has been concluded by identifying the vital elements to be included in an employee engagement model for handling crisis. The findings show inter relationships between job engagement with management support, motivation, healthy work environment from the employee’s perspective whereas job satisfaction and employee participation from the organization’s perspective.

**Scope for further studies :** The present study had brought out the vital elements to be included in an employee engagement model for handling crisis from the study conducted in the hospitals of Hyderabad. The study could be validated and expanded with further research work on other similar organizations as well as other metropolitan cities in and around the country. This would facilitate policy makers and HR specialists implement changes in their organizational approaches for making their organizations more employable and employee engaging.

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**ANNEXURE**

**RESEARCH TITLE – “A STUDY ON EMPLOYEE ENGAGEMENT IN SELECT HOSPITALS DURING PANDEMIC”**

* **To understand the employee engagement adopted by the healthcare industry.**

1. As the covid-19 crisis has affected the healthcare industry in many aspects, so in your hospital what are the major issues faced during the time period?
2. How did you overcome the major problems that occurred within the organization?
3. What were the ways of engagement adopted during the pandemic?
4. Which areas of employee engagement have changed during the crisis as compared to previous times?
5. Does the hospital have motivational programs for the employees?
6. How motivation is ensured for the employees?
7. How performance is been recorded for individual employees?
8. What are the reward programs provided to the employees?
9. Are there any competitions and contests conducted between the employees so that the organizational goals will be achieved as well as their employees are motivated to work?
10. How is the work environment in the hospital?
11. Are the supervisors transparent and ethical towards employees?
12. Are feedbacks are recorded from the employees?
13. What resource is provided for the safety of the employees?
14. What is the employee wellness program offered and what are their benefits?
15. Which position got mostly affected by the crisis in the hospital?
16. Did the hospital layoff of the employees during the covid-19 crisis? If yes, why?
17. What is the current level of Employee Engagement in the hospital?
18. According to you what is the most effective factors in employee engagement working model?

* **To examine employee satisfaction towards employee engagement initiatives taken by the organization.**

1. **Name :**
2. **Gender**

* Male
* Female
* Others

1. **Age**

* Below 18 years
* 18- 30 years
* 30- 40 years
* 40- 50 years
* 50 years and above

1. **Occupation**

* Nurse
* Doctor
* Technical staff
* Administrative support worker
* Others \_\_\_\_\_\_\_

1. **What was the major issue during covid-19 crisis?**

* Mental stress
* Availability of resources
* Work life balance
* Job security
* Others

1. **What factors do you consider for reducing the mental stress**

* Management support
* Motivation
* Availability of resources
* Time flexibility
* Others

1. **Are you aware of complete company policies?**

* Yes
* No
* Maybe

1. **Do you have fair compensation in the organization?**

* Yes
* No

1. **How frequently are you promoted?**

* Within 6 months
* 1 year
* 2 years
* 3 years and more

1. **Is there a scope for two-way communication and feedback?**

* Yes
* No

1. **According to you how efficiency of the employees can be improved for better productivity?**

* Investments in future workforce
* Retention
* Opportunity to grow
* Adapting in techniques
* Chance to be creative
* Others

1. **Rate according to the level of satisfaction in your organization**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Rate** | **Highly satisfied** | **Satisfied** | **Neither satisfied nor dissatisfied** | **Dissatisfied** | **Highly dissatisfied** |
| * Job attractiveness |  |  |  |  |  |
| * Job security |  |  |  |  |  |
| * Opportunity to grow |  |  |  |  |  |
| * Availability of resources |  |  |  |  |  |
| * Recognition and promotion |  |  |  |  |  |
| * Management involvement |  |  |  |  |  |
| * Mutual respect for each other in the work environment |  |  |  |  |  |
| * Your participation for goal achievement |  |  |  |  |  |

1. **According to the government norms, did your hospital give you the priority to get vaccinated (frontline worker)?**

* Yes
* No