

## Causes of Absenteeism Rate among Staff Nurses at Medina Maternity and Child Hospital

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### ABSTRACT

**Background:** Multiple factors are associated with absenteeism among nursing staff around the world with an increasing rate that affects the delivery of health care to patients and reflects non-satisfaction of the nursing staff. **Objectives:** Evaluating the factors associated with high rates of absenteeism among staff nurse in Medina Maternity and Child Hospital (MMCH).

**Methods:** This is a descriptive study that was conducted among a sample of 405 nurses working at MMCH. The study tool included a questionnaire sheet of 2 parts as demographics and causes of absenteeism. All the nurses were interviewed and asked to fill up the questionnaire sheet.

**Results:** Most of the included nurses had Diploma degree and about 5 years of experience (50.4%). The majority of nurses had good knowledge about the effects of absenteeism on work performance. The most common etiological factors associated with absenteeism were no overtime payment (75.6%) and social reasons among 77.8 % of nurses.

**Conclusion:** The increasing rates of absenteeism among nursing staff working in MMCH were not founding the payment for overtime work followed by social reasons for nurses. Thus, considering over-time and working status as shift times and numbers of nurses per shift are important motivators that could decrease the rates of absenteeism among nursing staff and increase the rates of nurses satisfaction to their jobs.

**Keywords:** Staff Nurses, Absenteeism, Rates, Medina, KSA.

### INTRODUCTION

Absenteeism has many definitions including missing a day or many days of the work. Another definition could be unplanned absence without excuse or warning<sup>(1,2)</sup>. It is a worldwide problem with an exaggerated rates which could result in hindering the delivery of health care to patients that associated with shortage of number of available health staff<sup>(3)</sup>. The absenteeism of employee is Employee absenteeism which is a remarkable issue that was found to affect the productivity of all work sectors all over the world<sup>(4)</sup>. Many studies have been conducted to assess the absence among health staff members especially among nurses which was the focus of researchers showing that sickness is the most prevalent cause for absence<sup>(1)</sup> as well as job satisfactions and turn overs<sup>(5)</sup>. The absence of nurses is significantly associated with burden of health care settings which impose many costs for health organizations<sup>(6)</sup>.

Also, it could result in increasing the work load on other nurses as well as comprising the patients' health outcomes thus increase the mortality rates<sup>(7,8)</sup>.

The overload in work was a result of absenteeism among nurses that could decrease the motivation of the work. Nurses are often

overloaded when covering the absence of their absent colleagues, which might decrease their job motivation and productivity and could differ from one setting to another one in the same hospital<sup>(4,9)</sup>. This study examines the causes of absenteeism among hospital nurses in Madinah, Saudi Arabia.

### METHODS

#### *Study Design*

A descriptive cross sectional study that was conducted at medina maternity and child hospital, Kingdom of Saudi Arabia (KSA). *Study Population:*

A random sample of 405 nurses were included in the study from different departments from both genders. All the nurses were interviewed and asked to fill up a questionnaire sheet to assess the causes of absenteeism.

#### *Study tools*

The study tool was a structure interview sheet that included two parts. The first part included questions related to the demographics of the nurses including age, sex, education and marital status. The second part of the sheet included a questionnaire to assess the causes of absence. The questionnaire was approved by the supervisors after reviewing the available literature and studies

associated with the causes of absence among nurses then validated and translated into simple Arabic.

#### **Ethical Considerations**

Ethical approval was obtained from the ethical committee for human research and faculty of Nursing, Taibah University. All the included nurses gave a consent approval for participating in the present study.

#### **Statistical analysis**

The data were fed up into windows and analyzed using SPSS V. 20. The data were shown as distributions and percentages.

## **RESULTS**

### - **Demographics of the included subjects**

Table (1) showed that the age of included nurses was less than 20 years old among 4% of them, from 20-30 years among 68.3% of them and 27.7% were older than 30 years. Most of the nurses were females (98.5%) and 76% were holding Diploma degree, while 23.5% were graduated and only 0.5% of them within different level of education. The nurse's experience was from 2-5 years among 50.4% of them and from 6 months to 1 year among 39%.

**Table (1): Demographics of Included nurses**

Age (Year)	No.	Percentage (%)
Less than 20 years	16	4
20-30 years	277	68.3
More than 30 years	112	27.7
<b>Gender</b>		
Female	49	98.5
Male	6	1.5
<b>Level of education</b>		
Diploma	308	76
Bachelor degree	95	23.5
Other	2	0.5
<b>Nurses' experience</b>		
<6 months	43	10.6
6 months- 1 year	158	39
2-5 years	204	50.4

### - **Distribution of the studied samples regarding their daily work practices**

Table (2) showed the distribution of the nurses regarding daily work practices as the majority of nurses may take leave more than 5 days per month (43.5%), 87.2% attend daily on duty time, 71.9% thought that absenteeism could delay the work performance, 75.3% help in the work of an employee, 49.4% thought that the working environment was fair, 67.4% thought that there is a work pressure in their department and 50.6% face strict supervision as a pressure from their organization. The nurses thought that good employee relation (27.8%), recognition of the work (27.7%), Incentive and bonus based on perform (27.7%) and finally work environment (16.8%) could decrease the rates of absenteeism.

**Table (2): Distribution of the studied samples regarding their daily work practices**

<b>Duration of the leave taken by nurse in a month</b>	Frequency	Percent
1 day	92	22.7%
2-3 days	108	26.7%
4-5 days	29	7.1%
More than 5 days	176	43.5%
<b>Is the nurse attending the daily duty on time?</b>		
Yes	353	87.2%
No	52	12.8%
<b>Nurse opinion about the effect of absenteeism</b>		
Cause work stress	114	28.1%
Delayed work performance	291	71.9
<b>Nurses satisfaction level about your performance</b>		
Highly satisfied	123	30.4%
Neutral	250	61.7%
Dissatisfied	24	5.9%
Highly dissatisfied	8	2%
<b>Are the nurses helping in the work of an employee</b>		
Yes	305	75.3%
No	100	24.7%
<b>Nurse opinion regarding work environment</b>		
poor	27	6.7%
fair	200	49.4%
good	101	24.9%
excellent	77	19%
<b>The nurses thought regarding the work pressure on the job</b>		
No, there is no work pressure	132	32.6%
Yes, There is a lot of work pressure	273	67.4%
<b>Type of work pressure the nurse facing in the organization</b>		
Improper environment	200	49.4%
Strict supervision	205	50.6%
<b>Nurses opinion about the factors to reduce the absenteeism</b>		
Good employee relation	113	27.8%
Work environment	68	16.8%
Recognition of the work	112	27.7%
Incentive and bonus based on perform	112	27.7%

- ***Nurse's beliefs regarding the causes of absenteeism:***

The most common causes of absenteeism among the included nurses were shortage of staff (59%), increased work load in the unit (71.9%), no overtime payment (75.6%), easy access of sick leaves (50.1%), social reasons (77.8%), no action taken for repeated absence (77.1%), lack of

motivation (65.4%), lack of responsibility (58%), low knowledge and practical skills about certain procedures (64.2%), difficult of transportation (68.4%) and difficulty to take permission during the shift (74.8%). However, the least common causes were inability to understand or implant the sick leave policy and ignorance about hospital rules and practice (46.4%).

**Table (3): Nurse's beliefs regarding the causes of absenteeism**

	Yes	No
Shortage of staff	239 (59%)	166 (41%)
Increase workload in the unit	291 (71.9%)	114 (28.1%)
No overtime payment	316 (75.6%)	89 (24.4%)
Easy access of sick leave	203 (50.1%)	202 (49.9%)
Social reasons	315 (77.8%)	90 (22.2%)
NO action taken for repeated absences	288 (71.1%)	117 (28.9%)
Sick leave policy is not strictly understood and implemented	178 (44%)	227 (56%)
Lack of motivation of the staff	265 (65.4%)	140 (34.6%)
Lack of responsibility	235 (58%)	170 (42%)
Lack of knowledge and practical skills about certain procedures	260 (64.2%)	145 (35.8%)
Difficult of transportation	277(68.4%)	128(31.6%)
Ignorance about hospital rules and practice	188 (46.4%)	217(53.6%)
Difficult to take permission during the shift	303 (74.8%)	102 (25.2%)

## DISCUSSION

Recent studies showed that absenteeism alone wouldn't lower the quality of the health care for patients unless is associated with high patient load with high nurse absenteeism<sup>(7, 8, 10)</sup>.

The present study showed that the absence among nursing staff was attributed to social reasons in (77.8%), no overtime payment (75.6%), difficult to take permission during the shift, increase in the work load in the unit (71.9%) and no action taken for repeated absences (71.1%).

In the same respect, the social reasons and family matters were the most common causes of nurses absence in KSA and in South Africa<sup>(11, 12)</sup>.

Remarkably, the factors related to work and organization policies as well as restrictions of overtime payment were found to be significantly affecting the rates of absenteeism including work load, no overtime payment and difficulty to take permission for absence. These results were in agreement with those results showing that increase the rates of absenteeism among nurses<sup>(13, 14)</sup>.

Work load and other stressors form organizations are also predictors of absenteeism and dissatisfaction among the staff members<sup>(15)</sup>. Also, ineffective routine, work pressure, inability to manage the working tasks as well as uncomfortable environment have a major influence on the rates of absence<sup>(9, 16)</sup>.

The present study has some limitations including that the rates of absenteeism per month were reported by the nurses themselves and not from recorded files. The data about their daily

practices were also provided by the nurses themselves and could be interrupted because they

may want to show themselves as efficient nurses. The third limitation is that the study should include the health regulation and absenteeism policy of the hospital.

This study has also some strength factors as it presented the point of view of the nurses toward the causes of absenteeism and the proper way to solve this problem as taking overtime for extra work and managing the work status as well as implanting good employee relationship.

## CONCLUSION

The increasing rates of absenteeism among nursing staff working in MMCH were because of not founding the payment for overtime work followed by social reasons for nurses. Thus, considering over-time and working status as shift times and numbers of nurses per shift are important motivators that could decrease the rates of absenteeism among nursing staff and increase the rates of nurses satisfaction to their jobs.

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