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Research Article

THE PERFORMANCE OF MEDICAL STAFF, STRESS DUE TO OCCUPATION AND ITS EFFECTS IN TERTIARY CARE HOSPITAL

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Abstract:

Background: Stress is physiological and mental reaction towards any events. Studies have shown that nurses are under considerable job stress, which can lead to health disorders and failure in duties. Stressors of nursing have been studied in some of quantitative studies; however, a few investigators have studied the nurses' life experiences in this regard.

Objective of the study: The objective of the study is to identify the level of occupational stress and the effect on the performance among the hospitals nurses.

Methodology: Descriptive cross-sectional study was conducted at Mayo Hospital, Lahore. The study was carried out on 103 nurses registered by Pakistan Nursing Council. Semi-structured occupational stress questionnaire was used to obtain the data. Data processed and analyzed in SPSS.

Results: The results of the study showed that the severe level of stress were 65% mild were 8% and moderate levels were 27%. The investigation results built up indisputably that a staggering part of nurses' populace setting had revealed direct and stress level that may discourage their expert and social accountabilities. It is proposed that stress should be lessened by executing appropriate administration and radical changes in benefit condition climate. These outcomes may profit nurses to enhance emotional wellness and to adapt to stress level that enable nurses to guarantee quality patient care.

Keywords: Nurses, occupational stress, stress, Pakistan.

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INTRODUCTION:

Pointing out the role of the role indicates the lack of part of the part and part indicates professional thinking between Nurses [1]. An investigation on the instructions in Delhi suggests that India has got maximum degree of nurses and there is more intensity of professional concern in Indian nurses. [2]. Essentially, nurses have a minor work in Pakistan and the nurse is in the patient's proportion: 50 doctor's facility [3]. With these lines, maximum degree is uploaded to the nurses working in setting up of medical facilities in Pakistan. In any case, the Pakistan Nursing Council has proposed a patient for a patient for two patients and a nurse when separate separation and separate separation in separate units.. However, concern over the overall degree is considered as a positive pressure and representatives are considered to be assigned each assignment and try to fulfill this objective. It enhances positive pressure representatives, while some incredible results are up to 3 to the advanced mass pressure. In addition, the ability to work more than professional pressure over the top and reduce the nature of at least life. Thinking about thinking about business concerns between nurses in the context of Pakistani context healing centers.

Terms are used professionally, tension of stress, organizational stress, and straining stress [4, 5, 6] because Occupations, Employment, Organization, and Work are often unusual concepts. Professional stress has become one of the most serious health problems in the contemporary world [7, 8], because it is in any occupation and for more than a decade. Employment can be used to reduce stress, highway transmission, heart problems, reduce trouble, contribute to substance abuse, and reduce the overall state of mental and physical prosperity [5]. Professional stress in nursing can be described as a physical and emotional reaction when the nurse's ability and resources cannot cope with the demands and requests of their works [9, 10]. Many studies show that the nurse experiences the advanced level of professional stress associated with the fact that individual, social, environmental and organizational reality. [11, 12]. Nursing Professional indicates rapidly increasing stress tension due to the nature of nature [13]. Nursing is a collective offer, but at this time it can be very upset.

Research Questions

- l. What is the factor about occupational stress and job performance among hospital nurses in tertiary care hospital?
- 2. What are the nurse's responses to occupational stress about job performance?

MATERIAL AND METHOD:

The study design is descriptive cross-sectional. This investigation was performed at Mayo Hospital, Lahore. The investigation subjects were female enrolled nurses with all day employment, notwithstanding, serving either in customary or contract premise with two years working background. Further, substantial permit holders by Pakistan Nursing Council were drawn nearer in this investigation.

Population

The population of the study consists of all nurses of two emergency department of tertiary care hospital, Mayo Hospital, Lahore.

Sample Size

The required sample size was utilized and the adequate sample size calculated for the study was 103 nurses. Convenient sampling technics were used for sample selecting about the nurses.

RESULTS:

Data analysis was conducted using Windows SPSS versi0n 21. The data were entered in the Wind0ws SPSS data base by tw0 data entry clerks [d0uble entry] t0 enhance the quality 0f data entry pr0cess and f0r quality c0ntr01 in the data entry pr0cess. The data were assessed for completeness, consistency, and missing values. A questi0nnaire was required t0 have 80% Of the questions completed before it could be accepted to be entered in the computer program f0r analysis. N0 questi0nnaires were disqualified due t0 inc0mp1eteness. The few missing values 0f s0me questi0nnaires were imputed using the mu1tip1e imputati0n meth0d. The interna1 cOnsistency Of the study instruments and instrument subscales was evaluated using Cr0nbach's alpha.

Table No 1: I could not seem to experience any positive feeling at all

Opinion	F	%	M	SD
Do not applied to me.	3	2.9		
Applied to me to some degree.	78	75.7		
applied to me to a considerable degree	2	1.9	2.3786	.82979
Applied to me most of the time.	20	19.4		
Total	103	100.0		

Table no 1 describes about i could not seem to experience any positive feeling at all. Results indicate that 2.9% respondents were do not applied to me, were 75.7% applied to me to some degree were applied to me to a considerable degree 1.9% and the Applied to me most of the time was 19.4% with the statement. The mean is 2.3786 with .82979 standard deviation.

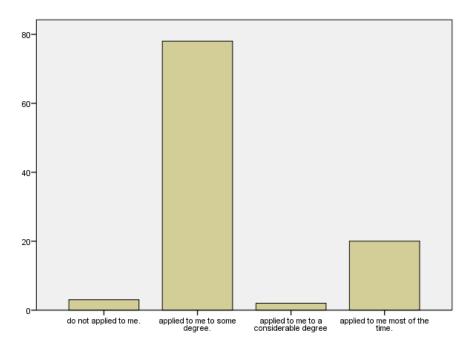


Fig No 1: could not seem to experience any positive feeling at all

Table No 2: I experienced breathing difficult

Opinion	F	%	M	SD
Do not applied to me.	3	2.9		
Applied to me to some degree.	78	75.7		
applied to me to a considerable degree	2	1.9	2.3786	.82979
Applied to me most of the time.	20	19.4		
Total	103	100.0		

Table no 2 describes about i experienced breathing difficult. Results indicate that 2.9% respondents were do not applied to me, were 75.7% applied to me to some degree were applied to me to a considerable degree 1.9% and the Applied to me most of the time was 19.4% with the statement. The mean is 2.3786 with .82979 standard deviation.

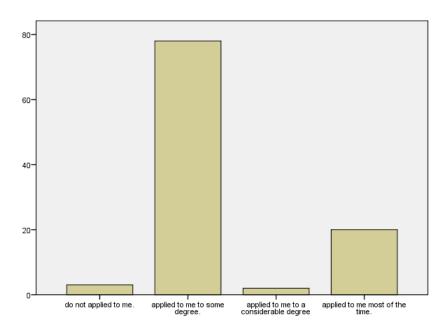


Fig No 2: experienced breathing difficult

Table No 3: I found it difficult to work up the initiative to do things

Opinion	F	%	M	SD
Do not applied to me.	3	6.9		
Applied to me to some degree.	78	73.7		
applied to me to a considerable degree	2	3.9	2.375	.3525
Applied to me most of the time.	20	15.4		
Total	103	100.0		

Table no 3 describes about i found it difficult to work up the initiative to do things. Results indicate that 6.9% respondents were do not applied to me, were 73.7% applied to me to some degree were applied to me to a considerable degree 3.9% and the Applied to me most of the time was 15.4% with the statement. The mean is 2.375 with .8298 standard deviation.

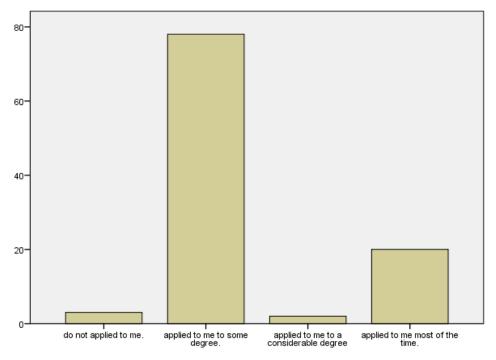


Fig No 3: found it difficult to work up the initiative to do things

Table No 4: I tented to over react to situation

Opinion	F	%	M	SD
Do not applied to me.	3	7.2		
Applied to me to some degree.	78	70.0		
applied to me to a considerable degree	2	1.9	2.738	.8154
Applied to me most of the time.	20	19.4		
Total	103	100.0		

Table no 4 describes about I tented to over react to situation. Results indicate that 7.2% respondents were do not applied to me, were 70.0% applied to me to some degree were applied to me to a considerable degree 1.9% and the Applied to me most of the time was 19.4% with the statement. The mean is 2.738 with .8154 standard deviation.

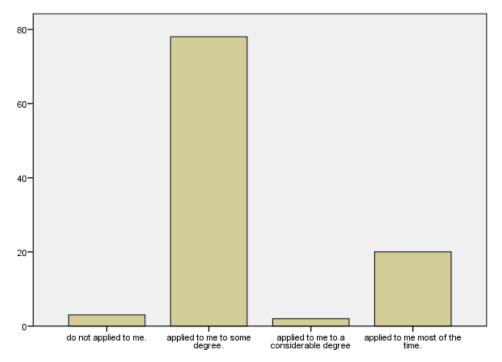


Fig No 4: tented to over react to situation

Table No 5: I experienced shakiness [e.g. in the hands]

Opinion	F	%	M	SD
Do not applied to me.	18	17.5		
Applied to me to some degree.	47	45.6		
applied to me to a considerable degree	9	8.7	2.4757	1.08325
Applied to me most of the time.	29	28.2		
Total	103	100.0		

Table no 10 describes about I experienced shakiness [e.g. in the hands]. Results indicate that 17.5% respondents were do not applied to me, were 45.6% applied to me to some degree were applied to me to a considerable degree 8.7% and the Applied to me most of the time was 28.2% with the statement. The mean is 2.4757 with 1.08325 standard deviation.

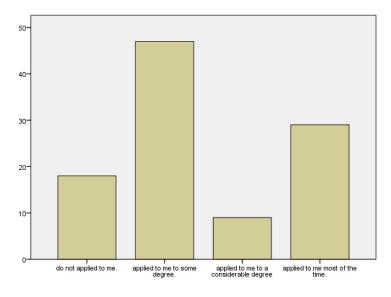


Fig No 5: experienced shakiness [e.g. in the hands]

DISCUSSION:

According to the selected participants, physical work environment is the leading cause for the development of occupational stress. Moreover, this factor is also highlighted by numerous research based articles . Small work place, poor ventilation, too much noise, abusive demands, exposure to dust, and uncomfortable environment were included in the division of physical work environment. All of these factors were directly associated with the development of occupational stress. Moreover, findings of the

study further described that management of the unit is the second most common factor for the occupational stress. Inappropriate management, poor administrative decisions, and lack of concentration over the professionals are included in the section of departmental unit. Some other research based articles have also proved that inappropriate management can result in the development of occupational stress among the professionals.

Problems with supervisors was the third most significant stressor, while multivariable analysis

showed that it was independently correlated with nurses' mental health. This could be attributed both to the lack of well-trained supervisors and to the existing "conflict with power" culture in Greece. In Japan, less job control was associated with anxiety, while poorer supervisor support was most obviously associated with depression [14]. According to Health and Safety Executive in United Kingdom, lack of understanding and support from nursing head managers contributes significantly to work-related stress, while greater supervisory support is associated with reduced stress and job satisfaction. Problems with patients and their families extend from absence of cooperation to violence behaviors. literature review has revealed that the risk of physical and psychological violence on behalf of abusive patients and their relatives is a great stressor. The experience in the USA is similar, revealing that workplace violence is a significant stressor, especially for Emergency Department nurses. Verbal or physical abuse often had a negative psychological effect on nurses after the incident.

CONCLUSION:

The present research paper gave an attention to issue identified with work related stress among nurses at tertiary level in the hospitals. The investigation results built up indisputably that a staggering part of nurses' populace setting had revealed direct and stress level that may discourage their expert and social accountabilities. It is proposed that stress should be lessened by executing appropriate administration and radical changes in benefit condition climate. These outcomes may profit nurses to enhance emotional wellness and to adapt to stress level that enable nurses to guarantee quality patient care.

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