

# FEEDBACK MECHANISM AND ROLE CLARITY AMONG HOSPITAL EMPLOYEES: AN EMPIRICAL ANALYSIS

Praveena Krishnan.I<sup>1</sup> and Dr.Prakash Pillai.R<sup>2</sup>

1. *Research Scholar, Department of Personnel Management, Loyola College of Social Sciences, University of Kerala, Trivandrum, Kerala*

2. *Assistant Professor and Head, Department of Personnel Management, Loyola College of Social Sciences, University of Kerala, Trivandrum, Kerala*

## Abstract

Health care sector in India has become very competitive where the quality of services remains highly decisive. Hospitals with dedicated and motivated staff who understand their role stay more competent. Role clarity drives employee performance, facilitating professional collaboration and job satisfaction. Lack of clarity in roles can lead to role conflict and diminish the effectiveness of care and services. This paper examined feedback mechanisms and the extent of role clarity among 294 employees of two private sector multi-speciality hospitals in Trivandrum. The study reveals that hospital employees had clarity about their job description, job accountabilities and appraisal system. The study found adequate co-worker related clarity among the hospital staff, which is crucial for effective teamwork. The heavy workload perceived by the staff indicated a problem of understaffing. Findings suggest the need to frame compatible policies and guidelines for employees and conduct regular staff training and development programmes.

**Keywords:** *role clarity, feedback, hospital staff, healthcare, performance management*

## Introduction

High-quality healthcare results not only from medical expertise, modern equipment and drugs, but also from the efforts of a well-motivated, disciplined and well-rewarded workforce. Managing the performance of employees is one of the toughest challenges for organisations. This is also true of the healthcare industry. To enhance the effectiveness of its functioning and improve hospital employees' individual and team performance, the hospital administration needs to ensure that employees are getting regular and effective performance feedback from supervisors and have adequate role clarity to do their job correctly.

Employees require relevant information about their performance in the form of strengths-based and constructive feedback from their supervisors. This helps them to know that they are meeting performance standards and the areas for improvement. Researchers believe that if goals are clear to employees, they know why and how to work and achieve them (Becker & Klimoski, 1989). Role clarity is a crucial driver in employee performance and positively linked to employee satisfaction (Bass, 1990; Whitaker et al., 2007).

## Statement of the Problem

The performance of an employee largely depends on the clarity of one's role. An employee primarily needs to understand the purpose of the job before starting it. They should be able to distinguish the objectives of the job, the outcomes anticipated, and the accountabilities (Hinkin & Schriesheim, 2008). As employee roles become more complex and the pace of change increases, providing proper feedback and role clarity becomes more challenging. For organisations to achieve top results, there must be a clear alignment between their objectives and what employees spend their time doing. If job roles are not adequately or clearly defined and employees are not given effective feedback about performance, there is a likelihood that employees will take up duties that are not theirs and disregard what they are expected to do. This disproportion between what one is expected to do and what he or she performs creates role ambiguity and role conflict among employees (Fields, 2002).

## Objectives

The aim of this research study is:

1. To understand the existing feedback mechanisms in the healthcare industry.
2. To assess the extent of role clarity among employees in healthcare institutions.

## Literature Review

The literature underscores the importance of having proper feedback mechanisms and ensuring role clarity for employees in the healthcare industry. Studies show that both feedback mechanisms and role clarity have implications for the healthcare sector's effective functioning and the provision of quality healthcare to patients.

## Role Clarity

Different authors have shared various perspectives on role clarity. Lyons (2004) described it as the presence of role-relevant information due either to restriction of this information or variations of the information's quality. Similarly, Minda (2000) defined role clarity as to the subjective feeling of having as much or not as much role relevant information as the person would like to have. Rizzo et al. (1970) defined it as the degree to which required information is provided about how the employee is expected to perform his or her job. Nandal and Krishnan's (2000) view was that roles serve as the boundary between the individual and the organisation and represent the expectations of the individual and the organisation. Role clarity is an essential prerequisite for effective performance planning and job expectations and performance measures with a clear focus on the goals for each person or workgroup (Bhattacharyya, 2011).

The various definitions in the literature bring out the importance of role clarity in the organisational context. Many authors view role clarity as relevant information for performing a role, highlighting the accessibility or consistent quality or employee perceptions about this information. Roles are also seen in terms of boundaries or expectations mediating between individuals and organisations. The strong subjective element of role clarity regarding employee perceptions or individual or organisational expectations makes role clarity a complex challenge for organisations and employees, and an area deserving further scrutiny by researchers.

In a study among small and medium IT companies, Thangavelu and Sudhakar (2017) found that role clarity, performance feedback, and employee satisfaction on the perception of performance was significantly correlated. There was also correlation between performance feedback and the age group and experience of the employees. The authors recommended clearly defining employee roles and encouraging supervisors to give periodic and objective performance feedback. With employees more likely to play multiple roles in smaller IT companies, they suggested minimising role conflicts by framing clear objectives for every role.

Lynn and Kalay (2016) in their study of teams at Apple, IBM and HP, noted that team performance was positively affected by vision clarity, while vision support and role clarity were not significantly linked to team performance. Yadav (2015) found that among Indian managers, having a quality of work-life and role clarity can enhance organisational citizenship behaviour among employees. Also, gender and type of organisation were important moderators of the causal paths between the quality of work-life, role clarity and organisational citizenship behaviour.

Mohamed and Hossny (2020) studied the relationship between role clarity and nurses' job satisfaction at Assiut University Hospital. They concluded that nurses were more satisfied with communication and relations with their colleagues than with their work conditions, and with policies and rules that establish work boundaries. They were largely aware of the causes of role ambiguity, and this was related to their level of education. The authors recommended that diploma nurses be given educational support to better understand their roles and responsibilities. They also suggested that job description and specification be clearly defined during orientation. Another recommendation was that supervisors reduce role ambiguity by setting explicit task objectives, clearly communicating performance expectations, and giving clear directions for completing work activities. They added that the charge nurse should provide employees with periodic feedback.

Mawgod et al. (2018) compared the expected and actual roles of staff nurses and saw a statistically significant association between staff nurses' role expectations and their actual observed practise in relation to gender and their nursing qualifications – female nurses were better than their male counterparts. Graduate nurses had better actual performance than technical nurses. They also saw low expectations of staff nurses about various dimensions of their role but found discrepancies for their direct, educational, and actual roles. The authors suggested that organisations should develop job descriptions in consultation with employees to increase commitment and lessen role ambiguity. They also felt that there should be a systematic training policy, written job description and should communicate changes in policies, role, and procedures to all nurses.

Monas et al. (2017) found that nurse coordinators working with cancer patients handled emotional support, patient guidance, and coordination of patient care. They suggested that as the nurse coordinator carried out various roles in different units, their performance standards must be modified to the performance areas for each unit. Ly et al. (2018) examined the role clarification process in the healthcare sector in two contexts – in the spread phase of a quality improvement initiative to foster partnerships between hospitals and community health organisations and as part of inter-organisational partnerships for providing care to patients with chronic disease. In the latter context, it was fairly well-structured, with three phases: relationship conceptualisation, familiarisation, and role division.

Abed and Banan (2016) discovered a significant correlation between nurses' perception of the performance appraisal process subscales and their job satisfaction. Correlation was also seen between nurses' perception of the quality of the performance appraisal process and their job satisfaction. The authors suggested that organisations better execute performance appraisal practice and provide job-related unbiased feedback while also providing feedback-based career development to the best performers. They also advocated using multiple performance appraisal methods so as not to disadvantage some employees and employee participation in developing and designing the performance appraisal system.

Employee role clarity has been found to increase the consistency and perception of job performance (Azarpira et al., 2013), improve psychological empowerment (Rajaeipour & Bahrami, 2008) and better performance (Bray & Brawley, 2002). Lynn and Kalay (2016) found that while a strong vision improves team performance, role clarity does not significantly correlate with team performance. In contrast, Bhattacharyya (2011) found that role clarity in performance plans promotes better teamwork. Hence, it is necessary to differentiate role accountabilities both horizontally and vertically.

## Feedback Mechanism

Performance feedback can be defined as information regarding an employee's past behaviours relating to recognised standards of employee behaviours and results (Aguinis, 2013). Providing feedback to employees is among a manager's main activities in the performance management process (Mone et al., 2011; Kinicki et al., 2013). Feedback is considered essential for organisational effectiveness (Taylor et al., 1984). It aims to enhance individual and team performance, as well as employee engagement, motivation, and job satisfaction (Aguinis et al., 2011). It can also change team employee work behaviour and improve employee job satisfaction and performance (Islam & Rasad, 2006).

Kinicki et al. (2004) opined that the feedback given to employees during performance review needs to be "specific, frequent and positive" (p. 1064) to create a feedback-rich environment; it should also exceed the positivity ratio (Fredrickson & Losada, 2005). But in some situations, feedback may not impact performance or can even be damaging (Locke & Latham, 1990; Kluger & DeNisi, 1996). Executives need to be aware of their credibility as a source of feedback. Providing positive feedback is associated with higher levels of employee engagement and performance, but if employees see the feedback as insensitive, it can negatively impact their degree of psychological safety (Gruman & Saks, 2011).

Mujtaba and Shuaib (2010) considered that timely feedback about performance helps employee motivation and increased innovativeness. Proper feedback could help them adjust their strategy according to organisational needs and thereby enhance their performance. Employees require feedback as they can analyse their strengths and weaknesses and act accordingly. Immediate feedback is vital to all employees at every level, as everyone wants to learn about their progress to excel in their performance. Similarly, Bandura (1977) found that feedback and clarity about performance played a vital role in developing employees' perception of their work. Employees always seek feedback about their work performance from their supervisor and co-workers to seek to minimise uncertainty about their performance at work. Whitaker et al. (2007), in a study involving 170 subordinate-supervisor dyads, developed a model demonstrating that subordinates who perceive a supportive feedback environment display increased feedback-seeking, higher role clarity, and higher performance ratings.

The literature reviewed above reveals the importance of feedback mechanisms and the role clarity of employees, which are related to aspects like employee satisfaction, motivation, performance and organisational citizenship behaviour. Studies emphasise the need for clear definitions and descriptions for employee roles and responsibilities and ensuring employee participation in developing the performance appraisal system. They also call for clear communication and directions on expectations and activities, giving regular and objective feedback, and addressing role ambiguity.

Through the review of the literature, the researcher was able to identify the gap in the research, as the healthcare industry was a relatively less targeted area. Studies related to feedback and role clarity in the healthcare sector were limited, especially in the context of Kerala, and the vast majority were focused on nurses alone. Thus, there was scope for studying role clarity and feedback among hospital employees in general, including doctors, nurses, paramedical and administrative staff in Kerala hospitals.

Organisations are much less likely to be successful in meeting their objectives if their employees are struggling with role clarity issues or not being provided with the kind of feedback they need to do their job correctly. In the absence of role clarity, employees fail to understand their job requirements, ultimately leading to performance-related problems. So, role clarity and proper feedback mechanisms for hospital employees are vital to the healthcare sector for it to function effectively. The process starts from the first day an employee joins the hospital and is given a clear written job description and job responsibilities; it continues with unbiased feedback they regularly receive on their performance from trusted sources, and employees' participation in designing the performance appraisal system at the hospital.

## Methodology

Two private sector multi-speciality allopathic hospitals in Thiruvananthapuram District of Kerala were selected for the present study. These hospitals were selected based on their bed strength (more than 300 beds). The names of these hospitals were kept anonymous due to the sensitive nature of the study.

A cross-sectional design was adopted in this study. A structured questionnaire was the instrument used to collect data from individual respondents. It consisted of two parts: the first part covered socio-demographic variables like gender, age, educational status, and work experience. The second part comprised 15 questions in a 5-point Likert Scale with responses varying from 1 for 'strongly disagree' to 5 for 'strongly agree'. The data relating to the feedback mechanism (4 items) was obtained from the first section and the data regarding the extent of role clarity (11 items) from the second section. Role Clarity Questionnaire by Pareek (2002) was adopted with modifications to suit the present purpose and was used for measuring the extent of role clarity in the present study. The questionnaires were distributed to the respondents, and duly filled up questionnaires were later collected during breaks and at the end of their work shift to avoid disrupting their everyday workflow. Cronbach's  $\alpha$  test was used to assess the reliability of the tool and found the Cronbach's alpha value as 0.745.

The sample unit for this study were the employees of the selected hospitals in Thiruvananthapuram. The sample includes the doctors, nurses, administrative staffs and paramedical staffs. The simple random technique was used to select the sample for the study. For the population of 1245 hospital employees, the sample size determined by Yamane; Yamane (1967:886) provides a simplified formula to calculate sample sizes. A 95% confidence level and  $P = .5$

$$n = \frac{N}{1 + N(e)^2}$$

Where

- n - sample size
- N - Population size
- e - the acceptable sampling error

Therefore, at a 95% confidence level and for a population of 1245, the sample size calculated is 294 for the study.

### Data Analysis

Data were analysed with the help of statistical tools like Mean, Standard Deviation, Correlation analysis and ANOVA to achieve the objectives of the study. The software used for this purpose was SPSS 23. Measures of central tendency and dispersion for the responses of each variable under investigation in the study were computed to assess respondents' role clarity.

### Profile of the Respondents

Of the total respondents, 88 per cent were female, and 12 per cent were male; nurses alone constituted 41 per cent of the respondents. The age range of the respondents varied from 21 to 74 years. In the sample, the highest qualification was a PhD, and the lowest was ITI Diploma. The work experience of the respondents varied from 0.6 to 34 years.

**Table 1. Comparison of Feedback Mechanism**

Sl.No	Items	Mean		Total Mean	Significance
		Hospital A	Hospital B		
	<b>Feedback Mechanism</b>				
1.	1 Clarity about appraisal system assessing performance	4.12	3.93	4.02	0.067
2.	2 Clarity about superior's perception of employee's role	4.25	4.27	4.26	0.831
3.	3 Superior's attitude towards employee's performance	3.66	3.67	3.67	0.970
4.	4 Superior's frequent communication about employee's performance	3.68	3.64	3.66	0.712
	<b>Overall Mean</b>	3.93	3.87	-	-

Table 1 above shows that the highest total mean score under 'Feedback Mechanism' was 4.26 for 'Superior's view of role played by the employee', followed by 'Clarity about appraisal system' with 4.02. 'Superior's attitude' and 'Superior's feedback on employee performance' were scored 3.67 and 3.66, respectively.

An Independent T-test was carried out to compare the means of variables, and the results are shown in Table 1. The results of the test show that there is no significant difference in mean value of the items between the two hospitals. An Independent T-test was also carried out to find gender differences in responses. The results showed no significant gender difference for feedback mechanism

There was not much difference in the overall mean scores for feedback mechanism between the two hospitals. Hospital A had a greater overall mean of 3.93, while Hospital B had a score of 3.87. This indicates that the feedback mechanisms of Hospital A are comparatively better than those of Hospital B.

**Table 2. Mean score of Feedback Mechanism by Education**

Sl. No.	Items	Mean				F	Sig.
		PG	Graduate	Diploma	Others		
	<b>Feedback Mechanism</b>						
1.	Clarity about appraisal system assessing performance	3.62	3.86	4.27	3.75	8.276	.000*
2.	Clarity about superior's perception of employee's role	4.35	4.18	4.31	4.25	.941	.421
3.	Superior's attitude towards employee's performance	3.92	3.66	3.61	3.25	1.039	.376

4.	Superior's frequent communication about employee's performance	3.57	3.60	3.73	3.50	.563	.640
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\*Significant at 0.05 level (2-Tailed)

Table 2 above shows the statistical results for education and feedback mechanism. An ANOVA test was carried out to determine whether variables under feedback mechanism differ significantly according to respondents' education and employment levels.

**Table 3. Mean score of Feedback Mechanism by Employment**

Sl. No	Items	Mean				F	Sig.
		Doctors	Nurses	Admin	Para-medical		
	<b>Feedback Mechanism</b>						
1.	Clarity about appraisal system assessing performance	3.65	4.18	3.62	4.19	8.911	.000*
2.	Clarity about superior's perception of employee's role	4.30	4.23	4.18	4.37	1.048	.372
3.	Superior's attitude towards employee's performance	3.85	3.56	3.82	3.65	1.161	.325
4.	Superior's frequent communication about employee's performance	3.20	3.67	3.63	3.76	1.914	.127

\*Significant at 0.05 level (2-Tailed)

Table 3 below shows ANOVA results for different employment levels and feedback mechanism. In both results, clarity about appraisal system was found to be significant at 0.05 level (2-Tailed).

**Table 4. Comparison of Extent of Role Clarity**

Sl.No	Items	Mean		Total Mean	Significance
		Hospital A	Hospital B		
	<b>Extent of Role Clarity</b>				
1. 5	Clarity about job description	4.56	4.50	4.52	0.413
2. 6	Clarity about job accountabilities in job description	4.33	4.25	4.28	0.371
3. 7	Reporting to more than one boss	2.99	3.11	3.06	0.401
4. 8	Given charge of duties other than those included in job description	3.10	2.90	2.99	0.158
5. 9	Subordinates reporting to someone else	3.11	3.48	3.42	0.005*
6. 10	Receiving insufficient information for job at hand	3.34	3.13	3.22	0.081
7. 11	Feeling of heavy workload	2.61	2.37	2.48	0.063
8. 12	Uncertainty about authority	3.10	3.16	3.13	0.629
9. 13	Working under incompatible policies and guidelines	3.56	3.25	3.39	0.012*
10. 14	Co-worker related clarity	4.21	4.23	4.22	0.818
11. 15	Skill improvement Programme for Job role	3.80	3.74	3.77	0.620
	<b>Overall Mean</b>	3.31	3.26	-	-

\*Significant at 0.05 level (2-Tailed)

For total mean scores under 'Extent of Role clarity', nine of the eleven variables scored well above the mean average of 3; 'the highest mean of 4.52 was obtained for 'Clarity about job description', followed by 'Clarity about job accountabilities in job description', with a score of 4.28. The two variables with the lowest mean scores under 3 were 'given charge other than under job description' with 2.99 and 'Feeling of heavy work load' with a score of 2.48. The remaining seven items had scores ranging from 3.06 to 4.22.

The Independent T-test results to compare the means of variables of hospitals A and B showed that only two variables showed significant differences, as shown in Table 4. These include respondents feeling that subordinates are reporting to someone else in addition to them, and also feeling that they are working under incompatible policies and guidelines.

Two dimensions of role clarity (items 4 and 9) show a significant difference between the two hospitals. There was only a small difference between the two hospitals in overall mean scores for role clarity. Hospital A had a slightly higher overall mean score of 3.31, compared to Hospital B's score of 3.26. This suggests that Hospital A had better role clarity.

**Table 5. Gender-wise Analysis of Extent of Role Clarity**

Sl.No	Items	Mean		Significance
		Male	Female	
	<b>Extent of Role Clarity</b>			
1.	Clarity about job description	4.40	4.54	0.227
2.	Clarity about job accountabilities in job description	4.14	4.30	0.262
3.	Reporting to more than one boss	2.71	3.10	0.073
4.	Given charge of duties other than those included in job description	2.71	3.03	0.145
5.	Subordinates reporting to someone else	3.49	3.29	0.331
6.	Receiving insufficient information for job at hand	3.09	3.24	0.415
7.	Feeling of heavy workload	2.83	2.43	0.043*
8.	Uncertainty about authority	3.09	3.14	0.794
9.	Working under incompatible policies and guidelines	3.06	3.44	0.046*
10.	Co-worker related clarity	3.83	4.27	0.000*
11.	Skill improvement programme for Job role	3.43	3.81	0.035*

\*Significant at the 5% level

The Independent T-test results to find gender differences under 'Extent of Role Clarity' are shown in Table 5. The analysis indicates significant gender difference (significant value is less than 0.05 levels [2-Tailed]) for responses viz. feeling of a heavy workload, regular staff training programmes, working under incompatible policies and guidelines and co-worker related clarity. All the remaining items of role clarity are found to be not significantly different in terms of gender.

**Table 6. Correlation of Work experience with Extent of Role Clarity**

Items		R	p-Value
<b>Work Experience</b>	<b>Extent of Role clarity</b>		
	Clarity about job description	-0.051	0.387
	Clarity about job accountabilities in job description	0.088	0.131
	Reporting to more than one boss	-.148*	0.011*
	Given charge of duties other than those included in job description	0.038	0.517
	Subordinates reporting to someone else	-.127*	0.032*
	Receiving in sufficient information for job at hand	0.07	0.231
	Feeling of heavy work load	-0.023	0.098
	Uncertainty about authority	0.055	0.348
	Working under incompatible policies and guidelines	0.093	0.111
	Co-worker related clarity	0.018	0.753
Skill improvement programme for Job role	-0.119*	0.041*	

\* Significant at the 5% level

The values obtained from the bivariate correlation test are shown in Table 6. They suggest that work experience is slightly negatively correlated to three variables, namely regular skill improvement training programme, reporting to more than one boss and subordinate reporting to someone else in addition to them, with a Pearson Correlation Coefficient of  $r = -.119, -.148$  and  $-.127$ , respectively. A correlation analysis was carried out to find correlation between work experience and feedback mechanism, and the results showed no significant correlation.

**Table 7. Mean score of extent of Role Clarity by Education**

Sl. No.	Items	Mean				F	Sig.
		PG	Graduate	Diploma	Others		
	<b>Extent of Role clarity</b>						
1.	Clarity about Job Description	4.43	4.44	4.62	4.50	1.915	.127
2.	Clarity about Job accountabilities in Job Description	4.19	4.12	4.44	4.50	4.003	.008*
3.	Reporting to more than one boss	3.05	3.31	2.83	3.25	3.572	.014*
4.	Given charge of duties other than those included in job description	2.78	3.00	3.03	3.25	.484	.694
5.	Subordinates reporting to someone else	3.11	3.47	3.23	3.50	1.411	.240
6.	Receiving insufficient information for job at hand	3.22	3.14	3.32	2.50	1.229	.299
7.	Feeling of heavy work load	2.51	2.42	2.54	1.75	.865	.460
8.	Uncertainty about authority	3.35	2.96	3.24	2.75	2.231	.085
9.	Working under incompatible policies and guidelines	3.62	3.18	3.52	3.25	2.842	.038*
10.	Co-worker related clarity	3.86	4.18	4.34	4.75	5.475	.001*
11.	Skill improvement programme for Job role	3.14	3.62	4.09	3.25	11.616	.000*

\*Significant at 0.05 level

An ANOVA test was carried out to determine whether variables under role clarity differ significantly according to respondents' education and employment levels. Table 7 above shows the statistical results for education and role clarity, while Table 8 below shows ANOVA results for different employment levels and role clarity.

**Table 8. Mean score of extent of Role Clarity by Employment**

Sl. No	Items	Mean				F	Sig.
		Doctors	Nurses	Admin	Para-medical		
	<b>Extent of Role clarity</b>						
1.	Clarity about Job Description	4.30	4.60	4.53	4.46	1.551	.201
2.	Clarity about Job Accountabilities in Job Description	4.10	4.38	4.24	4.23	1.172	.321
3.	Reporting to more than one boss	2.80	2.99	3.15	3.14	.701	.552
4.	Given charge of duties other than those included in job description	3.20	2.85	2.88	3.23	2.061	.105

5.	Subordinates reporting to someone else	3.60	3.29	3.35	3.25	.563	.640
6.	Receiving insufficient information for job at hand	3.70	3.13	3.41	3.10	2.887	.036*
7.	Feeling of heavy work load	2.85	2.47	2.37	2.50	1.039	.376
8.	Uncertainty about authority	3.35	3.02	3.10	3.26	1.137	.335
9.	Working under incompatible policies and guidelines	3.60	3.20	3.49	3.54	2.195	.089
10.	Co-worker related clarity	4.05	4.30	4.06	4.29	2.259	.082
11.	Skill improvement programme for Job role	3.00	4.19	3.35	3.68	17.243	.000*

\*Significant at 0.05 level

The significant P-value (value is less than 0.05 levels) indicates a significant difference in variables constituting role clarity for other groups of respondents, based on their educational qualification and different levels of employment.

### Major Findings and Suggestions

Comparing the two hospitals studied, Hospital A had slightly higher overall mean scores for both feedback mechanism and role clarity than Hospital B, suggesting that Hospital A was better on both fronts. The results of the present study pertaining to feedback mechanism reveal that clarity about the appraisal system was significantly associated with level of employment, and was seen to be higher among nurses and paramedical staff. One possible factor could be the regular skill development training that the nurses receive, which gives them a better understanding of how their performance is evaluated. The results also show a significant relationship between employees' education and their clarity about the appraisal system. Mujtaba and Shuaib (2010) found that timely performance feedback aids employee motivation and innovation, and enhances their performance. Bandura (1977) observed that feedback and clarity about performance influenced employees' perception of their work.

Overall, the hospital employees had clarity about their job description, job accountabilities and appraisal system. However, respondents generally felt that their workload was too heavy to complete during a typical workday. These findings are consistent with Mohamed and Hossny (2020), where nurses were aware of the reasons for role ambiguity and expressed the least satisfaction with their work conditions.

With regard to role clarity, many of the findings from both hospitals were comparable. Still, a significant difference was found pertaining to two variables under role clarity viz, 'subordinates reporting to someone else' and 'incompatible policies and guidelines.' This is in line with two studies on nurses – Mohamed and Hossny (2020) noted that nurses were relatively less satisfied with hospital policies and rules, and Mawgod et al. (2018) suggested changes in policies, role, and procedures be communicated to all nurses.

According to the respondents, employees were assigned work that was not under their job description. This can reduce work output, create hostility among employees and even affect the reputation of the hospital. Hospital management has to urgently look into these aspects for better delivery of hospital services. The hospital sector relies heavily on teamwork, and sufficient co-worker related clarity was reported among the hospital employees. Similarly, Bhattacharyya (2011) found that role clarity in performance plans promotes better teamwork. However, in contrast, Lynn and Kalay (2016) opined that role clarity does not significantly correlate with team performance.

Though the hospital industry is knowledge-based, a significant gender difference was noticed in five variables, indicating gender differences in role clarity. This may be because of conflicts that working women in India often face due to family commitments. Correlation analysis suggests that the variables of role clarity such as regular skill improvement training programmes, reporting to more than one boss and subordinate reporting to someone else in addition to them, are significantly related to work experience. These findings indicate that less experienced employees face issues of clarity in reporting and training. This can be addressed by providing trainees and junior employees at hospitals with the additional support of regular training programmes and a focus on clarity in reporting to superiors. Employees with more experience have good control over their subordinates but felt that they are not getting regular skill improvement training programmes. They are also not reporting to more than one boss. This may be because employees with more experience are clear about the administrative setup and can manage internal conflicts.

Skill development training programmes and workshops were rarely conducted in the hospitals studied, with the exception of those for nurses. These findings are consistent with Abed and Banan (2016), who suggested that organisations should provide feedback-based career development to the best performers. More frequent staff training programmes were found to have been conducted among the diploma holders (where nurses form the majority) compared to graduates or postgraduates. Similarly, Mohamed and Hossny (2020) found that nurses' understanding of the causes of role ambiguity (especially in relation to standards for performance evaluation and authority on the job) was related to their level of education and recommended that diploma nurses be given educational support to understand their roles and responsibilities better.

For role clarity, employees need access to the free flow of information and to regularly update their knowledge and skill levels to perform their roles more effectively. In the highly competitive healthcare industry, where services are gradually shifting from the



public sector towards the private sector, state-of-the-art hospital management is needed, along with computerised and automated equipment and knowledgeable and skilled doctors and nurses. Regular skill development training programmes, workshops and seminars for staff are required to achieve the desired objectives. The results on heavy workload indicate the need for hiring additional staff in hospitals to reduce the load on overburdened staff. Heavy workload may lead to stress, dissatisfaction, and withdrawal tendencies among employees (Rajan, 2018).

Generally speaking, all categories of employees should be provided with adequate information about the appraisal system, as it is the most important yardstick to measure employee performance. Management also has to prioritise training all classes of employees, rather than focusing only on the nurses, for better functional efficiency. Employees all require immediate performance feedback to analyse their strengths and weaknesses, as they want to learn about their progress and improve performance.

## Conclusion

The importance of role clarity and feedback mechanisms for better productivity and achievement of organisational goals has been proved beyond doubt. This study indicates that hospital employees have average levels of clarity about their roles. This will have a lasting effect on the overall performance of the hospital and the delivery of healthcare services. HR professionals should ensure that job description, job accountabilities and the appraisal process for every class of employees are laid out clearly, and that employees understand them. Employees should be made aware of the role played by them and their responsibilities. The current study indicates the existence of work overload, which needs to be addressed, as overburdening employees can affect the quality of their work output. Instances of more controlling officers and lack of control over subordinates that were revealed should be avoided. Employees should be imparted with adequate and updated information for the job at hand. They should be able to express their authority in the institution they work for. The management should frame compatible policies and guidelines for employees. Hospital employees require well-structured training and development programmes at regular intervals, which should be imparted as management policy for employees to develop competent skills to meet the present-day challenges.

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