AN INVESTIGATION ON FACTORS AFFECTING THE RETENTION OF EMPLOYEES AT KITWE CENTRAL HOSPITAL (KCH) – ZAMBIA

Jane Matindo  
Graduate of the Regent Business School, Durban, Republic of South Africa, Working and Residing in Zambia

Shaun Pekeur (PhD)  
Senior Academic and Dissertation Supervisor Stationed at the Management College of Southern Africa (Mancosa), Durban, Republic of South Africa

Anis Mahomed Karodia (PhD)  
Senior Academic and Researcher, Regent Business School, Durban, Republic of South Africa

ABSTRACT

The retention of employees is becoming a major challenge in the Zambian Health Sector in this dynamic era of globalisation and competition. Health workers are migrating due to greater opportunities in the private sector as well as abroad due to the economic status of the country and other factors influencing them. Management are finding it challenging to manage employee retention and it is due to this fact that keen interest was drawn by the researcher to carry out this study. The main aim of this study is to investigate on the factors affecting the retention of employees at Kitwe Central Hospital, a Public Hospital in a town called Kitwe in Zambia. It further aims to provide recommendations to management on strategies that can assist to retain employees at the Hospital.

Key Words: Retention of Employees; Challenges; Health Sector; Workers; Migration; Globalization; Competition; Management; Employee Retention; Strategies

INTRODUCTION

Employees are the most vital resource that contributes effectively towards the attainment of goals and objectives of an organisation by utilising other resources to produce goods and services. Thus, it is a challenge for managers to keep those employees that are most valuable to an organisation.

The growth in demand for skilled workers has increased due to globalisation and the liberalisation of trade in services.

Globally, there is a challenge of an imbalance in the distribution of trained health workers in both developed and developing countries as estimated (WHO, 2010:7) at a deficit of more than 4 million trained health workers due to migration abroad and also an inadequate supply of health trained graduates. Globalisation has greatly enhanced the mobility of skilled
individuals, as employees are exposed to global learning and become more demanding in regards to their jobs, thus, leading to employee turnover in organisations.

This study focuses on the health sector situation in Zambia. The country is currently facing a significant shortage of health workers, which in turn is affecting the few that are available in that, they are few, overworked and have become de-motivated thus affecting the attainment of the Millennium Development Goals - MDGs of the health sector (ZAMFOHR, 2011:16). Despite the Government’s introduction of the Zambia Health Worker Retention Scheme - HWRS, the shortage of health workers remains (ZAMFOHR, 2011:16) the same due to a high rate of turnover.

In 2006, a number of new health centres were opened, unfortunately with no health workers to run them, averages of up to 40 patients being served by one nurse, resulting in gross work-overload, job dissatisfaction by workers (ZAMFOHR, 2011:18) and poor service delivery. This study will be based on retention factor assessment at KCH (Kitwe Central Hospital) which is a public hospital in the city of Kitwe, Zambia.

**Research Objectives**
The research objectives of this research are:
- To investigate, the factors affecting retention of staff at the hospital.
- To determine, the strategies currently being used to retain employees.
- To investigate, the employee perceptions about the retention strategies of the Hospital.
- To make recommendations to management on how they can effectively retain employees.

**Research Questions**
The following research questions have been identified.
- What are the factors affecting retention of staff at the Hospital?
- What strategies are currently being used to retain employees at the Hospital?
- What are employees’ perceptions about workforce retention strategies at the Hospital?
- Which strategies can be used to effectively retain employees at the Hospital?

**LITERATURE REVIEW**

**Retention defined**
Kaila (2012:341) defines retention as, the effort by an employer that encourages employees to remain within the organisation for a maximum period of time in order to meet organisational objectives. Retention of employees in an organisation is important in that, it prevents:
- Turnover costs – including hiring costs, training costs and productivity losses which is estimated by experts as about 25% of the average employee salary;
- Loss of company knowledge – when employees leave, they carry with them valuable knowledge about the organisation, customers, current projects to the organisation’s competitors after spending a lot of money and time on the employees with an expectation of a future return thus the investment is lost;
- Interruption of customer service – some customers and clients do business with a company because of the relationships they have developed with people and thus if those people leave, the clients and customers may no longer be willing to conduct business with the organisation which then suffers a loss;
- Loss of goodwill of the company- as it is usually maintained when the attrition rates are low. When retention levels are high, potential employees may join the organisation;
• Turnover leads to more turnovers – when employees leave, their colleagues are also influenced to leave.
• Loss of efficiency – occurs as time is lost in hiring and training new workers, and loses efficiency as the new employee may be less efficient than the previous one (Kaila, 2012:341).

Factors affecting Retention

Global Economic influences and National Economic influences

• Global economic influences - The increase in international capital flows due to globalisation have led to an increase in the global flow of labour (Burmeister, 2007:18), thus many countries are competing to attract and retain skilled workers in the international labour market, and as such most employees are migrating to countries of advanced economies as they transfer their skills to the highest bidder or an attractive location.
• National economic conditions - turnover is usually high during periods of prosperity and growth (when jobs are many) and is low during recessions (Grobler et al., 2002:610). Health worker migration greatly affects the health system causing a shortage in workforce, weakening the public health system and thus affecting the delivery of health services in rural areas as well as in the country as a whole (Gow et al., 2013:1).

Inadequate Compensation (poor salaries and incentives)

Money in the form of pay or any other form of remuneration is the most obvious extrinsic reward (Armstrong, 2010:267) as it provides a means to achieve different types of needs such as: basic needs for survival and security; self esteem and status. It is therefore an important factor in attracting people to an organisation and influences their retention.

The perception of low monetary compensation (salaries, rural hardship allowance, housing, scholarships, childcare allowances, travel subsidies, health insurance, loan repayment schemes etc) has influenced the entry and exit of health workers in and out of, and within the labour market (Herbst et al., 2011:69; Kaila, 2012:341).

Zambia health worker salaries have historically been very low as compared to other African countries and as such, health workers often seek better paying jobs in developed countries (Gow et al., 2011:4).

Governments need to pay higher salaries to health workers and ensure they are more competitive and responsive to international health labour market dynamics, to stop them from migrating (Kamwanga et al., 2013:19).

Financial benefits should be expanded so as to allow for an individual to generate income other than depending on the salary (Araujo & Maeda, 2013:8).

Working conditions

Working conditions of an organisation play an important role in an individual’s decision to stay or leave the organisation.
Herzberg (in Jones & George, 2009:474) proposed a need based theory which focused on two factors: - outcomes that can lead to high levels of motivation and job satisfaction and outcomes that can prevent people from being dissatisfied. These factors are: motivator needs (those related to the nature of work and how challenging it is such as interesting work,
autonomy, responsibility, growth and development, accomplishment, achievement); and
hygiene needs (those related to the physical and psychological context into which work is
performed such as working conditions, pay, job security, good relations with co-workers and
effective supervision). To have a highly motivated workforce that is satisfied, Herzberg (in
Jones & George, 2009:474) suggests that managers should ensure that motivator needs are
met.

The Zambian health sector is faced with a perception of deteriorating working conditions,
which is a situation faced by other African countries as well (Vujicic et al, 2009). Public
health institutions have severe working conditions, poor equipment, inadequate supply of
drugs and lack support from management which makes workers feel isolated and neglected.

The lack of ensuring a protective and safe work environment experienced by health workers
in Zambia is a concern, as safety in the workplace is not highly placed in the allocation of
resources for healthcare delivery, which is a turn off towards school leavers who become
discouraged to join the medical profession (Ngulube, 2010:31), as well as those already in the
sector.

Risk and fear of infection as a result of poor ventilation systems, cause a risk of
communicable diseases on health workers (Pendukeni, 2004) as well as unprotected and
unsafe work procedures affect their retention.

Therefore, it is essential for managers to ensure that, working conditions are continuously
improved as good working conditions are a motivating factor for employees and thus affect
their retention.

Opportunities and market demand (labour market conditions)

Local labour market affects turnover (Grobler et al., 2002:610) as it is determined by
economic conditions and the supply-demand ratio for types of professions and occupations.

Potential demand by professions other than the health sector, for people trained and
experienced in the health sector adds to the pressure on the supply of health workers. An
employee may get an attractive job offer in terms of responsibility, remuneration, growth and
learning which may lead him to leave his current job (Kaila, 2012:341).

Education system - supply and demand of skills

The way in which health workers are trained, the skills they acquire and the situation they are
exposed to during the training period influence their future practice choices as well as
location (Araujo & Maeda, 2013:10).

Gow et al. (2011:4) explain that despite the MOH intentions to train, recruit and retain
employees, their achievement fell short due to: lack of funding for health training institutions;
inadequate training and accommodation facilities, equipment, materials; and inadequate
numbers of teaching staff.

Low production of skilled employees and competency levels results from the inadequate
training capacity of health training institutions (Herbst et al., 2011:67).
Job dissatisfaction
Armstrong (2010:264) defines job dissatisfaction as, the negative attitudes and feelings people have about their jobs. The level of job satisfaction is affected by intrinsic and extrinsic motivation factors and the extent to which people succeed or fail in their work. Extrinsic factors include job security, physical conditions of work environment, pay and benefits; while intrinsic factors include recognition, promotion, freedom, learning opportunities, nature of job (Ali Shah et al., 2010:171) and status. When one’s job responsibilities don’t come out to be the same as he expected, it leads to job dissatisfaction (Kaila, 2012:341).

These unrealistic expectations of a job may cause some employees to resign just after taking up a new job, when they realise that what they expected of their job is not what they were promised by their employers, or what they expected in terms of conditions of work (Schultz & Schultz, 2006:243). Adams developed the equity theory in the 1960’s that focuses on people’s perceptions of how fair (the justice, impartiality and fairness to which all organisational members are entitled) their work outcomes are in comparison to their work inputs (Jones & George, 2009:476).

Employee motivation is influenced by comparing one’s income-input ratio to a referents (another person or group of people, oneself in the past or one’s expectations) ratio (Jones & George, 2009:476). Equity is explained as when one perceives that his outcome-input ratio is equal to that of a referent, whereas inequity (lack of fairness) is when the ratios compared against each other are either less than (underpayment inequity) or greater than (overpayment inequity) the referent’s ratio (Jones & George, 2009:477). These inequities bring about tension amongst employees and may motivate them to try and restore equity by lowering their inputs (reducing work hours), putting less effort in their job, absenteeism or soliciting for a raise or promotion (Jones & George, 2009:477). People are motivated when they perceive that they are being treated equally - when their outcomes and inputs are in balance and thus managers of effective organisations must realise the importance of equity and must continuously strive to ensure that employees believe they are being equally treated as suggested by Jones & George (2009:478).

Bakuwa et al (2013:170) also suggest that organisations need to take deliberate efforts to assess the levels of employee satisfaction through employee satisfaction surveys often, so as to identify areas of satisfaction and dissatisfaction, as part of their retention strategy.

Poor organisation structure
The bureaucratic and unresponsive management systems in the Zambian health sector influences retention of health workers (Gow et al., 2011:5). The Ministry of Health has been unable to fill all funded positions due to recruitment inefficiencies as recruitment is centrally managed with significant involvement from other agencies.

Ineffective management influences retention of health workers (Gow et al., 2011:5) the lack of effective and regular assessment of health worker satisfaction; ineffective grievance handling, and the inability to offer flexible benefit packages to suit employee needs; and lack of in-service training opportunities for skill and promotion.
Therefore, these inefficient and ineffective management procedures linked to centralised human resources decision making is one contributing factor to retention of Health workers (Herbst et al., 2011:63).

**Work practices by managers**

Trust and support in co-workers, supervisors and managers is an important factor that influences an individual to stay in a job, thus luck of these two elements may affect the retention of employees (Kaila, 2012:341).

Employees define a great work place as, where they trust the people they work for, have pride in their jobs and enjoy the people they work with (HRMID, 2013:14) thus, it is important for superiors to talk to people in a respectful way and keep them informed of what is happening in the organisation so as to let them feel valued and build up trust in them.

When employees (Kinear & Sutherland, 2001:17) feel they need space and freedom to work independently, or plan and execute work the best way they choose, is inhibited by strict policies that do not encourage innovative thinking made by managers, can affect their retention.

Weak retention policies and programs, also contribute to the retention of health workers (Makasa, 2008:2).

Public sector employment is less desirable than private sector work due to: poor governmental adherence to regulatory frameworks for safer working conditions; lack of programmes supporting fair and manageable workloads; unchanging job descriptions despite changes in practices and use of more advanced technologies; high levels of job demands and stress; and inflexible work arrangements (Gow et al., 2011:8).

**Job security**

Watson (2012:2) in his study on employee retention, poses practices and programs on how businesses are currently being run, in that, there is a wide increase in stress and anxiety of the future of an individual’s financial state, retirement security, current saving rates and capital market performance throughout the world.

Security is currently presiding over almost everything including a small salary increment in exchange for a guaranteed retirement benefit that doesn’t rise or fall with the market. Salary and job security tops the list of what people want when considering taking a job, followed by opportunities to grow their career and learn new skills (Watson, 2012:2).

Employees that (Grobler et al., 2002:610) perceive a low degree of job security in their jobs may decide to go where they perceive to have a greater degree of job security.

**Personal mobility**

Long & Ferrie (2003:1) discuss labour mobility as, the change in the location of workers across physical space from one region to another – within the same country or across national borders (geographical mobility); and across a set of jobs (occupational mobility), moving
from one employer to another involving a change in an individual’s job profile or career level.

The extent to which one is bound to an area because of family or social ties contributes to a persons’ decision to stay or leave a particular job (Grobler et.al, 2002:610).

Mobility allows for improvements at an individual level, in the economic circumstances of those whose skills or aspirations are a poor match with the job or location they find themselves in. mobility rates are high in people that are young, single unemployed, and unsatisfied with aspects of their current employment and national economic status (Long & Ferrie, 2003).

Demographic factors that may be linked to high turnover such as: age (the young are more prone to quit their jobs); or those with large families and huge family responsibilities are more stable; or sex- male or female; and responsibilities, (Grobler et.al., 2002:610) may remain in the job.

**Work overload**

Unreasonable workloads are some of the reasons of staff dissatisfaction in health institutions (Ngulube, 2010:31) due to shortage of skilled workers due to migration, high increasing burden of disease and low salary levels, leaving employees facing long hours of work, with an increase in number of patients to attend to.

Stress due to over work may lead to work-life imbalance and in turn lead one to leave the job (Kaila, 2012:341).

Watson (2012:7) recommends that, to manage stress levels from work overload at work, there must be a healthy balance between work and personal life, which can be done by engaging enough employees to do the job right and also by flexible work arrangements.

**Un-matching personality traits between job characteristics and individuals**

Un-matching personality traits between the individual and the job characteristics (Lanyon, 2007:45) might lead to dissatisfaction and to turnover.

A person may be fit to perform a certain type of job which matches his personality. If such a person is given a job which mismatches his personality, he may not perform it well and may try to find out reasons to leave (Kaila, 2012:341).

Liao & Lee (2009:32) in their study on job involvement and personality traits recommend that, when an organisation recruits new employees or encourage existing employees to work together, managers should recognise personality dimensions of individuals to assess, develop encouragements and ensure effectiveness and efficiency in achievement of work goals. They confirm that neurotic employees are less efficient in their work as they engage in inattentive behaviours such as careless errors, failing to follow work norms or producing ignorant mistakes.
Employees with higher extroversion, openness, agreeableness and conscientiousness tend to exhibit high levels of sociability, cooperation, broadmindedness, performance have a positive relationship with job involvement. They tend to expend more mental and physical effort during working hours, more focused on their jobs, get along with colleagues and customers, inquire about anything they don’t understand immediately, task oriented and tend to have a high level of job satisfaction and a lower tendency of turnover (Liao & Lee, 2009:32).

Organisations should establish a mechanism to identify the various aspects of personality to determine job satisfaction through employee behaviour and responses towards their job and as such, employees that have positive feelings towards work are willing to commit to the organisation and are expected to stay with the organisation for a longer period (Liao & Lee, 2009:33) as they are optimistic about the future of the organisation.

**Opportunities for Career Advancement**

Career opportunities include the internal (within the same organisation through promotion) and the external career options (in another organisation) that an employee may have (Van Dyk et al., 2013:61).

Public sector employment is reported to offer an unattractive career structure and that, employees remain in the sector due to stability of jobs despite inadequate means to improve skills, add new experiences, or promotions. Thus public sector health workers remain in their jobs meanwhile adding private assignments (Gow et al., 2011:9). When there are neither, no learning or growth opportunities in a person’s job, his job and career becomes stagnant (Kaila, 2012:341).

Employees become dissatisfied when they remain at lower levels in an institution for long periods. They need access to career and personal growth opportunities and so, if their institution does not offer such opportunities, it is likely that such employees leave their jobs and go to institutions offering development and promotion opportunities (Masangu & Mpofu, 2013:887).

Jones & George, (2009:480) define learning as, a relatively permanent change in knowledge or behaviour of a person brought about by, practice or experience that occurs when people in organisations learn to perform certain behaviours, at a higher level, to receive certain outcomes. They (Jones & George, 2009:480) explain that operant conditioning theory (learning to perform behaviours that lead to desired results and learning not to perform behaviours that lead to undesired results) and social learning theories (learning and motivation influenced by peoples thoughts and beliefs and their observations of other people’s behaviour) provide the best guidance to managers in pursuit of a highly motivated workforce. They further explain that, operant conditioning theory (Jones & George, 2009:481) indicates four tools which managers can use to motivate employees which are by: positive reinforcement- giving workers outcomes they desire when they perform organisationally functional behaviours for example, pay, recognition, promotion; negative reinforcement-eliminating or removing undesired outcomes when they perform organisationally functional behaviours for example, threats, criticism; extinction - curtailing the performance of dysfunctional behaviours by eliminating whatever is reinforcing them for example, avoiding non-work-related conversations; and punishment - administering an
undesired or negative consequence when dysfunctional behaviour occurs for example: verbal warnings, suspensions. Social learning theories (Jones & George, 2009:483) indicate that, motivation comes from direct experience of rewards and punishment as well as from a person’s thoughts and beliefs, explaining how people can be motivated by: vicarious or observational learning- observation of how other people behave, where a learner watches a model and is reinforced to do so; self-reinforcement - how people can be motivated to control their behaviour themselves by setting goals for themselves; self-efficacy – how people’s beliefs about their ability to successfully perform a behaviour affect motivation such as past performances and accomplishment by oneself or others. The greater the self-efficacy, the greater the motivation and performance is (Jones & George, 2009:484).

An organisation must therefore, establish a supportive learning and working climate by guidance and appreciation, ease on pressure of work, empowerment and responsibility, choice in job tasks and development, provision of challenging and meaningful tasks and advancement and development opportunities influence employee retention (Adams et al., 2008).

**Lack of motivation**

Motivation is defined by Jones & George (2009:464) as, the Psychological forces that determine the direction of a person’s behaviour – level of effort, persistence of an individual in an organisation.

Maslow proposed a theory of human motivation in 1943, which indicates that, people seek to satisfy five kinds of needs, arranged in a hierarchy from the lowest to the highest level which are: physiological needs - basic needs such as food, water, shelter; safety needs- needs for security, stability, safe environment; belongingness needs - needs for social interaction, friendship, love and affection; esteem needs - needs to feel good about themselves and their capabilities, respect by others, recognition and appreciation; and self-actualisation needs - needs to realise one’s full potential as a human being (Jones& George, 2009:472). Figure 1 below, shows Maslow’s hierarchy of needs.
He argued that, the lowest needs must be met before trying to satisfy higher order needs up in the hierarchy and that, once a need is satisfied, it ceases to be a source of motivation.

Alderfer combines Maslow’s five hierarchy of needs into three categories (Jones & George, 2009:473) as he proposed that, needs at more than one level can be motivational at the same time and summarises them into three universal needs that motivate a person’s behaviour which are: the need for existence- basic needs for food, water, clothing, shelter, a secure and safe environment; the need for relatedness- having good relationships with people, sharing thoughts and feelings, an open two-way communication; and the need for growth- self-development, creative and productive work.

It is thus, important for managers to: determine the needs their subordinates are trying to satisfy at work; ensure that they receive outcomes that satisfy these needs when they perform well; and align the interests of individuals with those of the organisation as a whole (Jones & George, 2009:473).

A situation where supervisors do not appreciate the work one does, an employee may feel de-motivated and lose interest in the job (Kaila, 2012:341). Employees that feel they are being listened to and are given recognition (praise) for their unique contributions are more likely to increase their productivity, increase their engagement with their colleagues and remain with the organisation for longer (Kgomo & Swarts, 2010:246).

Sinha & Sinha (2012:151) indicate that, talented employees have more choices than ever before and as such, they are likely to leave if they are not satisfied with their employer or unrewarding job content thus, there is an increase in impact of losing individuals with such perceptions. It is thus important to rediscover the role and purpose in work to be able to understand the new work and motivation of today’s employees as organisations now find themselves competing to attract and retain employees based on the meaningfulness of their jobs (Sinha & Sinha, 2012:151).

Physical and Psychological Violence
Shortage of resources to provide for medicines, equipment and supplies, may end up being blamed on health workers, which may affect them psychologically, when there are accusations of theft of medicines and doing shoddy work; as well as physical abuse from grieving relatives of patients that die as a result of such shortages (Ngulube, 2010:31) may affect their retention. It is thus important for managers to take up measures to reduce any form of violence in the workplace in order to retain health workers.

It is thus essential to create an environment that is energising to work in, as it promotes physical, emotional and social well-being as well as to build a culture that focuses on worker’s health, safety and security, both physical and emotional (Watson, 2012:4).

Retention strategies
Strategy is defined as top managements plan to develop and sustain competitive advantage to enable an organisation’s mission and goals be fulfilled as defined by Thompson and Strickland (2003:3).
Every organisation ensures that they put in place various strategies and policies to assist them in retention of key and talented (skilled) employees thus, their human resource practitioners have the responsibility to ensure a long-term loyalty of highly skilled employees is achieved, as they realise that the labour market is constantly changing.

Mitchell et al. (2001:1102) propose a retention model known as the job embeddedness theory. They define it as, a broad constellation of psychological, social and financial influences on employee retention. These influences are on the job and the work environment and are like strands in a web, or net in which a person can become stuck, as described by Mitchell et al. (2001:1102). They further explain that, individuals with a greater number of strands have a greater difficulty in leaving their job.

Job embeddedness has three dimensions which are: links, fit, and sacrifice. These further have two sub-dimensions: organisational, and community based on whether the influences are on-the-job or off-the-job (Mitchell et al., 2001:1103).

1. **Links** – the degree to which a person connects to other people, and engages in activities in the organisation. These are considered the strands of a web and the number of links, attach a person to his family in a social, psychological and financial web that includes, colleagues, friends, groups and the community in which they live. The stronger the links are the more embedded the employee may become (Mitchell et al., 2001:1103) and the more bound he is to a job, the supervisor and team.

2. **Fit** – an employee’s perception of compatibility with the organisation and surrounding community in terms of personal values, goals, knowledge, skills and abilities, climatic conditions, religious beliefs and entertainment activities. The better the fit with the organisation and surrounding community, the stronger one’s ties to the organisation is (Mitchell et al., 2001:1103) and the higher the retention.

3. **Sacrifice** – the tangible or intangible benefits that a person may have to give up in case of leaving the organisation. These may be psychological, social or material cost of leaving one’s organisation and community such as: losing colleagues, interesting projects, desirable benefits, and losing local club membership (Mitchell et al., 2001:1104).

This model thus, enlightens managers on which areas of an individual’s perception of his job may need to be considered when formulating retention strategies as these three dimensions contribute in influencing employee retention.

Armstrong (2010:201) indicates that the analysis of the number of people leaving and their reasons why they leave provides information that show whether any action is required to improve employee retention rates.

Armstrong (2010:202) outlines some strategies that can be used to get people to stay such as:

- Developing commitment to the job through job design by organising work tasks around projects that employees can identify more readily than the organisation as a whole;
- Designing jobs to maximise skill variety, task significance, autonomy, control over their work, feedback, provision of opportunities for learning and growth and customising some roles to meet the needs of an employee;
- Ensure that selection and promotion criteria, matches the capacities of individuals to the demands of their work requirements;
- Encouragement of the development of social ties within the organisation;
- The improvement of work-life balance by the development of policies that include flexible work schedules to support employees;
• Giving employees proper training and induction when they join the organisation to enable them to adjust to their new jobs;
• To select, brief and train managers and team leaders so that they can appreciate the positive contribution they can make to improve retention through ways they can lead their teams;
• To eliminate unpleasant working conditions as well as reduction of stress on employees.

Sinha & Shukla (2013:37) recommend retention strategies and tools that could help organisations which are:
• Selecting the right candidates – ensuring that the people hired are fit to succeed for the position to increase their job satisfaction and retention;
• Communication and inclusion in decision making – of new policies or initiatives that affect employees to ensure no one feels left out of the loop, create a sense of involvement and to generate new ideas and perspectives that management may have never thought of;
• Encourage employees to share their knowledge with others – to increase the amount of information and value of each individual through mentoring programmes;
• Balance work and personal life – by allowing for some time off attending to family issues to instil loyalty and retain the employee;
• Give recognition for hard work – to let employees know their efforts are appreciated and recognised to increase their morale and retention;
• Provide opportunities for career growth and development – to allow them acquire new skills and knowledge they require in their jobs and also offer promotions;
• Provide quality supervision and mentorship – by treating them respectfully, courteously and friendly, set clear expectations of performance as well as give feedback on performance, and provide a working environment that allows for growth and success;
• Clearly define what is expected of team members – lack of clarity in terms of job expectations can cause fear and anxiety among employees;
• Give fair and equitable treatment to all employees;
• Employee reward programmes in monetary terms as well as performance-based bonus, employee loyalty bonus and employee referral plans;
• Accountability – creating an environment that demands accountability and transparency to give them a sense of belonging and allow for emotional bonding amongst employees;
• Fun and laughter at the workplace – to enable employees to work with interest and enthusiasm that reduces the work pressure and attrition levels.

Strategies by the Government of Zambia

The Government of Zambia has implemented several intervention programs for the retention of health workers which will be discussed in this section.

The Zambia Health Workers Retention Scheme (ZHWRS), an incentive programme which aims at attracting, retaining, increasing the availability of health workers in rural areas to solve problems of staff shortage and in-equal distribution in 2003, which was established by the Government of the Republic of Zambia partnering with the Netherlands (Makasa, 2008:4) introduced incentives such as, monthly hardship allowances, housing rehabilitation, vehicle loan and facility incentives.

The International Regional Co-operation (IRC) introduced incentives within Zambia to persuade health workers to remain (Makasa, 2008:4) within the country or return to Zambia;
a SADC initiative that bans the recruitment of health workers amongst Member states; Britain tightening laws to discourage the immigration of health workers as well as restricting the granting of work permits to foreign health workers unless they can prove that no British candidate can be found suitable enough to take up the job; and the WHO intervention to help Africa boost salaries and improve recruitment and training.

The task shifting project, a WHO initiative which aims at increasing the number of health workers with response to the HIV/AIDS pandemic by relocating tasks that are normally done by doctors and nurses to lower rank healthcare workers (Makasa, 2008:4) has been implemented.

The ministry also introduced the engagement of expatriate and voluntary staff as a way to deal with the shortage of staff and also the low annual production of health workers (Ministry of Health, 2011:20). These voluntary health workers are provided with short-term training for about two to three weeks and are employed throughout the country. In addition to this strategy, the ministry has developed and begun to implement the Community Health Assistant Strategy (Ministry of Health, 2011:20) – CHAS which commenced in June 2011, with training programmes hosted by the Ndola Central Hospital.

The ministry of health from 2005-2010 implemented several initiatives to increase the annual number of graduates from health-related programmes from public, mission and private institutions (Ministry of health, 2011:20) by 110% increase, though there still exists a wide gap between the number of health workers and the required number in the health sector.

The increase in the number of Training institutions from 2005-2010 the number of health training institutions was thirty-seven in Zambia (Public, Mission and Private Institutions) as stated by the Ministry of Health (2011:21). The second medical school in Zambia was opened at the Copperbelt University in November 2011, which demonstrates Zambia’s serious commitment to invest in its future health workforce in collaboration with international partners to strengthen the workforce and retain them (AGHD, 2012:5).

The change in leadership and management during the re-structuring of the Ministry in 2006, where it was decided that, only medical doctors and medical specialists should be hired for senior management positions such as the District Medical Officers- DMOs, the Provincial Medical Officers- PMOs and Medical Superintendants- MSs, who are to be trained for management and leadership through the Zambia Integrated Systems Strengthening Programme (ZISSP) in conjunction with academic institutions such as the National Institute for Public Administration- NIPA (Ministry of Health, 2011:22).

The Ministry of health in 2008 developed a four year national training operational plan with a view to increase the national capacity to train both tutors and health workers as a solution to the insufficient production of health workers (Ngulube, 2010:24).

The Ministry of Health in partnership with the Clinton Health Access Initiative (CHAI), focuses on the need for health workers in Zambia by increase and expansion in health training school enrolment by 2018 (Tjoa et al., 2010:4).
Another retention measure was to reduce the number of nurses leaving the workforce to go back to school to get advanced training also helps reduce shortage (Tjoa et al., 2010:6).

The UK through its development of codes of practice, bilateral agreements / memos of understanding and position statements regarding health workers from countries such as Zambia is no longer actively recruiting health workers. Britain enacted new laws under the European Union that discourages the immigration of health workers, by giving work permits only to foreign nurses if they can prove that no suitable British or EU equivalent exists (AGHD, 2012:4) thus contributing to the retention of health in Zambia.

The MOH is currently piloting retention schemes that provide monetary and working conditions is a strategy that can improve retention, as health staff who are operating under desirable working conditions and well equipped to do their job are more likely to have higher job satisfaction and remain in the public sector health system (Tjoa et al., 2010:9).

The NHRH SP (National Human Resources for Health Strategic Plan 2011- 2015) will aim to follow the following strategies to obtain its objectives (Ministry of Health, 2011:29) to: increase the number of the health workforce and introduce more effective health workforce information systems to enable the health sector set expansion targets to meet the needs of the workforce; re-define staff posting and establishment based on need by developing a needs-based model to help determine the required number of health workers and funding needed at each health institution; distribute human resources equitably and ensure appropriate skills mix (Ministry of Health, 2011:30) and improving working conditions and incentives for health workers to achieve the Millennium Development Goals; implementing and enforcing bonding schemes for all pre- and in-service trainees by working with stakeholders to ensure a rights-centred policy document to enforce compulsory service and ensure that a document system with enforcement guidelines is in place to manage the bonding scheme; improve conditions of service to attract and promote retention of health service providers in rural and remote facilities by continuously participating actively in committees aiming to improve remuneration packages as well as working conditions, the importance of health workers and the services they provide (Ministry of Health, 2011:30).

Ngulube (2010:34) outlines initiatives that have been introduced in the Zambian health system - the Positive Practice Environment Strategies (PPE), which focus on: improved performance management by putting in place a new management system to be able to track performance and productivity, revise job descriptions and develop and implement performance management package assessment tool for health workers; effective leadership through the Human Resources for Health Technical Working Group- HRHTWG, which is sub-divided into seven task groups that meet regularly and deal with aspects concerning: health worker retention, information systems, training, recruitment and community health workers (Ngulube, 2010:34).

The Zambia Forum for Health Research –ZAMFOHR (2011:20) in their evaluation of the Zambia Health Worker Retention Scheme (ZHWRS) effectiveness, which indicated that it was effective in retaining of doctors, was later changed to involve other professionals as well, though the incentives offered were at different scales which were perceived unfair. Its administration was centrally implemented, which led to frustration at district and provincial levels as information on the scheme, roles and responsibilities, decisions on areas to be
targeted were not clear. To retain and motivate staff and improve health management systems decentralisation of the administration of the health worker retention scheme was an option that was considered to solve this problem (ZAMFOHR, 2011:20).

Another policy option recommended by the forum (ZAMFOHR, 2011:21) is to put in place a monitoring and evaluation plan, which involves: managing and assessing performance to effectively manage outcomes and outputs; fine-tuning re-orienting and planning; measuring progress and success; and to review incentive value and make adjustments in order to improve the performance of any programme.

Target Population

Collis & Hussey (2009:209) define population as, a body of people or collection of items (objects) under consideration for statistical purposes.

The study encompassed a population of 352 employees of Kitwe Central Hospital.

Limitations of the Research

Limitations of a study describe weaknesses, or deficiency (Collis & Hussey, 2009:125) found in the research.

The study was limited by insufficient time, finances, long procedures of the organisation and the fact that it was limited to one Institution.

RESULTS, DISCUSSION AND INTERPRETATION OF FINDINGS

Interpretation and Discussion of findings

The primary data was collected from questionnaires from a sample size of 105. The number of questionnaires that were completed and returned was 102 out of 105, a response rate of 97%.

Findings from the questionnaire responses are presented below.

Section A

Question 1

The number of years worked for the organisation.

The above figure 2 shows the responses of the number of years that employees have worked for KCH. Employees that have worked for less than a year are 9% of the total respondents, those who have served between 1 and 10 years recorded the highest which was 53%, 11 to 20
years were 12% and those who have served for more than 20 years 26%. This shows that the retention rate at KCH is increasing considerably as shown by the highest number of respondents who have served between one to ten years. This could be that they perceive their jobs are secure and decide to stay longer than a year (Grobler et al., 2002:610).

**Question 2**  
Are you happy with your current job?

**Figure 3**

The above figure 3 indicates that 88% of the respondents are happy with their jobs while 12% of them are unhappy. Most employees seem to be happy with their jobs which could be as a result of them being motivated. Kgomo & Swarts (2010:246) indicate that employees stay longer in the organisation when they are motivated through recognition which leads to satisfaction.

**Question 3**  
How would you describe working in this organisation?

**Figure 4**

The above figure 4 shows how the respondents feel about working for KCH and shows that 9% feel it is interesting, 6% feel that it is frustrating, 82% feel it is challenging and 3% feel
that it is enjoyable. The highest percentage 82% represents respondents that feel that their work is challenging this could be that, management has made sure that their jobs are redesigned in order to make them challenging (Armstrong, 2010:202).

**Question 4**
Would you love to work elsewhere?

![Figure 5](image)

The above figure 5 shows the responses of employees with regard to if they would like to work anywhere else and it shows that 79% would love to work elsewhere while 21% would love to stay at KCH. This could be that they are not satisfied due to some working conditions they are faced with as indicated by Vujic et al. (2009) that the Public health sector is faced with a perception of deteriorating working conditions.

**Section B**
What do you think influences employees to leave the organisation?

**Table 3**

<table>
<thead>
<tr>
<th>Reasons</th>
<th>Yes</th>
<th>No</th>
<th>Percentage Yes</th>
<th>Percentage No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor working conditions</td>
<td>90</td>
<td>12</td>
<td>88</td>
<td>12</td>
</tr>
<tr>
<td>Lack of Career growth</td>
<td>87</td>
<td>15</td>
<td>85</td>
<td>15</td>
</tr>
<tr>
<td>Poor salary and Incentives</td>
<td>84</td>
<td>18</td>
<td>82</td>
<td>18</td>
</tr>
<tr>
<td>Poor management styles</td>
<td>78</td>
<td>24</td>
<td>76</td>
<td>24</td>
</tr>
<tr>
<td>Inadequate skills and abilities</td>
<td>33</td>
<td>69</td>
<td>32</td>
<td>68</td>
</tr>
<tr>
<td>In Conducive work environment</td>
<td>72</td>
<td>30</td>
<td>71</td>
<td>29</td>
</tr>
<tr>
<td>Job insecurity</td>
<td>60</td>
<td>42</td>
<td>59</td>
<td>41</td>
</tr>
<tr>
<td>Global and National economy</td>
<td>66</td>
<td>36</td>
<td>65</td>
<td>35</td>
</tr>
<tr>
<td>Lack of equipment and drugs</td>
<td>75</td>
<td>27</td>
<td>74</td>
<td>26</td>
</tr>
</tbody>
</table>
The above table 3 shows factors influencing employees to leave KCH and shows responses on which factors employees think influence them to leave the institution. The higher percentages of the responses show employee perception of which factors influence their leaving the organisation.

From the responses, the factors that influence employees to leave the organisation are: poor working conditions; lack of career growth; poor salaries and incentives; poor management styles; in-conducive work environment; job insecurity; global and national economy; lack of equipment and drugs; lack of motivation; and work overload which recorded higher percentage rates. These findings are similar to those discussed in Gow et al. (2011:8) which were: poor working conditions; unreasonable workloads; unchanging job descriptions; lack of advancement in technology; high levels of stress; and inflexible work arrangements.

Findings show that: inadequate skills and abilities; physical and psychological violence; HIV/AIDS; poor organisation structure; and job and personal traits miss-match recorded lower percentage rates implying that these factors may not influence employees to leave the organisation. Findings are further presented in figure six below.

**Figure 6**

The findings of the factors that may not influence employees leaving the organisation could be that employees may perceive these factors even though important may not greatly affect their intentions to leave as they might have been perceived to be less severe that the other factors (Watson, 2012:2).
Section C
What strategies have been undertaken by your organisation to influence your retention?

Table 4

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Not sure</th>
<th>Strongly disagree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competitive salary package</td>
<td>9</td>
<td>50</td>
<td>18</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Performance bonus/ overtime</td>
<td>8</td>
<td>6</td>
<td>9</td>
<td>9</td>
<td>68</td>
</tr>
<tr>
<td>Training and development</td>
<td>9</td>
<td>65</td>
<td>0</td>
<td>12</td>
<td>14</td>
</tr>
<tr>
<td>Opportunity to work independently</td>
<td>3</td>
<td>71</td>
<td>12</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Recognition and reward for good performance</td>
<td>12</td>
<td>58</td>
<td>3</td>
<td>9</td>
<td>18</td>
</tr>
<tr>
<td>Promotion</td>
<td>6</td>
<td>12</td>
<td>9</td>
<td>3</td>
<td>70</td>
</tr>
<tr>
<td>Up-to-date technology, equipment and drugs</td>
<td>12</td>
<td>6</td>
<td>12</td>
<td>3</td>
<td>67</td>
</tr>
<tr>
<td>Flexible work arrangement</td>
<td>3</td>
<td>79</td>
<td>3</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>Challenging and interesting jobs</td>
<td>15</td>
<td>68</td>
<td>9</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Participation in decision making</td>
<td>12</td>
<td>68</td>
<td>6</td>
<td>3</td>
<td>11</td>
</tr>
<tr>
<td>Encouraging good work relationships amongst employees</td>
<td>26</td>
<td>60</td>
<td>12</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Job security</td>
<td>26</td>
<td>59</td>
<td>6</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Strong sense of belonging to the organisation</td>
<td>24</td>
<td>53</td>
<td>6</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Freedom for creativity and innovative thinking when doing tasks</td>
<td>18</td>
<td>65</td>
<td>9</td>
<td>8</td>
<td>0</td>
</tr>
</tbody>
</table>

The above table 4 shows the response rates of employees regarding perceptions on the current retention strategies being used at KCH to influence retention. Figure seven below, shows a chart representing these perceptions.
Findings from Figure seven show rating percentages and will be analysed as follows:

1. Competitive salary package – 9% strongly agreed, 50% agreed, 18% were not sure, 11% strongly disagreed and 12% disagreed. More respondents agreed which can be interpreted that employees are being offered a competitive salary package (Sinha & Shukla, 2013:37).

2. Performance bonus/ overtime - 8% strongly agreed, 6% agreed, 9% were not sure, 9% strongly disagreed and 68% disagreed. More respondents disagreed which could be that they are not offered performance bonuses and overtime (Kaila, 2012:341).

3. Training and development - 9% strongly agreed, 65% agreed, 0% were not sure, 12% strongly disagreed and 14% disagreed. More respondents agreed showing that training and development of employees is being implemented as recommended by Sinha & Shukla (2013:37).

4. Opportunity to work independently - 3% strongly agreed, 71% agreed, 12% were not sure, 0% strongly disagreed and 14% disagreed. More respondents agreed, indicating that workers are given the opportunity to work independently as also suggested by Sinha & Shukla (2013:37).

5. Recognition and reward for good performance - 12% strongly agreed, 58% agreed, 3% were not sure, 9% strongly disagreed and 18% disagreed. A large percentage of respondents agreed showing that they are given recognition and rewards for good performance (Armstrong, 2010:202).
6. Promotion - 6% strongly agreed, 12% agreed, 9% were not sure, 3% strongly disagreed and 70% disagreed. More respondents disagreed, which could be that promotion opportunities are limited (Masangu & Mpofu, 2013:893) and have a great influence on employee morale and retention.

7. Up-to-date technology, equipment and drugs - 12% strongly agreed, 6% agreed, 12% were not sure, 3% strongly disagreed and 67% disagreed. Most of the respondents disagreed, showing that the technology and equipment being used is not up to date (Ngulube 2010:31).

8. Flexible work arrangement - 3% strongly agreed, 79% agreed, 3% were not sure, 3% strongly disagreed and 12% disagreed. Most respondents agreed, showing that, they are given flexible work arrangements as recommended by Armstrong (2010:202).

9. Challenging and interesting jobs - 15% strongly agreed, 68% agreed, 9% were not sure, 3% strongly disagreed and 5% disagreed. More respondents agreed that, their jobs were challenging and interesting. Jobs are designed to maximise variety in tasks to making them more challenging (Armstrong, 2010:202).

10. Participation in decision making - 12% strongly agreed, 68% agreed, 6% were not sure, 3% strongly disagreed and 11% disagreed. Most of the respondents agreed, showing that they are allowed to participate in decision making as Sinha & Shukla (2013:37) suggests.

11. Encouraging good work relationships amongst employees - 26% strongly agreed, 60% agreed, 12% were not sure, 0% strongly disagreed and 2% disagreed. Most of the respondents agreed which could be that their superiors encourage good working relations amongst employees (Armstrong, 2010:202).

12. Job security - 26% strongly agreed, 59% agreed, 6% were not sure, 3% strongly disagreed and 6% disagreed. Most of the respondents agreed, indicating that they have job security in their institution (Watson, 2012:2).

13. Strong sense of belonging to the organisation - 24% strongly agreed, 53% agreed, 6% were not sure, 9% strongly disagreed and 8% disagreed. Majority of the respondents agreed showing that they have a strong sense of belonging to the organisation maybe because of the way they are treated by their superiors and colleagues (Kgomo & Swarts, 2010:246).

14. Freedom for creativity and innovative thinking when doing tasks - 18% strongly agreed, 65% agreed, 9% were not sure, 8% strongly disagreed and 0% disagreed. Most of the respondents agree that, they are given freedom for creativity and innovative thinking as they do their work (Sinha & Shukla, 2013:37).

**Section D**

How can employees be retained at the hospital?

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Yes</th>
<th>No</th>
<th>Percentage Yes</th>
<th>Percentage No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Better salary</td>
<td>102</td>
<td>0</td>
<td>100</td>
<td>0</td>
</tr>
<tr>
<td>Better allowances and benefits</td>
<td>102</td>
<td>0</td>
<td>100</td>
<td>0</td>
</tr>
<tr>
<td>Improve working conditions</td>
<td>102</td>
<td>0</td>
<td>100</td>
<td>0</td>
</tr>
<tr>
<td>Inclusion in decision making</td>
<td>93</td>
<td>9</td>
<td>91</td>
<td>9</td>
</tr>
<tr>
<td>Change in supervision style of management</td>
<td>93</td>
<td>9</td>
<td>91</td>
<td>9</td>
</tr>
</tbody>
</table>
The above table 5 shows factors that can be used to retain employees at KCH. Responses in percentages show which factors employees suggest can retain employees at the Hospital. Figure 8 presents the responses in a graphical form.

Figure 8
Figure 8, responses shows the response of respondents to the following factors that can help in retaining employees at the hospital, namely: better salary; better allowances and benefits; improve working conditions; inclusion in decision making; change in supervision style of management; more training and development; job and individual matching; flexible work schedules; proper training and induction; updating technology and equipment; and provision of sufficient drugs (Armstrong, 2010:202; Sinha & Shukla, 2013:37; Ngulube 2010:31; & Watson 2012:4).

CONCLUSIONS AND RECOMMENDATIONS

Introduction

Findings from the Study

The findings from the study will be discussed within this section: This will incorporate findings from the literature as well as from the primary research.

Findings from the Literature Review

The literature review guided the researcher in terms of factors that influenced the retention of employees in organisations in general and also included retention strategies that various authors recommend for use in organisations.

The main factors influencing the retention of employees that were discussed were: global and national economic influences; inadequate compensation; working conditions; opportunities and labour market demand; education system; job dissatisfaction; poor organisation structure; work practices by managers; job security; personal mobility; work overload; un-matching personality traits with job characteristics; opportunities for career advancement; lack of motivation; and physical and psychological violence.

The findings in the primary research were similar with a few exceptions from the literature. Factors such as:- inadequate skills and abilities; physical and psychological violence; HIV/AIDS; poor organisation structure; and job and personal traits miss-match, were seen in the literature review that they were able to influence retention of employees, whereas in the primary research, it was found to be disagreeable. This could be that, the respondents perceived these factors to be minor influencers of their’ retention.

In the literature review, strategies for retention were discussed, these were: job redesign; matching individuals with job; encouraging social ties within the organisation; flexible work schedules; proper training and induction; reward and recognition for performance; improve working conditions; inclusion of employees in decision making; encourage knowledge sharing; provide opportunities for career growth and development; treatment of employees with respect; clearly define jobs and expectations; increase incentives and salaries; tightening of laws on immigration of health workers; task shifting; training and development programs; leadership and management training; improvement of working conditions; and improvement of performance management.

These strategies were found agreeable to those in the primary research, showing that, the findings of the literature on retention strategies match with those of the primary research.
Findings from the Primary Research

Findings from the primary research will be discussed in this section. The research questions re-stated:

- What are the factors affecting retention of staff at the Hospital?
- What strategies are currently being used to retain employees at the Hospital?
- What are employees’ perceptions about workforce retention strategies at the Hospital?
- Which strategies can be used to effectively retain employees at the Hospital?

The factors affecting the retention of employees at KCH were found to be the following:
1. Poor working conditions.
2. Lack of career growth.
3. Poor salary and incentives.
4. Poor management styles.
5. In-conducive work environment.
7. Global and National Economy.
8. Lack of equipment and drugs.
10. Work overload.

The following factors were found to not influence employee retention these were: inadequate skills and abilities; physical and psychological violence; HIV/AIDS; poor organisation structure; and job and personal traits miss-match.

The current strategies undertaken by the organisation to influence employee retention and employee perception of these are:
1. Competitive salary package.
2. Training and development.
3. Opportunity to work independently.
4. Recognition and reward for good performance.
5. Flexible work arrangement.
7. Participation in decision making.
8. Encouraging good working relationship amongst employees.
10. Strong sense of belonging to the organisation.
11. Freedom for creativity and innovative thinking in doing tasks.

Some strategies that were perceived by employees as were not undertaken by the management of the institution were: performance bonus/overtime; promotion; up-to-date technology, equipment; and drugs. Strategies that were seconded by employees which can be used to retain employees at the Hospital were: better salary; better allowances and benefits; improve working conditions; inclusion in decision making; change in supervision style of management; more training and development; job and individual matching; flexible work schedules; proper training and induction; updating technology and equipment; and provision of sufficient drugs.
Conclusions

This study thus, aimed to investigate the factors affecting the retention of employees at Kitwe Central Hospital in Zambia. It can be concluded that, the factors that affect the retention of employees at the hospital are: poor working conditions; lack of career growth; poor salary and incentives; poor management styles; in-conducive work environment; job insecurity; global and national economic conditions; lack of equipment and drugs; lack of motivation; and work overload.

The objectives of the study were also achieved and it can be concluded that, the strategies that are currently being used by the hospital are: competitive salary packages; training and development; opportunity to work independently; recognition and reward for good performance; flexible work arrangements; challenging and interesting jobs; participation in decision making; encouraging good working relationship amongst employees; job security; strong sense of belonging to the organisation; and freedom for creativity. Employees perceived that these were the current strategies that were being used whereas a few other strategies, employees perceived to not being implemented were: performance bonus/overtime; promotion; up-to-date technology, equipment and drugs.

Strategies that may help retain employees were also found to be: better salary; better allowances and benefits; improve working conditions; inclusion in decision making; change in supervision style of management; more training and development; job and individual matching; flexible work schedules; proper training and induction; updating technology and equipment; and provision of sufficient drugs.

Recommendations

The following strategies can be recommended to assist the management of KCH in managing retention of employees so as to ensure efficiency and effectiveness in health service delivery.

1. They must offer better salary packages to their employees to create external equity.
2. They should also include better allowances and benefits that are competitive so as to prevent employees from leaving the hospital to go to other institutions offering competitive benefits.
3. An improvement in working conditions to encourage workers and instil an enjoyable work environment.
4. They must improve communication and include employees at all levels in decision making to create a feeling of belongingness to the institution.
5. There must be a change in supervision style of managers where necessary to encourage good working relations amongst employees and their superiors.
6. More training and development opportunities must be offered to enhance performance.
7. There must be a job and individual traits match before allocating positions for effective performance.
8. Flexible work schedules can be arranged with workers to balance work and life.
9. Proper training and induction must be given to employees prior to work commencement to ensure clarity in the work task as well as effectiveness in task performance.
10. An update in technology and equipment must also be done to be more efficient in doing tasks by, upgrading communication systems as well as replacing outdated equipment and machinery to enhance efficiency and effectiveness.
11. There must be provision of sufficient drugs to cater for all that need them.
12. Encouragement of good working relationships amongst employees to create a good working environment and sense of belonging in the institution.
13. Allow freedom for creativity and innovative thinking in doing tasks to enhance effectiveness in performance.
14. Design jobs that are challenging and interesting as a way to encourage employees.
15. Give recognition and rewards for good performance in an open and transparent manner to encourage employees to work hard.
16. Ensure job security to assure employees about the future by, giving long term contracts or permanent job contracts.
17. Provide promotion opportunities to employees to encourage and retain workers.
18. To ensure that the required and expected performance levels as well compensation are communicated clearly before employees commence their jobs to avoid unrealistic and false expectations as well as demoralisation.

**Area/s of further Research**

Further research can be carried out on employee retention by:

- Extending this research further by making a comparison with other Private Health Sector Institutions as this research was mainly limited to a Public Health Institution.
- Investigating the effects of Government retention policies on the retention of employees in the Public Health Sector.
- Making a follow up on employees that are currently working abroad, or in other institutions, to determine the factors that led to their migration in order to provide recommendation based on current employee perceptions as well as those of past employees.

**Conclusions**

This dissertation investigated the factors affecting the retention of employees at Kitwe Central Hospital in Zambia. It reviewed literature on various factors affecting the retention of employees. The dissertation also investigated the current strategies being used regarding retention and also reviewed employee perceptions relating to these strategies. The dissertation provided recommendations on the retention strategies to be implemented by management of the hospital. Lastly, the dissertation discussed areas of further study relating to employee retention.

**NOTE:** This study was submitted by the principal author to the Regent Business School in 2014 for the award of the Master of Business Administration Degree (MBA). The dissertation was supervised by external supervisor Dr Shaun Pekur of the Management College of Southern Africa and the study was edited by Professor Anis Mahomed Karodia for purposes of a publishable journal article. Kindly note that the entire bibliography is cited and that the references applicable to this article are contained within the bibliography cited.
BIBLIOGRAPHY


