



## A Phenomenological Study on Nurse Productivity Challenges in a Resource-Limited Primary Hospital in the Philippines

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### Abstract

Nurse productivity is critical to health care efficiency, particularly in resource-limited primary hospitals where operational challenges significantly hinder nurses' ability to deliver optimal care. This research examined the various productivity challenges faced by nurses in a resource-limited primary hospital in the Philippines and identified potential solutions to improve their current working conditions. A phenomenological approach was used to collect data through in-depth interviews of seven registered nurses at a resource-limited primary hospital. Four themes emerged from the thematic analysis, addressing both the challenges and potential solutions to the issues faced by the nurses. The challenges included high workloads and limited staffing, resource scarcity, emotional and mental strain, and training and knowledge gaps. The themes for the proposed solutions include adequate staffing and support resources, consistent access to essential supplies and equipment, skill development and continuous training, and holistic support for nurse well-being and productivity. Based on these findings, it is imperative to offer systemic changes, such as enhanced staffing models, better resource allocation and strengthened support systems, for nurses to lessen nurse productivity challenges in resource-limited settings. This study provides valuable insights into the complexities of nursing practice in a primary healthcare setting and serves as a foundation for developing targeted strategies to enhance nurse productivity and improve patient care quality within the Philippine healthcare system. Further, this study can serve as a reference for a more focused evaluation of nurse productivity in a resource-limited hospital setting, offering localized insights and context-specific recommendations.

**Keywords** *Nurse Productivity Challenges, Phenomenological Nurse Study, Philippine Healthcare System, Resource-Limited Primary Hospital, Transactional Theory of Stress and Coping*

### INTRODUCTION

Nurse productivity is crucial for ensuring healthcare efficiency, particularly in resource-limited primary hospitals where significant operational challenges hinder nurses' ability to deliver optimal care. Productivity among nurses directly influences the quality of patient care, hospital performance, and overall health outcomes. Improving nurse productivity in constrained settings can lead to more accessible, high-quality health care for underserved populations, which aligns with broader goals for equitable health care delivery in the Philippines. However, these settings often face persistent challenges, such as staff shortages, limited equipment, and high patient-to-nurse ratios, which negatively impact nurses' efficiency and ability to provide consistent care.

International studies have identified several factors influencing nurse productivity. For instance, effective leadership has been shown to enhance collaboration, improve job satisfaction, and allocate resources efficiently, thereby increasing productivity (Alsadaan et al., 2023). Similarly, leadership support in decision-making and resource management has been found to avert challenges and foster good performance. Technological advancements have also optimized workloads, streamlining administrative tasks and patient care routines (Rony et al., 2024). However, successfully implementing these technologies requires strong leadership and comprehensive training (Al Kuwaiti et al., 2023). Despite these findings, most research on nurse productivity has focused on urban healthcare settings, leaving a gap in understanding the unique

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challenges faced by nurses in rural, resource-constrained hospitals. Compared to other well-funded healthcare systems like Australia and those from other developed countries, whose staffing ratios are more easily favored and are more accessible to resources, many primary hospitals in the Philippines suffer from chronic understaffing and resource scarcity that leads to heavier loads and compromised patient care (Alibudbud, 2023). Similar issues are seen in other developing countries like Indonesia and India, where rural healthcare facilities have limited finances, staff resources (Anggraini, 2023), and infrastructure (Gogoi et al, 2021).

In the Philippines, nurses in public hospitals face significant challenges, including high patient loads, lack of essential medical supplies, and administrative burdens, all of which contribute to stress, burnout, and decreased productivity (Alibudbud, 2023). This is the same condition experienced by nurses in the primary hospital. These nurses in this hospital have productivity, which can generally affect hospital performance, patient outcomes, and overall healthcare delivery efficiency. Corollary to their current situation, research addressing nurses' experiences in rural primary hospitals is limited, particularly concerning how day-to-day challenges in resource-limited environments affect nurses' productivity. Existing studies have largely overlooked the phenomenological experiences of nurses in such contexts, which are distinct from those in urban centers. This study addresses this gap.

Therefore, this study aimed to determine the productivity challenges nurses face in a resource-limited primary hospital in the Philippines using a phenomenological approach. Specifically, this study examined the factors affecting workers' productivity and potential solutions to improve their working conditions. This study contributes to the growing body of knowledge on nurse productivity and provides practical recommendations for enhancing the efficiency of healthcare services.

## **LITERATURE REVIEW**

The literature reviews nurse productivity challenges and primary hospitals in resource-limited settings to examine the challenges related to nurses' productivity in primary hospitals in rural settings of the Philippines. This approach identifies solutions based on the lived experiences of registered nurses, which can serve as a foundation for improving the efficiency of hospitals.

### **Transactional Theory of Stress and Coping**

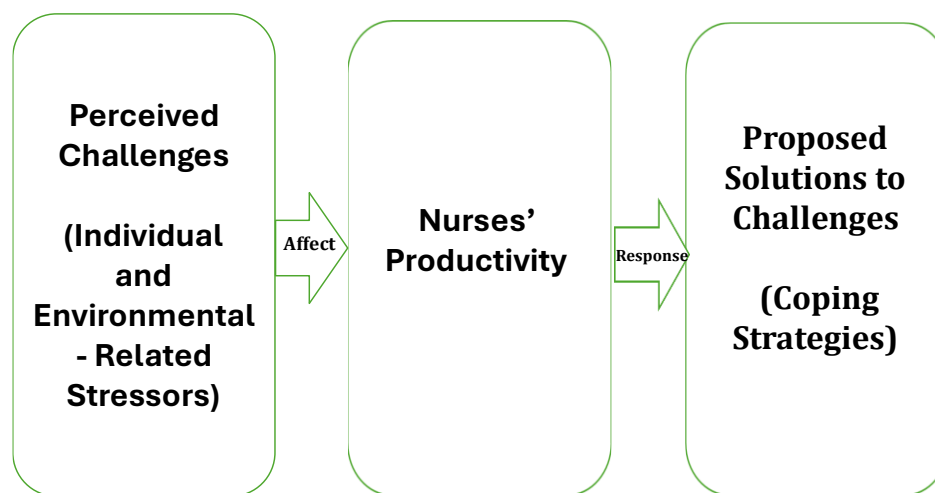
Lazarus and Folkman's transactional theory of stress and coping provides a valuable framework for understanding how nurses in resource-limited settings manage stressors and maintain productivity. This theory posits that stress arises when individuals perceive an imbalance between external demands and the resources available to meet them, significantly affecting their ability to function effectively (Ab Latif & Mat Nor, 2019). For example, nurses in rural hospitals may feel overwhelmed when tasked with managing emergencies without access to essential resources like defibrillators or ventilators, further intensifying the sense of imbalance and stress in their day-to-day experiences. Nurses in resource-constrained environments often experience increased stress due to inadequate staffing, limited equipment, and poor working conditions (Aiken et al., 2018). These stressors cause psychological strain, adversely affecting job satisfaction and performance.

Adaptive coping mechanisms such as emotional regulation, social support, and reframing stressful situations have improved nurses' well-being and productivity (Soylu et al., 2023). For instance, the resilience enhancement program implemented demonstrated significant success in enhancing adaptive coping strategies among forensic nurses, resulting in improved job satisfaction and reduced burnout (Henshall et al., 2020). Conversely, maladaptive strategies can exacerbate stress and reduce job performance. Han et al. (2023) emphasized that nurses in resource-limited

settings often rely on informal support networks and personal resilience to navigate demanding roles, which frequently extend beyond healthcare provision to include community advocacy and leadership.

The theory also underscores the importance of addressing emotional and social dimensions in nursing practice to enhance coping and productivity (Alsadaan et al., 2023). For instance, culturally sensitive interventions, such as mentorship programs and emotional support initiatives, can mitigate stress and improve nurse retention (Lin et al., 2023). Using phenomenological approaches to capture nurses' subjective experiences aligns with this theory and provides valuable insights into how individual and environmental factors influence coping mechanisms and productivity.

Accordingly, this research was premised on the fact that different stressors promoting challenges affect nurses' productivity, and coping strategies are necessary to stay highly engaged in their work. Thus, the conceptual model anchored on the Transactional Theory of Stress and Coping, which examined the productivity challenges encountered by nurses, and the possible coping strategies employed to minimize the impact of these challenges are presented in Figure 1.



**Figure 1.** Conceptual Framework

A phenomenological approach to data collection captures nurses' subjective experiences and personal challenges as central to understanding how individual and environmental factors influence their productivity. This approach aligns with the Transactional Theory of Stress and Coping's emphasis on subjective appraisals, revealing how nurses' emotional and psychological responses to stressors shape their coping processes. Through in-depth interviews, this study assessed how nurses perceive and respond to workplace stressors, how these experiences influence their productivity, and what strategies they use to cope with challenges. By focusing on individual narratives, this approach provided a nuanced understanding of the complex interplay between external constraints and nurses' adaptive responses, reinforcing the study's theoretical foundation.

### **Nurse Productivity Challenges**

Several interconnected factors influence nurse productivity in resource-limited healthcare settings. Staffing shortages are a pervasive issue that often results in increased workloads and burnout, which hinder nurses' ability to deliver consistent, high-quality care. Inadequate training intensifies these challenges, leaving nurses unprepared to effectively address healthcare demands and resource constraints. Staffing shortages, a global issue exacerbated in low-resource settings,

often lead to increased workloads and burnout, undermining nurses' ability to provide consistent, high-quality care (World Health Organization, 2020). High turnover rates among nursing staff further compound these challenges because stressed and unsupported nurses frequently leave their positions (Adhikary, 2023).

Inadequate access to professional development opportunities also affects productivity. As health care environments evolve with new technologies and treatment protocols, nurses require continuous education to remain competent (Goldsby et al., 2020). However, limited time and resources often hinder access to such opportunities in resource-constrained settings (Nilsen et al., 2020). Additionally, technological integration, while beneficial for streamlining healthcare processes, can pose challenges. For example, poorly designed electronic health record systems increase administrative burdens, diverting time to patient care (Quinn et al., 2018).

Workplace culture and management practices significantly influence nurse productivity. Jankelová and Joniaková (2021) stressed that rigid hierarchical structures and insufficient support systems diminish job satisfaction and motivation. On the other hand, supportive work environments characterized by effective communication, team collaboration, and flexible scheduling enhance productivity and reduce stress (National Academies of Sciences, Engineering, and Medicine, 2021). Financial pressures further complicate productivity because budget constraints often result in inadequate compensation, insufficient resources, and outdated equipment. These limitations force nurses to perform under unmanageable conditions, leading to fatigue and reduced efficiency (Hanson et al., 2022).

### **Primary Hospitals in Resource-Limited Settings**

Primary hospitals in resource-limited settings, worldwide and in the Philippines, face significant constraints that hinder their ability to deliver adequate health care services. These challenges encompass inadequate infrastructure, equipment shortages, and workforce deficits, all of which compromise healthcare delivery quality and efficiency. Studies have identified systemic deficiencies, such as the absence of essential diagnostic tools and life-saving equipment, that severely limit the capacity of these hospitals to address emergencies or complex medical cases (Dayrit et al., 2018). For example, hospitals often lack portable ultrasound machines, blood gas analyzers, and automated external defibrillators, which are critical for effectively diagnosing and managing life-threatening conditions. For instance, Truché et al. (2020) highlighted that approximately 5 billion people globally lack access to safe and affordable surgical and anesthesia care due to insufficient infrastructure. This situation is particularly concerning in rural areas where patients often travel long distances to reach better-equipped facilities, only to encounter similar constraints.

In the Philippine context, rural hospitals frequently struggle with inadequate resources, particularly for maternal and child health services, because of systemic funding gaps and resource allocation inefficiencies (Dayrit et al., 2018). The "brain drain" phenomenon intensifies these challenges, where trained health care professionals migrate to higher-income countries, leaving local facilities understaffed. (Alibudbud, 2023) stated that over 10% of trained Filipino nurses work abroad, resulting in critical staffing shortages in primary hospitals. For example, some rural health units operate with a nurse-to-patient ratio as high as 1:40 during peak hours, which significantly affects patient outcomes. This reliance on mid-level providers with limited training further impacts the quality of care provided in underserved areas (Nilsen et al., 2020). Moreover, financial challenges, including insufficient budgets for staff salaries, facility maintenance, and essential supplies, are pervasive (Borges de Oliveira & de Oliveira, 2022). Although the Universal Health Coverage Act of 2019 aims to improve healthcare access in the Philippines, its implementation at

the primary level has been slow because of financial and operational constraints ([Bautista et al., 2022](#)).

## RESEARCH METHOD

Phenomenological research focuses on vivid experiences perceived or interpreted by participants and views and describes their world of consciousness as accurately as possible. This approach allows researchers to explore the nuances of participants' lived experiences, revealing previously unavailable insights. For this study, the researchers used phenomenology to investigate the lived experiences of registered nurses working in a resource-limited primary hospital in the Philippines. According to [Wirihana et al. \(2018\)](#), this method is particularly effective in deriving common attributes and themes from diverse responses. was employed, as it is particularly effective in deriving common attributes and themes from diverse responses. This method facilitates a comprehensive understanding of collective experiences rather than individual narratives. ([Gunawan et al., 2021](#)) stated that phenomenology is well-suited for investigating complex, multifaceted challenges by examining participants' perspectives and the meanings they attach to their experiences.

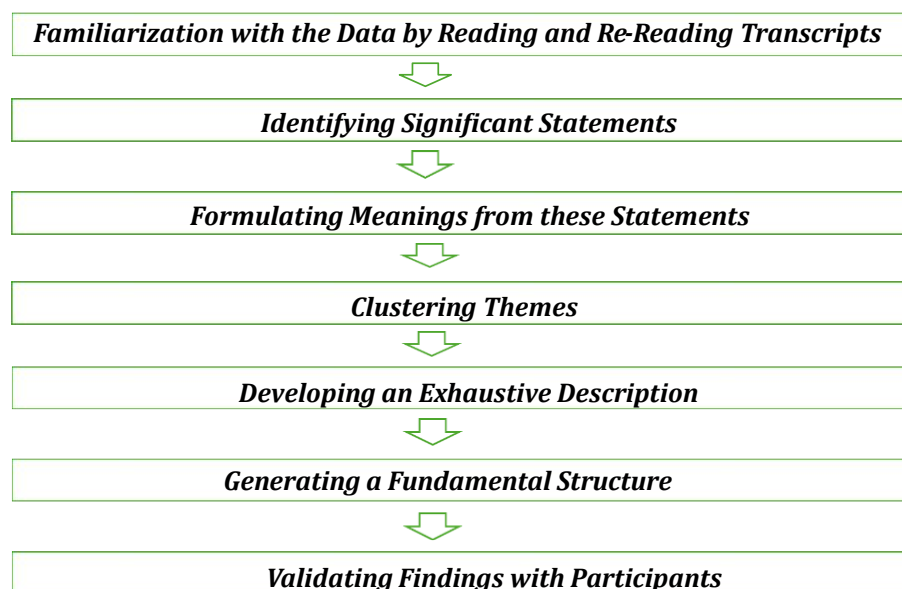
Seven participants were selected for the study, representing critical roles within the hospital: one chief nurse, three supervisory nurses, and three junior nurses. These nurses are employed in a primary government hospital with limited facilities and equipment but offer essential healthcare services to the community in one of the provinces of the Eastern Visayas Region of the Philippines. These participants were purposively selected to ensure diversity in roles and experience levels, which aligns with the study's objective of capturing a holistic view of nurses' productivity challenges in resource-constrained environments. Interviews with the participants occurred in the primary hospital from October 1–21, 2024.

Data were collected through semi-structured interviews guided by a well-developed interview protocol. The protocol included open-ended and probing questions to elicit in-depth qualitative descriptions of nurses' day-to-day experiences. The guide was reviewed by an expert panel consisting of a researcher experienced in qualitative methodologies, a nurse with advanced training, and a professor specializing in healthcare management to ensure the validity of the interview questions. Their feedback led to several revisions to improve clarity, relevance, and comprehensiveness. To achieve data validity, the researchers performed triangulation. Triangulation is a qualitative research strategy for validity testing that involves information convergence from various sources by [Carter et al. \(2014\)](#). The triangulation form used in this research is data-source triangulation, which is similar to the study of [Hanathasia et al. \(2024\)](#). In this study, data collection involved several nurses with varied experiences to obtain multiple perspectives and validate the data.

Formal permissions were obtained from the hospital administration to ensure ethical compliance with participant rights, informed consent, and confidentiality protocols. Before signing the informed consent forms, the participants were fully informed about the study's purpose and methods. Interviews were scheduled at times convenient for participants to minimize work disruptions, with each session lasting from 45 minutes to an hour. Interviews were conducted in a quiet, secure location within the hospital to ensure patient privacy and comfort. With the participants' consent, all interviews were audio-recorded and later transcribed verbatim. Participants were anonymized during transcription to maintain confidentiality.

Participant feedback was obtained during the validation process to ensure the authenticity of the findings. All participants were assigned coded labels (e.g., N1, N2) to maintain confidentiality. Data analysis followed Colaizzi's seven-step framework ([Wirihana et al., 2018](#)), which includes 1) familiarization with the data by reading and re-reading transcripts, 2) identifying significant

statements, 3) formulating meanings from these statements, 4) clustering themes, 5) developing an exhaustive description, 6) generating a fundamental structure, and 7) validating findings with participants. A schematic of the process flow is presented in Figure 2. This systematic process facilitated a thorough exploration of nurse productivity challenges and possible solutions to check on these challenges, capturing the richness and depth of the lived experiences of the study participants while adhering to rigorous ethical and methodological standards.



**Figure 2.** Colaizzi's Seven-Step Thematic Analysis Framework

## FINDINGS AND DISCUSSION

This section presents a review of the literature directly relevant to this study, covering topics such as the profile of the participants, the themes identified regarding challenges to nurses' productivity, and proposed solutions to address the challenges in resource-limited primary hospital settings.

### Profile of the Participants

Profile of seven registered nurses working in a primary hospital in a rural setting in the Philippines with limited resources. Table 1 presents the profiles of seven nurses with varying roles and levels of experience in a hospital setting. Their responsibilities include managerial and direct patient care functions.

**Table 1.** Profile of the Participants

<b>Participant Code</b>	<b>Role</b>	<b>Length of Service</b>	<b>Primary Function in Hospital</b>
<b>N1</b>	Chief Nurse	26 years	Oversees nursing operations, manages department resources, and ensures patient care standards
<b>N2</b>	Supervisor	32 years	Coordinate shift schedules, allocate staff to units, and assist in managing day-to-day patient care
<b>N3</b>	Supervisor	23 years	Focusing on training and mentoring

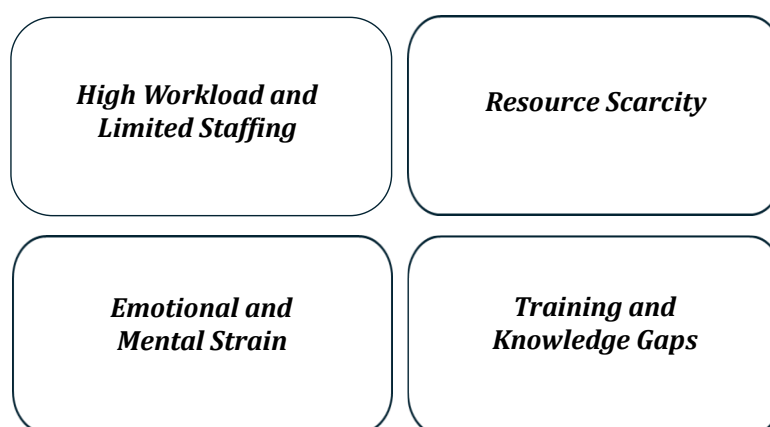


Participant Code	Role	Length of Service	Primary Function in Hospital
			nursing staff, promoting adherence to protocols, and addressing patient care efficiency
N4	Supervisor	15 years	Oversees compliance with documentation and reporting standards and ensures efficient communication within departments.
N5	Junior Nurse	6 years	Provide direct patient care, including vital sign monitoring, medication administration, and basic patient education
N6	Junior Nurse	4 years	Assist senior nurses with emergency and regular care duties at the ER.
N7	Junior Nurse	2 years	Manage patient admission, assist with basic treatments, and facilitate possible referrals.

These profiles reveal a balance between leadership, oversight, and direct patient care, with challenges emerging from role-specific duties and years of experience. According to [Fawaz et al. \(2018\)](#), both the functions and length of service significantly impact productivity challenges, which resonate with nurses' experiences when providing quality care in challenging environments.

### **Nurses' Productivity Challenges in a Resource-limited Primary Hospital**

Nurses in resource-limited primary hospitals face complex challenges that hinder their productivity and compromise the quality of patient care. The thematic framework for nurses' productivity challenges is presented in Figure 3. Based on the participants' testimonies, the themes developed were based. The four themes highlight the multifaceted factors influencing nurses' daily experiences.



**Figure 3.** Thematic Framework for Productivity Challenges

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### **High Workload and Limited Staffing**

Participants reported that nurse-to-patient ratios in resource-limited primary hospital settings in rural areas often exceed 1:30, far above the 1:4–1:6 ratio recommended by the World Health Organization. This disparity leads to fatigue, rushed care, and errors. The sense of being overwhelmed was evident in nurses' statements, such as N1's comment,

*"The workload is overwhelming, and with limited support, it is difficult to maintain focus, which inevitably impacts the quality of care."* Similarly, N2 remarked, *"With a shortage of supplies and personnel, we are often forced to make difficult choices on who receives immediate attention."* – N1

This finding is consistent with that of [Maghsoud et al. \(2022\)](#), who identified that excessive workloads and staff shortages significantly hinder nurse productivity. [Purdue Global \(n.d.\)](#) also emphasized that ongoing global nursing shortages and aging workforces intensify such issues. However, beyond these structural concerns, this study highlights the critical insight that nurses' perspectives on their work environment actively shape their productivity. The emotional and psychological burden they carry, feeling responsible yet unable to provide adequate care, creates a mental strain that directly affects their decision-making, efficiency, and job performance. N3 shared,

*"We are stretched too thin, and it is heartbreaking when we cannot attend to everyone equally."* – N3

The relationship between workload, staffing shortages, and nurse productivity is cyclical. A heavy workload forces nurses to make difficult prioritization choices, often leading to moral distress. This emotional exhaustion, compounded by overtime, contributes to burnout, lower job satisfaction, and, ultimately, decreased efficiency. Moreover, overworked nurses are at higher risk of absenteeism and attrition, further worsening staff shortages and reinforcing the cycle. Addressing these challenges through flexible work models and increased recruitment is essential not only for operational efficiency but also for sustaining nurse well-being. Research by [Health Carousel \(2023\)](#) supports innovative approaches such as flexible scheduling and virtual nursing to optimize staffing levels, reduce burnout, and improve patient outcomes.

### **Resource Scarcity**

Participants consistently identified shortages of medical supplies and outdated infrastructure as major barriers. N3 stated,

*"We always find ourselves without essential items, which delays patient care and adds stress to our day."* – N3

Meanwhile, N4 described the infrastructure challenges:

*"Our hospital's infrastructure is old, and issues such as power outages disrupt everything... these daily hurdles slow us down and make it exhausting just to meet basic standards of care."* – N4

This finding aligns with [Nsengimana et al. \(2017\)](#) and reports from and reports from the [World Health Organization \(2012\)](#), which supported the finding that an overwhelming amount of



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medical equipment is dysfunctional in developing countries, greatly hindering efficient healthcare delivery. However, the study is beyond just highlighting structural inadequacies; it instead focuses on how nurses' experiences in their day-to-day activities affect their productivity. When supplies run low or when infrastructure is questionable, nurses make do, but they spend additional time improvising solutions or addressing acute cases when routine care is pushed aside. This constant must compensate for slower workflows and leads to emotional burden, frustration, and fatigue.

The relationship between resource shortages, infrastructure challenges, and nurse productivity is cyclical. Limited resources force nurses to adopt a reactive, rather than efficient, proactive approach. The time spent managing supply shortages is diverted to direct patient care, which, in turn, impacts hospital efficiency. Moreover, working in an under-resourced environment contributes to burnout, lowering motivation and increasing staff turnover—further deepening workforce shortages.

A resilient healthcare supply chain, as emphasized by [Hossain et al. \(2022\)](#), is a good starting point to break this cycle. Reliable access to medical supplies and modernizing infrastructure would improve patient care and help nurses work more efficiently, thus reducing stress and enhancing job satisfaction. These improvements are critical to maintain a productive healthcare workforce in the Philippines.

### ***Emotional and Mental Strain***

Nurses reported experiencing high levels of emotional stress, particularly when fulfilling roles beyond their responsibilities, such as providing psychosocial support. N6 shared:

*"Apart from our nursing duties, we are counselors and caregivers, especially during the pandemic. This responsibility adds to the usual workload and can be draining." – N6*

Similarly, N5 noted,

*"The emotional toll of the work is high... When I am emotionally drained, it is hard to stay focused and engaged." – N5*

This finding echoes [National Academies of Sciences, Engineering, and Medicine, \(2021\)](#), who documented the adverse effects of heavy workloads and staffing shortages on nurses' well-being. However, this study points to a more profound issue—nurses' perspectives show that their productivity is influenced by physical workload and the psychological burden of their expanded roles. Emotional exhaustion can decrease focus, decision-making capacity, and general job performance, thereby impacting patient care.

The interplay between emotional strain, workload, and productivity is cyclical. Nurses who are subjected to chronic stress and exhaustion tend to become less efficient, which increases the likelihood of burnout. Burnout leads to disengagement, further reducing work efficiency and creating a feedback loop that aggravates staff shortages and workplace dissatisfaction.

To overcome these concerns, the attendants suggested emotional support such as psychological counseling and tension management seminars for the nurses. This finding is corroborated by a study by [Radu \(2023\)](#), who stated that occupational mental health services have significantly enhanced focus by significantly reducing stress. Investing in emotional resilience among nurses is less of a support function and more of a productivity and retention imperative in resource-deprived environments.

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### ***Training and knowledge gap***

Limited training in new procedures and technology emerged as a significant barrier. N7 remarked,

*"Lack of training in new procedures and technology is another obstacle. When unsure of the correct protocol, it slows me down and impacts my productivity." – N7*

Similarly, N4 opined,

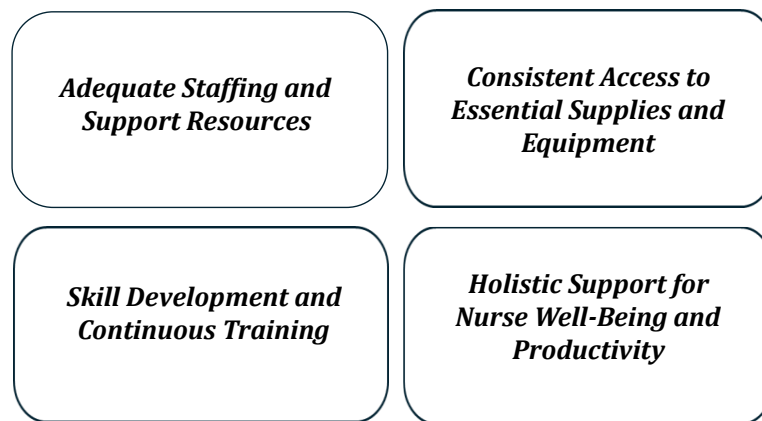
*"Training employees on time management and prioritization techniques would be invaluable. Many of us struggle with juggling multiple tasks." – N4*

While [Hendy \(2023\)](#) emphasized that continuous training enhances work performance and team morale, this study suggests that nurses' lack of training skews attitudes toward confidence and competence. When unsure of what to do, they become more cautious in their practice, rechecking the steps; however, this slow process results in delays and stress in handling the workflow. This hesitation affects individual performance and disrupts team efficiency, leading to delays in patient care.

The relationship between training, confidence, and productivity is clear. When nurses feel that they are not adequately prepared, their anxiety levels increase, making it difficult to manage time effectively. On the other hand, consistent training interventions can instill confidence, allowing nurses to navigate tasks more efficiently and make decisions faster, thus improving patient outcomes. Such knowledge gaps can be bridged by establishing ongoing training programs and mentorship initiatives, as recommended by [Keinänen et al. \(2023\)](#), who found that structured learning opportunities significantly enhance healthcare professionals' competence and job satisfaction. Moreover, [De Ramos and Briones \(2024\)](#) and [Briones et al. \(2023\)](#) also considered relevant training in building confidence among employees in delivering excellent service quality to their clients.

### **Proposed Solutions to Improve their Current Situation in Resource-Limited Healthcare Settings**

Improving nurse productivity in a resource-limited healthcare setting requires targeted solutions that address operational challenges and personal stressors. Four themes emerged from the participants' responses, highlighting specific strategies to enhance working conditions, support emotional well-being, and optimize resource management. Figure 3 presents the thematic framework of the proposed solutions. These proposed solutions reflect the participants' insights into what could help mitigate their challenges, thus promoting a more effective and supportive work environment. The following section explores each theme in detail, outlining actionable steps to improve the productivity and overall job satisfaction of nurses in this type of healthcare setting



**Figure 4.** Thematic Framework for Proposed Solutions

### ***Adequate Staffing and Support Resources***

This theme highlights the importance of adequate nursing staff and support personnel in managing patient workloads effectively and sustaining productivity. Nurses' perspectives revealed that the shortage of nursing staff directly impacts the quality of patient care and overall efficiency, besides increasing workload.

The participants noted the need for more nursing staff and support personnel to reduce burnout and improve the delivery of patient care. N2 said,

*"We need to improve our staffing levels. Adding more nurses would take a burden off the current staff and help us provide better patient care. With more help, we could work more efficiently and ensure all patients get attention." – N2*

N4 added,

*"More nursing aids or support staff would be a good addition. If we had more time for the routine work, we could concentrate on the critical patient care activities, increasing our productivity and ensuring that all patients receive attention promptly." – N4*

N5 also pointed out the work-life balance:

*"Flexible work schedules would greatly help. Letting nurses pick shifts that best fit their personal lives can prevent burnout and increase productivity, as well-rested nurses are more attentive and effective." – N5*

These responses illustrate how adequate staffing and supportive resources can improve patient outcomes. Staffing, workload, and productivity are interdependent factors. When there is a personnel deficiency, more workloads will be given to all attending nurses. This may result in overtasked nurses becoming tired and ineffective. As the rate of burnout increases, so does engagement and job satisfaction, which aggravates staff turnover and propagates the vicious cycle of understaffing. This finding aligns with the findings of [de Cordova et al. \(2024\)](#) that when nurses are ensured sufficient resource allocation, their stress levels can be reduced. Similarly, [Health Carousel \(2023\)](#) proposed that embracing innovative care delivery models such as flexible self-

scheduling and virtual nursing, can optimize an organization's workforce. These efficient nurse staffing models can improve clinician satisfaction and retention while enhancing patient outcomes, reducing costs, and supporting the bottom line.

### ***Consistent Access to Essential Supplies and Equipment***

This recommendation underscores the critical role of consistent access to medical supplies and equipment for maintaining nurse productivity and ensuring efficient patient care. Nurses' perspectives reveal that resource shortages hinder workflow and contribute to delays, inefficiencies, and increased stress, ultimately affecting overall healthcare delivery.

N3 emphasized the effects of scarcity of resources, saying,

*"Resource allocation is essential. We often run out of supplies, which affects our work. Accessing the necessary medical equipment and materials would significantly enhance our productivity." Similarly, N6 shared, "Increasing access to essential supplies and equipment would make a huge difference. When we lack the necessary resources, time is wasted and workflow disruptions occur. Ensuring we have what we need readily will greatly increase our productivity." – N3*

Resource availability is related to nurse productivity and patient care efficiency. If medical essentials are not provided, nurses may be distracted by having to improvise or search for extra supplies, meaning they may not attend to the patient directly. Inefficiency becomes a slowdown in the delivery process; frustration and fatigue increase, reducing workforce effectiveness.

This outcome aligns with [Hossain et al. \(2022\)](#), who stated that a resilient healthcare supply chain is the bedrock for continuous access to critical resources during a crisis. Healthcare institutions can enhance operational efficiency, reduce care disruption, and empower nurses to offer quality patient care by strengthening resource allocation and supply chain management.

### ***Skill Development and Continuous Training***

Ongoing training and professional development have emerged as critical factors in enhancing nurses' productivity, confidence, and ability to provide high-quality patient care. Nurses' perspectives highlight that continuous learning improves technical skills and equips nurses with essential competencies to manage workloads effectively and reduce workplace stress.

N3 emphasized the value of continuous education, stating,

*"Regular training sessions on the latest health care practices and technologies would significantly enhance our skills and confidence. Keeping updated will help us work more efficiently, reduce errors, and improve productivity while maintaining high-quality care." – N3*

Similarly, N4 pointed out the need for training in essential competencies, remarking,

*"Training on time management and prioritization techniques would be invaluable. Many of us struggle with juggling multiple tasks, and equipping nurses with these skills would help them work more effectively under pressure." – N4*

In addition to developing individual skills, mentorship was essential in professional and productivity development. N7 reported,

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*"This would help develop a mentorship program for juniors. For example, from experienced colleagues. This method will also improve patient care and make working more productive."*  
– N7

The training, confidence, and productivity interlinks. An effective nursing workforce is more productive, attentive, and able to manage complex patient care demands. In a situation where training is lacking, nurses will likely have poor judgment and time management skills, resulting in delays and increased stress levels. This perspective aligns with [Keinänen et al. \(2023\)](#), who revealed that constant mentoring and education programs greatly improve healthcare professionals' competencies, leading to improved work performance. This is also reiterated by [Kawakibi and Susanto \(2024\)](#), who stated that when employees' competencies improve, their job productivity will increase. Therefore, investments in structured training programs, mentorship initiatives, and skill development workshops can lead to a more competent and resilient nursing workforce, thus reducing burnout and ensuring sustained healthcare efficiency.

### ***Holistic Support for the Well-being and Productivity of Nurses***

The participating nurses explained that focus and productivity in a wholesome work environment comprising physical comfort, flexible scheduling, mental health resources, and team morale are essential. Their views pointed out that hospital work conditions directly influence various aspects, such as efficiency, job satisfaction, and quality of patient care.

N6 highlighted the importance of an ergonomic workspace by saying,

*"We should address the physical working environment. Improving the layout of our stations and ensuring that everything was ergonomically designed would make us comfortable and help us work more effectively."* – N6

N5 views the same case regarding flexible scheduling in preventing burnout as she explained:

*"Allowing the nurses to pick shifts that suit their personal lives may reduce burnout and increase productivity because rested nurses are more active and productive."* – N5

Beyond physical well-being, nurses felt that mental health support was critical to productivity. N7 mentioned,

*"Mental health support is a must. The availability of counseling services or stress management workshops would help to address the emotional pressures associated with the job, enhancing our ability to focus on patients and productivity."* – N7

Workplace morale and teamwork culture were deemed essential drivers for efficiency. N1 remarked,

*"Staff morale is critical. Implementing regular team-building activities and acknowledging our hard work would boost our spirits. A positive work culture encourages everyone to be more productive and engaged in their roles."* – N1

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N6 echoed this sentiment:

*"A positive work environment would help us cope with the emotional demands of our job, allowing us to focus better on patient care and productivity" – N6*

There is a relationship between workplace conditions, nurse well-being, and productivity. When nurses work in an environment that emphasizes physical comfort, emotional support, and teamwork, they are more likely to stay focused, engaged, and productive. However, the absence of these factors leads to burnout, low motivation, and poor care. This result aligns with [Escosura \(2023\)](#), who found that motivated employees are more likely to be productive, to be happier in their jobs, and to remain with their company for a longer period by creating a positive work atmosphere. According to [Concepcion et al. \(2024\)](#), a positive workplace culture sets the stage for a thriving and engaged workforce. Organizations can unlock the workforce's full potential and enhance performance by cultivating an environment that values employee well-being, growth, and collaboration.

## **CONCLUSIONS**

This study revealed the significant challenges nurses face in a resource-limited primary hospital in the Philippines. Key themes, such as high workload and limited staffing, resource scarcity, emotional and mental strain, and training and knowledge gaps, underscore the urgent need for systemic changes to bolster nursing competence and efficiency. These themes highlight areas for policy interventions to foster an efficient, resilient, and sustainable workforce. By addressing the identified challenges, the subject primary hospital can take actionable steps to improve nurse productivity and, in turn, patient outcomes. This study also identified the key themes as the proposed solutions to the identified challenges: adequate staffing and support resources; consistent access to essential supplies and equipment; skills development and continuous training; and holistic support for nurse well-being and productivity.

This study proposes that the implementation of optimized staffing models and ensuring consistent access to necessary supplies can reduce the physical and mental strain on nursing staff, enabling them to focus more on patient care than on overcoming logistical obstacles. The study also suggests that prioritizing leadership support and fostering a positive work environment can help reduce burnout and increase job satisfaction among nurses, potentially leading to lower turnover rates and improved patient care continuity. Furthermore, investing in training programs that enhance technology integration and time management skills is essential because these competencies can help nurses work more efficiently even when resources are scarce.

The results of this study underscore the need for increased resource allocation and support for the primary hospital in question. By making these improvements, healthcare organizations can strengthen their workforce, improve patient satisfaction, and create a more resilient healthcare infrastructure capable of meeting the demands of a resource-limited setting. The findings of this study have significant implications for healthcare policy and hospital management in resource-limited settings, emphasizing the need for systemic improvements to support nursing productivity and enhance patient care.

## **LIMITATION & FURTHER RESEARCH**

This study provides valuable insights into nurses' productivity challenges in a resource-limited primary hospital setting. However, several limitations may affect the broad applicability of the findings. First, the sample size was limited to a specific demographic group within a particular geographical location, which may restrict the generalizability of the results to other regions or



diverse healthcare environments. Likewise, the exclusive reliance on one-on-one interviews as the sole data collection method may limit the generation of authentic data, directly affecting the understanding of the depth and breadth of the explored topic. In addition, personal biases, recall limitations or discomfort in discussing sensitive issues may influence participants' responses, contaminating the data pertinent to the study.

Future research could benefit from a mixed-methods approach that combines qualitative and quantitative data to offer a more comprehensive view of nurses' challenges and experiences in similar settings. Integrating quantitative measures, such as surveys and productivity metrics, would provide a broader perspective on factors affecting nurse performance and allow for comparative analysis across different contexts. Additionally, employing randomized sampling with larger, more diverse participant pools would enhance the representativeness and robustness of the findings.

Using multiple evaluators to cross-check qualitative data could also add rigor, establishing the consistency and reliability of interpretations. Longitudinal designs for further studies may be considered to explore changes in productivity challenges over time, especially in response to implemented interventions. Comparative studies across different healthcare settings, including rural, urban, and peri-urban areas, could be meaningful in determining the location-specific factors affecting productivity and revealing best practices for addressing these challenges. Considering this, future research can contribute to a more refined, valid, and generalizable understanding of nurse productivity in resource-limited environments.

## REFERENCES

- Ab Latif, R., & Mat Nor, M. Z. (2019). Stressors and coping strategies during clinical practice among diploma nursing students. *Malaysian Journal of Medical Sciences*, 26(2), 88–98. <https://doi.org/10.21315/mjms2019.26.2.10>
- Aiken, L. H., Sloane, D. M., Barnes, H., Cimiotti, J. P., Jarrín, O. F., & McHugh, M. D. (2018). Nurses' and patients' appraisals show patient safety in hospitals remains a concern. *Health Affairs*, 37(11), 1744–1751. <https://doi.org/10.1377/hlthaff.2018.0711>
- Alibudbud, R. (2023). Addressing the burnout and shortage of nurses in the Philippines. *SAGE Open Nursing*, 9, 23779608231195737. <https://doi.org/10.1177/23779608231195737>
- Al Kuwaiti, A., Nazer, K., Al-Reedy, A., Al-Shehri, S., Al-Muhanna, A., Subbarayalu, A. V., Al Muhanna, D., & Al-Muhanna, F. A. (2023). A review of the role of artificial intelligence in healthcare. *Journal of Personalized Medicine*, 13(6), 951. <https://doi.org/10.3390/jpm13060951>
- Alsadaan, N., Salameh, B., Reshia, F. A. A. E., Alruwaili, R. F., Alruwaili, M., Awad Ali, S. A., Alruwaili, A. N., Hefnawy, G. R., Alshammari, M. S. S., Alrumayh, A. G. R., Alruwaili, A. O., & Jones, L. K. (2023). Impact of nurse leaders behaviors on nursing staff performance: A systematic review of literature. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 60. <https://doi.org/10.1177/00469580231178528>
- Anggraini, N. (2023). *Healthcare access and utilization in rural communities of Indonesia*. *Journal of Community Health Provision*, 3(1), 14–19. <https://doi.org/10.55885/jchp.v3i1.214>
- Adhikary, M., & Chatterjee, M. (2023). Obstacles of service distribution channels of FMCG products in emerging rural markets—An Indian perspective. *World Academics Journal of Management*, 11(4), 1–6.
- Bautista, M. C. G., Acacio-Claro, P. J., Mendoza, N. B., Pulmano, C., Estuar, M. R. J., Dayrit, M. M., Festin, V. E., Valera, M., Sugon, Q. Jr., & Villamor, D. A. (2022). The 2019 Philippine UHC Act, pandemic management, and implementation implications in a post-COVID-19 world: A content analysis. *International Journal of Environmental Research and Public Health*, 19(15), 9567. <https://doi.org/10.3390/ijerph19159567>

- Borges de Oliveira, K., & de Oliveira, O. J. (2022). Making hospitals sustainable: Towards greener, fairer and more prosperous services. *Sustainability*, 14(15), 9730. <https://doi.org/10.3390/su14159730>
- Briones, J. P., Verano, J. P. E., Uy, R. G., Atanacio, E. B., Refozar, R. F. G., & Maglangit, Z. D., Jr. (2023). Entrepreneurship practices of higher education institutions in Region IV-A, Philippines. *International Journal of Entrepreneurship, Business and Creative Economy*, 3(2), 15–31. <https://doi.org/10.31098/ijebce.v3i2.1446>
- Carter, N., Bryant-Lukosius, D., DiCenso, A., Blythe, J., & Neville, A. J. (2014). The use of triangulation in qualitative research. *Oncology Nursing Forum*, 41(5), 545–547. <https://doi.org/10.1188/14.ONF.545-547>
- Concepcion, B. J. W., Cruz, L. B. O., Chavez, A. L. A., Briones, J. P., & Abante, M. V. (2024). Employees' work-life balance and career contentment in a Philippine local government unit. *Applied Quantitative Analysis*, 4(2), 146–159. <https://doi.org/10.31098/quant.2760>
- Dayrit, M. M., Lagrada, L. P., Picazo, O. F., Pons, M. C., & Villaverde, M. C. (2018). *The Philippines health system review*. World Health Organization Regional Office for South-East Asia. <https://iris.who.int/handle/10665/274579>
- De Cordova, P. B., Reilly, L. L., Pogorzelska-Maziarz, M., Gerolamo, A. M., Grafova, I., Vasquez, A., & Johansen, M. L. (2024). A theoretical framework for acute care nurse stress appraisal: Application of the transactional model of stress and coping. *Journal of Advanced Nursing*, 80(9), 3835–3845. <https://doi.org/10.1111/jan.16061>
- De Ramos, J. R., & Briones, J. P. (2024). Level of functioning of service quality of a private higher education institution in the Philippines: Personnel and student perspectives. *Education Policy and Development*, 2(2), 28–45. <https://doi.org/10.31098/epd.v2i2.2365>
- Escosura, P. D. R. (2023). Monetary incentives versus fringe benefits: The motivation behind Generation X and Millennial employees. *Advanced Qualitative Research*, 1(2), 51–61. <https://doi.org/10.31098/aqr.v1i2.1667>
- Fawaz, M. A., Hamdan-Mansour, A. M., & Tassi, A. (2018). Challenges facing nursing education in the advanced healthcare environment. *International Journal of Africa Nursing Sciences*, 9, 105–110. <https://doi.org/10.1016/j.ijans.2018.10.005>
- Gogoi, M., Hazarika, S., Phukan, K. K., & Gogoi, P. (2021). Challenges of rural healthcare infrastructure: A study among North-Eastern states of India. *Indian Journal of Public Health Research & Development*, 12(1), 181–190. <https://doi.org/10.37506/ijphrd.v12i1.13847>
- Goldsby, E., Goldsby, M., Neck, C. B., & Neck, C. P. (2020). Under pressure: Time management, self-leadership, and the nurse manager. *Administrative Sciences*, 10(3), 38. <https://doi.org/10.3390/admsci10030038>
- Gunawan, J., Aunguroch, Y., Marzilli, C., Fisher, M. L., Nazliansyah, & Sukarna, A. (2021). A phenomenological study of the lived experience of nurses in the battle of COVID-19. *Nursing Outlook*, 69(4), 652–659. <https://doi.org/10.1016/j.outlook.2021.01.020>
- Han, P., Duan, X., Jiang, J., Zeng, L., Zhang, P., & Zhao, S. (2023). Experience in the development of nurses' personal resilience: A meta-synthesis. *Nursing Open*, 10(5), 2780–2792. <https://doi.org/10.1002/nop2.1556>
- Hanathasia, M., Lestari, A. F., Purnama, K. A., & Maharani, A. P. (2024). A qualitative exploration of millennial motivation in community-engaged lifestyle change activities with #SalingSilang. *Advanced Qualitative Research*, 2(1), 71–87. <https://doi.org/10.31098/aqr.v2i1.2099>
- Hanson, K., Brikci, N., Erlangga, D., Alebachew, A., De Allegri, M., Balabanova, D., Blecher, M., Cashin, C., Esperato, A., Hipgrave, D., Kalisa, I., Kurowski, C., Meng, Q., Morgan, D., Mtei, G., Nolte, E., Onoka, C., Powell-Jackson, T., Roland, M., Sadanandan, R., Stenberg, K., Vega Morales, J., Wang, H., & Wurie, H. (2022). The Lancet Global Health Commission on financing primary

- health care: Putting people at the centre. *The Lancet Global Health*, 10(5), e715–e772. [https://doi.org/10.1016/S2214-109X\(22\)00005-5](https://doi.org/10.1016/S2214-109X(22)00005-5)
- Health Carousel. (2023, January 13). *Enhancing efficiency in healthcare: The impact of nurse staffing models*. Health Carousel. <https://www.healthcarousel.com/post/enhancing-efficiency-in-healthcare-the-impact-of-nurse-staffing-models>
- Hendy, N. (2023, April 5). *The consequences of a lack of training in the workplace*. High Speed Training. <https://www.highspeedtraining.co.uk/hub/lack-of-training-in-the-workplace/>
- Henshall, C., Davey, Z., & Jackson, D. (2020). The implementation and evaluation of a resilience enhancement programme for nurses working in the forensic setting. *International Journal of Mental Health Nursing*, 29(1), 69–78. <https://doi.org/10.1111/inm.12689>
- Hossain, N. U. I., Fazio, S. A., Lawrence, J.-M., Santibanez Gonzalez, E. D., Jaradat, R., & Alvarado, M. S. (2022). Role of systems engineering attributes in enhancing supply chain resilience: Healthcare in context of COVID-19 pandemic. *Heliyon*, 8(6), e09592. <https://doi.org/10.1016/j.heliyon.2022.e09592>
- Jankelová, N., & Joniaková, Z. (2021). Communication skills and transformational leadership style of first-line nurse managers in relation to job satisfaction of nurses and moderators of this relationship. *Healthcare*, 9(3), 346. <https://doi.org/10.3390/healthcare9030346>
- Kawakibi, Y., & Susanto, H. (2024). The role of the internal audit unit in the Indonesia Civil Pilot Academy Public Service Agency. *Advanced Qualitative Research*, 2(2), 19–29. <https://doi.org/10.31098/aqr.v2i2.2202>
- Keinänen, A.-L., Lähdesmäki, R., Juntunen, J., Tuomikoski, A.-M., Kääriäinen, M., & Mikkonen, K. (2023). Effectiveness of mentoring education on health care professionals' mentoring competence: A systematic review. *Nurse Education Today*, 5, 105709. <https://doi.org/10.1016/j.nedt.2023.105709>
- Lin, C.-H., Siao, S.-F., Lin, Y.-J., Hsin, P.-H., Shelley, M., & Lee, Y.-H. (2023). Cognitive appraisals and coping strategies of registered nurses in the emergency department combating COVID-19: A scoping review. *Journal of Nursing Scholarship*, 55(1), 79–96. <https://doi.org/10.1111/jnu.12815>
- Maghsoud, F., Rezaei, M., Asgarian, F. S., & Rassouli, M. (2022). Workload and quality of nursing care: The mediating role of implicit rationing of nursing care, job satisfaction and emotional exhaustion by using structural equations modeling approach. *BMC Nursing*, 21, 273. <https://doi.org/10.1186/s12912-022-01055-1>
- National Academies of Sciences, Engineering, and Medicine. (2021). *The future of nursing 2020–2030: Charting a path to achieve health equity*. The National Academies Press. <https://doi.org/10.17226/25982>
- Nilsen, P., Seing, I., Ericsson, C., Birken, S. A., & Schildmeijer, K. (2020). Characteristics of successful changes in health care organizations: An interview study with physicians, registered nurses and assistant nurses. *BMC Health Services Research*, 20, 147. <https://doi.org/10.1186/s12913-020-4999-8>
- Nsengimana, T., Mukeshimana, M., & Thompson, C. (2017). Pengetahuan, sikap, dan penerapan praktik berbasis bukti di kalangan mahasiswa keperawatan Rwanda. *Curationis*, 40(1), 1–8. <https://doi.org/10.4102/curationis.v40i1.1731>
- Purdue University Global. (n.d.). *How to become a nurse educator*. Purdue University Global, <https://www.purdueglobal.edu/blog/nursing/how-to-become-nurse-educator/>
- Quinn, M., Forman, J., Harrod, M., Winter, S., Fowler, K. E., Krein, S. L., Gupta, A., Saint, S., Singh, H., & Chopra, V. (2019). Electronic health records, communication, and data sharing: Challenges and opportunities for improving the diagnostic process. *Diagnosis*, 6(3), 241–248. <https://doi.org/10.1515/dx-2018-0036>

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- Radu, C. (2023). *Fostering a positive workplace culture: Impacts on performance and agility*. In A. A. Vilas Boas (Ed.), *Human resource management - An update*. IntechOpen. <https://doi.org/10.5772/intechopen.1003259>
- Rony, M. K. K., Alrazeeni, D. M., Akter, F., Nesa, L., Das, D. C., Uddin, M. J., Begum, J., Khatun, M. T., Noor, M. A., Ahmad, S., Tanha, S. M., Deb, T. R., & Parvin, M. R. (2024). The role of artificial intelligence in enhancing nurses' work-life balance. *Global Medicine*, 3, 100135. <https://doi.org/10.1016/j.glmedi.2024.100135>
- Soylu, F. K., Dastan, N. B., Uluman, O. T., & Karabulak, H. (2023). The role of nurses' ways of coping with stress and their psychological well-being during the COVID-19 pandemic. *International Journal of Caring Sciences*, 16(3), 1630–1637.
- Truché, P., Silva, M., Yates, R., Scheffer, R., Karamagi, H., & Glassman, A. (2020). The Vital Need to Plan and Build the Future Health Workforce. *The Lancet*, 395(10242), 1019–1020. [https://doi.org/10.1016/S0140-6736\(20\)30511-0](https://doi.org/10.1016/S0140-6736(20)30511-0)
- Wirihana, L., Welch, A., Williamson, M., Christensen, M., Bakon, S., & Craft, J. (2018). Using Colaizzi's method of data analysis to explore the experiences of nurse academics teaching on satellite campuses. *Nurse Researcher*, 25(4), 30–34. <https://doi.org/10.7748/nr.2018.e1516>
- World Health Organization. (2012). *Local production and technology transfer to increase access to medical devices: Addressing the barriers and challenges in low- and middle-income countries*. World Health Organization. <https://www.who.int/publications/i/item/9789241504546>
- World Health Organization. (2020). *State of the world's nursing 2020: Investing in education, jobs and leadership*. <https://www.who.int/publications/i/item/9789240003279>