



TRAINING AND DEVELOPMENT AS A TOOL FOR IMPROVING HEALTH WORKERS' PERFORMANCE IN ENUGU STATE, NIGERIA

Dr Nnaji Ifeoma L., Udunze Ugochukwu M., Nebo Chidiebere S.

*Department of Public Administration, Faculty of Management Sciences,
Nnamdi Azikiwe University, Awka, Anambra State, Nigeria. Phone: +234 8033334053
Corresponding E-mail: ifeomannaji18@gmail.com*

Abstract

Human resource is the critical factor in health service delivery, which is evidenced by the fact that the number and quality of health workers are positively associated with the coverage and provision of health services. The health workforce is an important determinant of health systems performance in terms of health outputs and outcomes. The main objective of this study is to determine the relationship between training and development, and improvement of health workers' performance in Enugu State. The study was conducted on 403 respondents who were randomly selected from primary health centers in Enugu state of Nigeria in April 2014. A descriptive survey approach was used, while data collection was done by using structured, self-administered questionnaire. Statistical Package for Social Science was used for data analysis. The affirmative response to the statement "Health workers benefited from regular training and re-training" was statistically significant ($p < .05$, Df 4, $X^2 = 186.392$) while on "Acquired skills improved health workers performance," was statistically significant ($p < .05$, Df 4, $X^2 = 208.030$). The negative response to the statement "Health workers have all the required skills needed to perform" was statistically significant ($p < .05$, Df 3, $X^2 = 400.067$), while the affirmative response to the statement "In service training of HWs increased" was statistically significant ($p < .05$, Df 4, $X^2 = 308.923$), while response to the statement "Training and development of health workers have contributed to the improvement of health workers' performance" was statistically significant ($p < .05$, Df 4, $X^2 = 415.275$). In conclusion, although training and development has improved health workers' performance through knowledge and skills acquisitions, there were still gaps in the optimal performance of health workers in Enugu State. This could be remedied through regular capacity building activities conducted after appropriate training needs assessment.

Keywords: Training, Development, Health Workers and Improvement of Performance.

Introduction

Background of the Study

The success of every organization depends on effective training and development of its human resource. To ensure optimum performance of the employees, they must be provided with opportunities for constant training. Onah (2007) asserted that every executive or manager in any public or private organization is duty bound to ensure that his employees are trained and developed regularly. The aim is to enable them to contribute their full measure to the welfare, health and development of the organization. According to Fanibuyan (2011), quoted in Ohaeri & Chukwu (2016), training is a process that systematically alters the behaviour and attitude of employees in such a way as to achieve organizational goals, while development is a programme aimed at educating supervisory employees above and beyond the immediate technical requirement of the job. The main objective of development is to effectively improve the performance of all employees, while the objective of training is to achieve a change in the behaviour of those trained, this means that the trainees acquire

new techniques, skills, problem solving abilities and develop proper work attitude. Training in the health sector is described by Campbell (2007) as the scientific process by which the required knowledge, attitude, and skills are imparted to health workers to make them competent in dealing with the health problems of the communities which they are being trained to serve.

Statement of the Problem:

Labiran et al (2008) noted that the major challenge facing the health sector in Nigeria is poor performance of health workforce due to inadequate number of skilled and competent workforce in their right mix, at the right place where their services are mostly needed. The National Health Act (2012) seeks to address human resource management issues within the context of the national health system in order to: ensure availability of adequate resources for the education and training of health care personnel to meet the human resource requirements; identify shortage of key skills, expertise and competencies; ensure adequate human resource planning, development and management structures at national, state and local government levels.

According to the Federal Ministry of Health Report, (2008), human resource is the critical factor in health service delivery, which is evidenced by the fact that the number and quality of health workers are positively associated with the coverage and provision of services needed for maternal, neonatal and child survival. The health workforce is an important determinant of health outputs and outcomes, needed to drive health systems performance (Manuwa-Olumide (2006). There is need for the evaluation of workers opinions on the relationship between training and development on one hand and the performance of workers in the public health sector of Enugu State of Nigeria on the other hand. The research question seeking for answer in this study is what is the relationship between training and development, and the improvement of health workers' performance in Enugu state of Nigeria?

Objective of the Study

The main objective of this study is to determine the relationship between training and development, and improvement of health workers' performance in Enugu State.

Hypothesis

- H₀** Training and development of health workers have no significant relationship with improvement of health workers' performance in Enugu State.
- H_a** Training and development of health workers have significant relationship with improvement of health workers' performance in Enugu State.

Conceptual Review

Training according to Mwita, et al (2009) is an important function of human resource management, and this includes: conducting, organizing and facilitating staff development activities, and/or identifying staff development. They explained that training generally is intended to provide training experiences that help people perform efficiently in their present and future jobs thus managing the training process can go a long way towards enhancing its effectiveness. Onah (2007) outlined the examples of training as, on the job and in-service training which are designed to develop the knowledge or expertise of workers to a higher degree of performance. Training and Development are terms which are sometimes used interchangeably. Development can be seen as an activity associated with managers. In contrast, training has a more immediate concern and has been associated with improving the knowledge and skill of non-managerial employees in the current job. Training and development may be regarded as interactive, each complementing the other. The logical step for the organization is to produce a plan for human resource development (i.e. training and development) which will dovetail into the employee resourcing plan and the organization 's overall strategic plan

Empirical Review

Raja, et al (2013), carried out a study on the impact of training and development on organizational performance. The focus of their study was to understand the effect of on-the-job training, training design, and delivery style on organizational

performance. They found a positive correlation between these variables on organizational performance, and so concluded that training and development is an easy way of building required competence level so that workers may perform well to achieve organizational goals. Onyango and Wanyoike (2014) assessed the effect of training on the performance of staff serving in public health facilities within Siaya County, Kenya. A structured self-administered questionnaire was administered on 56 respondents selected by stratified random sampling technique. The study showed a strong positive relationship between training of employees and performance.

Sultana (2014) studied the impact of training on 360 employee performances in selected private companies in Biya, Saudi Arabia. Using correlation analysis he was able to show that about 50% of variation in employee performance is brought about by training programs. The study concludes that if organizations invest in right type of employee training it can enhance employee performance as well as competencies and skills. In addition, training is seen as a useful means of coping with challenges fostered by technological innovation; market competition, organizational structuring and most importantly it plays a key role to enhance employee performance. Imran (2015) studied the impact of training and development on employee performance in banks in Pakistan. A structured questionnaire that was designed to measure knowledge of the job, quality of work, and functional skills, were randomly distributed to 150 respondents selected from six banks in Pakistan. The findings from the study revealed that training impacted positively on the performance of the workers. The researcher observed that training is beneficial to both employers and employees of an organization. Further findings also revealed that training is essential not only to increase productivity but also to motivate and inspire workers by letting them know how important their jobs are and giving them all the information, they needed to perform their jobs. He concluded that organizations must design their training programme with clear goals and objectives while keeping in mind the particular needs of both individual and the organisation.

Theoretical Framework

This study was anchored on the Systems Theory as was propounded by Ludwig Von Bertalanffy (1950). Mayrhofer (2004) stated that the systems theory is one of the theories human resource management can use to better understand itself and at the same time, contribute to better practice, because it provides a unified framework for the analysis of social reality at a highly aggregated level. Flamond (2010) also stated that “a system is a set of interdependent parts that together form a whole or perform some functions, and the parts must be interdependent and/or interactive.” In this study, the human resource is a subsystem of the health care system, where there is a synergistic relationship in performance of workers from training and development as well as from other subsystems such as finance, materials, information, and management. Using the systems approach to training by Eckstrand (1964), as stated in Onah (2007), training should be seen not only in terms of training objectives per se, but also in terms of the objectives and goals of the total organization or “system” in which the individual will be performing his task. Onah (2007) listed the steps involved in the application of the systems approach to training to include the following:

In the following steps: define training objectives; develop criterion measures for evaluating training; Drive training content; Design methods and training materials; Integrate training programmes and trainees; compare graduates to criteria standards set in second step above; modify steps third and fourth steps above which are based on the results of step six. The advantage of the systems approach according to him is that it helps the trainer in making his decisions, and is able to understand and keep in mind the total training process as he tries to accomplish his objectives.

Methodology

Descriptive survey approach was used, and the study was conducted in the primary health centres in Enugu State of Nigeria, in April, 2014. The study focused on the activities of health workers in selected Local Health Authorities (LHAs) in Enugu State. Four District Health Boards (DHBs) were purposively selected from the seven DHBs in Enugu State. Care was taken to ensure that each of the three senatorial zones in Enugu State, namely, Enugu North, Enugu East and Enugu West were represented in the study. The total population of public health workers in Enugu State was 2,533 and distributed as shown in Table 1 below.

Table 1: Total Number of public health workers in Enugu state ministry of health

Number of Health Workers in Enugu State, According to their Profession	
Medical Doctors	69
Nurses and Midwives	260
Community Health Extension Workers	1066
Community Health Officers	482
Environmental Health Officers	308
Health Attendants	243
Pharmacy Technicians	35
Medical Laboratory Technicians	28
Entomologists	18
Health Educators	24
Total	2533

Sample Size Determination: The formula and procedure propounded by Taro Yamani (1964) for determining the appropriate sample size (n) was used in this study.

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

$$1 + N(e)^2$$

Where n = appropriate sample size; N = population (2533 health workers as at 2012)

1 = constant; e = acceptable margin of error (5% or 0.05). $n = 345.45 = 345$

For possible attrition 20% was added i.e. (69). $n = 414$ approximately.

Sampling Methods: There are seven DHBs, and fifty-six LHAs in Enugu State. Four DHBs were selected purposively from the seven, while twenty- six LHAs were randomly selected from the DHBs for the study. The purpose of selecting four DHBS and twenty-six LHAs was because the researcher aimed at collecting data from very remote, rural, and semi-urban Local Government Areas. Thus, a total of one hundred and thirteen (113) respondents were selected from Enugu Ezike DHB, followed by Awgu DHB that had one hundred and ten (110) respondents, while Udi DHB had ninety (90) respondents and Agbani DHB, ninety (90) respondents as well. In this regard, a total of four hundred and three (403) respondents were selected for the study. These persons were selected based on their being heads of departments and units in their respective primary health care centers and LHAs.

Sampling Techniques: The sample technique applied in this study was the multistage random sampling procedure. First, the researcher selected four DHBs purposively out of the seven district health boards in Enugu State. Then, within the four DHBs, simple random sampling was used to select six LHAs from two semi-urban DHBs and seven LHAs from two rural DHBs, making it a total of twenty-six LHAs selected for the study. Finally, from the twenty-six LHAs selected, simple random sampling method (lucky dip), was used to select two hundred and seven primary health centers where questionnaires were distributed to two respondents each, making it four hundred and fourteen questionnaires that were distributed for the study, while a total of four hundred and three questionnaires were returned and used for analyses.

Instrument for Data Collection: The instrument used for data collection was self-administered well-structured questionnaires. The questionnaire items were structured using 5-point Likert Scale. Method of Data Analysis: Statistical package for social sciences (SPSS) package was used for data analysis. The data was presented in a tabular form and analyzed, first using simple percentages and mean. Every statement in the questionnaire whose mean score was 3.0 and above was accepted, otherwise, it was rejected. The hypothesis was tested using Linear Regression. Subsequently, Pearson Correlation Coefficient and Analysis of Variance (ANOVA) were used to test the strength of linearity.

Results

Four hundred and fourteen questionnaires were distributed, four hundred and five were returned, but two questionnaires were discarded for improper filling, so four hundred and three (95 %) were duly completed and used for the analysis.

Table 2: The Frequency Distribution of Respondents in District Health Boards

DHB	Frequency	Percent
Agbani	90	16.4
Awgu	110	32.0
Enugu Ezike	113	35.2
Udi	90	16.4
Total	403	100.0

Table 2 shows the four DHBs selected for the study. Enugu Ezike DHB had the highest number of respondents, followed by Awgu, Udi and Agbani respectively.

Table 3: Distribution of Some socio demographic characteristics of Respondents

	Frequency	Percent
Community Health Extension Workers	247	61.3
Community Health Officers	58	14.4
Doctors	28	6.9
Environmental Health Officers	37	9.2
Nurses	19	4.7
Health Assistants	8	2.0
Pharmacy Technicians	6	1.5
Sex distribution		
Female	335	83.1
Male	68	16.9
Age Groups (years)		
20 -24	6	1.5
25 – 29	14	3.5
30 – 34	20	5.0
35 – 39	87	21.6
40 – 44	104	25.8
45 – 49	96	23.8
≥ 50	76	18.9
Work Experience (years)		
0 - 4	33	8.2
5 – 9	16	4.0
10 – 14	24	6.0
15 – 19	88	21.8
20 – 24	146	36.2
≥25	96	23.8

Table 3 above, shows the official designation of the health workers selected for the study. A majority of the respondents, 247 (61.3%) was Community Health Extension Workers (CHEWs). There is a female preponderance with a female: male ratio of 4.9: 1. The most frequent age group was the 40 - 44 years age group (104 or 25.8%). The majority of the subjects 146 (36.2%) had a work experience of between 20-24 years.

Table 4: Descriptive Statistics of Responses to Questionnaire on Training and Development of Health Workers in E/S

Statement	N	Mean	Std Deviation	Variance	Minimum	Maximum
Health Workers benefit from regular training and retraining	403	3.40	1.370	1.877	1	5
Acquired skills improved Health Workers' performance	403	3.46	1.170	1.368	1	5
Health Workers have all the required skills needed to perform	403	1.46	.537	.286	1	4
In service training of HWs increased between 2005 and 2010.	403	3.39	1.185	1.403	1	5
Training and Development of H/Ws has improved health workers' performance in Enugu State	403	3.37	1.082	1.170	1	5

Table 4 above shows the response to the statement "Health workers benefit from regular training and re-training" on a five point Likert had a mean \pm SD, 3.40 \pm 1.370. The least score was 1 while the highest was 5. On "Acquired skills improved health workers performance," the mean \pm SD was 3.46 \pm 1.170. The least score by respondents was 1, while the highest score was 5. The response to the statement "Health workers have all the required skills needed to perform" shows that mean \pm SD was 1.46 \pm .537. The least score was 2, while the highest score was 5. The response to the statement "In service training of HWs increased between 2005 and 2010." shows that Mean \pm SD was 3.39 \pm 1.185. The least score was 1, while 5 was highest. The response to the statement "Training and development of health workers have contributed to the improvement of health workers' performance" shows that Mean \pm SD was 3.37 \pm 1.082. The highest score was 5, while the least score was 1.

Table 5: Respondents Opinion on the Regular Training and Retraining and health workers' performance

Score	Response	Frequency	Percent	X ²	Df	P value
Health workers benefit from regular training and retraining						
5	Strongly agree	127	31.51	186.392	4	.000
4	Agree	120	29.78			
3	Don't know	4	0.99			
2	Strongly disagree	24	5.96			
1	Disagree	128	31.76			
Acquired Skills has Improved Health Workers' performance						
5	Strongly agree	75	18.6	208.030	4	.000
4	Agree	172	42.7			
3	Don't know	30	7.4			
2	Disagree	114	28.3			
1	Strongly disagree	12	3.0			
Health workers have all the required skills needed to perform their work						
5	Strongly agree	0	0	400.067	3	.000
4	Agree	2	.5			
3	Don't know	2	.5			
2	Disagree	174	43.2			
1	strongly disagree	225	55.8			
In service training of health workers increased between 2005 and 2010						
5	Strongly agree	66	16.4	308.923	4	.000
4	Agree	184	45.7			
3	Don't know	5	1.2			
2	Disagree	138	34.2			
1	Strongly disagree	10	2.5			

Training and development of health workers has improved performance						
5	Strongly agree	42	10.4	415.275	4	.000
4	Agree	211	52.4			
3	Don't know	8	2.0			
2	Disagree	140	34.7			
1	Strongly disagree	2	0.5			

Table 5 above shows the response to the statement "Health workers benefit from regular training and re-training" on a five point likert scale. Two third of the respondents either strongly agreed or agreed 127 (31.51%) and 120 (29.78%), while 24 (5.96%) and 128 (31.76%) strongly disagreed and disagreed respectively. Only 4 (0.99%) respondents did not know if health workers in Enugu State benefit from regular training and re-training. Table 5 also shows a mean±SD of 3.40±1.370. The table shows that there was a statistically significant difference between the observed and expected values ($p = .000$). Table 5 above shows the response to the statement "Acquired skills improved health workers performance on a five point likert scale. About 75 (18.6%) and 172 (42.7%) of the respondents either strongly agreed and agreed. 114 (28.3%) and 12 (3.0%) disagreed and strongly disagreed, while 30 (7.4%) of the respondents don't know. The mean±SD as shown in table 5 was 3.46±1.170 respectively. There was a statistically significant difference between the observed and expected values ($p = .000$).

Table 5 above shows the response to the statement "Health workers have all the required skills needed to perform their work". Majority of the respondents 174 (43.2%) and 225 (55.8%) hold the view that health workers in Enugu State do not have all the required skills. Only a tiny minority 2 (.5%) agreed with the statement, and 2 (.5%) equally does not know. None of the respondents strongly agreed to the statement. This indicates that it is the majority opinion that health workers in Enugu State do not have all the required skills needed to perform their work as was shown in the mean±SD previously on table 5, 1.46±.537. There was a statistically significant difference between the observed and expected values ($p = .000$).

Table 5 shows the responses to the statement "In- service training of HWs increased between 2005 and 2010." The responses were 66 (16.4%) and 184 (45.7%) for strongly agreed and agreed, respectively with the statement, and 138 (34.2%) and 10 (2.5%) of the respondents disagreed and strongly disagreed, while 5 (1.2%) of the respondents don't know. This shows that majority of the respondents agreed with the statement as was indicated in the table where the mean±SD was 3.39±1.185. The difference between observed and expected values was statistically significant ($p = .000$).

Table 5, also shows the response on the statement, "Training and development of health workers have improved health workers performance in Enugu State". About two third of the respondents 42 (10.4%) and 211 (52.4%) strongly agreed and agreed with the statement, while 140 (34.7%) and 2 (0.5%) of the respondents disagreed and strongly disagreed with the statement, and 8 (2.0%) of the respondents don't know. This means that majority of the respondents representing 62.8% are of the opinion that training and capacity building of health workers have improved health workers' performance in Enugu State as indicated with the mean±SD of 3.37±1.082 in table 5. There was a statistically significant ($p = .000$) difference between observed and expected values.

Hypothesis Testing

H₀ There is no significant relationship between training and development and performance of health workers in Enugu State.

H_a There is a significant relationship between training and development and performance of health workers in Enugu State.

Table 6: Linear Regression of Training and Development on improvement in health workers' performance

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95% Confidence Interval for B	
		B	Std. Error	Beta			Lower Bound	Upper Bound
1	(Constant)	.329	.064		5.143	.000	.203	.455
	HW benefit from regular training and retraining	.164	.033	.207	4.950	.000	.099	.229
	Acquired skills improved HW performance	.230	.037	.248	6.187	.000	.157	.303
	HWs have all the required skills	.050	.034	.025	1.484	.138	-.016	.117
	In service training of HWs increased between 2005 and 2010.	.474	.035	.519	13.510	.000	.405	.543

a. Dependent Variable: Training and development has improved health workers' performance in Enugu State

Table 6 above shows that the independent variables "Health workers benefit from regular training and retraining", "Acquired skills improved health workers performance" and "In service training of HWs increased between 2005 and 2010, have statistically significant linear relationship with the dependent variable "Training and development have improved health workers' performance in Enugu state". The p values are .000 each, while the B coefficients are 0.164, 0.230, and 0.474, respectively. The standardised Beta coefficient show that "In service training of HWs increased between 2005 and 2010" has relatively more important linear relationship (.519) with the dependent variable. All B coefficients are within the 95% confidence interval. The statement "Health workers have all the required skills" is not statistically significantly correlated with the dependent variable "Training and development has improved health workers' performance in Enugu state" $p=0.138$.

Table 7: Training and development and improvement of health workers' performance (ANOVA)

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	423.141	4	105.785	890.471	.000 ^a
	Residual	47.281	398	.119		
	Total	470.422	402			

a. Predictors: (Constant), In service training of HWs increased between 2005 and 2010, HWs have all the required skills, Acquired skills improved HW performance, HW benefit from regular training and retraining

b. Dependent Variable: Training and development has improved health workers' performance in Enugu State

The ANOVA table 7 shows that the linear relationship between the predictors and the dependent variables is statistically significant ($p=.000$). The linear relationship is accounted for by the sum of squares of 423.141 of 470.422, while only 47.281 is nonlinear or residual. The F ratio of 890.471 was statistically significant ($P. value = .000$).

Table 8: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.948 ^a	.899	.898	.345

a. Predictors: (Constant), in service training of HW increased between 2005 & 2010, HWs have all the required skills, Acquired skills improved HW performance, HW benefit from regular training and retraining

b. Dependent Variable: Training and development have improved health workers' performance

The model summary, table 8 shows that the multiple correlation coefficients R , (.948) is very large and indicates the observed and model predicted values of dependent variable. The R squared shows that much of the variation in the dependent variable is explained by the model. Decision Rule: F ratio value was 890.471 with p value of .000, shows a statistical significant relationship at .05 levels. The null hypothesis therefore was rejected in preference to the alternate hypothesis.

Discussion

The findings in this study affirmed that health workers benefited from regular training and re-training in the health sector; acquired skills improved health workers performance; and in-service training of health workers increased. These affirmations were found to correlate significantly with the response that training and development of health workers have improved health workers' performance in Enugu State. An analysis of training and development in the context of systems theory revealed that these are both input factors aimed at improving the capacity of the health workforce to deliver services to their clientele. The health system is made up of sub systems which work together in harmony to achieve objectives, which include improvement in health workers' performance among others. Each sub system makes contributions to the achievement of the whole system's objective. Consequently, the training of health workers to improve their skills is an example of a sub system within the health care system that would impact on health workers' performance. The study also found that health workers did not have all the required skills needed to perform their work. The interpretation is that although training and development of health workers had improved health workers' performance through skills acquisition there are still gaps in the optimal performance of the health workforce that can be achieved by increasing capacity building activities in the health sector.

Furthermore, it implies that the impact of training and development of the health workforce on performance can be further increased. However, training may fail to achieve its objectives if training needs were not determined prior to the training activities. It is probable that the optimal performance of the health workforce could be achieved by first, conducting appropriate training needs assessment prior to the training activities. Also, Jimba, et al (2010) agreed that limited training, capacity building and weak management systems have been observed to lead to poor morale and performance of health workers. This view was equally supported by Mwita, et al (2009), 81% of the respondents in their study agreed that training is an important function of human resource planning and that training included: conducting, organizing and facilitating staff development activities and identifying the need for staff development. Most of the respondents in their study also agreed that there was need to update their skills in managing in-service training, as well as develop programs for staff in the areas of clinical skills, management, leadership and career development.

El-Jardali, et al (2009) asserted that 85.6% of the respondents in their study agreed that their hospitals held regular training sessions for their staff, as against 14.4% that said no. They equally affirmed in their study that training and capacity development of health workers should be a continuous process; that their training needs in terms of technical, managerial and behavioural aspects should be identified and linked with the needs of the patients in the health facilities where they were working. The researcher however observed that having a training programme in the health sector is not enough; rather, there should be an evaluation system in place for monitoring the effectiveness of training. The parameters which need to be monitored should be directly related to patients' well-being, such as, morbidity and mortality parameters and feedback from patients and relatives.

Conclusion

Based on the above findings, the following conclusions were made. Although training and development has improved health workers' performance through knowledge and skills acquisitions, there were still gaps in the optimal performance of health workers in Enugu State. This could be remedied through regular capacity building activities conducted after appropriate training needs assessment.

Recommendations

In the light of the findings in this study, the following recommendations were made:

1. There should be an increase in workshops and in-service training of health workers in accordance with the training needs assessments.
2. A further study on evaluation of the effects of workshop and in-service training on the productivity of health workers in rural communities in Enugu State.

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