

THE ORGANISATIONAL STRESS IMPACT OVER THE EFFICIENCY OF THE MANAGEMENT AND MEDICAL STAFF'S ACTIVITY FROM WITHIN THE ROMANIAN HEALTHCARE ORGANISATIONS

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ABSTRACT

Each workplace presents a certain stress degree, but working with the patients presumes an intense professional stress, with influence over the physical and psychical health of employees. Most studies concerning the occupational stress in the case of the medical personnel were done in occidental countries, with the interest being lower in countries undergoing development.

In my opinion, the stress affects the health, safety of individuals and implicitly the management of the organisation, businesses and national economies. The workplace stress, also called occupational or professional stress, may affect anyone and at any level, but especially it can affect the well-functioning of the organisation management. The professional stress is one of the issues which all today's companies are confronted with. It is generated by the professional life, the working environment, with the consequences being over the professional and personal activities and also over the health of people who provide the respective work.

In the hospital, the working environment is stressful and presumes a certain rhythm, professionalism, a certain work attitude, adoption of some solutions, methods of fulfilling the confronted tasks, identification of some issue outsourcing strategies, the maintenance of a health status and prolonged physical effort resistance, and of course the healthcare organisations need to have a very well defined management.

The hereby study proposes to assess the stress level and the underlining of certain significant aspects regarding the medical staff's activity, their psychology and work satisfaction. And also the adoption of some modern methods regarding the management in Romanian healthcare organisations.

KEYWORDS: *management, professional stress, occupational stress, health, regulation, selection, promotion, waging, performance*

JEL CLASSIFICATION: *I1, I13, I15*

1. INTRODUCTION

In the hereby work, the consequences of work stress over the staff and management of healthcare organisations were studied carefully and therefore some precise information was successfully obtained. The symptoms of occupational stress are easily underlined and observed, it manifesting through behaviours as employees confronting some difficulties at change accommodation which are imposable at the occupied workplace, dramatic drop in efficiency, performance, in other words it manifests a double action, both at the level of the person who receives the stressing situation and at the organisation level over which the existence of a stressful environment reverberates.

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The workplace requirements (work rhythm, activity volume, number of worked hours, etc.) may contribute to the creation of a stressful atmosphere and likewise to stressful reactions from the organism. The stressors effect, no matter their kind, is cumulative, with them affecting in time both the health of the individual and the well-functioning of the organisation's management.

The hereby study approaches the theoretical aspects regarding the specialty literature term acceptances, stress generating sources within an organisation, the classification of stress and a short analysis of the concept evolution at the European Union level.

Therewith, I hereby established a general presentation of 3 analysed institutions. Wishing to underline the organisational stress impact over the efficiency of the medical staff's activity, the hereby research presents a parallel approach (*the public healthcare environment vs. the private healthcare environment*).

2. IMPORTANT

In a world subjected to a permanent development, where the globalisation evolves in a dizzy rhythm, there is, inevitably, an experienced effect ever growing stronger by each company individual.

The phenomena have always existed, under different forms and circumstances, yet, with time, it has been manifested more and more enhanced, bearing today the radical name of "The Disease of the XXIst Century".

The healthcare system is a favourable field for employees due to it confronting the most of the time with the professional stress, more than any other fields, organisations. This is being said due to medical professional stress having an impact over the efficiency when performing the professional objectives and over the organisation's management, which can lead to the apparition of work dissatisfaction. Their profession is rightfully known as one of the most stressful occupations from this point of view.

Over time, studies were carried out regarding the impact of the professional stress over the mental health of the medical staff and over the efficiency in the performed activity, this being a debated subject in the international specialty literature.

The work treats an issue of maximum topicality and with multiple implications for human resources quality and their efficient management.

The general aim of the research is that of identifying the determined factors regarding the apparition of organisational stress level and regarding the factors which influence the professional life of employees from within the healthcare system and also the identification of their satisfaction level towards the professional life quality.

The hereby work aims to research the stress influence, as an organisational factor, over the capacity, efficiency and performance of the medical personnel: nurses, physicians and residential physicians from within the 3 analysed hospitals.

The increased fatigue, overstrain and wage dissatisfaction, blocking the human resources allocation together with the section necessities, insufficiency of material resources characterises the climate within our public healthcare system. The same situation is also unidentified within the private analysed hospital.

The results of the work confirm the existence of the relation between the quality of the professional life of employees within the system and the quality of medical services. Thus, direct relations were found both between the way in which the waging level influences the professional lives of the employees and their wish to migrate from the actual workplace, and also in the manner in which the work conditions affect the personal life and health status of the employees within the healthcare system.

The hereby work doesn't aim to remove the stress from organisations, but wishes to warn them, to underline the implication of stress in the professional activity of the medical personnel.

Nevertheless, if a certain reduced stress level will be reached within the Romanian healthcare organisations, as it would be normal and as it is happening in other developed European countries as in France, UK, Germany, Norway, Sweden, etc., this will be also felt in the well-functioning of the respective organisation's management.

The hereby study proposes itself to assess the stress level at the workplace, how much it influences the life of the individual, individually and socially, and also in what regards to the stress level perceived in relation with the social, demographic and economic characteristics and with the underlining of certain significant aspects towards the personnel activity, their psychology and medical staff work satisfaction.

The stress level perceived, has been measured using the method of basic investigative query, performed within the 3 hospitals from Bucharest (*The Clinical Emergency Hospital Sfântul Pantelimon, The Clinical Emergency Hospital Floreasca and The Hospital Sanador*). For the representation of the research, the investigation had as main subjects, the medical staff within the Obstetrics-Gynaecology and Obstetrics-Pathology Sections.

3. LITERATURE

In the last 50 years the workplaces and nature of companies was changed, with the occupational stress being an extra care both for employees and for organisations.

The occupational stress is one of the biggest problems which the "modern" companies are confronted and faced with; it is generated by the work environment, professional life, with the consequences being both over the professional activity and over the health of the ones who provide the respective work.

Mihai Golu classifies the psychical stress as ... "a state of straining, tension and discomfort determined by the negative significance affection types, by frustration or suppression of some motivation states, by the impossibility of outsourcing some issues" (Golu, 1981, p. 285).

Ioan-Bradul Iamandescu defines the psychic stress as being a syndrome constituted from the exacerbation, beyond the level of some psychiatric reactions and their associated somatic correlations, often underlined with a configuration of triggered factors which act intensely, suddenly persistent and sometimes having a symbolic "threatening" character. (Iamandescu, 1993, p.15).

The stress has been defined by **Beehr and Newman** as "a condition resulted from the interaction between people and their jobs and it is characterised by changes within people which are forced to deviate from the normal functioning". The stress represents an adaptation answer to the external situation, which is established in physiological, psychological and/or behavioural deviation of the members of a organisation (Caramete, 2002, p. 30).

The stress factors are those situations or events overstraining a person. Since, under concrete circumstances, practically any even may place a special strain over a person, the list of potential stress factors is infinite. (Popescu, 2010, p.173).

People are subjected to stress factors constantly, especially at the workplace, but also in the personal life. It is important to know the stress sources, how they interact and also the way in which the stressing effects are combined both at work and in the personal life. (Militaru, 2005, p.183).

The overstraining at the workplace, is representative for the people who deal with a stressing state, from reasons of working too much and having little time or not enough resources in order to keep up with such situations. When a manager requests the employee to deal with some problems, the one's duties, a stress sensation is generated for the respective person. (Militaru, 2005, p.183).

Work conditions. The employees may be exposed to improper or even dangerous work conditions. Although organisations and institutions have improved the working conditions over time, many of the workers performing in different fields of activity are facing heat, noise, cold, excessive pollution or work accidents.

The role ambiguity occurs when the job objectives or their performing method are not very clear. The lack of clear orientation may become stressful especially for the ones who hardly tolerate such state. (Militaru, 2005, p. 184).

The interpersonal relations from within the organisations. The groups have a huge impact over the behaviour of a person within an organisation. The individuals must have good working relations with their colleagues, subordinates and superiors. The relations and interactions with the others are crucial components which make part of an organisation's life and represents a powerful stress source. (Militaru, 2005, p.184).

One of the consequences caused by stress would be the drop in work performance which clearly represents an individual consequence; the individual performance is that which suffers the change. However, clearly the same case is related with the fact that the organisation has to face important consequences from a performance decrease caused by stress. (Popescu, 2010, p.180).

4. METHODS

The research work has as purpose the analysis of the stressing factors and their influence over medical frameworks within public vs. private hospitals. The case study performed in the research work is within the Gynaecology Section, which is divided in two, namely the Obstetrics-Gynaecology and Obstetrics-Pathology Sections. These sections were chosen, due to the fact that in the last years, more studies on this stress theme underlined a high level. From this reason the proper template, formed from physicians, residential physicians and nurses, has been chosen. Considering their working specific in the determination of stress factors important for the members of this objective, it is considered that the professional activity and the psychiatric comfort of employees can be optimised.

A query of 20 questions has been used in order to study the stress factors, with most of the questions being closed. This method was chosen after the results of a careful observation of the specified collective, the conditions and activities imposed at the workplace, with the observation developing on a period of 7 days. The observation was followed by informal discussions, which aimed towards the dissatisfaction, issues and difficulties faced by employees in their activities.

The questions from within the questionnaire obliges the subject/individual to choose between two answering possibilities (YES or NO), limiting the freedom of expression of the respective subject/individual but at the same time easing the collection of answers.

Considering the establishment of the query, the methods in which stress influences the personality, behaviour, health and work capacity of individuals, were also acknowledged. Therewith, the degree of employee satisfaction towards work needs to be found out along with the stress factors and the identification in perspective of the impact generated by the organisational stress over the migrating trend amongst the personnel.

The questionnaire was subjected to the attention of the employees, who were asked to express their degree of satisfaction/dissatisfaction in regard to certain aspects related to their professional activity, work conditions, family situation, their health state, etc. The completion of the questionnaire has been achieved individually, each employee was requested to read carefully each of the numbered affirmations and to answer by encircling one of the presented versions. A template questionnaire is presented in Appendix 5. The employees are ensured with the confidentiality of their answers.

5. STUDY

The study presented in this paperwork was performed in 2015. The methodology used for the collection of data / answers was a questionnaire given to the medical staff and the auxiliary personnel in three Romanian hospitals, namely: Sfântul Pantelimon Clinical Emergency Hospital, Floreasca Clinical Emergency Hospital and Sanador Hospital. All 3 hospitals analysed are well-established facilities in training and promoting of specialists of high professional standing, which rely on recognized professional criteria of prophylaxis, diagnostic, treatment and management.

Currently, based on the job title list, **5355 employees** carry on their activity within the three hospitals. The structure of personnel employed may be detailed based on more criteria in the following way:

Table no. 1 – The structure of human resources based on the level of studies:

Level of studies	Higher education	Short term higher education	Secondary education	Post-secondary education	Total
No. of persons – Sfântul Pantelimon	863	6	270	414	1553
No. of persons – Floreasca	1708	4	398	964	3074
No. of persons – Sanador	268	10	106	344	728
Total	2839	20	774	1722	5355

Source: (Database of hospitals 2015)

The weight of higher education personnel is the heaviest in the structure of 3 hospitals, more precisely about 49%, the post-secondary education personnel represents approximately 35%, in this category being included junior nurses and a great part of the auxiliary personnel of hospitals, the secondary education personnel represents approximately 15% and, last but not least, the category of personnel with the lightest weight is represented by short term higher education personnel – 1%.

From the vocational training point of view, it may be observed that in the case of *Sfântul Pantelimon and Floreasca* hospitals approximately half of the total personnel employed (both hospitals having 56%) is represented by higher education personnel, that may lead to a higher quality of vocational education and activity carried on by the personnel concerned.

Table no. 2 – The structure of human resources based on the category of personnel:

Category of personnel	Medical personnel	Non-medical personnel	Total
No. of persons – Sfântul Pantelimon	1461	92	1553
No. of persons – Floreasca	2811	263	3074
No. of persons – Sanador	658	7	728
Total	4930	425	5355

Source: (Database of hospitals 2015)

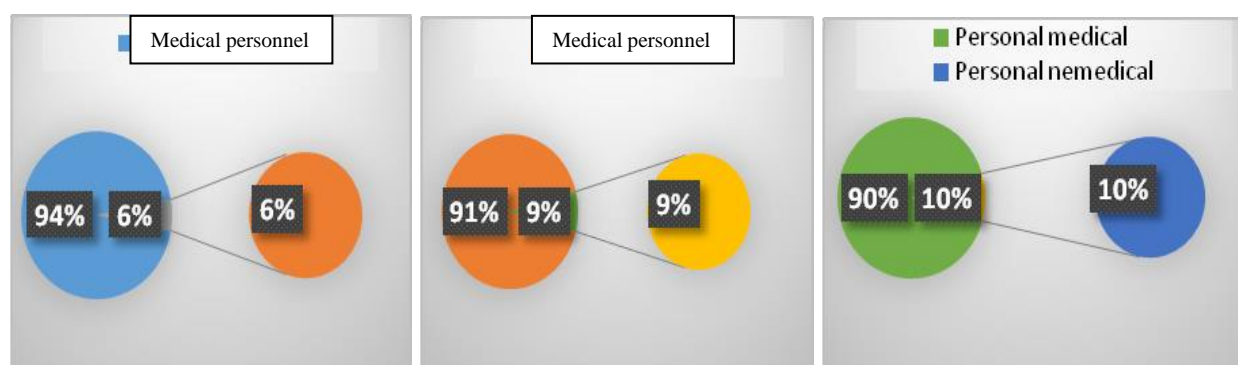


Figure 1, 2, 3. Category of personnel “Sf. Pantelimon Hospital”-“Floreasca Hospital”-“Sanador Hospital”

Source: (Database of hospitals 2015)

Medical personnel
Non-medical personnel

Based on the category of personnel, considering the field of activity, 91,66% of all personnel working in the three hospitals is medical personnel, in this category being included doctors, residents and auxiliary medical personnel, and the weight of non-medical personnel is 8.33%. For all 3 hospitals analysed, the weight of medical personnel exceeds 90% of all employees.

Table 3. The structure of human resources based on sex:

„ SF. PANTELIMON HOSPITAL”		
Category of personnel	Number of employees	Weight
Men	356	23 %
Women	1197	77%
TOTAL	1553	100%
“FLOREASCA HOSPITAL		
Category of persone	Number of employees	Weight
Men	736	24 %
Women	2338	76%
TOTAL	3074	100%
“SANADOR HOSPITAL”		
Category of personnel	Number of employees	Weight
Men	206	28 %
Women	522	72%
TOTAL	728	100%

Source: (Database of hospitals 2015)

Of the total 5355 employees existing within the 3 hospitals, over 72% are women and the difference is represented by men. In other words, more than three quarters of employees are women. This finding is valid for each facility analysed, the weight of women in the total employees being of approximately 70%.

Table 4. The structure of human resources based on age

Age	0-24 years old	25-34 years old	35-44 years old	45-54 years old	55-64 years old	Over 64 years old	Total
No. of persons –Sf. Pantelimon Hospita	38	630	547	226	107	5	1553
No. of persons – Hospital Floreasca	48	1594	933	344	149	6	3074
No. of persons – Hospital Sanador	23	245	206	143	106	5	728
Total	109	2469	1686	713	362	16	5355

Source: (Database of hospitals 2015)

The age group mostly encountered within employees is comprised between 25-34 years old (about 50%), a thing that is easy to explain because all residents of public hospitals are included in this age group. At the opposite end, less persons are those over 64 years old. Currently, consultants, senior consultants and one C.M.F. professor with the age above this limit can be found in each hospital. Of the total of **286** persons interviewed, the mostly encountered age average is comprised between 46-55 years old (**33%**), and (**31%**) are 36-45 years old, the medical personnel with the age between 26-35 years old (**26%**) is mostly represented by resident doctors, between 0-25 years old (**7%**) and over 65 years old (**3%**).

6. RESULTS

Based on the assessment of the questionnaires' results, it turns out that **65%** of the medical personnel is represented by women and **35%** by men. Women have a quite high percentage compared to men.

Of the total of respondents interviewed, it turns out that **65,66%** of them are married and **the rest of 34,33%** are not married. The majority of unmarried employees are between 20-35 years old, mostly are newly graduates, currently resident doctors. Exceptions that persons over 40 years old to be unmarried still exist.

Within the 3 hospitals, it turns out that **74,33% are doctors, 16,66% resident doctors** and **9% nurses**. As it may be observed in the above graphs, the heaviest weight of 95% doctors is represented by Sanador hospital, while Sf. Pantelimon and Floreasca hospitals have in "custody" resident doctors, but also have a relatively good percentage of nurses in comparison with Sanador private hospital.

The question "Do you think your employment is safe?" refers to the safety of the employment. **58% of the respondents say that they have a feeling of safety in connection with the position they are occupying**, but this time the percentage is superior for the public hospitals. We can deduce that the public hospitals had a higher percent not only because they are financed by the state budget and, therefore, they enter into the category of public institutions, but also because that 68% of employees have an accumulated service of over 10 years and those that fulfil this condition have a permanent employment within hospitals.

59% of the respondents stated that they are not happy with their own career within the hospital. It stands to reason the proportion of those that answered like this in the case of **Sf. Pantelimon** and **Floreasca** hospitals because the majority are included in the category of resident doctors, which consider that the development of the doctor profession career is a weakness because

a very long time is necessary in order to reach the climax in the career compared to other professions. In return, in the case of private hospitals, the situation is opposite, especially if we refer to **Sanador** hospital, where the personnel is periodically assisted in the professional growth by attending training courses in Italy, within the hospitals of Sanador Group. Also, they have the possibility to develop their own career in these hospitals, this representing the reason for which **64%** of the total of personnel interviewed within the gynaecology department have a positive mention on the professional status.

The majority of members of medical community show certain symptoms that may obstruct their medical activity, 66% of those claiming that health issues are affecting their professional duties (tasks). We observe that the personnel analysed claims that these health issues influence their professional efficiency, mainly for Sf. Pantelimon hospital (75%) and Floreasca hospital (69%).

Also, **57% of the total of persons interviewed purport that they have frequently signs of accentuated tiredness and partial losses of the working capacity**, issues due, first of all, to working conditions. We find the personnel of **Sf. Pantelimon** hospital as being the eloquent example for this situation, because over **68%** of employees show these negative symptoms that may reflect on the efficiency of the activity carried on. At the same time, as results from the analysis, the less affected employees by the working conditions are those of **Sanador hospital (47%)**.

A primary factor in the choices that employees within the hospital make in connection with their own employment is represented by the salary. Being asked if the income derived from the medical activity is enough in order to provide the family existence, **56% of the sample members claim that the salary is insufficient for providing the existence of their family**. At this question, the respondents' answers situated to totally opposite ends. More precisely, if within the private hospital (**Sanador – 71%**) the personnel considers that the income obtained is a motivating one, in the case of public hospitals (**Sf. Pantelimon – 23% and Floreasca – 38%**), the situation is totally different, more than half of the total employees not considering that the income obtained may help them to cover their daily life.

Following the discussions heard with the answerers, with them being physicians, residential physician, nurses, the stress has been deduced as coming mainly due to the work conditions, 81% from them confirming the work related stress affection. Due to the fact that they work very much, when they are in reserve or overtime, the developed conditions are unsatisfactory, preponderantly in the public system. All these things are generative stress conditions.

7. CONCLUSIONS

Within the hereby work, issues were underlined as occurring due to the organisational stress at which the medical framework is subjected and the deficiencies faced with, underlining the effects of stress over the health state of the personnel, over the professional activities and also over the personal life of employees.

The objective of the work was to observe what stress generating sources within hospital are in order to generate the satisfaction and accomplishment of medical staff, improvement of professional activity quality and also to find out the harmful effects of stress.

The prolonged stress may cause strokes, heart diseases, hypertension, cancer, allergies, asthma, ulcer, migraines, rheumatoid arthritis, etc. And, the chronic stress leads to losses in energy, affects clear thinking, drops the performance at the workplace, erodes the quality of life, etc. All these negative influences of the professional stress regarding the health state of employees have also been identified in the performed work, for each hospital.

Due to the health problems caused by stress, the professional efficiency may be affected and sometimes stressed people chose to retreat. In the case of physicians, many bury themselves in their work, in study and avoid the social life, yet this isolation worsens their state. In order to fight stress,

people shouldn't avoid social life, they mustn't stay isolated and must come out of that "capsule" and to interact with the people around them.

A powerful stress generating source is also the level of wages which brings no satisfaction or low percentage in satisfaction in what regards to the expectation of employees, with many of them stating that the wage is not enough to maintain themselves and their families. With a very high responsibility, in what regards to the work practiced, the reduced number of physicians and nurses reported to the number of patients represents another stress factor, due to the fact that they have an even greater number of patients under care in comparison with the available time.

The physicians consider that they deserve a better appreciation of their effort, because the practiced work is not simple, with the risks being at every step of the way, they must be up to date with new standards and a rapid development of their career would be ideal. The same situation might turn in any moment into a stress factor which could limit the activity to those who perform it in a hospital, due to non-existence in frequent promotions therefore decreasing their motivation.

An important conclusion of the research is shown from the two public hospitals (**Sf. Pantelimon and Floreasca**) and that of personnel lack. This lack of personnel comes from their migration to other European countries and to private hospitals from our countries. The migration reason is simple; better work conditions and a more attractive salary/wage, understating more attractive. The migration trend of the high medical staff and not only, is still maintained in public hospitals, with many of the employees wishing to leave the country, others wanting to go to the private sectors. What is more worrying is the fact that hospital leaves are foreseen to be continued in the years to come.

This migration of the personnel determines the extra hours for the ones left in the hospital, who sometimes need to fulfil tasks that are out of their competence, and these things having severe consequences over the development under good conditions of the respective activity of that personnel.

The job of the physician presumes a high emotional consumption, which, as physician, is inflammatory mainly in their family life. Due to the large amount of time spent in the hospital, many physicians are determined to grow apart their families and friends and many of them cannot actually form their own family. In most cases they do not succeed to detach from their work problems not even when they are with the family and they load their relatives with the work related problems, with this being a very present source of conflicts. In the case of physicians with children, most of the time they do not succeed to grant them the necessary time, neglecting their education due to an overloaded schedule from within the hospital.

As mentioned above, the responsibility of employees from within the healthcare system is very large, powerfully generated by stress, and the level of wages never bringing any satisfaction or bringing a low satisfaction regarding their expectations. As we all know, a large part of the employees is not satisfied with the current wages in report with the provided work and the workplace stress.

In what regards to the last two questions, they have a significant role in the achievement of this case study, firstly stating that the question 19 enhances the way in which certain factors, as well as health problems, personal problems (emotional), administrative changes, the microclimate, the collective, the civil state, influences the medical professional activity and more accurate its efficiency. And by question 20, the aim was to observe the needs and requirements of the ones questioned, which can lead to an improvement in the professional life quality.

Therefore, the health problems are situated in the highest level of importance over the medical activity, at a minor one percentage difference situating the administrative changes, for 16,3% of the collective answerers, followed by the microclimate 16%, under the opinion of 13,66% of the members with personal problems and 5,66% with the civil state. These are also verified from previous answered questions, because the health problems may harden the performance under good conditions.

8. REFERENCES

- Caramete, C. (2002). *Studiu privind stresul organizational și climatul muncii*. Bucharest, ASE Press.
- Golu, M. (1981). *Dicționar de psihologie socială*. Bucharest, Enciclopedică Press.
- Iamandescu, I.B. (2002). *Stresul psihic: din perspectiva psihologică și psihosomatică*. Bucharest, Infomedica Press.
- Lefter, V., Deaconu, A., Manolescu, A., (editors), Moldovan-Scholz, M., Marinas, C., Nica, E., Marin, I., Puia, R., (2007). *Human Resource Management*. Bucharest, Edition Economic.
- Militaru, G. (2005), *Comportament organizational*. Bucharest, Economic Press.
- Popescu, D. (2010), *Comportament organizational*. Bucharest, ASE Press.
- European Agency for Safety and Health at Work, Retrieved June 02, 2015 <https://osha.europa.eu/fop/romania/ro/systems>
- Emergency Hospital Sfântul Pantelimon Bucharest, Retrieved May 25, 2016, from www.urgentapantelimon.ro
- Emergency Hospital Floreasca Bucharest, Retrieved May 25, 2016, from www.scub.ro
- Emergency Hospital Sanador Bucharest, Retrieved May 25, 2016 www.sanador.ro.
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