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An Empirical Study on Employees Satisfaction towards ESI Act-1948

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Abstract: Social security is one of the key elements to increase employee's morale. ESI Scheme of India is a multifaceted social security system tailored to provide socio-economic protection to employee population and their dependents covered under the scheme. ESI scheme is playing a vital role to provide social security to the employees. The scheme covers various economic risks such as health, sickness, death, disability & maternity. Generally, it contributes complete amount of the medical bill irrespective of the premium contribution, so it is quite different from other health insurance schemes. The primary aim of this paper is to analyze the satisfaction of various employees towards ESI Act. For this purpose, 100 beneficiary employees are selected as sample for the study by adopting Random sampling method. A well-structured questionnaire was used for the data collection. The Statistical tools like chi-square test and percentage analysis were employed to analyze the collected primary data. The data interpretation has been done with tables and various graphs. This study reveals that ESI Hospitals were non-functioning up to the expected level.
Keywords: Compensation, Sickness benefit, Maternity benefit, Disable benefit, Funeral benefit.

I. INTRODUCTION

Experience of the working of the workmen's compensation act of 1924 showed that the benefits given to the factory workers under the act, in many cases did not reach them. This was due to the following reasons: A claim for compensation for injury has to be filed in the ordinary courts of law and the lack of finances often made it impossible for a worker to file such a suit and fight. The workers preferred to accept whatever compensation employees provided, as they are not able to prove, that accident occurred due to the negligence on the part of employer due to lack of finances and expert legal advice. These two defects were somewhat remedied, when the act was amended in 1938, but it was still containing some loop holes. The act recognized only a very small number of diseases. The administrative machinery set up under the Act for payment of compensation was so clumsy that through the amount of compensation was sanctioned, there was considered delay in payments or payments were not made at all. It did not provide benefits during sickness, as was done in many other industrial countries of the world. With a view these defects in the workmen's compensation Act, the government of India passed. "The Employees State Insurance Act" in 1948 and described as below.

Conditions: For the purpose of contribution, the persons covered by the Act have been into eight categories and their rates of contribution and those of their employers have been specified in a schedule. Employees getting daily wage of less than a rupee are not required to pay anything but their employers are not exempted. The central and state governments and local bodies give grants to the state insurance fund. The responsibility of paying the employer's and employee's share of contribution is placed on the principal employer. The employee's share which depends from their wages by the employer.

Benefits: The benefits provided under the act to insured persons are:

Sickness benefit: It will be in the form of periodical payments to a person in case of his sickness duly certified for not more than 56 days in all, during any continuous period of 365 days.

Maternity benefit: Periodical payments to an insured woman will be made in case of her confinement, duly certified in the manner specified in the act.

Disablement benefit: This is given to insured workers for disablement from injuries received workers for disablement from injuries received during employment and in the course of employment.

Dependent's benefit: In case an insured person dies as a result of an employment injury, his dependents will be paid an amount not exceeding one half of the amount payable to the deceased person in case of permanent total disablement.

Medical benefit: Medical care and treatment is provided free of charge to insured workers during their sickness of employment injury. Medicines are also given free.

From 1st January, 1962, this benefit is allowed to families of insured person also.

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Funeral benefit: Payment not exceeding Rs. 100/- shall be made to eldest surviving member of the family of an insured person who has died, towards the expenditure on the funeral of the deceased insured person. Where the insured person did not have a family or was not living with his family at the time of his death, the payments be made to person who actually incurs the expenditure.

A. Objectives

The primary aim of this paper is to know about satisfaction from various employees towards ESI benefits of RINL. The other objectives are like

1) To know about satisfaction from various employees towards service of ESI doctors
2) To know about satisfaction from various employees towards availability of medicines in ESI hospitals
3) To know about satisfaction from various employees towards lab facility in ESI hospitals
4) To know about satisfaction from various employees towards approach of staff in ESI hospitals

II. RESARCH METHODOLOGY

". A research design is the arrangement of the conditions for collection and analysis of the data in a manner that aims to combine relevance to the research purpose with economy in procedure. this study depended on various data sources like

A. Primary Data

This data was collected through survey. The information was collected directly from respondents. The survey was done by personal interview by using well-structured questionnaire

B. Secondary Data

The second hand information was collected from various websites and previous journals and magazines

1) *Sample Size:*100, *SAMPLING TECHNIQUE:* Non random sampling,
2) *Statistical Tools:* Chi-square test, Percentage analysis
3) *Data Analysis And Interpretation*
a) H_0: There is an association between experience and satisfying level towards service of ESI doctors
b) H_1: There is no association between experience and satisfying level towards service of ESI doctors

Table 1.1 Cross tabulation of Experience * Level of satisfaction

| | | | Level of satisfaction | | | | |
			Highly satisfied	Partially satisfied	Highly dissatisfied	Partially dissatisfied	Total
Experience	Lessthan 3 years	Count	15	20	9	6	50
		Expected Count	18.5	19.0	6.0	6.5	50.0
		% within Experience	30.0%	40.0%	18.0%	12.0%	100.0%
	Morethan 3 years	Count	22	18	3	7	50
		Expected Count	18.5	19.0	6.0	6.5	50.0
		% within Experience	44.0%	36.0%	6.0%	14.0%	100.0%
Total		Count	37	38	12	13	100
		Expected Count	37.0	38.0	12.0	13.0	100.0
		% within Experience	37.0%	38.0%	12.0%	13.0%	100.0%

From the above table 1.1 37% of the people highly satisfied,38% of the people partially satisfied,12% of the people highly dissatisfied and 13% of the people partially dissatisfied with service of ESI doctors

Table 1.2 Chi-Square Test result

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	4.507[a]	3	.212
Likelihood Ratio	4.654	3	.199
Linear-by-Linear Association	1.186	1	.276
N of Valid Cases	100		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 6.00.

Analysis

From the above table 1.2, it is observed that calculated value(χ)= 4.507[a] tabular value (p)= 0.212 so (χ)> (p) therefore alternative hypothesis H_1 is accepted

2) H_0: There is an association between experience and satisfying level towards availability of medicine in ESI hospitals

   H_1: There is no association between experience and satisfying level towards availability of medicine in ESI hospitals

Table 2.1 Cross tabulation of Experience * Level of satisfaction

			Level of satisfaction				
			Highly satisfied	Partially satisfied	Highly dissatisfied	Partially dissatisfied	Total
Experience	Lessthan 3 years	Count	3	7	30	10	50
		Expected Count	2.5	8.0	28.5	11.0	50.0
		% within Experience	6.0%	14.0%	60.0%	20.0%	100.0%
	Morethan 3 years	Count	2	9	27	12	50
		Expected Count	2.5	8.0	28.5	11.0	50.0
		% within Experience	4.0%	18.0%	54.0%	24.0%	100.0%
Total		Count	5	16	57	22	100
		Expected Count	5.0	16.0	57.0	22.0	100.0
		% within Experience	5.0%	16.0%	57.0%	22.0%	100.0%

From the above table 2.1, 5% of the people highly satisfied, 16% of the people partially satisfied, 57% of the people highly dissatisfied and 22% of the people partially dissatisfied with medicine's availability

Table 2.2 Chi-Square Test result

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	.790[a]	3	.852
Likelihood Ratio	.792	3	.851
Linear-by-Linear Association	.068	1	.794
N of Valid Cases	100		

a. 2 cells (25.0%) have expected count less than 5. The minimum expected count is 2.50.

Analysis: From the above table 2.2, it is observed that calculated value((χ)= 0.790 tabular value (p)= 0.852 so (χ)<(p) therefore alternative hypothesis H_0 is accepted

4) H_0: There is an association between experience &satisfying level towards lab facility in ESI hospitals

  H_1: There is no association between experience& satisfying level towards lab facility in ESI hospitals

Table 3.1 Cross tabulation of Experience * Level of satisfaction

			Level of satisfaction				
			Highly satisfied	Partially satisfied	Highly dissatisfied	Partially dissatisfied	Total
Experience	Lessthan 3 years	Count	18	22	4	6	50
		Expected Count	19.0	22.0	5.0	4.0	50.0
		% within Experience	36.0%	44.0%	8.0%	12.0%	100.0%
	Morethan 3 years	Count	20	22	6	2	50
		Expected Count	19.0	22.0	5.0	4.0	50.0
		% within Experience	40.0%	44.0%	12.0%	4.0%	100.0%
Total		Count	38	44	10	8	100
		Expected Count	38.0	44.0	10.0	8.0	100.0
		% within Experience	38.0%	44.0%	10.0%	8.0%	100.0%

From the above table 3.1, 38% of the people highly satisfied, 44% of the people partially satisfied, 10% of the people highly dissatisfied and 8% of the people partially dissatisfied with lab facility.

Table 3.2 Chi-Square Test result

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	2.505[a]	3	.474
Likelihood Ratio	2.601	3	.457
Linear-by-Linear Association	.807	1	.369
N of Valid Cases	100		

a. 2 cells (25.0%) have expected count less than 5. The minimum expected count is 4.00.

Analysis From the above table 3.2, it is observed that calculated value(χ))= 2.505 tabular value (p)= 0.474 so (χ)> (p) therefore alternative hypothesis H_1 is accepted

4) H_0: There is an association between experience &satisfying level towards approach of staff in ESI hospitals

  H_1: There is no association between experience &satisfying level towards approach of staff in ESI hospitals

Table 4.1 Cross tabulation of Experience * Level of satisfaction

			Level of satisfaction				
			Highly satisfied	Partially satisfied	Highly dissatisfied	Partially dissatisfied	Total
Experience	Lessthan 3 years	Count	3	12	16	19	50
		Expected Count	4.5	12.5	15.5	17.5	50.0
		% within Experience	6.0%	24.0%	32.0%	38.0%	100.0%
	Morethan 3 years	Count	6	13	15	16	50
		Expected Count	4.5	12.5	15.5	17.5	50.0
		% within Experience	12.0%	26.0%	30.0%	32.0%	100.0%
Total		Count	9	25	31	35	100
		Expected Count	9.0	25.0	31.0	35.0	100.0
		% within Experience	9.0%	25.0%	31.0%	35.0%	100.0%

From the above table 4.1, 9% of the people highly satisfied, 25% of the people partially satisfied, 31% of the people highly dissatisfied and 35% of the people partially dissatisfied with approach of ESI staff

Table 4.2 Chi-Square Test result

	Value	Df	Asymptotic Significance (2-sided)
Pearson Chi-Square	1.329[a]	3	.722
Likelihood Ratio	1.349	3	.718
Linear-by-Linear Association	1.038	1	.308
N of Valid Cases	100		

a. 2 cells (25.0%) have expected count less than 5. The minimum expected count is 4.50.

Analysis

From the above table 4.2, it is observed that calculated value(χ)= 1.329tabular value (p)= 0.722 so (χ)> (p) therefore alternative hypothesis H_1 is accepted

III.   SUGGESTIONS & CONCLUSION

ESI played significant role in providing social security to the employee's society. The workers and their family members are getting benefits of this act. But the insured persons don't get satisfaction with some ESI operations in RINL. Based on findings of this study, the following suggestions are offered to the management

Employees are not satisfying with medicines provided by ESI hospital so they should change the medicines, some employees are not satisfying with approach from staff& information provided by staff.so they should change their treatment of employees and they should provide up to date information to all employees. However, all employees satisfying with remaining benefits provided by ESI.

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