

# **THE IMPACT OF WORKLOAD ON JOB PERFORMANCE AMONG DOCTORS IN MALAYSIAN PUBLIC HOSPITALS. A CASE STUDY**

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## **ABSTRACT**

This research explores the impact of workload on job performance among doctors in a public hospital. A qualitative approach was used, and the method used for data collection is open-ended questionnaires. Purposive sampling was used to collect the data from four informants (doctors) at public hospital, Sarikei, Sarawak. Content analysis was used to analyse the data. Based on the research findings, factors which contribute to the workload among doctors can be categorized into several themes which are insufficient staff, the number of patients, public holidays, disaster events, inadequate equipment, inappropriate working hours and working environment. Findings also show that the short-term impact of workload on doctors' performance can be positive and negative. For the long-term impact, findings show that doctors' performance more on the negative aspects relate to the work performance which are tendency to make mistake, intention to leave organization, mental and physical health problem, decrease family relation and increasing divorce rates. This study contributes significantly to the existing body of knowledge on workload and job performance among the doctors from Malaysian public hospitals perspectives and offer a useful view for policy development matters and practitioners as well. This study also discusses related research implication, limitation and recommendation for further research.

**Keywords:** Doctors, Job Performance, Long Term Impact, Short Term Impact, Malaysian Public Hospitals, Workloads.

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*Received: 12 July 2018*

*Accepted: 17 May 2019*

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## **1. INTRODUCTION**

### **1.1. Introduction**

Workload is the amount of work an individual has to do while work overload relate closely to individual that has overmuch task to do (Leiter & Schaufeli, 1996). Individual who receives a lot of the workload may experience stress, fatigue and tiredness which will negatively affect workers motivation and others related parties (Aryee et al., 2005). The stress symptoms have can be in various ways and this can be reflected in the workplace. This pressure will either be accepted or create a problematic issue to the workers (Robbins, 1996). Employees within low efficiently may eliminate themselves from the organizations. Changes in the workplace and workload will change in stress levels and consequently will affect employee performance (Robbins & Judge, 2013). According to Rout (1999) medical work involving the heavy workload in terms of long working hours, always work under time pressure, carried on patients, and have to work in an atmosphere of not making an effort to behave sociable hours. Scallon (2003) in this context stated that doctors working with continuous time and have no enough time for rest.

### **1.2. Background of Study**

Theoretically, workload face by the workers can create elements of stress which can motivate and demotivate workers in general. From the positive perspectives, workload gives the opportunity for the employees to learn and faster success. Employees gain their experience when they are doing their jobs, which increase their exposure to the fields they involved. Employees will be more active and energetic work to do. It is also viewed that employees who have enough work to do retained more motivation. On the contrary, less work employees be more not active and unwilling to work. The pressure from workload can lead to positive to increase their productivity. Employees who have the capabilities are enjoying performing the workload (Hussain Shah et al., 2011).

In Malaysia, the issue of workload among doctors has been raised from time to time because it affects doctor's physical and mental health. As a result, it will affect their performance during carrying out their duties. Ministry of Health reported that East Malaysia still have the lack of health personnel in the state (BERNAMA, 2013). In connection with that, it is a need to study about this issue. As far as the researcher has been able to determine, there is no prior research on doctor's workload and job performance conducted extensively in Sarawak. Thus, there is a gap in the literature regarding this issue. Therefore, this research expects to be able to examine in more depth on the issue of the workload in the field of doctors and understanding the effect towards their performance. Specifically, the objectives of this study are:

1. To examine factors which contribute to doctor's workload.
2. To investigate the impact of workload on doctor's performance.
3. To determine the long-term impact of the workload on doctor's performance.

## **2. LITERATURE REVIEW**

Work overload can contribute to incidents because people often face with sleep issues, self- or over-medicate themselves, feel depressed, feel anxious, jittery and nervous and become angry and

reckless. Unmanage workload can have an impact on overall health, stress on the body and can affecting mood and thinking. Sleep deprivation as an example have various adverse effects and it is potentially a life threatening among people (Johnson, 1982). Insufficient of proper sleep can occur a significant change in terms of cognitive function and mental status (Killgore et al., 2007).

Workload also can lead to burnout. Burnout can be defined as physical exhaustion, emotional, and psychological exhaustion, and occurred in long-term tiredness, feel themselves less in help by others and not been developed, and negative perception and attitudes through the workplace, life, or other individual (Kane, 2010). Burnout can be categories into three dimensions such as emotional exhaustion, depersonalization and less personal accomplishment. According to Lesage et al., (2013) if excessive work, workers will present reaction in the form of and this is leading to a desire to turnover. Turnover intention refers to individual attitudes and intention, during to retain and actually to leave, to voluntarily leave the work and look for another one, in which reducing job satisfaction and positive prediction of turnover behavior are the factors (Cheng et al., 2011).

On the other hands, the negative effects exist when the pressure becomes excessive. Based on Cox et al., (2004) the changes in the level of the workload either increase or decrease in the workload conditions. Workload has impaired to their performance and lead to significant detrimental effects. Research by Beso et al., (2005) has indicated that it impacts the individual moral, physical health and also affect to staff performance such as medical errors. James et al. (2008) also stated that insufficient staff and high workload affect the physical and mental stress. Also, previous research by Deepak et al., (2013) found that the risk of high workload resulted in the low emotion of an employee, make late in work, low team atmosphere, and unfollowed rules which further affected the organizational performance.

Workload has negative influence to one's motivation to respond to the demand of the others domain when they perceive higher workload and that person will experience exhaustion and fatigue (Aryee et al., 2005). Moreover, McGowan et al., (2013) in their studied found that fatigue will impact on the quality of patient care and it may impact on workers well-being. In addition, when medical staff tiredness, it led to mistakes and impact workers the patient. They were more likely to question their judgment and to check something several times, which slowed them down. Sleep deprivation (SD) on physician is also because of long shifts (on-call hours) and it affected medical staff performance and safety this can bring effects on patient care this has been studied by Wali (2011). Medland, Howard and Whitaker (2004) found that burnout can be costly due to increasing burnout, increasing absenteeism and less productivity among employees. This also studied by Dyrbye et al., (2011) burnout as a resulted would create employee frustrated and changing emotionally to indirectly result in interpersonal conflict when faced with work stress and the individual will protect themselves with their own emotional. The research done by Stodel and Smith (2011) show that senior doctor has a high degree of burnout.

Based on the research done by Bradley et al., (2015) in Malawi through interviewed found that over 40% of staff are the intention to leave their current position as health workers because of the issues of the insufficient staff and workload. In addition, James et al., (2008) found that 14 incidents are reported staff doing mistake or errors because of high workload and 5 incidents.

Yang et al., (2014) reported that medical staff has a higher workload and burnout as a resulted in higher turnover intention. The research done by Stodel and Smith (2011) also found high degree

of burnout, can cause among senior doctors' intention to leave current jobs. Based on the surveyed, 95% are an intention to leave Red Cross War Memorial Children's Hospital. In another conjunction, Karatepe (2013) studied found that employees who have over workloads are not able to balance between work (family) and family (work) roles because of emotional exhaustion. Employees will less to fix with their work and poor performance. In addition, research by Mahmud and Aniza (2015) found that due to long working hours, workers have less time spend with to with family and on their personal interests. Iverson and Pullman (2000) in their study found that the long-term higher workload, can affect the employee physical or even thoughts mental health, and also affect employee's performance or productive.

Several studies have been carried out regardless on workload and doctors job performance. Mahmud and Aniza (2015), was studied about factors which contributed to doctor's migration from the government service to the private sector in Selangor and Kuala Lumpur. Dissatisfaction with work operations which are workload, long working hours and cause them to spend less quality time with family and on their personal interests. Other than that, Kruger and Bezuidenhout (2015) has indicated that factors influencing female doctors' career decisions at Tshwane District Hospital, Pretoria, South African because of workload and working hours and it is the challenges for doctors in that hospital. In addition, 64% the respondent mention that at working at Tshwane District Hospital the workload is heavier if compared to district hospitals.

Stodel and Smith (2011) study about the influence of burnout on skills retention of junior doctors and they found that workload was the most important factor contributing to burnout among the junior doctors. Doctors felt that there was less time to provide the level of care. In addition, Yunus, Mahajar and Yahya (2009) conducted a research at the public hospitals and found that nurses who are at high work overload will undergo high depersonalization, emotional exhaustion, depersonalization and self-accomplishment. In conjunction with that Abdul Razak, Yunus and Mohd Nasurdin (2011) on their study about the impact of work overload and job involvement on work-family conflict among Malaysia doctors also report the alarming concerns. They found that work overload statistical was positively related to both work interference with family and family interference with work.

Doctors must be hard working like other health professional, to achieve the goal of the organization and the individual also aim to provide a better service and high-quality standards for their patients. Huey and Wickens (1993) explain the factors of workload, workload characteristic and the relationship between the workload and performance that implication to the individual and team performance. Therefore, regardless workload by providing the training and preparation, implementing the strategic and tactics are the most suitable for that situation. Carayon et al., (2003) explained that to reduce the workload from a hospital, there is a need to consider the workspace design.

Mercan (2014) reported that worker facing high stress at the workplace and this will give impact to physical and mental health problem. Australian Medical Association (2014) reported doctors work excessive hours (43 hours) and two public hospitals are long working hours that called working in unsafe shift. In relation with that, Ockenden (2012) stated that if doctors working over 17 hours, this will affect their performance. The medicine field as a discipline can be considered as 24 hours business and with all the challenges and change in the workplace, the work has become even more intense and stressful. Working time management and their effects on sleep can irritate

other stressors and have an indirect effect on care since higher stress levels may adversely affect the quality of care. Individual with the high workload, shift work and lack of sleep will affect their performance (NCCA, 2004).

According to Cooper et al., (2014) existing medical officer working at the public hospital are expose to long working hours and less rest time. This will cause them to work under high pressure. Doctors need to perform their daily work and face a lot amount of paperwork and administration, and even they need to finish their unfinished tasks at home. Medical officer which was married who faced on extra work can cause their stress and lead to a struggle experienced with their husband or wife. Doctors are faced with increasing pressure and directly will impacts their performance (Caplan, 1994). Among factors contribute to stressful to doctors are the long working hours, handling with serious condition ill patients, in the case of emergency and night calls, to maintain medical education and personal development and aspires to achieve a goal (Shiwani, 2009). In addition, Carayon (2011) highlighted on high workload and overload are usually and virtue complaint by health care manager and staff.

### **3. METHODOLOGY**

This study used qualitative research approach and it allowed the researcher to explore and find out more in the area of workload. The advantage of using qualitative study is it allowed the researcher to dwell deeply into understanding how workload affects the doctor's performance. It is useful in constructing, developing the theories. The study was conducted in one public hospital located in Sarikei, Sarawak and four (4) doctors are involves.

In-depth interview was the technique used for data collection and its offer rich data with more details and new insights (Cresswell, 2003; Taylor & Bogdan, 1984). It allows face to face contact with informants. A pilot study was performed with the purpose of to verify the suitability of instrument in term of language, word, and clarity of questions and to ensure interrelated information is collected. Validity and reliability issue regarding the open-ended questionnaires are confirmed after the feedback given from the informant and the amended questions checking by the expert. Research ethics issues such as consent letter and uphold individuals' rights to confidentiality and keep the privacy are taken seriously in this study. The voice record during face-to-face interviews and small notes keeping was used during data collection. Data analysis procedures as suggested by Miles and Huberman (1994) were used in this study. The data was analyse using content analysis as this technique can offer a systematic and comprehensive ways of analyzing and explaining social phenomena's (Ahmad, et al., 2014).

#### **3.1. *Informant Demographic Background***

Table 1 presents informant demographic background. All informants' real names are kept confidential to preserve their identity. Informant 1 is Malay; Informant 2 is Indian whereas Informant 3 and Informant 4 are Chinese. All four informants' ages between 29 and 30 years old and are junior doctors.

**Table 1: Informant Demographic Background**

Demographic Background	Informant 1	Informant 2	Informant 3	Informant 4
Gender	Male	Male	Male	Male
Age	29	30	30	29
Education	Medical doctor	Medical doctor	Medical doctor	Medical doctor
Duration of service	3	5	3	3

## 4. RESULTS AND DISCUSSION

### 4.1. Factors Contribute to the Workload

Thematic analysis found several factors contributes to the workload among doctors and details are as follows;

Informant 1 stated that:

*“Thus, maybe the number of patients will contribute mostly to the workload. In bigger, city more numbers of patients thus more workload, if they are not compensated with more equipped staff.”*

Informant 2 stated that:

*“Number of patients increasing obviously increases a doctor’s workload naturally. The number commonalities in a patient to look into and monitor require more use of energy, and time.”*

Informant 3 stated that:

*“Increased patient load as population increased. No proper prevention or hygiene in certain areas can cause epidemic or infectious diseases which lead to increased hospital admission and subsequently workload”.*

Informant 4 mentions that:

*“For me I think the most contribute factor is the number of patients.”*

Informant 1, 2, 3 and 4 stated that the increasing in number of patients will increase the doctor’s workload. According to Bradley et al., (2015) also mentioned that due to the increasing in a number of patients can cause them unable to cope with the amount of workload. McGowan et al., (2013), found that staff shortages can cause increasing the numbers patients in the hospital. Instead, this is also can link with the research model of mental workload, task performance and demands by Meister (1976). Based on this model, at the certain region during the higher demands of the individual performance would be declined this can mean low performance during the higher demands of patients to seek for doctors and cause them exceeded workload and as the resulted they would low performance by the task or with patients.

The second and third findings from this study found those public holidays and disastrous/ disaster events also contribute to the stress factors. Informant 1 and informant 3 stated as follows:

Informant 1 stated that:

*“Patients coming to hospitals. Interestingly, public holidays usually will increase number of patients come to hospitals to seek treatment. Maybe the public better off working, so then less sick or get into accidents. Disastrous event, for example, during public holidays, increase motor vehicles accidents. Unable to control which I think is the external factors.”*

Informant 3 stated that:

*“Disaster can cause more injuries and health complications that increased admissions to hospital.”*

Informant 1 and 3 stated that usually during the public holidays and disastrous events will increase the number of patients coming to hospitals. This can be supported by Faryar (2013) found that factors such as the weekday, season, holidays, and disaster events would increase the number of patients to injuries and death at the certain events cause the emergency department contributed to increase the workload.

The following finding is factor inadequate equipment to performance their task also is one of the factors contribute to workload. The below is stated by informants as follows:

Informant 3 stated that:

*“... need more ventilator and equipment as limited equipment can affect patient care.”*

The below is Informant 4 stated:

*“... working environment for example cleanliness, temperature of workplace, or spatial arrangement. Equipment such as computers, sufficient chairs, tables.”*

Based on Informant 3, the factor contribute to workload among doctors because of inadequate ventilator and equipment at hospital can cause to workload. Informant 4 commented that the factors which contribute to workload due to the working environment and the inadequate workplace equipment to performance their work. This can be linked with the activity analysis model by (Falzon & Sauvagnac, 2004). The prescribed workload designing the tools used to perform their work and reactions. Prescribed workload is developed from time to time and changed via the dynamics of daily work influence the whole working conditions (Falzon & Sauvagnac, 2004). This model mentioned the importance to have sufficient resource, the tools and equipment at work and instruction is actually available in the organization to able perform the work on the hand (Guerin et al., 2006). However, according to Beso et al., (2005) found that environment factors related to workload such as annoyance or disrupted, interrupted, working conditions, the hospital dispensary design which leads to medical errors.

The following finding is long working hours the below is stated by informants 3 and 4:

Informant 3 stated that:

*“Working hours, the longer the working hours, the higher the workload. We need to work for at least 70 hours week. Without enough rest, surely will have negative*

*impact on our work performance which will increase our workload even more.  
This is a vicious cycle”.*

Informant 4 stated that:

*“ ... inappropriate working hours ...”*

Based on the informant 3 and informant 4 mentioned that factor can contribute to workload is also because of the long working hours it can cause them less time for rest among medical staff and bring impact to workload performance. According to Kruger and Bezuidenhout (2015), research found that 64% respondent mentions of higher workload and also long working hours it is challenging for doctors who work at Tshwane District Hospital. In addition, based on the research done by Mahmud and Aniza (2015), factors cause doctors migration from the government to private sectors because of dissatisfaction with the higher workload at a public hospital and due to long working hours faced by them. Other than that, reported from Smith (2014) in Telegraph media mention the long working hours and the night shifts these all created the pressure for doctors. According to Ockenden (2012) reported that two public hospitals of doctors are long working hours it can call as working in unsafe shift. It also mentions that has evidence if working over 17 hours will affect their performance.

The next finding is insufficient staff is one of the factors contribute to workload and stated by the informant 1 as follows:

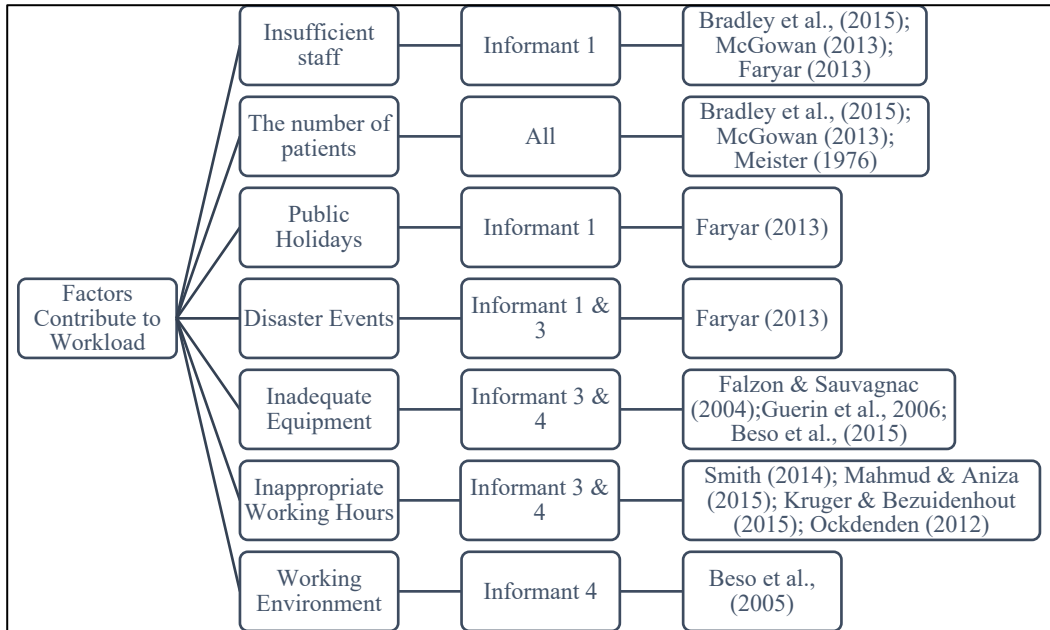
Informant 1 stated that:

*“Increase workload contributed usually by not having enough staffs. Or even having less efficient staffs also. Either includes doctors on call and even staff nurses, assistant medical officers and other supporting staffs.”*

Based on Informant 1 stated that the factors which will contribute to increasing workload because of not enough staffs, the less efficient staff includes the doctors, staff nurses, assistant medical officers and also supporting staffs. This is supported by Bradley et al., (2015), mentioned that one of the factors faced by hospitals in Malawi is the lack of staff to handle a number of patient's is would causes them exceeded workloads. In addition, according to McGowan (2013), also found that still facing the staff shortage, insufficient clinical officers or doctors this cause them under pressure to handle a lot of patients. Instead, due to staff shortage, will causing the rising in the number of acuity patients. Other than that, this also can be supported by Faryar (2013) founded that insufficient nursing staff also one of the factors contribute to workload. The shortages of nurse staff cause to delaying the patient care and also lead to unsafely in the medical practice.

Figure 1 present in graph a summary of research finding on factors contributes to the workload among doctors and details are as follows:



**Figure 1:** Factors Contribute to the Workload among Doctors

#### 4.2. Short term Impact of Workload on Doctor's Performance

The short-term impact of workload on doctor's performance are as the following themes. The finding is related with the team work faster and think faster and below are informants 1, 3 and 4 feedbacks on that theme.

Informant 1 stated that:

*"Will train me to the things faster and better manage patient faster and more efficient hopefully. When the workload then became lessen, it will make me feel relief when remembering those busy workload time".*

Informant 3 stated that:

*"It can drive me to my limits and provide more care my patient".*

Informant 4 stated that:

*"To me, I can force myself to work on faster to done my work to treat the patient and also I learn to how to work faster when I was may task at my hand need to completed at the same time."*

Based on the informants 1, 3 and 4, they stated that the short term effect of workload are, it can drive themselves or forces themselves to work faster and at the same time trained themselves to work fast more efficiency when there was many tasks at hand at the same time. This finding in line with research done by Hussain Shah et al., (2011). They found that during the short term,

workload gives the opportunity for the employees to learned and faster success which can lead to the positive performance.

The alarming finding involve with stress, fatigue, anxiety, frustration are stated by informants 2, 3, and 4 below:

Informant 2 stated that:

*".....Increase in frustrations and decrease in working zeal hence productivity. It can increase the stress level if cannot manage properly."*

Informant 3 stated that:

*"Increased pressure at work resulting in mental fatigue, anxiety and panic attack. These can pose further problems in coping with increasing workload and causing more health problems in future."*

Informant 4 mention that:

*"For what I think, will under performance mean I work will not really performance on the task. Would feel stress, forgetful, tiredness and going back late."*

Based on the informant 2, 3 and 4 stated that due to increasing workload can cause them increased the pressure as a resulted in mental fatigue, stress, anxiety, and panic attack. Workload has negative influence on one's motivation to respond to the demand of the others domain when they perceive higher workload and that person will experience exhaustion and fatigue studied by (Aryee et al., 2005). In addition, McGowan et al., (2013) studied found that fatigue it impacts on the quality of patient care and their own well-being. In addition, when medical staff tiredness it led to mistakes and impact on the patients. Moreover, doctors also faced the stress from family, work, relationship and even though physical and mental health reported by (Smith, 2014).

The third finding based on the second objective about short term impact of workload on doctors' performance is making wrong decision and stated by the informant 1 as follows:

*"Making wrong decision in treating the patients. As a doctor work in emergency department, we have to see all the patients in very serious disease or not....."*

Informant 1 stated that during the short-term impact of workload if can affect to making a wrong decision during provides the treatment to the patients. According to Cheung (2015), it is the serious issues among the doctors by overworked in Hong Kong's public hospitals. the issues of wrong dosage or drug due to making wrong decision on the medication among doctors in public hospitals.

Informant 2 stated that:

*"... increases experience and wisdom in patient management"*.

Based on the informant 2, the positive impact of workload is increasing his experience and wisdom in the patient management. This is supported by Hussain Shah et al., (2011) the positive of workload is employees gain their experience when they are doing their jobs, as employees do their jobs, they can gain more working experience, which will increase their exposure to their fields.

The next finding is emotional during the short-term impact of workload. The below is stated by informant 1:

Informant 1 stated that:

*“The negative side to us, is of course emotionally, In busy time, we will more emotionally and less tolerant to needy or difficult patients. It leads to mismanagement in treating patients and also causing us to get angry easily and felt hopelessness in fishing our jobs”.*

Based on the informant 1 stated that during the short term of workload he will get into emotional, easily angry, felt hopelessness with his work. This can be supported by James et al., (2008) also stated that high workload can affect the physical and mental stress. Also previous research by Deepak et al., (2013) found that the risk of high workload as a resulted in the low emotion of an employee, they can delay work, low team atmosphere, and unwilling to obey rules which further affected the organizational performance. The last finding is burnout as stated by the informant 2 as follows:

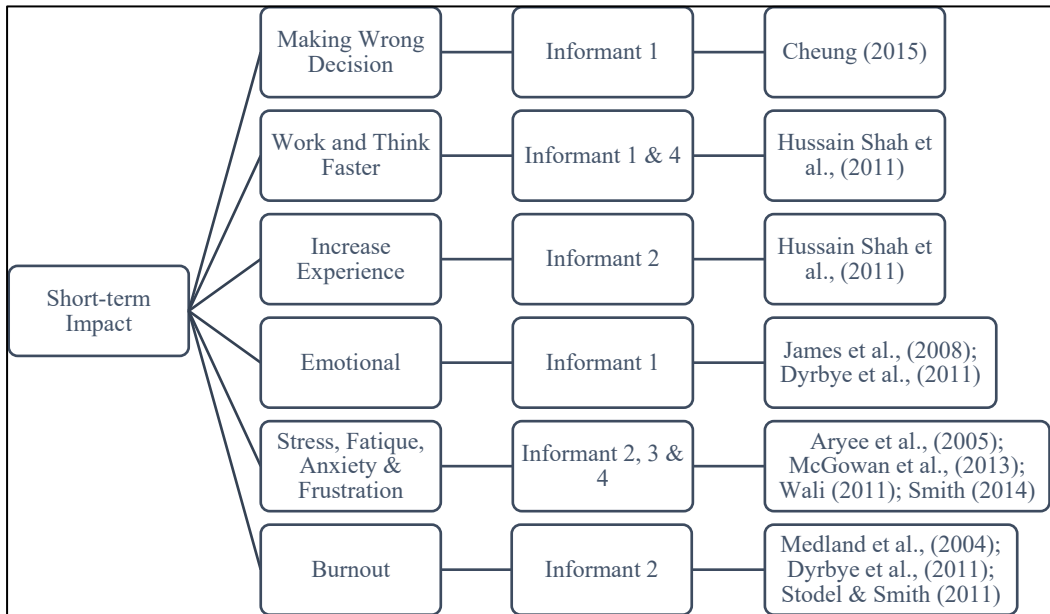
Informant 2 stated that:

*“Burnout and fallout (quitting the job) ...”*

Informant 2 stated that he would feel burnout and consider to leaving the company. Increasing in the stress level, poor interpersonal and communication with colleagues and staff and also increase his frustration and less productive. This can be supported by Dyrbye et al., (2011), burnout as a resulted will created employee frustrated and emotional created interpersonal conflict when faced with work stress and the individual will protect themselves with their own emotional. In addition, based on the research done by Stodel and Smith (2011) it shows that senior doctors have a high degree of burnout. Other than that, Medland et al., (2004) found that burnout can be costly, it can increase absenteeism and less productivity among employees.

Figure 2 presents the summary of research finding on short term impact of workload on doctors' performance.

**Figure 2:** The Short-Term Impact of Workload on Doctor’s performance



#### 4.3. The Long-Term Impact of The Workload on Doctors’ Performance

The third objective is to determine the long-term impact of workload on doctors’ performance. The first finding is on physical and mental health problem.

Informant 1 mentions that:

*“Of course. Need to have a good and healthy mental physical if want to work in higher workload environment. Health is important and really correlate with performance. Any sector, any kinds of work.”*

Informant 2 stated that:

*“Yes, it does. Increase negative stress at work leads to developing of hypertension and others. Depending on how one copes with stress mentality and character can change.”*

Informant 3 stated that:

*“Chronic fatigue syndrome, generalized anxiety disorder. All these contribute to health problems....which will not benefit to my patient.”*

Informant 4 mention that:

*“Higher workload increases stress and wears out a person, which can reduce performance.”*

Based on the Informant 1, 2, 3 and 4, they stated that during long term higher workload, mental and physical health issues can affect their performance and would increase the stress level at work and physical health problems. They mention that it is important to have a good healthy in both physical and mental health. Informant 4 stated that higher workload during the long term can increase in stress level and can reduce his performance. This supported by Iverson and Pullman (2000), mention that during the long term of higher workload it can affect the employee physical or mental health, and also can affect the employee's performance and productive. Therefore, it showed negative outcome on turnover among employees and the increases in the stress level, accidents, strain or illness among employees. Mercan (2014) reported that the physical and mental problem occurred among employees due to the workplace is too stressed. The second finding which is the decrease in family relation was stated by informants 1, 3 and 4.

Informant 1 stated that:

*"I'm a single guy. So I really don't think about family relation that much yet. But working in emergency department, we usually leave our work in the department when get back home. But if we are forced to work extra hours every day without off days because of not having enough staff to cover, then it will lead to decrease family relation quality."*

Informant 3 stated that:

*"It will definitely affect my family relationship. I have been away from my family for years due working in foreign places. I am only able to return once in a while to be with them. We communicate less and therefore, relationship could strain."*

Informant 4 stated that:

*"Higher workload causes an employee to go back late and reduce the family time, and makes a person fatigue, which might weaken a family relation of an employee."*

Informant 1, 2, 3 and 4 it totally agreed that during the long term of higher workload, it normally can affect the family relation, less time spending with their own family. This can be supported by Karatepe (2013) studied found that employees who have over workloads are not able to balance between work -family and family-work roles because of emotional exhaustion. Employees will less embedded to their work, also poor performance on their work.

The third finding is increase in divorce rates as stated by informant 2 below:

Informant 2 mention that:

*"I don't have a family yet. It will affect family relationship when work stress is released at home. Relationship strains which leads to neglect in upbringing children and increase divorce rates."*

Informant 2 commented that he is still single. But he thinks that during long term higher workload can affect to family relations bring work stress to home cause family relations strained, children and increase divorce rates. This also based on the news reported by Smith (2014) mention that doctors are now under higher suicide rates, drug abuse and also reported that they are also higher in divorce rates, increase from 20 to 30 per cent because of higher workload. In addition, it also

similar reported by Cooper (2014), the most cases of suicide and divorce among professionals is now higher rates. Divorce rates can be reached from 10-20 per cent among medical professionals.

The following finding on this third objective is make mistake during the long-term impact of the workload and stated by the informant 3 as follows:

Informant 3 stated that:

*“Will impair my concentration and most likely will be prone to making mistakes which will not benefit to my patient.”*

Based on the informant 3 stated that this can be supported by previous research by James et al. (2008) 14 incidents are reported staff doing mistake or errors because of high workload and 5 incidents. In addition, based on the news from Hong Kong reported by (Cheung, 2015) the previous annual reports, reported that medication errors cause patients death or permanent harm and drug allergic are more than half. Therefore, the heavy work lead among doctors can increased in taken a chance to make errors mistakes.

The next finding is consider to leave company during then long term excessive workload and stated by the informants 1 and 2 as follows:

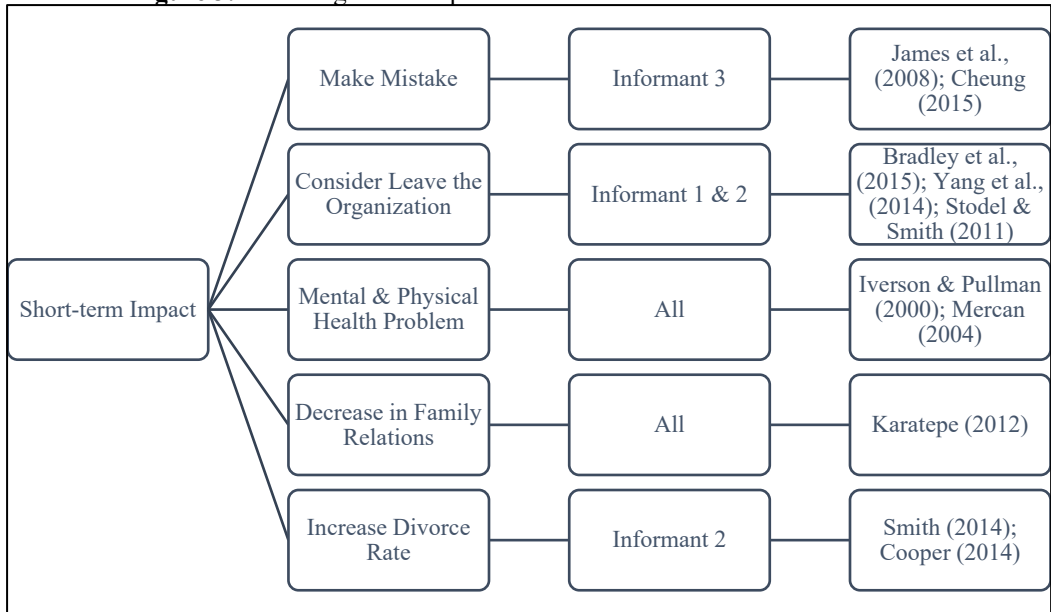
Informant 1 stated that:

*“Maybe. We usually heard that private doctors do less job and getting more money. But it is nice too. Maybe if we get paid more if we see more patients like private sector, we actually feel good and blessed even if we have more patients to see. It means good business and more money for us.”*

Informant 2 mention that:

*“Yes. The question arises when you ask yourself is it worth it? The medical field is not a one man show and if no one cares and works without pride, integrity and zeal except a few then these few will either quit or become like them.”*

Based on Informant 1 and informant 2, they commented that they maybe will leave the company if continuous higher workload. According to the research done by Bradley et al., (2015) in Malawi, there was over 40% of staff are the intention to leave their current position as health care medical staff due to the issues of insufficient staff and workload. This also is supported by Yang et al., (2014), found that medical staff has a higher workload, burnout and lastly the higher turnover intention. In addition, Stodel and Smith (2011) found that based on the surveyed, 95% among senior doctors are an intention to leave Red Cross War Memorial Children's Hospital. Figure 3 present the summary of research finding on long term impact of workload on doctors' performance and details are as follows:

**Figure 3: The Long-Term Impact of Workload on Doctors' Performance**

## 5. CONCLUSION

This study expands the discussion about the effect of stress among doctors. It will bring new insight about workload especially among doctors in public hospital, Sarawak, Malaysia. Doctors face workload daily at the hospital due to certain factors which cause them for cannot cope with their work during work overloaded. For the long term, this will affect their performance and cause certain mistake or errors during an investigation with patients. Researchers recommended to organizations that improving in policy from time to time in addressing the problems of a heavy workload by workers. The implication of the policy does not make any change in handling heavy workload, means it will not bring any advantages to the employees and also the organization. Policy makers need to ensure that when making any decisions or take any actions it should bring more benefits and enhanced to workers and organizations. To the human resource practitioner concerns when lack of adequate training for staff or during practice period occurred or identified, they would be facing trouble when working into the clinical environment due to lack of adequate training. Mostly they will be following wrong procedure, using the wrong equipment, do not know the patients need and lack knowledge and skill to provide treatment for patients.

This research also has some limitations. This qualitative study only involved with four informants and the data collection techniques used only in-depth interview. In this study, researcher goes through a face to face with each four of informant for inviting the informant to participate in this research. After getting permission from informant to participate in this research, interview was conducted, and it was a big challenge. This is because as a doctor, they are really busy and have a lot of task to perform. They need to provide services to hospital patients, and this contribute too not much time given to the interview sessions. In relation with that, it is suggested that this type of

study can be conducted using various ways of data collection techniques. It is recommended to use longitudinal study for a better understanding on the impact of workload on employees in general and doctors in specific. As a conclusion, this study found the short-term impact of workload on doctors' performance can be positive and negative. For the long term the impact can be more on the negative aspects relate to the work performance which is tendency to make mistake, intention to leave organization, mental and physical health problem, decrease family relation and increasing divorce rates.

### ACKNOWLEDGEMENT

The researchers are greatly indebted to the Ministry of Health, Malaysia (MOH) for the consent and support to this research project.

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