# **URGENCY INDEX AND TIME MANAGEMENT IN A WORK ENVIRONMENT**

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#### **ABSTRACT**

**Objective:** The objective of this study was to identify the urgency patterns and the effect of time management. **Study Design:** A survey based descriptive study.

Place and Duration of Study: Army Medical College, Rawalpindi Pakistan, from June to August 2015.

Material and Methods: Through random sampling, sample size was limited to 50 respondents. Questionnaire was introduced after the informed consent to the management and faculty of the Army Medical College. It was divided into section of demographic data & and data regarding the awareness about time management and practices of effective time management in the organization. Second section composed of the urgency index questions and calculations of the total score. Third section was the Steve Covey Time Management Grid to categorize activities into four quadrants. The time management matrix technique (TMMT) was constructed by Steve Covey to focus on the control of personal actions rather than purely scheduling time.

**Results:** Twenty eight (56%) males and 22 (44%) females participated in the study with mean age of  $43.54 \pm 7.58$ . Four (8%) were single and 46 (92%) were married. Mean working experience of the participants was  $17.55 \pm 7.36$ . Categories of the participants into low urgency and high urgency index after calculation of the scores reflected that most of the participants irrespective of the gender or length of the work experience were suffering from high urgency patterns of life style.

**Conclusion:** Most of the participants were suffering from high urgency patterns of life style. Urgent tasks have short-term penalties while important tasks are those with objective-oriented consequences.

**Keywords:** Stress, Time management, Work experience.

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#### INTRODUCTION

Time is a nature'sattribute which prevents all events to occur concurrently. Time being an authoritativere source is irretrievable and dynamic. While the majority of individuals who practice the art of medicine are motivated and effective in their endeavors, most physicians lead stressful lifestyles. Time management is a skill that is necessary and it varies from person to person. The problem of learning skills due to necessities is that it causes integration of bad habits and inhibition of use of the skills to their full potential.

Along with increasing worker productivity, motivation and helping cope with stressors,

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effective time management also helps maintain a balanced life style<sup>2</sup>. The two major fundamentals of time management are preparation and persistence<sup>3</sup>. The preparation component is connected to what one does with his time and the persistence is the reasonto do it. Time management is grounded upon the rule to do the right things than only to do things.

Time management is also defined as occurrence of events one after another and defines management as the act of controlling<sup>4</sup>. Research on time management skills interprets it as a mental construct which compares its insight to "clock" time. To counter balance the time management one develops urgency addiction. This is a self-destructive attitude that temporarily covers the space created by unmet needs<sup>5</sup>. Instead of meeting these needs, the gears and approaches of time management often nourish the addiction. They keep us engrossed on daily arrangement of

the urgent. Most of these jobs appear as alluring and important, but in the light of time's perspective, their deceptive importance diminishes; with a sense of loss we recall the important work. One must learn methods that impart an ability to effectively manage time to balance the needs of a personal and professional life. The rationale of this study was to identify techniques basic concepts and time management as they relate to a medical lifestyle.

#### **MATERIAL AND METHODS**

Through random sampling sample size was limited to 50 respondents out of an estimated population of 128 placed at Army medical college as administrative and faculty staff. Questionnaire was introduced after the informed consent to the management and faculty of the Army Medical College. Questionnaire contained close ended questions and with answer options like (Strongly agree, Agree, Undecided, Disagree, Strongly Disagree). The guestions were carefully planned and structured in line with the objective of the study. All the questions were answered based on the work experienced and also there was no influence or pressure whatsoever on the respondents. The respondents knows what was at palisade and they also know that the integrity of effective time management in their organization? Awareness regarding the effective time management in the achievement of set goals. Second section composed ofthe urgency index questions and calculations of the total score

0-25 Low urgency mind-set

26-45 Strong urgency mind-sets

46+ Urgency addictions

Third section was the Steve Covey's Time Management Grid<sup>6</sup> to categorize activities into quadrants. The Steve Covey management matrix is an effective method of organizing our priorities. The quadrant one deals with the crises, pressing problems, deadlines, driven projects and meeting preparations. Quadrant I represent things that are both "urgent" and important. Quadrant II includes activities that are important, but not urgent. Quadrant II is the area of preparation, prevention values, clarification, planning, relationship building, true re-creation and empowerment. It includes activities that are "important, but not urgent." hence making this the Quadrant of Quality and personal leadership. Quadrant III is almost the specter of Quadrant I. It included things that are urgent, but not important.

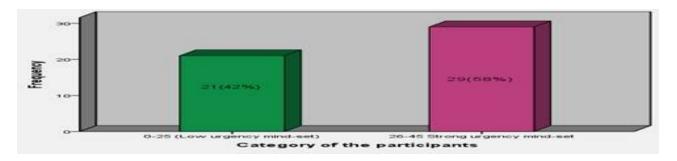


Figure: Categories of the participants.

the statistics will go a long way in attaining the objectives; thus the validity and reliability was actually been put into thinking from the beginning.

It was divided into first section of demographic data & and data regarding the awareness about time management, practices of Quadrant IV isearmarked for those activities that are not urgent and not important.

# **Data Analysis**

Data were analyzed by statistical software SPSS version 21. Mean and Standard deviation were calculated for Quantitative variables like age, work experience and scores. Categorical data

was presented by frequencies and percentages. Independent t-test was applied for the total urgency index score comparison between gender and working experience. A *p*-value <0.05 considered to be significant value.

# **RESULTS**

Twenty eight (56%) males and 22 (44%) females participated in the study with mean age of  $43.54 \pm 7.58$ . Four (8%) were single and 46 (92%) were married. Mean working experience of the participants was  $17.55 \pm 7.36$ . Categories of the participants into low urgency and high urgency index after calculation of the scores reflected that most of the participants irrespective of the gender or length of the work experience were suffering from high urgency patterns of life style (figure).

Although the urgency index score of the male and female participant and comparison based on work experience was found to be not statistically significant table I and II. Urgency is no long reserved for special occasions; rather it is an everyday occurrence. Missing deadlines is not

out the reports, setting goals and priorities in order. periodic One of the participants' prioritized personal such matters communicating with kids most urgent and important. Similarly another participant listed duties assigned by seniors at department and family matters as urgent and important. Some contrasting views like meetings, briefina presentations, lectures, examination duties, namaz & darood Sharif, academic activities and professional matterswere alsoplaced in their first quadrant.

Participants mentioned in the quadrant II activities like counseling, motivational talks, lectures, spending time with family, discussions, journal club meetings and journal editing. One of the respondents tagged checking emails, house hold chores, tasking departmental duties, some official duties, steps to make mind fresh, plans, projects, paper writing, tea breaks, preparing exam papers and checking exam papers as important but not urgent. Self-development and keeping abreast with latest literature conference

Table-I: Gender-wise comparison.

The Urgency	Gender	N	Mean	Std. deviation	Std. Error	<i>p</i> -value
index Score of					Mean	
the	Male	28	27.96	8.203	1.550	0.882
participant	Female	22	27.64	7.320	1.561	
Table-II: Comparison based on work experience.						

The Urgency Std. Std. Error Work Ν Mean p-value experience index Score of Deviation Mean <10 years 8 27.38 7.386 2.611 0.858 the participant >10 years 42 27.90 7.901 1.219

the path to advancement or even good job appraisals.

Most of the participants mentioned the activities like parent teacher meetings and effective management of time in the first block. Some also placed synopsis checking and article checking in quadrant one because it was prioritized as urgent by them. Several respondents mentioned reaching the work place daily in time, carrying out the lab work, dishing

along with seminar programs, objective revision, and evaluation of feed back, personal work and routine departmental activities were the important tasks of one individual. The participants who deemed personal errands and family as important asserted home work with children, family life, parents, weekend dinner with family, physical exercise, house hold tasks, groceries and children education. miscellaneous replies were timely reaching office,

evening walk, taking medicine, spending time with children and calling on friends and relations.

Responses in the quadrant III were system of rewards and punishments, attending incoming phone calls and mobile phone. Relaxing, talking with friends, more time spent on non-priorities like discussion, duties of exams, formulation of policy regarding function of department also seemed urgent to people but were not that important. Some also stated that to pay dues, billsand submit papers in conferences were similar.

In Quadrant IV the usual mainstream responses were watching TV, face book searching, most of the tasks at home, wasting time on computers/ visiting to other departments, CPC and miscellaneous activities like participating in non-academic college activities. Some respondents even considered personal commitments and domestic duties such as going to parks and outings with family as both non urgent and unimportant.

# **DISCUSSION**

The number of participants who scored between 0-25 was labeled as having low urgency mind-set while those who secured rating between 26-45 were having very strong urgency mind-set. The scores achieved higher than 46+ were having urgency addiction. The urgency addiction creates predictable, reliable sensations and becomes the primary focus and absorbs attention for the individuals. Basically it temporarily eradicates pain and other negative sensation and provides artificial sense of self-worth, power, control, security, intimacy and accomplishment. This condition exacerbates the problems and approaching it is thought as a remedy. These conditions and situations are leading to worsens functioning and create loss of relationships7.

In order to focus on the issues of urgency and importance more effectively, we focused on the time management matrix. It categorizes our activities into four quadrants. Most of us spend time in one of these four quadrants. In some

studies similar to this research, it has been determined that the people who had TM training are more effective in their jobs and they are better at TM8. Also, gender is important in time management since women have been determined to manage time better than men9. Furthermore, it has also been shown that TM behaviors change according to work experience. Contrary to the research, however, other studies have shown that TM performance of the managers does not change between morning and afternoon hours9.

The first and most obvious use of the matrix is to organize current 'to-do' list and sort all the activities into the appropriate grid. Then, assess the amount of time you have to accomplish the lists and, if necessary, reallocate activities. The second approach is a one week assessment strategy.

We think quadrant one is a representation of issues that are both acute and commanding. By spending time in quadrant I we manage, produce and bring our experience in responding to a threat or challenge. We must also realize that many important activities become urgent subject to lack of planning<sup>10</sup>.

Quadrant II is the area of preparation, prevention values clarification planning relationship building true re-creation and empowerment. It includes activities that are "important, but noturgent." This is the Quadrant of Quality and personal leadership. Here's where we do our longrange planning, expect and preclude problems, authorize others, extend our minds and increase our skills through reading continuous professional development. Increasing time spent in its quadrant increases our ability to do. Ignoring this quadrant feeds and enlarges Quadrant I, creating stress, burnout, and deeper crises for the person consumed by it. One of the three most important areas in self-management which leads managers to success is use of time11.

Quadrant III is the box of disruptions, some phone calls. Some post, some report some meetings and many popular events. Quadrant III

is almost the phantasm of Quadrant I. It includes things that are "urgent, but not important." This is the Quadrant of cheating. The blare of urgency generates the impression of importance. But the actual activities, if they're important at all, are only important to others. Most of the phone calls, talks, and drop in guests fall into this quadrant. We spend a lot of time in Quadrant III meeting other people's urgencies and outlooks, thinking we'rereally in Quadrant I.

Quadrant IV minutiae, tiring work, scrap mail some phone calls time wasters. Quadrant-IV is reserved for those activities that are "not urgentand not important." This is the Quadrant of Surplus. But reading addictive books, habitually searching television channels or chattering at workplace.

In routine daily life we deal with both the urgency and importance. In actual practice and decision making, one of these factors tendsto dominate. Most of the problematic situation arises when we function primarily from a pattern of urgency rather than a pattern of importance. When we work within the importance, we live in Quadrants I and II. When we are out of Quadrants III and IV, and as even the strategies and look of Quadrant I modifies whenwe spend more time in preparation, prevention, planning, and authorization. In the one week assessment strategy need to make six copies of the matrix and use one matrix for each day of the week, listing all activities and time expended. At the end of the week, pool the five individual day data onto one summary grid (number 6) and calculate the percent of time in each grid. The individuals need to evaluate how well their time is consumed and whether their work capacity needs to be restructured. In Quadrant 1 items that need to be share out immediately.

In Quadrant II is the quadrant that we should focus on for long term attainment of goals. In Quadrant III we have urgent, but unimportant items which should be lessened or excluded. In Quadrant IV adds little to no value and also should be minimized or eradicated. As

Margulis states, "Long hours are not a substitute of efficiency. Tasks not worth doing at all are not worth doing well". Prioritization involves the effective deployment of resources among competing programs or people, and it is required at all levels of health care management<sup>12</sup>.

Effective time management starts providing goals to our life by using the 80-20 rule as 80 percent of the reward comes from 20 percentof the effort<sup>13</sup>. Using a daily to do list and allowing time for breaks and disruptions by knowing when is the best time for planning to use that time of day for priorities. Urgent tasks have short-term penalties while important tasks are those with objective-oriented consequences. Highlighting things or attaching a deadline to each element may help keep important matters from becoming urgent crises. Eradicate unimportant jobs break it into smaller tasks. Blocking time for important, but often not planned, urgencies such as family and friends can also help. Once convinced of their importance, saying "no" to the unimportant in life gets easier. Even for small achievements, rejoice goals. Effective time management requires: Locale short priorities and long-term goals, among challenging tasks. In their research, Kinney et al. also show that the use of time is very important<sup>14</sup>.

Planning and organizing activities. Reducing acquaintance to conditions that result in wasted time.

# CONCLUSION

Most of the participants were suffering from high urgency patterns of life style. Urgent tasks have short-term penalties while important tasks are those with objective-oriented consequences.

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# **CONFLICT OF INTEREST**

The authors declare that they have no conflict of interest.

#### REFERENCES

- Jackler R. How to be organized and manage time. In: Weiss Roberts L, ed. The academic medicine hand book-a guide to achievement and fulfillment for academic faculty. New York: Springer, 2013: 17-25.
- Ahmad NL, Mohd. Yusuf AN, Mohamed Shobri ND, Wahab S. The relationship between time management and job performance in event management. Proc Soc Behav Sci. 2012; 65: 937-41.
- Kleshinski O, Dunn TG, Kleshinski JF. A preliminary exploration of time management strategies used by physicians in the United States. Int J Med Educ. 2010; 1: 47-54.
- Pomey MP, Forest PG, Sanmartin C, DeCoster C, Clavel N, Warren E, et al. Toward systematic reviews to understand the determinants of wait time management success to help decisionmakers and managers better manage wait times. Implement Sci. 2013; 8(1): 43-49.
- Shanafelt TD, Boone S, Tan L Burn out and satisfaction with work-life balance among US physicians relative to the general US population. Arch Intern Med 2012; 172: 1377-85.
- Covey SR. The 7 habits of highly effective people. London: Simon & Schuster Ltd,

- Gordon CE, Borkan SC. Recapturing time: a practical approach to time management for physicians. J Postgrad Med. 2014; 90(1063): 267-72.
- 8. Darini M, Pazhouhesh H, Moshiri F. Relationship between Employee's Innovation and time management. Proc Soc Behav Sci. 2011; 25: 201-13.
- McConnell CR. Self-management. Health Care Manag. 2010; 29(1): 83-93.
- 10. Jackson VP. Time Management: A Realistic Approach. J Am College Radiol. 2009; 6(6): 434-6.
- 11. Zerihun TB, Krishna SM. A few techniques for time management. J Business Manag Soc Sci Res. 2012; 1(3): 32-7.
- Kinney KG, Boyd SYN, Simpson DE. Guidelines for appropriate in-hospital emergency team time management: the Brooke Army Medical Center approach. Resuscitation. 2004; 60(1): 33-8.
- Ebrahimi H, Hosseinzadeh R, Tefreshi M, Hosseinzadeh S. Time management behaviors of head nurses and staff nurses employed in Tehran Social Security Hospitals, Iran in 2011. Iranian J Nurs Midwifery Res. 2014; 19(2): 193.
- Bruni RA, Laupacis A, Levinson W, Martin DK. Public views on a wait time management initiative: a matter of communication. BMC Health Serv Res. 2010; 10(1): 33.