EVALUATING THE FACTORS THAT CONTRIBUTE TO EMPLOYEE

TURNOVER AT TOASE MEDICAL CENTRE

By

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DECLARATION

I hereby declare that this submission is my own work towards the Master of Business Administration (Human ResourceManagement Option) and that, to the best of my knowledge, it contains no material previously published by another person nor material which has been accepted for the award of any other degree of the University, except where due acknowledgement has been made in the text.

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ABSTRACT

As the hospital industry is a service and labour-intensive industry, it is common to suffer turnover rates higher than other sectors. Due to the impacts of employee turnover in the hospital industry there exist a need for management to monitor and measure turnover in order to take remedial action. It is in this view that this research seeks to evaluate the factors that contribute to employee turnover at Toase Medical Centre and how it can be reduced.Data derived from a self-completed questionnaire comprises the major part of this thesis, and this was distributed to employees of Toase Medical Centre. Analysis of survey was done using SPSS while interviews were translated and transcribed manually. From the findings, it was realized that individual factors such as personality and fit between the person and the job, were not likely factors to predict staff turnover among the respondents as they felt they had the right personality and characteristics to be successful in their jobs, and they saw their jobs as a mission. However, retention factors, turnover and motivational factors strongly contribute to employee turnover at Toase Medical Centre. The study revealed adequate compensation, availability of training programs for staff, good working condition, equal utilization and adequate welfare for staff as strategies that could be adopted to reduce employee turnover at Toase Medical Centre. Respondents recommended adequate compensation as the most effective since more than half 53(57.5%) of the respondents chose adequate compensation as the strategy that could be adopted to reduce employee turnover in the hospital.Suggestions were made for addressing factors that could impact on staff turnover and strategies that could be utilised to retain staff. These strategies include; flexible benefits,

employee recognition, improved conditions of service, employee orientation and socialization, training and development, climate of participation in decision making, succession plan, promotion and strategic human resource recruitment and retention plan

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If it had not been the Lord who was on my side, now may Isreal say (Psalm 124: 1) it is He that had made me and not myself; may his name be glorified.

I owe an utmost gratitude to my supervisor Mrs. Rosemary Boateng Coffie whose useful comments, suggestions and encouragement propelled me to see to the end of this thesis.

I would be very ungrateful if I forget my parents, Mr. and Mrs. Adjei and my siblingsfor their advice, encouragement and love.

DEDICATION

This thesis is entirely dedicated to my dear husband, Mr. David Boakye-Boateng and my

children, Afia Konadu Boakye-Boateng and Nana Asebi Boakye-Boateng.

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CHAPTER FIVE: SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS

LIST OF ABBREVIATIONS

HRM   Human resource management

WHO   World Health Organisation

UN   United Nation

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GENERAL INTRODUCTION

The purpose of this chapter is to outline the thesis, its background, issues and its organization. This chapter helps readers understand the main ideas and thoughts of the author relating to employee turnover at Toase Medical Centre.

1.0 Background to the study

In a global perspective, for decades, employee turnover has been a continuing problem faced by many businesses around the world. According to Joseph, Pierrard and Sneessens (2004), job turnover was relatively high in countries like Belgium, (15%), France (24.4%), Germany (16.5%), Italy (21%), Netherlands (15.4%) and United States of America (18.6%). Additionally, high turnover rates have been viewed as one of the most serious problems in the hospitality industry and it continues to be contentious issue (Lashley, 2010, Kotler, Bowen &Makens, 2006). Studies show that high turnover rates in the health service are not country specific and this is a worldwide epidemic. As noted, high turnover in the hospitality industry is not solely confined to Ghana, even though many studies emanate from this country and its impact on an entire industry (Gustafson, 2002). Employee turnover has had a detrimental effect for many major organizations and Ghana as one of the developing countries, is not excluded (Khatri, Fern & Budhwar, 2001).

As the hospital industry is a service and labour-intensive industry, it is common to suffer turnover rates higher than other sectors. What then is an appropriate level of turnover for an organization? It is generally accepted turnover rates are better kept under 10% or 15%.

This reality has a great impact on the hospitality industry. Why does it occur? How do we help the industry solve the problem? Due to the impacts of employee turnover in the hospital industry there

exists a need for management to monitor and measure turnover in order to take remedial action. In view of this, the fundamental question addressed by this study is: **What contributes to employees' turnover at Toase Medical Centre**

1.1 Problem statement

The health sector is enormous and the success of some hospitals cannot be doubted. Toase Medical Centre has grown rapidly since the year 2000 and currently has about two thousand, five hundred patients. The success of the hospital can be evidenced by so many factors such as its expansion to include mortuary, theatre, clinical laboratory, children ward, male and female wards. With the introduction of the national health insurance scheme which caters for the medical bills of the sick, patients visit the hospital regularly to seek medical treatment when sick and Toase Medical Centre is not an exception. There has been a rapid increase in the number of patients attending the hospital daily from two hundred patients to three hundred patients.

Although Toase Medical Centre plays a vital role in contributing to Ghana's economy, human capital problems have consistently occurred in this hospital but have often been neglected by researchers. As the hospital has more than fifty employees, recruitment and retention of employees are among the most important challenges it faces. Therefore an understanding of employees and the possible causes why they leave is important to better prevent labour turnover from happening. The causes of labour turnover have not, to date, been substantially documented for the hospital. In addition, many turnover studies which deal with other hospitals may not be of relevance due to unique features specific to Toase Medical Centre. Even though labour turnover can be expected, the health sector has rates considerably above average.

1.2   Objectives of the study

1.2.1 General objective

The general objective of the study is:

To analyze the factors that contributes to employee turnover at Toase Medical Centre.

1.2.2 Specific objectives

Other specific objectives are:

(a) To examine how motivational factors affect employee turnover at Toase Medical Centre.

(b) To investigate variables that may predict an intention to leave and the direct effect of those variables on the employee and the hospital at large.

(c) To examine how retention factors affect employee turnover at Toase Medical Centre.

(d) To make appropriate recommendations on how to improve working conditions and reduce the rate of turnover at Toase Medical Centre.

1.3 Research questions

The health sector is a service and people oriented business. They provide better healthcare services to the sick. The job is supposed to be lucrative and more attractive but however, studies show that

the rate at which workers leave the sector is on the increase and the research therefore sought to determine the factors that contribute to employee turnover at Toase Medical Centre.

The research questions therefore are;

1. How do motivational factors affect employee turnover at Toase Medical Centre?
2. How do retention factors affect employee turnover at Toase Medical Centre?
3. To what extent do variables that predict employees' intention to leave have effects on the employees and hospital at large?

1.4 Significance of the study

Giving the ongoing nationwide discussion on the turnover rate in the health sector, the research will give readers insight on the factors that contribute to employee turnover in the health sector. Observing Toase Medical Centre and its critical problems with regard to employee turnover thus led the researcher to develop this specific study. There exist typical statements when dealing with employee turnover problem in the health sector. As commented by Zeffane (1994), "despite significant research progress there still remains a great deal of confusion as to what to actually cause employees to leave or to remain in their organizations" (p.23). As cited by Morell, Loan-Clarke and Wilkinson (2004) in lee and Mitchell's (1994) study, there is no standard account for why people choose to leave an organization. Despite the growth in the health sector in many countries, studies on it are often neglected.

The study will serve as a springboard for further research on the health industry as it will uncover problems and issues found in other sectors of the industry that may need immediate attention.

It will be useful to the government since the study will bring to bare problems faced by workers and their views of the health sector which will help the government in formulating policies and regulations that will bring about efficiency at the workplace, help improve the working conditions of employees found in the health sector.

It will be especially useful to human resource personnels and management at the health sector, Toase Medical Centre to be precise to review and effect changes to the conditions of service to help retain staff and reduce the rate of job turnover.

Also, the study will be useful to workers in general at Toase Medical Centre to curb the negative perceptions they have about the job and create a positive attitude towards the job. To educate them on the variables that brings about the intent to leave and suggest ways to solve them upon it happening.

It will also be useful to the academia as it will augment existing knowledge on the continued turnover rate in the health service in the country.

1.5 Scope of the study

This study was structured using a typical case study approach within Toase Medical Centre which forms part of the health service industry in Atwima Nwabiagya District with a population of 197,873. The study focused on the factors that causes employee turnover at Toase Medical Centre and how it can be curbed. The data was obtained from both questionnaires and interviews.

1.6 Organization of the study

The study has been organized into five chapters, the first chapter commences with the introduction, including: Background of the study, statement of the problem, objectives of the study, significance of the study, methodology of the study, scope and limitation of the study. A review of relevant prior literature on employee turnover and its consequences, employee intention to leave, its effect on the job and variables that contributes to the intent constitutes chapter two. The third chapter focuses on the methods used in the study; it includes the population sample of the respondent, the procedure used in data collection, the methods of data analysis and the population profile followed by chapter four which constitutes data analysis and summary of the results. The final chapter (five) gives a summary of the research work findings, conclusions and recommendations and it is followed closely with references and appendices.

1.7 Limitations of the study

This research experienced limitations in the areas of limited information, limited time period for conducting the research and financial constraints. There were limitations for secondary data as much study had not been done on the subject matter and due to lack of records of transactions carried out in Toase Medical Center.

The above limitations, however, do not render the findings of this research non-reliable and replicable since the researcher carefully managed these limitations to make sure the research objectives were achieved.

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CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

According to researchers such as Ajzen and Fishbein (1980) and Igbaria and Greenhaus (1992), intentions are, the most immediate determinants of actual behavior. They are also of practical value

from a research perspective, as once people have actually implemented the behavior to quit; there is little likelihood of gaining access to them to understand their prior situation.

The validity of studying intentions in the workplace can also be drawn from Sagar's (1994) longitudinal study of salespeople, in which intention to quit was found to differentiate effectively between leavers and non-leavers. However, while it is reasonable to argue that intentions are an accurate indicator of subsequent behavior, little is known what determines such intentions (Firth, ,Mellor, Moore & Loquet, 2004). Numerous researchers have attempted to answer the question of what determines people's intention to quit by investigating possible antecedents of employees' intentions to quit (Kalliath & Beck, 2001; Kramer, McGraw & Schuler, 1997). While actual quitting behavior is the primary focus of interest to employers and researchers, intention to quit is argued to be a strong substitute indicator for such behavior. In his study, Moore (2002) found that lack of job satisfaction are among the factors that contribute to people's intention to quit their jobs; however, it is important both from the management and the employees perspective to understand which factors actually causes intention to quit in the health sector.

This chapter will provide an overview of turnover. Attention will be focused on what turnover is, followed by a discussion of the consequences of staff turnover, employee intentions to leave, employee turnover scenario in the hospitality industry and the role of human resource management in reducing high turnover rates in the health sector.

2.1 Definition of turnover

Turnover can be defined as the movement of labour out of and into a working organization (Lashley, 2000). Another definition may be simply stated as when an employee leaves an organization for whatever reason/reasons. Turnover can take several forms. It can be voluntary or

involuntary, functional or dysfunctional, avoidable or unavoidable. In voluntary turnover, an employee leaves the organization of his own free choice with some of the possible reasons being: low salary, job dissatisfaction or better job opportunities elsewhere whereas involuntary turnover takes effect when the organization makes the decision to remove an employee due to poor performance or economic crisis (Aksu, 2004). In addition, Price (2001) said that voluntary turnover can be termed as avoidable turnover and involuntary turnover as unavoidable turnover. However, most studies have focused on voluntary rather than involuntary turnover (Wright, 1993). This suggests that voluntary turnover is a critical issue for both employees and organizations.

2.1.1 Conceptual models of employee turnover

One of the earliest and perhaps most influential integrative models of employee turnover was introduced by March and Simons (1958). They studied turnover in relation to factors affecting perceived desirability and ease of movement within the labour force. Subsequently, the study of turnover in various contexts and the development of turnover models has burgeoned (Price, 1977; Mobley, 1977, Mobley, Griffeth, Hand & Meglino, 1979; Jackofsky, 1984; McBey & Kawakowsky, 2001). As early as 1977, Price published an extensive review and codification of the turnover literature. He presented a model of the determinants and intervening variables associated with turnover. Price (1977) defined the primary determinants of turnover as pay level, integration, instrumental communication, formal communication and centralization. In the same year, Mobley (1977) developed his intermediate linkages model that drew attention to a number of critical sources of influence. His model focuses on turnover as a process and questions the role of satisfaction as the immediate precursor of turnover. Then, in 1979, Mobley expanded his model

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of the employee turnover process. His amended model suggests that there are four primary determinants of intentions to quit and subsequently result in turnover:

(i)   Job satisfaction-dissatisfaction

(ii) Positive expectation about future role in the organization

(iii) Expectation of finding an attractive job external to the present organization and

(iv) Non-work values and contingencies.

In 1982, Mobley again produced a simplified model of turnover determinants. He used the term "determinants" in a generic sense to describe any variable potentially related to turnover which could be direct, indirect, causal or co relational. The determinants identified were organizational variables, external economy, individual non-work and work related variables. In 1984, Jackofsky further contributed to the literature with his integrated process model of turnover. He reviewed previous research on labour turnover and integrated job performance in the process of turnover. Hom and Griffith (1995) studied turnover using a meta-analysis model. However, regardless of which turnover model is considered, much of the research has drawn attention to four sources of influence on turnover (McBey & Kawakowsky, 2001).

The four influences highlighted are:

(i)   work-related attitudes (push factors),

(ii) External environment factors (pull factors),

(iii) Individual characteristic factors, and

(iv) Job performance factors.

This turnover model has continued to shape the thinking of the turnover literature today.

It can thus be seen that the causes and correlation of employee turnover have been studied from many different perspectives. Researchers have consistently linked a number of variables to

turnover. Previous research has established a positive relationship between absenteeism and voluntary turnover and a negative relationship between job performance and turnover (Morrow *et al.*, 1999). Among the probable causes of turnover, pay was often cited as the reason for leaving (Hinkin & Tracey, 2000; Rowley & Purcell, 2001).

2.1.2 Consequences of turnover

The impact of turnover can be either positive or negative, or both for an organization. According to Carbery *et al.,* (2003), from the perspective of the employer, turnover is viewed primarily as a negative phenomenon and from the view of employee it is often viewed in a more positive way. For the employer, perhaps the most obvious positive organizational consequences are the potential replacement of a former employee with one who is better. In terms of negative impact, from a managerial perspective, it would seem apparent that the organizational consequences of turnover are closely associated with the additional cost of recruitment and training and potentially lower profitability. According to Mobley (1982), the most frequently studied organizational influence of turnover, both direct and indirect is monetary cost which can vary substantially between and within organizations.

Many researchers found high turnover rates might have negative effects on the profitability of organizations (Kaak *et al.*, 1998; Aksu, 2004; Hinkin and Tracey, 2001).

Turnover is expensive (Mobley, 1982). It affects organizational profitability because in measuring turnover three major costs are included. Separation cost, Replacement cost and training cost. Johnson (1981) viewed turnover as problematic for the industries, affecting the quality of products and services and incurring considerable replacement and recruitment costs. He further said that labour turnover acts as an obstacle to increased productivity and efficiency, a view maintained in

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more recent literature. For example, the issue of quality cannot be ignored when dealing with employee turnover. Curtis and Wright (2001) stated that "high turnover can damage factors such as quality and customer service which provide competitive advantage, thereby inhibiting business growth or even causing a decline in the level of business". It is often said that the people who leave are those who are most talented (Hinkin & Tracey, 2000). The issue of quality is highlighted when someone unfamiliar with the tasks takes on the vacant position. It takes a long time to learn a new job and ranges from 54 to 80 days to reach an acceptable level of competence (Hinkin & Tracey, 2000).

Contrarily, a positive impact could be seen for an employee who quits a job being/ feeling motivated by expectations of greater net positive consequences in a new post (Mobley, 1982). This may be in the form of higher rates of pay or career development. However, the negative consequences of turnover also exists for employees who misjudge the organizations that they are about to join. Unrealistic expectations of the new organization, for example, about better benefits or working conditions may lead to a negative impact. Other possible negative consequences may involve loss of seniority, co-workers or boss (Mobley, 1982). There are the costs (financial, social and psychological) of moving to a new post that have to be borne regardless of any increase in salary or seniority.

2.2 Definition of intention

Intention is an act or instance of determining mentally upon some actions or result or the end or object intended, purpose (Oxford dictionary, 2006). Fishbein & Ajzen (1975) described the definition of intention in detail where they refer to an intention approach as "a theory of reasoned action". According to this theory, a person's intention is a function of two basic determinants: one

personal in nature and the other reflecting social influence. In terms of personal factor, it is the individual's positive and negative evaluation of performing the behavior which can be termed as attitude towards the behaviour. In other words it is referred to the person's judgment to perform a good or bad behaviour. The second determinant of the intention is a personal perception of the social pressure to perform or not perform the behaviour in question. This factor is termed as the subjective norm since it deals with perceived prescriptions.

2.2.1 Turnover intention

Turnover is very difficult to predict and questions remain unanswered as to why actually the employees left. Turnover intention refers to an individual's estimated probability to leave his or her current organization at some point in the near future (Brough & Frame, 2004). It is argued that intention to quit is a strong surrogate indicator for actual quitting behaviour (Firth *et al.*, 2004). Price and Muller (1981) recommended the use of turnover intention over actual turnover because the latter is more difficult to predict as there are many external factors that affect turnover behaviour. According to Moore (2002), while actual quitting behaviour is the main focus of interest to many researchers, intention to quit is argued to be a strong surrogate variable. Additionally, turnover intention can be a better barometer of management practices than actual turnover. Khatri *et al.*, (2001) gave the example that it is possible that despite high turnover intention, actual turnover may be low due to high unemployment in an industry. Again, Firth *et al.*, (2004) stated that intentions do not equal behaviour and therefore all reported intentions to quit are really little more than 'talk' until they are acted on. But Greenhaus (1992) agreed that intentions to quit may be the best predictor of actual quitting behaviour.

Additionally, Brough and Frame (2004) in their study identified job satisfaction and organizational commitment as variables that seem to influence turnover intentions. Job dissatisfaction stimulates the thought of quitting which elicits assessments of the utility of seeking other employment. However, studies on employee intent to leave a job in the hospitality industry have not been well documented. This study addresses the factors that cause depression among hospital industry employees in general, and provide suggestions to reduce the problems. Work-related factors such as work stress can cause burnout, which in turn can lead to depression.

Previous literature indicates the relationship between role stressors and intention to leave are rather indirect. In most studies, role stressors produce an intention to leave through mediator variables. For example, previous studies have examined the effect of role stressors including role conflict, role ambiguity and role overload on anxiety and commitment (Glazer & Beehr, 2005); and the impact of role stressors (mediated by job satisfaction and emotional exhaustion) on turnover intention (Hang-yue, Foley& Loi, 2005). In this present study, the author focuses on the most consistent and frequently used antecedents in turnover literature which are stressors, job stress, job satisfaction and commitment. It is worth noting that this study focuses on the direct influence on these variables towards intention to leave a job. Reviews of those concepts are presented below.

2.2.2 Possible causes of employee intention to leave a job

Stressors can be referred to as job or organizational conditions that may threaten an individual's well-being. Stressors are the element of stress. Stranks (2005) stated that the causes of stress are diverse but it normally includes three aspects that are environmental, occupational and social. A number of researchers have studied workplace stressors in a variety of industries. Workplace stress

that includes role ambiguity, role conflict and role overload have been discussed in comprehensive reviews in the occupational stress literature.

According to Jex (1998) a role can be defined as a set of behaviors that are expected of a person occupying a particular position. In social systems such as organizations, role plays an important part in coordinating an individual's behavior. Every organization needs roles to function effectively as employees in organization received role-related information through both formal and informal sources (Jex, 1998). In terms of role ambiguity, Cooper and Marshall (1978:85), stated that ambiguity exists when an individual has inadequate information about work role and where there is lack of clarity about the work objectives associated with the role, about colleagues expectation of the work role and about the scope and responsibilities of the job. Ideally, in most cases workplace role–related information should be clearly communicated to employees and it should be consistent. If the role-information is not clear to the employee, this situation may lead to role ambiguity. Jex (1998) further explained that role ambiguity may occur for several reasons. First, it is from the organizational perspective where poorly written job descriptions and lax monitoring exist. Second, some roles are simply more difficult to define and this causes employees to have difficulty in understanding the role. This mostly happens for managerial positions. For instance, in some organizations, managers are expected to achieve a certain level of sales but due to little guidance and lack of experience this is not achievable. Environmental change is identified as the third common cause of role ambiguity. This happens when the content of many organizational roles is linked to factors and events outside the organization. In addition, role ambiguity also happens to employees who have a complex description or where a job requires multi-tasking. To avoid job ambiguity, an employee has to acquire multiple skills to perform all related tasks. Above all, Kahn, Wolfe, Quinn and Snoek (1964), in their study, found that men who

suffered from role ambiguity experience lower job satisfaction, high job related tension, greater senses of futility and lower self-confidence. This implies the importance of clear role definitions at the workplace to avoid unintended consequences to employees.

Role conflict occurs when an individual has different expectations of roles to those of higher management or other stakeholders as to performance of a given task. Sigler (1988) stated that when an individual holds various overlapping roles or the behaviour expected is inconsistent, this can cause role conflict. Kahn *et al.,* (1964) found that men who suffered more work conflict had lower job satisfaction and higher job related tension. Thus, it is suggested that role conflict increases job dissatisfaction and in turn, increases quitting behaviour.

With regards to role overload, Cooper, Dewe and Driscoll (2001) refer to the sheer amount of work required for a role to be completed. It occurs when an employee has been pressurized to do more and finish the work within a normal work day hours (Glazer & Beehr, 2005). Role overload is one of several factors that can impact on job satisfaction. According to Galinsky, Kim & Bond (2001) about two thirds of managers and professional employees and one third of other employees felt overworked. Gryna (2004) stated one reason for work overload is customer expectation. She further explained the consequences of work overload that include reduced job satisfaction, and which ultimately leads to turnover behaviour. Work overload also causes errors in products and services.

2.2.3 Stress as a major cause of intention to leave a job

Stress is a term that can be viewed differently by different people and there is no single definition of the term (Stranks, 2005). Ivancevich and Ganster (1987) agreed that there is no specific definition that has been universally accepted as the final view of what stress entails.

Law, Pearce and Woods (1995) stated four criteria that can be useful in demonstrating stress. They believe that: 1) stress can be positive and negative; 2) stress can caused by a wide variety of things; 3) it is not so much the event but human reaction to the event which causes stress and 4) stress is a demand made on our capacities and it is these capacities which determine our response to the demand.

In the case of employees at work, they would worry potentially about many things such as too much or too little work, inefficient management, excessive working hours, job security, and pressure on or conflict with job demands (Stranks, 2005). These sorts of things can result in stress at the workplace. A 1992 U.N report called job stress "The 20th Century Epidemic" and the World Health Organization called stress a "World Wide Epidemic".

Stress at the workplace also happens in the hospitality industry. The examples of stress observed are derived mainly from job overload such as understaffing, temporary staff shortages, unrealistic task criteria and also bullying (Rowley & Purcell, 2001). Even though research on stress has been an extremely active field for many years, job stress in the hospitality industry it was claimed that it had not been widely investigated (Zohar, 1994). Birdir, Tepeci and Saldamli (2003) agreed that it is a real surprise that stress has not been studied as much as one would expect in the hospitality and tourism industry. The hospitality industry is a people and service industry. Thus, there is every indication that job stress would be a significant factor (Zohar, 1994). Kim, Shin and Umbreit (2006) stated that hospitality jobs require customer contact around the clock 7 days a week, which work situation has been reported to be stressful for hospitality workers. Gill, Flaschner and Shachar (2006) also mentioned, generally, that hospitality or customer-contact service employees are more prone to job stress due to four reasons:

1) High customer contact and the real time nature of service delivery means that service personnel face high demands from multiple sources;

2) Uncooperative and unhappy co-workers and dissatisfied customers are usually stress-inducing factors on the job;

3) The high levels of staff turnover in the industry results in higher training costs and create an extra load on employees and cause serious problems; and

4) Autocratic management style and introduction of frequent new methods of management practices create stressful work environment

Certainly, Brymer et al (1991) agreed that the hospitality industry is a very stressful environment where the demands are never ending, the pace is extremely rapid and there are never enough hours in a day.

2.3 Job satisfaction and commitment

Job satisfaction can be described in a variety of ways and it is an expression of an individual's evaluation of his or her job. On this basis, Locke (1976) defined job satisfaction as a pleasurable or positive emotional state resulting from one's job or job experiences. Robbin and Coulter (1996) stated that job satisfaction is an employee's general attitude towards his or her job. In other words, when people talk of employee's job attitude, most employees are likely thinking about their job satisfaction at the workplace. Job satisfaction also can be referred to as a subjective emotional response made by an individual, consciously or unconsciously, to specific aspects of the job. These responses are related to intrinsic or extrinsic factors. In another theory of job satisfaction, Herzberg (1966) suggested job satisfaction consists of intrinsic and extrinsic elements. Intrinsic refers to

factors that consist of work dimensions of autonomy and responsibility (Herzberg, 1966) while extrinsic refers to work environment.

Similarly, Smith, Gregory and Cannon (1996), stated that employees obtain job satisfaction from both intrinsic and extrinsic factors. Herzberg and Mausner (1957) differentiated these two elements and found that intrinsic factors more towards to job satisfaction and extrinsic factors were related to job dissatisfaction. To summarise, job satisfaction is whenever people feel happy or satisfied with their jobs and other aspects of the workplace.

2.4 Feeling about the job

Job feeling is tied in an employee's mind with accompanied positive, neutral or negative evaluations. An employee's feeling about the job is about their own view on what he or she thinks about the job. "Good feelings" refer to an individual's emotion that makes the employee feel happy at the workplace such as being surrounded by good co-workers and having their own specific areas of responsibility. Generally, having a job that the employee personally chose means the employee is happy with things at work. The good feeling towards the organization usually rubs off on perceptions about the organization because the organization has a role in assigning an employee to a job. If the employee does not feel satisfied with the job, s/he will blame the organization and thus possess a lower commitment to the job (Ahuja, Katherine, George, Kacmar and McKnight, 2002).

2.5 Socio-demographic determinants

The literature also highlights a number of demographic variables that may influence the intention to leave a job. These are age, gender, marital status, presence of children, educational background and length of employment

2.6 The role of human resource management in reducing high turnover rates in the health sector.

The role of a Human Resource Management (HRM) department is very important to each organization. All organizations, whether in the private or public sectors employ people and this is the reason why HRM is needed. Human Resource Management is the development and implementation of systems in an organization designed to attract, motivate and retain a productive employee (Aminuddin, 2005). On that basis, the success of a HRM department could be measured by turnover rates, labour productivity and return on asset. Cho et al (2006) indicated that companies which implemented HRM practices such as labour-management participation program incentive plans and pre-employment tests are more likely to experience lower turnover

rates.

In the health sector, HRM departments are often criticized for being responsible for or causing of employee turnover. This is because personnel recruitment and selection procedures directly affect the quality of employees that are recruited (Chien & Chen, 2006). Rowley and Purcell (2001) highlighted that turnover was the consequence of poor management practices that includes weak HRM strategies. However, according to Cho *et al.,* (2006), despite the health sector's unique feature of labour intensity, only a few studies have investigated the impact of HRM practices on organizations such as a reduction of turnover rates. HRM play an important role in most

organizations where recruitment, selection and hiring are done by the HRM department. Keeping employee turnover low begins with hiring an employee who is a good match for the practice and position. Capko (2001), agreed that one organization may be able to reduce turnover by finding out how the organization's practice looks through the eyes of employees.

In a Ghanaian context, it is difficult to describe existing HRM practices in detail due to two factors. Firstly, there is little or no research to provide basic data and from the little information available, it is not proper to make generalizations and secondly, companies differ widely in their human resource management systems and no one system maybe necessarily better than another. Denvir and McMohan (1992) agreed that varying practices exist with regard to recruitment, selection, induction and training. How to attract, motivate and retain good employees becomes a vital issue which has drawn wide attention from both industry and academic researchers. Thus, it is important to hire the right person and retain them. As suggested by MacHatton *et al* (1997), it is worth investing more time and money in the selection process as it can play a major role in reducing employee turnover. Lankau and Chung (1998) also suggested that a mentoring program could encourage employees to stay in the organization thus reducing turnover. It can be argued that an understanding of turnover intention among Toase Medical Centre employees will help human resource and managers of the hospital to better manage their employees, increase commitment and in turn minimize intention to leave their job.

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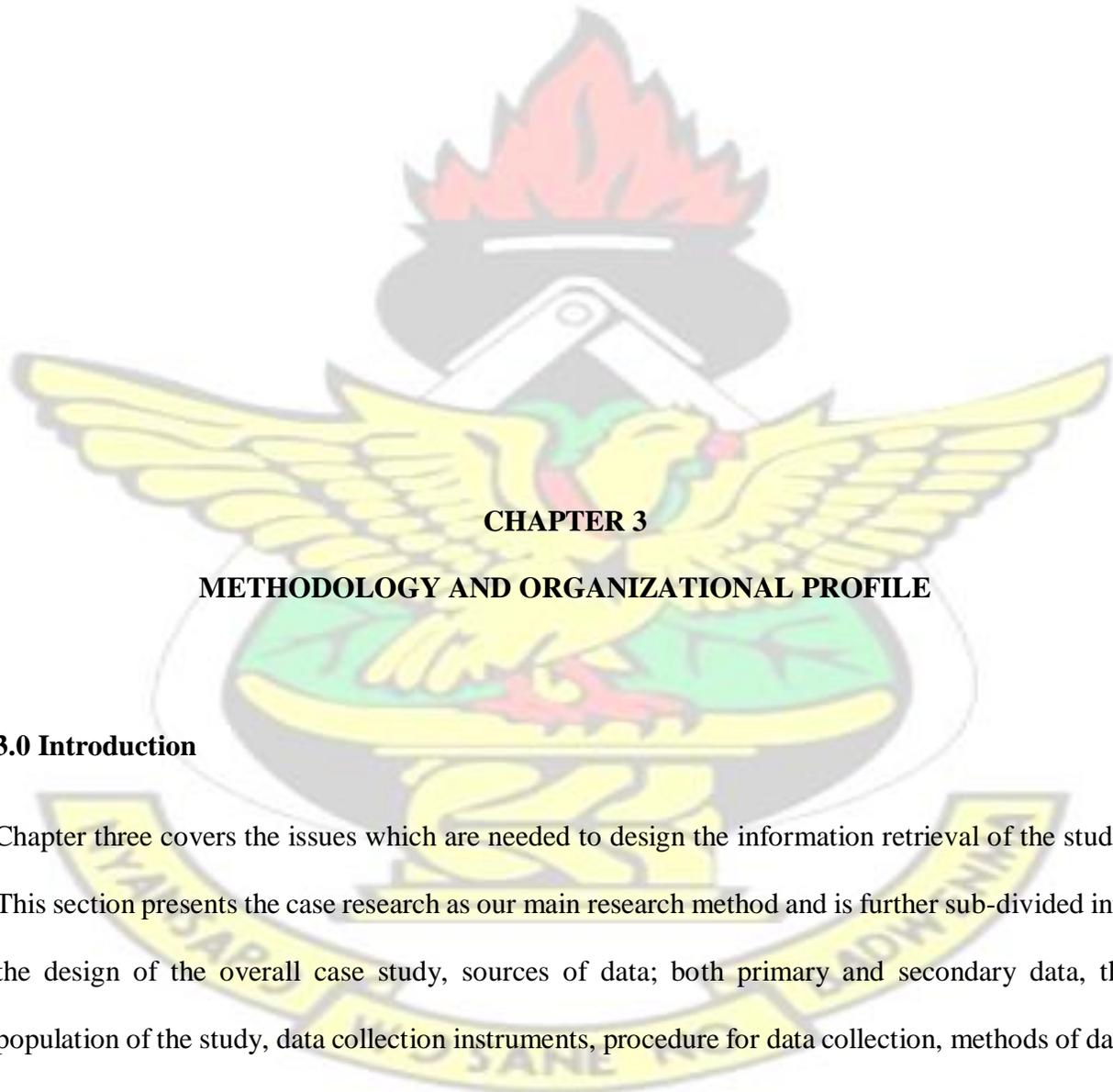
CHAPTER 3

METHODOLOGY AND ORGANIZATIONAL PROFILE

3.0 Introduction

Chapter three covers the issues which are needed to design the information retrieval of the study. This section presents the case research as our main research method and is further sub-divided into the design of the overall case study, sources of data; both primary and secondary data, the population of the study, data collection instruments, procedure for data collection, methods of data analysis and criteria used to ensure the credibility of the findings. The last section of the chapter

gives the profile of Toase Medical Centre and finally concludes the chapter by presenting the highlights.

3.1 Research design

Research design is important as it prepares proper framework within which the research work/activity will be actually carried out. It acts as a blue print for the conduct of the whole research project. It introduces efficiency in investigation and generates confidence in the final outcome of the study. Research design gives proper direction and time-table to research activity. It keeps adequate check on the research work and ensures its completion within certain time limit. It keeps the whole research project on the right track. Research design avoids possible errors as regards to research problem, information requirement and so on. It gives practical orientation to the whole research work. Finally, it makes the whole research process compact and result-oriented. The research design for this study is case study method. Case studies are concerned with depth for insights for problem solving, evaluation and strategy. They "place more emphasis on a full contextual analysis of fewer events or conditions and their interrelations" (Neuman 2006). To answer the research questions, the author needs to delve deep into the working conditions of the staff as well as the operations of the hospital to acquire a deep understanding of the respondents, interactions, sentiments and behaviors occurring for a specific process through time thus opting for this approach. De Weerd-Nederhof (2001) observe from what she calls a more "technical" definition of case study form the work of Yin that: "A case study is an empirical inquiry that investigates a contemporary phenomenon within its real-life context; when the boundaries between the phenomenon and context are not clearly evident; and in which multiple sources of evidence are used" (page 513). A case study can be used to achieve different goals. It can be used for description or test or generate explanatory theories.

As the research study intends to discover the general consensus of workers at Toase Medical Centre with regards to employee turnover, the immediate research study methodology in mind is the descriptive research study design. The purpose of using and considering the descriptive method is to explain and depict the nature of the situation, as it takes place during the time of the research and to explore the causes of a particular situation. The author opted to consider this kind of research study considering the desire to acquire first-hand information from employees so as to formulate rational and sound conclusions and recommendations for this thesis.

3.2 Population of the study

A target population is a precisely specified group of cases from which a researcher studies a sample and to which the results from the sample are generalized (Neuman, 2006). The target population for this study consisted of the entire staff of the hospitals' administration department, the outpatient department, the mortuary unit, surgery unit, pediatrics unit, maternity unit, finance unit, pharmacy department and laboratory unit. Records available at the human resource department indicate that fifty personnel of Toase Medical Centre constitute the population. The total number of employees and respondents used for this study is indicated in table 3.1below.

Table 3.1 Population for the study

DEPARTMENT	NUMBER OF EMPLOYEES	NUMBER OF RESPONDENTS
ADMINISTRATION	12	3
CASUALTIES AND EMERGENCY	8	10

MEDICAL AND SURGICAL	17	8
PEDIATRICS	25	8
MATERNITY	24	15
FINANCE	10	1
PHARMACY	20	1
LABORATORY	15	1
OUT-PATIENT	10	2
HUMAN RESOURCE	9	1
TOTAL	150	50

Source: HR, Toase Medical Centre

Gill and Johnson (2002) state that surveying from the entire population could be expensive and require adequate time for data collection and analysis. Based on this reason, the researcher selected some staff and management for this study including nurses, doctors, pharmacists, health assistants, administrators and other employees as the sample for this study.

3.3 Sampling procedures for data collection.

Sampling is a key component of any investigation and involves several considerations. The aim of most investigations is to obtain information about a population. A census or sample of the population is taken for analysis. There is no hope of making scientific statements about a population based on the knowledge obtained from a sample, unless we are circumspect in choosing a sampling method- Malhotra and Birks (2006). A sample refers to a sub group of the elements of

the population selected to participate in a research to answer the research questions and or satisfy research objectives (Saunders 2007).

In this study, the population for the study consisted of the entire staff of the hospital out of which fifty employees were chosen through simple random sampling whilst forty employees responded to the questionnaire. The information received was particularly informative in meeting the research objectives.

3.4 Sources of data

Data for the study was gathered from both primary and secondary sources.

3.4.1 Primary data

Primary data is important for all areas of research because it is unravished information about the results of an experiment or observation. It is like the eyewitness testimony at a trial. No one has tarnished it or spun it by adding their own opinion or bias so it can form the basis of objective conclusions.

Primary data collection was basically used which involved the use of structured questionnaires. Questionnaires were administered to staff and management of Toase Medical Centre. These

questionnaires contained questions with different themes specific to addressing the research objectives and questions.

3.4.2 Secondary data

Secondary data is data collected by someone other than the user. Common sources of secondary data for social science include censuses, organizational records and data collected through qualitative methodologies or qualitative research.

Secondary data was gathered through a desk study on both published and unpublished materials at the human resource department. This includes internet web pages, government policies and conditions of service, measures to reduce staff turnover at Toase Medical Centre.

3.5 Data collection instruments

As part of the research design, a description of the type of data to be collected and how it will be collected is stated. Data collection constitutes the basic observation from which conclusions will be made (Sullivan 2001). Data collection procedure must be sound. Pre-tests and pilots studies are used to achieve this. There are a number of methods for data collection including documentation, archival records, interviews, questionnaires, direct observation, participant observation and physical articrafts. The researcher painstakingly considered a number of factors in deciding which instruments or methods of data collection to be employed in the research. Due to the fact that the research approach was fundamentally quantitative, questionnaires served as the means of gathering our primary data.

3.5.1 Questionnaires

Questionnaires present questions in two forms: open-ended and closed-ended. In open-ended questions, respondents are not restricted to a number of answers from which to choose, they are free to give any answer they wish to the question. In close-ended question, respondents are restricted to a fixed set of questions from which to choose. Partially open-ended questions, in addition to fixed questions, include a final open choice of "others" allowing the respondent to give a different answer other than those in response to the fixed question (Neuman 2006). Both question forms have their advantages and disadvantages. For open-ended questions, an important advantage is that they give in-depth response and unanticipated findings may be discovered and one disadvantage is that they are difficult to code. In close-ended questions, the questions are easier and faster for respondents to answer and easier to compare, code and analyze statistically by the researcher. As a disadvantage, close-ended questions may restrict respondents from giving in-depth response (Ibid). In this study, close-ended questions were mostly used where respondents were asked to choose from a fixed set of answers indicative of their opinion on factors that leads to employee turnover. Chiefly, close-ended questions were used since people are more willing to answer questionnaires with close-ended questions because those types of questions are relatively easier to answer than open ended question.

Responses were measured with a five-point Likert scale rating, where strongly Agree = 5; Agree = 4; Strongly Disagree = 3; Disagree = 2; and unsure = 1.

3.6 Data analysis techniques

Data gathered from the field survey was analyzed using Statistical Package for Social Sciences (SPSS) software. The researcher also used a summary description of the data collected in its

qualitative data analysis.The data collected was transformed into a form appropriate for manipulation and analysis. The data gathered from the questionnaire was edited to ensure completeness, consistency and accuracy. In analyzing the data, tables and figures were used as analytical tools. Quantitative explanations were made of quantitative data to give meaning to them as well as explain their implications and summary description in analysing qualitative data. Neuman (2006) report that researchers approach theory building and testing form two directionsdeductive and inductive. Deductive direction is "an approach to developing or confirming a theory that begins with abstract concepts and theoretical relationships and works towards more concrete empirical evidence" (page 59). Sullivan (2001) observe that some social scientist argue in favour of this approach as preferred. The inductive approach is defined by Neuman as "An approach to developing or confirming a theory that begins with concrete empirical evidence and works towards more abstract concepts and theoretical relationships" (page 60). Saunders (2007) describes the deductive approach as developing from theory to hypothesis and to testing of the hypothesis. From the authors' research objectives and questions this study takes the deductive approach. From these, appropriate conclusions and recommendations were made from the

findings of the research.

3.7 Data validity and reliability

The findings of a study take credence from its validity and reliability. Saunders et al (2007) observe that these two constitute the credibility of a study. Validity confirms if the findings actually represent what they purport (Ibid). Neuman (2006) refers to it as: "the ability to generate findings beyond a specific study" (page265) writing in the context of quantitative data analysis.

For qualitative data analysis, he refers to validity as how the researchers' data and analysis accurately represents the realities in the field. He gives four points on the authentication and trustworthiness of a research project:

i. Ecological Validity: how the researchers data represent the response of respondents and the extent to which the researcher serve to distract respondents. ii. Natural Validity: in-depth account of a logical procedure iii. Member Validation: confirmation of researcher's report by the elements he studied.

iv. Competent Insider Performer: researchers participation as an element of studied population The validity of the study is rooted in the close alignment of the research questions, frame of reference and the design and purpose of the questions administered in both the interview with some departmental heads and questionnaires distributed to staff. The data that was gathered directly addressed the issues raised in the research question. with a well- calculated approach to sampling, cross checking of data and alignment of the research questions to respondents' answers, the findings of the study reflects the general situation of job satisfaction of workers as a pertinent problem at Toase Medical Centre.

The reliability of a study refers to, according to Neuman (2006) "demonstrating that the operations of the study- such as data collection procedure- can be repeated with the same results". In this regard, the researcher first established rapport with the people by visiting them on few occasions and familiarizing herself by interacting with them, reading their brochures on their products and services and browsing their website. The respondents of the questionnaires were treated with tact and the author administered the questions meticulously so as not to influence any response. They generally showed a lot of interest and willingness to offer their responses. The researcher used simple language in the questionnaire to facilitate understanding in addition to thorough explanation

of the purpose of the questionnaire. Furthermore, respondents were quite educated in terms of their levels of expression of the English language.

The steps employed to gather data were coherent and reinforced each other-

i. Initial interaction with staff and few personnel managers of Toase Medical Centre ii. Administering of questionnaires to staff.

Summary of validity and reliability

Validity	Reliability
Validity of data from different sources	Coherence of procedure
Validity of data from literature review	Appropriate sampling frame
Logical data collection procedure	Appropriate frame of reference

3.8 Profile of Toase Medical Centre

The Toase Medical Centre land was provided by Toasehene, Nana Captain Asiamah Afrifa II in appreciation of the contribution of professor Kwabena Frimpong-Boateng to the development of Toase.

The land was given primarily for residential purpose but due to lack of a medical facility in the area then, professor Frimpong-Boateng decided to use the land for further development of the community, hence he decided to use it for a clinic. This was in 1994.

In 1998, Professor Frimpong –Boateng hosted a parliamentary delegation from Germany. One of them, Dr. Mrs. Michaela Blunk, accompanied him to visit the Ashanti Region. Among the places

visited were Boasekrom, Gyankobaa, Toase, and Kumasi. At Toase, the plot of land and its plans were shown to Dr. Mrs. Blunk who showed a lot of interest.

In 1999, Prof. Axel Haverich, a colleague of Prof. Frimpong- Boateng visited from Germany and together, he and Prof Frimpong-Boateng contributed funds for the project. On 28th February, 2001, Toase Clinic was established but since the area is an underpriviledged community, the earnings were at a very low level.

Some of the early problems included and and still includes the wealth of the community, Health insurance which was not in existence then and still not properly patronized, difficulty in finding staff who are prepared to live and work in a remote area. We are still not attracting patients who can afford to pay medical fees.

With the operation of the national health insurance scheme, the clinic has started showing improvement in the balance sheet.

3.9.1 Vision

To provide high quality health care in the most effective, efficient and innovative manner specific to the needs of the communities we serve and at all times acknowledging and upholding the dignity of the patients.

3.9.2 Mission

To provide exceptional quality patient care through officials who are principled, well-mannered, tolerant and self motivated; collaborating with other health facilities to bring the best health care delivery to our patients/clients.

3.9.3 Goals

To provide the best healthcare service comparable to any health care service in the world. To empower our patients/clients to take ownership of their own health need and to assist our patient/client in preventive medicine.
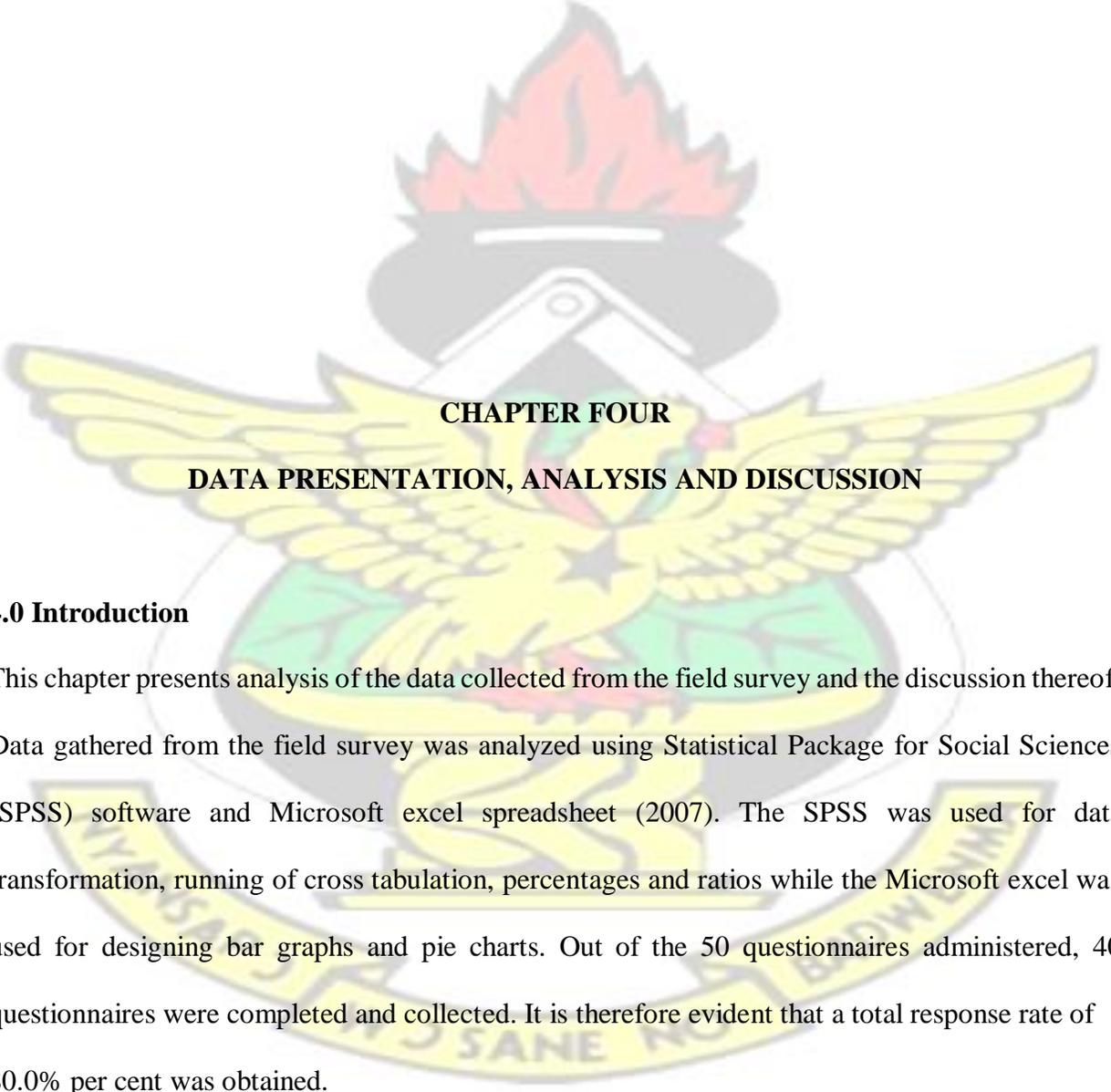
CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.0 Introduction

This chapter presents analysis of the data collected from the field survey and the discussion thereof. Data gathered from the field survey was analyzed using Statistical Package for Social Sciences (SPSS) software and Microsoft excel spreadsheet (2007). The SPSS was used for data transformation, running of cross tabulation, percentages and ratios while the Microsoft excel was used for designing bar graphs and pie charts. Out of the 50 questionnaires administered, 40 questionnaires were completed and collected. It is therefore evident that a total response rate of 80.0% per cent was obtained.

4.1 Biographical information of respondents

The biographical information of the respondents was analysed according to rank, gender, age, qualification, functional area and length of service. The respondents that participated in the study were all staff of Toase Medical Centre working at various departments.

4.1.1 Rank of respondents

Question A.1 required respondents to indicate their positions at Toase Medical Centre. Responses to this question are presented in the table below.

Table 4.1.1 Rank of respondents

Rank	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Professional nurse	21	52.5	52.5	52.5
Cleaner	5	12.5	12.5	65.0
Senior professional nurse	2	5.0	5.0	70.0
Doctor				
Others				
Total	3	7.5	7.5	77.5

	9	22.5	22.5	100.0
	40	100.0	100.0	

Source: Field Survey, June 2012

From table 4.1.1, it could be observed that majority of the respondents were professional nurses which comprises of 52.5% of the respondents, followed by cleaners of the hospital 12.5%, and then Doctors with a percentage of 7.5%. Senior professional nurses comprised of 5% of the total response rate. Those in other ranks such as Finance officers, Accountants, Human Resource Personnel, Nursing service manager, Directors, Administrators, Procurement officers, were 9 representing 22.5% of the total response rate. This means Toase medical centre is dominated by professional nurses.

4.1.2 Sex of respondents

Question A.2 required respondents to indicate their sex type. Responses to this question are presented in figure 4.1.2 below.
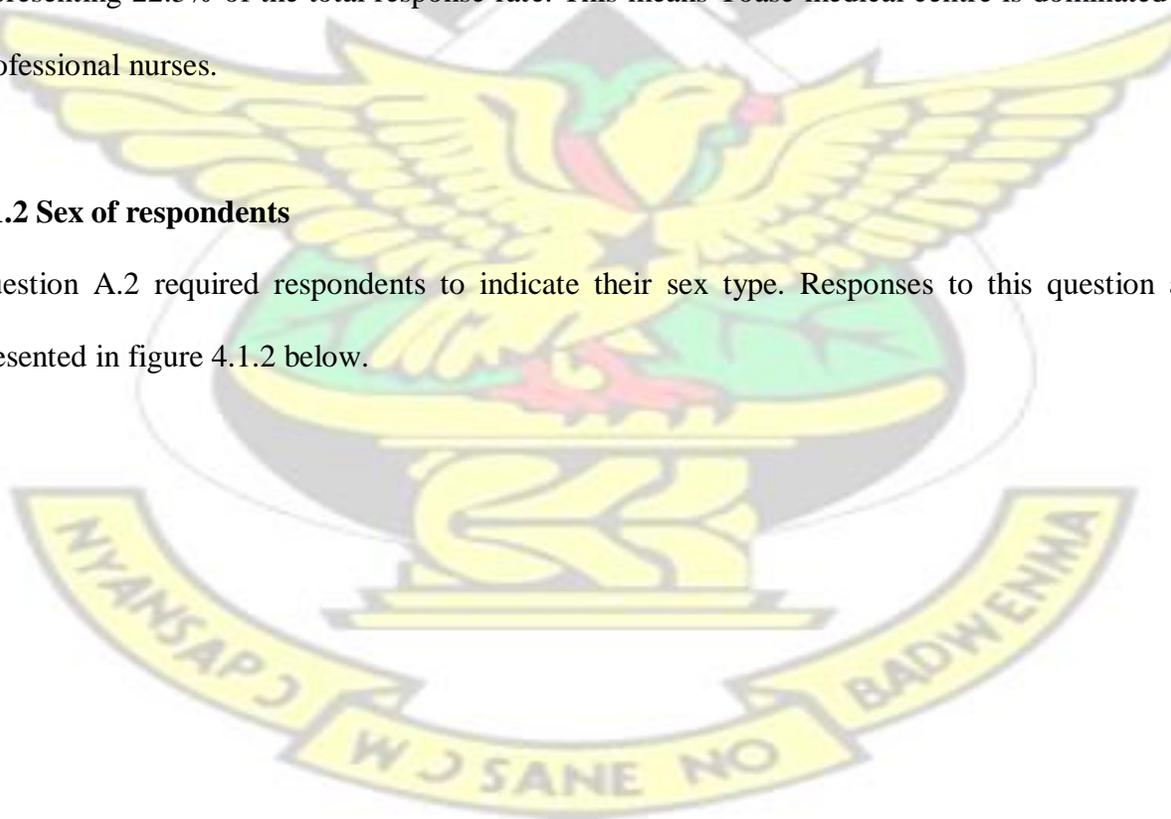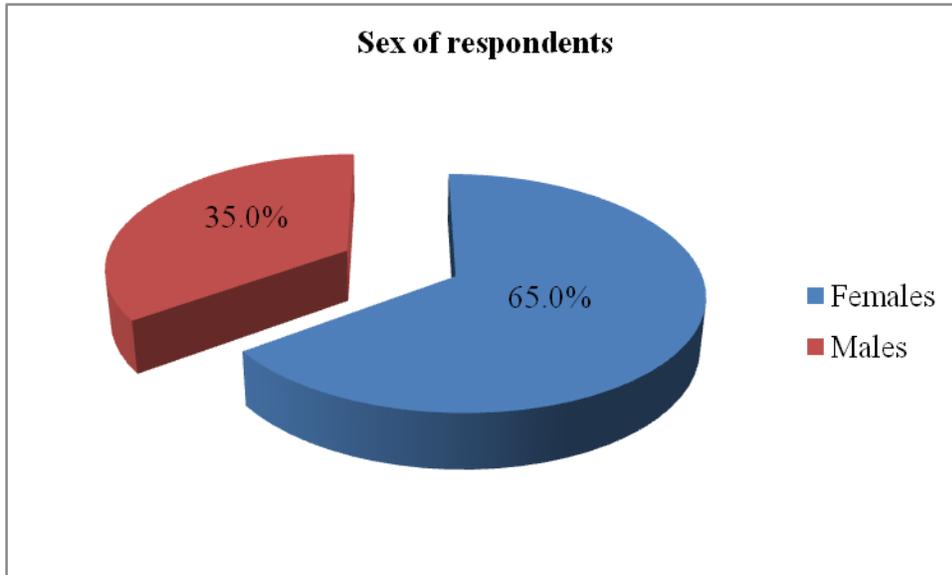
Sex of respondents

Source: Field Survey, June 2012

Figure 4.1.2 Sex of respondents

The chart above shows the result accumulated from the field survey with respect to the sex of the respondents. From the responses received, 14 of the respondents were males representing 35% whiles 26 were females also representing 65% of the total response rate. It could therefore be deduced that more females (65%) than males (35%) participated in the survey. This shows that Toase Medical Centre is dominated by females however, both genders were represented.

4.1.3 Age of respondents

Question A.3 required of the respondents to indicate their age. Figure 4.1.3 represents responses received to this question. The figure indicates responses frequency and percentage.
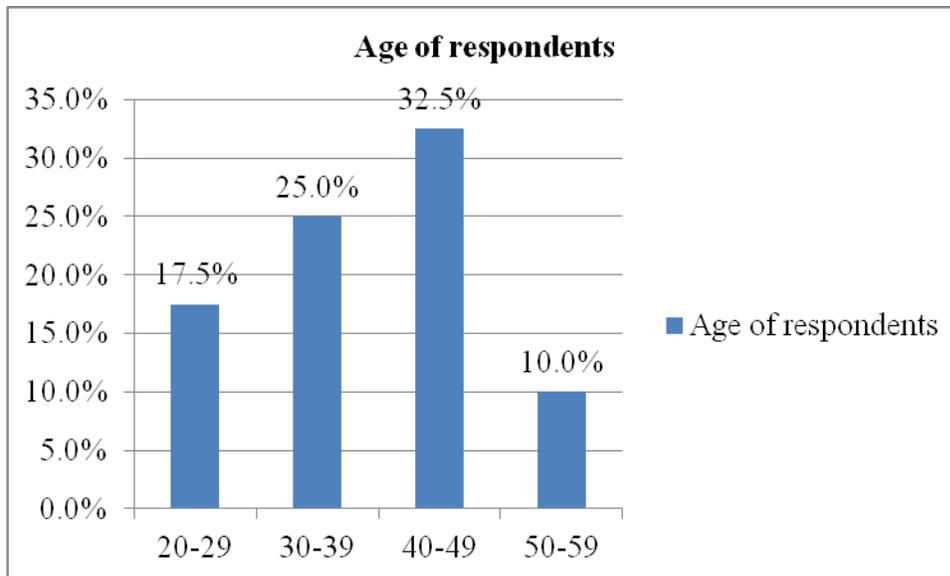
Source: Field Survey, June 2012

Figure 4.1.3 Age of respondents

As indicated in the above figure, majority of the respondents in this study were those in the 4049 age group representing as much as 13(32.5%) of the total response rate. The second highest was the 50-59 age group and 30-39 age group representing 10(25.0%) each followed by 20-29 age group representing 7(17.5%). This indicates that most of the respondents were relatively older and thus more experienced. This could also indicate that the hospital fails to employ or retain a younger workforce.

4.1.4 Qualification of respondents

Question A.4 required of the respondents to indicate their highest qualification. Table 4.1.4 presents responses received to this question.

Table 4.1.4 Qualification of respondents

Qualification	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Diploma	17	42.5	42.5	42.5
Bachelor's degree or Equivalent	14	35.0	35.0	77.5
Doctorate				
Other	4	10.0	10.0	87.5
Total	5	12.5	12.5	100.0
	40	100.0	100.0	

Source: Field Survey, June 2012

From table 4.1.4, it is clear that majority (42.5%) of the respondents had diploma. This is followed by those with bachelor's degree or Equivalent qualifications of 35.0%, then those with other qualification which comprised of 12.5% of the total response rate. Those with doctorate degree also had 10.0% out of the total response rate. Respondents with other qualifications did not specify exactly what qualifications they have.

4.1.5 Respondents' Functional area of work

Question A.5 required of the respondents to indicate in which functional area they were employed. Responses to this question are presented in Table 4.1.5 below

Table 4.1.5 Functional area of respondents

Functional Area	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Maternity	12	30.0	30.0	30.0
Casualties/Emergency unit	8	20.0	20.0	50.0
Medical and Surgical Pediatrics	6	15.0	15.0	65.0
Administration				
Finance	5	12.5	12.5	77.5
Other				
Total	3	7.5	7.5	85.0
	2	5.0	5.0	90.0
	4	10.0	10.0	100.0

	Frequency	Percent	Valid Percent	Cumulative Percent
	40	100.0	100.0	

Source: Field Survey, June 2012

It is evident from table 4.1.5 that most (30.0%) of the respondents represented in the maternity unit. Those in Casualties/Emergency unit constituted 20.0% and Medical and surgical unit been represented by 15.0% of the response rate. Those in Pediatrics unit were represented by 12.5% and those in administration were also represented by 7.5%. Respondents who said they are employed in other units not specified on the table were 4 representing 10.0% of the response rate. Those who indicated other units, specified mortuary and dental services.

4.1.6 Respondents' length of service

Question A.6 required of the respondents to indicate the number of years employed at the hospital. Responses to this question are presented in Table 4.1.6

Table 4.1.6 respondents' length of service

Length of Service	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Less than 5 years	10	25.0	25.0	25.0
5-9 years				
10-14 years	16	40.0	40.0	65.0
Total	14	35.0	35.0	100.0

40

	40	100.0	100.0	

Source: Field Survey, June 2012

As indicated in the above table, majority of the respondents in this study have served for 5-9 years representing as much as 40.0% of the total response rate. Following are those who have served for 10-14 years representing 35.0%, then those who have served for less than 5 years representing 25.0%. The results suggest that a total of 75% of the employees were employed for five years and beyond, which indicates a relatively stable work force.

4.2 Summary of motivational, turnover and retention factors.

This section summarises workers' views on motivational, turnover and retention factors from sections B, C and D of the questionnaire. Workers were asked to indicate the extent to which they agree or disagree to each of the SERVQUAL statements using a 5-point Likert scale. This is interpreted as **1- Strongly agree, 2- Agree, 3- Unsure, 4- Disagree, and 5- Strongly disagree.**

The figure below presents respondents' views on the motivational, turnover and retention factors at Toase Medical Center.

Figure 4.2.1 Motivational factors
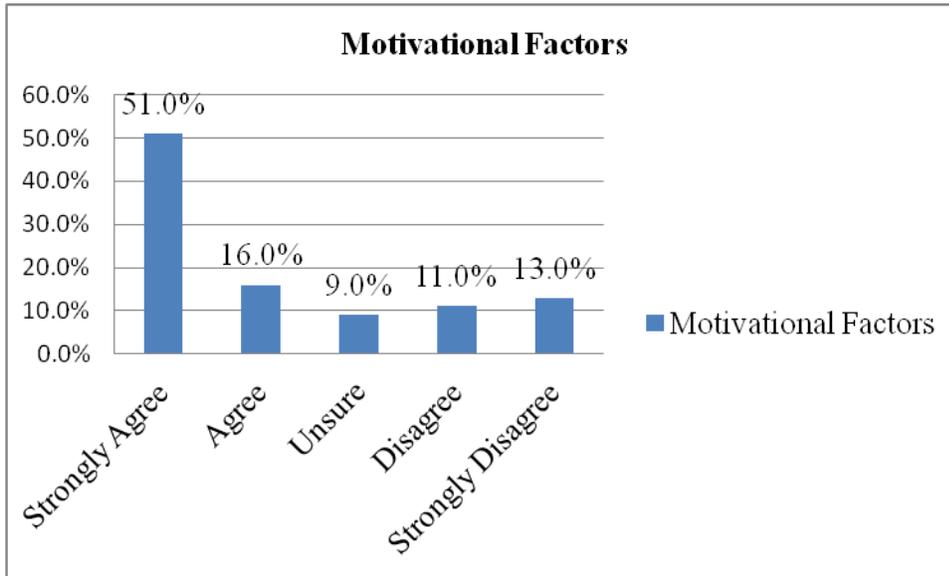
Motivational Factors

From the figure above, the following were the average response rate (expressed in percentages); 51.0%, 16.0%, 9.0%, 11.0% and 13.0% for Strongly Agree, Agree, Unsure, Disagree and Strongly disagree respectively. It is clear from the figure above that the highest average response rate (expressed in percentage) for all the variables under motivational factors was 51.0% which went for strongly agree. This indicates, that respondents strongly agreed on all the statements under motivational factors. The results suggest that the respondents were, in terms of motivational factors, very satisfied. It could therefore be said that motivational factors such as listed below have helped retain employees at Toase Medical Center.

Intrinsic factors such as employees seeing their job as a calling, feeling glad by helping to save someone's life, a feel of making a valuable contribution to the life of people who come to use their services and important to them personally that they do their job well

Other motivational factors such as employees paid fairly for the work performed, employees needs taken into consideration at work, employees provided with the necessary resources to complete

task successfully, managers discussing employee performance with them, managers motivating employees to doing a good job, having job security, job encouraging self or personal development and creating a career path and lastly, managers encouraging teamwork.

Figure 4.2.2 Turnover/intention to leave factors
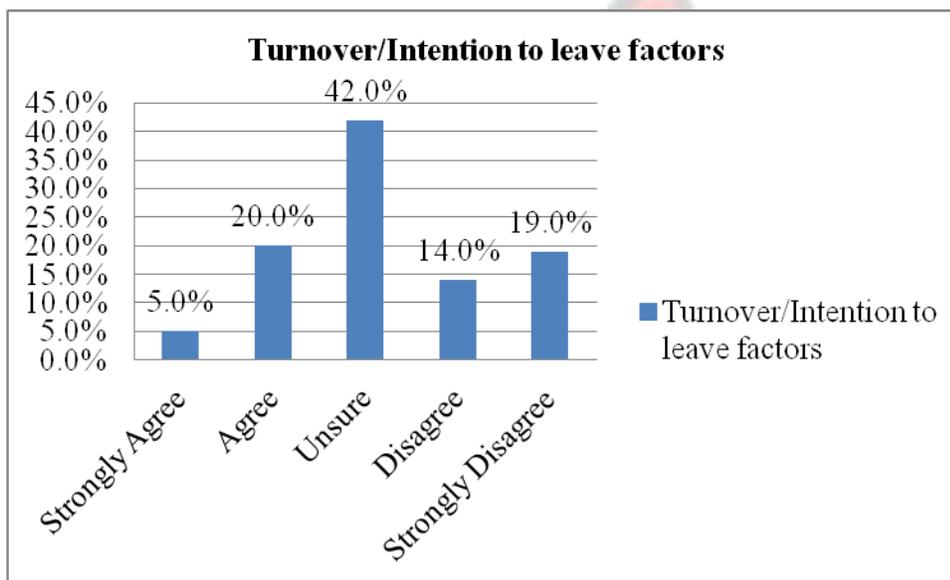
From the figure above, the following were the average response rate (expressed in percentages); 5.0%, 20.0%, 42.0%, 14.0% and 19.0% for Strongly Agree, Agree, Unsure, Disagree and Strongly disagree respectively. It is clear from the figure above that the highest average response rate (expressed in percentage) for all the variables under turnover/intention to leave factors was 42.0% which went for Unsure. This indicates that respondents were not sure of all the statements under turnover factors in retaining employees at Toase Medical Center. The results suggest that depending on the action management takes concerning variables under this factor, the hospital could benefit from giving attention to the statements in this section since workers have not taken a stand on those factors.

These statements are; The brain drain affecting labour turnover among staff of the hospital, workers considering finding job overseas, the hospital not caring about employee welfare, workers considering applying for jobs at other hospital in Ghana, workers preferring working in bigger cities rather than here, organization not allowing employees to develop themselves, organization not providing a better working environment and workers efforts not recognized at the hospital. Furthermore, employees not offered good health care plans, flexible working hours, poor conditions of services, having a challenging job, non-competitive compensation and differences in compensation package among staff.

Figure 4.2.3 Retention factors
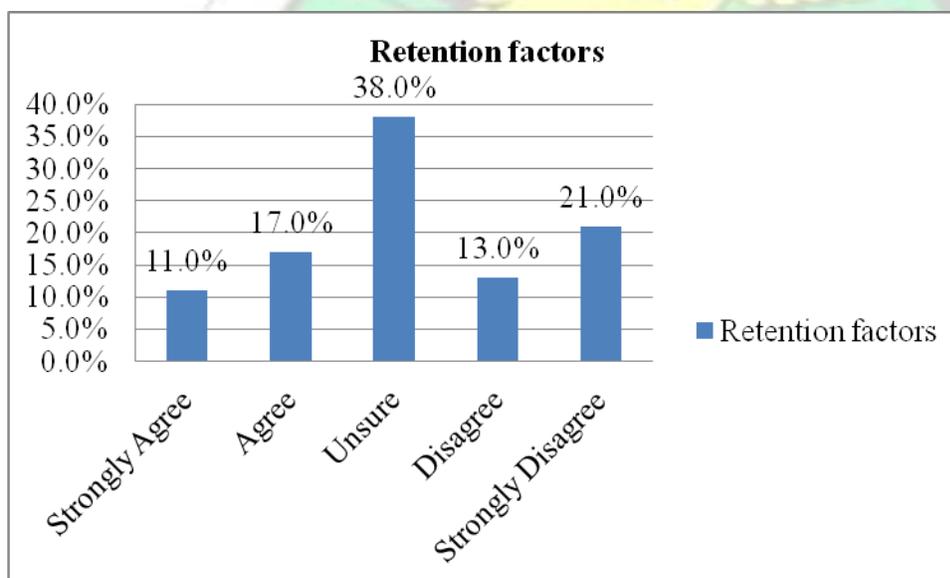
From the figure above, the following were the average response rate (expressed in percentages); 11.0%, 17.0%, 38.0%, 13.0% and 21.0% for Strongly Agree, Agree, Unsure, Disagree and Strongly disagree respectively. It is clear from the figure above that the highest average response rate (expressed in percentage) for all the variables under retention factors was 38.0% which went for Unsure. This indicates that respondents were not sure of all the statements under retention factors. Again, the results suggest that depending on the action management takes concerning variables under this factor, the hospital could benefit from giving attention to the statements in this section since workers have not taken a stand on these factors; Management not trying their best to ensure that employees will not want to leave the organization, not actively addressing the shortage of staff, not carefully selecting and employing people who are well suited for the job, flexible working arrangement not offered to attract and retain staff, management not addressing the work related issues of dissatisfied staff, new staff not receiving adequate orientation and job training to help settle down, no climate of participation in decision making, the hospital not mostly promoting from within if possible, no open communication and feeling of trust among workers of the hospital.

In summary, the above descriptive analysis showed that, except for motivational factors, the other factors (retention and turnover/intention to leave factors) could be a fertile ground for high staff turnover at Toase Medical Center since respondents indicated a tendency towards unsure with regard to those factors.

4.5 Reasons for Staff to leave

Table 4.3 Respondents' reasons for leaving the hospital

Reasons	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Inadequate compensation	24	60.0	60.0	60.0
Over utilization of staff	4	10.0	10.0	70.0
Poor working conditions	10	25.0	25.0	95.0
Inadequate welfare for employees	2	5.0	5.0	100.0
Total	40	100.0	100.0	

Source: Field Survey, June 2012

The table above shows the views of respondents as to the reasons why they intend to leave the hospital. Of the 40 respondents who answered the questionnaire, 24(60%) of the response rate gave inadequate compensation as the reason why staff chooses to leave the organization. Those who chose poor condition of work as the reason they want to leave also constituted 10(25%) of the total response rate. 4(10%) answered they want to leave the hospital because of over utilization of staff and the remaining 2(5%) answered inadequate welfare for employees as the reason why they intend

leaving Toase Medical Center. From the factors above, it can be said that 'inadequate compensation' is a strong push factor that that can make employees leave the organization followed by poor working conditions. Over utilization of staff and inadequate welfare for employees are not strong factors that can push employees out of the hospital.

4.4 Retaining Staff of the hospital

Respondents view on what can be done to retain the staff of Toase medical Center is presented below

Table 4.4 Respondents' view on what can be done to retain staff of the Hospital

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Adequate compensation	23	57.5	57.5	57.5
Good working conditions	5	12.5	12.5	70.0
Availability of training programs for staff	10	25.0	25.0	95.0
Equal utilization of staff	1	2.5	2.5	97.5
Adequate welfare for staff	1	2.5	2.5	100.0

	40	100.0	100.0	
Total				

Source: Field Survey, June 2012

From the table, majority of the respondents 23(57.5%) are of the view that adequate compensation could help retain staff of the hospital. 10(25.0%) of the respondents are also of the view that availability of training programs for staff could help retain the staff of the hospital.

Those who think good working condition can help retain the staff of the hospital comprised of 5(12.5%) of the response rate. Those who think equal utilization and adequate welfare for staff could help retain the staff of the hospital were both represented by only one respondent each constituting 1(2.5%) each of the total response rate. This indicates that adequate compensation is a strong pull factor that can best retain employees followed by availability of training programmes for staff. 'Good working conditions' is also a reason to pull staff to the organization. However, equal utilization of staff and adequate welfare are not strong pull factors to retain staff.

CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

The chapter gives a summary on the findings and analysis made on the data gathered, the necessary recommendations on how to improve working conditions and reduce the rate of staff turnover at Toase Medical Centre, and the conclusion for the entire research.

5.1 Summary of findings

The study was conducted to evaluate the factors that contribute to employee turnover at Toase Medical Centre. Fifty (50) respondents who work at Toase Medical Center were engaged in the study; however, responses were received from forty (40) respondents. These workers were in the form of Professional Nurses, Cleaners, Doctors, Senior professional nurses and others such as the Finance officer, Accountant, Human Resource personnel, Director, Procurement officers and Pharmacist. The following findings were brought to fore after the study.

5.1.1 Motivational factors

The study revealed that the highest average response rate (expressed in percentage) for all the variables under motivational factors was 51.0% which went for strongly agree. This indicates, that respondents strongly agreed on all the statements under motivational factors. The results suggest that the respondents were, in terms of motivational factors, very satisfied.

It could therefore be said that motivational factors have helped retain employees at Toase Medical Center.

5.1.2 Turnover/Intention to leave factors

The study revealed that the highest average response rate (expressed in percentage) for all the variables under turnover/intention to leave factors was 42.0% which went for Unsure. This

indicates that respondents were not sure of all the statements under turnover factors in retaining employees at Toase Medical Center. The results suggest that depending on the action management takes concerning variables under this factor, the hospital could benefit from giving attention to the statements in this section since workers have not taken a stand on those factors.

5.1.3 Retention

The study revealed that the highest average response rate (expressed in percentage) for all the variables under retention factors was 38.0% which went for Unsure. This indicates that respondents were not sure of all the statements under retention factors. Again, the results suggest that depending on the action management takes concerning variables under this factor, the hospital could benefit from giving attention to the statements in this section since workers have not taken a stand on those factors.

5.1.4 Reasons why staff leave Toase Medical Centre

Inadequate   compensation,   over   utilization   of   staff, Poor   working
        conditions,   Inadequate welfare for employees and lack of training programs were the reasons why most staff stop working with the hospital. The study revealed strategies that could be adopted to reduce employee turnover at Toase Medical Centre. These are adequate compensation, availability of training programs for staff, good working condition, equal utilization and adequate welfare for
staff but the most effective is adequate compensation since more than half 53(57.5%) of the respondents chose adequate compensation as the strategy that could be adopted to reduce employee turnover in the hospital.

5.2 Conclusion

Individual factors, such as personality and fit between the person and the job, were not likely factors to predict staff turnover among the respondents as they felt they had the right personality and characteristics to be successful in their jobs, and they saw their jobs as a mission. The study revealed that respondents were satisfied with the motivational factors in place since most respondents strongly agreed on all the statements under motivational factors. The study also revealed that respondents were not sure on how turnover factors and retention factors affect the retention of employees at Toase Medical Center. It is therefore prudent for the management of Toase Government Hospital to see to it that the level of workers' satisfaction with regards to motivational factors in place does not fall and if possible improve upon it. It is also prudent for management of the hospital to see to their retention and turnover factors strategies before they lose highly talented and skilled employees.

5.3 Recommendations

In addition to the strategies revealed in this study as the strategies that could be adopted to reduce employee turnover at the hospital, the following recommendations are also made to management to help retain workers in the hospital.

5.3.1 Motivational factors

These factors are proposed in terms to help improve the level of workers' satisfaction with motivational factors in order to retain more employees at Toase Medica Center. a) Flexible benefits Flexible benefits that are available to help employees to balance work and life demands should be provided and communicated to the employees. It is recommended that the management of the hospitals give attention to both hygiene factors and motivators. Adequate compensation should be provided to workers in order to retain them. Where the management does not have more leverage to affect the remuneration of workers, they should continue to lobby with the government to improve the working conditions of medical personnel.

b) Recognition

Employees should be recognised for the contribution they make to the organisation.. Management has to establish or set up a recognition program for its employees. Recognition can take any form, not only in monetary terms. When an employee has achieved something, a supervisor can call him or her to an office to congratulate the person. Meetings can also be utilised to make others aware of their colleague's achievements. Publications on in-house notice boards, news letters and journals may also help. Employees who obtain higher qualifications should be given more challenging work. This would ensure that the acquired skills are utilised to the benefit of organisation.

c) Conditions of Service

This involves moving a step further from basic conditions of employment to a more personal level which involves the environment in which people work. This means providing work equipment and

facilities so that employees can do their work more easily. Favourable conditions of service have a tremendous effect on the level of pride of employees and the work they are doing.

5.3.2 Intention to leave factors

In terms of intention to leave factors, first of all, it is recommended that the hospitals continue employing people who are well trained and who perceive their jobs as a calling. This will ensure a fit between the person and the job, which is the first requirement for the retention of personnel. Organisations should not only employ to fill a job but also consider a fit between the person and the organisations' culture.

Also, management should give attention to those factors they can control, including communication with staff, fair treatment, recognition for effort and performance, participation in decision making, providing support and encouragement, training and developing staff to prepare them for promotion and enhanced responsibility. In addition, it is recommended that a continuous performance management programme be instituted in the hospital so that employees will have clarity on what is expected of them, that their performance is monitored and recognised and that they get opportunities to develop themselves.

Lastly, it is recommended that the management do an analysis of the environment to avail themselves of the factors that pull people towards and push people away from the hospital or area. Based on the results, strategies should be developed to overcome limitations. This could include requesting the local municipalities and the education department to improve facilities and schools in the environment. An organisational culture of acceptance and encouragement could also compensate for limitations in the environment.

5.3.3 Retention factors

In terms of retention factors, these are recommended.

  a. Strategic Human resource recruitment and retention plan

It is suggested that the management of the hospital, in addition to governmental representatives, and representatives from other government hospitals have a strategic meeting to identify actions that can be taken, within a specific timeframe, and under clear leadership, to attract and retain workers to government hospitals. The hospitals need to have strategic human resources recruitment and a retention plan.

  b. Orientation and socialization

A human resources department has to make it a point that new staff is oriented during the early stages of employment so as to encourage socialisation among other employees. The early stages of employment are most critical because these are the stages where most employees feel that they are neglected and alone.

  c. Training and development

Employees should be given training to improve their skills as most respondents indicated that they did not receive adequate training on the job. It is through training that public hospital managers will be able to create a motivating climate in public hospitals that will enable employees to maximise their potential.

  d. Succession plans

Management should have a succession plan such as a pool of suitable candidates. These people should be interviewed for a post that might exist in the near future but those candidates must not be treated special in the organisation, they will be called when the need exists.

  e. Climate of participation in decision making

Management should involve their employees when they make decisions. Once you involve people in decision-making they will be willing to exert more effort because they were part and parcel of the decision that has been taken and that will increase their level of commitment in the organisation.

f. Regular survey

Regular surveys should be conducted to established employee –needs as well as to measure their perceptions regarding their jobs.

g. Promotion

Opportunities for promotion should be provided. This might include, if there are no posts available to promote valuable employees to, giving an employee a new title that reflects the level of work he or she has achieved.

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APPENDIX

QUESTIONNAIRE

The purpose of this questionnaire is to evaluate the factors that contribute to employee turnover at Toase Medical Centre**.** Answers from respondents will be used for academic purposes only and will be treated with much confidentiality. Please answer the questions as accurately as possible. Please tick the appropriate box provided for each possible answer.

SECTION A: BIOGRAPHICAL DATA

Please supply the following information by making an 'X' in the appropriate block where the options are provided.

A.1. What is your rank?

Professional nurse	
Senior professional nurse	
Chief professional nurse	
Nursing service manager	
Doctor	
Assistant director: nursing services	
Director	
Administrator	
Procurement officer	
Finance officer	
Accountant	
Human resource personnel	

Cleaner	
Other, Please specify …………………………………………………………………..	

A.2 What is your gender?

Male	
Female	

A.3 What is your age group?

20-29	
30-39	
40-49	
50-59	
60+	

A.4 Please indicate your highest qualification?

Bachelor's degree or Diploma	
Honour's degree or equivalent	
Masters degree	
Doctorate	
Other, including clinical speciality. Please Specify ……………………………………………………………	

A.5 In which functional area do you work?

Maternity	
Casualties/Emergency unit	
Medical and Surgical	
Pediatrics	
Administration	
Finance	
Human resource unit	
Records	
Other, please Specify ……………………………………………………	

A.6 How long have you been working at this hospital?

Less than 5 years	
5-9 years	
10-14 years	
15-19 years	
20+	

SECTION B: MOTIVATIONAL FACTORS

Please indicate the extent to which you agree with each statement by putting an 'X' in the appropriate box.

	MOTIVATIONAL FACTORS	Strongly Agree	Agree	unsure	Disagree	Strongly disagree
1	I see my job as a calling					
2	I feel glad when I help to save someone's life					
3	It is important to me personally that I do my job very well					
4	I feel I am making a valuable contribution to the life of people who come to use our services					
5	I am paid fairly for the work I perform					
6	My manager discusses my performance with me					

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7	My job provides me the opportunity to develop my talent					
8	My manager motivates me to do a good job					
9	My needs are taken into consideration at work					
10	I am provided with the necessary resources to complete my task successfully					
11	I am recognized for my performance					
12	I have job security					
13	My colleagues are supportive					
14	My job encourages self or personal development and creates a career path					
15	I feel proud to work at this hospital					
16	My manager encourages teamwork					
17	I feel committed to the hospital where I am working					

SECTION C: TURNOVER/ INTENTION TO LEAVE FACTORS

Please indicate the extent to which you agree with each statement by putting an 'X' in the appropriate box.

	TURNOVER/ INTENTION TO LEAVE FACTORS	Strongly Agree	Agree	unsure	Disagree	Strongly disagree
1	The brain drain is affecting labour turnover among staff of the hospital					
2	I am considering finding a job overseas					
3	My organization does not care about my welfare					
4	I am considering applying for a job at another hospital in Ghana					
5	I would prefer working in a bigger city rather than here					

6	My organization does not allow employees to develop themselves					
7	I will accept almost any type of job assignment elsewhere apart from working for this hospital					
8	My organization does not provide a better working environment for me					
9	I am not considering leaving my job					
10	Workers efforts are not recognized at the hospital					
11	I am clear of the vision and mission of the hospital, where the organization is going and what it stands for and as such do not think of staying for long					
12	I am not offered good health care plans and flexible working hours					
13	My organization offers poor conditions of services					
14	There is poor leadership role at the hospital					
15	I do not have interest in the job I currently do					
16	I do not have a challenging job					
17	There is non-competitive compensation and differences in compensation package among staff					

SECTION D: RETENTION FACTORS

Please indicate the extent to which you agree with each statement by putting an 'X' in the appropriate box.

	RETENTION FACTORS	Strongly Agree	Agree	unsure	Disagree	Strongly disagree
1	My organisation's management makes plans to ensure that there are enough medical personnel employed at the hospital					

2	My organisation's management tries their best to ensure that employees will not want to leave the organization					
3	Managers in my organisation actively addresses the shortage of staff					
4	My organisation's management carefully selects and employs people who are well suited for the job					
5	Only medical personnel who have the necessary skills are employed in my organization					
6	Flexible working arrangement are offered to attract and retain staff in my organization					
7	The hospital management addresses the work related issues of dissatisfied staff					
8	Organizational policies related to my job are adequately communicated to me					
9	New staff receive adequate orientation to help them settle down in my organization					
10	New staff receive adequate on the job training in my organization					
11	A climate of participation in decision making is created in my organisation					
12	The hospital mostly promotes from within if possible					
13	The hospital facilitates the implementation of its policies, systems and procedures					
14	There is a high morale among staff of the hospital					
15	The hospital challenges employees and recognize employee success					
16	The culture of my organization encourages me to be committed to the organization					
17	There is an open communication in my organization					
18	There is a feeling of trust among my organization's members					

SECTION E;

Please tick from the following to express your view on what the reasons are for staff to leave the hospital.

1. Inadequate compensation ☐

2. Over utilization of staff ☐

3. Poor working conditions ☐

4. Inadequate welfare for employees ☐

5. Lack of training programs ☐

In your view what can be done to retain staff of the hospital

1. Adequate compensation ☐

2. Good working conditions ☐

3. Availability of training programs for staff ☐

4. Equal utilization of staff ☐

5. Adequate welfare for staff ☐

THANK YOU VERY MUCH FOR YOUR KIND CO-OPERATION