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An Investigation into Factors Causing High Nurse Turnover in Mission Hospitals in Kenya: A Case for PCEA CHOGORIA Hospital

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ABSTRACT

Human Resource is the most important input in any healthcare system. The primary aim of this research was to investigate the factors causing high nursing turnover in mission hospitals in Kenya (a case for PCEA Chogoria Hospital). Through a detailed literature review, the researcher reviewed literature related to factors causing nursing turnover. Descriptive research design was used with the application of both qualitative and quantitative approaches of research to collate, analyze and present data. The researcher used sample size of 30% of the target population of 147 Registered and Enrolled nurses working in various departments of the Hospital. Stratified random sampling technique was used to ensure representation of these professional cadres of staff. The main data collection instruments were review and analysis of records and questionnaires. Data was analyzed and presented theoretically. The main outcome of this study is that retention of nurses is an important issue because shortages could lead to work over-loads, burnout and dissatisfaction of nurses, turnover, and compromised standards of patient care. It is recommended that the mission hospitals should develop strong Nurses retention strategies by instituting effective nurse management support, regular promotion practices, adequate staff development practices and competitive compensation (salaries and allowances) practices.

Key Words: *Nurse, Turnover, Hospital, Retention, Chogoria*

1.0 INTRODUCTION

1.1 Background Of The Study

Human resources are the most important input of any healthcare system. The World Health Organization Report (2000) found out that the human resources bill is usually the biggest single item in the recurrent budget for health. In many countries two thirds or more of the capital recurrent expenditure reflects of the labor costs. In a situation analysis of Faith Based Health services in Kenya conducted by Mureithii et al (2007), found that there was a shortage of health workers in Faith Based Health facilities due to limited training opportunities and imbalance in terms and conditions of service with the government. The study further revealed that 60-70 percent of the recurrent expenditure was spent on human resource.

Job satisfaction is an essential element for maintenance of the workforce numbers of any organization. Lack of job satisfaction for employees not only leads to high turnover rates but could also have detrimental effects on the individual, like burnout (Mrayyan, 2005). Turnover provides the organization with new ideas and is normal process. However, it does not need to be unnecessary and excessive. A high turnover rate leads to inability of an organization to provide quality care and job satisfaction to employees (Huston et al, 2003).

Turnover has a cyclic nature and remains a challenging issue. An organization should identify whether turnover is voluntary or involuntary. If the organization has high rates of involuntary turnover, then careful examination of recruitment, selection, training and motivation strategies are important. If turnover is voluntary, then the organization needs to look at factors that influence nurses to leave namely: conditions surrounding the job and factors relating directly to the job (Laphalala, 2006). A study in Jordan, which studied private hospital' nurses' levels of job satisfaction, concluded that nurses in private hospitals reported higher levels of job satisfaction and higher intentions to stay than nurses who did not work in private hospitals. This probably indicates that nurses' levels of job satisfaction are related to nurse turnover rates (Laphalala, 2006).

Miyuki (2009) found that Personnel turnover poses a significant problem through loss of trained employees and is even more problematic when the supply of such skilled and knowledgeable employees is limited, thus leading to a permanent loss of productivity. Sullivan et al (2005) found that turnover is the number of staff members who vacate a position and can either be functional (positive) or dysfunctional (negative). It may be negative if key or skilled workers leave the organization leading to reduced performance, increased costs of employee replacements and training or development. Some employee turnover positively benefits organizations. This happens when a poorly performing nurse is replaced by a more productive nurse, and can happen when a senior retirement allows the promotion or acquisition of welcome 'fresh blood'.

Sullivan et al (2005) suggest that turnover can be interpreted by co-workers of the departed nurse as a rejection of the job and recognition that better job opportunities exist elsewhere. As a result, they may reevaluate their present position in the organization and develop negative job attitude. In addition the nurses who remain may have to work overtime or work harder to cover departed nurse; this can cause both physical and mental strain that may result in additional departures.

A study conducted in Pakistan by Khowaja et al (2005) indicated that the nursing turnover rate in Pakistan from 1996-1999 had remained above 30%. The main reasons for the turnover were emigration of nurses to the UK and the USA, resignations and family responsibilities. The Health care Advisory Board 2001 as cited in Khowaja et al (2005) also indicated that nursing turnover in the USA was 33% among nurses satisfied with their working conditions while it was 94% among nurses dissatisfied with their jobs. The USA Board further outlined that the international nurse turnover rate had been estimated to be 15.0%.

PCEA Chogoria Hospital is one of the largest mission hospitals in Kenya.The Hospital has a total staff strength of 465 members. About 147 members consist of nurses who work in the Main hospital (wards and outpatient clinics), Community health (projects and dispensaries) and College of nursing (nurse tutors). Since the year 2006, PCEA Chogoria (mission) hospital has experienced high rates of employee turnover especially nurses due to job dissatisfaction.

According to the information from the HR department of Chogoria hospital the overall turnover rate has shown gradual increase (see Table 1.1 below) over five year period from 15.86% in 2006 to 21.09% in 2010. In spite of this slight increase, this turnover rate continues to exceed the international nurse turnover rate estimated to be 15.0% Khowaja et al (2005).

Table 1.1 Nurse Turnover rates for last five years

Year	Total number of Nurses	Voluntary Termination	Percentage (%) Turnover
2006	177	29	15.86
2007	156	26	16.67
2008	143	24	16.78
2009	154	27	17.53
2010	147	31	21.09
Total		**112**	

Source: Human Resource Department (2011)

The primary aim of this study was to investigate the factors influencing high nursing turnover in mission hospitals in Kenya. Identifying these factors could lead to recommendations for decreasing nurses' turnover rates and save costs on recruitment, selection, in service education/training and placement of nurses. The reduction in turnover might be a motivator to present employees, enhancing their levels of job satisfaction and the changes based on the findings could help to improve the quality of care rendered to patients in mission hospitals.

1.2 Statement Of The Problem

The nurse turnover at PCEA Chogoria Hospital has been very high as shown on the Table 1.1 above. In this study, retention of nurses is an important issue because shortages could lead to work over-loads, burnout and dissatisfaction of nurses, and compromised standards of patient care. PCEA Chogoria hospital has experienced high turnover rates among nurses. Reducing the turnover rates could save health care costs. This study attempted to investigate/identify factors that contributed to the high turnover rates among nurses in mission hospitals in Kenya – a case for PCEA Chogoria hospital. Unless this situation is arrested, the hospital will experience problems in maintaining sufficient numbers of nurses to provide health care services.

From previous studies, no studies have been done to identify the factors causing nurse turnover at the PCEA Chogoria hospital. Hence, a study to investigate the factors causing nursing turnover within PCEA Chogoria (mission) Hospital was deemed necessary.

1.3 Objectives Of The Study
This study was guided by the following broad and specific objectives.

(i). To find out if managerial factors contribute to nurse turnover.
(ii). To examine the influence of nurse promotion practices on turnover.
(iii). To assess the effectiveness of staff development programs on nurse satisfaction.
(iv). To investigate if nurse compensation or reward practices influenced nurse turnover.

1.4 Significance Of The Study

The findings of the study were to add knowledge to the stakeholders on the factors causing nurse turnover in Mission hospitals.

It was to enlighten and encourage the management of PCEA Chogoria Hospital to develop appropriate strategies for nurse retention. The hospital, patients and communities could benefit from such enhanced retention of nurses.
The research findings may form a basis for further studies on employee turnover.

It may form a basis for development of strong HR retention policies in mission Hospitals.

2.0 LITERATURE REVIEW

2.1 Introduction

Mugenda and Mugenda (2003) notes that the purpose of literature review is to help the researcher to avoid unnecessary and unintentional duplication of work; form a basis within which the research findings are to be interpreted; and demonstrates the researcher's familiarity with the existing body of knowledge. According to Kombo and Tromp (2006) review of literature helps the researcher to have a better understanding of the theoretical framework of research resulting from studying various theories related to the topic.

The purpose of this study was to investigate the factors causing high nurse turnover in mission hospitals. This chapter reviewed literature related to the study or research that would lead to the development of the conceptual model. Specifically, literatures pertaining to nursing turnover and turnover intentions was reviewed. Previous empirical findings relating to each construct/ factor was explored. Next, theoretical underpinnings that form the basis of the current study was put forward togther with theoretical (conceptual) framework.

2.2 Employee Tunover

Mohamad (2006) states that, turnover intention is an employee's own estimated probability that he or she has a conscious and deliberate intent/desire to permanently leaving the organization at some point in the near future. He notes that Employee turnover may impact negatively and positively on the organization. It may be negative if key or skilled workers leave the organization leading to reduced performance, increased costs of employee replacements and training or development. Some employee turnover positively benefits organizations. This happens when a poor performer is replaced by a more productive employee, and can happen when a senior retirement allows the promotion or acquisition of welcome 'fresh blood'. The more valuable the employees in question the more damaging the resignation, particularly when they move on to work for competitors. By contrast, where skills are relatively scarce, where recruitment is costly or where it takes several weeks to fill a vacancy, turnover is likely to be problematic for the organization. This is especially true of situations in which you are losing staff to direct competitors or where customers have developed relationships with individual employees.

Hayajneh et al (2009) found that high rates of nursing turnover are likely to lead to shortage of nursing staff and loss of human capital of experienced and skilful nurses, which jeopardize the need for high standards of education, the difficulties posed by family responsibilities and lack of proper leadership; Skilled employees resign for many different reasons. Hayajneh et al (2009) further found that high staff turnover is related to (i) low payment; (ii) lack of recognition and low professional status; (iii) job dissatisfaction and inadequate opportunity for professional development; (iv) excessive stress, low morale and promotion prospects, across all categories

being 20.2% (v) working long shifts, overtime, as well as weekends, nights and holidays, scheduling and staffing level, and (vi) moral in congruency as nurses are expected to implement actions which they might perceive as morally wrong.

Chartered Institute of Personnel Development (CIPD, 2010) research highlights the importance of front line managers and how their behavior relates directly to employee engagement, job satisfaction, advocacy and performance.

Firth et al (2004) argues that emotional support from supervisors and self-esteem mediated the impact of stressors on stress reactions, job satisfaction, commitment to the organization and intention to quit. Abeysekera (2007) suggested that to ameliorate intention to quit and in turn reduce turnover, managers need to actively monitor workloads and the relationships between supervisors and subordinates. Monitoring workloads and supervisor-subordinate relationships by management may reduce intention to quit and subsequent turnover, thereby saving organizations the considerable financial cost and effort involved in the recruitment, induction and training of replacement staff.

Sullivan et al (2005) found that although it is difficult to estimate the actual cost of nursing turnover, there are numerous expenses incurred in hiring a new nurse (e.g., recruiting, selection, orientation, on-the- job training) and temporarily replacing a nurse who quits or is fired (e.g., paying other nurses to work over time or filling the vacancy with a temporary replacement). Some turnover can't be helped, such as when an employee gets an offer from another company that your company can't match, or if the employee moves from the area due to family or other personal reasons. It's the turnover of good talent that can be prevented that companies seek to address.

Sullivan et al (2005) further found that turnover can be interpreted by co-workers of the departed nurse as a rejection of the job and recognition that better job opportunities exist elsewhere. As a result, they may reevaluate their present position in the organization and develop negative job attitude. In addition the nurses who remain may have to work overtime or work harder to cover departed nurse; this can cause both physical and mental strain that may result in additional departures.

Mwenda (2006) noted that there was high turnover of professional health workers and administrators in mission hospitals in Kenya due to competition in the labor market, imbalance of pay compared to the public service, limited opportunities for career progression and human resource development. Other studies such as that of Abeysekera (2007) found that there are theoretical explanations or arguments in respect of impact of realistic job information, job analysis, work family balance, career development, compensation, supervisor support on turnover of employees. Further previous turnover studies out side Kenya have focused exclusively on job-related variables (e.g. role conflict, role ambiguity, role overload, work conditions, job tasks, and autonomy) and demographic variables (e.g. gender, age, tenure, and education) as determinants affecting employee turnover (Mohamad 2006).

Chartered Institute of Personnel Development (CIPD, 2010) found that skilled employees resign for many different reasons. Sometimes it is the attraction of a new job or the prospect of a period outside the workforce which 'pulls' them. On other occasions they are 'pushed' (due to dissatisfaction in their present jobs) to seek alternative employment. Another reason for voluntary turnover is a change in domestic circumstances outside the control of any employer.
 Since the year 2006, most mission hospitals have experienced high rates of nursing turnover and hence general instability among health workers due to job dissatisfaction. Skilled employee turnover may be caused by many factors. These factors represent important forces for shaping employee behavior and attitudes which in turn influences employee turnover especially nurses.

Measuring employee turnover
CIPD (2009) found that most organizations simply track their crude turnover rates on a
month by month or year by year basis. The formula is simply:

Total number of leavers over period x 100
Average total number employed over period
The total figure includes all leavers, even people who left involuntarily due to dismissal, redundancy or retirement. It also makes no distinction between functional (that is, beneficial) turnover and that which is dysfunctional.
Crude turnover figures are used by all of the major employee turnover surveys, including the annual CIPD and CBI surveys, as they are necessary for effective benchmarking purposes. However, it is also useful to calculate a separate figure for voluntary turnover and to consider some of the more complex employee turnover indices, which take account of characteristics such as seniority and experience.

2.3 Factors Causing Nursing Turnover

Buchan (2004) identified the organisational characteristics of hospitals that "serve as magnets for professional nurses: that is, they are able to attract and retain a staff of well-qualified nurses and are therefore consistently able to provide quality health care. These organizational characteristics included participatory and supportive management style, decentralised organisational structure, clinical career opportunities, planned orientation of staff, and an emphasis on in-service/continuing education.

Buchan (2004) further found that nurse turnover and vacancy rates in the magnet hospitals in the USA were significantly lower, while nurse job satisfaction was higher. According to Denosa (2001), the nursing shortage in South Africa is the result of multiple factors which include inadequate salaries and limited career progression in nursing, the availability of numerous career opportunities, the loss of visible nursing leadership, the public image of nursing that undervalues nursing and huge workload due to insufficient number of nurses. Work stress due to high work load was reported as among the most frequently cited reasons for leaving a nursing job in Taiwan (Yin et al, 2002).

2.3.1 Managerial factors influencing Nurse turnover

The following are the managerial factors influencing high nurse turnover:

i. Administrative support

Research suggests that employees are more likely to indicate intent to leave in the absence of adequate support from top management and co-workers. Regarding turnover, Mohamed (2006) specifically ascertained individuals with higher organizational support would be less likely to seek out job alternatives in other organizations. Tang (2003) indicated that nurses should be encouraged to participate in decision making regarding the formulation of policies and implementation of changes in a specific unit. Nurses should know where to access information concerning patient care and management of the unit. If nurses realize that they are involved in decision making processes, they might experience higher levels of job satisfaction and might stay longer in a specific organization.

In a study in Pakistan, Khowaja et al (2005), found that most nurses desired respect from their managers. Nurses were reportedly reprimanded in the presence of patients and relatives, this led to de-motivation, disappointment and lack of pride in their jobs. Another factor that adversely affected these Pakistani nurses' levels of job satisfaction was lack of support from managers. Reportedly managers did not listen to nurses' problems and or queries, kept nurses under pressure and just wanted nurses to get the job done. The doctor-nurse relationship also contributed to nurses' levels of dissatisfaction at work due to poor communication. Communication among healthcare team members is important for the delivery of coordinated quality of care to patients.

Klein et al (2000) postulated that employees who participated in the organizational support program (e.g., employee orientation training program) generally exhibited higher organizational commitment, supported the firm's mission, understood the firm's corporate culture, adopted its values and beliefs, and demonstrated a willingness to stay longer in the organization. In line with this thought, other studies have confirmed that emotional support (e.g., showing appreciation, taking an interest in employees' work, maintaining open communication, helping on personal problems) and instrumental support (e.g., providing needed resources, helping with work tasks) correlate positively with job satisfaction and organizational commitment.

ii. Supervision

The Unit manager should choose the team leader who is capable of effective supervision. However, there are natural leader who might emerge from the team and should not be ignored or refused opportunities to practice their leadership skills. Leadership style plays a major role in the retention of nurses. Clinical leaders need to be given time to think, listen and challenge daily activities in the unit in order to provide quality care to patients and satisfactory supervision to nurses (Long, 2005).

According to Yin et al (2001), nurse managers' position and power could influence the nurses' intentions to stay. Nurse Managers who encourage participation and who value contributions from staff promote decision making and influences coordination, could enhance the positive aspects of a working environment that could help to maintain stable nursing workforce by reducing turnover rates among nurses. According to Correll et al (1998) satisfaction is promoted where there is good supervision and when the employees perceive that supervision is helpful and supportive. Poor supervision could arise within the work place when the supervisor is insensitive and/or incompetent and this could lead to job dissatisfaction.

Magnet hospitals in the USA have been recognized for smaller nursing shortages, lower turnover rates, higher levels of jobs satisfaction, compared to other non-magnet acute care hospitals. This has been possible due to key organizational characteristics, such as emphasis on participatory management and systematic communication between Clinical nurses and managers. These strategies are consistent with those utilized by Capio Health care UK to retain nurses (Parker, 2005; Upenieks, 2005).

iii. Interpersonal Relations
Group cohesion is "a staff members' perceptions of integration into the organization and colleague environment" (Shader et al, 2001). The more the individual identifies with the group, the more the ability to conform to the group's norms and values. The group and the organization become part of the individual and withdrawal from the organization distorts the self-concept and seems like loosing part of the self. Interpersonal relations should be encouraged and if the environment is conducive, this could result in stronger intentions to stay in an organization. Individuals who strongly identify with their organizations enjoy their work and have higher levels of jobs satisfaction (Dick et al, 2004) than employees who fail to identify strongly with employment institution.

Positive perceptions of workplace relationships (supervisor and co-workers support) may help reduce work-related stress, increase job satisfaction and motivation, enhance commitment, improve performance, and reduce employees' turnover intentions (Lam et al, 2002). Firth et al. (2004) found that social supports from supervisors directly reduced the level of employees' burnout and indirectly reduced employees' intention to quit (turnover) via job satisfaction. Manning et al (2005) found that organizational climate that encouraged peer supports was able to enhance employees' positive job and organizational attitudes. Manning et al (2005) in their study on hospitality employees' perception of organizational climate reported that co-workers cooperation, friendliness, and warmth were found to significantly explain the variation in employees' turnover intentions.

2.3.2 Employee Promotion Practices/factors
The following factors of promotion practices are attributable to nurse turnover.

i. Career advancement
Limited opportunities for internal promotion and career advancement have been reported to impact employees' attitudes and behaviors (Price, 2001; Samad, 2006). 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 rewards exhibited higher job affection, displayed greater organizational commitment, and experienced lower turnover intentions (Aryee et al 2001; Khatri et al., 2001; Samad, 2006). Abeysekera (2007) 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. Sullivan et al (2005) found that today's nurses want to have challenging careers that offer opportunities for growth and advancement. Yin et al (2002) meta-analysis reported that the strongest organizational factors related to nurse turnover intentions were lack of internal promotion and career advancement opportunity.

Amstrong (2005) further adds 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).

Regular performance appraisals are very important as these allow the development of career paths which are sensitive to nurses' performance levels and abilities. The three main purposes of performance appraisals are salary awards, identification of training needs to enable the employees and organizations to achieve their objectives and to aid individuals' career development strategies (Ball 2004).

ii. Recognition

Abassi et al (2000) in their study have identified lack of recognition and lack of competitive compensation systems as some reasons for employee turnover in the organization. A study in Australia by Cowin (2002) indicated that nurses were dissatisfied with their payment as their additional nursing qualifications were not considered. Reportedly there was also no pay incentive for experience or for knowledge. Although some experienced nurses were happy about their salaries, improving nurses' salaries appeared to be a necessity to retain large numbers of nurses within the professionally active ranks in Australia.

In a study in Pakistan, Khowaja (2005) found that most participants indicated that there was a lack of appreciation for good performance by managers. If managers were supportive, respect and recognize nurse, achievements, this could boost their morale and lead to higher levels of job satisfaction and motivation. Employees are happy if the organization shows interest in them and if their contributions are recognized. Praising individuals could be done in different ways like a note of praise to them, giving a bonus or having a formal recognition program like "employee of the month and customer care awards" (Syptak et al, 2005).

Alexander (2003) found that the longer nurses worked on one particular unit, the greater the likelihood that they would be dissatisfied with their job and experience psychological distress. Nurses with more years of service in the organization tend to expect more autonomy recognition and opportunities. When these factors are absent, experienced nurses may feel upset and become dissatisfied. Special attention should be directed to the concerns of the old, more experienced nurses in order to maintain them within the professionally active ranks.

2.3.3 Staff Training and development practices/factors

Training and development, John et al (1994), explains that it is a systematic process of altering employees' behavior to further organization's goals. Development is the acquisition of knowledge and skills that may be used in the present or future. Training programs can affect work behavior in two ways. The most obvious is by directly improving the skills necessary for the employee to successfully complete his or her job. An increase in ability improves the employee's potential to perform at higher level. Of course, whether that potential becomes realized is largely an issue of motivation.

A second benefit from training is that it increases an employee's self efficacy- a person's expectation that he or she can successfully execute the behaviors required to produce an outcome. For employees, those behaviors work tasks and the outcome is effective job performance. Employees with high self-efficacy have strong expectations about their abilities to perform successfully in new situations. They are confident and expect to be successful. Training, then, is a means to positively affect self-efficacy.

For nurses to be able to take charge of institutions in their work environment, ongoing training and development should be available (Strachota et al, 2003). Nurses expect their work environments to supply them with adequate opportunities and equipment to provide patient care of a high standard. Dissatisfactions at work could increase nurses' turnover rates (Mrrayan 2005). However, Dunn et al (2005) reported from the study in Australia that there was no reported relationship between nurses' levels of satisfaction and levels of education.

i. Induction and Orientation
Orientation is the process of acquainting a new employee with the work environment so that she or he can relate quickly and effectively to new surroundings, (Basavanthappa, 2000). The purpose of orientation is to make the new employee feel wanted and needed by co-workers and Supervisors and to convince the employee that her or his presence is important to achievement of health goals. Sullivan et al (2005) further argues that a well planned orientation reduces the anxiety that new employees feel when beginning the job while at the same time socializing the employee into the work place contributes to unit effectiveness by reducing dissatisfaction, absenteeism, and turnover.

The preliminary aspect of orientation is indoctrination or induction training. Induction training includes introduction to rules, regulations, policies and procedures that apply to all agency

employees. Induction begins with an explanation of the agency's history, purpose, and structure and is followed by information bout conditions of employment, workers' identification, working hours, holiday time, vacation allowance, sick time, position classification, performance standards, performance evaluation, labor contracts, grievance procedure, pay days, parking facilities, eating facilities, health services, laundry services, and educational opportunities (Basavanthappa, 2000). Sullivan et al (2005) found that new employees have unrealistically high expectations about the amount of challenge and responsibility they will find in their first job. According to Nyambura (2005), poor orientation contributes to labor turnover as well as "reality shock" when employee find that the job they expected is not what they find, they feel discouraged, disillusioned and quit.

ii. Continuing Education
Continuing education is any extension of opportunity for reading, study and training to any person and adult following their completion of full time school or college program (Basavanthappa, 2000). Continuing education in nursing consists of planned learning experiences beyond a basic nursing educational program. These experiences are designed to promote the development of knowledge, skills and attitudes for the enhancement of nursing practice, thus improving health care to the public (Basavanthappa, 2000). A 1992 Southport Institute study of workplace education concluded that the longer an organization had an educational program in place for its personnel, the more likely it was to experience lower turnover, improved morale, and reduced hostility among its people (Umiker, 1994).

Amstrong (2005) claims that resignations can increase if people are not trained properly or feel that demands are being made upon them which they cannot reasonably expected to fulfil without proper training. Sullivan et al (2005) found that a number of studies had shown that the greater an employee's satisfaction level or level of organizational commitment, the lower the probability of the individual's quitting.

Buchan (2004) identified the organisational characteristics of hospitals that "serve as magnets for professional nurses: that is, they are able to attract and retain a staff of well-qualified nurses and are therefore consistently able to provide quality health care. These organizational characteristics included participatory and supportive management style, decentralised organisational structure, clinical career opportunities, planned orientation of staff, and an emphasis on in-service/continuing education. Buchan (2004) further found that nurse turnover and vacancy rates in the magnet hospitals were significantly lower, while nurse job satisfaction was higher. Moreover, the level of employee training through a realistic job preview, job shadowing opportunities, and core standards training have instilled loyalty and a positive attitude among resort club employees (LaLopa, 1997).

The objective of many staff development programs can be expressed in terms of organizational impact, such as reduced turnover, fewer grievances, reduced absenteeism, improved quality of care, and fewer accidents (Sullivan et al, 2005). According to Nyambura (2005), poor

orientation contributes to labor turnover as well as "reality shock" when employee find that the job they expected is not what they find, they get disillusioned and quit. In today's job environment- with cutbacks, increasingly wider spans of control, and reduced promotion opportunities- employees will increasingly confront the reality of career plateauing. Out of frustration, employees may look for other jobs. Organizations that have well designed career programs will have employees with more realistic expectations and career tracking systems that will lessen the chance that good employees will leave because of inadequate training opportunities.

2.3.4 Reward or compensation Practices

Compensation, according to Milkovitch et al (2005), refers to "all forms of financial returns and tangible services and benefits employees receive as part of an employment relationship". The phrase "financial returns "refers to an individual's base salary, as well as short- and long-term incentives. "Tangible services and benefits" are such things as insurance, paid vacation and sick days, pension plans, and employee discounts. Some of the reward factors that influence turnover are described below.

i. Salary and allowances

Compensation expert Richard et al (2003) notes, that Pay and benefits are extremely important to both new applicants and existing employees. The compensation received from work is a major reason that most people seek employment. Compensation not only provides a means of sustenance and allows people to satisfy their materialistic and recreational needs, it also serves their ego or self-esteem needs. Consequently, Taylor (2010) found that if a firm's compensation system is viewed as inadequate, top applicants may reject that company's employment offers, and current employees may choose to leave the organization leading to turnover. If employees perceive that their efforts will be accurately appraised, and if they further perceive that the rewards they value are closely linked to their evaluations, the organization will have optimized the motivational properties from its evaluation and reward procedures and policies. Rewards are likely to lead to high employee performance and satisfaction when they are: perceived as being equitable by the employees, tied to performance, and to the needs of the individual.

Pay dissatisfaction has been found to significantly predict absenteeism and turnover (Mohamad, 2006). His research has shown that employees' perception of HRM practices on inequitable compensation level can predict organizational turnover. Workers with higher paying jobs are more likely to stay than those with lower paying jobs. Hinkin et al (2000) reported that one of the main reasons cited by hotel employees for leaving their jobs was low and inequitable pay.

The amount of pay is less important than its perceived fairness or equity. Because equity is such an important concern, individuals responsible for developing a firm's compensation system need to understand how perceptions of equity are formed.

Equity theory, formulated by Stacy Adams (1965), attempts to provide such an understanding. The theory states that people form equity beliefs based on two factors: inputs and outcomes. Inputs (I) refer to the perceptions that people have concerning what they contribute to the job (e.g., skill and effort). Outcomes (O) refer to the perceptions that people have regarding the returns they get (e.g., pay) for the work they perform. People judge the equity of their pay by comparing their outcome-to-input ratio (O/I) with another person's ratio. This comparison person is referred to as one's "referent other." People feel equity when the O/I ratios of the individual and his or her referent other are perceived as being equal. A feeling of inequity occurs when the two ratios are perceived as being unequal. For example, inequity occurs if a person feels that he or she contributes the same input as a referent other, but earns a lower salary. This feeling of inequity may lead to employee turnover.

A person's referent other could be any one of several people. People may compare themselves to others: doing the same job within the same organization, working in the same organization, but performing different jobs, and doing the same job in other organizations. While the mechanism for choosing a referent other is largely unknown, one study found that people do not limit their comparisons to just one person; they have several referent others. Thus, people make several comparisons when they assess the fairness of their pay; perceived fairness is achieved only when all comparisons are viewed as equitable. When employees' O/I ratios are less than that of their referent others, they feel they are being underpaid; when greater, they feel they are being overpaid. According to equity theory, both conditions produce feelings of tension that employees will attempt to reduce in one of the following ways: Decrease inputs by reducing effort or performance, Attempt to increase outcomes by seeking a raise in salary, Distort perceptions of inputs and/or outcomes by convincing themselves that their O/I ratio already is equal to that of their referent other.

Attempt to change the inputs and/or outcomes of their referent other(s). For example, they may try to convince their referent other(s) to increase inputs such as work harder for their pay. Choose a new referent other whose O/I ratio already is equal to their own. This response may be manifested by a variety of behaviors, such as absenteeism, tardiness, excessive work-breaks, or quitting (turnover). Research findings, for example, have linked underpayment to increases in absenteeism and turnover and decreases in the amount of effort exerted on the job. These linkages are especially strong among individuals earning low salaries.

Contrary to equity theory's predictions, Taylor (2010) found that these responses occur only when employees believe they are underpaid. Overpaid individuals do not respond because they feel little, if any tension, and thus have no need to reduce it. When perceptions of inequity are based on external comparisons, people are more likely to quit their jobs (turnover). For instance, a nurse working for Hospital A may move to Hospital B if the latter pays a higher salary. When based on internal comparisons, people are more likely to remain at work, but reduce their inputs (e.g., become less willing to help others with problems, meet deadlines, and/or take initiative).

From the previous discussion, one may conclude that employees will believe their pay is equitable when they perceive that it: Is fair relative to the pay received by coworkers in the same organization (internal consistency), Is fair relative to the pay received by workers in other organizations who hold similar positions (external competitiveness), Fairly reflects their input to the organization (employee contributions).

A study in Australia by Cowin (2002) indicated that nurses were dissatisfied with their payments as their additional qualifications were not considered. Netswera et al (2005) found that good salary does not imply staff retention but correlates with other conditions of service. Therefore, this does not necessarily imply that institutions with good salaries and attractive benefits have low staff turnover rates. A study in Taiwan by Yin et al (2002) indicated that salary and fringe benefits were the strongest factors influencing nursing turnover. Mrrayan (2005) indicated that salaries which do not meet daily requirements, would contribute to nurse dissatisfaction and turnover rates. Employees will stay in an organization as long as their self interests are served. Good salaries can offer such motives but cannot motivate an employee to stay with an institution by itself.

In studies related to compensation, Park et al (1994) and Trevor, Barry et al (1997) found that salary growth had a pronounced effect on turnover. Particularly, salary growth effects on turnover were greatest for high performers, that is, high salary growth significantly reduced turnover for high performing employees.

ii. Achievement
Samad (2006) on his study on Malaysian government doctors found that recognition for achievement and career advancement were negatively and significantly related to turnover intentions. In a study in England, Cortedge (2001) found that professional development was important among nurses working in intensive care units. It was suggested that without updates and education, there would be less knowledge and less motivation to continue working in these units. However being more educated did not promote nurses, motivation because qualifications were only considered for promotions if and when there were vacant positions. This situation led to staying in one post for long time, causing some dissatisfaction among nurses.

Rambur et al (2005) indicated that lack of recognition for different skills and competency levels in the work environment, neither by compensation nor in role differentiation was a disincentive for nurses to improve their educational levels. In a study in Kuwait nurses with diplomas were more satisfied than nurses with degrees (Shah et al, 2004). Campel et al (2004) found that participants needed more recognition to satisfy their needs for reputation, prestige and respect from others, which could lead to increased self esteem.

2.4 How To Control Nurse Turnover

The Little Fish Guide to Niche Dominance (January, 20th 2010), has provided some of the best human resource practices that help in the creation of a highly satisfied and motivated workforce as follows:

2.4.1 Work environment:
A safe and happy workplace makes the employees feel good about being there. Each one is given importance and provided the security that gives them the motivation and incentive to stay. Positive perceptions of workplace relationships (supervisor and co-workers support) may help reduce work-related stress, increase job satisfaction and motivation, enhance commitment, improve performance, and reduce employees' turnover intentions (Lum et al, 2002).

2.4.2 Open Management:
Employees don't like the feeling of being in the dark about what is happening in the company. They feel motivated and develop enthusiasm only when the management opens up to them and discusses the company policies, sales clients, contracts, goals and objectives. This encourages participative management. Asking for ideas on how to improve will get their creative juices flowing. Being open about everything related to the company will help in building trust and motivating the employees.

2.4.3 Performance incentives:
Every good performance is appreciated in the form of a pat on the back, bonuses or giving some other compensation for a job well done. Organizations that struggle to keep up the attrition rate are mostly those that think employees are "just" doing their job. Even if it is the employee's job, completion in an appreciable manner calls for an incentive, and this goes a long way in boosting the staff morale and reduced turnover. These incentives can be implemented at the individual as well as the team level and it has been seen that this works wonders in getting the best out of the employees and reduces turnover intentions. But it is important to keep in mind that these bonuses should not be given without a reason, unless it is a commitment for annual bonuses or some such thing.

2.4.4 Performance Feedback:
This is one the methods that is being followed by many organizations. Feedback is not only taken from the boss, but also from other seniors and subordinates. Previously, appreciation was only sought from the immediate boss or the management, but now organizations understand the importance of collecting performance feedback from several quarters. The opinion of everyone matters, especially for someone who is in a leadership role at any level. Each person in the team is responsible for giving constructive feedback. This kind of system helps in identifying people who can perform well as leaders at higher levels in the organization. Even the senior level managers can use this system to their advantage, as a tool to improve themselves.

2.4.5 Sharing of Knowledge:

Knowledge sharing is a wonderful strategy that helps in the betterment of the employees and their work. Keep all the knowledgeable information in central databases that can be accessed by each and every employee. For example, if an employee is sent on some training, the knowledge that is acquired by that employee can be stored in these databases for others to learn from it. Even innovative ideas that the management deems fit for employees to see, can be stored here for all to see.

2.5 Critical Review Of Issues

Employee turnover provide a graphic illustration of turbulence within an organization. Organizations have to cope with employee turnover to some extent because you cannot shield your people from attractive opportunities and aggressive recruiters (Apelli, 2000)- market determining movement of employees and not company. The mission hospitals may need to refocus their energy/resources on human resource practices and policies that may influence retention. Nurse turnover may be good to some mission hospitals by bringing in new skills/blond, reducing surplus nurses and or removal of unwanted/unproductive nurses. The negative results of nurse turnover includes increased costs of replacements, standard health care service is affected, better performers are lost, corporate image spoilt, and training costs increase.

Nurse satisfaction is an important issue of workforce numbers in organizations because lack of it (satisfaction) leads to high rates of turnover increased replacement costs and reduced performance. Turnover is cyclic and it can be involuntary or voluntary. Voluntary turnover is an issue that is common across many countries including mission hospitals in Kenya and yet it has not been addressed adequately.

Various factors causing nursing turnover surround the job or they factors that relate direct to the job. Human resources for health consume about 60-65% of the organization's income and therefore it is important to review and develop strategies for retention.

2.6 Summary Of Gaps To Be Filled By The Study

Various studies have been done on nurse/employee turnover especially in developed countries. From the literature review above, limited studies have been done in Kenya relating to factors causing nursing turnover and more so none has been done in PCEA Chogoria hospital. Steps to stop nurse turnover may be impossible because of attractions by greener jobs especially in the government health facilities and beyond. The gaps to be filled were investigating the factors causing high nursing turnover in mission hospitals in Kenya, a case for Chogoria Hospital.
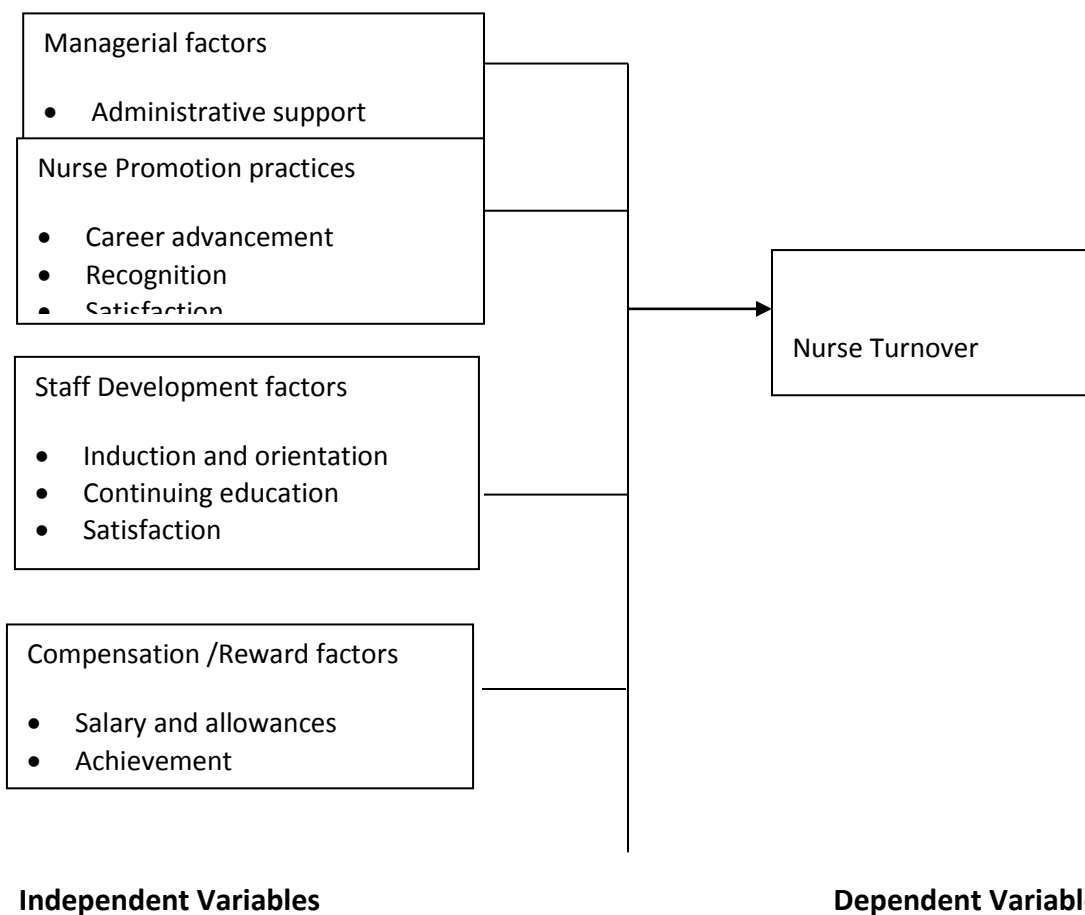
Many factors causing nursing turnover have been linked to such factors as limited career advancement, low salaries, lack of management support, work overload /stress, undervaluing of nurses' services, limited numbers of nurses in the market and availability of opportunities

locally and beyond. While these studies have been concentrated in foreign countries it is worth to test some of these variables in mission hospitals in Kenya through this research.

2.7 Conceptual Framework

Theoretical/ conceptual framework is a collection of interrelated ideas based on theories. It is a reasoned out set of prepositions which are derived from and supported by data or evidence (Kombo, 2006). It is a discussion of related theories attempting to predict a phenomenon. 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 dependant variable.

Figure 2.1: Diagrammatical representation of conceptual Framework.

Managerial factors

- Administrative support

Nurse Promotion practices

- Career advancement
- Recognition
- Satisfaction

Staff Development factors

- Induction and orientation
- Continuing education
- Satisfaction

Compensation /Reward factors

- Salary and allowances
- Achievement

Nurse Turnover

Independent Variables   **Dependent Variable**

Source: Researcher (2011)
If management support practices are fair there will be reduced nurse turnover and vice versa.

If promotion practices are fair and satisfactory, there will be reduced nurse turnover and vice versa.

If staff development is satisfactory, there will be reduced nurse turnover and vice versa.

If compensation/reward system is fair and equitable, there will be reduced nurse turnover and vice versa.

3.0 RESEARCH DESIGN AND METHODOLOGY

3.1 Introduction

This chapter discussed the study design and methodology. Specifically the chapter focused on research design, study population, sampling technique, data collection procedures and instruments, data analysis methods, validity and reliability of the research.

3.2 Research Design

The research design for this study was descriptive case study. A descriptive case study seeks to describe a unit in detail in context and holistically (Kombo & Tromp 2006). The descriptive case study approach has a rich history of success in applied research and evaluation and is particularly powerful approach where in depth and richness of evaluation information is needed (Lasenon & Funch 1995). This study was meant to investigate the factors causing high nurse turnover in mission hospitals in Kenya- a case for PCEA Chogoria Hospital. Cooper et al (2000) argues that descriptive study is concerned with finding out what, where and how of a phenomenon. Case study was appropriate as it would bring deeper insights and better understanding of the phenomenon.

3.3 Target Population

A population is a group of individuals, objects or items from which samples are taken for measurement (Kombo & Tromp 2006). It is a complete set of individuals, cases or objects with some common observable characteristics (Mugenda & Mugenda 2003). In this study, the study population consisted of 147 nurses working in the hospital's various Units/ departments. The population thus consisted of 54 and 93 registered nurses and enrolled nurses respectively, who work in the Main hospital (wards and outpatient clinics), Community health (projects and dispensaries) and College of nursing (nurse tutors).

3.4 Sampling Technique And Sample Size

Sampling is the process of selecting a number of individuals or objects from a population such that the selected group contains elements representative of the Characteristics found in the entire group (Kombo and Tromp 2006). This study utilized stratified sampling technique. This involved dividing the population into homogenous subgroups (called strata) and then taking a

simple random sample in each subgroup. In this study the strata consisted of different cadres of nurses in the hospital, that is, registered and enrolled nurses. In each cadre (stratum) a random sample was selected in such a way that the subgroups in the population were represented in the sample in proportion to their number in population. The sample population consisted of 44 (30% of target population) respondents drawn from different nurse cadres within the hospital. According to Kothari and Kothari (2003), a sample size of 30% of the population is a representative. Mugenda and Mugenda (2003) further recommends that a sample size of more than 30 respondents or at least 10% of the target population is usually appropriate for social sciences.

3.5 Data Collection instruments and Procedure

Data collection instruments included Review and analysis of records (secondary data) and Questionnaires (primary data). In this study, questionnaires were developed on the four aims/objectives of the research with open and closed ended questions or opinion statements that were administered. The questions were designed in a five point Likert scale to measure the influence of identified factors on nurse turnover. The questionnaires that consisted of 30 questions were hand-delivered to sampled population and collected later from the respondents since all of them are within the hospital premises. Before distributing the final questionnaire, the researcher checked the questionnaire for validity and reliability with a few respondents to find out whether the questionnaire was understood or needed improvements etc.

3.6 Data Analysis And Presentation

This refers to examination of what has been collected in a survey and making deductions and interference. It involves scrutinizing the acquired information and making interference (Mugenda & Mugenda, 2003). Descriptive Statistical analysis enabled the researcher reduce, summarize, organize and interpret the numeric information (Polit & Hungler, 1999). Data analysis was done according to specific groups of items of the questionnaire. The researcher developed a system of coding the information in interpreting the results; the frequency with which an issue appeared was interpreted as a measure of importance or emphasis. On completion of data collection the researcher edited, sorted, coded and tabulated data. Editing involved correcting errors, while sorting involved putting data in likeness by tallying. The researcher then carried out tabulation of data so that comparison was made. Data was analyzed using descriptive statistic whereby qualitative data was presented theoretically while quantitative data was presented using tables and figures. Microsoft Excel was used to analyze the data and generate tables, graphs and figures portraying these results.

3.7 Ethical Consideration

Mugenda (2003) defines ethics as a branch of philosophy that deals with ones conduct and serves as guide to one's behavior. The researcher, therefore, ensured that all information

sources were acknowledged; the researcher obtained informed consent from the respondents and ensured that all subjects participated voluntarily; confidentiality of the respondents and the information given was maintained. The researcher was open and honest and in no way did he exploit the respondents.

4.0 DATA ANALYSIS, PRESENTATION AND INTERPRENTATION

4.1 Introduction

This chapter discusses data presentation, analysis and interpretation of findings from questionnaires completed by nurses employed by the hospital at the time of the study between July 2011 and August 2011. The questionnaires were given to nurse managers who assisted to distribute to nurses under them to fill and also to collect and deliver them to the researcher. The purpose of this study was to investigate the factors causing high nurse turnover in mission hospitals in Kenya- a case for Chogoria hospital. Answers to research questions are presented in this chapter.

4.2 Presentation Of Findings According To Research Questions

A total of 44 questionnaires were distributed/ administered while only 35 were returned representing 79.5% of response rate. The total number of questionnaires received, coded and used in the analysis was therefore 35. This 35 (n=35) questionnaires were analyzed but (n) may differ in the discussion of each question as some respondents did not answer all questions. Presentation of research findings was based on research questions/ objectives grouped into five sections on the questionnaire. Section A comprised of General information, section B comprised of data on the managerial factors that cause nurse turnover; section C comprised of data on nurse promotion practices on turnover; section D comprised of data on staff training and development practices and section E comprised of data on compensation /reward practices on nurse turnover.

4.2.1 Section A: General Information
Questions 1-6 attempted to obtain general data from the participants. The participating nurses had to respond in the appropriate boxes provided next to each question. The responses showed that 35 nurses (25.7%) fell within the age group of 25-34 years of age. Respondents aged between 35-44 years were 31.4% while 42.9% fell within the age group of 45 or more years. This correlates well with Matrunola (1996) who found that nurses in this older age range had fewer intentions of leaving as they had survived numerous stresses and had more years of service than younger nurses. There were no respondents in the age bracket of less than 24 years.

Highest nurse education/qualification obtained by respondents

Of the 35 nurses who responded to this question, 45.7% (n=16) had achieved Diploma, 45.7% (n=16) had certificate and 8.6% had degree qualifications. Considering all respondents who had diplomas and certificate qualifications, only 8.6% had acquired academic qualifications beyond basic nursing qualifications. Apparently Chogoria hospital is not provided with adequate education opportunities according to the results of most respondents who participated in this research. The fact that 8.6% nurses had degree qualifications might indicate that nurses in Chogoria hospital could be encouraged to improve their academic qualifications.

Current nurse category

Of the 35 respondents 17.1% were senior nurses, 65.7% were occupying middle level and 17.1% were junior nurses. This large percentage of respondents clustered at the middle level of the nursing hierarchy could also explain why majority (62.9%) of the respondents earned net income of between Ksh 15,000-30,000 per month.

Years of experience in nursing with present employer

The results indicates that of the 35 respondents 22.9% had worked with the current employer for less than three years, 8.6% were three to less than five years in the organization, 8.6% were five years to less than 10 years, 11.4% were ten years to less than 15years, and 48.6% had 15 or more years of experience with Chogoria hospital. The 48.6% of the nurses with over 15years experience corresponds well with those of 45 or more years of age found in the HR office in July 2011. It could be interpreted that most of the nurses had more years of experience with the present employer.

Current level of monthly net incomes after taxation

From the findings, monthly incomes reflected two categories of net incomes per month received by nurses at PCEA Chogoria hospital. Of the 35 respondents who answered this question 37.1% earn less than Ksh 15,000 and 62.9% earn Ksh 15,000 to less than Ksh 30,000. This corresponds to the category of nurses whereby they are grouped together in the middle level. There were no respondents earning Ksh 30,000 to less than Ksh 45,000 or Ksh 45,000 or more.

4.2.2 Section B: Perceived Managerial Factors That Cause High Nurse Turnover

Appointment procedure of the hospital is fair

Out of 35 respondents who answered question 7 shown on Table 4.6 above, 40.0% disagreed and 5.7% strongly disagreed that appointment procedure of the hospital is fair, where as 42.9% agreed and 2.9% strongly agreed while 8.6% were undecided.

Administrative support is adequate

Out of 34 respondents who answered this question (item 8), 41.8% nurses disagreed and 26.5% strongly disagreed that administrative support is adequate where as 4.7% and 2.9% nurses agreed and strongly agreed as 11.8% remained undecided. One respondent did not answer this

question. This result is in line with a study done by Mohamed (2006) which ascertained that individuals with higher organizational support would be less likely to seek out job alternatives in other organizations. Khowaja (2005) further found that Parkstani nurses' level of job satisfaction was adversely affected by lack of support from managers.

Supervision is effective
Out of 35 respondents who answered question 9, 31.4% and 25.7% strongly disagreed and disagreed respectively that supervision is effective where as 34.3% agreed and 2.9% strongly agreed while 5.7% were undecided. Because the majority of the respondents (57.1%) disagreed and strongly disagreed that supervision is effective, it implies that most respondents reportedly perceived their supervisors as not rendering effective supervision to their subordinates. Only 37.2% of respondents indicated that supervision was effective or supportive. According to Correll et al (1998) satisfaction is promoted where there is good supervision and when the employees perceive that supervision is helpful and supportive.

Interpersonal relations is excellent
On item 10, 45.7% and 17.1% strongly disagreed and disagreed respectively that interpersonal relations was excellent at the work place, while 25.7% of the respondents agreed and 11.1% were undecided. The majority of the respondents (62.8%) disagreed that interpersonal relation was excellent, implying that most respondents perceived interpersonal relations as being poor. According to Booyen (1998) lack of friendliness and teamwork among employees could contribute to job dissatisfaction. Manning et al (2005) in their study on hospitality employees' perception of organizational climate reported that co-workers cooperation, friendliness, and warmth were found to significantly explain the variation in employees' turnover intentions.

4.2.3 Section C: Respondents' Perceived Promotion Opportunities at the Work Place
From the results it appears that job promotions and levels of experience were not considered as potential factors influencing promotion at the work place. 42.9% and 40% respondents strongly disagreed and disagreed respectively that promotions were regular. Only 8.6% remained undecided where as 5.7% and 2.9% agreed and strongly agreed respectively that promotions were regular. According to Louw (1997) job satisfaction is promoted when an individual invests energy and effort into his/her work. Opportunities for promotions make employees experience a sense of achievement and satisfaction enabling them to move from one level to another, improving their status and remuneration within the same institution or organization.

On item 12, only 31.4% and 31.4% of the respondents respectively strongly disagreed and disagreed that their career path in the hospital is clearly defined. According to these findings, a factor that might influence nurses' turnover rates at the mission hospital is their perceptions of their chances of advancing, or of being promoted at the current employer. Samad (2006) found in his study on Malaysian government doctors that recognition for achievement and career advancement were negatively and significantly related to turnover intentions. If nurses

perceive to be in dead-end jobs (where no clear career advancement) they will develop intent to leave (Samad, 2006). Those undecided were 17.1% while 11.4% and 8.6% agreed and strongly agreed respectively. By checking and correlating those undecided with their level of experience with current employer, it was found that they had worked with current employer for less than three years. This could imply that respondents are ignorant or they had not made any effort to familiarize themselves with the policy of the hospital regarding career development.

It further emerged that only 28.6% and 17.1% of the respondents respectively agreed and strongly agreed that nurses could leave their work place because qualifications are not considered for promotions where as 14.3% and 34.3% strongly disagreed and disagreed as 5.7% remained undecided. According to findings this factor was rated insignificant in influencing nursing turnover. Moreover, as many as 48.6% and 20.0% of the respondents disagreed and strongly disagreed that experience is often the only consideration for any promotion at the mission hospital. Only 14.4% and 11.4% of the respondents agreed and strongly agreed respectively as 5.7% remained undecided. Combining those who disagreed and strongly disagreed, 68.6% of the respondents did not perceive experience as the only consideration for promotion.

On rating their level of satisfaction with the current employer based on promotion practices, 43.7% and 34.3% disagreed and strongly disagreed that they were satisfied with hospital's promotion practices while 5.7% strongly agreed as the same number or percentage remained undecided. Yin and Yang's (2002) meta-analysis reported that the strongest organizational factors related to nurse turnover intentions were lack of internal promotion and career advancement opportunity.

4.2.4 Section D: Respondents Opinion about Staff Development Practices on Nurse Turnover

Induction and Orientation program

As many as 26.5% and 32.3% of the respondents strongly disagreed and disagreed respectively that the hospital provides adequate induction and orientation, while 32.3% agreed as 8.8% remained undecided. Out of 34 respondents only one did not answer this question while none responded to strongly agree. Combining the respondents who strongly disagreed and disagreed, 58.8% of the respondents imply that orientation is inadequate and may influence their intention to leave. Sullivan et al (2005) further argues that a well planned orientation reduces the anxiety that new employees feel when beginning the job while at the same time socializing the employee into the work place which contributes to unit effectiveness by reducing dissatisfaction, absenteeism, and turnover.

Opportunities for continuing medical education/training are adequate

Of the 33 respondents who answered this question, 45.5% agreed that provision of continuous medical education is adequate while 30.3% and 15.2% disagreed and strongly disagreed respectively. A few (9.1%) were undecided while two respondents did not answer this question. The study found out that nurses would leave their work places if there were too few

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opportunities to attend training sessions and continuous professional development to meet National Council of Nurses of Kenya (NCK) requirements. Combining those who strongly disagreed and disagreed, 45.2% of the respondents disagreed that there were enough opportunities for ongoing learning at their places of work. This could imply that apart from mandatory requirement of medical education set by the Nursing Council of Kenya, the mission hospital does not offer extra and enough continuous medical education. The results concurs with Mureithii et al (2007) who found that there was a shortage of health workers in Faith Based Health facilities due to limited training opportunities.

Respondents' opinion if the hospital has adequate budget for staff development
Thirty five respondents answered this question. As many as 57.1% and 20.0% of the respondents strongly disagreed and agreed respectively that the hospital has adequate budget for staff development. Only 14.3% of the respondents agreed; 8.5% remained undecided while none responded to strongly agreed.
Respondents were asked to rate if they have never attended any staff development updates/seminars. In response, 28.6% and 42.9% of the thirty five respondents strongly disagreed and disagreed while 22.9% and 2.9% agreed and strongly agreed that they have never attended any staff development seminar/update. Only 2.9% of the respondents were undecided on this question.

Respondents' perception about training program on nurse intention to quit
As many as 34.3% and 14.3% of the respondents agreed and strongly agreed that inadequate training opportunities/programs in the hospital may influence their intention to leave while 25.7% and 20.0% of the respondents strongly disagreed and disagreed respectively that inadequate training programs/opportunities has no influence on their intention to quit.

4.2.5 Section E: Respondents' Opinion on Recognition/Reward Practices on Nurse Turnover
A total of 43.8% and 6.3% of the respondents agreed and strongly agreed that if they do a good work, they count on being rewarded or recognized while 31.5% and 12.5% strongly disagreed and disagreed. Only 6.3% of the respondents were undecided as three out of 35 respondents did not answer this question. A study in Pkistan by Khowaja et al (2005) found that most participants indicated that there was lack of appreciation for good performance by managers. If managers are supportive, respect and recognize nurses' achievements, this could boost their morale and lead to higher levels of job satisfaction and motivation. This is in line with Strachota et al (2003) who found that nurses valued recognition.
Results further indicated that as many as 68.6% and 22.9% of the respondents strongly disagreed and disagreed respectively that the hospital applies equal pay practices. The results also indicated that 5.7% were undecided, 2.9% agreed and none strongly agreed that the hospital applies equal pay practices. According to equity theory by Adams (1965) found that unequal pay among employees may be manifested by a variety of behaviors, such as absenteeism, tardiness, excessive work-breaks, or quitting (turnover). Other research findings, for example, have linked underpayment to increases in absenteeism and turnover and

decreases in the amount of effort exerted on the job. These linkages are especially strong among individuals earning low salaries.

Contrary to equity theory's predictions, Taylor (2010) found that these responses occur only when employees believe they are underpaid. Overpaid individuals do not respond because they feel little, if any tension, and thus have no need to reduce it. When perceptions of inequity are based on external comparisons, people are more likely to quit their jobs (turnover). For instance, a nurse working for Hospital A may move to Hospital B if the latter pays a higher salary. Based on the results of this research, it is evident that respondents may leave their current employer due to unequal pay practices.

Forty percent of the respondents agreed and 8.6% strongly agreed that additional qualifications are not recognized while 28.6% and 14.3% disagreed and strongly disagreed that additional qualification are not recognized. This reveals a weak relationship with a study done in Australia by Cowin (2002) which found that nurses were dissatisfied with their payments as their additional qualifications were not considered. These responses should be interpreted against the information portrayed in Table 4.3 above indicating that only minority of nurses had academic qualifications in addition to their nursing qualifications.

As many as 35.3% of the respondents strongly disagreed and 32.4% disagreed while 23.5% and 5.9% agreed and strongly agreed that retirement benefit is satisfactory. Further, as many as 51.4% and 22.9% strongly disagreed and disagreed respectively, 11.4% remained undecided while 8.6% and 5.7% agreed and strongly agreed that they had clear understanding of hospital pay policy.

On question 28, the respondents were asked to indicate their level of satisfaction in relation to the four elements (main factors) and their results are shown on Table 4.9.

Level of satisfaction by respondents

From the findings the majority of the respondents (52%) were dissatisfied, 23% were a little satisfied, 16% were moderately satisfied while 9% marked that it doesn't matter as none marked very satisfied. These findings could imply that the respondents could show intentions of turnover or leaving the institution because their level of dissatisfaction is high.

When asked to list any other factors that could influence them leave the hospital if given a chance, the following was stated:
- Poor salaries and allowances which are not comparable with one's qualifications or payments in other similar institutions.
- Lack of recognition by the management.
- Poor support from the in-charges and other staff
- Unclear scheme of service for nurses
- Limited promotion opportunities and if any, no consideration of years of experience.
- Limited training opportunities/sponsorship for staff development
- Very little retirement benefits

The respondents were asked on what the hospital can do to retain them.

The following were suggested by the 29 (83.9%) respondents while 6 (17.1%) respondents did not answer this question.

- Improve salaries and allowances (terms of service) commensurate with qualifications and experience.
- Review or improve scheme of service for nurses for clear career advancement.
- Improve retirement benefits (pension scheme) to comparable level with the Kenya government.
- Management should support and recognize nurses.
- Create more training opportunities such as seminars/updates and workshops.
- Sponsor nurses for further training and reduce long bonding period.
- Award recognition to those to who train or develop their skills.

5.0 CONCLUSIONS AND RECOMMENDATIONS

5.1 Conclusions

The conclusions are based on the analysis of the data obtained from 30 structured questionnaires completed by nurses working at Chogoria hospital in Kenya. The conclusions will be presented according to the objectives guiding the study.

Only a small number of nurses are promoted to senior level while majority (65.7%) are at middle level indicating rigid or stagnant career advancement for nurses. The nurses may perceive their jobs to be dead-end jobs and this may influence nurse turnover and turnover intentions. The findings from the research revealed that employee pay is irregular, retirement scheme poor, and salaries and allowances are unsatisfactory. These reported dissatisfactions with the respondents' salaries and allowances; unequal pay and poor benefits scheme, appear to be similar with dissatisfactions expressed concerning advancement opportunities and perceptions of being in dead-end jobs as well as their perceptions that qualifications were not being considered for promotions.

The researcher found that the majority of the respondents were females comprising of 82.9% and most of them had more years of experience with the present employer. About 42.9% of respondents were aged 45 years or more. Although this number appears to be less than 55%, of the respondents, it is necessary to recognize that this cadre of staff should be encouraged to stay in the mission hospital. This is the group that comprises of the nurses who are almost retiring and have established themselves and hence no intention to leave. Matrunola (1996) found that nurses in this older age range had fewer intentions of leaving as they had survived numerous stresses and had more years of service than younger nurses.

The managerial factors (administrative support, supervision and interpersonal relations) had a significant relationship with turnover. The respondents argued that management support and supervision was not adequate and effective. Interpersonal relations were not excellent. Similar argument was emphasized when respondents stated (in an open question) that poor support from the in-charges and management could influence their turnover.

A lack of advancement opportunities at the work places was also considered to be influencing turnover rates. In conclusion- a lack of advancement opportunities at the work place reduced satisfaction among nurses and hence influenced turnover rates. Seventy seven percent of the respondents revealed that the mission hospital did not have adequate budget for nurse training and development. Seventy two percent also disagreed that they have never attended any staff development seminar/updates. This implies that despite the fact that nurses have not been supported to develop because of inadequate budget, they have been offered adequate short continuous medical education such as updates. The relationship, however, between inadequate training programs and intention to quit was insignificant.

5.2 Recommendations

Recommendations will be provided for reducing nursing turnover and for future research. It is necessary that organizations should develop strategies to reduce nursing turnover in the work place and management factors, promotion practices, staff development practices and reward practices should be taken into account.

- Management at mission hospitals should recognize and support nurses in order to improve satisfaction/retention.
- Mission hospitals should consider improving terms of service (salaries and allowances) to be comparable with other similar institutions or government. Such issues like performance appraisals, advancement opportunities, recognition, responsibility and achievement, in order to prevent feelings of being in dead-end jobs influencing nurses' turnover.
- The mission hospitals are recommended to develop strong human resource strategies for nurse retention to enhance patient care and reduce nurse replacement costs and training.
- Institute regular and sponsored nurse training program and reduce bonding period comparable to reasonable periods. The researcher's recommendation is for the hospital to initiate and implement more short term and long term staff development strategies (such as medical/professional updates and upgrading of enrolled nurses) in order to minimize turnover.

5.5 Suggestions For Further Study

Duplication of the same study in other mission hospitals in Kenya may be done to obtain comparative data about the factors causing high nurse turnover in mission hospitals.

Further research should be conducted using in-depth interviews to further explore the factors causing high nurse turnover in mission hospitals.

Further study should be conducted to determine if the same factors above have an influence on turnover of other professional staff in mission hospitals.

In conclusion, the factors identified above as causing high nurse turnover should be addressed in order to retain the nurses. It could be concluded that nurses did not enjoy satisfactory levels of job satisfaction which could enhance retention of nurses at the mission hospitals, and curb turnover rates among nurses. Nurse retention in hospitality industry is one of the major human resource management practices/component that is meant to continually improve in order to have sufficient numbers for healthcare service delivery. If nurse turnover is not addressed the situation may lead to reduced health care performance, increased costs of nurse replacements and training or development, and anxiety among the remaining nurses.

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