Job analysis is the process by which data with regard to each job within the organisation is systematically observed and noted. It provides information about nature of the job and the characteristics or qualifications that are desirable in the job holder. An important concept of job analysis is that it is conducted of the job, not the person. While job analysis data may be collected from incumbents through interviews or questionnaires, the product of the analysis is a description or specifications of the job, not a description of the person. Job analysis helps you to cut through clutter and distractions to get to the heart of what you need to do.

Job analysis should collect information on the following areas: duties & tasks, physical environment where job is undertaken, specific tools & equipments required to perform job, relationships with internal or external people & knowledge, skills & abilities required to perform the job.

Major domain of the hospital services i.e. patient care is mainly handled by the nursing staff. Newer & innovative methods of patient care along with use of advance technologies in diagnosis and treatment pose challenges in the performance of job by the nursing staff. Hence it becomes necessary to perform job analysis of nursing staff from time to time. Advanced technologies and newer methods of treatment redefine the role of nursing staff with additional responsibilities. Thus it becomes mandatory to update the technical skills from time to time. Recent policies of the Government, restricting the recruitment of new staff according to stipulated guidelines, impose additional work on the existing staff which lead to compromise on the quality of services provided by them. Many complaints by the patients relate to nursing services which are considered as face of the hospital, to time and coming up from time there is unrest observed among the nursing staff regarding working conditions and safety related issues from time to time. In view of this, present study was undertaken at a tertiary level care institute, with bed capacity of 1229, under Municipal Corporation of Greater Mumbai.

**Objectives**

The objectives of this study were to: Find out awareness among nursing staff members regarding their roles & responsibilities; Discuss work load as perceived by the staff and their immediate supervisors; Describe overall organization of patient care related activities by nursing staff; Understand safety related issues in day-to-day work; Assess the need for periodic job analysis of nursing staff; and Make appropriate recommendations based on the findings of the study to improve nursing services.

**Methodology**

A descriptive epidemiologic study approach was used. The research design was cross-sectional exploratory survey design was used. The setting was BYL Nair Ch. Hospital (Municipal Corporation of Greater Mumbai). Nursing staff in the category of Sister-in-charge (total 80) & Staff nurses (480) constituted the study population. 15 percent of sisters in charge on pay role and 10 percent of staff nurses on pay role were included in the present study. The total sample size was 60 (12 sister-incharge & 48 staff nurses).

**Inclusion Criteria:** Nursing staff in the category of sister in charge & staff nurses on pay role for at least last one year and willing to participate in the study.

**Sampling technique:** Simple random sampling method was used. List of all study subjects was prepared & by using two digit random number, study subjects were confirmed.

**Tools & technique:** Preformed, pre-tested, semi structured interview schedule & observational check list were used.

**Technique:** all subjects were interviewed & direct observations were made to assess skills & working conditions by the investigators.

**Results**

**Demographic profile:** All sisters incharge included in the study were above age group of 40 years. All the nursing staff had obtained diploma (GNM) and only 5 of them had completed PC BSc; 66.67 percent of them were spending more than 1 hour per day in travelling one way; 89.58 percent had children in the age group of less than 15 years; and 35 of them belong to nuclear type of family. Economic status of all study subjects was good.

**Job status of study subjects:** Most of the subjects (60.80%) were working from the beginning without any prior experience in other hospitals. All 12 sis-
ters incharge and 7 staff nurses had fixed duty timings and remaining all were doing shift duties. Majority of nursing staff were not given job orientation.

Roles & Responsibilities

Sister incharge: The response rate of sisters-in-charge for the information on roles and responsibilities is limited, in the sense that all of them could not reveal roles and responsibilities under different types of work duties and difference between roles (the work done routinely) and the responsibilities (work for which there is direct accountability set) was not clear to most of them. None of the sister in charge could inform all roles and responsibilities as per nursing manual.

Staff nurses: Overall response rate of staff nurses to their roles and responsibilities except for academic & other activities was good. Patient care being the main responsibility at this level, most of them were well versed with their roles & responsibilities.

Assessment of work load (staff nurses): Usually less number of staff nurses (1:30 to 40) are placed in the ward during afternoon and night shift and they are also expected to undertake the work of administrative nature along with patient care-related activities. These shifts are considered more heavy by the staff nurses, and could be a reason for high absenteeism during these shift duties.

Perception of work load (n=60): All subjects performing shift duties ranked their duties as very heavy all the time. It is routine practice at the administrative level to adjust the duties of staff nurses who have certain problems, in the fixed category to overcome the crisis situation.

Common problems in day-to-day work: All subjects are vocal to enlist at least one or the other problem in day to working on duty. Average number of problems given by sister in charges is 2.5 and that of staff nurses is 5.14 meaning that more problems are faced by staff nurses on duty. The main problems as evident are shortage of staff nurses, servant and overload due to disproportionately more number of patients in the ward as compared to strength of the ward.

Special provisions for nursing staff: Being professional service, they are entitled for deputation to enhance their academic career in the form of opting for higher degree, advanced trainings on new technologies etc. besides normal benefits.

Expression of satisfaction: 66.67 percent sister in charges & 52.88 percent staff nurses have expressed dissatisfaction. The various reasons for dissatisfaction were shortage of staff & servants, overload of work, shortage of drugs & equipments, no safety & security etc. Sexual harassments is reported sometimes at work place.

Employer expectations (Sister incharges): Increase in staff has been the constant demand from all sisters in charge. Need for computer services in ward are also felt by the sisters. Some of them have also desired to take out the responsibility of managing the servants in the wards.

Expectations from employer (Staff Nurses): The expectations of staff nurses also do not reflect the demands for professional development. The staff nurses are not aware about professional status of their service. This deserves attention at the higher level if status of nursing services is to be enhanced.

General observations of the investigators: There is no provision of separate rooms for nurses in the ward, no separate clean and dirty utility rooms and no provision for separate rooms for storage articles and equipments. Among 39 staff members, administrative skills were poorly reported lack of knowledge regarding administrative guidelines, certain protocols, likely medico-legal problems in day to day work, awareness about all records to be maintained and their relative importance etc.

Conclusion

In order to improve the nursing services, to enable provision of qualitative patient care services, development of nursing profession is important. Strict observance of guidelines of Nursing Council of India in this respect will be of immense help.

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