

Knowledge, Attitude and Practice in the use of the Establishment code among Health Care Assistants in selected government hospitals in Colombo Regional Director of Health Services division

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Abstract

Introduction All the rules and regulations needed to be followed by the government servants are mentioned in the Establishment code (E-code) of Sri Lanka. All government employees should be compliant with the E-code when they work as public servants.

Objective To assess the knowledge, attitude and practices towards E-Code of Health Care Assistants (HCAs) in selected government hospitals in Colombo Regional Director of Health Services (RDHS) division.

Methods A cross sectional study was done among 392 HCAs from base hospitals and divisional hospitals in Colombo RDHS division. A self-administered questionnaire was used to collect the data to assess the knowledge and attitudes of HCA on selected aspects of E- code. To assess the practical aspects of E-code, information related to the violation of E-code by HCA was collected using data collection form and observation check list. Data analysis was done using SPSS version 21.

Results The response rate was 85.4%. The overall knowledge of the respondents was good (89.1%). Their knowledge was highest for "Leave and Service" (94.9%) and lowest for "Disciplinary Procedures" (69.5%). Good attitudes towards the E-code were observed among 56.0% of the respondents. The complete uniform was not worn by 13.5% of HCAs. Absenteeism was observed among 28% of HCAs while 18% reported late to hospital.

Conclusion Majority of HCAs had good knowledge on E-code. Their attitude towards contents of E -code was average. The practices of HCAs in relation to E-code were not satisfactory with concerns over wearing complete uniform, absenteeism and punctuality.

Key words: E-code, RDHS, HCAs

Introduction

Public administration is the implementation of the government policy and it is an academic discipline. All the rules and regulations which are needed to be followed by the government servants are mentioned in the Establishment code (E-code). All the employees in the government organizations of Sri Lanka should

be compliant with the E-code when they work as public servants.

Employees should be able to comprehend the relevant E-code regulations according to their educational status. Effectively produced, educational material can change the image of a

population, therefore we must consider which information is intended and what is to be expected¹.

There are 26 RDHS divisions in Sri Lanka. Under the purview of Colombo RDHS divisional administration, there are 2 Base Hospitals, 9 Divisional Hospitals available.

Health care assistants (HCA) are unskilled minor staff employees employed in all government health care institutions. To provide quality health care for patients, HCAs must have good knowledge and practices about public administrative structure. As revealed from the preliminary discussions held with experts, they have very poor knowledge on E-code. As a consequence, the hospital administrators find difficulty to manage this category of staff. Therefore, assessing their knowledge was very important to detect whether they adhere to the relevant sections of E code.

This study was conducted to assess the knowledge, attitude and practices towards Establishment Code of HCAs in selected government hospitals in Colombo RDHS division.

Methods

A cross sectional study was done among all the HCAs who were more than 3 months in the service in the Base hospitals and Divisional hospitals in Colombo RDHS division. All the 392 HCAs who were available at the time of study were included in this study. Non probability consecutive sampling was done.

A self-administered questionnaire (SAQ) was used to collect the data to assess the knowledge and attitudes of HCA on selected aspects of E- code.

The questionnaire included 30 questions to assess the knowledge of HCAs on E-Code and it included knowledge on 'Leave and Service', knowledge on 'Discipline' and knowledge on 'Miscellaneous rules and regulations on E- Code'.

The 5 statements on attitudes of HCAs on E- Code were assessed using Likert scale. The scoring method was decided after taking experts opinion.

To assess the practical aspects of E-code information related to the violation of E-code (wearing of uniform, absenteeism and

punctuality) by HCA was collected using data collection form and observation check list. Incidence of not wearing uniforms while on duty was recorded on the check list by the Principle Investigator (PI) using indirect observation method. This was done on the day of distributing questionnaire to HCA without informing them. The complete uniform includes wearing socks and shoes with the uniform. Absenteeism was considered when HCAs did not attend duty without taking prior approval for leave. The punctuality was considered when HCAs did not attend duty on time. Observation check list was analyzed using frequencies.

To analyze Absenteeism following equation was used:

$$\text{Absenteeism Percentage} = \frac{\text{No of employees absent during week days of the month}}{\text{Total no of employees working in the institution} \times 20} \times 100$$

To analyze late comers following equation was used:

$$\text{Late comers Percentage} = \frac{\text{No of employees coming late to work during week days of the month}}{\text{Total no of employees working in the institution} \times 20} \times 100$$

Ethical clearance was obtained from the Ethic Review Committee, Post Graduate Institute of Sri Lanka and necessary approvals were obtained from RDHS and Director of Health Services and Medical Superintendents of participating hospitals.

Data analysis was done using Statistical Package of Social Sciences version 21. Chi-square test was used to assess statistical association between categorical variables and to see the level of significance. The significant level of p value was set as 0.05.

Results

The response rate was 85.4%. Those 311 HCAs who responded, majority were male (52.7%) and were in the age category of 41-60 years (57.6%). Only 23.1% of them had education level beyond Ordinary Level. Nearly 58% had more than 10 years of service.

The overall knowledge of the respondents was good (89.1%). Their knowledge was highest for "Leave and Service" (94.9%) and lowest for "Disciplinary Procedures" (69.5%).

Table 1 -Knowledge on leave and service details according to the socio-demographic characteristics

Characteristics		Knowledge on Leave and Service			
		N	% of satisfactory knowledge	Chi value	P value
Sex	Male	164	93.3	1.736	.188
	Female	147	96.6		
Age	18y-30y	48	93.8	12.4	.002
	31y-40y	84	88.1		
	41y-60y	179	98.3		
Level of Education	Up to O/L	239	93.3	5.082	.079
	Up to A/L	72	100		
Duration of the Service	Less than 2 years	16	87.5	1.956	.376
	2y-10y	115	94.8		
	More than 10y	180	95.6		

Table 2 -Knowledge on disciplinary procedures according to the socio-demographic characteristics

Characteristics		Knowledge on disciplinary procedures			
		N	% of satisfactory knowledge	Chi value	P value
Sex	Male	164	75.0	.278	.598
	Female	147	77.6		
Age	18y-30y	48	81.3	1.095	.578
	31y-40y	84	77.4		
	41y-60y	179	74.3		
Level of Education	Up to O/L	239	74.5	5.457	.065
	Up to A/L	72	83.1		
Duration of the Service	Less than 2 years	16	62.5	2.235	.327
	2y-10y	115	74.8		
	More than 10y	180	78.3		

Table 3 -Knowledge on miscellaneous rules and regulations on E-Code according to the socio-demographic characteristics

Characteristics		Knowledge on Miscellaneous rules and regulations on E-Code			
		N	% of satisfactory knowledge	Chi value	P value
Sex	Male	164	87.2	6.121	.013
	Female	147	95.2		
Age	18y-30y	48	93.8	2.466	.291
	31y-40y	84	86.9		
	41y-60y	179	92.2		
Level of Education	Up to O/L	239	90.8	.137	.934
	Up to A/L	72	91.5		
Duration of the Service	Less than 2 years	16	75.0	5.291	.071
	2y-10y	115	92.2		
	More than 10y	180	91.7		

Table 4 - Percentage distribution of the study population having good attitude towards E code according to the socio-demographic characteristics

Characteristics		N	% having good attitudes	Chi value	P value
Sex	Male	164	57.9	.315	.575
	Female	147	53.9		
Age	18y-30y	48	66.7	4.747	.093
	31y-40y	84	45.7		
	41y-60y	179	60.6		
Level of Education	Up to O/L	239	54.0	1.311	.252
	Up to A/L	72	64.7		
Duration of the Service	Less than 2 years	16	71.4	.957	.62
	2y-10y	115	53.2		
	More than 10y	180	56.8		

As shown in the table 1, there was a significant relationship between the knowledge on Leave and Service with the age of the HCAs (p=0.002). Although the knowledge on Leave and Service increased with the duration of the service, it was not statistically significant.

Knowledge on disciplinary procedures decreased with increasing age. Although the knowledge on disciplinary procedures increased with increase in level of education and duration of service, these relationships were not statistically significant.

When the knowledge on miscellaneous rules and regulations on E-Code was considered, statistically significant relationship was present only with the sex of the HCA. Males were less knowledgeable in these aspects than females.

Little over half (56.0%) of the respondents had good attitudes towards the E-Code. None of the socio-demographic characteristics considered in this study was significantly related to the attitude of the HCAs towards the E-Code.

The practical aspect of E-Code was assessed using the daily average percentages. The complete uniform was not worn by 13.5% of HCAs. Of the respondents, absenteeism was observed among 28% of them while 18% came late to the hospital.

Discussion

The E- code includes all the legislatives, directives, rules and regulations governing the public servants. Rules are only effective when employees actually comply with their requirements, companies that cannot persuade employees to follow rules may struggle to survive and thrive².

Therefore, it is important to assess the knowledge attitudes and practices of HCAs towards the relevant section of E- code. By implementing of rules, the relevant organization direct the behaviors of their employees in view to become a successful organization³.

The importance of ensuring employee compliance with rules is illustrated if organizations have systems which encourage to follow rules and to penalize employees who break rules⁴. Yet, in spite of the prevalence of these systems, breaking of rules continues to be common in organizations⁵.

The present study was designed to assess the knowledge, attitude and practices of the HCAs towards the E-Code. Even the knowledge of the HCAs was good (89.1% had good overall knowledge), they had average attitudes (56.0% with good attitudes) towards the rules they need to be followed. This might have resulted in poor practices towards E-Code with 28% absenteeism and 18% late comers in the current study. Employers are required to have certain work rules in place and can also implement optional rules for employees. However, having work rules doesn't mean much, unless employees know that the rules exist and understand them clearly. In addition, effectively communicating your policies or

standards is important, not only because it helps employees to understand the rules, but documented communication of those rules makes it easier to enforce them, if necessary⁶.

The HCAs include in this study were from Base and Divisional Hospitals in Colombo RDHS division. This study cannot be generalized to all HCAs in the Ministry of Health in Sri Lanka. The health system in Sri Lanka is organized in such a way that the HCAs are not given a proper training when they are recruited to the service. They acquire knowledge while they are in the service. If they are given a proper training programme, the attitude and practices of theses HCAs could be improved. Hence, the efficiency and the effective of the health service could be improved. This would all help the health administrators of the hospitals to enhance the productivity.

Conclusion

This study has shown that majority of healthcare assistants had good knowledge on E-Code. But their attitude towards contents of E -Code was average. The practices of HCAs in relation to E-Code were not satisfactory with concerns over wearing complete uniform, absenteeism and punctuality. Inclusion of an in-service training programme for HCAs appears to be a promising solution to these unnecessary gaps in attitudes and practices towards the E-Code.

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