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**The Influence of Motivation and Work Environment on Nurse Retention:**

**A Case of Shalom Hospitals**

**Hellen Onyango**



**Master of Business Administration Healthcare Management**

**June, 2016**

**The Influence of Motivation and Work Environment on Nurse Retention:**

**A Case of Shalom Hospitals**

**Hellen Onyango**

**Research Thesis Submitted to Strathmore University in Partial Fulfillment for the  
Degree of Master in Business Administration Healthcare Management**

**Institute of Healthcare Management**

**Strathmore University**

**Nairobi, Kenya.**



**June, 2016**

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## DECLARATION

I declare that this work has not been previously submitted and approved for the award of a degree by this or any other university. To the best of my knowledge and belief, the thesis contains no material previously published or written by another person except where due reference is made in the thesis itself.

### Approval

The thesis of Hellen A. Onyango was reviewed and approved by:

DR. Angela Ndunge (Supervisor)

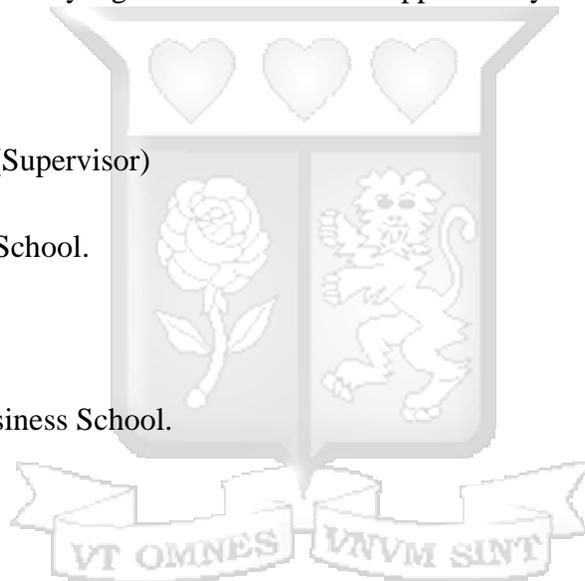
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## ABSTRACT

Among the key pillars of a healthcare delivery system are health workers. Most of the attention and research has focused on the care givers in public health facilities. This study sought to determine the factors which affect the nurse retention rates in Shalom hospitals. According to the human resource department at the Shalom hospitals the nursing department has a high turnover of nurses which in turn affects quality and efficiency at the hospitals.

The study specifically sought to investigate the relationship between nurse retention and work environment and internal motivating factors at Shalom hospitals. It also sought to investigate what current retention strategies are in place by the hospital management for the nurses.

The study was based on Herzberg's theory of motivation which states the causes of job satisfaction and job dissatisfaction as motivation and work environment factors respectively. The study aimed to establish the relationship between nurse retention rate at Shalom hospitals and Herzberg's dual theory.

To achieve these objectives, the study collected data from nurses currently working at the Shalom group of Hospitals in Machakos and Athi river towns. The study employed a quantitative research design in research methodological procedures. The data was collected through questionnaires and analyzed through descriptive statistics using SPSS.

The study revealed that there was a positive relationship between work environment and nurse retention and motivating factors and nurse retention. A prediction model showed that a unit increase in internal motivating factors would increase staff retention rates more than a unit increase in work environment factors. The study concludes that provision and maintenance of quality work environment and provision of quality standard internal motivating factors helps to increase retention in Shalom hospitals. The study further concludes that most of the nurses were not contented with the quality of the current nurse retention strategies being employed at Shalom hospitals. The research recommends that the management of Shalom hospitals should develop an overall strategic plan which includes

internal motivation such as praise and appreciation, competitive compensation package, improve on career growth and enhancement programs and job security.

Key words: Retention, Motivation, Work environment, internal motivating factors, Retention strategies.



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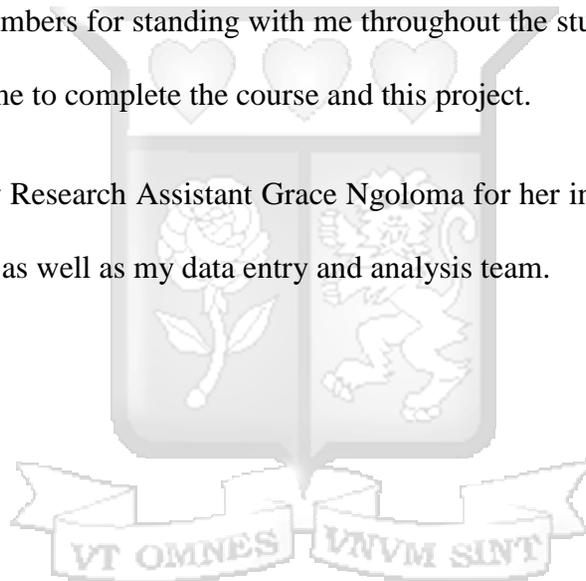
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## DEDICATION

This work is dedicated to my family from whom I receive profound courage and determination.



## **CHAPTER ONE**

### **INTRODUCTION**

This chapter looks at the background of study, statement of the problem, general and specific objectives, and significance of the study, scope and limitations of the study

#### **1.1 Background of the Study**

Health worker retention is critical for health system performance and a key problem is how best to motivate and retain health workers. Seven major motivational themes have been identified as important for health worker retention. These are financial rewards, career development, continuing education, hospital infrastructure, resource availability, hospital management and recognition/appreciation from management (Shattuck, 2008). Shattuck (2008) found that the use of initiatives such as financial rewards, career development and continuing education to improve motivation had been effective in helping retention.

Kenya's health system faces a variety of human resource problems, primarily an overall lack of personnel in key areas, which is worsened by high numbers of trained personnel leaving the health sector to work overseas. Furthermore, those personnel who remain are inequitably distributed between urban and rural areas (Dambisya, 2007). The availability of health personnel in Africa is considerably worse than in other regions of the world and it is one of the major stumbling blocks to the delivery of adequate healthcare (Chankova , 2006).

Nursing forms, the largest body of employees in the health care system. A shortage of nurses therefore jeopardizes many aspects of health care delivery. Therefore, nurse employees are valuable assets to health organizations and their services need to be maintained to ensure quality health care is provided to consumers.

The Shalom Hospitals are based in Machakos County, Kenya. It has branches in Machakos and Athi river sub counties. They both serve on approximately 8000 patients a month with about 400 staff. Of these 270 are nurses, doctors and clinical officers and the rest are support staff in the hospitality departments. The hospitals human resource manager in a report to the hospitals board of management for the year 2015 stated that the staff turnover rate is high

with the most affected area being the nursing department with at least 6 nurses leaving every month. The report further stated that the reasons most cited by staff leaving was low pay, poor opportunities for career advancement, long working hours and no job security. The high staff turnover is expensive to the institution with a lot of time wasted on recruitment and training. A considerable amount of time is also spent in inducting and training the new nurses into the organizations. Hancock and Allen (2013) found that there is a negative relationship between turnover and organizational performance. This means that costs associated with turnover outweighs the effects of replacing employees who have left with new ones.

## **1.2 Problem Statement**

Ongoing instability in the nursing workforce is raising questions globally about the issue of nurse turnover and retention. Studies have been undertaken to examine the level of knowledge about the scope of the nurse turnover problem, definitions of turnover, factors considered to be determinants of nurse turnover, turnover costs and the impact of turnover on patient, and nurse and system outcomes (Buchand, 2006)

Whereas there exists a body of literature on retention and turnover of employees in the human services there is lacking in a number of areas; in part stemming from the very limited amount of research that has been conducted. Gaps in existing knowledge include the examination of macro level variables such as organization size, setting, structure and funding status (Barak, 2001). Hence, there exists a strong need for replication studies in different settings. In Kenya for example literature available is from research carried out in government health institutions therefore a need to investigate the same in private facilities (Yoswa, 2007)

The International Council of Nurses (ICN) emphasizes the need to identify the reasons why nurses are leaving the profession in order to determine what can be done to draw them back (Buchan & Calman, 2004; ICN/FNIF, 2006). Although nursing shortage has generated significant interest among scholars, majority of the studies have been done in more-

developed countries such as Australia (Duffield, 2006) and the United States (US; Black, Spetz & Harrington, 2008).

The Shalom Hospitals are not exempt in the problem of high nurse turnover. On average 6 (six) nurses resign per month from the facility without notice due to poor pay, job insecurity, work load and lack of growth opportunities. This often happens at the end of every month just after paychecks have been issued. This means that every beginning of the month there is an unplanned staff shortage which forces the management to invest a lot of time in recruitment and training of new staff. The effects of this are that there is no consistency in the quality of care given to patients. The purpose of this study, therefore, was to attempt to unravel the factors influencing the motivation of nurses in Shalom Community hospitals and determine the relationship between these factors and intention to quit.

### **1.3 Research Objectives**

1. To investigate the relationship between work environment and nurse retention in Shalom hospitals.
2. To investigate the relationship between internal motivating factors and nurse retention in the Shalom hospitals.
3. To investigate strategies of retention used by the management in Shalom hospitals.

### **1.4 Research Questions**

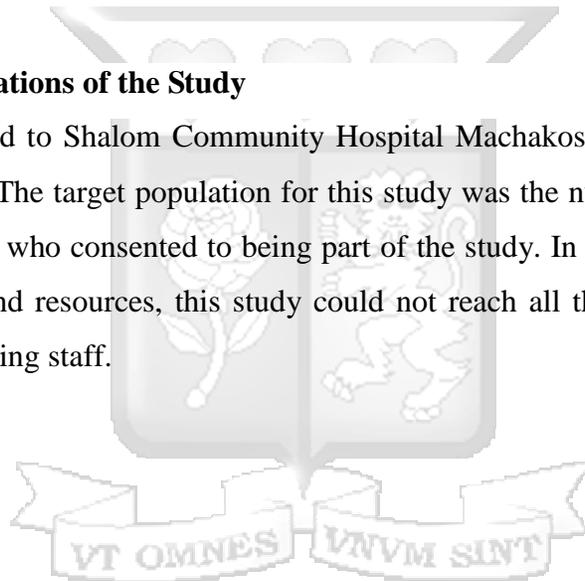
1. What is the relationship between work environment and nurse retention in Shalom Hospitals?
2. What is the relationship between internal motivating factors and nurse retention in Shalom Hospitals?
3. What strategies are the management currently using to improve retention of nurses in Shalom hospitals?

### **1.5 Significance of the study**

This study investigated the relationship between motivation and work environment factors and nurse retention. It may be useful to the human resource practitioner, senior management and board of directors as it will suggest appropriate strategies and measures to take towards controlling and reducing turnover of nurses. By implementing these strategies, the management will have improved patient satisfaction due to better quality of service from the nurses. The findings may also benefit future researchers by providing secondary data on which further studies may be done. In particular, it recommends that other studies be done to establish if there are other determinants than motivation and work environment in nurse retention.

### **1.6 Scope and Limitations of the Study**

The study was limited to Shalom Community Hospital Machakos and Shalom Community Hospital Athi River. The target population for this study was the nursing staffs who work in the two hospitals and who consented to being part of the study. In view of the above, due to limitations of time and resources, this study could not reach all the hospitals in Machakos County and their nursing staff.



## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This chapter examines the available literature and studies that have been previously carried out and are relevant to this research. The chapter sheds light on the research problem to create a better understanding of the issues discussed. The chapter starts with a brief definition of terms used in this chapter i.e. Staff retention, Staff turnover and intention to quit.

#### **2.2 Staff turnover**

Waldman and Arora (2004) defined staff turnover as the number of specific individuals or cohorts that enter and exit the organization during a specific time rate. Sellgren (2007) defined retention as an organizations' ability to retain its workers. These terms are often used interchangeably but have different implications. Healthcare institutions should aim at reducing staff turnover and increasing retention rates if they are to achieve their objectives. (Govaerts & Baers, 2011).

Different methodologies have been stated by scholars as means of obtaining staff retention rates. Kayshyap et al (2014) stated that behavioral intentions; intention to search for alternative employment, intention to quit or intention to leave are predictors of staff retention. Donoghue (2006) described methods used to determine staff turnover as the proportion of an organizations staff that has terminated employment over a given period of time. This study further stated that retention is included in the definition of turnover by including variables that measure the amount of time that workers spend in employment. For example,  $\text{Turnover} = \frac{\text{Terminations in a one-year period}}{\text{Total number of staff}}$ . Michael Shields (2001) used intention to quit as a predictor of nurse retention in a study that was aimed at improving nurse retention in England.

#### **2.2 Theoretical Framework**

##### **2.2.1 Herzberg's Motivation Theory**

Although Herzberg's motivation hygiene theory was originally published in the 1950s it continues to affect contemporary research globally (Dalton, 2010). According to Herzberg

(2003) employees have intrinsic motivational factors such as stimulating work, an engaging challenge and appreciable responsibility. Under Herzberg's motivation theory, by satisfying an employee's intrinsic factors such as opportunities for growth, advancement, responsibility, the work itself and recognition for a job well done in an organization increases employee satisfaction. He further listed hygiene factors or external motivators as job security, salary and work conditions, relationship with supervisor, company policy and administration and relationship with subordinates. If the hygiene factors are not met the employee is dissatisfied. Herzberg's theory states that factors that lead to job satisfaction are distinctly different from but not in opposition to factors that lead to job dissatisfaction. This means that the absence of job satisfaction is not job dissatisfaction (Herzberg, 2003).

Although hygiene factors are major job dissatisfiers, satisfying hygiene factors alone are not compelling enough to affect job attitudes in a positive direction (Herzberg, 1959/2010). By distinction, intrinsic factors stand out strongly as major job satisfiers and essential to affecting job attitudes in a positive direction (Herzberg, 2010). Herzberg advocated that managers enrich the work of employees by influencing the intrinsic motivational factors that drive production. He used the term job enrichment to describe this movement.

Job enrichment provides an opportunity for an employee to mature psychologically and is different from job enlargement initiatives which seek to make the job larger. Job enrichment may be vertical or horizontal. Horizontal job loading intensifies the meaningfulness of the job (Herzberg, 2003). An example of horizontal loading is when a manager gives additional tasks to a nurse's daily routine without offering autonomy, input or recognition. An example of vertical job loading is when a manager removes the bureaucratic controls over a nurse daily routine, fosters accountability and provides full decision making authority. Herzberg (2003) proposed that managers foster the following elements which are a result of vertical loading; responsibility, personal achievement, recognition, internal recognition, growth and learning and advancement. Herzberg (2003) believed that while hygiene factors cannot motivate employees they can minimize dissatisfaction among workers when used correctly (Herzberg, Mausner & Synderman, 1959)

This means that good hygiene should be provided, but this yields benefits up to a certain point beyond which the focus needs to be on the intrinsic aspects of work (Miner, 2005). Herzberg's motivation theory will be applied to this study to determine the factors which affect nurse retention in the Shalom hospitals. It will further determine whether there is a relationship between motivation and hygiene factors listed above and the intention to quit.

## **2.3 Empirical Review**

### **2.3.1 Current Trends of Nurses Turnover across the World**

Nurse turnover has a negative impact on staff, including reduced employee efficiency and lower morale among employees (Barnfield, 2009); severe pressure of working under chronic staff shortages, which in turn further increases stress and burnout (Nyamu & Annett, 2003); and poorer retention of new staff (Chaguturu & Vallabhaneni, 2005). Such staffing problems also lead to decreased quality of care for residents (Hayes, 2006).

Retention problems also create serious economic costs for facilities that include the direct expenses of advertising, recruiting, hiring, and training, as well as such indirect expenses as reduced productivity of other workers (O'Brien-Pallas, 2006). Although consensus does not exist on the precise cost of CNA turnover, experts generally agree that the expense of replacing a direct service worker typically amounts to 25% of annual compensation or more (Coomber & Barriball, 2007). In the Australian context evidence suggests that hospital nurse turnover rates are unacceptably high, and even more alarmingly, nurses not only move between hospitals but a significant number move into entirely different career paths (Fitzgerald, 2002). A viable nursing work force is further compromised with the steady decline of the enrolment in undergraduate nursing courses across Australia, and indeed around the world (Fitzgerald, 2002).

## **2.3.2 Factors Influencing the Retention of Nurses in Hospitals**

### **2.3.2.1 The relationship between work environment and nurse retention**

Numerous studies have linked nursing turnover tendency with work environment reflected in job characteristics, pay equity, working hours, opportunity for promotion, and job satisfaction (Bjorvell & Brodin 1992; Gauge, Borda & Norman, 1997; Shields & Ward, 2001). Job satisfaction is found to be a primary predictor of nurses' turnover intentions in different countries (Fisher, Hinson & Dats 1994). (Bjorvelland & Brodin, 1992) found that nurses who wanted to leave work had low levels of job satisfaction on several aspects of work: cooperation, complexity of work, sufficient time available to provide care and supervisor support.

Job characteristics including workload, complexity, variety, exposure to risk and autonomy also influence turnover intentions (Bjorvell & Brodin 1992; Takase, Oba & Yamashita, 2009). Work complexity was associated with higher turnover rate, indicating that complexity creates conditions of decreased control arising from frequent changes in patient orders, increased patient acuity and frequent transfers, admissions and discharges (Baernholdt & Mark, 2009). Excess workload and issues in interpersonal relationships were cited by nearly half of the nurses as their reasons for considering leaving their jobs in a study examining turnover among three generations of nurses (Takase, 2009). Higher levels of career pressures, working hours, overtime and shifts also influence turnover intentions (Shader, Broome, Broome, Westand 2001). Anticipated turnover is also linked to extrinsic rewards including wages, benefits and bonuses (El-Jardali, 2009).

Nurses' intention to leave was also found to be related to low salaries and fringe benefits, as well as inflexible work schedule (Rambur, Val Palumbo, Mcintosh and Mongeon 2003). Some studies, however, indicate that wages tend to be a more important determinant of turnover for male nurses compared to female nurses (Borkowski, Amann, Song and Weiss 2007).

Swedish researchers found that nurses relied on multiple variables to decide if they would leave or return to nursing. These included working conditions, work schedules, and administrative policies (Sjögren, Fochsen, Josephson & Lagerström, 2005). In the United Kingdom, nurses reported that certain workplace factors influenced their decision to leave the profession. The most important were inadequate salaries, administrative responsibilities, full-time work requirements, and lack of professional autonomy. It was also found that if nurses left their profession, they were more likely to do so in the early years of their careers (Barron & West, 2005).

In the US, nurses were found to leave nursing in order to work in other fields with more favorable working hours, more rewarding work, and better pay (Sochalski, 2002). Another study identified that dissatisfaction with working conditions was a determining factor in a nurse's decision to work in a non-nursing field (Black *et al.*, 2008).

In South Africa, many nurses leave the nursing profession or the public sector for better paid jobs in the private sector, which offers better benefits for permanently employed nurses (Tonny, 2007). In her study conducted in Limpopo, South Africa, Peterson (2005) found that extrinsic factors (58%) such as working conditions, supervision, management styles and salaries negatively affected the employees' levels of job satisfaction. Most of these respondents were dissatisfied with their interactions with their supervisors. They were also dissatisfied with their remuneration and unhappy with the working conditions at the hospitals. A study conducted by Nkomeje (2008) reported that nurses were moderately motivated and satisfied with their job at King Faisal Hospital (KFH), and Uwayezu (2008) reported that nurses changed their employment status because they were demotivated. Further to that, nurses did not have opportunities to advance to higher levels.

### **2.3.2.2 The relationship between internal motivating factors and nurse retention**

Herzberg (2003) listed the motivators as growth, advancement, responsibility, work itself and recognition as the intrinsic motivators. This approach focuses on the ability of an organization to satisfy its employees through the recognition of their intrinsic motivational

factors. Unlike the extrinsic factors approach where employees must have an external stimulus that extrinsically motivates them to continue serving, this approach recognizes that employees are intrinsically motivated and that intrinsic motivation results to higher levels of employee satisfaction as compared to extrinsic motivation. An organization that empowers its employees by giving them new assignments and difficult tasks, more responsibility, job autonomy as well as opportunities to perform specialized tasks enables them to be more specialized and highly motivated to continue serving (Robert, Cardy & Mark, 2011).

This builds high levels of loyalty which translates to high levels of retention. It is through the Herzberg Two Factor Theory that employee retention has been linked to the ability of an organization to satisfy their intrinsic factors of motivation. Limited opportunities for internal promotion and career advancement have been reported to impact employees' attitudes and behaviors (Jones, 2008). Promotional chances refer to the degree of potential upward occupational mobility within an organization. Employees who perceived that they have been treated fairly in the process of allocating promotions exhibited higher job affection, displayed greater organizational commitment, and experienced lower turnover intentions (Jones, 2005).

Shields & Ward (2001) found that besides promotion opportunities, the evaluation criteria used in the promotion and reward system also had significant effects on employees' turnover intentions. Employee promotional chances typically fosters an employee's behavioral commitment by encouraging internal careers, thereby, guaranteeing job security and other favorable future rewards (e.g., improved income, power, status) to the employees. Needleman *et al* (2006) found that today's nurses want to have challenging careers that offer opportunities for growth and advancement.

Vahey *et al* (2004) meta-analysis reported that the strongest organizational factors related to nurse turnover intentions were lack of internal promotion and career advancement opportunity. Spence *et al* (2009) further notes that dissatisfaction with career prospects is a major cause of employee turnover. Organizations that provide formal career development activities and match them to needs that employees experience at various stages of their

careers reduce the likelihood that productivity will decrease as a result of obsolescence or that job frustrations will create reduced satisfaction and hence intention to quit (turnover). Through focusing on more ways to introducing satisfying factors such as empowering employees through job enlargement or rotating employees to grant them new and different challenges, the management is going to keep employees from demoralization thus promoting their job satisfaction. Managers can therefore be able to identify factors in general that will motivate and demotivate groups of employees through this approach. A study by AFT Healthcare (2000) found that 71 % of the nurses who reported they were planning to leave their job said the most enjoyable part of nursing was helping patients and families.

The Blue ribbon task force (2002) found that job satisfaction was highest among nurses who spent a significant amount of their day in direct patient care and lowest among nurses who spent more time on paper work than patient care. Erla Døgg 2013 in a study aimed at illuminating if and how praise from nurse managers affects nurses and their work found that participants who received praise very often and often at the workplace were less likely to leave their unit compared to those who received praise rarely/very rarely.

Duffield and Franks (2002) categorized reasons that nurses gave for leaving nursing and they noted three general themes: personal/family commitments, professional role-related reasons, and organizational factors. The authors reported in their study that nurses left because they felt that they had reached a 'professional ceiling' and desired an opportunity for continued personal development in a different field. Opportunities for professional advancement and career development within the organization also influence turnover intentions (Tzeng, 2002).

The limitation of this approach according to Boyens (2007) is that dwelling so much on satisfiers may lead to ignoring productivity. Konrad & Alison (2006) has also criticized the theory by stating that it's not free from bias as it is based on the natural reaction of employees on the sources of satisfaction and dissatisfaction at work. This is because what satisfies one employee may not satisfy the other (Konrad & Alison, 2006). Lum *et al*, (1998) has also stated that the approach provides little practical assistance for organizations in achieving employee retention as dwelling entirely on intrinsic factors may ignore other

important factors of employee motivation. With these limitations the organization will not be able to successfully achieve employee retention.

### **2.3.3 Strategies Used by Hospitals to Improve Retention of Nurses**

While there is limited knowledge of the effectiveness of retention strategies on nurses' job satisfaction and intent to stay, there is information in the scholarly and non-scholarly health care literature on a variety of possible retention strategies. A comprehensive review of both types of literature provided data on current management-initiated retention strategies in health care settings.

Control over work, also referred to as task and/or clinical autonomy, is a mechanism instituted by management to give nurses the authority and independence to make decisions in the care they provide, and the freedom to plan and organize their work (Kramer & Schmalenberg, 2003, McCloskey, 1990). In a study of 320 nurses from a large Midwestern hospital McCloskey identified task autonomy as the most important determinant of job contentment. In a review of literature synthesizing research on magnet hospitals Scott, Sochalski, and Aiken (1999) reported that clinical autonomy was a significant variable in explaining job satisfaction and work productivity.

Professional growth is a mechanism implemented by management to provide nurses an opportunity for professional advancement through promotion within the organization or from educational opportunities outside the organization. Promotion within an organization can take the form of career ladders and career advancement programs (Aiken et al, 2001); or promotion of nurses to leadership positions such as preceptors, mentors, supervisors, or expert speakers (Blegen *et al.*, 1992). Educational advancement opportunities include organizations' educational offerings or financial support for advancing nurses' education outside the organization. Previous research has established a significant positive association of nurses' job satisfaction and organizational opportunities for professional growth in hospital settings (Cline, Reilly & Moore, 2003).

Flexible work schedules are a mechanism implemented by management to provide individual nurses independence and control over their hours of work including the planning, convenience, flexibility, creativity, and stability of their work schedule (Cangelosi, Markham, & Bounds, 1998). Flexible work schedules have been found to be important for the female workforce and are hypothesized to be a key to job satisfaction in the nursing population (Aiken *et al*, 2001). Flexibility of work schedule is reported by home care administrators to be the primary reason some nurses choose home care as their practice setting (Anthony & Milone-Nuzzo, 2004; Cushman *et al*, 2001).

The relationship between Competitive salaries and benefits is a mechanism by which agencies set their salaries and benefits equal to or higher than the agency's geographical competitors (Cavanagh, 1989). Competitive benefits include paid time off, (inclusive of vacation, holiday, and sick time), health insurance and a retirement plan. Studies examining the effects of salary and benefits on intent to stay demonstrate mixed results. Cushman *et al* (2001) found that home care agency administrators frequently reported that salary and benefits were important contributors to staff nurse retention.

Lacey (2003) reported congruence between administrator and nurses' rankings on the importance of salary and benefits to nurses' job retention in a sample of hospital nurses. In other studies, salaries and benefits have been found to have little effect on nurses' job retention (Ahlburgh & Mahoney, 1996). Some argue that salary and benefits maybe more important to job satisfaction and retention during times of economic uncertainty and job stress (Molassiotis & Haberman, 1996). Flynn (2005) concluded that while home healthcare nurses expect their compensation to be competitive with that of other professions, higher salaries alone do not improve nurses' job retention.

#### **2.4 Conceptual Framework**

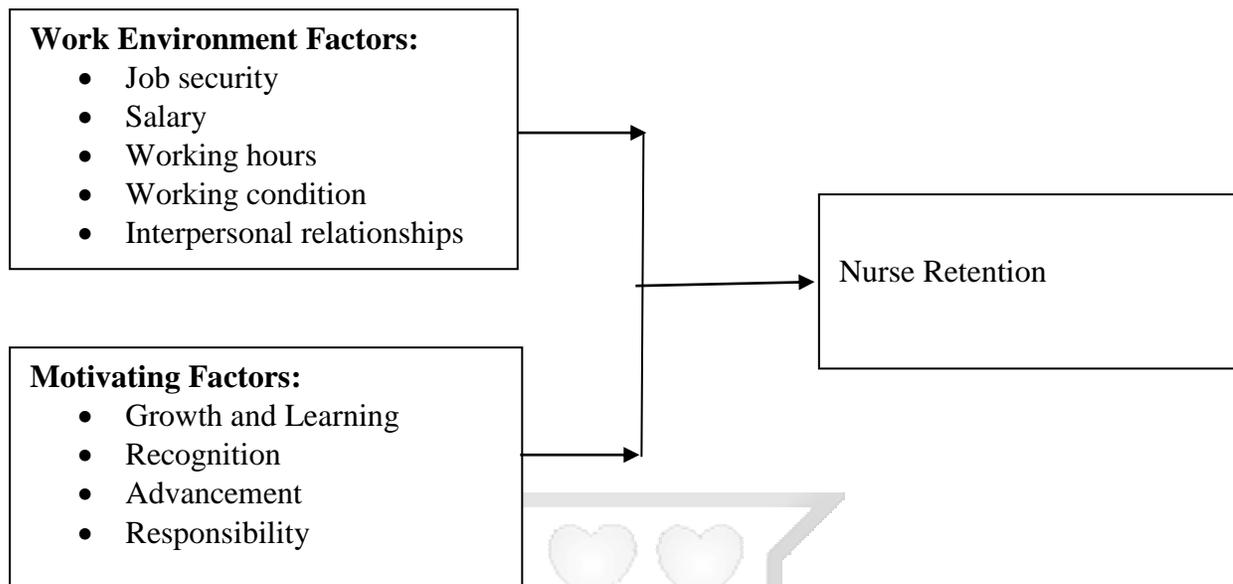
According to Miles and Huberman (1994), a conceptual framework is a visual or written product that explains, either graphically or in narrative form, the main things to be studied. It states the concepts or variables and the presumed relationships among them. It is used to make conceptual distinctions and organize ideas. Strong conceptual frameworks capture

something real and do this in a way that is easy to remember and apply, Juan (2010). This conceptual framework is based on Heizebergs motivation theory. The researcher conceptualized high nurse turnover as the dependent variable and the factors causing turnover as the independent variables. The researcher assumed that the identified factors had either a positive or negative influence on nurse turnover. These factors were to form the independent variables while nurse turnover formed the dependent variable



## Independent Variables

## Dependent Variable



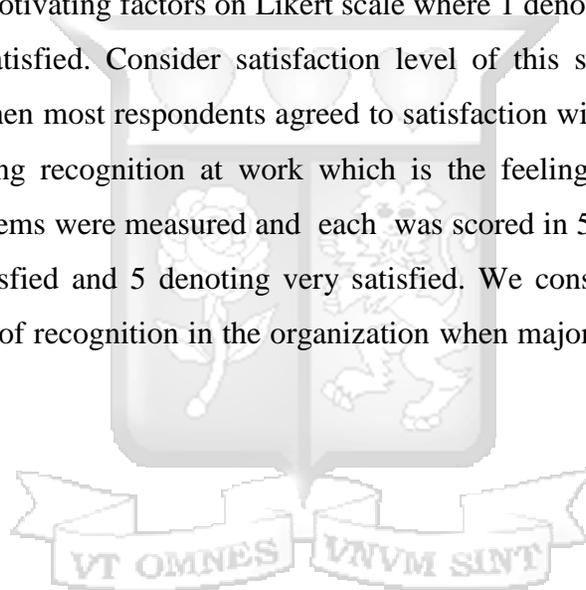
**Figure 2.1 Conceptual framework**

The independent variables; work environment and motivating factors were measured using Likert scale rated questions. Nurse retention rate was established by asking the participants whether they have an intention to leave or stop working in the facility during the year. The responses were analyzed statistically to evaluate the relationship between the independent variables and nurse retention. If there is good job security and interpersonal relations, there was increased nurse retention and vice versa. If the working hours and salary are fair and equitable there will be increased nurse retention. If staff development through growth and learning, career advancement and better responsibility are satisfactory and fair there was increased nurse retention and vice versa.

Intention/Anticipation to leave a job is the intent or predisposition to leave the organization where one is presently employed or employee's plan of intention to quit the present job and look forward to find another job in the near future. It was measured using two items with assessment of attitudes on current job and reason for leaving organization for workmate in the past. The question scored from five-point Likert scales in which 1 denotes strong disagreement and 5 denotes strong agreement.

Work Environment and Group Cohesion; This was measured using the five-item work environment and group cohesion scale in which 1 denotes very dissatisfied and 5 denotes extremely satisfied. Consider satisfaction level of this subscale as satisfied with environment and cohesion when most respondents agreed with this statement. For example, in measuring salary; the level of satisfaction with wage in the organization and it was measured by using three items each scored with five-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. We consider that staff nurses were satisfied by the level of benefit and salary in the organization when majority of them agreed to this statement and vice versa

Motivating factors; these are factors associated with job satisfaction. This was measured using the four item motivating factors on Likert scale where 1 denotes very dissatisfied and 5 denotes extremely satisfied. Consider satisfaction level of this subscale as satisfied with motivating factors when most respondents agreed to satisfaction with motivating factors. For example, in measuring recognition at work which is the feeling of being valued by the administration four items were measured and each was scored in 5-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. We consider that staff nurse was satisfied by the level of recognition in the organization when majority of respondents agreed to this statement.



## **CHAPTER THREE**

### **RESEARCH DESIGN AND METHODOLOGY**

#### **3.0 Introduction**

This chapter describes the research design and specific methodology that was adopted by this study in examining the factors influencing the retention of nurses in Shalom Hospitals. It includes sampling procedure and sample size, target population, research location, research instruments, data collection procedure and data analysis.

#### **3.1 Research Design**

According to De Vaus and William (2006), the research design refers to the overall strategy that a researcher chooses to integrate the different components of the study in a coherent and logical way, thereby, ensuring one effectively addressed the research problem; it constitutes the blueprint for the collection, measurement, and analysis of data. The function of a research design is to ensure that the evidence obtained enables you to effectively address the research problem as unambiguously as possible. Quantitative research design is used in this study to demonstrate associations or relationships between the variables. This is because the study sought to investigate the relationship between nurse retention, work environment and internal motivating factors

#### **3.2 Population of the Study**

Mugenda and Mugenda (2003) define the target population as a complete set of individuals, cases or objects with the same common observable characteristics. A research population is generally a large collection of individuals or objects that is the main focus of a scientific query. Polit and Hungler (1999) refer to the population as an aggregate or totality of all the objects, subjects or members that conform to a set of specifications. The target population of the study was 200 nurses working with Shalom Hospitals Machakos County. The area of study is the Shalom Hospitals Machakos County. This is because the study was targeting the registered nurses who are working in these health facilities.

### 3.3 Sampling Techniques and Procedure

The sampling frame is all the population units from where the sample was selected (Cooper and Schindler, 2008). According to Kothari (2006) sampling involves the selection and analysis of a small number of events, objects or individuals so as to make a conclusion about something from the entire population from where the sample is selected. The study used the simple random sampling techniques to select the sample of the study. Yumane's formula (Yumane, 1964) guided the selection of the appropriate sample size for the nurses working in Shalom hospital who were recruited in the study. The working sample was guided by Yumane's formula

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

Where

$n$  = is the sample size

$N$  = is the population

$1$  = Is a constant

$e^2$  = is the estimated standard error which is 5% for 95% confidence level

This was calculated based on the following parameters; average population size of 200 nurses, confidence level 95% and confidence interval 10 (Creative Research Systems, 2012).

The human resource department was able to confirm the number of nurses working in the institution as 200. The study used a sample of 87 nurses from Shalom Hospitals. Simple random sampling was used in the survey. In random sampling all subsets of the sample frame are given an equal probability (Morgan, Feuer, & Anderson, 1991). Simple random sampling was considered effective for our survey because it was least biased and gave an equal chance of selection from the population.

### **3.4 Data Collection Procedures and Instruments**

Data Collection is gathering specific information aimed at proving or refuting some facts (Kombo and Tromp 2006:99). This study used quantitative methods of research. Quantitative method entails techniques and measures that produce discrete numerical data. In this case, the researcher used questionnaires to obtain information on the factors associated with retention rates and their relationship to the retention rates. The questionnaires were administered by a data collection clerk to the respondents who filled them in independently and gave them back to the clerk.

The questionnaires were close-ended questions in order to provide more structured responses which then facilitated tangible recommendations. Responses were quantified using Likert scale. This made the data to be in a form which is easily quantifiable and could be easily subjected to computation of some mathematical analysis (Word press, 2011)

Intention/Anticipation to leave a job is the intent or predisposition to leave the organization where one is presently employed or employee's plan of intention to quit the present job and look forward to find another job in the near future. It was measured by assessment of attitudes on current job. The question scored from five-point Likert scales in which 1 denotes strong disagreement and 5 denotes strong agreement. A mean score of more than 3.5 showed a high retention rate while a mean score of less than two showed a low retention rate. The questions had two parts with part one asking if the respondents would prefer to stop working in the institution and the other part asking if they would prefer to continue working in the institution. The study considered part one weightier in determining retention rate.

Work Environment and Group Cohesion; This was measured using the five-item work environment and group cohesion scale in which 1 denotes very dissatisfied and 5 denotes extremely satisfied. Consider satisfaction level of this subscale as satisfied with environment and cohesion when most respondents agreed with this statement. For example, in measuring salary; the level of satisfaction with wage in the organization and it was measured by using three items each scored with five-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. We consider that staff nurses were satisfied by the level of benefit

and salary in the organization when majority of them (a mean score of more than three for each statement) agreed to this statement and vice versa (A mean score of less than 3)

Motivating factors; these are factors associated with job satisfaction. This was measured using the four item motivating factors on Likert scale where 1 denotes very dissatisfied and 5 denotes extremely satisfied. Consider satisfaction level of this subscale as satisfied with motivating factors when most respondents agreed to satisfaction with motivating factors. For example, in measuring recognition at work which is the feeling of being valued by the administration four items were measured and each was scored in 5-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. We consider that staff nurse was satisfied by the level of recognition in the organization when majority of respondents agreed to this statement. (A mean score of more than 3)

Some questions were open ended to enable the interviewer get the interviewees' views.

### **3.5 Data Analysis and Presentation**

The data collected in questionnaires was checked for completeness before analysis. Quantitative techniques were used to analyze data. The researcher coded the questionnaires and did entry into a computer for analysis. The data was then analyzed through percentages, frequencies, mean and standard deviation. This was done through the aid of statistical software for social packages (SPSS 20). The relationships between the dependent and independent variables was determined using linear regression analysis because a linear model can include more than one predictor(independent variables) as long as the predictors are additive. The findings were then presented in tables and graphs for easy comparisons and understanding to the readers.

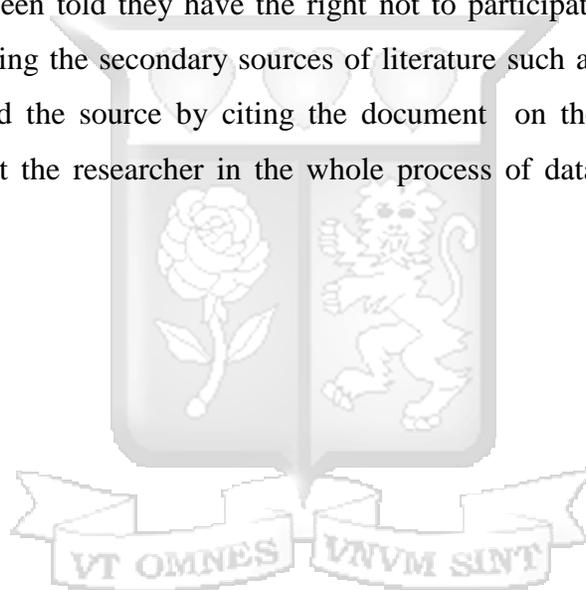
### **3.6 Testing Validity and reliability of the Tools and Techniques**

To ensure the accuracy of data, it is important to test the validity and reliability of the research instruments (Patton, 2005). Before the actual study, the researchers reexamined the questionnaire to ensure that it is relevant and able to facilitate the achievement of the research objects by doing a test run before the initial survey. Additionally, validity and

reliability of data collected was facilitated by having a moderator. This helped to monitor biases in the research, and enhance data validity and reliability.

### **3.7 Ethical considerations**

Ethical approvals for the study were obtained from Strathmore University Institutional Review Board. Ethical review was also obtained from Shalom Hospital Ethics and Review Committees. A letter of introduction from Strathmore University facilitated the approval. Informed consent was taken orally from each participant before start of data collection. Confidentiality was assured by indicating they are not requested to write their name on the questionnaire and by assuring that their responses will not in any way be linked to them. In addition, they have been told they have the right not to participate and withdraw from the study. Also, while using the secondary sources of literature such as journals and books, the research acknowledged the source by citing the document on the references page. These practices ensured that the researcher in the whole process of data collection observed the codes of ethics.



## CHAPTER FOUR

### DATA ANALYSIS, RESULTS AND FINDINGS

#### 4.1 Introduction

This chapter discusses the interpretation and presentation of the findings obtained from the field. The chapter presents the background information of the respondents and the findings of the analysis based on the objectives of the study. Descriptive and inferential statistics have been used to discuss the findings of the study.

#### 4.2 Response rate

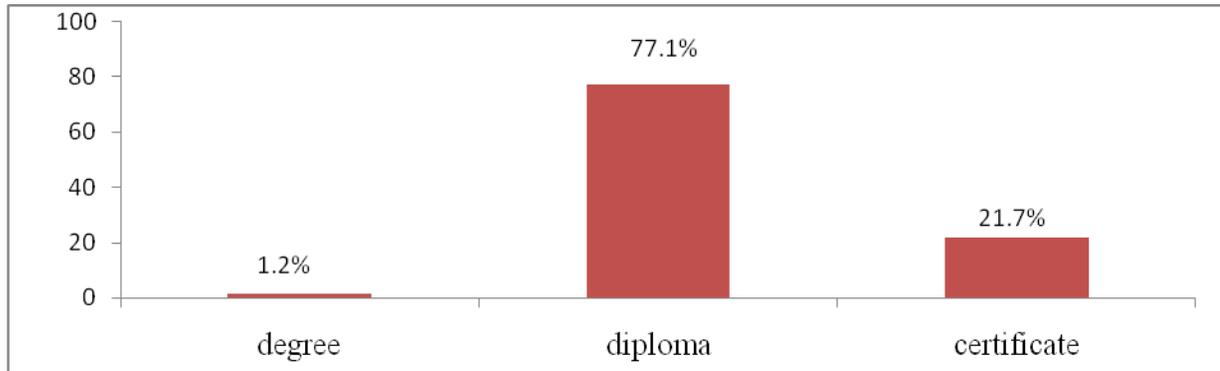
The study targeted a sample size of 87 nurses and 7 management staff that included senior nurses and human resource officers for the questionnaires. 83 nurses and 7 management staff filled in and returned the questionnaires making a response rate of 93 percent for the nurses and 100% for the management staff. This response rate was satisfactory to make conclusions for the study. The response rate was representative. According to Mugenda and Mugenda (1999), a response rate of 50 percent is adequate for analysis and reporting; a rate of 60 percent is good and a response rate of 70 percent and over is excellent. Based on the assertion, the response rate was considered to be excellent.

**Table 4.1: Response Rate**

Questionnaire	Frequency	Percentage
Filled and Returned	83	93
Unreturned	4	7
Total	100	100.0

### 4.3 Background Information

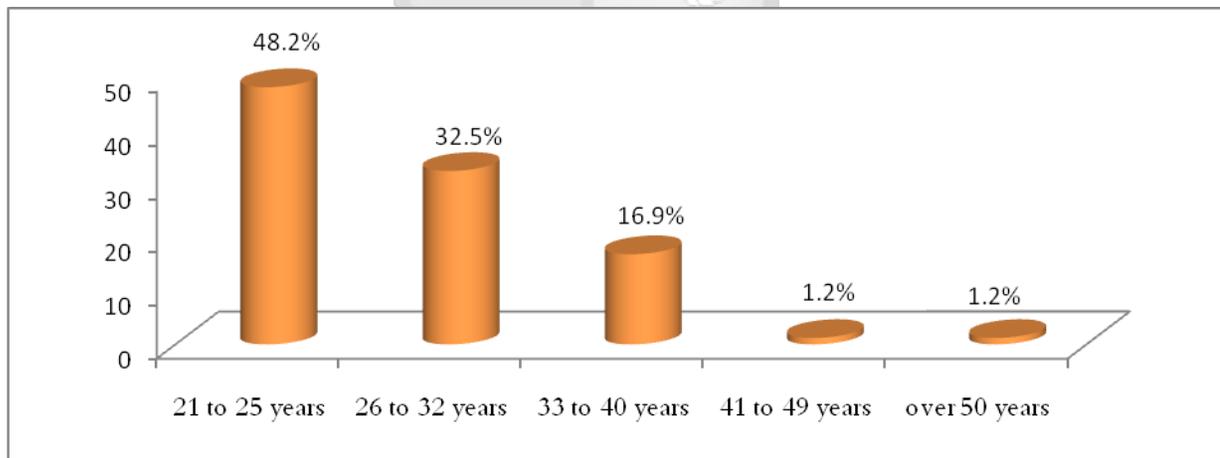
#### 4.3.1 Level of Education



**Figure 4.2: Level of Education**

Respondents were requested to indicate their educational qualifications, from the research findings, the study revealed that majority of the respondents as shown by 77.1% held diploma certificates, 21.7% of the respondents indicated that they held certificate, whereas 1.2% of the respondents indicated that they held bachelor's degree. This implies that majority of the respondents were well educated which implies that they were in a position to give credible information relating to this research.

#### 4.3.2 Age Distribution

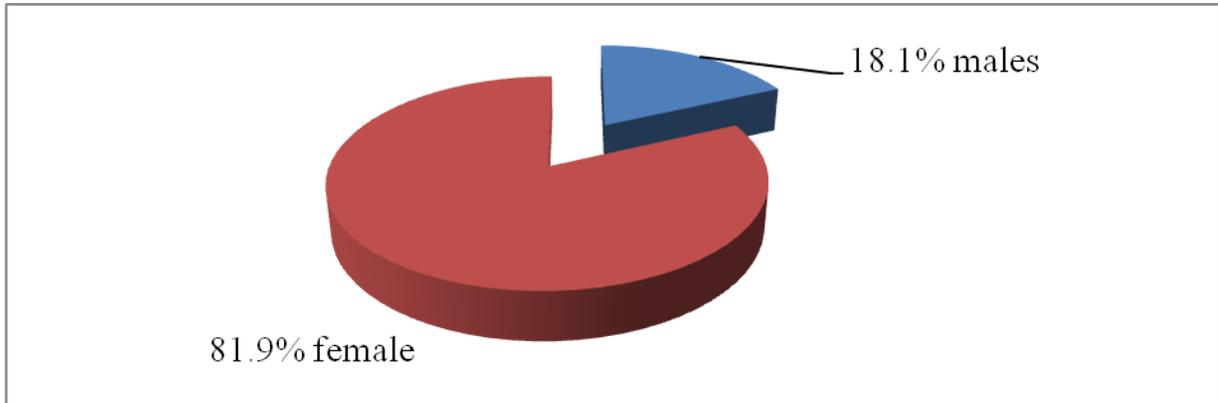


**Figure 4.3: Age Distribution**

Results on age distribution showed that most of the respondents as shown by 48.2% were aged between 21 to 25 years, 32.5% of the respondents indicated they were aged between 26 to 32 years, 16.9% of the respondents indicated they were aged between 33 to 40 years, 1.2% of the respondents indicated they were aged between 41 to 49 years, and 1.2% of the respondents indicated they were aged over 50 years.

to 32 years, 16.9% of the of the respondent indicated they were aged between 33 to 40 years whereas 1.2 % of the respondents indicated that they were either aged between 41 to 49 years or above 50 years. This is an indication that respondents were fairly distributed in terms of their age groups.

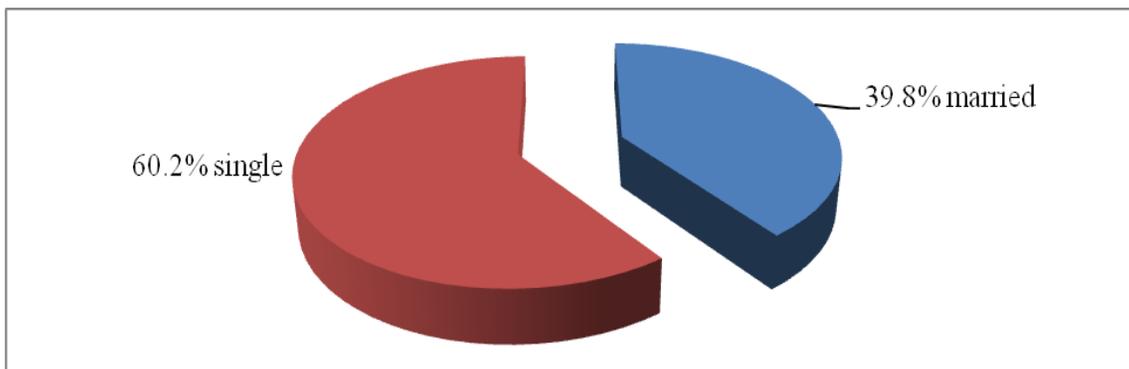
#### 4.3.3 Gender Category



**Figure 4.4: Gender Category**

The study sought to determine the gender composition of the respondents, from the study it was established that majority of the respondents as shown by 81.9%, were female whereas 18.1% of the respondents were males, this is an indication that both genders were well involved in this study and thus the finding of the study did not suffer from gender bias. The nursing profession is mainly female dominated hence the gender disparity.

#### 4.3.4 Marital Status



**Figure 4.5: Marital status**

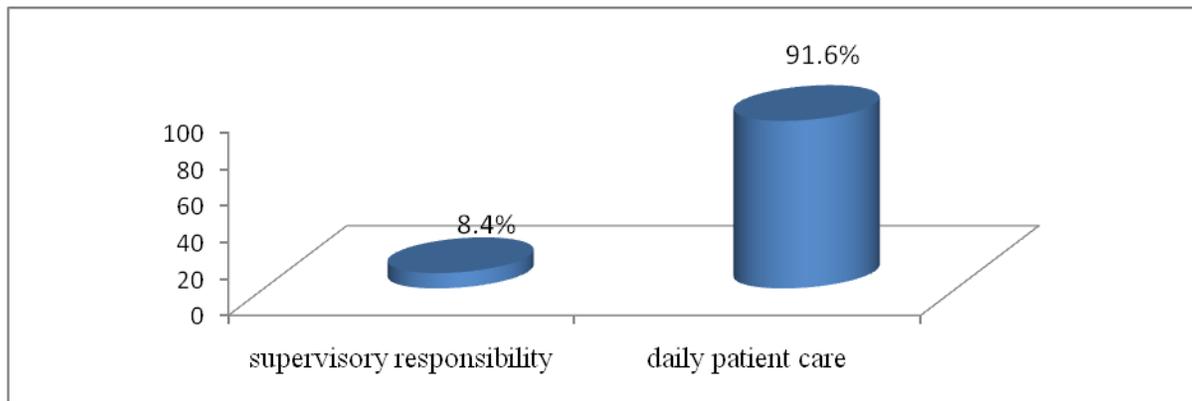
The research sought to establish the marital status of the respondents, from the research findings, the study revealed that majority of the respondents as shown by 60.2% were single whereas 39.8% of the respondents were married.

**Table 4.2: Work Department**

Department	Frequency	Percent
Triage Room	4	4.8
Emergency Room	4	4.8
Maternal and Child Health Clinic	6	7.2
Maternity	18	21.7
Female Wards	20	24.1
Private Ward	8	9.6
Theatre	5	6.0
Male Wards	10	12.0
Pediatric Ward	6	7.2
Others	2	2.4
<b>Total</b>	<b>83</b>	<b>100.0</b>

24.1% of the respondents indicated that they worked in female wards, 21.7% of the respondents indicated that they worked in maternity, 12% of the respondents indicated that they worked in male wards, 9.6% of the respondents indicated that they worked in private ward, 7.2% of the respondents indicated that they worked in pediatric ward or maternal and child health clinic, 6.0% of the respondents indicated that they worked in the theatre, 4.8% of the respondents indicated that they worked in emergency room or triage room, while 2.4% of the respondents indicated that they worked in other areas. This implies that respondents were fairly drawn from all hospital work departments and thus the finding of this research was fairly reached.

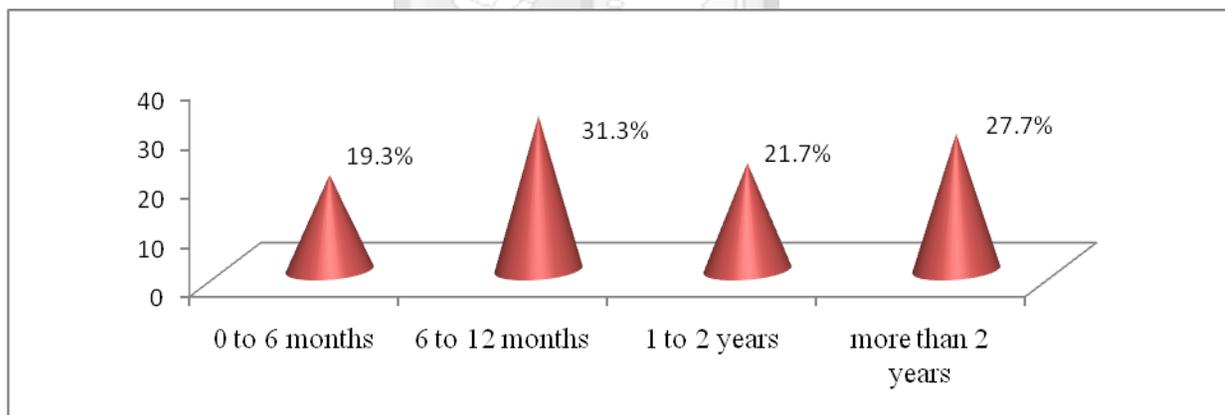
#### 4.3.5. Respondents Roles in the Hospital



**Figure 4.6: Respondents Roles in the Hospital**

Respondents were requested to indicate their roles at the healthy facility, from research findings, the study revealed that majority of the respondents as show by 91.6% undertook the role of daily patient care while 8.4% undertook the supervisory roles. This implies that both implies that respondents were fairly drawn putting into consideration of their duties.

#### 4.3.6 Duration of work in this facility

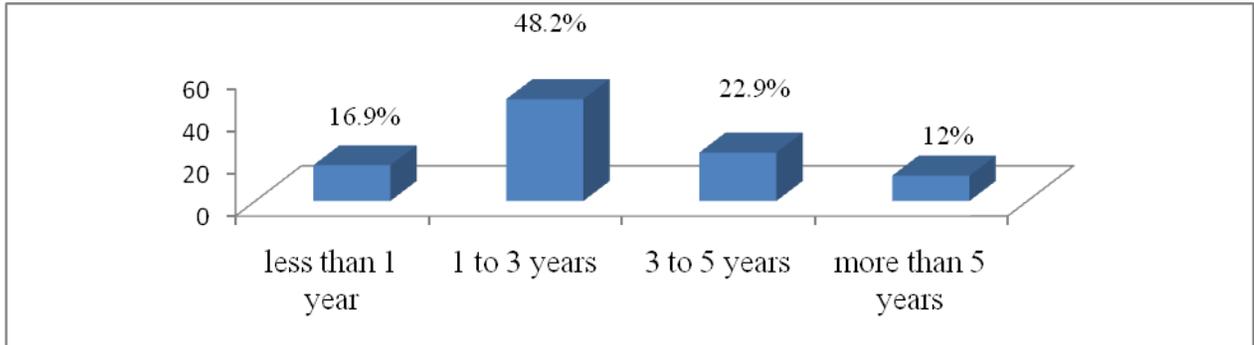


**Figure 4.7: Duration of work in this facility**

The research requested the respondent to indicate their period of service in the facility, from the research findings, the study revealed that most of the respondents as shown by 31.3% had served for a period of 6 to 12 months, 21.7 % of the respondents indicated to have served for a period of 1 to 2 years, 27.7% of the respondents indicated to have served for a period more than 2 years whereas 19.6% of the respondents indicated to have served for a period

less than 6 months, this implies that majority of the respondents had served for a considerable period of time and thus they were in a position to give credible information relating to this study.

#### 4.3.7 Work Experience as a nurse



**Figure 4.8: Work Experience**

The study sought to determine the respondents work experience, from the research findings, majority of the responders as shown by 48.2% indicated 1 to 3 years, 22.9% indicated 3 to 5 years, 16.9% of the respondents indicated less than a year, whereas 12% of the respondents indicated more than 5 years. This implies that considerable number of respondents had served for a considerable period of time and thus they were in a position to give credible info relating to this research.

#### 4.4 Work environment

The study sought to find out what job aspects satisfy the respondents. Respondents were required to indicate their level of satisfaction with job aspects in the hospital. The results are shown in the table below.

**Table 4.3: Statements relating to work environment**

<b>Statements.</b>	<b>% Dissatisfied</b>	<b>% Slightly Satisfied</b>	<b>% Satisfied</b>	<b>% Very Satisfied</b>	<b>% Extremely Satisfied</b>	<b>Mean</b>	<b>Standard deviation</b>
Satisfaction with job security	41	18	5	24	12	2.18	1.317
Satisfaction with working hours	37	17	7	18	20	1.95	1.199
Satisfaction with shifts organization	25	39	8	13	14	2.20	1.187
Satisfaction with present salary as measure to qualification	31	17	7	24	20	1.59	1.048
Present salary in helping you meet life expenses	25	20	12	14	28	1.69	1.178
Present salary as compared to other people	18	30	19	6	27	1.63	.959
Present salary as measure of the work you do	18	34	25	12	11	1.75	1.248
Working conditions are not stressful	47	46	1	1	5	2.10	1.055
Staffing level is adequate	46	49	2	1	1	1.94	1.086
Hospital is well equipped with patient facilities	30	40	1	14	14	2.05	1.047
Management has reduced nurses to exposure to medical risks	51	46	4	0	0	2.20	1.237
Satisfaction with supervisors	57	37	4	1	1	2.65	1.234
Satisfaction with fellow nurses	49	46	2	2	0	3.19	1.109
Satisfaction with patients	41	18	5	24	12	3.29	1.174
I would be more satisfied as a supervisor	37	17	7	18	20	2.60	1.297
I would be more satisfied as a practicing nurse in another department	25	39	8	13	14	2.87	1.145

From the study findings 41 – 57% of the respondents indicated that they were dissatisfied with the relationship between them and their patients and supervisor. Sixty-two percent of the respondents also stated that they would be more satisfied if they were supervisors or given different duties in other departments. These had mean scores of between 1 and 2.

Fifty-nine to ninety-six percent (59 – 96%) of the respondents indicated that they were least satisfied with job security, working hours, adequate staffing levels, shifts in the organization and present salary. Seventy to ninety-five percent (70 -95%) nurses were also slightly satisfied with the hospitals level of equipping and managements reduction of exposure to risk.

This is further supported by a content analysis of the open ended questions which showed that majority of the respondents cited job security giving example of being fired easily by senior management as an issue they did not like. They also stated that salary should be paid according to the years one had worked and according to one's work experience. Others stated that they would feel better if they were given allowances and bonuses such as transport allowance and better medical cover. Some stated that they would like to have better medical equipment and facilities in the provision of care. They also stated that the working hours were too long with few nurses in the working stations leading to work overload. Others stated that there is no appraisal of staff appraisal commensurate with how many years one had worked in the facility or the level of experience

#### **4.5 Motivating Factors**

The study sought to find out what external motivating factors satisfy the respondents. Respondents were required to indicate their level of satisfaction with aspects regarding motivational factors while working in the hospital. The findings are shown in the table below.

**Table 4.4: Statements relating to motivating factors**

Statements.	% Strongly disagree	% Disagree	% Can't say	% Agree	% Strongly agree	Mean	Std. Deviation
Satisfaction with promotion to higher position of leadership	20	42	14	11	12	2.29	1.121
Satisfaction with fairness in the way promotions are offered	31	37	16	10	6	2.31	1.219
Satisfaction with promotion to higher job group	41	24	11	13	11	2.34	1.151
Satisfaction with the way management and supervision offer gratitude for job well done	29	41	16	8	6	1.96	1.142
Satisfaction that nurses are publicly celebrated	42	31	20	1	1	1.99	1.244
I am satisfied with seminars	54	31	7	2	5	2.52	1.509
I am satisfied with trainings	51	42	4	1	2	2.49	1.426
I am satisfied with higher learning e.g. higher diplomas and degrees	47	46	1	1	5	2.28	1.373

From the study findings, 85 – 93% of respondents indicated that they were dissatisfied with seminars, trainings and opportunities for higher learning offered for career enhancement at the organization (Mean score of 2). Sixty-five to sixty-eight (65 – 68) % of respondents also indicated that they were dissatisfied with the processes of promotions in the organisation.

Seventy to seventy-three percent (70 – 73%) of respondents were dissatisfied with the way management and supervision offer gratitude for a job well done and the way nurses are publicly celebrated.

A content analysis of open ended questions on staff motivation showed that staff appraisal is not commensurate to the years one had worked in the facility or the level of experience. It also revealed that nurses liked the support they got from their supervisors and colleagues.

They also liked the work experience they were exposed to and the fact that they got satisfaction from treating patients at the institution. A few nurses mentioned that they liked receiving praise from senior management on work well done.

#### 4.6 Strategies of Retention Used by The Management

The study sought to investigate strategies of retention used by the management in Shalom hospitals. Respondents were required to indicate their level of agreement with statements regarding management strategies to retain nurses at the hospital. The findings are shown in the table below.

**Table 4.5: Statements Relating to Strategies of Retention**

Statements	% Strongly agree	% Agree	% Can't say	% Disagree	% Strongly disagree	Mean	Std. Deviation
Continuous medical education	5	4	18	28	46	1.86	1.069
Financial support in institutions of higher learning	6	4	7	48	35	4.14	.900
Job evaluation policy	1	2	7	45	45	3.14	1.069
There's flexibility in nurse's schedule allowing for reasonable time off.	5	7	13	40	35	2.57	1.272
Nurses participate in formation of duty roster	0	7	8	49	35	2.71	1.113

From the study findings, 83 % respondents disagreed that the management has a program that promotes personal growth through financial support in institutions for higher learning. Ninety (90) % respondents also disagreed that the management has a clearly stated policy on promotions and career advancement for nurses by having a job evaluation policy and system that establishes job groups and ranks. The management agreed that the nursing staff are allowed to give their input in the formation of duty rosters as shown by a mean of 2.71 and that there's flexibility in work schedules as nurses are given reasonable time off to perform

personal duties. Seventy-four (74) % of the respondents further disagreed that the management has a program that promotes professional growth through Continuous Medical Education. The following were suggested by the nurses as ways of improving staff retention; to improve on staff appraisals and staff promotion, increase salary, bonuses and allowances and improve on job security. They also suggested having less work hours and increase staff numbers to reduce work load whilst offering more training and further education opportunities.

#### 4.7 Nurses Intention To Leave

Respondents were required to indicate their level of agreement to statements regarding their intention to leave. The findings are shown in the table below.

**Table 4.6: Statements Relating to Nurses Intention To Leave**

Statements.	%Strongly disagree	%Disagree	%Can't say	%Agree	% Strongly agree	Mean	Std. Deviation
I would prefer to continue working	48	33	13	2	4	3.05	1.147
I would not care either way	1	2	12	37	47	2.69	1.035
I would not prefer to work here	4	6	5	33	53	2.48	1.028
I would like to stay in the hospital for 1 year	30	43	12	11	4	2.67	1.094
I would like to stay in the hospital for 2 years	49	35	8	7	0	2.66	.941
I would like to stay in the hospital for over 2 years	54	35	7	2	1	3.08	1.107
I would leave as soon as possible	4	2	4	51	40	2.74	1.109

From the study findings, respondents indicated that they would not prefer to continue working in the hospital. Ninety percent stated that they would like to leave as soon as possible with mean a mean score of 3 while more than 73% stated that they would not like to continue working for more than one year in the hospital with a mean score of 2.67. These findings therefore show that majority of the respondents had an intention to leave the organization.

The study also sought to find out where the nurses who preferred to leave would prefer to work. The findings are shown in the table below.

**Table 4.7: Where Nurses Would Prefer to Work**

	<b>Frequency</b>	<b>Percentage</b>
In another private facility	13	15.7
In a government facility	43	51.8
In a NGO	20	24.1
In a faith based organization	5	6.0
Can't say	2	2.4
<b>Total</b>	<b>83</b>	<b>100</b>

From the study findings, majority of the respondents as shown by 51.8% would prefer to work in a government hospital, 24.1% of the respondents would prefer to work in a non-governmental organization, 15.7% of the respondents would prefer to work in another private hospital, and 6.0% of the respondents would prefer to work in a faith-based hospital while 2.4% were undecided. From the open ended question on why they made the choices above the nurses stated that they had better pay and job security in government institutions. They also stated that government institutions offered better opportunity for career growth and advancement.

## 4.8 Cross Tabulation

### Cross Tabulation between Gender and Nurse Retention

**Table 4.8: Gender: I Would Prefer to Continue Working Cross Tabulation**

		I would prefer to continue working					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	4.8	7.2	4.8	0.0	1.2	18.1
	Female	43.4	25.3	8.4	2.4	2.4	81.9
Total		48.2	32.5	13.3	2.4	3.6	100

From the finding on cross tabulation between gender and preference to continue working, the study revealed that most of the respondent as shown by 48.2% strongly disagreed to the statement, out of 48.2% who strongly disagreed, 43.4% were females whereas 4.8% were males, this is an indication that females were much willing to leave the organization more than male.

**Table 4.9: Gender: I would not care either way Cross Tabulation**

		I would not care either way					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	0.0	0.0	3.6	4.8	9.6	18.1
	Female	1.2	2.4	8.4	32.5	37.3	81.9
Total		1.2	2.4	12.0	37.3	47.0	100

From the finding on cross tabulation between gender of the respondent and I would not care either way. The study found that most of the respondent as shown by 47% strongly agreed to the statement. Out of those who strongly agreed 37.3% were females whereas 9.65 were males, this clearly show that most females strongly agreed to the statement compared to males.

**Table 4.10: Gender: \* I would not prefer to work here Cross Tabulation**

		I would not prefer to work here					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	0.0	2.4	1.2	7.2	7.2	18.1
	Female	3.6	3.6	3.6	25.3	45.8	81.9
Total		3.6	6.0	4.8	32.5	53.0	100

From the findings on cross tabulation between gender and I would not prefer to work here. The study found that majority of the respondent as shown by 53% strongly agreed with the statement. Out of those who agreed, 45.8% were females, whereas 7.2% were males.

**Table 4.11: Gender: \* I would like to stay in the hospital for 1-year Cross Tabulation**

		I would like to stay in the hospital for 1 year					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	6.0	8.4	3.6	0.0	0.0	18.1
	Female	24.1	34.9	8.4	10.8	3.6	81.9
Total		30.1	43.4	12.0	10.8	3.6	100

From the findings on cross tabulation between the gender of the respondent and I would like to stay in the hospital for 1-year. The study found that most of the respondent as shown by 43.4% disagreed with the statement, out of those who disagreed, 34.9% were females whereas 8.4% were males.

**Table 4.12: Gender: \* I would like to stay in the hospital for 2 years Cross Tabulation**

		I would like to stay in the hospital for 2 years					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	10.8	3.6	2.4	1.2	0.0	18.1
	Female	38.6	31.3	6.0	6.0	0.0	81.9
Total		49.4	34.9	8.4	7.2	0.0	100

From the findings on cross tabulation between the gender of the respondent and I would like to stay in the hospital for 2 years. The study found that most of the respondent as shown by 49.4% strongly disagreed with the statement, out of those who strongly disagreed, 38.6% were females whereas 10.8% were males.

**Table 4.13: Gender: \* I would like to stay in the hospital for over 2 years Cross Tabulation**

		I would like to stay in the hospital for over 2 years					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	8.4	7.2	1.2	1.2	0.0	18.1
	Female	45.8	27.7	6.0	1.2	1.2	81.9
Total		54.2	34.9	7.2	2.4	1.2	100

From the findings on cross tabulation between the gender of the respondent and I would like to stay in the hospital for over 2 years. The study found that majority of the respondent as shown by 54.2% strongly disagreed with the statement, out of those who strongly disagreed, 45.8% were females whereas 8.4% were males.

**Table 4.14: Gender: \* I would leave as soon as possible Cross Tabulation**

		I would leave as soon as possible					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Gender:	Male	1.2	1.2	1.2	8.4	6.0	18.1
	Female	2.4	1.2	2.4	44.6	33.7	81.9
Total		3.6	2.4	3.6	50.6	39.8	100

From the findings on cross tabulation between the gender of the respondent and I would leave as soon as possible. The study found that majority of the respondent as shown by 50.6% agreed with the statement, out of those who agreed, 44.6% were females whereas 8.4% were males.

## Cross Tabulation Between Marital Status and Nurse Retention

**Table 4.15: Marital Status: \* I Would Prefer to Continue Working Cross Tabulation**

		I would prefer to continue working					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	32.5	13.3	9.6	1.2	3.6	60.2
	Married	15.7	19.3	3.6	1.2	0.0	39.8
Total		48.2	32.5	13.3	2.4	3.6	100

From the finding on cross tabulation between marital status of the respondent and preference to continue working, the study revealed that most of the respondent as shown by 48.2% strongly disagreed to the statement, out of those who strongly disagreed, 32.5% were single whereas 15.7% were married.

**Table 4.16: Marital Status: \* I would not care either way Cross Tabulation**

		I would not care either way					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	1.2	1.2	7.2	26.5	24.1	60.2
	Married	0.0	1.2	4.8	10.8	22.9	39.8
Total		1.2	2.4	12.0	37.3	47.0	100

From the finding on cross tabulation between marital status of the respondent and I would not care either way. The study found that most of the respondent as shown by 47% strongly agreed to the statement. Out of those who strongly agreed 24.1% were singles whereas 22.9% were married.

**Table 4.17: Marital Status: \* I would not prefer to work here Cross Tabulation**

		I would not prefer to work here					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	2.4	2.4	3.6	24.1	27.7	60.2
	Married	1.2	3.6	1.2	8.4	25.3	39.8
Total		3.6	6.0	4.8	32.5	53.0	100

From the findings on cross tabulation between marital status and I would not prefer to work here. The study found that majority of the respondent as shown by 53% strongly agreed with the statement. Out of those who strongly agreed, 27.7% were singles , whereas 25.3% were married.

**Table 4.18: Marital Status: \* I would like to stay in the hospital for 1-year Cross Tabulation**

		I would like to stay in the hospital for 1 year					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	15.7	34.9	7.2	2.4	0.0	60.2
	Married	14.5	8.4	4.8	8.4	3.6	39.8
Total		30.1	43.4	12.0	10.8	3.6	100

From the findings on cross tabulation between the marital status of the respondent and I would like to stay in the hospital for 1-year. The study found that most of the respondent as shown by 43.4% disagreed with the statement, out of those who disagreed, 34.9% were singles whereas 8.4% were married.

**Table 4.19: Marital Status: \* I would like to stay in the hospital for 2 years Cross Tabulation**

		I would like to stay in the hospital for 2 years					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	31.3	19.3	6.0	3.6	0.0	60.2
	Married	18.1	15.7	2.4	3.6	0.0	39.8
Total		49.4	34.9	8.4	7.2	0.0	100

From the findings on cross tabulation between marital status of the respondent and I would like to stay in the hospital for 2 years. The study found that most of the respondent as shown by 49.4% strongly disagreed with the statement, out of those who strongly disagreed, 31.3% were singles whereas 18.1% were married.

**Table 4.20: Marital Status: \* I would like to stay in the hospital for over 2 years Cross Tabulation**

		I would like to stay in the hospital for over 2 years					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	36.1	16.9	4.8	1.2	1.2	60.2
	Married	18.1	18.1	2.4	1.2	0.0	39.8
Total		54.2	34.9	7.2	2.4	1.2	100

From the findings on cross tabulation between the marital status of the respondent and I would like to stay in the hospital for over 2 years. The study found that majority of the respondent as shown by 54.2% strongly disagreed with the statement, out of those who strongly disagreed, 36.1% were singles whereas 18.1% were married.

**Table 4.21: Marital Status: \* I would leave as soon as possible Cross Tabulation**

		I would leave as soon as possible					Total
		Strongly Disagree	Disagree	Can't Say	Agree	Strongly Agree	
Marital Status:	Single	2.4	1.2	1.2	33.7	21.7	60.2
	Married	1.2	1.2	2.4	16.9	18.1	39.8
Total		3.6	2.4	3.6	50.6	39.8	100

From the findings on cross tabulation between the gender of the respondent and I would leave as soon as possible. The study found that majority of the respondent as shown by 50.6% agreed with the statement, out of those who agreed, 44.6% were females whereas 8.4% were males.

#### 4.9 Correlations Analysis

After the descriptive analysis, a Pearson moment correlation analysis was computed to assess the relationship between internal motivation of nurses and nurse retention and work environment and nurse retention. It, thus, helps in determining the strengths of association in the model, that is, which variable best explained the relationship between factors influencing the motivation of nurses, work environment and Nurse Retention in the Shalom Hospitals. Pearson's correlation measures the strength of the linear relationship between two variables, if the relationship between the two variables is not linear, then the relation coefficient does not adequately represent the strength of relationship between the variables.

**Table 4.22: Correlation analysis showing the relationship between nurse retention, work environment and internal factors**

		Nurse Retention in The Shalom Hospitals	Work environment	Internal motivating factors
Nurse retention in the Shalom	Pearson Correlation	1	.847**	.819**

hospitals	Sig. (1-tailed)		.003	.016
	N	83	83	83
Work environment	Pearson Correlation	.847**	1	.084
	Sig. (1-tailed)	.003		.009
	N	83	83	83

On the correlation of the study variable, the researcher conducted a Pearson moment correlation. From the finding in the table above, the study found that there was strong positive correlation coefficient between nurse retention at Shalom hospitals and work environment, as shown by correlation factor of 0.847, N =83 P = 0.003. When Pearson's r is close to 1, it means that there's a strong relationship between the two variables. This strong relationship was found to be statistically significant as the significant value was 0.003 which is less than 0.05. Overall there was a strong positive correlation between nurse retention and work environment. This means that an increase in work environment factors would lead to increase in nurse retention and a decrease in work environment would lead to a decrease in nurse retention.

The study also found a strong positive correlation between nurse retention at Shalom hospitals and internal motivating factors as shown by correlation coefficient of 0.819. This also showed a positive correlation as it was close to 1. This value was also found to be statistically significant at P = 0.016 which is less than 0.05 at N =83. This means that an increase in internal motivating factors would lead to an increase in nurse retention and a decrease in internal motivating factors would lead to a decrease in nurse retention.

**Table 4.23: Regression analysis predicting the relationship between work environment, internal motivating factors and nurse retention.**

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		
(Constant)	1.356	.426		3.183	.000
Work Environment	.357	.081	.332	4.407	.002
Internal Motivating Factors	.398	.081	.368	4.914	.020

From the data in table 4.10 the established regression equation was

$$Y = 1.356 + 0.357X_1 + 0.398 X_2$$

From the above regression equation it was revealed that holding, internal motivating factors and quality of current retention strategies to work environment a constant zero, the state of stand at nurse retention in the Shalom hospitals would be at 1.357, a unit increase in quality in work environment would enhance nurse retention in the Shalom hospitals by a factors of 0.357, further unit increase in internal motivating factors would enhance nurse retention in the Shalom hospitals by factors of 0.398. At 5% level of significance and 95% level of confidence, work environment had a 0.002 level of significance; internal motivating factors showed a 0.020 level of significance hence the most significant factor is internal motivating factor implying that internal motivating factors had the greatest influence on the nurse retention in the Shalom hospitals, followed by work environment. All the variables were significant ( $p < 0.05$ ).

#### **4.10 Conclusion**

The study showed that there is a low retention of nurses at The Shalom group of hospitals. The nurses were dissatisfied with the current working environment, internal motivating factors and staff retention strategies. It further showed that there is a positive relationship between work environment and nurse retention and internal motivating factors and nurse

retention. The study also found that internal motivating factors would increase staff retention more than work environment factors using linear regression analysis.



## **CHAPTER FIVE**

### **DISCUSSION**

#### **5.1 Introduction**

This chapter presents the summary of the key data findings from the study. It considers the results in relation to existing theory, previous research and how the study advances theory, knowledge and practice.

#### **5.2 Discussion of the Findings**

##### **5.2.1 Relationship between Work Environment and Nurse Retention**

The study sought to investigate the relationship between work environment and nurse retention at shalom group of hospitals and found a strong positive correlation between these two variables. The findings revealed that nurses are satisfied in terms of relations with patients, relations with fellow nurses and relations with supervisors. Nurses also indicated that they would be more satisfied as a practicing nurse in another department and they would be more satisfied as supervisor. The study also established that nurses were dissatisfied with the way shifts are organized and the management has reduced nurses' exposure to medical risks and job security. They were also dissatisfied with stressful working conditions in terms of hospital being equipped with patient facilities, working hours, and Staffing level. The study further established that nurses at Shalom hospital are dissatisfied with present salary as measure of the work they do, present salary in helping meet life expenses, present salary as compared to other people and present salary as measure to their qualification.

When respondents were asked on their intention to leave the hospital, most of the respondents indicated that they would not like to continue working in the hospital. The open ended questions further showed that most nurses intended to leave the organization to work in government facilities because they felt that they would get better job security, better pay and were assured of growth and advancement of their careers.

Results obtained from a correlation analysis showed a positive relationship between work environment factors and staff retention. This means that an increase in work environment will result into an increase in retention levels and a decrease in work environment would

result into a decrease in retention levels. Further, a prediction model in this study predicted that a unit increase in quality in work environment would enhance nurse retention in the Shalom hospitals. This study therefore found out that dissatisfaction in working conditions leads to low retention of nurses at shalom hospital

The findings are in line with the research by Bjorvelland (1992) who found that nurses who wanted to leave work had low levels of job satisfaction on several aspects of work cooperation, complexity of work, sufficient time available to provide care and supervisor support. In her study conducted in Limpopo, South Africa, Peterson (2005) found that environmental factors such as working conditions, supervision, and salaries negatively affected the employees' levels of job satisfaction. El-Jardali et al (2009) found that wages, benefits and bonuses were important determinants of anticipated turnover. Takase et al (2009) and Alexander et al (1998) also found that work load and working hours respectively were important indicators of employee satisfaction.

### **5.2.2 Relationship between internal motivation and nurse retention.**

The study sought to establish the relationship between internal motivation factors and nurse retention. The findings revealed that nurses are dissatisfied with the training opportunities offered by the hospital. It also established that nurses were dissatisfied with current policies and mechanism in place for job promotion. In the open ended questions, they emphasized the need for promotions based on experience and duration of service to the organization. They were also dissatisfied with opportunities for higher learning offered by the hospital such as continuous medical education and seminars organized within the hospital. There was dissatisfaction with the way nurses are publicly celebrated and appreciated for a job well done. When they were asked to state one thing they felt that anyone in the organization had done to make them feel valued, most of them mentioned appreciation for good work by a colleague or senior management.

These findings are similar to those of Uwayezu (2008) who reported that nurses changed their employment status because they were demotivated and they did not have opportunities

to advance to higher levels. The study results obtained from correlation model showed a positive correlation between nurse retention in the Shalom hospitals and internal motivating factors. This shows that by increasing internal motivation factors there will be an increase in retention levels and vice versa. Shields & Ward (2001) found that besides promotion opportunities, the evaluation criteria used in the promotion and reward system also had significant effects on employees' turnover intentions. Shields further stated that employee promotional chances typically fosters an employee's behavioral commitment by encouraging internal careers, thereby, guaranteeing job security and other favorable future rewards (e.g., improved income, power, status) to the employees. Needleman et al (2006) also found that today's nurses want to have challenging careers that offer opportunities for growth and advancement. In a study on the influence of praise on nurses practice and job satisfaction, Erla Dogg (2013) found that participants receiving praise very often at the work place were not likely to leave their unit as those who received praise rarely or very rarely. Robert, Cardy & Mark, (2011) found that an organization that empowers its employees by giving them new assignments, difficult task, more responsibility, job autonomy as well as opportunities to perform specialized tasks enables them to be more specialized and highly motivated to continue serving.

### **5.2.3 Strategies of Retention Used by the Management**

The study sought to investigate strategies of retention used by the management in Shalom hospitals. The findings revealed that the hospital management does not have a program that promotes personal growth through financial support in institutions for higher learning. The management also does not have a clear policy on job evaluation and flexibility of work schedules. The findings also revealed that the hospital management does not have a program that promotes professional growth through Continuous Medical Education. These findings imply that shalom hospital does not have clear guidelines on nurse retention. The only strategy used by the hospital management is by promoting professional growth by continuous medical education. With the lack of the hospitals financial support, as well as long working hours and work overload with no adequate off days, this strategy cannot come to fruition.

This explains why nurses would prefer not to work in the hospital as the management has no workable strategy to retain them.

The study also revealed that although employees of Shalom hospitals valued work environment, they accorded greater value on internal motivating factors such as career development, growth and advancement, employee recognition and responsibility than they did for work environment factors. Thus the study concludes that provision of quality standard internal motivating factors would help to reduced employee turnover in Shalom hospitals. This was also shown by Shields (2001) who found that internal motivating factors such as promotion and training opportunities had a stronger impact on intention to quit than work environment factors such as work load and pay. In other studies, salaries and benefits have been found to have little effect on nurses' job retention (Ahlburgh & Mahoney, 1996). Although the research found that Shalom hospitals have nurse retention strategies, such as promoting professional growth through continuous medical examinations such a program would not be effective with poor payment and long working hours. The study therefore concludes that shalom hospital does not have nurse's retention strategies.

### **5.3 Conclusion**

The study showed that there is a low retention rate of nurses at The Shalom group of hospitals. The nurses were dissatisfied with the current working environment, internal motivating factors and staff retention strategies. It further showed that there is a positive relationship between work environment and nurse retention and internal motivating factors and nurse retention. This means that by increasing satisfaction with work environment and internal motivating factors the management would increase nurse retention and by decreasing satisfaction with work environment and internal motivating factors the management would decrease nurse retention. The study also found no direct relationship between work environment and internal motivating factors. This means that increasing work environment would not affect internal motivating factors and vice versa.

The study also predicted that internal motivating factors would increase staff retention more than work environment factors using the linear regression model. The nurses and

management showed that the hospital does not currently have retention strategies in place to address nurse retention.

#### **5.4 Recommendations for practice**

In order to encourage nurse retention, the management of Shalom group of hospitals should develop an overall staff retention plan which addresses both work environment and internal motivating factors. It should thus improve on salary and remuneration in commensurate to the work done by the nurses and the market rates. It should also improve on working conditions by increasing the level of staffing, improving on working hours and equipment available. It should also improve on job security and tenure. Policies to ensure job security should be put in place as many nurses cited lack of job security as the reason they might leave the hospital. A clear policy on job exit should be set up and implemented

The management should also improve on recognition of nurses by offering gratitude for a job well done and publicly celebrate nurses who do their work well. The HR department should also develop a growth and development policy which ensures that there is fairness in the way promotions are offered and training needs of staff are addressed. Top hospital managers should work with its human resource policies and provide training programs and if possible offer financial assistance in order to access these programs. Career enhancement offers an environment where nurses can grow in their profession and remain personally and professionally challenged.

The HR Managers should involve nurses in creation of duty rosters and in organizing of shifts. Since turnover for skilled and knowledgeable employees particularly those that can't be replaced for years are capable to damage credibility of the Shalom hospitals leading to a decline in the productivity and job performance, in this view the study recommends that the managers of Shalom hospitals should make a maximum effort in the handling of Nurses and motivate dissatisfied employees.

The management of shalom group of hospitals need to put in place effective strategies to ensure maximum retention of nurses such; encouraging employees to participate the decision making process of the organization core programs, allowing nurses to give their input in the formation of duty rosters and shifts, having flexible work shifts, having programs that promote nurses professional growth, etc. The management should approach employees at their work place, particularly identify employees who are dissatisfied and address issues that will make them not to leave their jobs. The higher the participation of employee in the decision making process, the faster the implementation and employee satisfaction

#### **5.4 Recommendation for Further Research**

The Study sought to investigate the influence of job related factors on nurse retention in the Shalom hospitals and to find out what strategies of retention the management currently has in place to improve retention. The study found that these strategies were poor and nonexistent. The study recommends that future research be done on the management of Shalom hospitals to find out why these strategies have not been set up.

#### **5.5 Limitations**

A possible limitation for this study could be that our results are based on cross sectional self reports, resulting in possible contamination from common method variance. It is argued that the collection of data on multiple variables using a single approach to data-collection (usually self-report questionnaire) leads to an over-estimation of the strength of relations between variables: the common method variance problem. In this case the correlation between the measures will be higher than it ideally should be because participants will apply the same biases to each task. At least one key variable should have been measured using an alternative approach, such as observer ratings.

Another possible limitation is the response bias. In this case it is possible that a certain group of nurses were more likely to agree to participate in the study than other groups. For example, nurses who are more likely to have low motivation have increased likelihood of being interested in the study. This could be overcome by increasing the sample size.

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## APPENDICES

### Appendix I: Letter of Introduction

Strathmore Business School  
Institute of Healthcare Management  
To the Nurses,  
Shalom Hospital Athiriver/, Machakos.

Dear sir/madam,

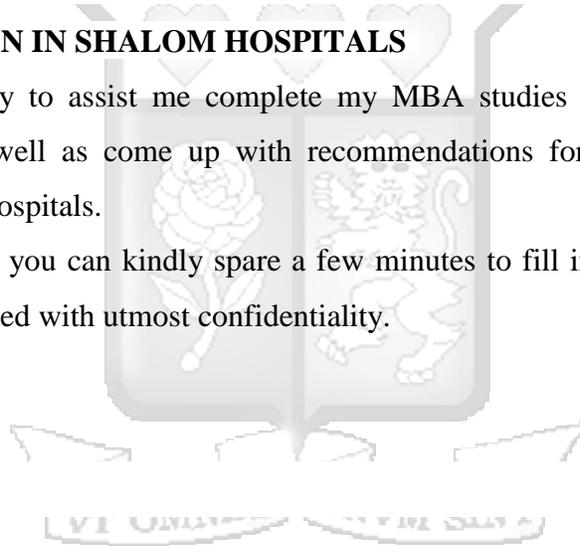
I am a post graduate student pursuing a master's degree in Healthcare Management at Strathmore Business School.

I am conducting a research on **AN EVALUATION OF THE RELATIONSHIP BETWEEN THE HERZEBERGS HYGIENE AND MOTIVATION FACTORS ON NURSE RETENTION IN SHALOM HOSPITALS**

It will go a long way to assist me complete my MBA studies at Strathmore University Business School as well as come up with recommendations for improvements of nurse retention at Shalom Hospitals.

I would be grateful if you can kindly spare a few minutes to fill in the questionnaire. Your responses will be treated with utmost confidentiality.

Kind regards,  
Hellen Onyango.

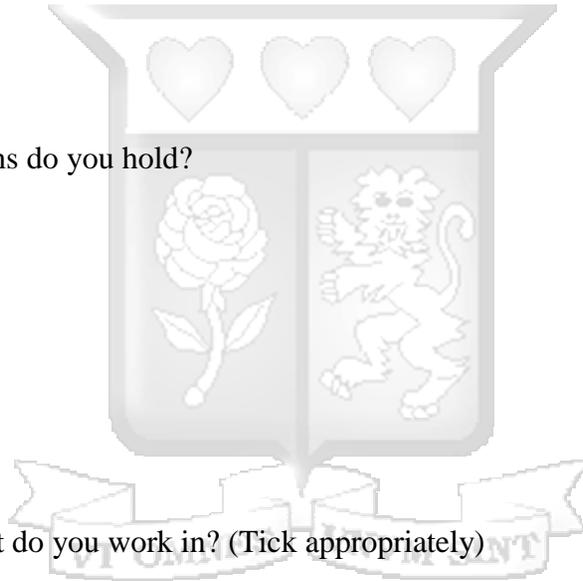


## Appendix II: Questionnaire for Nurses

### Part 1: Nurse demographics

This section will enable us get more information about you

1. How old are you?
  - 21 to 25 years old
  - 26 to 32 years old
  - 33 to 40 years old
  - 41 to 49 years old
  - 50 years old and above
2. Are you
  - Male
  - Female
3. What qualifications do you hold?
  - Degree
  - Diploma
  - Certificate
4. Are you
  - Married
  - Single
5. Which department do you work in? (Tick appropriately)
  - Triage room
  - Emergency room
  - Maternal and child health clinic
  - Maternity (Post-natal, new born unit, labour ward)
  - Female wards
  - Private wards
  - Theatre
  - Male wards
  - Paediatric ward



6. What do you do at the department you work?
- Supervisory responsibility
  - Daily patient care
7. How long have you been working as a nurse in this facility?
- 0 -6 months
  - 6 – 12 months
  - 1 – 2 years
  - More than 2 years
8. How many years of working experience as a nurse do you have?
- Less than one year
  - 1 – 3 years
  - 3 -5 years
  - More than 5 years

To understand what satisfies you most on job aspects, please read each statement and rank its importance on a scale from 1-5, where **1= Dissatisfied**, **2 = Slightly satisfied**, **3= Satisfied**), **4= Very Satisfied**, **5= Extremely satisfied**. Please circle only one choice for each item.

1.Job security					
How satisfied are you in terms of yours?	1	2	3	4	5
Security of tenure in your nursing position?					
Protection from the nursing council	1	2	3	4	5
2.Working hours					
Are you satisfied with the current working hours?	1	2	3	4	5
Are you satisfied with the way shifts are organized	1	2	3	4	5
3.Salary					
How satisfied are you with your?	1	2	3	4	5
(a) Present salary as a measure of your qualification					
(b) Present salary in helping you meet your life expenses	1	2	3	4	5
(c) Present salary as compared with	1	2	3	4	5
salary received by other people with similar qualifications in					

other professions					
(d)Present salary as a measure of the work you do	1	2	3	4	5
<b>Working conditions</b>					
The working conditions are not stressful	1	2	3	4	5
The staffing level is adequate					
The hospital is well equipped with patient facilities	1	2	3	4	5
The management has reduced nurse's exposure to medical risks	1	2	3	4	5
Fellow nurses	1	2	3	4	5
Patients					
<b>Relations</b>					
How satisfied are you in terms of your relations with:	1	2	3	4	5
Supervisors	1	2	3	4	5
Fellow nurses	1	2	3	4	5
Patients					
<b>5.Growth and Advancement</b>					
To what extent are you satisfied with:					
(a) Promotion to a higher position of leadership	1	2	3	4	5
(b) Fairness in the way promotions are offered	1	2	3	4	5
(c) The current scheme of service for nurses	1	2	3	4	5
<b>7.Recognition</b>					
Are you satisfied with the way that management and supervision offer gratitude for a job well done.	1	2	3	4	5
Are you satisfied that nurses are publicly celebrated for a job well done in this facility	1	2	3	4	5
<b>8.Responsibility</b>	1	2	3	4	5
I would be more satisfied with responsibilities at work;(choose one)	1	2	3	4	5
1.As a supervisor	1	2	3	4	5

2.As a practicing nurse in another department	1	2	3	4	5
3.That utilized my professional qualifications					
4.That utilized my professional experience					
9.Learning					
I am satisfied with the opportunities offered for continuous education such as seminars and trainings	1	2	3	4	5

7 Intention to leave? For each of the options below choose the most appropriate option

1. Strongly disagree 2. Disagree 3 Can't say 4. Agree 5. Strongly agree

Would you prefer to continue working in this hospital or would you prefer not to:					
I would prefer very much to continue working	1	2	3	4	5
I would not care either way	1	2	3	4	5
I would not prefer to work here	1	2	3	4	5
How long would you like to stay in this hospital:					
I would like to stay in the hospital for one year	1	2	3	4	5
I would like to stay in the hospital for two years	1	2	3	4	5
I would like to stay in the hospital for more than two years	1	2	3	4	5
I would like to leave as soon as possible	1	2	3	4	5

8. What are the three most important reasons that would make you stop working in this facility?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

9. If your answer to question 7-part I is that you would prefer to stop working for the organization, would you prefer a job

- In another private facility
- In a government institution
- Nongovernmental organization
- Faith based organization

8 What are the three most important reasons for the choice made above

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

9. If you could name one thing the organization could offer you as an employee, what would it be?

10. What do you think are the two most common reasons nurses leave our organization?

11. Is there anything in particular about this organization that makes you feel proud to be an employee here?

12. Name one thing a co-worker recently did that made you feel valued as an employee.

13. Strategies to improve retention

**Thank you for participating in this study**

### Appendix III: Questionnaire for Management

#### QUESTIONNAIRE ON STRATAGIES CURRENTLY USED BY THE MANAGEMENT AT SHALOMHOSPITALS

To understand what strategies the management currently has in place to improve staff retention, please read each statement and rank its current applicability in the institution on a scale from 1-5, where

**1= Strongly Agree**

**2 = Agree,**

**3= Can't say,**

**4= Disagree,**

**5= Strongly disagree.**

The management has a program that promotes professional growth through Continuous Medical Education	1	2	3	4	5
Financial support in institutions of higher learning	1	2	3	4	5
The management has a clearly stated policy on promotions and career advancement for nurses by Having a job evaluation policy and system that establishes groups and ranks	1	2	3	4	5
There is flexibility in work schedules as nurses are given reasonable time off to perform personal duties	1	2	3	4	5
Nursing staff are allowed to give their input in the formation of duty rosters	1	2	3	4	5

**Appendix IV: Certificate of Consent**  
**CERTIFICATE OF CONSENT**

I have received information about a study Hellen Onyango will conduct entitled-

**AN EVALUATION OF THE RELATIONSHIP BETWEEN THE HERZEBERGS  
DUAL FACTORS - HYGIENE AND MOTIVATION ON NURSE RETENTION IN  
SHALOM HOSPITALS**

I have been informed that the study will be conducted as academic research and that the  
Information I provide will be treated in the strictest confidence.

I express my approval and my intention to voluntarily participate in this study

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Researcher: \_\_\_\_\_

