

Cross-Sectional Study to Assess the Levels of Motivation
Among Nursing Staff at Maharaja Yashwantrao Hospital :
A Tertiary Level Government Hospital of Central India

By

Soumya Vyas

*Dissertation submitted for the partial fulfillment of the
MBA Hospital and Health Management*

Academic year, 2014-2016



The IIHMR University, Jaipur

1, Prabhu Dayal Marg, Sanganer Airport
Jaipur-302029, Rajasthan
Ph: 0141 3924700, Fax: 3924738
Website: www.iihmr.edu.in

Dissertation

At

Maharaja Yashwantrao Hospital, Indore

**A CROSS- SECTIONAL STUDY TO ASSESS THE LEVELS OF
MOTIVATION AMONG NURSING STAFF AT
MAHARAJA YASHWANTRAO HOSPITAL,
A TERTIARY LEVEL GOVERNMENT HOSPITAL OF CENTRAL INDIA**

By

Soumya Vyas

Under the guidance of

Dr. Nutan P. Jain

MBA Hospital and Health Management

2014-2016



The IIHMR University, Jaipur

THE IIHMR UNIVERSITY, JAIPUR

TO WHOMSOEVER MAY CONCERN

This is to certify that Soumya Vyas student of MBA Hospital and Health Management (PGDHM) from The IIHMR University, Jaipur has undergone internship training at Madhya Pradesh Voluntary Health Association, Indore and carried out dissertation study at Maharaja Yashwantrao Hospital, Indore from March, 2016 to May, 2016.

The Candidate has successfully carried out the study designated to her and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

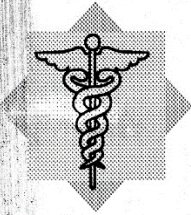
I wish her all success in all his future endeavors.



Dean, Academics and Student Affairs
The IIHMR University, Jaipur



Professor
The IIHMR University, Jaipur



Phone:- 0731-2528650

E-mail:- chintanmani_chauhan@rediffmail.com

GOVT. COLLEGE OF NURSING

C.R.P. Lines, INDORE - 452 001 (M.P.)

Affiliated with Devi Ahilya Vishwa Vidhyalaya, Indore

Recognized - 1961 by INC. New Delhi

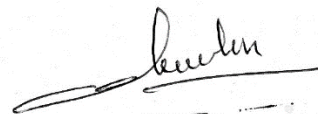
INC Registration No. - 1810 014

No. 652

M.G.M. Medical College, Indore

Indore, Dated 13/4/16

This is to certify that Soumya Vyas, a student of MBA in Healthcare Management, IIMR University, Jaipur has successfully completed her dissertation titled "A Cross-Sectional Study to Assess the Levels of Motivation Among Nursing Staff of a Tertiary Level Government Hospital of Central India" from Govt. College of Nursing M.Y. Group of Hospitals, Indore.


Principal
PRINCIPAL
Govt. college of Nursing
C.R.P. lines, INDORE

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled A Cross- Sectional Study to Assess the Levels of Motivation Among Nursing Staff at Maharaja Yashwantrao Hospital, A Tertiary Level Government Hospital of Central India and submitted by Soumya Vyas Enrollment No. IIHMR-U/MBA-HM/2014-16/19-1629 under the supervision of Dr. Nutan P. Jain. for award MBA in Hospital and Health Managemet of the University carried out during the period from February, 2016 to April, 2016 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other Institute or other similar institution of higher learning.



Signature

ABSTRACT

Background

Hospital nurses' work motivation is widely important for providing high-quality health care, especially in the public health system. It is needed that evidence-based knowledge and studies on nurses' work motivation are generated in order to establish the implications for effective motivation strategies and ultimately improvement of performance.

The purpose of this study was to assess the levels of nurses' work motivation and determine the factors associated with it. The study also sought to derive a relation between the demographic and work related variable of the nursing staff and their motivation levels. This was a cross-sectional study conducted over a sample of 400 nurses at Maharaja Yashwantrao Hospital, Indore between February 2016 and April 2016.

Methodology

To fulfil the aims of the study, a questionnaire and two HR tools were used. These were based on the Locus of Control Theory by Rotter (1966) and Herzberg's Two factor theory (1959), using which motivation levels of the nursing staff were obtained based on internality and intrinsic motivation among randomly selected respondents across all major departments of the hospital. These also helped in identifying the factors that led to motivation such clearly defined jobs, adequate salary, adequate in-service training, opportunity to serve the community, timely confirmation/promotion, balance between work and family among others. Data for demographic and work related variables such as working hours, position in the department, years in the profession, etc. were collected and motivation levels were tested for dependency on the same.

Findings

Nurses were more than moderately motivated to work. The majority of hospital nurses had a strong intrinsic work motivation and internality. Personal factors such as academic qualification, marital status, trainings, etc. affected their motivation significantly. Older nurses with a longer duration of service and/or a leading position had higher internal motivation. Lower level staff was found to have lower motivation levels and reasons for this can be attributed to lack of their say in organization.

Conclusion

As nursing is a profession taken by choice to serve the community, it is justified that the staff shows presence of intrinsic motivation. The reasons that contribute towards low motivation, wherever seen, are due to organizational factors and not personal. The hospital needs to use these findings to improve level of motivation,

As health is sensitive and critical aspect, it is essential to deal sensitively and critically with those who handle it.

Key words: *Motivation, Nurses, Government Hospital, Locus of Control, Intrinsic Motivation*

ACKNOWLEDGEMENTS

The opportunity to be incorporated in an education program that leads, promotes thinking and allows a student to carry out a research in areas that are of significance in the health system and industry is a boon in itself. For this, I am sincerely thankful to the IIHMR University for the rich knowledge it has provided and the curriculum of which this study is a result of.

I gratefully acknowledge Dr. S.D. Gupta, Director and Dr. Ashok Kaushik, Dean of Student Affairs, The IIHMR University for their ever-present support which has been extended throughout the term and duration of the study.

My highest gratitude is towards Dr. Nutan P. Jain, Professor and Guide for without her guidance and direction, this study would not have been possible. She has proved to be an invaluable contribution and completion of this project is a result of her support and teachings.

This report is an outcome of the unfailing help and support of Dr. Satish Saroshe, Professor, M.G. M College. He is a mentor in true meanings and went to great lengths in facilitating the process.

I would like to thank Dr. Sanjay Dixit, Head of P.S.M. Department, M.G.M. College for believing in the study and helped overcome the hurdles. It is with his contribution and help that the study could be conducted.

Lastly, I am thankful to all the respondents who gave their time and with tremendous patience responded to the questionnaire and helped complete the process.

Soumya Vyas

CONTENTS

1. INTRODUCTION	1
2. LITERATURE REVIEW	3
3. METHODOLOGY	11
3.1 Research Question	
3.2 Study Methods	
3.3 Data Management	
3.4 Quality Control	
4. FINDINGS	16
4.1 Demographic Profile	
4.2 Work Profile	
4.3 Factors related to the job	
4.4 Measuring Levels of Motivation	
4.4.1 Internality among Nursing Staff by category of position in the department	
4.4.2 Factors that contribute most to externality by category of position in the department	
4.4.2.1 Matron	
4.4.2.2. In-charge	
4.4.2.3 Staff Nurse	
4.4.2.4 Junior Staff Nurse	
4.4.2.5 Clinical instructor	
4.4.3. Intrinsic Motivation among Nursing Staff	
4.4.4 Factors that contribute most to intrinsic motivation by categories of position in the department	
4.4.4.1 Matron	
4.4.4.2. In-charge	
4.4.4.3 Staff Nurse	
4.4.4.4 Junior Staff Nurse	
4.4.4.5 Clinical instructor	
4.5 Relationship between employee variables and their motivation levels	
4.5.1 relationship between employee variable and internality	
4.5.1.1 Internality among Nursing Staff based on demographic and work profile variables	
4.5.1.2 Relationship between motivation levels and responses regarding experience at the job	
4.5.2 Relationship between Intrinsic motivation and employee variables	
4.5.2.1 Intrinsic motivation among nursing staff based o demographic and work profile variables	
4.5.2.2. Relationship between Intrinsic motivation among nursing staff and their responses related to experience with the job	
5. DISCUSSION	43
6. CONCLUSION	46
7. INSTRUMENTATION	48
8. BIBLIOGRAPHY	53

LIST OF TABLES

Table 3.1 List of Intrinsic and Extrinsic factors assessed in Motivational Preference Scale	14
Table 4.1 Demographic Profile of the respondents	16
Table 4.2.1 Work Profile	17
Table 4.2.2 Supervision	18
Table 4.2.3 Patient Interaction	18
Table 4.3.1 Job Experience	19
Table 4.3.2 Employee's perceived difficulty of the job	20
Table 4.4.1 Mean of Externality scores by Position in the department category	21
Table 4.4.2.1 Number of respondents in the category of Matron choosing external responses	22
Table 4.4.2.2 Number of respondents in the category of In-charge choosing external response	23
Table 4.4.2.3 Number of respondents in the category of Staff Nurse choosing external responses	24
Table 4.4.2.4 Number of respondents in the category of Junior Staff Nurse choosing external responses	25
Table 4.4.2.5 Number of respondents in the category of Clinical Instructor choosing external responses	26
Table 4.3.3 Mean of Intrinsic Motivation Scores by Position in the Department Categories	27
Table 4.4.4.1 Ranking of Motivational Factors by Matrons	27
Table 4.4.4.2 Ranking of Motivational Factors by In-charge	29
Table 4.4.4.3 Ranking of Motivational Factors by Staff Nurses	30
Table 4.4.4.4 Ranking of Motivational Factors by Junior Staff Nurses	32
Table 4.4.4.5 Ranking of Motivational Factors by Clinical Instructors	33
Table 4.5.1.1 Internality among Nursing Staff based on Demographic and Work Profile variables	35
Table 4.5.1.2 Relationship Between motivation levels and responses regarding experience at the job	37

Table 4.5.2.1 Intrinsic Motivation among Nursing Staff based on Demographic and Work Profile variables	39
4.5.2.2 Intrinsic Motivation among Nursing Staff based on their responses related to experience with job	341

LIST OF ABBREVIATIONS

ANM	Auxiliary Nurse Midwife
ENT	Ear Nose and Throat
GNM	General Nurse Midwifery
HR	Human Resource
HRD	Human Resource Development
ICCU	Intensive Cardiac-Care Unit
MICU	Medical Intensive-Care Unit
MPS	Motivation Preference Scale
NICU	Neonatal Intensive-Care Unit
PICU	Paediatric Intensive Care Unit
SD	Standard Deviation
SICU	Surgical Intensive Care Unit
SN	Staff Nurse
SRI	Social Reaction Inventory
TB	Tuberculosis

1. INTRODUCTION

Health industry is labour intensive, wherein quality of services is ultimately linked to productivity, skills, motivation, and satisfaction of the healthcare providers. Under increased societal demand for effective healthcare services, it has become a challenge for hospital administrator to motivate employees and at the same time fulfil the expectations of patients. Research has well highlighted the importance of effective human resource policies for improving the performance of the health system. Motivation is the key to successful achievement of personal and/or organizational goals. This is also a fact that one cannot directly motivate others; however, working environment still can be created wherein people themselves feel motivated.

The motivational behaviour of employees could be explained in the light of content, process, and reinforcement theories. The content theory of motivation focuses on “what” motivates a person. The process theory looks at the entire process of motivation and focuses on “how” a person is motivated and centred around the rational cognitive process and argues that the importance and placement of similar needs is different for every individual with an inbuilt element of high subjectivity. The reinforcement theory emphasizes the fact that a person's current behaviour is influenced by past actions. Bennett and Franco (1999) found that motivation is influenced not only by specific incentive schemes targeted at workers, but also by the whole range of health sector reforms which potentially affect organizational culture, reporting structures, channels of accountability, etc. (1). Petcharak (2002) observed various factors responsible for work motivation and in the order of preference, motivation variables noted were salary, job security, interesting job, working environment, and professional relation with coworkers (2). Fashakin *et al.*, (2007) observed strong links between organization activities and the external consequences of such activities for employee motivation. (3)

Human resources represent most expensive of three principal health system inputs as they consume almost 60% of the total budget, the other two being physical capital and consumables. A number of studies have been conducted in order to explore factors of motivation and their relation with job satisfaction in non-health sector and more so at international platform. (4) Studies on this subject matter remain scanty in the Indian settings where shortage of health manpower and high burden of the disease are prevalent. Keeping this back ground a cross-sectional study would be undertaken to determine motivation of the health personnel and explore different motivational variables amongst

permanent employees working in a government tertiary health care institution of Indore, Madhya Pradesh

Aim- To study the levels of motivation among nursing staff of a tertiary level Government hospital at the same time finding ways to improve the overall efficiency of the hospital.

Objectives-

Broad Objective

- To study the levels of motivation among the nursing staff of tertiary level Government Hospital.

Specific objective

- To use appropriate scales to measure levels of motivation among the nursing staff
- To compare the motivation levels of nursing staff based on various factors such as academic qualification, years in the profession, working hours, etc.

2.LITERATURE REVIEW

The recruitment and retention of nurses is a worldwide concern for healthcare systems because of high attrition of new graduates, nurses leaving healthcare work and ageing workforces. Given the need to effectively recruit, prepare and retain nurses, it is important to understand what motivates individuals to nurse, what can sustain that motivation and how healthcare systems support nurses' career development and retention. (5)

It has become essential in today's world to pay attention to factors that are involved in and effect the recruitment and retention of nurses. (6) New and creative ways of encouraging nurses to remain in nursing are being required because of the increasing complexities of healthcare work, an ageing population and staff global migration (7). This need is further compounded by healthcare environment that now have to support a multigenerational workforce. Understanding how best to cope with these increasing complexities of nursing work and the quality of their workplace are likely to be critical in assisting in developing and retaining a skilled and engaged nursing workforce. In particular, understanding further about what motivates nurses to engage in and be sustained through learning more about their work may be central to the maintenance of nursing workforces (8). In particular, understanding further about what motivates nurses to engage in and be sustained through learning more about their work may be central to the maintenance of nursing workforces and is of dire necessity in public sector.

Motivation can be defined as the processes that account for an individual's intensity, direction and persistence of effort toward attaining a goal. In most cases motivation stems from a need which must be fulfilled, and this in turn leads to a specific behaviour. Fulfilment of needs results in some type of reward, which can be either intrinsic or extrinsic. The former are derived from within the individual, e.g. taking pride and feeling good about a job well-done, whereas the latter pertain to rewards given by another person. 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 (9).

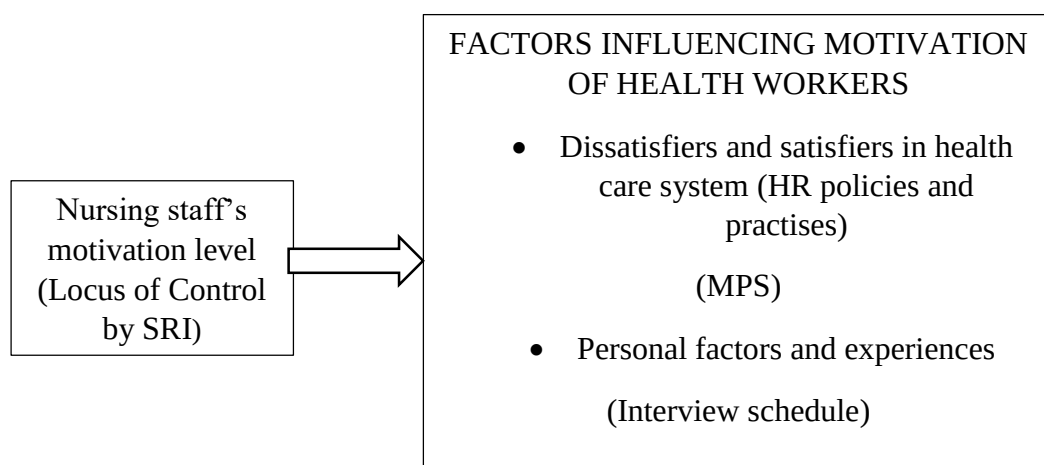
In the health care field, attaining health objectives in a population depends to a large extent on the provision of effective, efficient, accessible, viable and high-quality services. The health workforce, present in sufficient numbers and appropriately allocated across different occupations and geographical regions is arguably the most important input in a unique production process and has a strong impact on overall health system performance (10). The lack of explicit policies for human resource management has produced, in our

country, imbalances that threaten the capacity of health care systems to attain their objectives (11).

Within current healthcare work, Pask (2005) identifies consequences of a gap between what nurses believe their role could be and what it actually constitutes. These consequences have implications for the decisions nurses make and their apparent loss of hope to achieve what they desire. A loss of hope, may lead some nurses to retreat “from the effort that is required to challenge a system that fails to recognise nurses as they work for that which they see has intrinsic value” (p. 253) (12) Furthermore, the reality of implementing ideals in practice is often limited by organizational and professional factors that impact on nurses’ ability to care for patients in ways that they desire. To sustain the intrinsic value of nurses’ work requires an organisation where they and their learning are valued, encouraged and empowered. In health systems where nurses are continually over stretched because of insufficient numbers of nurses, the ability of the organisation to sustain individuals’ intrinsic motivations can become difficult (13). It is suggested that such issues need to be addressed globally in order to maintain nurses’ motivation and ensure that their individual needs are not overlooked in favour of organizational needs.

The conceptual framework of motivation can be understood from the figure given below. Health worker motivation is an internal psychological process. Determinants of work motivation originate at many levels: individual, the immediate organizational work context, HR policies context and the community context.

Fig 1: Study Framework



Because work motivation operates internally, the results of this motivation process will differ for every individual. In addition, the individual's motivation to work will change from one work situation to another and even over time within the same work situation (14). However, there are some common themes of motivation. There are numerous definitions of motivation, emphasizing either the energetic character of motivation behaviour at the beginning of the pursuit of a goal (content or need theories) or the cognitive character, which supports the underlying decision mechanisms along the course and intensity of motivated behaviour (process theories). Content theories identify human needs and explain motivational factors, identifying behaviours which satisfy the needs. They are characterized by the importance attributed to various needs and to the methods used in their satisfaction. According to these theories, a satisfied employee is a productive employee, i.e., the person attains the expected performance and productivity if he/she feels that his needs are satisfied. Abraham Maslow (1954), unquestionably the most prominent author of need theory, established his ideas on the assumption of an upward hierarchical need satisfaction. He holds that the higher level needs can only be reached after all the preceding needs are satisfied. Nevertheless, Maslow acknowledges that exceptions may arise when needs of a superior nature are at stake, and can be met before the immediately preceding level is satisfied. Initially his theory had seven distinct levels, but after some modifications five categories were formed under the following ascending order: physiological needs which refer to homeostasis maintenance and are indispensable to survival; security needs which include the desire of protecting oneself as well as one's family from danger; social needs which refer to the desire to belong to a group and of being accepted by others; esteem needs which are the individual's desire for distinguishing himself in the group where he participates and more specifically of obtaining prestige and power; self-fulfilment needs which include the desire for 5 psychological growth, continuous improvement of personal capacities and excellence, bestowing a permanent challenge for the individual's life (15). Besides Maslow, Herzberg (1959) also made a valuable contribution without opposing Maslow's ideas, but looking at the Satisfaction side of work instead. Steuer (1989) refers to motivation as "the created tension for a need and that satisfaction expresses the feeling of attending to that need". Satisfaction at work is considered to be a pleasant emotional state resulting from the individuals' assessment of their work, which results from the persons' perspective on the satisfaction of their most important values at work (16). Satisfaction and dissatisfaction at work are considered by some authors as the two extremes of the same phenomenon, which is noticeable in studies whose scales measure this construct by using both concepts

in opposing extremes in Likert's scales (Begley & Czajka, 1993; O'Driscoll & Beehr, 2000). However, other authors, such as Herzberg with his dual-factor or motivational-hygiene theory, make a distinction between satisfaction and dissatisfaction, considering them as two distinct phenomena. For Herzberg not every need motivates, since some only avoid dissatisfaction. Process theories focus on the cognitive processes underlying the conscious mechanisms of decision making. According to these theories, satisfaction is a result of performance and productivity attained, whereas according to need theories, satisfaction allows performance. Among process theories, the theory of cognitive dissonance (Festinger, 1954) and its derivatives; Equity theory (Adams, 1963) and Expectancy theory (Vroom, 1964), are the ones that stand out. The Theory of Cognitive Dissonance, formulated by Festinger (1954), comes from the assumption that human beings, by means of an individual process of self-evaluation, form their own self-image and use it as a comparative measure concerning other people or the characteristics that they consider similar to their own. Inconsistencies between an individual's self-evaluation and the exterior results in cognitive dissonance – a mechanism that generates stress. This is the vehicle that drives a person to develop overcoming behaviours and to achieve a state of consonance or psychological balance. The Equity Theory (Adams, 1963) holds that in the workplace persons are constantly comparing their contributions (performance, responsibilities) and their compensations (wage, acknowledgement) with their work peers. Thus, a perception equity or inequity emerges. If the worker perceives inequity, either due to insufficient or excessive compensation, he/she tends to behave in a way so as to balance that correlation by increasing or decreasing his/her performance levels in a quest for equity. There are studies which demonstrate increases of performance in workers with excessive compensation (Adams & Rosembaum, 1962) and performance decrease in workers with compensations deficit (Goodman & Friedman, 1969). Vroom's Expectancy Theory (1964) argues that motivation stems from the individual's estimates about achieving a goal, to which he /she assigns a given value. The effort will depend on the interaction of three cognitive factors: valence (the value which a person attributes to a certain goal or reward), instrumentality (the possibility that performance may be used to achieve a reward) and expectancy (the person's expectation of achieving the goals and the proposed performance). These three factors together determine the motivational level of a person, represented by VIE (Valence x Instrumentality x Expectancy). According to the author, motivation is a multiplied product, which implies that when one of them is zero, the final outcome will also be a void motivation. The motivational process results, therefore, from the interrelationship between the three aforementioned factors. If a person

expects to be capable of accomplishing a certain task (Expectancy) and that the accomplishment can lead him/her to reach a fulfilled goal or reward (Instrumentality) to which value is attributed (Valence), it can be stated that the person is properly motivated. Another important relationship to take into account in work satisfaction is workers' health. Some studies point to a positive association between satisfaction at work and health quality (Henne & Locke, 1985; Peterson & Dunnagan, 1998). This means that work satisfaction is associated with good health quality and dissatisfaction at work is associated with health problems like fatigue, digestive problems and muscle pains, among others. Henne and Locke (1985) corroborate these results, mentioning that satisfaction is an emotional state and that emotions imply involuntary physical responses where the satisfaction level (emotional state) can act as a stress agent, causing some the abovementioned symptoms (17).

These theories reflect on the ideas of motivation in varying directions and aspects however, internal elements of motivation in these remain considerably constant and include Goal Congruence, Self- concept and Needs. These mediate the internalization of organization specific goals, which in turn determine the effort one puts into the task at hand.

As a variety of organizational factors influence an individual's willingness to exert efforts, many have attempted to examine which factors have the most influence on motivation and performance. A distinction is commonly made between motivation and demotivation. Herzberg's work indicated two types of factors affecting work behaviour: Hygiene factors which by their presence or absence, determine the level of worker dissatisfaction (e.g., supervision interpersonal relationships, work conditions, salary and job security); and motivation factors which determine the level of worker satisfaction (e.g., achievement, the work itself, recognition, responsibility, advancement and growth), but little is known about the relative importance of these various determinants of motivation in developing country contexts. However, a distinction between hygiene and motivation factors is useful for understanding worker behaviour, even if the distribution between motivation and hygiene may vary in different settings.

Outside of the immediate organizational environment, the broader context of community will also contribute to the individual's motivational processes. The community affects the worker's motivation through two main channels: the worker's link to the community served and the degree of congruence about what is perceived to constitute good service. In instances where there is a social relationship between the patient and the provider,

providers must be motivated to provide more empathetic and polite treatment. A second issue is the effect of client expectations on worker behavior. Community members will also have expectations for how services should be delivered, and they too provide feedback on health worker performance, both formally and informally.

Certain broader environment conditions also have impact on worker motivation. For example, an effective police and legal system may deter some of the most adverse forms of worker behavior (such as theft and corruption). Political systems based upon rent seeking and patronage are unlikely to support merit-based systems of promotion and may jeopardize the credibility of the leaders.

Thus, motivation in an operational context for this study can be defined as an individual's degree of willingness to exert and maintain an effort towards organizational goals. Motivation is an internal psychological process and in itself is not an observable phenomenon; it is only possible to observe either the results of the motivational process (such as improved performance) or perhaps, some of the determinants of motivation. The result of the internal process of motivation reflect the specific individual's situation and the environment.

In what concerns nurses' motivation and satisfaction, many authors show results which partly confirm Herzberg's predictions (18). Rewards lead to an increase of behaviour repetition, and so when the worker is rewarded he/she continues to produce better, while punishment does not have a permanent effect and leads to negative attitudes. The worker needs two fundamental requirements in his daily practice: to be healthy and have satisfaction at work. Health and satisfaction at work for healthcare practitioners are interconnected with professional status, interaction, remuneration, working conditions and organizational rule indicators. One of the current factors regarding motivation in the nursing profession is connected with remuneration. However, it has been concluded that even though remuneration is a motivational factor at work it is not the main motivator (19).

Other factors have been mentioned by nurses, such as stability attained at work and commitment to the population. Curiously, when these authors evaluated dissatisfaction, remuneration was indicated as one of the factors of greatest dissatisfaction in nurses' work. Nurses considered themselves to be poorly paid, taking into consideration the kind of work that is done, the hour load and responsibility assumed. Tavares (2010) concluded that, even though remuneration is a motivational factor at work in general, it isn't for

nurses. The author indicated other motivational factors such as: liking what one does, an acceptable relationship with the multi-professional team, the possibility of professional growth, the hour load and the working conditions given by the organization (20). Yet, where remuneration is concerned, Vévoda, Ivanová, Nakládalová and Marečková (2011) concluded from a study at 122 hospitals in the Czech Republic that nurses considered wages and the care given to the patients as the most important factors at work. Many other studies have emphasized various motivational and satisfaction factors in the nursing profession. Ferreira (1996) published a study conducted at Coimbra Pediatric Hospital with a sample of 109 nurses, showing that the nurses' satisfaction was connected to relationship variables with other hospital professionals and their relationship with patients, while dissatisfaction was linked to remuneration, structural conditions, incentives and career development perspectives. Fonseca (1999), who conducted a study with the goal of understanding the degree of professional satisfaction of nurse managers of the northern central area hospitals, concluded that the conditions that most influenced nurses' satisfaction were security, autonomy and self-fulfilment. Andrade (2001) conducted a study in six hospitals of northern Portugal with a sample of 209 nurses in Paediatric service, and concluded that the nurses were moderately satisfied overall. He mentioned that older nurses and those with a higher professional category reported the greatest satisfaction. The determinant factors for satisfaction in decreasing order of importance were; organizational communication, working hours, the physical conditions in the workplace, autonomy and remuneration. Seixas (2009), in his study with a sample of 42 nurses, concluded that the interpersonal relationships are the cause of greatest satisfaction for the nurses. Ferreira (2011) in a study with 388 nurses from the Primary Healthcare in Braga District, concluded that the professionals with the highest satisfaction are those who work in shifts with a fixed-term contract, with management functions, with five years of service or less and who are thirty-five years old or less. For Staufenbiel, Kroll, & König (2006) a worker's motivation is strongly affected by insecurity at work. However, these authors also say that insecurity can work as a motivation factor if the professional sees insecurity as a challenge – he/she may fight for the renewal or improvement of his/her employment contract and so have a better performance. They mention that this insecurity has consequences at social and demographic levels for a country, since it leads to the postponement of marriage, creating a family, and parenthood. The insecurity can also be responsible for the intent of resignation (Greenhaus et al., 1997). Uncertainties in career development have shown to be important factors, not only for the intent to leave but also for decreased motivation (Greenhaus et al., 1997). Melo

(2001) and Carneiro (2009) indicated the head nurse as the most responsible for the motivation of a group toward fulfilling the organization goals. Continuing with nurses' motivation and satisfaction, Yaktin (2003) conducted a study of 421 nurses in Lebanon, to better understand the relationships between personal characteristics and nurses' satisfaction. The outcomes revealed that personal 9 characteristics have an effect on the way the nurses understand work. The nurses with higher educational levels indicated a greater dissatisfaction with the quality and the manner of treatment by supervisors. Nurses less than thirty years-old and with good professional skills were more dissatisfied with opportunities for professional growth. The study also reveals that when comparing singles with married people, the singles are the most dissatisfied. As for Al-Enezi (2009), he concludes in his study about satisfaction at work among nurses in Kuwait that female nurses were dissatisfied with professional opportunities and intrinsic rewards. However, they were satisfied with what concerns acknowledgement, control and responsibility, although the level of satisfaction was not very high. A lower level of satisfaction was found among the nurses with higher qualification levels. Fontes (2009) finds that nurses with shorter lengths of service and the youngest in general, are those who present lower levels of satisfaction. A comparison between registered nurses' and student nurses' survey responses on occupational choice found that both groups rated the same three intrinsic factors most highly: (i) working to help others, (ii) interesting (and challenging) work and (iii) working closely with people (21).

3. METHODOLOGY

3.1 Research Question

Are the motivation levels of the nursing staff of M.Y. Hospital, Indore affected by their demographic and work related factors?

3.2 Study Methods

Study design:

This is a cross sectional study focused on the motivation of Nursing Staff in a Government hospital. This concentration was on individual level determinants of motivation in a work place

Study Duration:

The study was conducted over a period of three months i.e., February, 2016 to April 2016

Study Area: Tertiary level Medical College Government Hospital (M.Y.H., Indore)

M. Y. Hospital is a 1200 bedded hospital with all the major medical departments: surgery, medicine, obstetrics & gynaecology, dermatology, chest & TB, orthopaedics, E.N.T., ophthalmology, radiology, anaesthesiology, paediatrics, forensic medicine and casualty. Cardiology, neurology, gastroenterology, nephrology, endocrinology divisions are under parent medicine department. Medicine department has 18 bedded MICU and 8 bedded ICCU. The hospital also has SICU, NICU, PICU, burn units and surgical super-speciality units. There other hospitals in the campus are: 300 bedded Chacha Nehru Children hospitals, 100 bedded M.R TB hospital, 100 bedded Cancer hospital. This hospital is associated with Mahatma Gandhi memorial Government Medical College.

The study was conducted across all the hospital under the M.Y. Hospital Group and all of their departments.

Study Subjects: Nursing & Paramedic Staff (ANMs, SNs, GNMs)

Inclusion Criteria: All the nursing/paramedic staff with the tenure of 1 year or longer within the same hospital.

Exclusion Criteria: All the nursing/paramedic staff with the tenure of less than 1 year in the hospital.

Sample Size: A sample size of 400 was obtained as follows:

Population size (for finite population correction factor) (N): 1000000
Hypothesized % frequency of outcome factor in the population (p): 50% $\pm$ 5
Confidence limits as % of 100(absolute $\pm$ %)(d): 5%
Design effect (for cluster surveys): 1

Equation:

$$\text{Sample size } n = [\text{DEFF} * Np(1-p)] / [(d^2 / Z^2_{1-\alpha/2} * (N-1) + p*(1-p))]$$

Confidence	Level (%)	Sample Size
95%		384
80%		165
90%		271
97%		471
99%		664
99.9%		1082
99.99%		1512

Considering a confidence level of 95 percent for this study, we have a sample size of 384 which will be rounded off to the nearest whole i.e. 400.

Sampling Technique: Simple Random Sampling

Sampling Design: Sampling was done at two stages:

Stage one: Clustering of nursing staff by different major departments and shift-wise duty

Stage two: From each department/ unit, nursing staff from the day shift selected on random basis using simple random sampling software.

Data Collection Methods:

- Questionnaire method
- Hospital Records

Study Tools: HRD tools and questionnaire

The following tools were used to assess individual's motivation level

- **Predesigned, semi-structured questionnaires based on previous studies done to assess levels of motivation**

The questionnaire consisted of mainly close ended questions related to the demographic profile the work profile and respondents' experiences with the job. This questionnaire collected the data that helped derive correlation between the individual factors and their motivation levels.

- **Social Reaction Inventory (SRI)**

A modified version of Rotter's Locus of Control Scale named as Social Reaction Inventory was used to measure individual differences in the tendency to believe that environmental events are within one's own control as opposed to being controlled by luck, fate, systems or other people. The score of the scale measure the **internality** or **externality** based on forced choice questions.

The scale used was a 20 item questionnaire derived from the questionnaire developed by Rotter in 1966. It measures generalized expectancies for internal versus external control of reinforcement. People with an internal locus of control believe that their own actions determine the rewards that they obtain, while those with an external locus of control believe that their own behaviour doesn't matter much and that rewards in life are generally outside of their control.

The scale consisted of 20 pairs of forced-choice items out of which three are irrelevant. The relevant items have one option each corresponding to internality and externality. The respondents were asked to select one item from each pair which they believed to be more trues in their own case. A score of one is given for each response selected reflecting externality except for items 1, 17 and 19 which are the irrelevant items. No score was given for the items selected that reflected internal control.

Therefore, the scores had a possible range of 0 to 17.

A low score indicates an internal control while a high score indicates external control.

- **Motivational Preference Scale (MPS)**

This tool was developed by Dr. S.C. Gupta and is based on the Herzberg's Two Factor Theory given in 1969 (22). This scale measured the individual's preference for **intrinsic factors** of motivation (e.g., achievement, the work itself, recognition, responsibility, advancement etc.) over **extrinsic factors** (e.g., supervision, interpersonal relationships, work conditions, salary, job security, etc.). This scale was used to know if the person gives more importance to intrinsic factors then he/she feels motivated because he is decisive about working better and in turn getting satisfied with the work that is in his/her control.

The scale consists of 20 items out of which 10 are intrinsic and 10 are extrinsic.

Table 3.1 List of Intrinsic and Extrinsic factors assed in Motivational Preference Scale

INTRINSIC FACTORS	EXTRINSIC FACTORS
Opportunity to serve the community	Timely confirmation/ promotion
Clearly define job	Adequate salary and allowances
Adequate in-service training	Friendly co-workers
Necessary equipment to work	Monetary incentives
Encouragement for development	Judicious workload
Feedback on performance	Physical security
Participation in decisions regarding my work	Status
Work according to my ability	Supportive supervisor
Appreciation/ recognition of good work	Comfortable work place (Cleanliness, fans, water, toilets, etc.)
Culture of Quality work	Balance between work and family

These items were presented to the respondents in a randomised list. They had to be sorted into three categories based of individual's perception of importance in contribution towards work motivation i.e., Extremely Important, Moderately Important and Less Important. The respondents were then asked to rank a maximum of 10 most preferred factors from the list of extremely important factors

The ranks were converted to scores by subtracting the rank from 11. Thus the item ranked at number 1 got converted to score of 10, item ranked at number 2 got converted to a score of 9 and so on. The ratio of 'scores on intrinsic factors' to the possible total score i.e. 55' expressed as percentage was taken to be the 'Motivational Preference Score' for the Individual. This score could range from 0 (in case no intrinsic factor is included in the list of 10 most preferred factors) to 100 (in case all the intrinsic factors are included in the list of 10 most preferred factors).

A high score indicated high preference for 'Intrinsic factors' and a low score indicate preference for 'Extrinsic factors'.

3.3 Data Management

All of the data obtained was collected and checked for errors such as missed information and discrepancies. The information obtained was classified and grouped as per requirement to interpret results. All of the data was coded and entered into the computer to be analysed.

3.4 Quality Control

A demonstrative test was conducted on 10 subjects from different hospitals across Indore prior to the actual study to test the study tool for errors and discrepancies. Various aspects such as time taken, feasibility, ease of data collection in terms of respondents' understanding of the questions asked, extensiveness etc. were assessed and feedback from the participants was obtained to help make the tool efficient.

The data collection process was kept uniform to avoid any kind of bias and the collected data was checked for relevance.

4. FINDINGS

The study undertook the aspect of individual level determinants of motivation. This discusses how the employee feels and what are his/her opinion about motivation. The study also sought to compare the factor which affect their motivation level. For all this firstly, the distribution of the nursing staff was studied based on various demographic factors, their work specifications and finally their experiences. The information obtained is depicted on the form of table specifies the distributions and recordings in the form of nursing staff's profile and responses.

4.1 DEMOGRAPHIC PROFILE

Table 1 given below shows the basis demographic data obtained from the study of the Nursing staff of sample size 400.

One-fifth of the total sample size comprised of males and the rest were females. Almost three-fourth of the staff belonged to the age group of 20-39 Years and they were divided in near halves as married and unmarried. M.Sc. Graduates formed the largest section of the staff.

Table 4.1 Demographic Profile of the respondents (A)

S. No.	Categories	Variables	N (Total=400)	Percentage of Total Respondents
A.1	Sex	Male	80	20
		Female	320	80
A.2	Age	Below 20 Years	0	0
		20-39 Years	311	77.75
		30-49 Years	61	15.25
		40-59 Years	28	7
		50 Years and above	0	
A.3	Marital Status	Married	209	52.25
		Unmarried	186	46.5
		Separated	1	0.25
		Widowed	4	1
A.4	Number of children	0	271	67.75
		1	73	18.25
		2	44	11
		3 or more	12	3
A.5	Academic qualification	ANM	0	0
		GNM	40	10
		B.Sc.	65	16.25
		M.Sc.	277	69.25
		Nursing Diploma	18	4.5

4.2 WORK PROFILE

This section recorded the data related to the staff's job profile. The recordings are given below Table 4.2.1

The study was conducted on three levels of nursing staff divided into five categories i.e. the Matron or the Head Nurse, In-charge or Department Heads, Staff Nurses, Junior Staff Nurses or Ward Boys and Clinical Instructors that undertook training of nursing students, dictated proper clinical practises in the hospital and attended patients also. Naturally, Staff nurses made the majority of the Nursing Staff. The experience or the years of working in the profession varied and major section lied in Less than 5 years or 5-10 Years. Similarly, years of working within the same facility were wide ranged. The working hours of the staff commonly remained Less than 8 hours per day but shifts of more than 8 hours per day and variable daily work hours were also found.

Table 4.2.1 Work Profile (B)

S. No.	Categories	Variables	N	Percentage of Total Respondents
B.2	Position in the Department	Matron	13	3.25
		In-charge	56	14
		Staff Nurse	291	72.75
		Junior Staff Nurse	31	7.75
		Clinical Instructor	9	2.25
B.3	Year in the profession	Less than 5 years	177	44.25
		5-10 years	166	41.5
		10-15 years	13	3.25
		More than 15 years	44	11
B.4	Years in the facility	Less than 2 years	180	45
		2-5 years	112	28
		5-10 years	97	24.25
		More than 10 years	11	2.75
B.5	Working Hours	Less than 8 hours	163	40.75
		8 hours	122	30.5
		More than 8 hours	106	26.5
		Variable	9	2.25

Data was also recorded on number of people under direct supervision of a person. This data is shown in table 4.2 and it was found that only a small section, less than one-fifth were supervisors but majority of these had the maximum number of people under direct supervision.

Table 4.2.2 Supervision (B.6)

S. No.	Variables	N	Percentage of Total Respondents
B.6	Respondents that have people under their direct supervision	75	18.75
	Number of People supervised		
	Less than 20	24	6
	20-39	21	5.25
	40-59	30	7.5
	60 or above	0	0

Patient interaction data is given in Table2.3. this was recorded in the form of average daily patient load of a person. Almost all the staff had direct interaction with the patients.

Table 4.2.3 Patient Interaction (B.7)

S. No.	Variables	N	Percentage of Total Respondents
B.7.a	Employees with direct interaction with the patients	385	96.25
B.7.b	Respondent's Average Daily Patient Load		
	0-19	207	51.75
	20-39	123	30.7
	40-59	41	10.25
	60-79	29	7.25
	80 or above	0	0

4.3 FACTORS RELATED TO THE JOB

There are many factors on an employee's level that affect his/her motivation. These factors are a part of the organisation culture or a matter of the Human Resource Management such as training, the organisation's mission and objectives, job profiles and their specifications, feedback, etc.

Other than having given or received feedback in the organisation, the responses remained high for most factors. Most of them agreed to finding trainings interesting, being familiar with organisation's mission and objectives, being aware of their job's key responsibilities, standards and targets, believing both employee and organisation have a role to play in their motivation towards work, etc.

A large section of the respondents said that their personal factors affect their performance at work,

The data of Job related factor are shown in Table 4.3.1 below.

Table 4.3.1 Job Experience (C.)

S. No.	Categories	N	Percentage of Total Respondents
C.1.a	Respondents that think trainings help improve an employee's performance	393	98.25
C.1.b	Respondents that have undergone any training at the hospital	357	89.25
C.1.c	Respondents that find the given training interesting	336	84
C.2.a	Respondents that are familiar with the organisations mission and objectives	256	64
C.2.b	Respondents that said that organisation's mission makes them feel their job is important	222	55.5
C.3	Respondents that were aware of their job's key responsibilities, targets and standards	323	80.75
C.4	Respondents have ever given/received feedback	95	23.75
C.5	Respondents that feel personal factors affect their work performance	352	88
C.6.a	Respondents that feel both employee and the organization play a role in employee motivation	342	85.5
C.6.b	Respondents that feel there should be a regular focus on motivation instead of occasional events	341	85.25

Employees were asked regarding their perception of the difficulty level of their job. Majority mentioned it to be moderately difficult and one-fourth of them said that it is extremely difficult.

The data is shown in Table 4.3.2 below and was used to study the influence of perceived difficulty on motivation level of the staff.

Table 4.3.2 Employee's perceived difficulty of the job

S. No.	Difficulty Level	N	Percentage of Total Respondents
C.7	Extreme	107	26.75
	Moderate	250	62.5
	Low or none	43	10.75

4.4 MEASURING LEVELS OF MOTIVATION

Motivation in this study is measured in term of what an individual feels. For this two scales, Social Reaction Inventory (SRI) by Rotter (1966)¹ and Motivational Preference Scale(MPS) devised by S. C. Gupta (22), were used. SRI measures a person's Internality or Externality and MPS measure preference for Intrinsic or Extrinsic factors.

4.4.1 Internality among nursing staff by category of position in the department

Table 4.3.1 shows mean SRI score of the Nursing Staff by Position in the Department as sub-groups. In general, most of them believed that they could influence their environment to a large extent.

Table 4.4.1 Mean of Externality scores by Position in the department category

Group	N	Mean (SD)
Matron	13	6.80 (0.67)
In-charge	56	6.42 (1.41)
Staff Nurse	291	8.21 (1.80)
Junior Staff Nurse	31	7.09 (1.33)
Clinical instructors	9	7.16 (1.33)
Total	400	7.14 (1.87)

The mean externality score was found to be 7.14 on a scale of 0-17 which shows moderate levels of motivation as the scores are inclined towards internality more than externality.

It can be see that senior nursing staff positions have lower SRI scores as compared to lower level staff. Staff Nurses have the highest mean SRI in all the groups.

The motivation levels of the nursing staff need improvement and can be improved with higher internal control which is specially found lowest in the group of Staff Nurses. The In-charges show most internal control out of all categories and their factors and characteristics can be assessed further to improve internality among other staff.

¹ Rotter, J.B. (1966) Generalised expectancies for internal verses external control of reinforcement. Psychological Monographs. Vol. 20 (Whole No.609)

4.4.2 Factors that contribute most to externality by category of position in the department

For better understanding of what leads an employee to feel helpless towards his environment, the factors were classified based on the position wise category of respondents and their responses were ranked to find out which ones affect them the most.

4.4.2.1 Matron

Table 4.3.2.1 below shows the responses by Matrons or Head Nurses in the form of ranking of the items that had most affirmative responses.

Table 4.4.2.1 Number of respondents in the category of Matron choosing external responses (N=13)

S. No.	Externality Statements	Number of Respondents Agreeing
1	If someone doesn't like you, there is not much you can do	12
2	Promotions are influenced by accidental happenings	12
3	Government is run by few people in power	10
4	Difficult to control the things people do in the office	10
5	Accidents determine the course of a person's life	9
6	Hard to determine if people actually like you	8
7	Some people just don't like you	7
8	Cannot understand how seniors arrive at performance appraisal	7
9	Individual's worth often passes unrecognised	5
10	Bad things are balanced by the good ones	5
11	Don't have control over the direction my life is taking	4
12	Without the right break one cannot rise	3
13	Good job depends on being in the right place at the right time	3
14	thing turn out to be a matter of good or bad fortune	3
15	Unhappy things are partly due to bad luck	1
16	What is going to happen will happen	1
17	Decide what to do by flipping a coin	0

4.4.2.2 In-charge

Table 4.3.2.2 below shows the responses by In-charges or Department Heads in the form of ranking of the items that had most affirmative responses.

Table 4.4.2.2 Number of respondents in the category of Department In-charge choosing external responses (N=56)

S. No.	Externality Statements	Number of Respondents Agreeing
1	Accidents determine the course of a person's life	37
2	Government is run by few people in power	34
3	Individual's worth often passes unrecognised	27
4	Bad things are balanced by the good ones	27
5	Don't have control over the direction my life is taking	22
6	If someone doesn't like you, there is not much you can do	19
7	Some people just don't like you	18
8	Without the right break one cannot rise	17
9	Good job depends on being in the right place at the right time	17
10	Unhappy things are partly due to bad luck	15
11	Hard to determine if people actually like you	14
12	Cannot understand how seniors arrive at performance appraisal	11
13	Decide what to do by flipping a coin	10
14	Promotions are influenced by accidental happenings	9
15	Difficult to control the things people do in the office	3
16	thing turn out to be a matter of good or bad fortune	1
17	What is going to happen will happen	0

4.4.2.3 Staff Nurses

Table 4.3.2.3 below shows the responses by Staff Nurses in the form of ranking of the items that had most affirmative responses.

Table 4.4.2.3 Number of respondents in the category of Staff Nurse choosing external responses (N=291)

S. No.	Externality Statements	Number of Respondents Agreeing
1	Accidents determine the course of a person's life	251
2	Promotions are influenced by accidental happenings	234
3	If someone doesn't like you, there is not much you can do	228
4	Government is run by few people in power	212
5	Difficult to control the things people do in the office	201
6	Individual's worth often passes unrecognised	199
7	Bad things are balanced by the good ones	172
8	Hard to determine if people actually like you	164
9	Don't have control over the direction my life is taking	145
10	Cannot understand how seniors arrive at performance appraisal	122
11	thing turn out to be a matter of good or bad fortune	103
12	Some people just don't like you	97
13	Without the right break one cannot rise	88
14	Good job depends on being in the right place at the right time	71
15	What is going to happen will happen	59
16	Unhappy things are partly due to bad luck	45
17	Decide what to do by flipping a coin	42

4.4.2.4 Junior Staff Nurse

Table 4.3.2.1 below shows the responses by Junior Staff Nurses in the form of ranking of the items that had most affirmative responses.

Table 4.4.2.4 Number of respondents in the category of Junior Staff Nurse choosing external responses (N=31)

S. No.	Externality Statements	Number of Respondents Agreeing
1	Accidents determine the course of a person's life	27
2	Unhappy things are partly due to bad luck	16
3	What is going to happen will happen	16
4	Don't have control over the direction my life is taking	12
5	Promotions are influenced by accidental happenings	10
6	Some people just don't like you	9
7	If someone doesn't like you, there is not much you can do	8
8	Hard to determine if people actually like you	8
9	Cannot understand how seniors arrive at performance appraisal	7
10	Difficult to control the things people do in the office	6
11	Government is run by few people in power	5
12	Bad things are balanced by the good ones	4
13	Individual's worth often passes unrecognised	3
14	Without the right break one cannot rise	2
15	Good job depends on being in the right place at the right time	2
16	Things turn out to be a matter of good or bad fortune	1
17	Decide what to do by flipping a coin	0

4.4.2.5 Clinical instructors

Table 4.3.2.1 below shows the responses by Clinical Instructors in the form of ranking of the items that had most affirmative responses.

Table 4.4.2.5 Number of respondents in the category of Clinical Instructor choosing external responses (N=9)

S. No.	Externality Statements	Number of Respondents Agreeing
1	Promotions are influenced by accidental happenings	8
2	Difficult to control the things people do in the office	7
3	Individual's worth often passes unrecognised	6
4	Cannot understand how seniors arrive at performance appraisal	5
5	Don't have control over the direction my life is taking	5
6	Without the right break one cannot rise	4
7	What is going to happen will happen	4
8	Accidents determine the course of a person's life	3
9	If someone doesn't like you, there is not much you can do	2
10	Government is run by few people in power	1
11	Bad things are balanced by the good ones	1
12	Unhappy things are partly due to bad luck	0
13	Some people just don't like you	0
14	Good job depends on being in the right place at the right time	0
15	thing turn out to be a matter of good or bad fortune	0
16	Decide what to do by flipping a coin	0
17	Hard to determine if people actually like you	0

4.4.3 Intrinsic Motivation Among Nursing Staff

Intrinsic Motivation shows a person's preference for factors that cause satisfaction on the job. When a person chooses Intrinsic factors he is inclined to be more motivated and when he prefers extrinsic factors, he faces an absence of motivation. A mean of MPS scores is given in Table 4.3.3.1 by categories of position of employees in the department.

Table 4.3.3 Mean of Intrinsic Motivation Scores by Position in the Department Categories

Group	N	Mean (SD)
Matron	13	89.09 (6.64)
In-charge	56	67.27 (13.72)
Staff Nurse	291	44.67 (12.81)
Junior Staff Nurse	31	52.05 (6.41)
Clinical instructors	9	40.61 (9.92)
Total	400	58.74 (19.78)

The overall intrinsic motivation levels of the nursing staff are found to be moderate. Matrons' category shows high mean score with low Standard Deviation. This reflects a fairly high level on intrinsic motivation among all Matrons but it is not the case in other categories. The scores of staff nurses and Clinical instructors reflect preference for extrinsic factors, therefore low motivation and hence need improvement.

4.4.4 Factors that contribute most to Intrinsic Motivation by Categories of Position in the Department

To understand better what influences an employee to be motivated, an analysis was done for each category by ranking all the factors according to the scores obtained.

4.4.4.1 Matron

Table 4.3.4.1 shows the score for all the factors ranked according to the responses of the Matrons listed as important for motivation at work.

Table 4.4.4.1 Ranking of Motivational Factors by Matrons (N=13)

Rank	Motivational Factors	Total Scores
1	Opportunity to serve the community	77
2	Participation in decisions regarding my work	59

Continued Table 4.4.4.1 Ranking of Motivational Factors by Matrons (N=13)

3	Work according to my ability	54
4	Culture of Quality work	48
5	Appreciation/ recognition of good work	37
6	Adequate in-service training	35
7	Necessary equipment to work	34
8	Clearly define job	28
9	Adequate salary and allowances	25
10	Comfortable work place (Cleanliness, fans, water, toilets, etc.)	24
11	Timely confirmation/ promotion	22
12	Feedback on performance	18
13	Friendly co-workers	16
14	Encouragement for development	15
15	Balance between work and family	13
16	Status	8
17	Judicious workload	6
18	Supportive supervisor	4
19	Physical security	3
20	Monetary incentives	1

The following are the most preferred intrinsic and extrinsic factors in the group of Matrons based on appearance in the first 10 ranks:

Intrinsic

- Opportunity to serve the community
- Participation in decisions regarding my work
- Work according to my ability
- Culture of Quality work
- Appreciation/ recognition of good work
- Adequate in-service training
- Necessary equipment to work
- Clearly define job

Extrinsic

- Adequate salary and allowances

4.4.4.2 In-charges

Table 4.3.4.2 shows the score for all the factors ranked according to the responses of the In-charges listed as important for motivation at work.

Table 4.4.4.2 Ranking of Motivational Factors by In-charges (N=56)

Rank	Motivational Factors	Final Score
1	Clearly define job	324
2	Adequate in-service training	309
3	Appreciation/ recognition of good work	287
4	Timely confirmation/ promotion	261
5	Adequate salary and allowances	240
6	Necessary equipment to work	214
7	Friendly co-workers	181
8	Encouragement for development	168
9	Opportunity to serve the community	149
10	Feedback on performance	131
11	Work according to my ability	112
12	Physical security	93
13	Participation in decisions regarding my work	75
14	Balance between work and family	75
15	Culture of Quality work	56
16	Monetary incentives	32
17	Comfortable work place (Cleanliness, fans, water, toilets, etc.)	21
18	Judicious workload	15
19	Supportive supervisor	7
20	Status	5

The following are the most preferred intrinsic and extrinsic factors in the group of Matrons based on appearance in the first 10 ranks:

Intrinsic Factors

- Clearly define job
- Adequate in-service training
- Appreciation/ recognition of good work

- Necessary equipment to work
- Encouragement for development
- Opportunity to serve the community
- Feedback on performance

Extrinsic

- Timely confirmation/ promotion
- Adequate salary and allowances
- Friendly co-workers

4.4.4.3 Staff nurses

Table 4.3.4.2 shows the score for all the factors ranked according to the responses of the Staff Nurses listed as important for motivation at work.

Table 4.4.4.3 Ranking of Motivational Factors by Staff Nurses (N=219)

Rank	Motivational Factors	Final Score
1	Clearly define job	1271
2	Timely confirmation/ promotion	1060
3	Adequate salary and allowances	998
4	Appreciation/ recognition of good work	852
5	Balance between work and family	821
6	Status	796
7	Friendly co-workers	754
8	Comfortable work place (Cleanliness, fans, water, toilets, etc.)	713
9	Adequate in-service training	682
10	Opportunity to serve the community	651
11	Necessary equipment to work	613
12	Physical security	572
13	Supportive supervisor	536
14	Work according to my ability	457
15	Encouragement for development	398
16	Participation in decisions regarding my work	353

Continued Table 4.4.4.3 Ranking of Motivational Factors by Staff Nurses

17	Monetary incentives	307
18	Culture of Quality work	146
19	Judicious workload	103
20	Feedback on performance	82

The following are the most preferred intrinsic and extrinsic factors in the group of Staff Nurses based on appearance in the first 10 ranks:

Intrinsic

- Clearly define job
- Appreciation/ recognition of good work
- Adequate in-service training
- Opportunity to serve the community

Extrinsic

- Timely confirmation/ promotion
- Adequate salary and allowances
- Balance between work and family
- Status
- Friendly co-workers
- Comfortable work place (Cleanliness, fans, water, toilets, etc.)

4.4.4.4 Junior Staff Nurse

Table 4.4.4.4 shows the score for all the factors ranked according to the responses of the Junior Staff Nurses listed as important for motivation at work.

Table 4.4.4.4 Ranking of Motivational Factors by Junior Staff Nurses (N=31)

Rank	Motivational Factors	Final Score
1	Clearly define job	66
2	Adequate in-service training	54
3	Friendly co-workers	44
4	Necessary equipment to work	39
5	Opportunity to serve the community	31
6	Physical security	27
7	Balance between work and family	27
8	Adequate salary and allowances	26
9	Work according to my ability	26
10	Feedback on performance	25
11	Comfortable work place (Cleanliness, fans, water, toilets, etc.)	23
12	Timely confirmation/ promotion	21
13	Encouragement for development	21
14	Participation in decisions regarding my work	18
15	Appreciation/ recognition of good work	14
16	Culture of Quality work	11
17	Judicious workload	11
18	Supportive supervisor	8
19	Status	7
20	Monetary incentives	5

The following are the most preferred intrinsic and extrinsic factors in the group of Junior Staff Nurses based on appearance in the first 10 ranks:

Intrinsic

- Clearly define job
- Adequate in-service training
- Necessary equipment to work
- Opportunity to serve the community

- Work according to my ability
- Feedback on performance

Extrinsic

- Friendly co-workers
- Physical security
- Balance between work and family
- Adequate salary and allowances

4.4.4.5 Clinical Instructor

Table 4.3.4.2 shows the score for all the factors ranked according to the responses of the Staff Nurses listed as important for motivation at work.

Table 4.4.4.5 Ranking of Motivational Factors by Clinical Instructors (N=9)

Rank	Motivational Factors	Final Score
1	Clearly define job	52
2	Comfortable work place (Cleanliness, fans, water, toilets, etc.)	44
3	Friendly co-workers	41
4	Necessary equipment to work	36
5	Adequate salary and allowances	23
6	Adequate in-service training	23
7	Timely confirmation/ promotion	21
8	Opportunity to serve the community	18
9	Balance between work and family	17
10	Culture of Quality work	16
11	Encouragement for development	16
12	Judicious workload	12
13	Appreciation/ recognition of good work	12
14	Feedback on performance	11
15	Supportive supervisor	10
16	Participation in decisions regarding my work	9
17	Physical security	8
18	Work according to my ability	7

**Continued Table 4.4.4.5 Ranking of Motivational Factors by Clinical Instructors
(N=9)**

19	Status	3
20	Comfortable work place (Cleanliness, fans, water, toilets, etc.)	2

The following are the most preferred intrinsic and extrinsic factors in the group of Junior Staff Nurses based on appearance in the first 10 ranks:

Intrinsic

- Clearly define job
- Necessary equipment to work
- Adequate in-service training
- Opportunity to serve the community
- Culture of Quality work

Extrinsic

- Comfortable work place (Cleanliness, fans, water, toilets, etc.)
- Friendly co-workers
- Adequate salary and allowances
- Timely confirmation/ promotion
- Balance between work and family

4.5 RELATIONSHIP BETWEEN EMPLOYEE VARIABLES AND THEIR MOTIVATION LEVELS

The data collected had various distribution variables of the Nursing Staff such as age, marital status, position in the department, years of working in the facility, etc. All of these are mentioned in Section 4.2 and 4.3. Dependency of Motivation Levels was studied with these factors to understand the reasons affecting the motivation of nursing staff.

The dependency was studied with both Internality and Intrinsic Motivation.

4.5.1 Relationship between employee variables and Internality

The internality scores vary on the scale of 0-17 according to the tool used. Using the critical score, the score for all respondents were divided into those with high and low internality and were tested for dependency. The data with significant results are given below in Table 4.5.1.1 and Table 4.5.1.2

Table 4.5.1.1 Internality among Nursing Staff based on Demographic and Work Profile variables

Factor	Internality			Chi-Square Statistic	p-value	Level of significance
Marital Status	High	Low	Row Totals			
Married	134	75	209	27.2074	< 0.00001	p < .05
Unmarried	72	114	186			
Separated	1	0	1			
Widowed	3	1	4			
Column Totals	210	190	400			
Age	High	Low	Row Totals			
20-29 Years	102	209	311	16.0702	.000324	p < .05
30-39 Years	31	30	61			
40-49 Years	18	10	28			
Column Totals	151	249	400			
Position in the department	High	Low	Row Totals			
Matron	10	3	13	15.0993	0.0045	p < .05
In-charge	38	18	56			
Staff nurse	137	154	291			

Continued Table 4.5.1.1 Internality among Nursing Staff based on Demographic and Work Profile variables

Junior Staff Nurse	19	12	31			
Clinical Instructor	7	2	9			
Column Totals	211	189	400			
Years in Profession	High	Low	Row Totals			
Less than 5	71	106	177	17.8625	0.00047	p < .05
5-9 Years	75	91	166			
10-14 Years	9	4	13			
15 or above	32	12	44			
Column Totals	187	213	400			

All of the above data show significant results for dependency of internality on the above listed variables with relevant p values and chi-square statistic less than the corresponding critical chi-square value. It can be seen that married people have high internality than unmarried people. People in the older age group also have higher internality score than those in lower age groups. Senior level employees show higher internality scores than junior levels and it is reflected in both position in the department and years in the profession.

4.5.1.2 Relationship Between motivation levels and responses regarding experience at the job

Internality scores of the nursing staff were tested for dependency with factors from Section 4.3 regarding job experiences. The items were:

C.1.a Respondents that think trainings help improve an employee's performance

C.1.b Respondents that have undergone any training at the hospital

C.1.c Respondents that find the given training interesting

C.2.a Respondents that are familiar with the organizations mission and objectives

C.2.b Respondents that said that organization's mission makes them feel their job is important

C.3 Respondents that were aware of their job's key responsibilities, targets and standards

C.4 Respondents have ever given/received feedback

C.5 Respondents that feel personal factors affect their work performance

C.6.a Respondents that feel both employee and the organization play a role in employee motivation

C.6.b respondents that feel there should be a regular focus on motivation instead of occasional events

The significant results are given below in Table 4.5.1.2

Table 4.5.1.2 Relationship Between motivation levels and responses regarding experience at the job

Factor	Internality			Chi-Square Statistic	p-value	Level of significance
C.1.a	High	Low	Row Totals			
Yes	217	176	393	4.6464	0.031118	p < .05
No	1	6	7			
Column Totals	218	182	400			
C.1.b	High	Low	Row Totals			
Yes	261	96	357		< .00001	p < .05
No	13	30	43			
Column Totals	274	126	400	32.6978		
C.1.c	High	Low	Row Totals			
Yes	240	96	336	27.5783	< .00001	p < .05
No	24	40	64			
Column Totals	264	136	400			
C.2.a	High	Low	Row Totals			
Yes	189	67	256	56.6569	< .00001	p < .05
No	51	93	144			
Column Totals	240	160	400			
C.2.b	High	Low	Row Totals			
Yes	121	101	222	2.8136	0.093471	p < .10
No	82	96	178			
Column Totals	203	197	400			

Continued Table 4.5.1.2 Relationship Between motivation levels and responses regarding experience at the job

C.3	High	Low	Row Totals			
Yes	260	63	323	60.0682	< .00001	p < .05
No	28	49	77			
Column Totals	288	112	400			
C.4	High	Low	Row Totals			
Yes	59	36	95	9.2331	0.002377	p < .05
No	135	170	305			
Column Totals	194	206	400			
C.6.a	High	Low	Row Totals			
Yes	199	143	342	3.5965	0.057902	p < .10
No	26	32	58			
Column Totals	225	175	400			
C.6.b	High	Low	Row Totals			
Yes	199	142	341	4.1736	0.041059	p < .05
No	26	33	59			
Column Totals	225	175	400			

All of the above data show significant results for dependency of internality on the above listed variables with relevant p values and chi-square statistic less than the corresponding critical chi-square value. The results clearly show that those who believe training help improve an employee's performance, those who have undergone any training at the hospital and those who find trainings interesting have higher internality score than those who don't.

Those who are familiar with organization's mission and objectives and can related them to the importance of their job have higher internality scores than those who don't.

People believing that both employee and the organization need to work at an employee's motivation show higher internality than those who don't. Also those who believe that regular focus on motivation is required have high internality.

4.5.2. Relationship between Intrinsic Motivation and employee variables

Intrinsic Motivation of employees is rated on a scale of 0-100. Critical score divides the scores of all respondents into High and low intrinsic motivation categories and these were tested for dependency with the variable factors.

The data with significant results are given below in the Table 4.5.2.1

Table 4.5.2.1 Intrinsic Motivation among Nursing Staff based on Demographic and Work Profile variables

Factor	Intrinsic Motivation			Chi-Square Statistic	p-value	Level of significance
Age	High	Low	Row Totals			
20-29	146	165	311	6.4118.	.040522.	p < .05
30-39	32	29	61			
40-49	20	8	28			
Column Totals	198	202	400			
Academic Qualification	High	Low	Row Totals			
GNM	18	22	40	7.5209.	.057025.	p < .10.
B.Sc.	38	27	65			
M.Sc.	183	94	277			
Nursing Diploma	10	8	18			
Column Totals	249	151	400			
Position in the department	High	Low	Row Totals			
Matron	9	4	13	13.6355	0.008554	p < .05
In-charge	35	21	56			
Staff nurse	119	172	291			
Junior Staff Nurse	15	16	31			
Clinical Instructor	6	3	9			
Column Totals	184	216	400			

Continued Table 4.5.2.1 Intrinsic Motivation among Nursing Staff based on Demographic and Work Profile variables

Years in Profession	High	Low	Row Totals			
Less than 5	61	116	177	16.1156	0.001074	p < .05
5-9 Years	62	104	166			
10-14 Years	7	6	13			
15 or above	29	15	44			
Column Totals	159	241	400			
Years in the facility	High	Low	Row Totals			
Less than 2	8	112	120	67.8731	< 0.00001	p < .05
2-4 Years	51	61	112			
5- Years	54	43	97			
10 or more	6	5	11			
Column Totals	119	221	340			
Average daily Patient Load	High	Low	Row Totals			
0-19	9	108	117	64.5619	< 0.00001	p < .05
20-39	61	62	123			
40-59	23	18	41			
60-79	17	12	29			
Column Totals	110	200	310			

All of the above data show significant results for dependency of intrinsic motivation on the above listed variables with relevant p values and chi-square statistic less than the corresponding critical chi-square value. It is evident that senior nursing staff has higher intrinsic motivation than junior staff which is reflected in the data of age group, position in the department and years in the profession and facility.

Respondents with academic qualification other than GNM have higher Intrinsic Motivation Score than those with GNM.

It is also seen that respondents with higher patient load have higher intrinsic motivation scores.

4.5.2.2 Relationship between Intrinsic Motivation among Nursing Staff and their responses related to experience with job

Intrinsic Motivation scores of the nursing staff were tested for dependency with factors from Section 4.3 regarding job experiences. The significant results are given below in table 4.5.2.2.

4.5.2.2 Intrinsic Motivation among Nursing Staff based on their responses related to experience with job

Factor	Intrinsic Motivation			Chi-Square Statistic	p-value	Level of significance
C.1.b	High	Low	Row Totals			
Yes	250	107	357	7.8874	0.004978	p < .05
No	21	22	43			
Column Totals	271	129	400			
C.1.c	High	Low	Row Totals			
Yes	200	136	336	23.2886	< .00001	p < .05
No	21	43	64			
Column Totals	221	179	400			
C.2.a	High	Low	Row Totals			
Yes	160	96	256	14.1085	0.000173	p < .05
No	62	82	144			
Column Totals	222	178	400			
C.2.b	High	Low	Row Totals			
Yes	130	92	222	3.6199	0.057093	p < .10
No	14	20	34			
Column Totals	144	112	256			
C.3	High	Low	Row Totals			
Yes	183	140	323	3.9147	0.047866	p < .05
No	34	43	77			
Column Totals	217	183	400			
C.4	High	Low	Row Totals			
Yes	62	33	95	10.8629	0.000981	p < .05
No	140	165	305			
Column Totals	202	198	400			
C.6.a	High	Low	Row Totals			
Yes	201	141	342	6.0957	0.013551	p < .05
No	24	34	58			
Column Totals	225	175	400			

Continued 4.5.2.2 Intrinsic Motivation among Nursing Staff based on their responses related to experience with job

C.6.b	High	Low	Row Totals			
Yes	200	141	341	5.4157	0.019956	p < .05
No	25	34	59			
Column Totals	225	175	400			
C.7	High	Low	Row Totals			
1	59	48	107	5.8919	0.052553	p < .10
2	103	147	250			
3	20	23	43			
Column Totals	182	218	400			

All of the above data show significant results for dependency of intrinsic motivation on the above listed variables with relevant p values and chi-square statistic less than the corresponding critical chi-square value. The results clearly show that those who have undergone any training at the hospital and those who find trainings interesting have higher intrinsic motivation than those who don't.

Those who are familiar with organization's mission and objectives and can related them to the importance of their job have higher intrinsic motivation scores than those who don't. People believing that both employee and the organization need to work at an employee's motivation show higher intrinsic motivation than those who don't. Also those who believe that regular focus on motivation is required have high intrinsic motivation scores.

All results shown in this section i.e. Section 4.5 are the ones that show significant relation between motivation levels and demographic, work and job experience factors. The motivation levels are found moderate with variation between the staff level categories. The results show that these moderate levels can be improved by using the alterable variables such are working hours, trainings, familiarity with organizational mission objectives, etc. and the results with unalterable variables such as position in the department, marital status, age, etc. can be used to identify which employees to focus on for improvement in motivation by other measures given in suggestion.

5. DISCUSSION

From the findings of the study it is safe to say that motivation is an important aspect of a person's work there are various factors that affect it.

Motivation does not have a rigid uniform definition and can be reflected in many ways. It is not always easy to find out what behaviours reflect a motivated attitude or what factors cause it. It is however an essential aspect and hence numerous studies in various domains are conducted on the topic all across the world.

As discussed, retention and recruitment of nurses is a global concern and India specifically faces a poor medical service provision due to lack of medical staff.

Therefore, it is attempted to draw on the motivation of the nursing staff and study it in detail to help improve the overall performance of the health system.

This study aimed at measuring the levels of motivation of the nursing staff, finding the factors responsible for it with the help of these findings ways to improve the efficiency. For all these purposes, the individual level was focused and an extensive survey was conducted to find the answers of the questions. The study focused on what the staff feel how their own factors affect their motivation levels.

Using the Social Reaction Inventory and the Motivation Preference Scale, results were obtained that attempt to justify the objectives. Internality and Externality are the factors that determine how a person acts on something how much he believes to be in control of his environment. Finding out the levels of internality help identify the sections of people that need to be motivated by pushing them to act upon the decisions, weigh options in case of dilemma, understand the occurring around them and avoid unfortunate events by taking actions on their own. Introducing them to a better work culture and environment where they are encouraged and let to take charge are ways which can be opted once the need is identified.

Clearly define job, necessary equipment to work, adequate in-service training and opportunity to serve the community are the intrinsic factors that appeared in all groups among the top ranks. These prove the results of many researches based on the Two factor theory that intrinsic factors contribute to motivation such as those given in the study by Toode K., Routasalo P., Suominen T. et. Al saying factors such as work load, work environment are more contributing to nurses' motivation than extrinsic factors (20).

Adequate salary and allowances, timely confirmation/ promotion, balance between work and family and comfortable work place (Cleanliness, fans, water, toilets, etc.) are the most preferred extrinsic factors in all the groups. These factors are preferred mostly by those that are Married and in the age group of twenty to thirty years. These can be attributed to the additional requirements of the family, higher stress levels, etc. It is mention in Herzberg's theory that motivation results from the satisfaction of attending to the need and is hence proved in the study that these factors sought by the employees, when found lacking cause the absence of motivation (16).

Almost all of the staff gave affirmative responses to believing that trainings lead to improvement in performance, having undergone training at the organisation and finding the training interesting. These people also showed high levels of motivation. However, it is essential to note that there is a fraction of the staff responding negatively to all of these. 10% of the respondents haven't undergone any training which cannot be overlooked in case of nurses and five percent said they do not find the trainings interesting.

There was a relationship between familiarity with organisation's mission and objectives and a person's own job's key responsibilities, standards and targets. These relate to clear definition of job, work according to the ability and participation in decision related to one's own work ultimately leading to preference of intrinsic factors which result in high motivation.

Surprisingly, a large number of respondents said to have never given or received any feedback in the organisation. These were mainly lower lever employees. This shows the absence of a proper feedback system. This however did not affect the MPS or SRI scores but that only means that people have not had the opportunity to give or receive feedback and not that there is no need for it.

Most of the respondents expressed that they believe there should a regular focus on employees' motivation in the organisation rather than a few periodic activities. However, amongst those who denied this, senior level employees formed a larger proportion. The reason for this could be that they must have experienced ineffective efforts for staff motivation with no significant results and leading to wastage of time and other resources.

The result of the identify with many studies previously done and prove the theories of motivation as well. Pask (2002) discussed that there is a gap between the roles that nurses assume for themselves and what is expected of them (12). The results of this study reflect there is a significant section of the staff that is unfamiliar with the organisation's mission

and objectives or does not identify the job with them. It should be observed that since M.Y hospital is associated with MGM medical College, the nursing student of the college that are now employees of the hospital are more familiar with the organisation's mission and objectives than those who have not been a student of the same.

The results coincide with the findings of the studies of Vévoda J, IK, Nakládlová M and Marečková J which state that nurses are concerned with both the wages and care to the patients (19). The factors that came up as the most preferred ones in the MPS include both Adequate salary and allowances and Opportunity to serve the community.

Similar to the study of Fontes (2009), it was seen here that lower levels of motivations were reflected by those who have been working for a shorter tenure or have less experience.

Proving to the theories and past researches, the study find all the results obtained to be relevant and insists to consider motivation of significance for nursing staff in the public setting.

6. CONCLUSION

It was found that the motivation levels of the employees are fairly high and there are factors that contribute towards them. Personal factors such as marital status, age, academic qualification have all a part to play in motivation of nursing staff. Experience and position largely determine the levels of motivation and other factor such as trainings are also important.

It was observed that the education of the respondents did not determine the position they held in the organisation. A better recruitment system that payed attention to job specification and requirements could benefit the organisation by appropriately utilising the human resource.

Some senior level employees reported to not agree with regular efforts towards motivation over periodic activities. This reflects their experience with ineffective efforts for motivation that did not deliver significantly and cause a wastage of resource. As the need for attention to motivation has been addressed, it is suggested that proper training of staff should be carried out to imply proper techniques for motivation enhancement or handling of the same by specialised teams.

The observed data show there is a significant proportion of staff that are unfamiliar with the organisation's mission and objectives or do not identify themselves with them. As this proves to a hurdle in the motivation of the staff, planned orientations could be carried out for new recruits.

Because a lot of married employees show externality or preference for extrinsic motivation factors, it is advisable to pay attention to the needs of these people and make efforts that the job does not prove to be stressful for them. Appreciative gestures could prove a long way in raising the motivation of these group of people.

Feedback and proper appraisal system needs to be focussed upon as it was found to be ineffective and even absent.

There were cases of senior level employees that showed low levels of motivation and had no clear jobs and responsibilities. The SRI scores of these persons showed high externality and their responses showed indifference. There were even cases where respondents said that they were unsure of what position they held. This might mean that there are employees that are unnecessarily hooked into the system and have no clear job and work profile. These are counted as employees on payroll but lack definition of

responsibilities. Recruitment system again is what is advised to be tightened and jobs to be defined more efficiently.

As the perceived difficulty level of the employees about their job was found to affect their motivation, it is recommended that seniors pay close attention to how an employee responds to challenging tasks and difficulty. They can identify those who work best with higher difficulty and jobs should be assigned accordingly.

Lastly, it is suggested to test levels of motivation of all the nursing staff on a regular basis to identify the measures needed to be taken for maintaining or improving the efficiency of the organisation.

It is understandable that nursing staff will show intrinsic motivation as they choose to enter this profession because of the will to serve the community. The internality levels are also found moderate as this work domain relies on the service give ad the nurses have a fair acceptance of this. The level seen low wherever, thus contribute to factors like organisational processes and procedures, the environment and the HR policies.

7. INSTRUMENTAION

EMPLOYEE MOTIVATION QUESTIONNAIRE

Respondent Code _____

--	--	--

PART I

A. Demographic profile

A.1	Sex	1. Male	2. Female	
A.2	Age in completed years	1. Below 20 Years 2. 20-39 Years 3. 30-49 Years 4. 40-49 Years 5. 50 Years or above		
A.3	Marital Status	1. Married 2. Unmarried 3. Separated 4. Widowed		
A.4	Number of children, if any	1. One 2. Two 3. Three or more		
A.5	Academic Qualification	_____		

B. Work Profile

B.1	Department	_____	
B.2	Position in the department	_____	
B.3	Since how many years have you been working in this profession?	1. <5 Years 2. 5-9 Years 3. 10-1 Years 4. 15 years or more	
B.4	Since how many years have you been working in this facility?	1. <2 Years 2. 2-4 Years 3. 5- 9 Years 4. 10 Years or more	
B.5	What are your daily working hours?	1. <8 Hrs 2. 8 Hrs 3. >8 Hrs 4. Variable (Mention daily average) _____	
B.6	How many people do you supervise directly in the hospital? (If applicable)	_____	
B.7.a	Do you have direct interaction/contact with patients at your position?	1. Yes 2. No	
B.7.b	How much is your average daily patient load? (if answer to B.7.a is yes)	_____	

C. Job Experience

C.1.a	Do you think periodic trainings/seminars help improve an employee's performance?	1. Yes 2. No	
C.1.b	Have you undergone any training during your time at this hospital?	1. Yes 2. No	
C.1.c	Do you find trainings interesting? (If answer to C.1.b is yes)	1. Yes 2. No	
C.2.a	Are you familiar with the organisation's missions and objectives?	1. Yes 2. No	
C.2.b	Does the organization's mission make you feel your job is important? (If answer to C.2.a is yes)		

	1. Yes 2. No	
C.3	Are you aware of your job's key responsibilities, targets and standards? 1. Yes 2. No	
C.4	Have you ever given/received feedback in the organization? 1. Yes 2. No	
C.5	Do you feel your personal factors affect your performance at work? 1. Yes 2. No	
C.6.a	Do you believe that both employee and the organisation have a role in the employee's motivation towards his/her work? 1. Yes 2. No	
C.6.b	Do you feel that motivation of employees should be focused upon in an organization regularly instead of occasional activities/programs/seminar? 1. Yes 2. No	
C.7	How would you rate the difficulty of your job? 1. Extremely difficult 2. Moderately difficult 3. Not difficult at all	

PART II

SOCIAL REACTION INVENTORY

This is a tool to find out the way in which certain important events at our work place and society affect different people.

Each item consists of a pair of alternatives lettered 'a' and 'b'. Please select one statement from each pair which you more strongly BELIEVE to be true to the case as far as you are concerned and not what you think should be true. Also, try to respond to each item independently when making your choice; do not get influenced by your previous choices. This is a measure of personal belief and there are no right or wrong answers.

I MORE STRONGLY BELIEVE THAT:

1. a. Employees get frustrated at work because their seniors are too harsh with them.
b. Employees get frustrated at work because their seniors are too lenient with them.
2. a. Many of the unhappy things in one's organisational life are partly due to bad luck
b. People's misfortunes in organizational life result from the mistakes that they make.
3. a. In the long run people get the respect that they deserve in the organisation.
b. Unfortunately, an individual's worth often passes unrecognised in the organisation no matter how hard he/she tries.
4. a. The idea that seniors are unfair to employees is non-sense
b. Most employees do not realize the extent to which their promotions are influenced by accidental happenings
5. a. Without the right break one cannot rise in the organisation
b. Capable people who fail to rise in the organisation have not taken advantage of their opportunities.
6. a. No matter how hard you try some people just don't like you.
b. People who cannot get others to like them, do not understand how to get along with the others.
7. a. I have often found that what is going to happen will happen.
b. Trusting fate has never turned out as well for me as making a decision to take a definite course of action.

8.
 - a. Becoming a success is a matter of hard work; luck has little or nothing to do with it.
 - b. It's who you know, not what you know, that determines how good a job you get.
9.
 - a. The average employee can have an influence in government decisions.
 - b. The government is run by a few people in power, and there is not much the common people can do about it.
10.
 - a. When I make plans, I am almost certain that I can make them work.
 - b. It is not always wise to plan too far ahead because many things turn out to be a matter of good or bad fortune anyhow.
11.
 - a. In my case getting what I want has little or nothing to do with luck.
 - b. Many times we might just as well decide what to do by flipping a coin.
12.
 - a. Accidents or twists of fate are what really determine the course of a person's life.
 - b. The notion that luck largely determines your life is a fallacy.
13.
 - a. People have so many ulterior motives; it's impossible to determine who actually likes you and who doesn't.
 - b. How you treat people is what determines whether they like you.
14.
 - a. In the long run the bad things that happen to us are balanced by good ones.
 - b. Most misfortunes are the result of lack of ability, ignorance, laziness, or all three.
15.
 - a. With enough effort we can wipe out corruption in government
 - b. It is difficult to have much control over the things people do in office, once they are appointed.
16.
 - a. Sometimes I cannot understand how seniors arrive at the performance appraisal they give.
 - b. There is direct connection between how I work and the appraisal I get.
17.
 - a. A good manager expects people to decide for themselves what they should do.
 - b. A good manager makes it clear to anybody what his or her jobs are.
18.
 - a. People feel lonely in organisation because they do not try to be friendly.
 - b. Despite being friendly and pleasant, if someone doesn't like you, there's not much you can do to change his or her opinion.
19.
 - a. There is too much emphasis on trainings in organisation.
 - b. Training employees is an excellent way to improve organisational performance.
20.
 - a. What happens to me is my own doing.
 - b. Sometimes I feel that I don't have enough control over the direction my life is taking.

PART III MOTIVATION PREFERENCE SCALE

This is a tool to find out the importance given to various things by different people in their jobs. These are listed below.

Please read all the items and then divide them into three categories i.e., More Important, moderately Important and Less Important based on their importance to you.

Then rank order the item categorized as MORE IMPORTANT by giving rank 1 to the item that you think is most important for you, rank 2 to the item that comes next and so on.

STEP 1: PLEASE READ ALL THE ITEMS CAREFULLY WITHOUT PROCEEDING TO NEXT STEP

ITEMS	
a) Opportunity to serve the community	k) Encouragement for development
b) Clearly define job	l) Feedback on performance
c) Appreciation/ recognition of good work	m) Participation in decisions regarding my work
d) Timely confirmation/ promotion	n) Physical security
e) Adequate in-service training	o) Work according to my ability
f) Adequate salary and allowances	p) Status
g) Friendly co-workers	q) Supportive supervisor
h) Necessary equipment to work	r) Judicious workload
i) Monetary incentives	s) Culture of Quality work
j) Comfortable work place (Cleanliness, fans, water, toilets, etc.)	t) Balance between work and family

STEP 2: CATEGORISE ALL ITEMS IN THE FOLLOWING THREE CATEGORIES

MORE IMPORTANT	MODERATELY IMPORTANT	LESS IMPORTANT

STEP 3: RANK ORDER THE ITEMS CATEGORIZED AS MORE IMPORTANT IN STEP 2.

RANK	ITEM
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

THANK YOU

[Type the company address]

8. BIBLIOGRAPHY

1. Franco LM, Bennett S. Health sector reform and public sector health worker motivation: a conceptual framework. *Social Science and Medicine*. 2002 April; 8(58).
2. Kamal Hossain M, Hossain A. Factors affecting the employee's motivation in the fast food industry: A case of KFC UK LTD. *Research Journal of Economics, Business and ICT*. 2012; 5.
3. Mimersbrunn Ett Smaratare Communiy. [Online].; 2014 [cited 2016 April 15. Available from: www.mimersbrunn.se/article?id=3872.
4. What resources are needed. [Online].; 2000 [cited 2016 April 21. Available from: http://www.who.int/whr/2000/en/whr00_ch4_en.pdf.
5. Jennifer M. Newton CMKAKKBJ. The motivations to nurse: An exploration of factors amongst undergraduate. Southern Health, Monash University and Griffith University, Australian Research Council Linkage Grant.
6. Lai HL. Factors associated with career decision in Taiwanese nursing students: A questionnaire survey. *International Journal of Nursing Studies*. 2006;(43(5)).
7. D. C, Behar E. low-perceived work ability, ageing and intention to leave nursing: Acomparision among 10 European Countries. In Hasselhorn HM. *Nursing and Health care Management policy*.; 2006. p. 542-552.
8. Duchscher B, L. C. Multigenerational Nurses in the workplace. *Journal of nursing Administration*. 2004; II(34).
9. Yudhvir , Sunita. Employee's Motivation: Theories and perspectives. *Asian Journal of Multidimensional Research*. 2012 July; 1(2).
10. Lambrou P, Kontodimopoulos N, Niakas D. Motivation and job satisfaction among medical and nursing staff in a Cyprus public general hospital. *PMC*. 2012 November; 8(26).
11. Dussault G, Dubois CA. Human resources for health policies: a critical component in health policies. *BioMed Central*. 2003 April; 1(1).
12. Pask EJ. Self-sacrifice, self-transcendence and nurses' professional self. *Journal of Nursing Philosophy*. 2002; 4(6).
13. Maben J, Latter , Macleod CJ. The theory-practice gap: Impact of professionalbureaucratic work conflict on newly-qualified nurses. *Journal of Advanced Nursing*. 2006; 4(13).
14. Richard CE. Fostering the work motivation of individuals. *Cogtech USC*. 2003: p. 21-29.

15. A.H. M. A Theory of Human Motivation. 7th ed.: Start Publishing LLC; 2012.
16. Herzberg F, S. M, Synyderman B. The motivation to work Wiley J, editor. New York; 1959.
17. Gomes F, Proença T. Nurses' Motivation and Satisfaction at Work: an exploratory study at the Centro. Research Work. University of Porto, School of Economics and Management; 2015. Report No.: ISSN 0870-8541.
18. Al-Enezi N, Chowdhury RI, Shah MA, Al-Otabi M. Job satisfaction of nurses with multicultural backgrounds: a questionnaire survey in Kuwait. Journal of Applied Nursing Research. 2009; 2(22).
19. Vévoda J, IK, Nakládalová M, Marečková J. Motivation and Job Satisfaction of general Nurses working in out patient hospital departments from. In International Conference of General Nurses and Workers; 2011. p. 154-163.
20. Toode K, Routasalo P, Suominen T. Work motivation of nurses: A literature review. International journal of Nursing Studies. 2012 February; 48(2).
21. McCabe R, M. N, Mullen S. Nursing careers: What motivated nurses to choose their profession? Australian Bulletin of Labour. 2004; 4(31).
22. Gupta SC, Jain NP, Purohit N, Mishra H, Verghese MM, Roy S, et al. A study on Identifying Interventions for improving motivation of Health Workers in UP. Jaipur: Institute of health Management Research; 2008. Report No.: 55038-01-IIH-03.
23. Gomes F, Proença T. Nurses' Motivation and Satisfaction at Work: an exploratory study at the Centro. University of Porto, School of Economics and Management; 2015 April.