

Evaluate the factors affecting the job satisfaction of the Ayurvedic Medical Officers, Jaffna District.

Sarvananthan T*

*Provincial Commissioner, Provincial Department of Indigenous Medicine, Northern Province, Jaffna.

*Correspondence and offprint requests to: Sarvananthan T
© 2024 BioSci Group, Reverse Publishing Ltd, India.

ABSTRACT

Patients and Ayurvedic medical officers (AMO) are important for the Ayurvedic institution. Because both of these parties equally contribute for the success or the survival of Ayurvedic sector and institutions in the global health care services. Researchers have found that there is an impact of job satisfaction of the AMO on quality services of Ayurvedic institutions, which ultimately lead to patient satisfaction. This is a survey and the main research problem is, how the job satisfaction affects to the quality of service. Objectives of the study are to identify the relationship between job satisfaction and quality of services of AMOs. All the Government AMOs and the daily average patients in all Ayurvedic institution in Jaffna district. Among daily average patients in each institution, 10 patients for each AMOs were selected to identify the relationship, researcher gathered data from AMOs and patients with various aspects through questionnaires. Statistical package for social science (SPSS) version was used for the data analysis. As well as correction technique to determine the relationship between the main variables such as dependent variable - quality service, and independent variables such as pay, work itself, promotion, supervision, work group and working condition. According to this analysis, pay, work itself, promotion were positively affected while supervision, work group and working condition were negatively affected job satisfaction and quality service of AMOs. The study concludes that, Jaffna district Ayurvedic institutions are providing poor facilities for AMOs. It is recommended that the hospital directors need to ensure job satisfaction of the AMOs in order to provide better quality services to the patients.

KEYWORDS

Job satisfaction, Quality service, Ayurvedic Institution

Received: Aug 2024. Revised: Oct 2024. Accepted: Nov 2024
© The Author(s) 2024. Published by BioSci Group Publishing Ltd, India.

This is an Open Access article distributed under the terms of the Creative Commons Attribution Non-Commercial License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits non-commercial re-use, distribution, and reproduction in any medium, provided the original work is properly cited.

For commercial re-use, please contact journals. editorjrbms@biosci.in

To Cite: Sarvananthan T, Evaluate the factors affecting the job satisfaction of the Ayurvedic Medical Officer: Jaffna District. *J Res Biomed Sci*, 6 (4), 2024, 381-388.

INTRODUCTION

Human resources should consider a significant organizational asset. Human Resources management (HRM) is a comprehensive, integrated system / process for effectively and efficiently managing work force. The generic purpose of HRM is to generate and retain an appropriate and contented work force who gives the maximum individual contribution to effectiveness of work in the hospital. It exists to maintain and improve the productive contribution of HR in hospitals.

The hospital work and the design of jobs can have a significant effect on staff. Attention needs to be given to the quality of work life. Medical officers in Ayurvedic institutions need to understand how best they can make the work more satisfying. The biggest management challenge faced today is how to engage the doctors towards better quality service. In order to increase patient satisfaction Human of a hospital is considered an important factor. Hospital administrations wish to keep well trained and effective workforce. Ayurvedic medical officers who are satisfied with their job, may exert increased effort to raise/improve their performance towards the patients.

Nowadays, in medical services, competition is very high. Therefore, every hospital has to compete with other. In order to achieve a competitive advantage, a hospital has to retain/maintain a satisfied and committed work force. There is a need for the hospital to keep their doctors satisfied to achieve its objectives. In other words, a hospital has to keep a very committed workforce to achieve its ultimate goal. To make the best use of personnel as a valuable resource of the hospital, attention must be given to the relationship among the staff. Attention also need to be given to the quality of work environment.

Every Ayurvedic Hospital has to reach its objective subject to limited resources. Human is an important for an Ayurvedic hospital, because human influences the efficiency and

effectiveness of any Ayurvedic institution. Therefore, the hospital wants to keep an effective workforce. It will lead to significant improvement in quality of service. Ayurvedic hospitals are service-oriented institutions. Therefore, the hospital wants to keep an effective work force. It will lead to significant improvement in quality of service. Ayurvedic hospitals are service-oriented institutions. Every hospital should try to increase their staffs' Job satisfaction. It is on this basis that the researcher selected this area for the research study.

1.1 Service Quality

Goods and services are produced with the intention of satisfying a certain need or needs. The customer of such production may or may not be satisfied about the product on how far it has served the need, If the product has created a higher degree of satisfaction, it can be said that the product is of higher quality. The quality is referred to be the degree of satisfaction provided. However quality cannot be defined in such a simple way, because quality is defined in different ways by persons looking from different perspectives.

The American National Standard Institute has defined the quality as the totality of features characteristics of a product or service that bears on its ability to satisfy given needs. There are definitions of quality derived from authors. According to Juran (1988) quality is the fitness for intended use basically says that quality is meeting or exceeding customer expectations.

According to Parasuraman *et al.*, (1988), Service quality is the degree of discrepancy between customers' normative expectations for the service and their perceptions of the service performance. Service quality is the customers' overall impression of the relative inferiority superiority of the organization and its services (Bitner and Hubbert, 1994). Service quality is "the degree of discrepancy between customer's normative expectations for the service and their perceptions of the service performance Parasuraman *et*

al.1988). According to Juran (1999) quality of a service is fitness of that service for use. Service quality is considered a critical measure of organizational performance Smity (2000).

Definition of service quality differs from that of the traditional approach, which locates service quality perception within the contrast between consumer expectation and actual service performance (Gronroos, 1984; Lewis & Booms, 1983; Parasuraman, Zeithaml, & Berry, 1985; Parasuraman, Zeithaml, & Berry, 1990). Parasuraman, Zeithaml, and Berry (1985) viewed quality as the degree and direction of discrepancy between customers' service perception and expectations. Gronroos (1982) identified two service quality dimensions namely the functional aspect and the technical aspect. The functional aspect concerns how service is provided while the technical aspect concerns what service is provided. What is received by the customer as the outcome of the process in which the resources are used?, That is the technical or outcome quality of the process.

2. Methodology

2.1 Research Approach

The research study will be carried out as a survey study to find out the factors affecting the job satisfaction of the Ayurvedic Medical Officers in Jaffna district.

2.2 Population Sample and Sample Selection Procedure

Population

To find out the quality of services, the target population is all the government Ayurvedic Medical Officers and the daily average attendance of patients in all Ayurvedic institutions in Jaffna district.

Sample Frame

Among the daily average attendance of patients in each institution. The researcher selected 10 patients for each Ayurvedic Medical Officer. But altogether 42 Ayurvedic

institutions are in the Jaffna district and 59 Ayurvedic Medical Officers are working in them. So The researcher selected 590 Patients from all the Ayurvedic institutions in order to decide the service quality of the Ayurvedic Medical Officers.

The researcher has assumed that ten (10) patients represent the whole Ayurvedic population for each doctor in their respective Ayurvedic institutions. The researcher selected the patients who usually visited the particular Doctor for the second time or more times. The researcher had been applying non probability sampling techniques for this research.

The researcher considers the inclusion& exclusion criteria.

Inclusion Criteria

The researcher has selected only Government Ayurvedic Medical Officers and in respect of patients was selected among those who are above fifteen years old in the Out Patient Department (O.P.D) at the Ayurvedic Institutions in Jaffna District.

Exclusion Criteria

The researcher has omitted the patients who were unable to speak or extend cooperation in collecting the data in the Ayurvedic Institutions.

2.3 Data

Researcher has collected both primary & secondary data for the study of research.

Primary data

Primary data were collected through questionnaires method. The researcher includes (in this dissertation as a primary data gathering the information though issuing) two different questionnaires, i.e. issued to the Ayurvedic Medical officers and to the selected patients, and the questionnaires filled by the interviewer. Five point's likers' scales were used to collect the data from questionnaire survey. The scales are

strongly agree (5), agree (4), neither agree nor disagree (3), disagree (2) and strongly disagree (1).

Secondary data

Secondary data were taken from reports, hand books, circulars, magazines, journals, annual reports, past research data and specific web pages.

2.4 Questionnaire

A questionnaire which included questions on perceptions and was presented to the all Ayurvedic Medical Officers and to the selected patients, and their answers were filled by the interviewer. Here researcher asked questions in Tamil medium in the selected patients. This questionnaire consist of three sections. The first section of the questionnaire is designed to collect the personal data of the respondent. The second section of the questionnaires was designed to identify job related factors. The third section of the questionnaire was designed in order to obtain data from the patients in relation to service quality to conduct effective research; fifty-nine Ayurvedic Medical Officers were selected from the Jaffna district. Data have been categorized according to various criteria in accordance with the variables mentioned in the conceptual model. Data were analyzed by using statistical package for social science (SPSS).

3. Results and Discussion

3.1 Descriptive Statistical analysis

Table 3.1 Work Place According to the Distance

Working place	Frequency	Percentage
Short distance	9	15.3
Long distance	50	84.7
Total	59	100

Source: Survey Data, 2013

According to the table 3.5, 09 Ayurvedic Medical Officers (15.3 percent) are situated in short distance. While another 50

Ayurvedic Medical Officers (84.7 percent) are situated in long distance. The health service coverage of Sri Lanka is with in 5kms. According to that, the researcher decided with in 5kms is the short distance. More than 5kms is long distance. So according to my data Ayurvedic coverage of Jaffna District is below the stranded level.

Table 3.2 Designation of the Doctors

Designation	Frequency	Percentage
MOIC	24	40.7
MO	35	59.3
Total	59	100

Source: Survey Data, 2013

According to the table 3.6, 24 Ayurvedic Medical Officers (40.7 percent) are MOICs. While another 35 Ayurvedic Medical Officers (59.3 percent) are MOs. MOIC is in-charge of the hospital. MO is doctor who is working in the hospital. Further MOIC is Top level manager. MO is middle level manager. MOIC is high status, high responsible person and the senior man and he has service experience when we compare with MO.

Table 3.3 Educational Qualification

Highest education	Frequency	Percentage
Bachelor	55	93.2
Master	4	6.8
Total	59	100

Source: Survey Data, 2013

According to the table 3.7, 55 Ayurvedic Medical Officers (93.2 percent) are bachelors. While another 4 Ayurvedic Medical Officers (6.8percent) are master degree holders. Bachelors who are pass out fromn Sri Lanka Ayurvedic Institutions such as Colombo and Jaffina. Bachelor course duration is 5yrs. Master of special medicine in Gunapadam. Duration is 2yrs.

Msc in Bio statistics – duration is 2yrs.

M.Phil - in Siddha Medicine - duration is 2yrs.

Table 3.4 Period of Service

Period of service(yrs)	Frequency	Percent
<5	1	27.1
5-9	35	59.3
10-15	8	13.6
Total	59	100

Source: Survey Data, 2013

According to the table 3.8, 16 Ayurvedic Medical Officers (27.1 percent) are below 05 years' service, while another 35 Ayurvedic Medical Officers (0.3 percent) are 05-09 years services in addition to that 08 Ayurvedic Medical Officers (13.6 percent) are 10-15 years services. When period of service increasing doctors can get higher post of Administration. For example, the doctor who has 3yrs service can get Central Ayurvedic Dispensary. The doctor who has 5yrs service can get Rural Ayurvedic Hospital. The doctor who has 12yrs service can get District Ayurvedic Hospital.

Table 3.5 Monthly Incomes

Monthly income(Rs)	Frequency	Percentage
<30,000	17	28.8
31,000 – 60,000	38	64.5
>60,000	4	6.7
Total	59	100

Source: Survey Data, 2013

According to the table 3.9, 17 Ayurvedic Medical Officers (28.8 percent) are below Rs.30, 000 family monthly incomes, 38 Ayurvedic Medical Officers (64.5percent) are Rs.31, 000-60,000family monthly income, and 04 Ayurvedic Medical Officers (6.7 percent) are above Rs.61, 000 family monthly incomes.

Further According to the table 4.8 and 4.9 (cross tabulation). Less period of service doctors are get low level monthly income. Middle period of service doctors are get middle level monthly income. More period of service doctors are get high level monthly income.

Survey Data, 2013 revealed that the quality service of Ayurvedic institution in Jaffna district has a mean value of 2.93 out of five points. This explains that the average quality service from the Ayurvedic institutions in Jaffna district is generally at higher level. Further standard deviation of the quality services out of five points is equal to 0.93. In addition, the lowest scale value for the quality services is 2.47 whilst the highest value of the quality services is 3.41.

Research Findings and Interpret the Data

When consider about the correlation analysis between dependent variable (Y= Quality Service) and independent variables (X= Factors affecting for the job satisfaction the factors X, Pay, X - the work itself, X, - Promotion are positively correlated. The factors X4- Supervision, Xs Work group are Xo= working conditions are negatively correlated with the quality of services (dependent variable).

The correlation analysis results communicate valuable insights and practical ideas to the Ayurvedic hospital directors. It says that Ayurvedic institutions should improve the factors that affect for the satisfaction of the Ayurvedic medical officers to give quality services. For example, there is a positive correlation between pay and the quality of service. Therefore, the hospital directors can take some actions like undertaking more training and development activities for the staff. Introducing diverse methods for employee motivation, recruiting high skilled and educated employees, then the quality of service will be increased and vice versa. Therefore, the improvement of one related factor (e.g. pay) simultaneously improves the positive satisfaction of the patients related to the other related factor (e.g. quality of service) vice versa.

Pay

Normally pay is not motivate for professional worker but in my study pay is average the satisfaction of the Ayurvedic medical officers in level of determinant factor, For Jaffna district. To select the correlation analysis between dependent variable (quality service) and the pay are positively correlated.

Result highlighted that salary and other payments are highly influential on determine job satisfaction of the Ayurvedic medical officers and it will help to provide a better quality service for the poor and innocent patients. Further, there should be viable programs to increase the pay system of the Aurvedic medical officers like western medical officers.

However that during the questionnaire survey most of the Ayurvedic Medical Officers highlighted that they are getting poor payment facilities. Few Ayurvedic Medical Officers highlighted that they are average payment level. A few Ayurvedic Medical Officers are said that their payment system is correct. So according to the factor of pay Ayurvedic Medical Officers are commonly disagree about their payment system this will lead to poor job satisfaction to them. In this connection Jaffna district Ayurvedic hospital directors have taken necessary actions to improve the Ayurvedic medical Officers payment system such as holiday payment, overtime for doctors and other suitable allowances to increase their Job satisfaction to provide quality services.

The work itself

The correlation anal ysis between dependent variable (quality service) and the work itself are very positively correlated in analyses. The analysis results highlighted that quality of service has poor influences for the work itself (but very poor relationship) which leads the medical officers towards satisfaction levels. Normally the work itself improves quality.

However that during the questionnaire survey most of the Ayurvedic Medical Officers highlighted that they are less

work itself. For example few Ayurvedic Medical Officers have poor duty minded manner. So according to the factor of work itself Ayurvedic Medical Officers are commonly agree about their work itself system. It is gave more than stranded level of quality service.

Therefore, the Ayurvedic hospital directors have to take necessary actions to improve the relevant facilities and introduce more work itself system to further development. For example hospital directors arranged training programme for Ayurvedic Medical Officers to do their work in duty minded manner.

Promotion

Promotion is also a major determinant for the job satisfaction of the Ayurvedic medical officers. The results highlighted that quality of the service have a positive influence for the level of promotion scheme influence quality (A factor that influence for the job satisfaction).

However that during the questionnaire survey most of the Ayurvedic Medical Officers highlighted that there is inadequate promotion in their Ayurvedic institutions. And also very difficult to get promotions based on several reasons. However, there are a very few Ayurvedic Medical Officers are satisfied about their promotion. Commonly Ayurvedic Medical Officers are suffering from promotion system. It will lead poor job satisfaction to them. It should indicate that Ayurvedic hospital directors must take necessary steps to give proper promotion in future. It will lead to better quality services for the patient.

Supervision

The correlation analysis between dependent variable (quality service supervision are negatively correlated in analyses. The analysis result highlighted. Quality services have rejection impact. During the questionnaire survey most of the Ayurvedic Medical Officers highly that they are facing too much unfriendly supervision in their Ayurvedic institutions.

A few Ayurvedic Medical Officers highlighted that they are under normal supervision. Commonly most of the Ayurvedic Medical Officers did not like rude and bureaucratic supervision. So they feel poor satisfaction about their job and which affect for their service quality.

Work Group

The correlation analysis between dependent variable (quality service), and work groups negatively correlated. During the questionnaire survey that few Ayurvedic Medical Officers are highlighted that, they do not receive much support from other work groups and there exist more problematic relationship. Most of the Ayurvedic Medical Officers are highlighted that collaborative work group is necessary to give better quality service for the poor patients who come all the way from their home spending money time and efforts. Therefore, the Ayurvedic hospital directors have to take necessary actions to improve group works and team works in respective Ayurvedic institutions to improve their work efficiency and performance. According to my result study of work group is low level so this is around less than average level.

Working Condition

In correlation analysis between dependent variables (quality service), and working condition are negatively correlated. Working condition result highlighted that quality of the service have a negative impact on the Ayurvedic Medical Officers.

During the questionnaire survey that most of the Ayurvedic Medical Officers are highlighted that their working conditions are poor. In their Ayurvedic institutions few Ayurvedic Medical Officers have highlighted that they are working standard, working condition. A few of them highlighted that their working condition is good. These types of working condition also affect the Ayurvedic Medical Officers job satisfaction.

Therefore, the directors of Ayurvedic institution have to take necessary actions to improve the relevant facilities and introduce good working system in their hospital. It will indirectly help Ayurvedic Medical Officers to provide better quality services.

The overall level of job satisfaction as well as quality service seems not enough for Jaffna district Ayurvedic institutions, but they want to further improve it, in order to obtain maximum output from Ayurvedic Medical Officers. This leads to give better quality service to the patients.

During the questionnaire survey most of the Jaffna district patients have highlighted that they are suffering from poor special clinic services, such as Ayurvedic medicine, poor laboratory facilities etc. this statement also indicate Ayurvedic Medical Officers are offering poor quality services to the patients.

4. Conclusion

The objective of this section is to present the conclusions and recommendation based on the analysis and findings obtained from the previous chapters, and to provide researchers' suggestions for further research. The results indicate there are three factors (pay, work itself, promotion) are weak positive relationships and other three factors (supervision, work group, working condition) are weak negative relationships between job satisfaction and quality service. The quality service that means if Ayurvedic Medical Officers derived through job satisfaction. Satisfied about their OPD, Ward, Clinic treatment they feel good satisfaction. This will provide good quality service.

References

1. Arnold, HJ. & Feldman. D.C. (1982). Handbook of industrial and Organizational Psychology, A multivariate analysis of the (Ed.).
2. Arnold, Hugh. J. and Feldman, Daniel, C. (1986). Organizational Behavior, 4th edition, MC Graw Hill Inc.

3. Bitner, M.J. (1990). Evaluating service Encounters the Effect of physical surrounding Journal of Marketing, Vol 54,
4. Clerk, M. (2005). Society for Human resource Management Employees, HR magazine.
5. Charles, M. Futrell., (1977). The Impact of Manager's Job Characteristic and Performance on Satisfaction Involvement, and intrinsic Motivation, Journal of Management, Volume 3, No I.
6. Christopher, L. (2001) services marketing, 4th edition, New Delhi: Pearson education Inc.
7. Dessler, Gary. (2001). Human resource management, 7th edition, New Jersey prentice hall inc.
8. Dessler, G. (2003). Human Resource Management, 9th Edition, Pearson education, inc. Delhi, India.
9. David, B. Putman., (2002). Job Satisfaction and Performance, The Journal of Defense software Engineering, (U.S. Air Force).
10. Fred Luthans, (1990). Organizational Behavior, 5th edition.
11. Fred Luthans, (2002). Organizational Behavior, 9th edition, McGraw-Hill Irwin.
12. Gronroos, C. (1984). A service quality model and its marketing implications, European Journal of marketing, Vol 18 No 4, 36-45.
13. Ing-San Hwang, Der-Jang Chi. (2005). Relationship among Internal Marketing, Employee Job Satisfaction and International Hotel Performance, International Journal of Management, Vol .22 Xo. 2. 285- 291.
14. Jerald Greenberg, Robert A. Baron. (2006), Behavior in organization, 8th edition, India.
15. Koslowsky, M., Kluger, A., & Reich, M., (1995). Commuting Stress, Causes, Effects, and Methods of Coping, Plenum, New York.
16. Luthans, F. (2000). Organization Behaviour, 7th edition.
17. Locke, E.A. (1976). Nature and causes of job satisfaction, In M.D. Dunnette (Ed), Handbook of Industrial and Organizational Psychology, Chicago: Rand McNally.
18. Mullins, L. J., (1996). Management and organizational Behaviour, 4th edition, (Great Britain)
19. Ministry of Health, (2002). Annual Health Bulletin, Colombo.
20. Ministry of Health, (2007-2016). Health Master Plan, Colombo.
21. Parasuraman, A., Zeithaml, V.A., Berry L.L., (1988). SERVQUAL a multiple item scale for measuring consumer perceptions of service quality, Journal of marketing.
22. Parasuraman, A., Zeithaml, V.A., Berry L.L., (1985). A conceptual model of service quality and its implications for future research, Journal of marketing, Vol 49.
23. Paul. Sweeney. Dean. B. Mc, Farlin., (2001). Organizational Behavior, solutions for management.
24. Ronald, T.R., and Anthony, J.Z., (1999). Services Marketing, Bangalore, and eastern Press.
25. Robbins, P.S., and Decenzo, D.A., (1994). Personnel/Human resource management, 3^d Edition, Prentice Hall of India, New Delhi.
26. Robbins, S.P., and Coulter, M., (2005). Management, 8th edition, India.
27. Stephen, P. Robinson., (2003). Organizational Behavior, 10th Edition, Prentice hall of India, New Delhi.
28. Stephen, P. Robbins, (1999). Essential of Organizational Behavior, 7th edition, India.
29. Susan, J. Linz., (2005-2006). Factors Influencing Employee Performance, State University Armenia.
30. Taylor, S.A. and Baker, T. L., (1994). A.N assessment of the relationship between service quality and customer satisfaction, purchase intentions journal of relating.