ATTRITION OF NURSING EMPLOYEES AT ONELIFE HOME HEALTHCARE: A STUDY

Dissertation Submitted to

The IIHMR University, Jaipur

for the partial fulfilment for the award of the degree of

Master of Business Administration (MBA)

in

Hospital and Health Management

by

Dr.P.B. Abhimanyu

Roll: 1165

Under the Supervision and Guidance of

Dr. Nutan Prabha Jain

2022

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DECLARATION BY STUDENT

I hereby declare that this dissertation titled **ATTRITION OF NURSING EMPLOYEES AT ONELIFE HOME HEALTHCARE: A STUDY** is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

Abhimanyu

(Signature)

Name of Student:

Dr.P.B. Abhimanyu

Date 1.7.2022

ONE LIFE
HOME HEALTHCARE

Date: 30th June 2022

INTERNSHIP COMPLETION CERTIFICATION

CERTIFICATE

This to certify that **Dr Abhimanyu P B** in partial fulfillment of the requirements for the award of the degree of MBA (Hospital and Health Management) from the IIHMR University, Jaipur has successfully completed his internship at **Tattva Home Healthcare Private Limited,** Chennai from March 21, 2022 to June 20, 2022.

We wish him all the best for his future endeavors.

For Tattva Home Healthcare Pvt Ltd

Rakesh Inkollu
AGM-HR

TATTVA HOME HEALTHCARE (P) LIMITED
Khivraj Complex II, First Floor, No. 480, Anna Salai, Nandanam, Chennai - 35 1800 425 199 99 www.onelifehomehealthcare.in
A Tattva Group Company

ACKNOWLEDGEMENT

I wish to express my sincere gratitude to my academic mentor Mrs. Nutan P Jain for her constant support and guidance without whose wisdom this research project would ever have been completed. I wish to specially thank my industry mentor Mr. Rakesh Inkollu for his continuous support and in believing in my potential to conduct this study. I wish to thank my industry guide Mr. Dhayanidhi who has helped me with carrying out this project during this period of pandemic.

Also, I sincerely wish to thank my co-interns who've worked with me under Mr. Rakesh Inkollu for their cooperation, ideas and spirit in helping me and my fellow employees of Onelife Home Healthcare.

Last but not the least the Almighty and my mother who have been the pillars of reinforcement in my life.

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LIST OF FIGURES

ABBREVIATIONS

PCA	Patient Care Attender
Sr.PCA	Senior Patient Care Attender
Sr.RN	Senior Registered Nurse
RN	Registered Nurse

CHAPTER 1

1.1 INTRODUCTION

1.1.1 Background:

Over the last two years the Covid-19 Pandemic has brought in severe disruptions leading to a dynamic environment. Employee Attrition is the gradual reduction in staff numbers that occurs as employees retire or resign and are not replaced. Employee attrition can be costly for businesses as the company loses employee productivity, and employee knowledge leading to both direct and indirect impact on the overall output of the organization.

The healthcare industry saw a huge impact due to the pandemic and as well post the covid second wave situation in India where employee attrition was seen high.

Home Healthcare industry in India is a budding industry under the healthcare umbrella where the concept is new to many, furthermore employees of home healthcare industry had to undergo the wrath of covid due to the disease nature and the psychological impact of it entailed.

The future of healthcare as seen changing especially during this pandemic period has its various impacts in various sectors. The concept of home healthcare being new to our country and coupled with its perception and the current event of pandemic the operational intricacies are challenging.

Disruption in the Human resource section of a healthcare organization especially the home healthcare sector has various impacts on the organizational efficiency. Furthermore, the reasons for such disruptions are not studied which this study wishes to unveil to understand the various reasons behind it.

Attrition is of two types, Voluntary attrition and Involuntary attrition. Voluntary attrition can include attrition due to personal reasons or due to change of job location or due to professional reasons where the employee may be unhappy with the current employer. Involuntary attrition refers to that type of attrition where the employee if terminated due to some reasons or when the employee had attained the age of retirement. Here we can understand that involuntary attrition is not much in the employer’s control.

Attrition can be both good and bad for an organization. Attrition can be good in terms of removing or exit of under performers where new better talent can be requited. Here on the opposite side attrition can cause severe underperformance in the organization which can have catastrophic results.

Reducing attrition is the key aim in controlling it. Every Human Resource manager would aim at maintaining the attrition level. Few of the best practices to reduce or maintain the employee attrition rate are:

- Assessment for job and organization culture fitment during the process of hiring
- To offer learning opportunities and skill development opportunities
- To catalyse ways to get regular feedback on employee satisfaction
- To provide a competitive renumeration
- Should conduct in-depth analysis to ascertain the exact reason for the exit of the employees to spot the attrition trend

1.1.2 About the organization:

Founded by N. Ramachandran, erstwhile promoter of India Cements Ltd and T.R. Narayanaswamy, Executive Director, Tattva Group, One Life Health Care aims to usher in professional excellence and innovative thinking to this growing space. We are gearing up to become a pan-India health care delivery platform while being India's first Integrated Specialty Home Health Care Company.

Located at Chennai, Tamilnadu India, Onelife Home Healthcare is a Comprehensive Home Healthcare organization with its Headquarters at Chennai. Operating at different locations in India namely Chennai, Coimbatore, Bangalore, Hyderabad and Pune the future scope of the organization is to function at pan India level. At Onelife Nursing care services are provided as a part of the comprehensive healthcare services and the nursing staffs are background verified and selected through rigorous 3 stage process where candidates are analysed and assessed based on their paraclinical and clinical skills acquired through their education and experience and their background verification is done. Based on their Qualification/Experience they are further categorised into, Patient care administrator, Senior Patient care administrator, Registered Nurse and Senior Registered Nurse.

Patient service is delivered both at hospitals and at their home with majority being home as the location of service delivery.

Onelife Philosophy:

Research indicates that convalescing patients and 90%* of seniors prefer recovering in their home environment, or staying in their own homes as they age. One Life has been conceived as a service that helps people do exactly this – live comfortably in their own homes and get world-class treatment or care, while being surrounded by their loved ones. We are able to do this by diligently bringing together the right professionals, well thought-out care regimes of outstanding clinical quality, backed by latest technology and seamlessly integrated care delivery.

One Life is managed by a proven team of healthcare professionals and experts, who have impeccable credentials, global experience and the right attitude towards this service of home healthcare.

The focus on care that is customised to each individual, makes One Life a trusted aide for patients, their loved ones and also the medical fraternity.

1.1.5 Brand Philosophy:

One Life's philosophy "Live Well Always" is an expression which powers our intent and effort to help people heal in comfort and surrounded by their loved ones. When a person is sick, both the patient and the caregiver go through a difficult phase, which creates unusual demands on one's time, energy, emotions. During such times, One Life aspires to be a reminder of the positive aspect of healing. Be it recovery to perfect health, making life beautiful in old age, easing the pain of a chronic illness or making every moment of the patient's last days count, One Life is a a trusted partner helping people and their caregivers live well always by providing highest quality of life and dignity in death for our clients.

Vision: To be the preferred integrated home healthcare provider for patients, care-givers and healthcare professionals, offering seamless service delivery and best-in-class clinical outcomes in order to "Live Well Always". (https://onelifehealthcare.in/about-us/our-core-beliefs/)

Mission: We will provide world-class, home healthcare services for the people we serve through clinical excellence and innovation. (https://onelifehealthcare.in/about-us/our-core-beliefs/)

CHAPTER 2

2.1 LITERATURE REVIEW

S No:	Source	Authors	Title	Methodology Location & Time of study	Key Findings/ Limitations
1.	Gangopadhyay, S. and Ukil, A., 2022. Being resilient to deal with attrition of nurses in private COVID-19 hospitals: critical analysis with respect to the crisis in Kolkata, India. In Healthcare Informatics for Fighting COVID-19 and Future Epidemics (pp. 353-363). Springer, Cham. https://www.springerprofessional.de/en/being-resilient-to-deal-with-attrition-of-nurses-in-private-covi/19620074	Gangopadhyay, S. and Ukil, A., K.	Being resilient to deal with attrition of nurses in private COVID-19 hospitals: critical analysis with respect to the crisis in Kolkata, India.	Methodology: Cross sectional study Location: Kolkata Year of Publication: 2020	Fails to study the overall/comprehensive psychological health of the nursing professionals
2.	Srivastava, P., Singh, S. and Husain, J., Using A 'Brick'System of Staffing and Duty Rotation for Optimal Utilization of Manpower and Reducing Attrition of Health Care Workers in An Isolation Ward During the Covid19 Pandemic. European Journal of Molecular & Clinical Medicine, 7(3), p.2020. https://www.researchgate.net/profile/Sankalp-Singh/publication/348870737_Using_A_'Brick'_System_of_Staffing_and_Duty_Rotation_for_Optimal_Utilization_of_Manpower_and_Reducing_Attrition_of_Health_Care_Workers_in_An_Isolation_Ward_During_the_Covid19_Pandemic/links/6013e1bf299bf1b33e314e1f/Using-A-Brick-System-of-Staffing-and-Duty-Rotation-for-Optimal-Utilization-of-Manpower-and-Reducing-Attrition-of-Health-Care-Workers-in-An-Isolation-Ward-During-the-Covid19-Pandemic.pdf	Srivastava, P., Singh, S. and Husain, J	Using A 'Brick' System of Staffing and Duty Rotation for Optimal Utilization of Manpower and Reducing Attrition of Health Care Workers in An Isolation Ward During the Covid19 Pandemic	Methodology: Cross sectional survey Location: Command Hospital Lucknow Year of Publication: 2020	Limited demographic coverage, fails to identify the inbred reasons for attrition of nursing staffs

3.	Tomar, A. and Dhiman, A., 2013. Exploring the role of HRM in service delivery in healthcare organizations: A study of an Indian hospital. Vikalpa, 38(2), pp.21-38. https://journals.sagepub.com/doi/10.1177/0256090920130202	Tomar, A. and Dhiman, A	Exploring the role of HRM in service delivery in healthcare organizations: A study of an Indian hospital.	Methodology: Cross sectional survey Location of study: Hospital Year of Publication: 2013	cross-sectional study precludes causal inferences, limited period of study sampling, and small sample size with limited demographic exposure
4.	Johnson, A.R., Jayappa, R., James, M., Kulnu, A., Kovayil, R. and Joseph, B., 2020. Do low self-esteem and high stress lead to burnout among health-care workers? Evidence from a tertiary hospital in Bangalore, India. Safety and health at work, 11(3), pp.347-352. https://reader.elsevier.com/reader/sd/pii/S2093791120302948?token=42CAE1510C27478997DDEC7719D91E69EF38EF34CBE383BA9B32A59240C05E539CD5064787F25A65B04D0090221A0504&originRegion=eu-west-1&originCreation=20220627064634	Johnson, A.R., Jayappa, R., James, M., Kulnu, A., Kovayil, R. and Joseph, B.	Do low self-esteem and high stress lead to burnout among health-care workers? Evidence from a tertiary hospital in Bangalore, India	Methodology: Cross sectional study Location of study: Banglore Year of Publication: 2020	The other factors were not covered.
5.	Shukla, K. and Deb, R., 2017. A qualitative and quantitative study of the reasons of attrition in an Indian hospital. CHRISMED Journal of Health and Research, 4(1), p.6. https://cjhr.org/article.asp?issn=2348-3334;year=2017;volume=4;issue=1;spage=6;epage=13;aulast=Shukla	Shukla, K. and Deb, R.	A qualitative and quantitative study of the reasons of attrition in an Indian hospital.	Methodology: Cross sectional study Location of study: Ahmedabad Year of Publication: 2016	The exit interview responses fail to find the exact reasons of attrition
6.	Reuben, T.C., 2019. Attrition Analysis and Retention Strategies Among Staff Nurses--A Survey Study. Indian Journal of Community Health, 31(2). https://web.p.ebscohost.com/abstract?direct=true&profile=ehost&scope=site&authtype=crawler&jrnl=22489509&AN=138528314&h=%2bhRSqy%2bOc%2bZTuXKCp%2bGq0yWt4bwGMzolsx74aBKQyYqT1OQT2UwBYDlZUmXoZYYxLXxRnPuYLN1R6Yc%2bDHx1Iw%3d%3d&crl=c&resultNs=AdminWebAuth&resultLocal=ErrCrlNotAuth&crlhashurl=login.aspx%3fdirect%3dtrue%26profile%3dehost%26scope%3dsite%26authtype%3dcrawler%26jrnl%3d22489509%26AN%3d138528314	Reuben, T.C	Attrition Analysis and Retention Strategies Among Staff Nurses--A Survey Study	Methodology: Cross sectional study Location of Study: chennai Year of Publication:2019	Cross sectional nature, cannot establish cause to effect, limited period of time
7.	Lakshman, S., 2016. Nurse turnover in India: factors impacting nurses' decisions to leave employment. South Asian Journal of Human Resources Management, 3(2), pp.109-128. https://www.anzam.org/wp-content/uploads/pdf-manager/2587_082.PDF	Lakshman, S	Nurse turnover in India: factors impacting nurses' decisions to leave employment.	Methodology: Cross sectional study Location of Study: south Indian Year of Publication: 2015	Fails to understand the perception of nurses towards their occupation
8.	Sinha, P. and Sigamani, P., 2016. Key challenges of human resources for health in India. Global journal of medicine and public health, 5(4), pp.1-10. https://web.archive.org/web/20180421094640id_/http://www.gjmedph.com/uploads/R1-Vo5No4.pdf	Sinha, P. and Sigamani, P	Key challenges of human resources for health in India	Methodology: Descriptive study Location of Study: Delhi Year of Publication: 2016	Fails to study the exact factors leading to attrition, retrospective in nature
9.	Bhattacharya, I., Ramachandran, A., Suri, R.K. and Gupta, S.L., 2012. Attrition of Knowledge Workforce in Healthcare in Northern parts of India–Health Information Technology as a Plausible Retention Strategy. Bharati Vidyapeeth's Institute of Computer Applications and Management (BVICAM), p.411. https://human-resources-health.biomedcentral.com/articles/10.1186/s12960-015-0055-x	Bhattacharya, I., Ramachandran, A., Suri, R.K. and Gupta, S.L.	Attrition of Knowledge Workforce in Healthcare in Northern parts of India–Health Information Technology as a Plausible Retention	Methodology: Descriptive study Location of Study: New Delhi Year of Publication:2011	Attrition in responses and participants during study and small sample size

			Strategy.		

2.2 RATIONALE

ATTRITION OF NURSING EMPLOYEES AT ONELIFE HOME HEALTHCARE: A STUDY

This study focuses on the factors causing attrition in home healthcare organization. No previous study has been done in home healthcare sector in respect to this research topic and to extensively explain about the factors of attrition. The previous studies have been done in context to different demography and has been studying in different verticals.

Therefore, this study is conducted with its focus on the attrition of nurses in onelife home healthcare organization focusing further on the trends and on the factors leading to it.

2.3 RESEARCH QUESTION

What is the attrition rate for onelife home healthcare for the year 2020-2021?
What are the causes for nursing staff attrition at Onelife Home Healthcare for 2020-2021?

2.4 OBJECTIVES

To study about the attrition rate of nursing staff in Onelife home healthcare for the year of 2020-2021 and to study the factors of attrition and to suggest ways to reduce attrition.

CHAPTER 3

3.1 METHODOLOGY

Type of study: Descriptive study, the study is retrospective in nature analysing the recorded data of the exit interview forms of ex nursing employees of Onelife home healthcare who had quit their job during the period of 2020-2021 the exit interview sheets are reviewed and further analysis was done

Period of study: The study was conducted during the month of June 2022 from 13.6.2022 to 17.6.2022

Study area: The study area is Onelife Home Healthcare

Study population: Inclusion criteria:

- Ex Nursing employees of Onelife Home Healthcare who exited the organization in the year 2020-2021

Sampling and sample size: purposive sampling is done. A sample size of 91 was derived based on the exit interview sheets. Further 86 exit interview sheets were selected out of the 91 sheets based on its completeness. It was found that certain exit interview sheets were not filled.

Tool for study: The tool used for the study is the Exit interview sheets which contained the data of staffs who had left Onelife home healthcare from 2020-2021. The exit interview sheets were self-administered in nature.

Data collection: The data for this respective study was collected using the exit interview sheets available with the HR department at Onelife Home Healthcare. The exit interview forms of employees who had left the organization from 2021-2022 was collected from all the branches of Onelife Home Healthcare and was analysed. 86 exit interview sheets were selected out of 91 sheets due to omission of certain sheets as there were incomplete data. Sheets which were from the exclusion criteria was not included.

Analysis: The analysis was done focused on the specific objective to identify the factors associated with attrition. The exit interview questionnaire was reviewed for 86 Ex-employees of Onelife home healthcare. The analysis is done in percentage basis

Ethical view: prior consent from the organization was taken to analyse the data provided by them and a mutual understanding of trust was made that there would be no misconduct academically like plagiarism, data falsification, fabrication or privacy breech.

CHAPTER 4

4.1 RESULTS & DISCUSSIONS

A total of 86 respondents (Nursing staff) were studied and analysed.

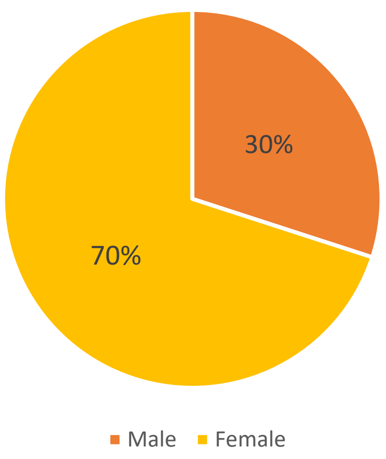

Figure4.1 Percentage distribution of nursing staff by their Sex

Majority of the Nursing professionals were Females being 70% and Males being 30%.

Age of the respondents was between 20 years to 35 years with an average respondent being from the age group of 27.5 years, With an average working experience of 5years.

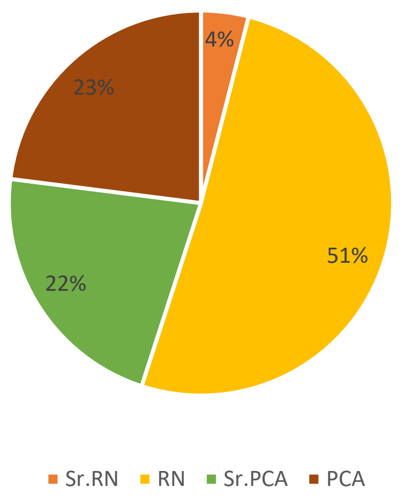

Figure 4.2 Percentage distribution of the respondents by their designation

The designation of the nursing staff was first recorded and it was seen that the majority were registered nurses with a percentage of 51% followed up by Senior Patient care administrators at 22% and by patient care administrators at 23% with senior registered nurses being at the least with 4% of the cumulative responses collected.

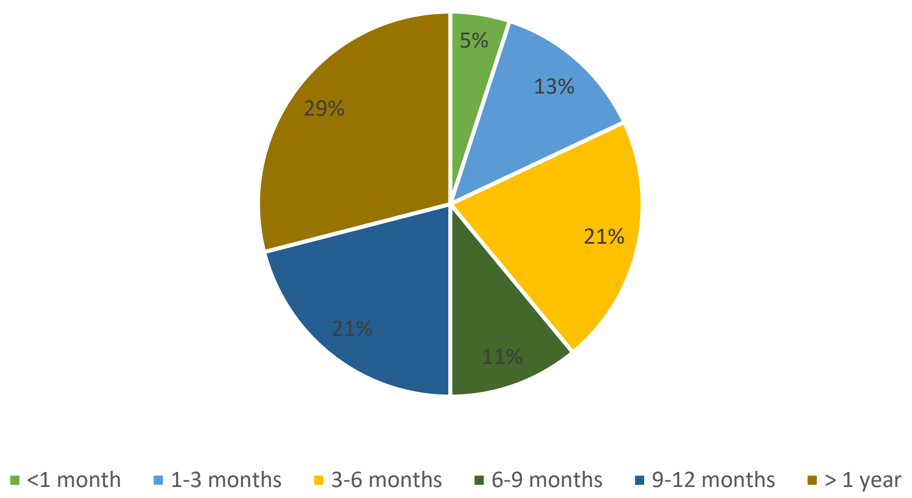

Figure 4.3 Percentage distribution of respondents by their active employment

The months of active employment was analysed using the employees joining date and date of resignation, the highest percentage was found to be that of 29% of employees who were working for more than 1 year in the organization followed by 21% of both 3 to 6 months of employment and 9 to 12 months of employment. Furthermore, the data shows that 13% of employees were working for 1 to 3 months followed by 12% working for 6-9 months with a least of 5% of employees who worked lesser than a month in the organization. Here we can notice the premature attrition rate being 5%.

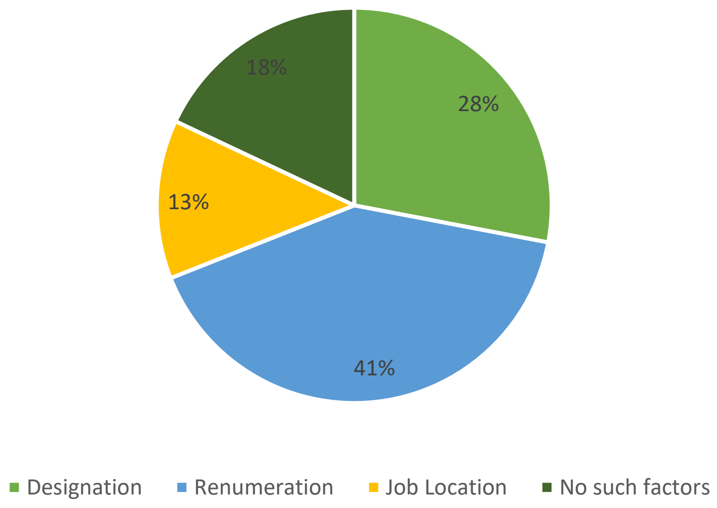

Figure 4.4 Percentage distribution of respondents by their perception on Factors attracted to Onelife

With further analysing the factors attracted them towards Onelife organization it was seen that the highest responses were in favour of renumeration being a driving factor at 41% followed by designation at 28%. 18% of the respondents didn't find any factors enlisted appealing for them and had found their job at onelife to be as same as their previous ones and 13% of the respondents found the job location to be of their choice which drove them to work in the organization.

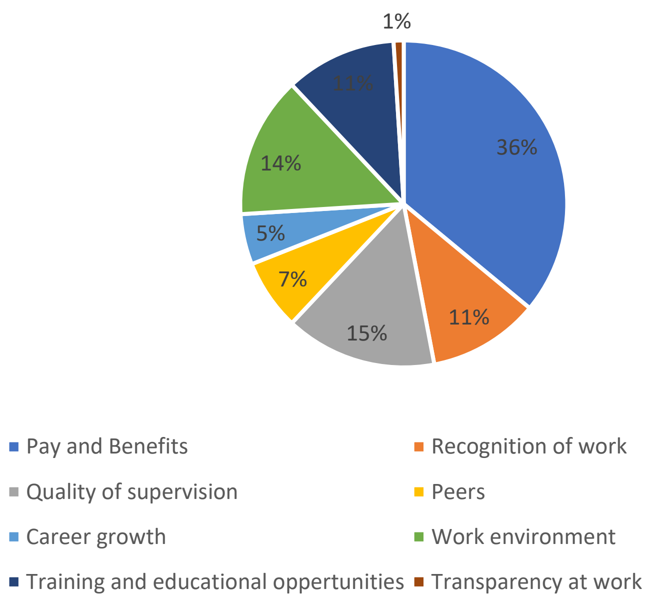

Figure 4.5 Percentage distribution of respondents by their perception on factors they enjoyed at onelife

With recording the factors which they like while working at the organization it was noted that the majority of the respondents liked the pay and employee benefits factor at 36% which ranges from hostel facilities provided to the employees to travel reimbursement and other staff welfare measures. Following at the second place the quality of supervision at 15% was the most liked factor by the respondents which is followed by work environment at 14% and recognition of work at 11%. At 11% stands the training and educational opportunities which is followed by working peers at 7% and career growth at 5% and transparency at work at 1%

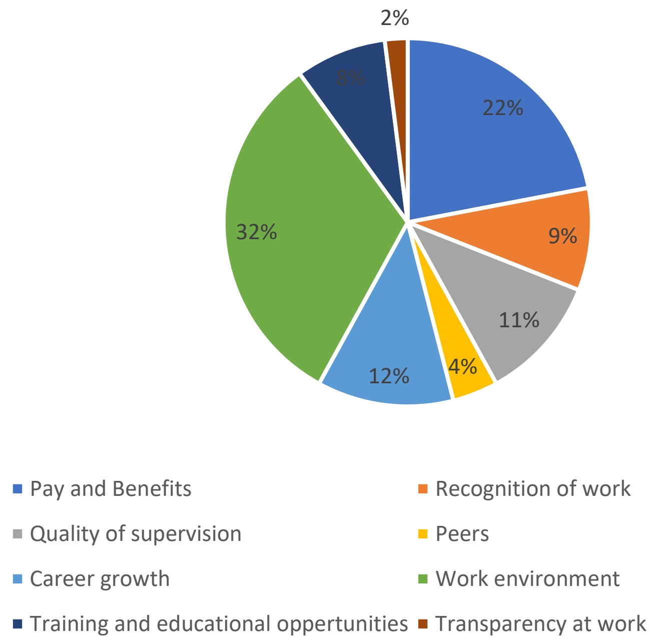

Figure 4.2 Percentage distribution of respondents by their perception on Least enjoyed about job

With recording the factors which they liked the least while working at the organization it was noted that the majority of the respondents least liked the work environment factor at 32%. Following at the second place was the pay and benefits factor at 22% followed by career growth at 12% and quality of supervision at 11%. at 9% stands the recognition of work factor and at 8% the training and educational opportunities which is followed by working peers at 4% and transparency at work at 2% at the least liked factors which they liked during their time in the organization.

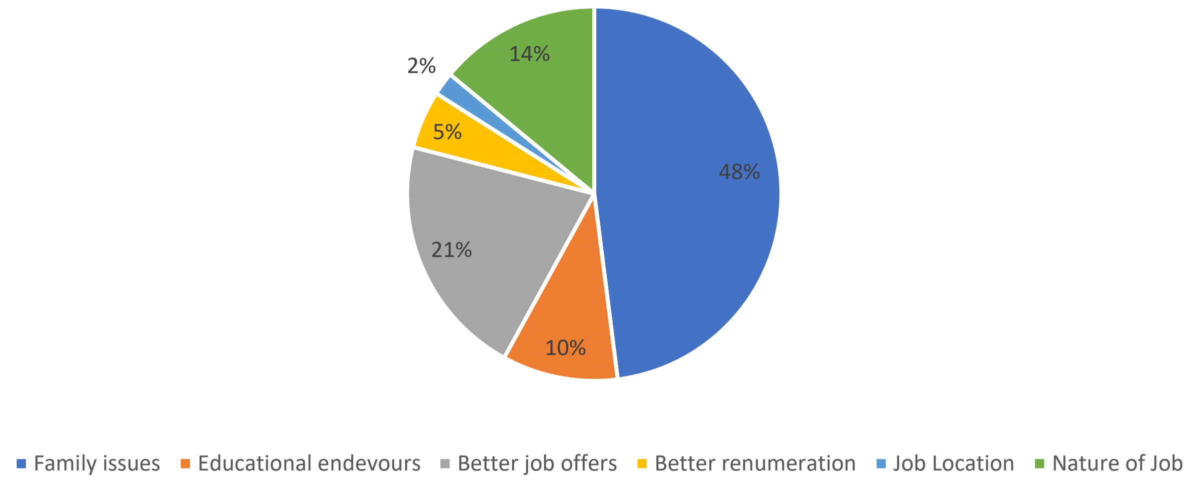

Figure 4.3 Percentage distribution of respondents by factors in the decision to leave

With analysing the factors which was most important for them in taking the decision to leave the organization its well seen that the majority had faced issues related with their family which stood at 48% followed by an opinion/an offer of a better job opportunity at 21%. further its seen that 14% disliked or considered the nature of job as the driving factor for them to leave which is then followed by educational endeavours at 10% and better renumeration factor at 5% and job location at 2%.

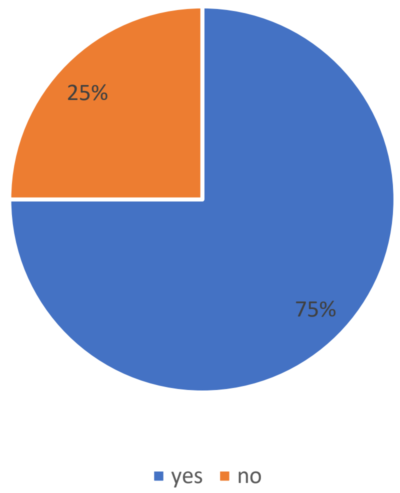

Figure 4.4 Percentage distribution of respondents by their recommendation of employment

It was seen that 75% of employees found it acceptable to recommend employment post their experience of work at onelife organization. 25% were not inclined towards recommending employment to their friends or acquaintance.

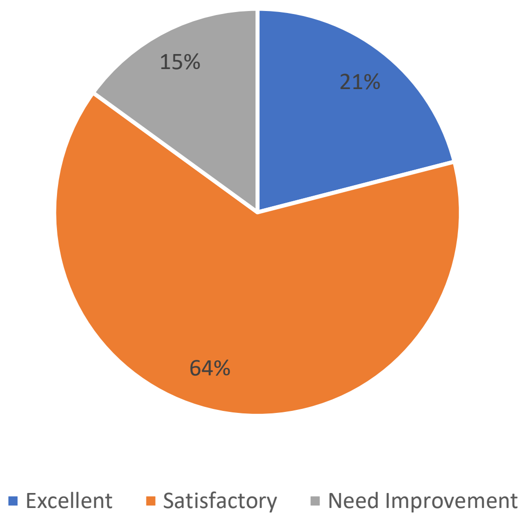

Figure 4.5 Percentage distribution of respondents by their self-assessment of performance

When the self-analysis of their performance at onelife was done through a question, it was seen that 64% of employees found their performance to be satisfactory followed by 21% and 15% to be excellent and need improvement respectively.

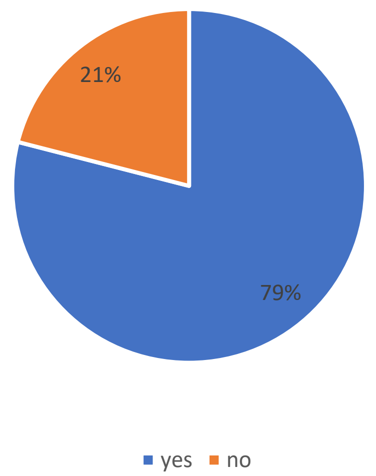

Figure 4.6 Percentage distribution of respondents by their perception on accuracy of Job description

It was seen that 79% of respondents found the job description to have been explained accurately where as 21% didn't find the description to be satisfactory/accurate.

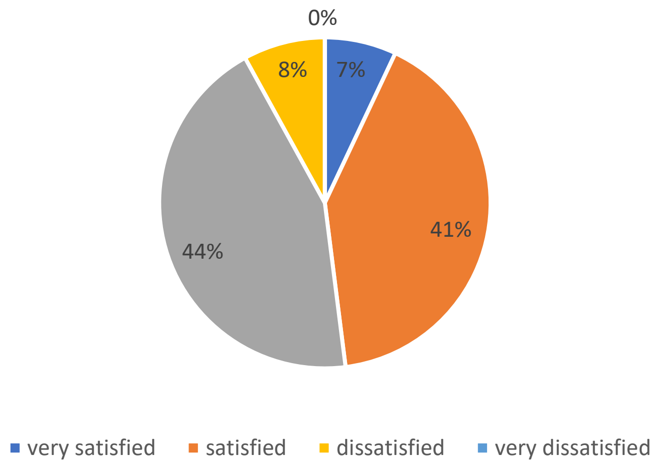

Figure 4.7 Percentage distribution of respondents by their perception on job satisfaction at Onelife

On analysing Job satisfaction, it was noted that 44% of the respondents found it to be neutral neither being satisfied or dissatisfied. Further 41% felt to be satisfied and 8% respondents were dissatisfied with their job. 7% were very dissatisfied with their job at Onelife organization.

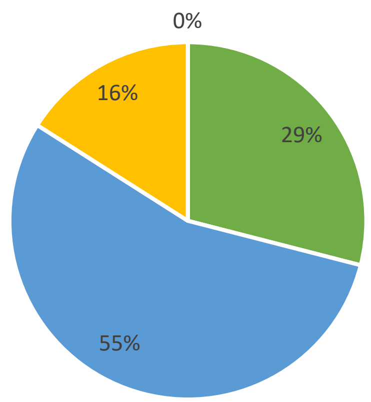

Figure 4.8 Percentage distribution of respondents by their perception on factor of treating them with respect and courtesy

With analysing their perception towards being respected/ regarded for their position and work it was found that 55% found it to be good followed by 29% being excellent and 16% fair.

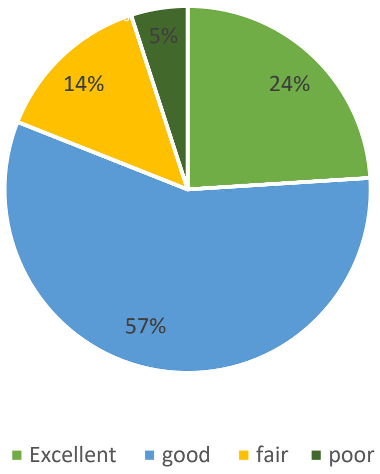

Figure 4.13 Percentage distribution of respondents by their perception that they were led by example at Onelife

Led by example was one of the questions to the respondents where 57% found to be good where they were led by an example in their work and 24% found excellent. 14% found it to be fair and 5% found it poor.

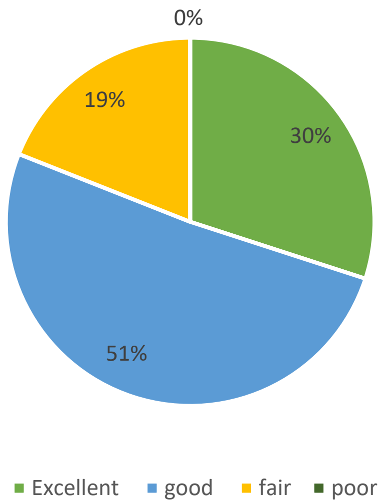

Figure 4.14 Percentage distribution of respondents by their Professional Guidance

Guidance during their term in Onelife was recorded. It was found that 51% found it to be good and 30% found it to be excellent. 19% found it to be fair.

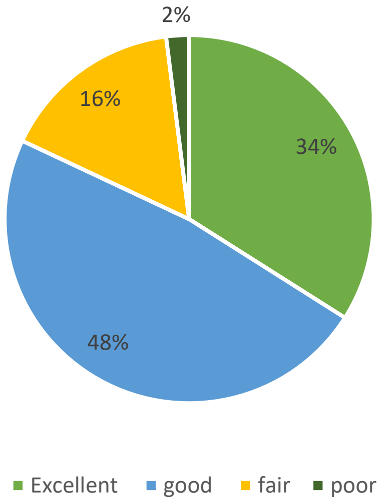

Figure 4.15 Percentage distribution of respondents by their perception that they were Motivated and recognized appropriately

Recognition and motivation during their work period was recorded from the participants, it was seen that the majority of 48% responded that motivation and recognition to be good followed by 34% as excellent furthermore 16% as fair and 2% as poor

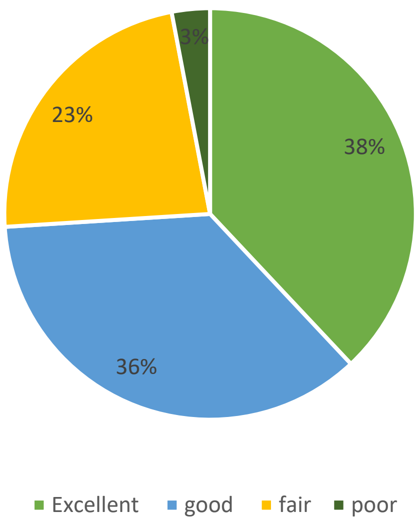

Figure 4.16 Percentage distribution of respondents by their perception on learning and training at Onelife

The in-house Training and learning opportunities provided by Onelife home healthcare was recorded, its seen that 38% of the respondents felt it to be excellent followed by 36% as good. Furthermore 23% responded as fair and 3% as poor.

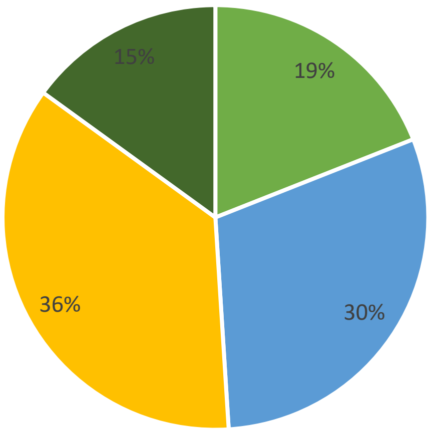

Figure 4.17 Percentage distribution of respondents by their perception on overtime demands

The work timings at Onelife home healthcare is of a 12 hour shift. In terms with overtime duty and demands from the nursing employees it was recorded that, 36% of the employees found it to be of fair in nature while 30% found it good. Furthermore 19% found it excellent and 15% found it poor.

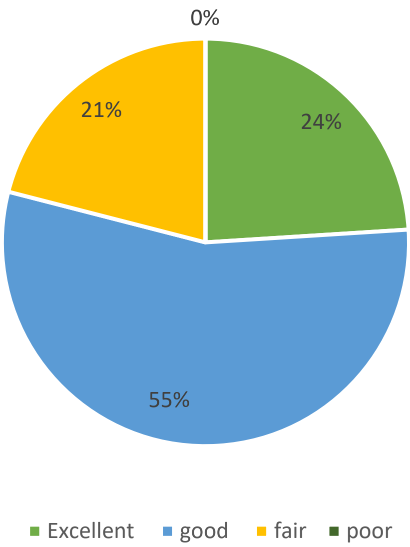

Figure 4.18 Percentage distribution of respondents by their perception on their relationship with fellow peers

With recording the relationship of the employees in respect with their peers as home healthcare services require working in close accordance, it was recorded that 55% of respondents found it to be good followed by 24% as excellent and 21% as fair.

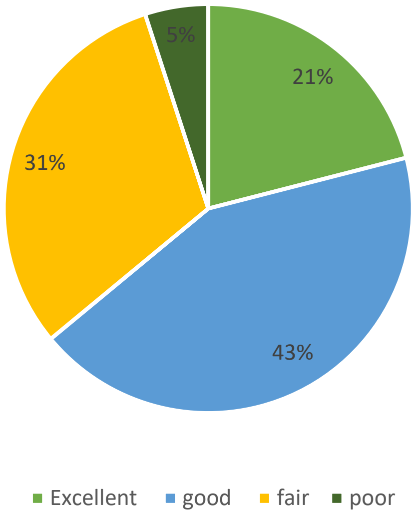

Figure 4.20 Percentage distribution of respondents by their perception on Freedom to operate

With recording the freedom to operate factor, it was seen that the majority of 43% found it to be good followed by 31% as fair. Further 21% found it excellent and 5% as poor.

Attrition rate:

The attrition rate of the year 2020-2021 was first calculated to understand the rate of attrition of nursing employees at Onelife. All the branch nursing staffs were taken into consideration. With a total nursing staff strength of 220 staffs in the beginning of the year and with the end of the year count being 192 with the number of nursing staffs who left being 91 it was further calculated and the attrition rate was found to be 34.72%. It is understood that during the covid19 pandemic onset there was heavy attrition in all health sectors and home healthcare was no excuse. Here we also should note that the total number of exits were considered and not the sample size of this study. It is known that 91 nursing staffs had quit work during the period of 2020-2021

Demographic Variables:

With this study carried out where a general analysis of the attrition factors and trends are analysed, we are able to observe that the levels of several factors to be pointing towards the innate reasons that the employees at Onelife Home Healthcare had experienced. The only Demographic variable recorded was Gender, Gender as we know plays a vital role in professions involving physical demands or long working hours. Majority of our nursing staffs being females it is furthermore understood that the following variables analysed are also going to be reflecting the opinions of the same. Here as we perceive with the past and current trends, Nursing profession is known to be dominated or the majority of the working professionals are females compared to males. This can be due to the preconceived stigmatized perception or due to the comfort of female professionals in the job involved. Further when the number of male RN's were compared with female RN's it was understood that the there was a difference of 6.8% of staffs where the males stood at 46.6% and females at 53.4%. The designation of the other nursing categories was also studied and was found that the female professionals were the major number.

Professional Variables:

Further in this study the professional variables were well analysed as the exit interview questionnaire was pre- set. Here starting with the designation of the employees, it was observed that the majority of the nursing professionals who had resigned in the year 2020-2021 were the registered category of nursing professionals, further the reasons perceived from this output can be understood that the intake of the RN's was the majority amongst the four categories. It is further understood that the senior patient care administrators were the second highest designation. Here we have to understand that the qualification of Sr.PCA is no different from RN but the previous working professionals are not yet registered with the local nursing council. Further the statistics show us that in the third place it is the PCA who are professionals with a ANM degree   The designation of the nursing staff was first recorded and it was seen that the majority were registered nurses with a percentage of 51.2% followed up by senior Patient care administrators at 22.1% and by patient care administrators at 23.3% with senior registered nurses being at the least with 3.5% of the cumulative responses collected.

The months of active employment was analysed using the employees joining date and date of resignation, it was found out that the variables depended upon many external and internal factors like the least liked factor and the most liked factor for the employees and the factors which attracted the employees towards the organization. It was further noted that the reason for attrition was high due to family/personal issues or situations faced by the employees which cumulatively resulted to be 47.7%. furthermore 74% of the employees found the work to be entitled enough to be recommended to their peers. Moving on to the variables of job satisfaction and self-assessment of their own performance the majority were satisfied or neutral with least amounts dissatisfied with their performance, which denoted their self-involvement in their work.

We can see that the majority of respondents responded that they experienced or believed that there is professional growth in the organization, this is one of the important factors for employees looking forward to work for a long time in an organization and we can observe that the margin of difference is not much with 45.3% of the respondents responding no as an answer. Here coupled with growth in the longitudinal axis staff motivation and recognition is of equal importance, it was seen that staff motivation was very good with the majority responding good and excellent as their choice of answer. With these factors learning/ further training of employees was also captured where we can see that the majority felt it to be affirmative with their expectations.

Duty hours for nursing staff is usually lengthy, in onelife home healthcare there is a fixed duty hours/ timing of 12hour shifts. The perception towards this variable was captured and we can further observe that the majority of responses were fair and poor where we can understand that employees found the 12 hour shifts to be demanding, ironically 48.8% of the respondents found it to be excellent or good which is contradicting to the majority of responses with a negligible difference.

Freedom to operate was analysed and it was seen that the majority found it to be excellent and good which signifies their environment of work which was favourable for them to work in accordance with their decisions or where they felt their individuality or independence.

Recommendations:

Even as the study was conducted with only 86 respondents the observations were fruitful enough to suggest few recommendations to the organization and to the readers of this work. It was noted that 60% of the staffs irrespective of the designation resigned their positions even before completing 12months/ 1 year of service. It is to be noted that the premature attrition here at Onelife stands at 5% were staffs resigned in the first month itself. Looking into the data further we can understand that the majority of nursing staff had faced family issues as the main concern, here we can understand that the stability of the nursing staffs is questionable and unpredictable based on their personal circumstances. Through these observations the recommendations to the organization would be to review their HR policies pertaining to nursing staffs and review their leave and working hours. It is to be noted that the current recruitment process involves series of interviews where stability of the nursing staff is assessed but is limited due to the ambiguous reasons which are later known during their resignation. In addition to the policy revision, it is recommended that the staffs are selected with more rigorous process which can improve the quality of intake.

CHAPTER 5

5.1 CONCLUSION

Home Healthcare is a budding industry in the healthcare vertical where the masses are yet to get awareness about these services. Further it is observed with the growing market trends that the home healthcare industry will be growing exponentially where external demand for human resources apart from typical healthcare institutions will be created leading to a wider employment scope and more dynamic human resource arena in the field of healthcare. The recent disruptions in the field of healthcare which has welcomed home healthcare to be an arising service will soon be considered as an integral part of comprehensive healthcare delivery system. This study was done with available data with the organization in the form of exit interview, many important factors leading to attrition or aiding the employees to stay in the organization is not captured as it was a pre-set questionnaire which was revised. Here this descriptive study had a sample size of 86 participants within the organization limiting the scope of this study. With the current results we can understand that there are gaps which are yet to be filled in the field of human resources which are yet to be analysed in a larger scale. Moreover, the wake of the Covid19 pandemic must also be taken into account which could have directly or indirectly impacted on the nursing staffs. The nursing fraternity is growing as we speak and soon, we can see them in diverse levels and branches of healthcare with home healthcare being a bigger scope for them to work.

Through this study it is expected to be a point of initiation for further studies with different nature to clearly analyse and better understand the home healthcare industry to better infer and understand the various factors impacting the nursing staffs.

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