

ASSESSING THE RETENTION MANAGEMENT OF PROFESSIONAL NURSES AT GELUKSPAN PUBLIC DISTRICT HOSPITAL IN THE NORTH WEST PROVINCE (SOUTH AFRICA)

Fortune Ekanem Essien

Graduate of the Regent Business School, Durban, Republic of South Africa, Working and Residing at Gelukspan Hospital in the North West Province of the Republic of South Africa

George Hove

External Dissertation Supervisor working as an Engineer in South Africa and Associated with the Regent Business School, Johannesburg, Republic of South Africa

Anis Mahomed Karodia (PhD)

Professor, Senior Academic and Researcher, Regent Business School, Durban, Republic of South Africa

ABSTRACT

The aim of this study was to assess the retention management of professional nurses at Gelukspan Public District Hospital in the North West Province. In order to achieve the aim, the study analysed the retention management of professional nurses, identified barriers of professional nurse retention management and established measures for improving the retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.

Key Words: Assessing, Retention, Management, Nurses, Barriers, Measures

Introduction

Public health systems in the Southern African countries have been weakened by the loss of health professionals moving from public to private sectors within the country, or leaving the country to work elsewhere in the region or to work in developed countries. Table 1 hereunder shows some of the South African born health professionals working in OECD countries.

Table 1: South African born health professionals in selected OECD countries

Country	Practitioners	Nurses/Midwives	Other health professionals	Total
Australia	1114	1085	1297	3496
Canada	1345	330	685	2360
New Zealand	555	423	618	1596
UK	3625	2923	2451	8999
US	2282	2083	2591	6956
Total	8921	6844	7642	23407

Source: Esau and de Waal (2009:4)

Table 1, as proposed by Esau and de Waal (2009:4), shows that the largest number of South African born health professionals practicing a medical profession in the selected OECD countries were in the United Kingdom followed by the United States. The perception is that there is not much being done by the South African Government to curb the current migration situation or that the response has been slow. A recent study by Esau and de Waal (2009:4) noted that some efforts by the South African Government to develop and implement policies and strategies to retain health professionals in the public health sector was to enter into a Memorandum of Understanding between the United Kingdom and South African Health Department on the Reciprocal Exchange of Health Concepts and Personnel in 2003. According to Esau and de Waal (2009:4), the Memorandum of Understanding was designed to manage health professionals' migration by creating opportunities for professionals in both countries to undertake shorter placements that foster knowledge exchange and the transfer of skills by supporting collaboration between the countries' health systems and personnel. Esau and de Waal (2009:4) stated that on the South African side of the agreement, administrators reported that efforts were showing results in the strengthening of public hospitals and skills of health professionals in targeted hospitals and medical centres. However, some criticism concerning the Memorandum of Understanding has come from some health professionals who believe the Memorandum of Understanding was limiting employment opportunities in United Kingdom for South African health professionals.

Similar studies on professional nurses' retention by Iwu, Allen-Ile and Ukpere (2012:10488) found that dissatisfaction amongst South African professional nurses was high and many of the professionals indicated that poor equipment, workloads, unsafe working conditions, poor salary and job content were elements responsible for the dissatisfaction. Many of the dissatisfied professional nurses opted to leave the country or look for better paid jobs in other fields rather than engage in public hospitals. Other factors that caused dissatisfaction according to Iwu et al. (2012:10488) include problems with colleagues, stress, unsafe working conditions, poor equipment and shortage of professional nurses. The main sources of pressure at work included understaffing, lack of resources, lack of control, difficult work schedules, inadequate security and poor career advancement and salaries.

Pillay (2009:2) stated that the South Africa public health system sector comprises Government health institutions that serve pre-dominantly the indigent population while the private sector comprises profit organisations and individuals that serve the insured population and those who can afford care on an out-of-pocket basis. Although the public sector was responsible for the well-being of 82% of the population, it accounted for only 40% of the total health expenditure. In contrast, the private sector consumed 60% of the health expenditure and was responsible for less than 20% of the population (Pillay, 2009:2).

According to Pillay (2009:2), the public sector which was under resourced and overused was characterized as being inefficient and ineffective in terms of meeting its mandate of accessible, affordable and appropriate health care. The private sector, on the other hand, was reputed for its world-class facilities and care provision. Given the pivotal role that professional nurses play in determining the efficiency, effectiveness and sustainability of health-care systems, it is important to assess retention management of professional nurses in the public hospitals of South Africa.

Aim of the Study

The aim of this study is to assess retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.

Objectives of the Study

The following research objectives were defined for the study:

1. To assess the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.
2. To determine the barriers of the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province; and
3. To establish measures for improving retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.

LITERATURE REVIEW

Retention management

Humphreys, Wakerman, Pashen, Buykx (2009:7) define professional nurses' retention as the length of time between commencement and termination of employment with the hospital. Retention does not imply indefinite length of service in one hospital but refers to some minimum length of stay. According to Humphreys et al. (2009:7), exactly what constitutes the minimum is unclear and varies according to whether it is defined by the profession, position, health service, hospital and characteristics of the community which affects the ease with which professional nurses are replaced.

Humphreys et al. (2009:7) advised that as much as the term was elusive, retention implied some notion of adequacy or sufficiency of length of service measured in terms of the return on the investment costs associated with training and recruitment or the effects on patient care that are considered to be optimal. The retention indicates who is leaving, who is staying and for how long because retention is hard to measure and is tracked over a long period of time. According to Humphreys et al. (2009:7), retention is a focus because an experienced professional nurse is more valuable than a newly-hired one. The quality of care is better due to fewer errors and long-term professional nurses minimize the cost of productivity. The avoidable loss of professional nurses is expensive and often underestimated in the hospital's budget.

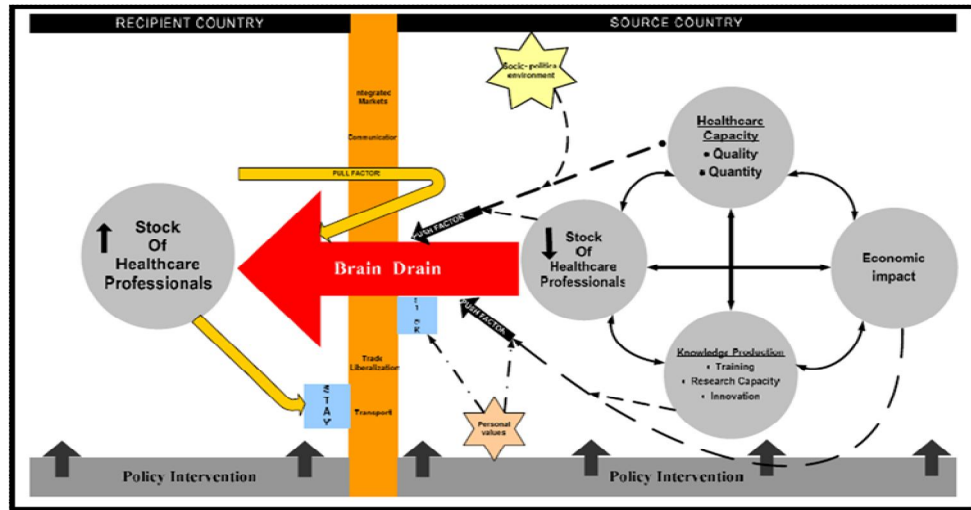
According to Chimbari et al. (2008:6), the causes for migration of health professionals and efforts made by countries to retain health professionals had been documented and became a subject of debate at the Global Forum on Human Resources for Health. Available data showed that some countries such as the United Kingdom and the United States of America had taken measures to retain health professionals. The International and Regional agreements had addressed retention of health professionals in the health sector.

Similarly, Cho, Laschinger and Wong (2006:44) indicated that retention of professional nurses had become a high priority policy issue that was inherently related to the quality and sustainability of healthcare system. As more professional nurses approach retirement, it was made clear that effective strategies must be developed to improve the working conditions characterized by limited resources, increased workloads and high rates of absenteeism. Cho et al. (2006:44) advised that high quality patient care requires the presence of a committed professional nursing workforce, fully engaged in its work and settings that empower professional nurses to provide the care.

A study conducted by Pillay (2007:31) revealed that any rational attempt to manage the causes and consequences of professional nurses' migration requires an integrated policy framework that preserves the human right to free choice and free movement. The forces that drove the phenomenon were complex and originated both in source and destination countries. The challenge for source countries was to manage the outflow of professional nurses in a sustainable way and decreased the impact of emigration on the continent while that of

destination countries was to manage the demand in a responsible way without compromising source countries. Figure 2.1 presents the conceptual framework for the analysis and management of the brain drain of professional nurses.

Figure 2.1: Conceptual framework for management of professional nurses



Source: Pillay (2007:31)

Figure 2.1 as proposed by Pillay (2007:31) shows that one of the most sustainable ways to decrease the emigration of professional nurses is to address the push factors. Factors within and beyond the view of health systems need to be addressed as part of a comprehensive response to the brain drain of professional nurses. This could be done by improving conditions on the continent, increasing economic growth and the absorption of professional nurses into the economy. Factors endogenous to health systems are capacity management, health care infrastructure, remuneration, working conditions and professional development opportunities that need to be addressed.

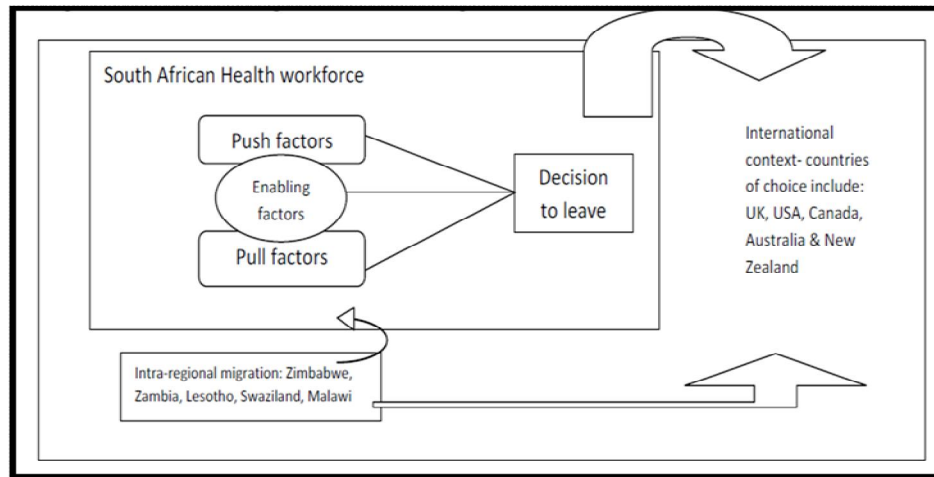
According to Pillay (2007:31), the pull factors can be reduced if developed countries manage the demand by implementing strategies aimed at self sufficiency or by engaging in managed migration which entails bilateral agreements with countries which have a surplus of professional nurses. Countries on the African continent need to consider more innovative strategies to improve the stock of professional nurses because of resource constraints and the inevitability of migration. Simply increasing the production of professional nurse does not mitigate the loss – more leave. Consideration should be given to improving retention strategies; improving the utility of existing professional nurses through enrichment of skills and cadre substitution; encouraging immigration of professional nurses by synchronizing labour and immigration laws. These can overcome some of the insidious effects of the brain drain.

Similarly, Esau and de Waal (2009:6) indicated that professional nurses who migrate from South Africa were highly-skilled individuals having received good training from different institutions. As a developing country, South Africa has the advantage of being advanced and innovative in many fields of infectious diseases. As a result, South African professional nurses are seen as hard working; and these attributes contributes to why developed countries wish to have and lure South African professional nurses into their health systems.

According to Esau and de Waal (2009:6), poor working conditions and remuneration especially in academic public hospitals added to the multitude of problems that professional nurses experienced within South Africa. The effect of professional nurses migrating to

another country had serious implications for the health of citizens. As a result, according to Esau and de Waal (2009:6), professional nurses who remained within the health system experienced increased workloads and functioned under harsher working conditions. This led to burnout and professional nurses' re-assessment as to whether they really wished to work under such circumstances. Figure 2.2 demonstrates the factors influencing professional nurses to migrate.

Figure 2.2: Factors influencing professional nurses to migrate



Source: Esau and de Waal (2009:7)

Figure 2.2 as proposed by Esau and de Waal (2009:7) shows that there are a myriad of reasons why professional nurses make the decision to relocate to another country. Unless the push factors are successfully addressed, intense interest in emigration continues to translate into departure for as long as demand exists abroad. Professional nurses' decision-making about leaving, staying or returning is poorly understood.

According to Cooper (2009:501), professional development allowed professional nurses to increase skill levels and advance through the levels of competence. Competence here implied that professional nurses were accountable to society for an ongoing commitment to remain current and safe in the nursing profession. Professional development was specific as skills training or broad and enhanced personal development. The commitment to professional development was essential for professional nurses to be able to deliver safe and effective health care. Encouraging professional development and increasing opportunities for professional nurses can lead to a positive work environment and increase retention of professional nurses.

Wieck, Dols and Landrum (2010:15) were of the opinion that hospitals must develop a system for identifying potential professional nurses and put them into management training and development early in the tenure. This action offers encouragement to younger professional nurses to stay within the system. It also provides a pool of potential managers to replace those who are retiring, and it provides a ground force of professional nurses who have insights into the challenges of management and who are able to defuse some of the negativity and frustration within the nursing unit.

Wieck et al. (2010:15) advised hospitals to embark on a positive reinforcement campaign where managers show respect for and recognition of professional nurses. The need for respect for professional nurses hinges on being treated as a value-added part of the health delivery system. Proficiency in e-mail delivery of positive reinforcement messages at frequent

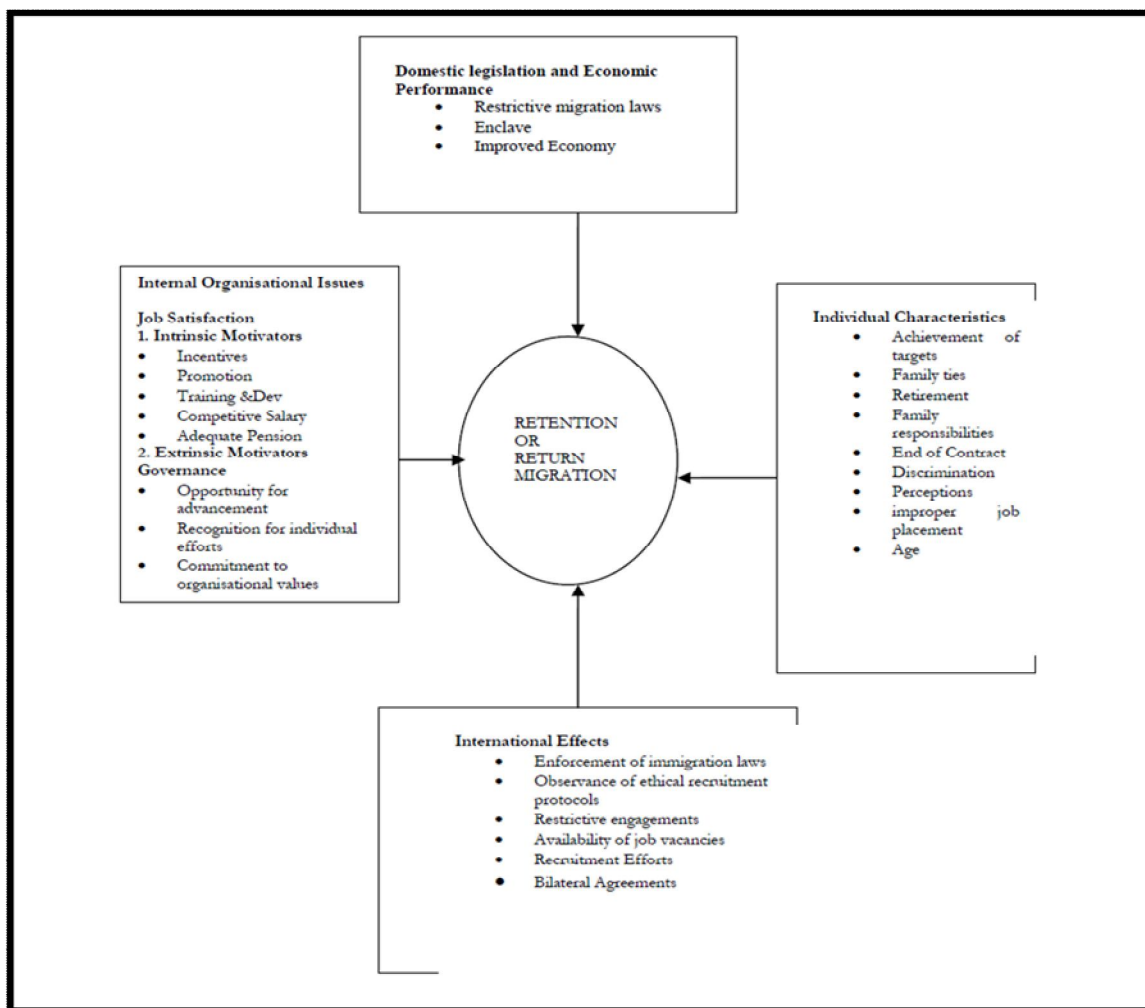
intervals can lead to a revamping of the way hospitals evaluate and reward professional nurses as well as enhance higher satisfaction levels for both the manager and the professional nurses.

Determinants of professional nurses’ retention

According to Shoaib, Noor, Tirmizi and Bashir (2009:3), professional nurses’ retention is a critical issue facing hospitals as a result of professional nurses’ shortage and turnover. Shoaib et al. (2009:8) in their study showed that the independent variables which were professional nurses turnover, motivation, job satisfaction, empowerment, stress, burnout and work life balance had a direct and positive impact on the dependent variables. The enhancement of one independent variable caused the enhancement of the professional nurses’ retention which was the dependent variable. Hospitals worked on the determinants and fostered the professional nurses’ retention management.

Figure 2.3 hereunder depicts the analytical framework for retention of nurses.

Figure 2.3: Analytical framework for professional nurses’ retention



Source: Osei (2007:22)

Figure 2.3 as proposed by Osei (2007:22) shows that retention of professional nurses in the public hospitals may not depend on introduction of incentives alone but other factors that go beyond the ‘enclave’ policy provisions, international action such as immigration restrictions and observance of ethical codes of conduct in recruitment, improvement in the national

economy and personal motivation. The reduction in professional nurse's turnover in public hospitals is contingent on job satisfaction and individual characteristics coupled with opportunities available for alternative employment.

According to Osei (2007:22), professional nurses' turnover refers to the voluntary separation from the hospital by professional nurses who receive compensation from that particular hospital. Intent to stay was elicited by the professional nurses' perception of the possibility of leaving or staying in the present job. Independent variables affected the dependent variables directly or had an indirect effect through the intervening variables.

Similarly, Esau and de Waal (2009:2) indicated that migration of professional nurses to the United Kingdom in the 1980s showed that once the professional nurses had received the basic training, they migrated in order to receive further training; always with the intention of returning to the country of origin. In South Africa, this was not the case. Professional nurses migration was influenced and affected by regional as well as international factors. Brain drain was not reversed or prevented for professional nurses because they live in a global society, where geographical borders no longer dictate professional nurses' mobility. In the African human resources for health context, the retention management of professional nurses became the required tool to lessen the effects of professional nurses' decisions to migrate.

RESEARCH METHODOLOGY

Rationale for the methodology

The rationale for a study was based on the study's need for research to be undertaken. According to Sutrisna (2009:51), rationale explains, defends and proves that the literature and findings are accurate and adequate. The rationale also identifies the reasoning and justification for undertaking research on a particular subject. The research methodology for this study was the quantitative research paradigm. Quantitative research paradigm was considered the appropriate research methodology to analyse the retention management of professional nurses and identify the barriers of the retention management of professional nurses at Gelukspan Public District Hospital in the North West Province. According to Creswell (2009:4), the advantages of quantitative research methodology is that it allows for data collection without incurring excessive costs and closed-ended questions in the questionnaire which makes data coding and capturing easy. It was in that regard that quantitative research approach was chosen. Creswell (2009:4) defined quantitative research as a formal, objective, systematic process in which numerical data is utilized to obtain information.

Target population

The target population for this study was 135 professional nurses. The study excluded other hospital staffs such as doctors and administrators who worked with professional nurses on daily basis. In this case professional nurses at Gelukspan Public District Hospital in the North West Province formed the target population for the analysis. According to Tustin, Lighthelm, Martins and Van Wyk Hde (2005:96), a target population is the group from which a sample is drawn and consists of all the people or establishments whose opinion, behaviour, preferences and attitudes produce information to answer the research questions. Brink (2006:133) noted that the unit of analysis describes the level at which a research is performed and identifies the objects being researched. Organisations do not talk and cannot be interviewed or surveyed rather, individuals representing the organisation respond on behalf of the organisation particularly those who make strategic and operational decisions.

Sampling

Data for this study was obtained from professional nurses using probability sampling. The stratified sampling technique was used to include all 135 total accessible target professional nurses at Gelukspan Public District Hospital in the North West Province to form the selected sample size for the assessment of the retention management of professional nurses. Bless, Higson-Smith and Kagee (2006:99) describe sampling as a practical way of collecting data when the population is infinite or extremely large. There are two major sampling techniques; the non-probability and probability sampling techniques. This study employed the probability sampling technique. According to DePoy and Gilson (2008:234), probability sampling focuses on randomisation where individual sample members are selected from the target population based on purely random or on equal chance of being selected. Salkind (2006:91) points out that the stratified sampling technique is used to differentiate members of a specific population from one another by using variables such as race, gender, social class or the degree of intelligence. Research errors due to random sampling technique can be minimised by the application of stratified sampling when the sample is assumed to be homogeneous and sufficiently represented when the various strata are put together. The reasonable sample size justification guidance by Leedy and Ormrod (2010:213) was also followed:

- Small population ($N < 100$), there is little point in sampling. Survey the entire population.
- If the population size is around 500, 50% of the population should be sampled.
- If the population size is around 1 500, 20% should be sampled; and
- Beyond a certain point (at approximately $N = 5\ 000$), the population size is almost irrelevant, and a sample size of 400 will be adequate.

The sample size for this study was equal to 135; therefore, 'n' was ideally approximate to 135 based on the guidelines. Table 3.1 presents questionnaire distribution and responses.

Limitations of the study

The limitation could be that the sample is biased as the non-probability sampling in which selection of the sample depended on the knowledge of the population which is used in the study to target participants who are professional nurses at Gelukspan Public District Hospital in the North West Province. This study excluded other hospital staffs such as doctors and administrators who work with the professional nurses on daily basis. This method does not allow generalization on the basis of the findings and the study is only conducted at Gelukspan Public District Hospital in the North West Province. Nevertheless, an attempt was made to survey the maximum recommended number of participants in order to reduce sampling bias and enhance validity and reliability. Welman and Kruger (2005:212) stated that there is no correct sample for a study and each study depends on the stated purpose and nature of the population.

RESULTS, DISCUSSION AND INTERPRETATION OF FINDINGS

Biographical information regarding participants

In this section, an overview is given about the general biographical information of the participants that include gender, age, ethnicity, educational qualifications and work experiences. The sample size for study was 135 participants and all professional nurses completed and returned the questionnaires. It appeared that this was first research conducted at the hospital that targeted only professional nurses and the research motivated participants.

Table 4.1: Participant's gender

GENDER	FREQUENCY	PERCENTAGE
Male	16	12
Female	119	88
TOTAL	135	100

Table 4.1 shows that male participants represent 12% of the sample and female participants 88%. From this, it can be concluded that there are more female professional nurses than male at Gelukspan Public District Hospital in the North West Province.

Table 4.2: Participant's age group

AGE GROUP	FREQUENCY	PERCENTAGE
Below 20 years	0	0
20-29 years	6	4
30-39 years	31	23
40-49 years	43	32
50-59 years	55	41
60 years and above	0	0
TOTAL	135	100

Table 4.2 shows that the majority of the participants fall in the age category of 40 to 59 years old (73%). From the age distribution, one can deduce that most of the participants are regarded as experienced professional nurses who would assess retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.

Table 4.3: Participant's ethnicity

ETHNICITY	FREQUENCY	PERCENTAGE
Black	135	100
White	0	0
Coloured	0	0
Indian or Asian	0	0
TOTAL	135	100

Figure 4.3 shows that all participants were black (100%) and from the findings of this study, it emerged that all professional nurses at Gelukspan Public District Hospital in the North West Province are black Africans.

Table 4.4: Participant’s level of education

LEVEL OF EDUCATION	FREQUENCY	PERCENTAGE
Below Matric	9	7
Matric	30	22
Certificate	15	11
Diploma	57	42
Undergraduate Degree	24	18
Honours/ B-Tech	0	0
Masters	0	0
PhD/ Doctorate	0	0
TOTAL	135	100

Table 4.4 shows that 60% of the participants are in possession of Diplomas and Undergraduate Degrees who are well qualified and are in the position to respond reliably to the items in the questionnaire.

Table 4.5: Participant’s work experiences

WORK EXPERIENCES	FREQUENCY	PERCENTAGE
0-1 Year	24	18
1-5 Years	6	4
5-10 Years	12	9
10-15 Years	6	4
15 and more years	87	65
TOTAL	135	100

Table 4.5 shows that the majority of participants (69%) have more than 10 years of working experience and can be regarded as experienced professional nurses at Gelukspan Public District Hospital in the North West Province. This correlates with the age of the participants where most of them fall in the age category of 40 to 59 years old (73%).

Research objective 1

This section analyses the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.

Figure 4.1: Creating opportunities for professional nurses

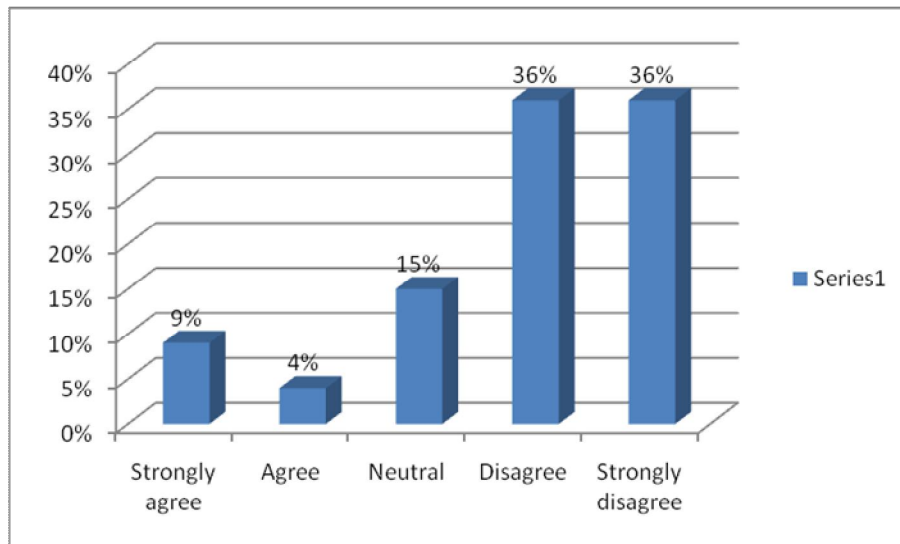


Figure 4.1 shows that majority of the participants (72%) disagree that the hospital was creating opportunities for professional nurses to undertake shorter placements in other countries to foster knowledge exchange, whilst 15% are neutral and 13% agree. The participants were of the idea that Gelukspan Public District Hospital had challenges with creating opportunities for professional nurses to undertake shorter placements in other countries to foster knowledge exchange. According to Esau and de Waal (2009:4), some efforts were made by the South African government to develop and implement policies and strategies to retain health professionals in the public health sector. This entailed entering into a Memorandum of Understanding in 2003 between the United Kingdom and South African Health Department on the Reciprocal Exchange of Health Concepts and Personnel. Esau and de Waal (2009:4) stated that the Memorandum of Understanding was designed to manage health professionals' migration by creating opportunities for both countries health professionals to undertake shorter placements that foster knowledge exchange and the transfer of skills by supporting collaboration between the countries' health systems and personnel.

Figure 4.2: Retention of professional nurses' policies

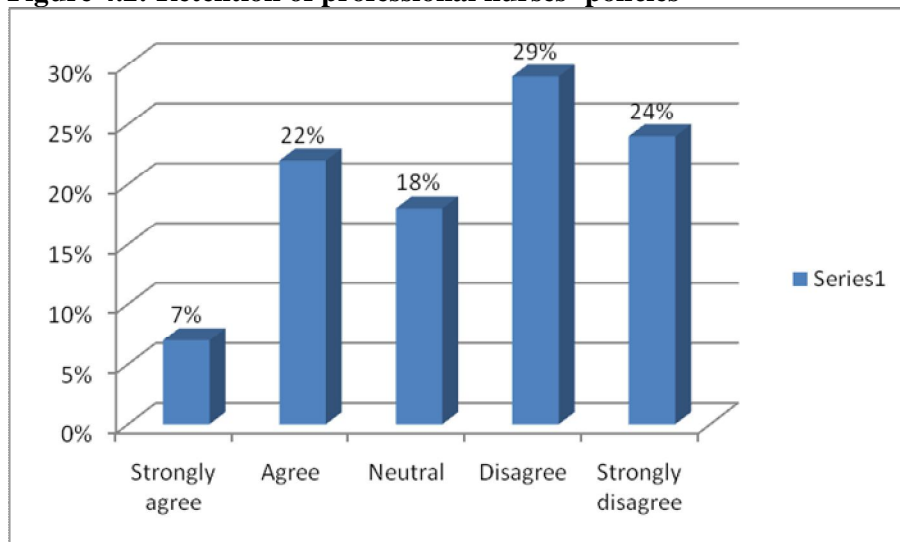


Figure 4.2 shows that approximately more than half of the participants (53%) disagree that the hospital has retention of professional nurses' policies, while 18% are neutral and 29% agree. From the responses, it implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with retention of professional nurses' policies. Cho et al. (2006:44) indicated that retention of professional nurses had become a high-priority policy issue that is inherently related to the quality and sustainability of healthcare systems. As more professional nurses approached retirement, it was clear that effective strategies should be developed to improve working conditions. According to Cho et al. (2006:44), high quality patient care require the presence of a committed professional nursing workforce that is fully engaged in its work and settings which empower professional nurses to provide the care.

Figure 4.3: Integrated policy framework

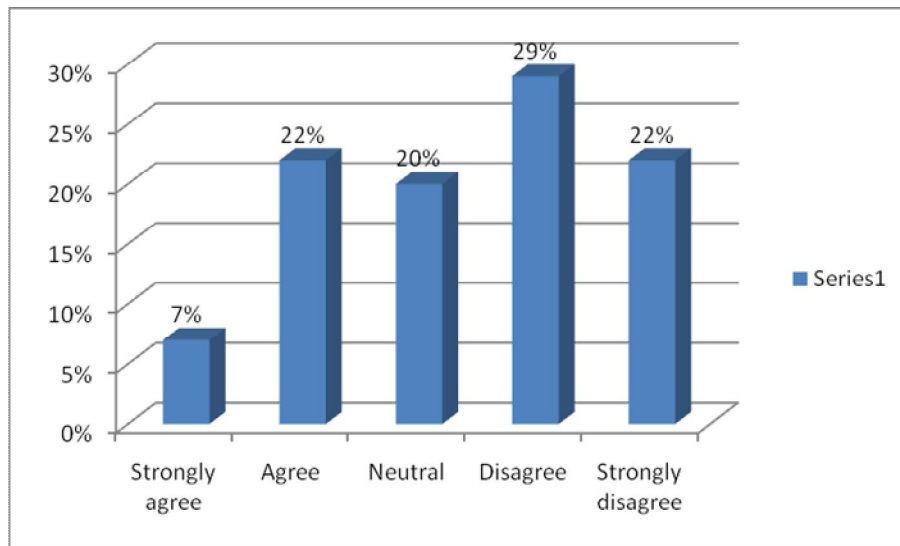


Figure 4.3 shows that almost more than half of the participants (51%) disagree that the hospital has an integrated policy framework that preserve professional nurses right to free movement, while 20% are neutral and 29% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with integrating policy framework that could preserve professional nurses right to free movement. Pillay (2007:31) indicated that any rational attempt to manage the causes and consequences of professional nurses' migration require an integrated policy framework that would preserve the human right to free choice and free movement. The forces that drive the phenomenon are complex and originate both in source and destination countries. According to Pillay (2007:31), the challenge for source countries is to manage the outflow of professional nurses in a sustainable way and decrease the impact of emigration on the continent while that of destination countries is to manage the demand in a responsible way without compromising source countries.

Figure 4.4: Professional nurses' decision-making of resigning

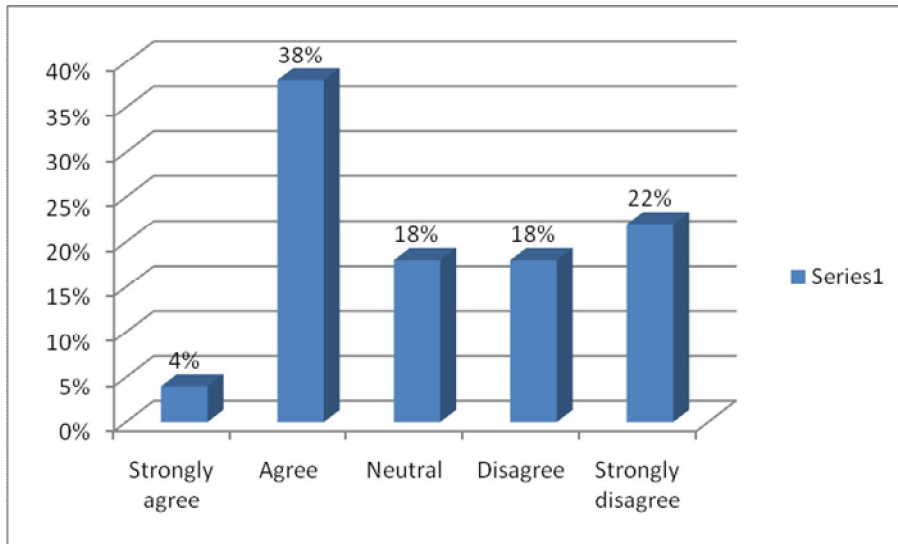


Figure 4.4 shows that less than half of the participants (42%) agree that professional nurses' decision to resign is well understood by management, while 18% are neutral and 20% disagree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with professional nurses' decision-making of resigning. According to Esau and de Waal (2009:6), professional nurses' decision-making regarding leaving, staying or returning is poorly understood and primarily anecdotal. To understand how push and pull factors interact in decision making and the mediating role of variables such as profession, race, class, age, gender income and experience, the opinion of professional nurses need to be sought. Esau and de Waal (2009:6) indicated that any migration to another country is the outcome of a balance between push and pull factors with source and destination countries weighed against each other in a complicated form of cost benefit analysis. The motivations and expectations behind migration decisions and the very nature of these decisions are extremely diverse.

Figure 4.5: Valuing the services rendered by professional nurses

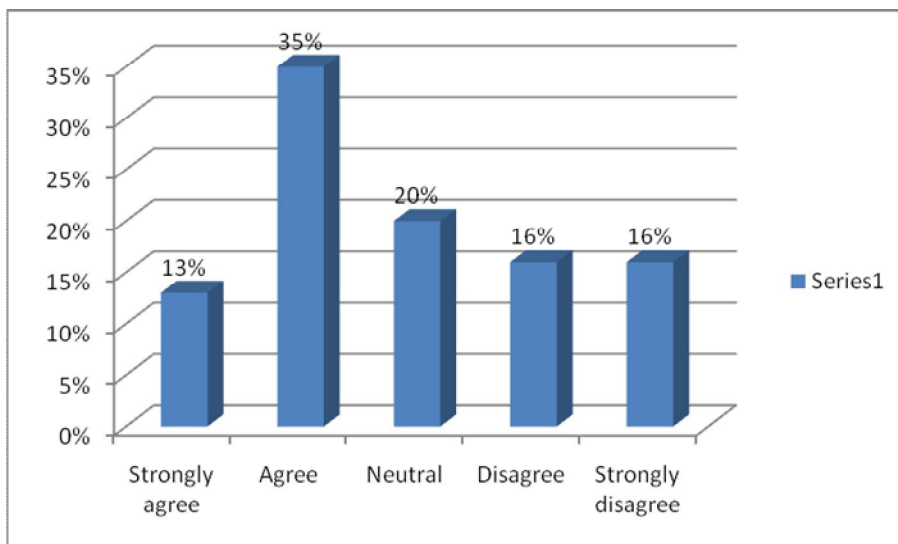


Figure 4.5 shows that a substantial number of the participants (48%) agree that the hospital values the services rendered by professional nurses; 20% are neutral and 32% disagree. The

responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with valuing the services rendered by professional nurses. Iwu et al. (2012:10488) stated that the feeling of being unappreciated and less valued results in professional nurses seeking greener pastures either in other industries or overseas. Iwu, Allen-Ile and Ukpere (2012:10488) noted that in retaining professional nurses, health establishments made them feel that the job was important, provided professional nurses with comfortable workplace and constant training and development for career enhancement.

Figure 4.6: Strategies designed to increase length of stay

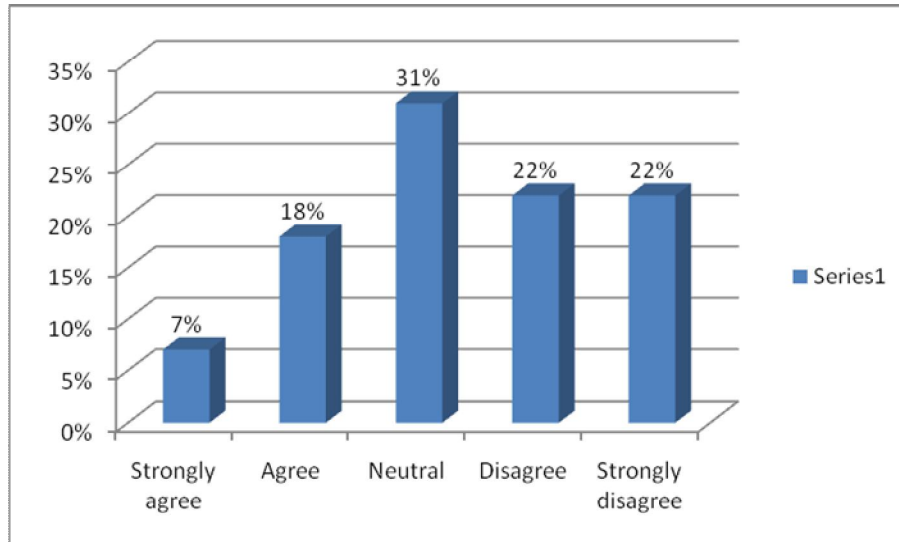


Figure 4.6 shows that 44% of the participants disagree that the hospital has strategies designed to increase the length of stay of professional nurses, 31% are neutral and 25% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with strategies designed to increase length of stay of professional nurses. Humphreys et al. (2009:8) advised that in order to implement the strategies designed to increase length of stay of professional nurses in health services, it is necessary to understand the factors affecting retention and how they operate to trigger a decision to stay or leave. According to Humphreys et al. (2009:8), professional nurses' retention and satisfaction are influenced by a number of factors operating at different levels - the health system at the macro-level, the health facility or workplace at the micro level and professional nurses' characteristics at the individual level. Any significant dissonance between professional nurses' needs and the workplace reduces the level of professional nurses' satisfaction and triggers professional nurses' relocation to another job or place.

Figure 4.7: Creating culture of professional nurses’ development

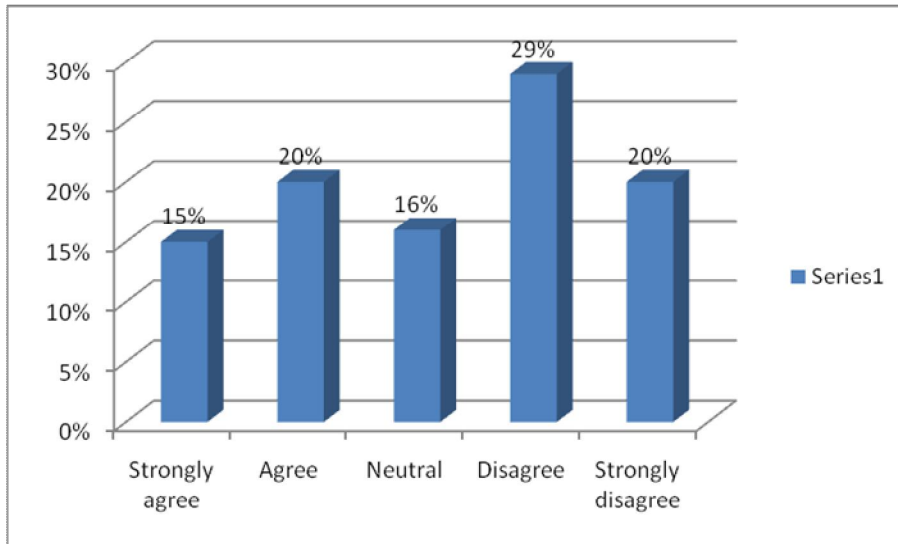


Figure 4.7 shows that 49% of the participants disagree that the hospital creates a culture of professional nurses’ development, 16% are neutral and 35% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with creating a culture of professional nurses’ development. Cooper (2009:501) advised that increasing professional nurses’ retention and satisfaction can be achieved by creating a culture of professional development in health care institutions to combat the nursing shortage. According to Cooper (2009:501), professional nurses’ development is a constant commitment to maintain specific skill levels and career paths. This commitment ensures that a professional nurse’s skills and knowledge are current and relevant.

Figure 4.8: Systems for identifying young potential professional nurses

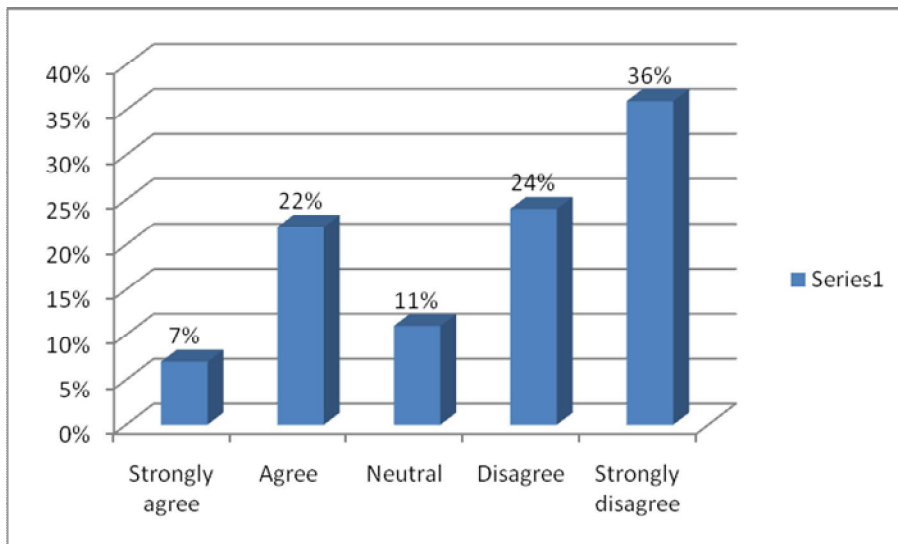


Figure 4.8 shows that 50% of the participants disagree that the hospital develops systems for identifying young potential professional nurses in order to put them into manager training programmes, 11% are neutral and 29% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with developing systems for identifying young potential professional nurses in order to put them into manager training programmes. Wieck et al. (2010:15) advised that hospitals

must develop a system for identifying potential professional nurses and put them into manager training and development programmes early in their tenure. This action offers encouragement to younger professional nurses to stay in the system and provides a pool of potential managers to replace those who are retiring.

Figure 4.9: Showing respect to professional nurses

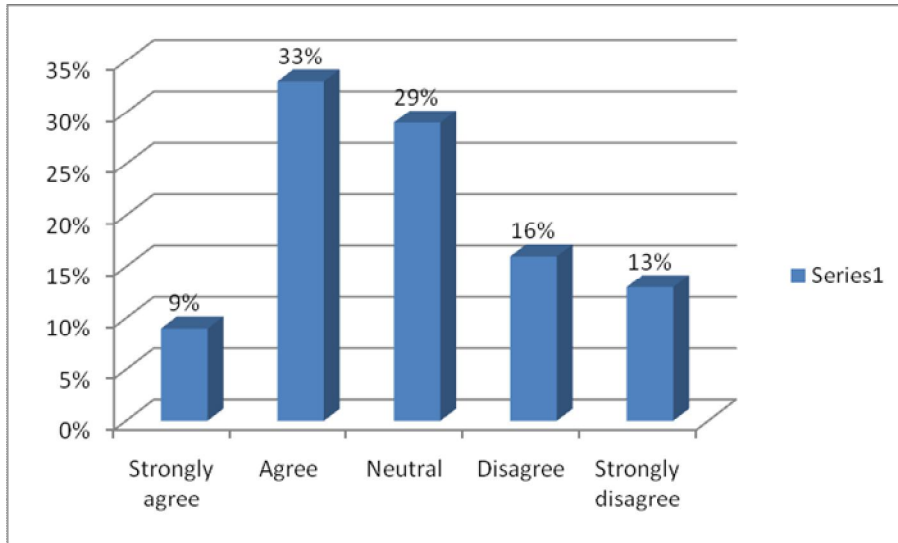


Figure 4.9 shows that 42% of the participants agree that the hospital shows respect to professional nurses, 29% are neutral and 29% disagree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with respecting professional nurses. Wieck et al. (2010:15) advised hospitals to embark on a positive reinforcement campaign where managers show respect and recognition of professional nurses. The need for showing respect to professional nurses hinges on being treated as a value-adding part of the health delivery system.

Figure 4.10: Utilizing the professional nurses

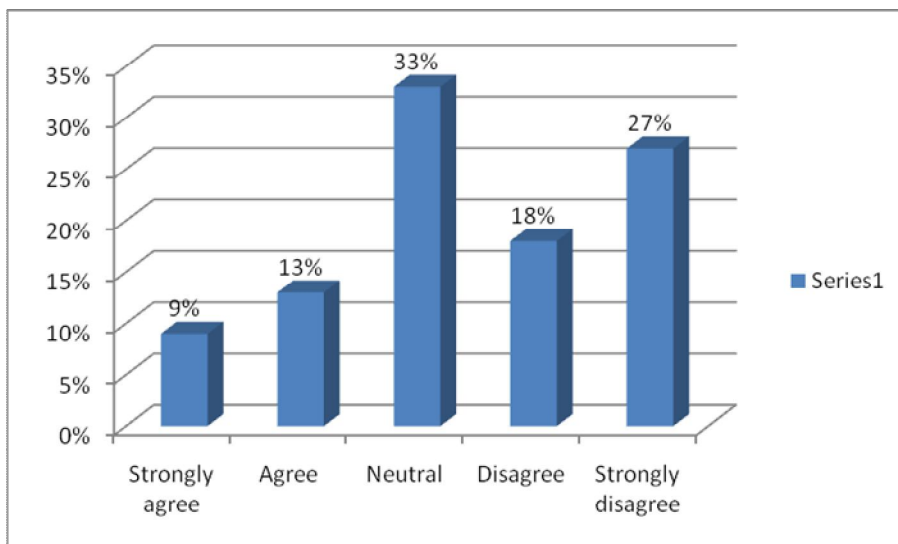


Figure 4.10 shows that majority of the participants (45%) disagree that the hospital underutilizes professional nurses, 33% are neutral and 22% agree. The responses implied that

the participants were of the idea that Gelukspan Public District Hospital had challenges with utilizing the professional nurses. Oelke et al. (2008:59) advised that professional nursing scope of practice must ensure that professional nurses are able to work to the full scope of practice as an important retention strategy that is crucial to resolving workforce shortage. According to Oelke et al. (2008:59), although the concepts “professional nursing scope of practice” and “role enactment” are widely used, the terms are often not clearly defined, despite the fact that understanding these concepts are essential to effective utilization of the professional nurses.

Figure 4.11: Focusing on retaining professional nurses

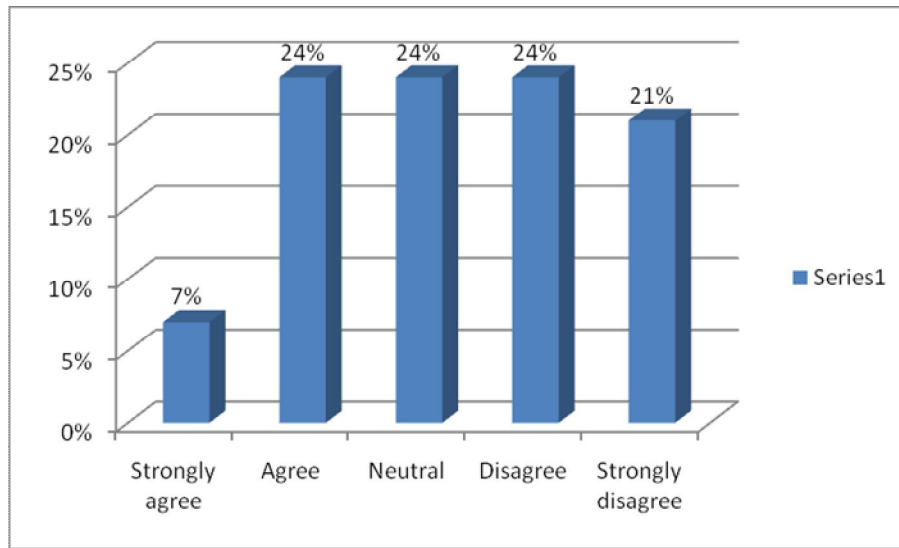


Figure 4.11 shows that 45% of the participants disagree that the hospital focuses on retaining the professional nurses, 24% are neutral and 31% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with focusing on retaining the professional nurses. According to Humphreys et al. (2009:7), retention focuses on retaining the professional nurses because an experienced professional nurse is more valuable than a newly-hired one. Where the workforce is experienced, the quality of care is better due to fewer errors and long-term professional nurses minimize the cost of productivity. Humphreys et al. (2009:7) indicated that low retention indicates that not many professional nurses are staying long enough to achieve job mastery. The avoidable loss of professional nurses is expensive and often underestimated in the hospital budget.

4.4 Research objective 2

This section identifies factors acting as barriers to the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province.

Figure 4.12: Examining professional nurses’ intentions to resign

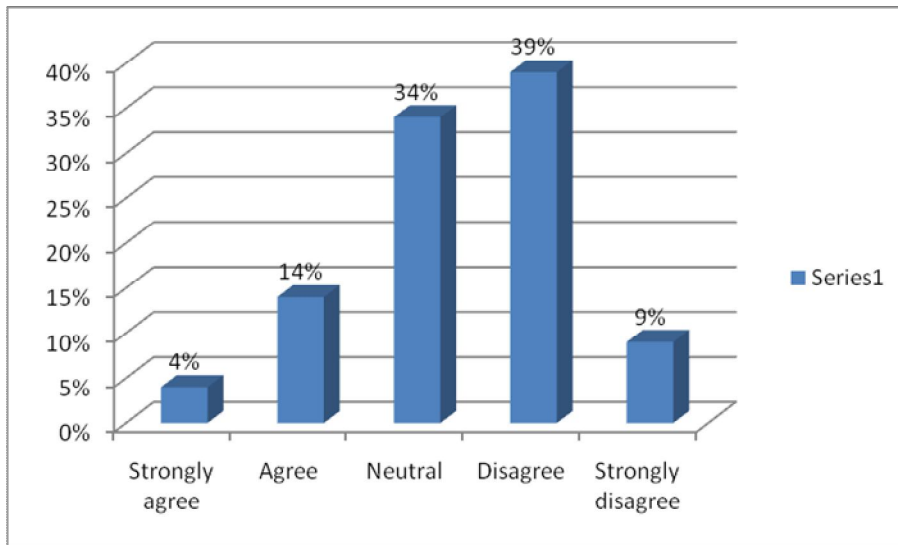


Figure 4.12 shows that majority of the participants (48%) disagree that the hospital examines the professional nurses’ intentions to resign, 34% are neutral and 18% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with examining professional nurses’ intentions to resign. Omar et al. (2012:194) advised that hospitals should examine professional nurses’ intention to leave instead of studying turnover itself. There are many reasons that contribute to professional nurses’ intention to leave. According to Omar et al. (2012:194), knowing the reasons for leaving is too late to stop the actual leaving, thus, detecting the intention to leave early is better in supporting the effort to prevent or minimize professional nurses’ departure.

Figure 4.13: Incentives

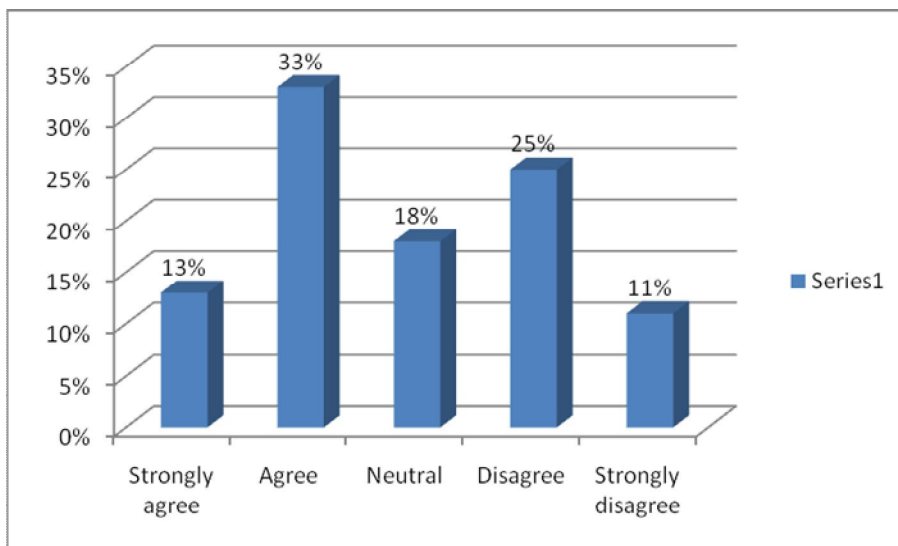


Figure 4.13 shows that 46% of the participants agree that retention of professional nurses depends on incentives alone, 18% are neutral and 36% disagree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital’s retention of professional nurses rarely depends on incentives alone. Osei (2007:22) advised that retention

of professional nurses in public hospitals does not depend on introduction of incentives alone but other factors that go beyond the enclave policy provisions such as international action regarding immigration restrictions, observance of ethical codes of conduct in recruitment, improvement in the national economy and personal motivation. According to Osei (2007:22), the reduction in professional nurse's turnover in public hospitals is contingent on job satisfaction and individual characteristics coupled with opportunities available for alternative employment.

Figure 4.14: Intrinsic motivation

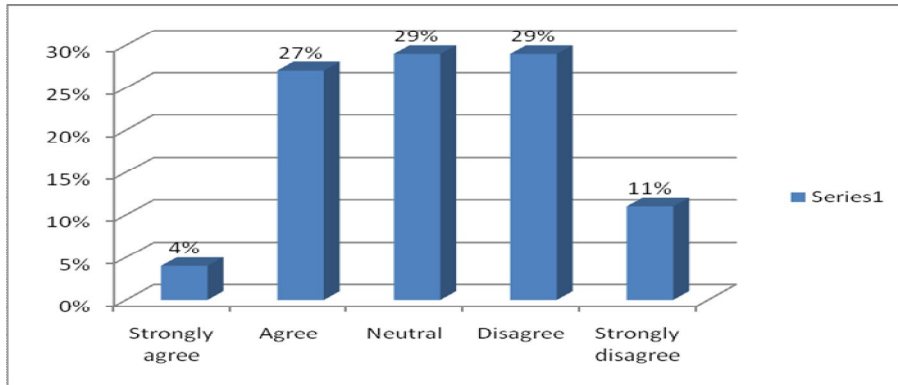


Figure 4.14 shows that 40% of participants disagree that the hospital offers adequate intrinsic motivation, 29% are neutral and 31% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with offering adequate intrinsic motivation. Shumba (2007:4) advised that motivators are intrinsic and results in increased motivation and permanency as opposed to mobility of the professional nurses. As a rule, hygiene and the intrinsic factors best work together at the same time. According to Shumba (2007:4), the workplace environment should be such that professional nurses are happy and given recognition, responsibility, space and opportunities for growth and creativity in order to increase the inner self-worth resulting in self-fulfilment.

Figure 4.15: Extrinsic motivation

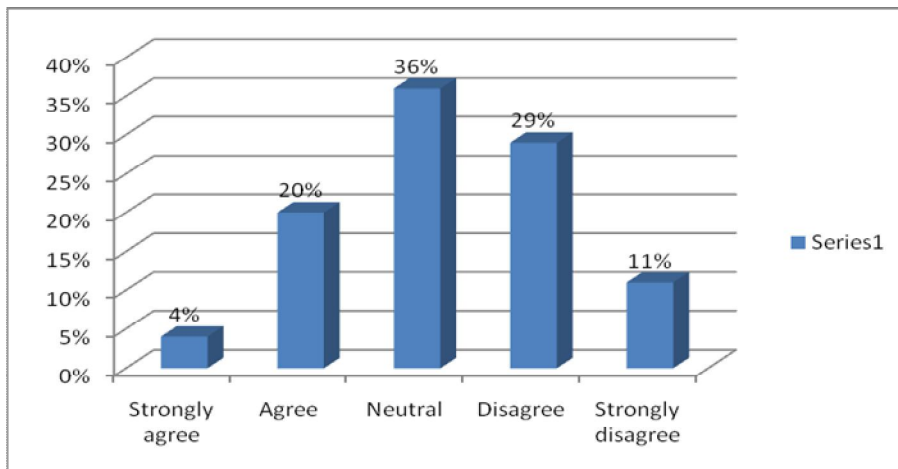


Figure 4.15 shows that majority of participants (40%) disagree that the hospital offers adequate extrinsic motivation, 36% are neutral and 24% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with offering adequate extrinsic motivation. Shumba (2007:4) stated that extrinsic motivation refers to outside factors such as the prospect of getting rewarded on completing a task.

Motivation strategies are oriented towards good working environments, health systems that build support for professional nurses in addition to good salaries. According to Shumba (2007:4), the factors that influence motivation of professional nurses has its bearing on equitable access, efficiency and effectiveness as well as on quality and responsiveness of health systems. Workforce strategies must be aimed at producing professional nurses with sufficient skill, adequate support and high motivation. Emphasis must not be on the presence of professional nurses alone as the total solution but what is important is that hospitals should be equipped with the necessary supplies to enable professional nurses do the job well.

Figure 4.16: Role ambiguity

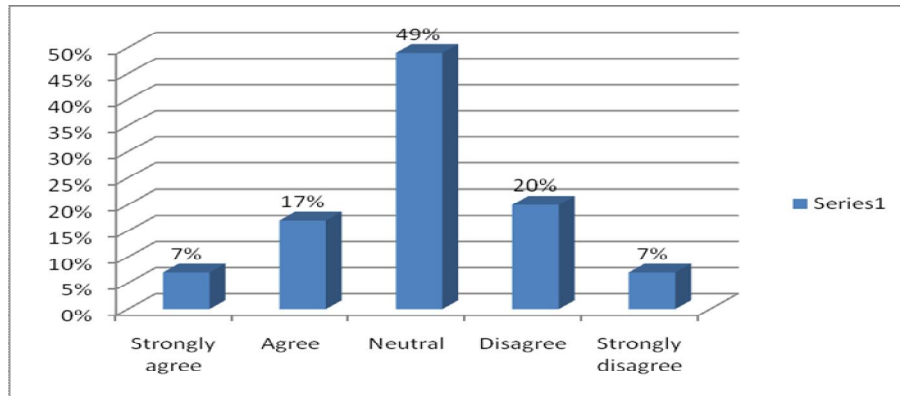


Figure 4.16 shows that majority of the participants (49%) are neutral that the hospital has role ambiguity, 27% disagree and 24% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with role ambiguity. According to Cortese (2012:312), job satisfaction appears to be an antecedent of life satisfaction although personality factors also influence professional nurses' work satisfaction. The characteristics of the hospital environment and work activities have a crucial impact on job satisfaction. According to Cortese (2012:312), professional nurses' job satisfaction has changed throughout the professional career based on the different contexts, departments, supervisors, co-workers and duties progressively encountered. The characteristics of the hospital that influence job satisfaction are role ambiguity, work-load, communication, recognition, professional routine and care setting.

Figure 4.17: Job autonomy

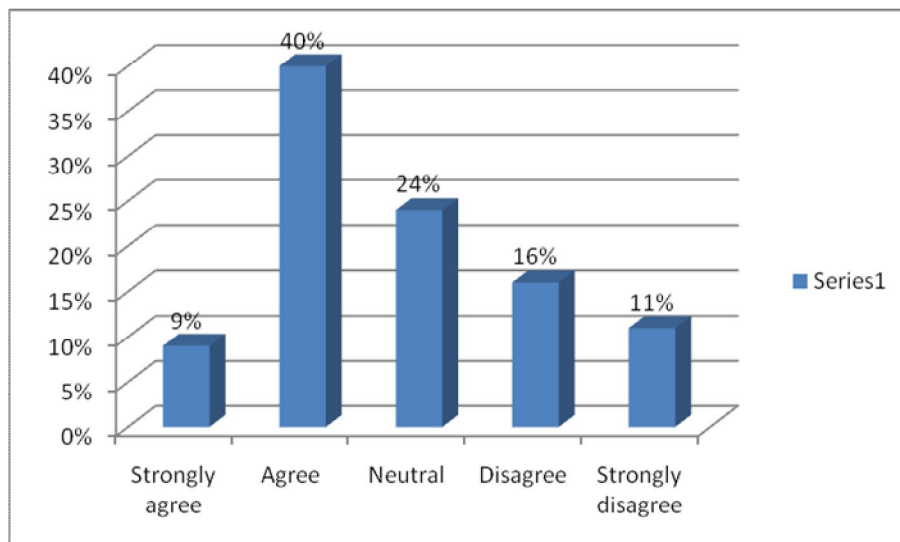


Figure 4.17 shows that 49% of the participants agree that the hospital encourages professional nurses' job autonomy, 24% are neutral and 27% disagree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with encouraging professional nurses' job autonomy. Alnems et al. (2005:3) advised that autonomy had been identified as the strongest predictor of job satisfaction for nurses which in turn reflects positively on nurse retention. The factors include demographic variables which are: education, experience and position in the hierarchy; job characteristics which include: autonomy, tasks repetitiveness, and salaries; and hospital environment factors which include: degree of professionalization, type of unit and nursing care delivery model.

Figure 4.18: Work settings fulfil professional nurses' needs

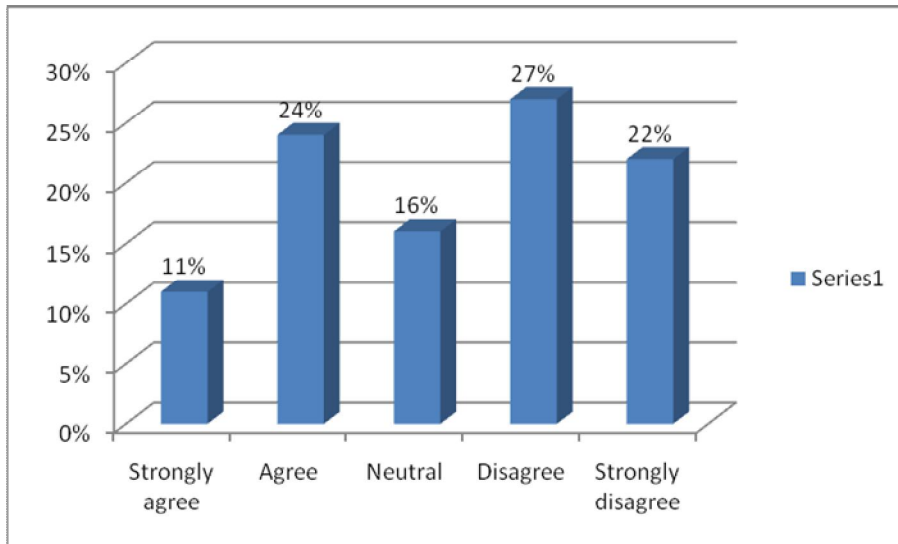


Figure 4.18 shows that majority of the participants (49%) disagree that the hospital work settings fulfil professional nurses' needs, 16% are neutral and 35% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with ensuring that work settings fulfil professional nurses' needs. ALnems et al. (2005:3) advised that job satisfaction is related to the extent to which the work settings fulfil important professional nurse's needs. The salience of needs varies and the greater the needs the more satisfied the professional nurses are when those needs are fulfilled.

Figure 4.19: Effective communications

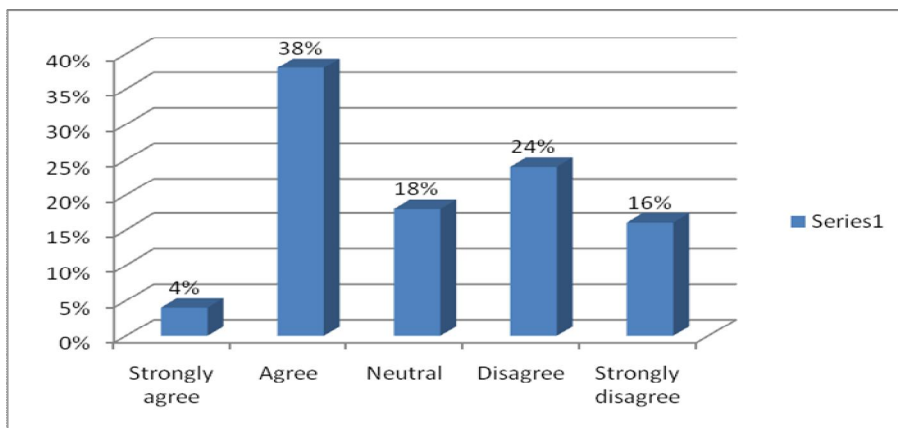


Figure 4.19 shows that approximately less than half of the participants (42%) agree that the hospital has effective communication, 18% are neutral and 40% disagree. The responses

implied that the participants are of the idea that Gelukspan Public District Hospital had challenges with effective communications. Toofany (2007:24) advised that effective communication is the major factor that influences job satisfaction and good communication between managers and professional nurses' help in creating cohesive teams. Creating a cohesive nursing workforce is essential to successful retention of staff.

Figure 4.20: Good leadership

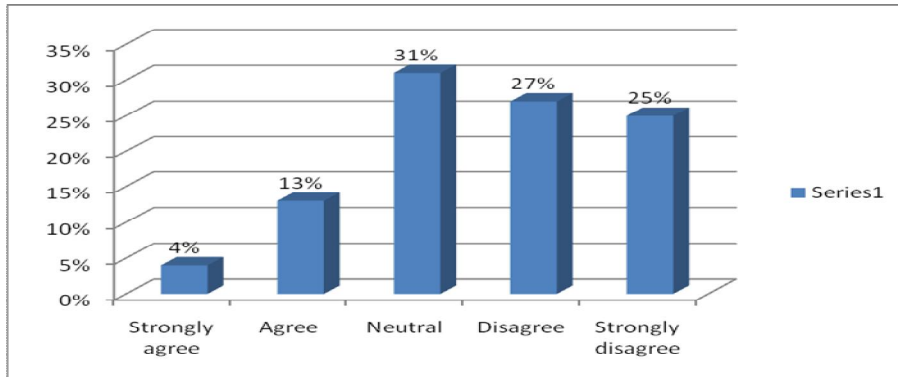


Figure 4.20 shows that 52% of the participants disagree that the hospital has effective leadership, 31% are neutral while 17% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with effective leadership. Toofany (2007:24) advised that good leadership is essential for effective management and because nursing leaders form the largest group of hospital middle management and lead the group of professional nurses in the hospital, the quality and style of the leadership is crucial to the success of the hospital. According to Toofany (2007:24), nursing leaders are also responsible for strategy, communication and team building. Senior managers initiate formal programmes that develop the leadership skills of the professional nurses and such leadership development of professional nurses improve the ways that patient care is organized.

Figure 4.21: Role clarity

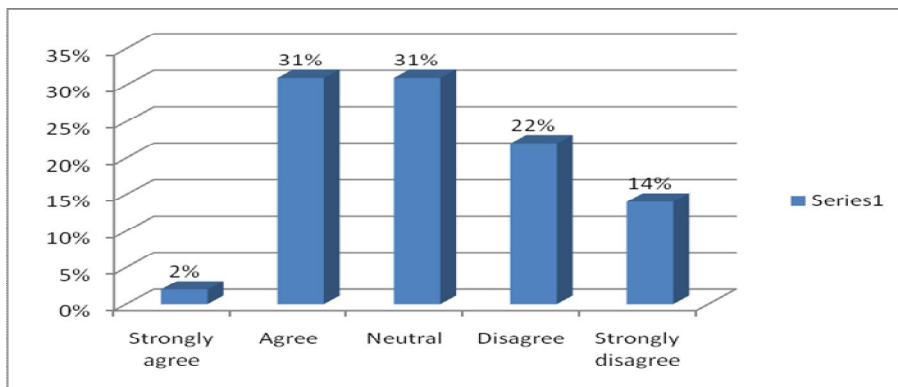


Figure 4.21 shows that majority of the participants (36%) disagree that the hospital provides role clarity, 31% are neutral and 33% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with providing role clarity. Iwu et al. (2012:10504) found that role clarity is the understanding of a set of expected behaviour patterns by professional nurses occupying a given position. Improving role clarity is an urgent need in the hospitals. According to Iwu et al. (2012:10504), role is one of the hospital climate variables that act as a unique contributor to the formation of intentions to

leave the profession. Job design provides job satisfaction for the professional nurses and aids the achievement of strategic goals of the hospital.

Figure 4.22: Empowerment strategies

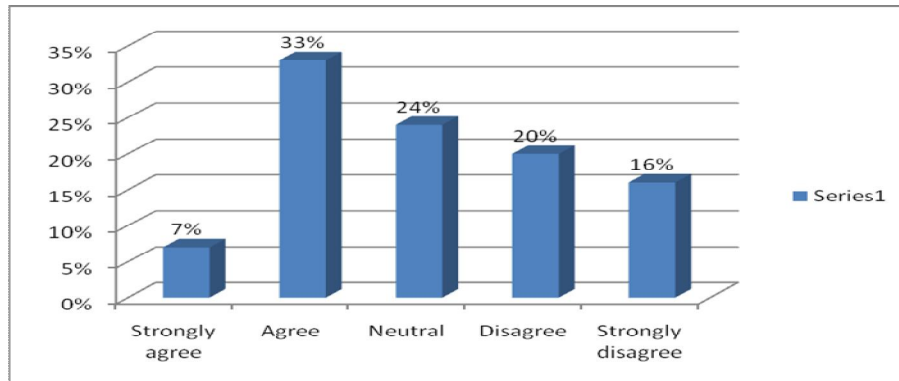


Figure 4.22 shows that the majority of the participants (40%) agree that the hospital has empowerment strategies, 24% are neutral and 36% disagree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with empowerment strategies. Laschinger et al. (2009:303) stated that professional nurses' empowerment strategies are designed to increase control over the work, improving job satisfaction and enhancing hospital commitment. The hospital's structural empowerment, that is structural factors within the work environment has a greater impact on professional nurses work attitudes and behaviour than professional nurses predispositions or socialization experiences.

Figure 4.23: Mentoring programmes

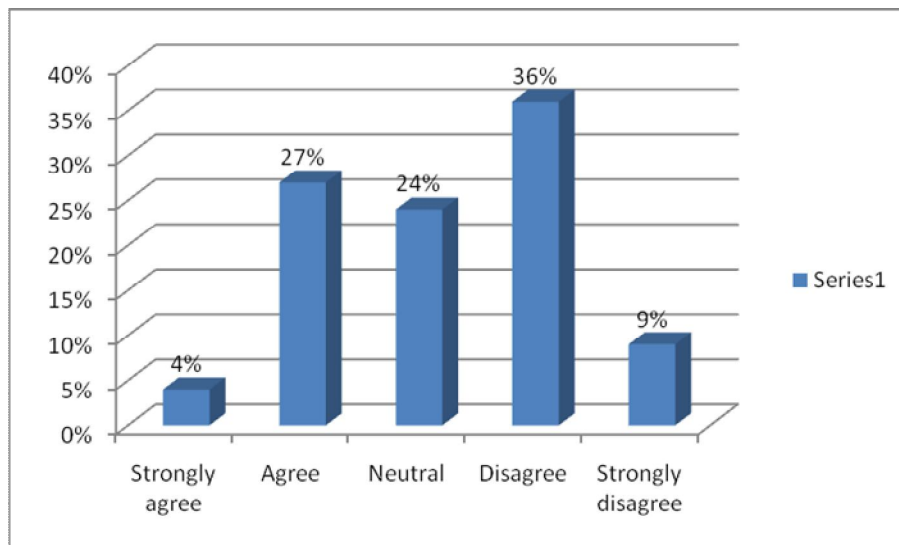


Figure 4.23 shows that approximately less than half of the participants (45%) disagree that the hospital has mentoring programmes, 24% are neutral and 31% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with mentoring programmes. Bally (2007:148) argued that mentoring is one method that enhances professional nurses' satisfaction and reduces the feeling among professional nurses that they are being devalued, discriminated against and disempowered. According to Bally (2007:148), mentoring is influenced by the hospital culture within which it exists. Mentoring can be utilized to enhance professional nurses' development, assist

professional nurses in adapting to new and different roles and increase the numbers of professional nurses. Professional nurses and nurse managers alike must recognize and understand the interrelationships of mentoring, hospital culture and leadership for the optimal development of effective mentoring.

Figure 4.24: Engaging professional nurses in the decision making processes

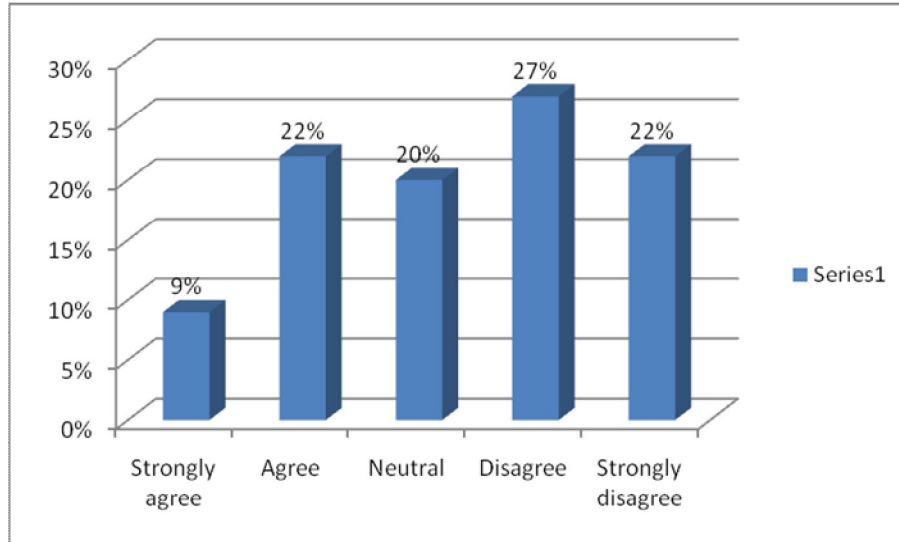


Figure 4.24 shows that 49% of the participants disagree that the hospital engage professional nurses in the decision making processes, 20% are neutral and 31% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with engaging professional nurses in the decision making processes. Tillott et al. (2013:27) stated that there is a relationship between empowerment, workplace satisfaction and professional nurses' engagement. When professional nurses feel empowered, they will perceive that they have reasonable workloads, can maintain control over working relationships, feel rewarded and treated fairly for the contributions thus, maintaining a link between personal and hospital values.

Figure 4.25: Reducing occupational stresses

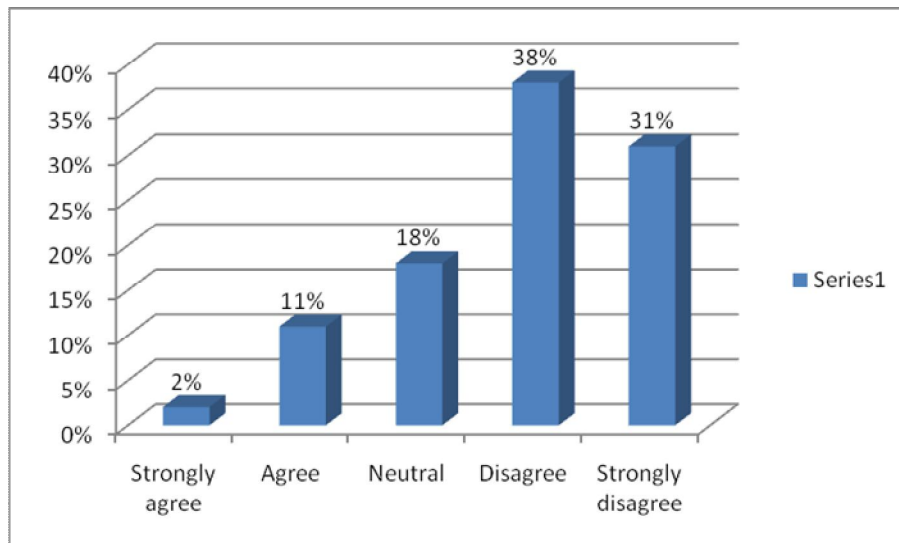


Figure 4.25 shows that more than half of the participants (69%) disagree that the hospital is reducing occupational stress, 18% are neutral and 13% agree. The responses implied that the

participants were of the idea that Gelukspan Public District Hospital had challenges with reducing occupational stress. According to ALnems et al. (2005:7), professional nurses rate high workloads and dealing with death and dying as the major stressful events they encounter. Hospitals throughout the world are undergoing massive changes in hospital structure in an effort to reduce costs. ALnems et al. (2005:7) indicated that nursing is an occupation characterized by a number of features not experienced in most other professions. This included situations involving death and dying and more mundane stressors such as working long hours and working shifts and weekends. This provides an indication of the complex and demanding nature of the profession.

Figure 4.26: Professional nurses’ burnout

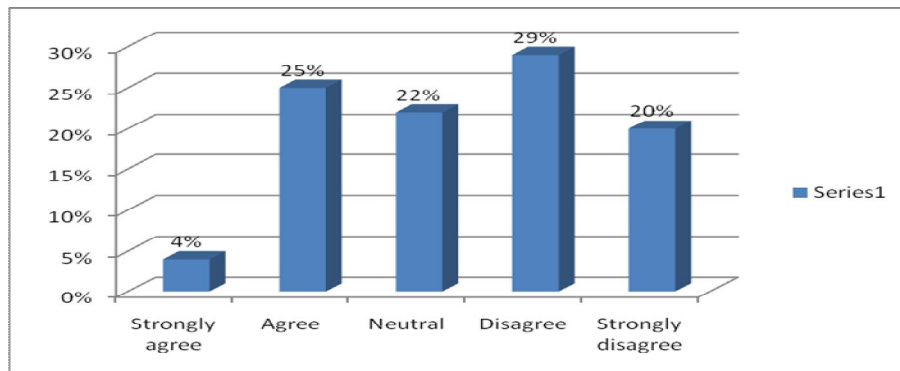


Figure 4.26 shows that a substantial number of the participants (49%) disagree that the hospital explores factors that can contribute to the development of professional nurses’ burnout, 22% are neutral and 29% agree. The responses implied that the participants were of the idea that Gelukspan Public District Hospital had challenges with exploring factors that contribute to the development of professional nurses’ burnout. Khamisa et al. (2013:2216) noted that professional nurses experience higher levels of burnout compared to other health care professionals owing to the nature of the work. A high level of burnout among professional nurses has often been attributed to prolonged direct personal contact of an emotional nature with large number of patients. According to Khamisa et al. (2013:2216), burnout in professional nurses has been shown to lead to emotional exhaustion as well as a loss of compassion and a sense of low personal accomplishment. The experiences have implications for the health and wellbeing of professional nurses.

Figure 4.27: Work life balance opportunities

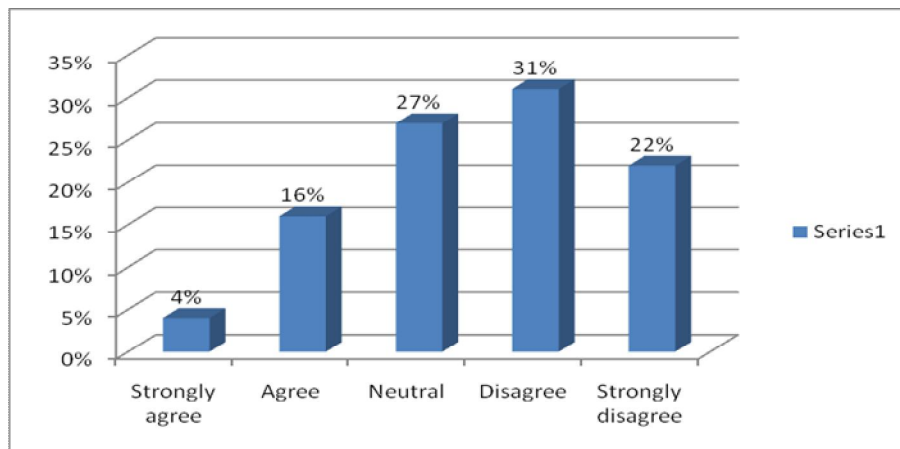


Figure 4.27 shows that majority of the participants (53%) disagree that the hospital provides work life balance opportunities, 27% are neutral and 20% agree. The responses implied that

the participants were of the idea that Gelukspan Public District Hospital had challenges with providing work life balance opportunities. According to Malik et al. (2010:234), work life balance plays a positive role in minimizing the dissatisfaction among professional nurses with respect to the jobs. The hospitals provided work life balance opportunities to professional nurses to manage work and life activities comfortably and this led to increased job satisfaction and helped in reducing the turnover rate. Malik et al. (2010:234) indicated that job satisfaction is the most important factor that affects life more than the work hours. Work life balance provides an opportunity for professional nurses to freely use flexible working hour programs, balance the work and other commitments like family, hobbies, art, travelling and studies instead of only focusing on work. Improving professional nurses' work life balance leads to greater productivity, professional nurses' loyalty and job satisfaction.

CONCLUSIONS AND RECOMMENDATIONS

The conclusions from the study and the findings from the primary research including recommendations are presented hereunder: The findings of this research study are presented according to the defined research objectives.

Research objective 1

In terms of research objective 1 to analyse the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province, the following findings were made. The study found that the hospital had challenges with creating opportunities for professional nurses to undertake shorter placements in other countries to foster knowledge exchange. The hospital also had challenges with retention of professional nurses' policies. From the analysis, it was confirmed that the hospital had challenges with incorporating an integrating policy framework that would preserve professional nurses right to free movement. This situation is exacerbated by hospital's inadequate knowledge of professional nurses' decision to resign.

The findings suggest that the hospital had challenges with effectively valuing the services rendered by professional nurses. It was also found that the hospital had challenges with strategies designed to increase length of stay of professional nurses. Furthermore, the hospital had challenges with creating a culture of professional nurses' development. From the analysis, it was confirmed that the hospital had challenges with developing a system for identifying young potential professional nurses to put them into manager training programmes. The hospital also had challenges with respecting professional nurses. It was evident that the hospital had challenges with effectively utilizing the professional nurses. This situation was intensified by the hospital's challenges regarding retaining the professional nurses.

Research objective 2

In terms of research objective 2 to identify the barriers of the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province, the following findings were made. The study found that the hospital's retention of professional nurses rarely depend on incentives alone. However, this was not adding value as the hospital had challenges with examining professional nurses' intentions to resign and offering adequate intrinsic motivation. The hospital also had challenges with offering adequate extrinsic motivation and with role ambiguity. From the analysis, it was confirmed that the hospital had challenges with encouraging professional nurses' job autonomy and work settings which help to fulfil professional nurses' needs. This situation was further exacerbated by challenges with effective communication and good leadership.

The findings suggest that the hospital had challenges with providing role clarity and empowerment strategies. The hospital also had challenges with mentoring programmes and engaging professional nurses in the decision making processes. This situation was also exacerbated by challenges with exploring factors that contribute to the development of professional nurses' burnout. From the analysis, it was confirmed that the hospital had challenges with providing work life balance opportunities.

Conclusions

In conclusion, it is clear that most public hospitals have failed to retain professional nurses due to lack of retention management strategies. It was assumed that challenges to retain professional nurses resulted from challenges with effective creation of opportunities for professional nurses to undertake shorter placements in other countries to foster knowledge exchange. This also included the hospital's challenge in creating policies for retention of professional nurses. Key among these challenges was effectively valuing the services rendered by professional nurses and strategies designed to increase length of stay of professional nurses. It was also assumed that challenges regarding retaining professional nurses resulted from the hospital's challenge with respecting professional nurses.

With regard to identifying the barriers of retention management of professional nurses, retention of professional nurses rarely depend on incentives alone. The literature study confirmed that most public hospitals fail to retain professional nurses due to the challenge with examining professional nurses' intentions to resign and offering adequate intrinsic motivation. Key among these challenges was offering adequate extrinsic motivation and role ambiguity. It was also assumed that challenges to retain professional nurses resulted from the hospital's challenge with effective communication and good leadership. Literature study also confirmed that most public hospitals fail to retain professional nurses due to challenges with providing role clarity and empowerment strategies.

Recommendations

Based on the literature study and the findings of the empirical research the following recommendations are offered:

Retention management of professional nurses

It is recommended that the hospital should create opportunities for professional nurses to undertake shorter placements that foster knowledge exchange and transfer of skills by supporting collaboration between the countries' health systems and personnel. It is significant that the hospital should have retention of professional nurses' policies. Effective strategies should be developed to improve working conditions. Emphasis should be placed on integrating policy framework that preserves professional nurses' right to free movement.

Drawing from empirical findings, it is recommended that the hospital should effectively value the services rendered by professional nurses. It is also recommended that the hospital should have strategies designed to increase length of stay of professional nurses and properly understand the factors affecting retention and how they operate to trigger a decision to stay or leave. It is strongly recommended that the hospital should create a culture of development of professional nurses. The hospital should continue to develop systems for identifying young potential professional nurses and put them into manager training programmes. The hospital should show respect to professional nurses and the professional nursing scope of practice should be ensured so that professional nurses work to their full scope of practice. It is recommended that the hospital focus more on retaining the professional nurses.

Minimising the barriers of the retention management

The hospital needs to examine the professional nurses' intentions to resign because detecting the intention to leave early is better in supporting the effort to prevent professional nurses from leaving. It is recommended that the hospital offer adequate intrinsic and extrinsic

motivation to increased motivation and permanency as opposed to mobility of the professional nurses. Motivation strategies should be oriented towards good working environments and health systems that build support for professional nurses in addition to good salaries. It is further recommended that the characteristics of the hospital should influence job satisfaction such as role ambiguity, appropriate work load, good communication, recognition, professional routine and care setting.

Drawing from empirical findings, it is recommended that the hospital encourage professional nurses' job autonomy. The hospital work settings should fulfil professional nurses' needs since job satisfaction is related to the extent to which the work setting fulfils important professional nurses' needs. It is therefore recommended that the hospital should have effective communication as the major factor that influences job satisfaction. It is strongly recommended that the hospital should have good leadership because nursing leaders form the largest group of hospital middle management and the quality and style of leadership is crucial to the success of the hospital. There is also the need to provide role clarity as this is a variable revealed to be a unique contributor to the formation of intentions to leave the profession.

The hospital should have effective empowerment strategies designed to increase control over the work, improve job satisfaction and enhance hospital commitment. It is recommended that the hospital should have effective mentoring programmes as a method to enhance professional nurses' job satisfaction and reduce the feeling among professional nurses of being devalued, discriminated against and disempowered. The hospital should effectively engage professional nurses in the decision making processes. There is a need for the hospital to explore factors that contribute to the development of professional nurses' burnout since professional nurses experience higher levels of burnout compared to other health care professionals. It is finally recommended that the hospital provide work life balance opportunities that minimize dissatisfaction among professional nurses which in turn leads to increased job satisfaction and helps in reducing turnover rate.

Conclusion

The research set out to analyse the current retention management of professional nurses and to identify the barriers of the current retention management of professional nurses at Gelukspan Public District Hospital in the North West Province. The study revealed that the hospital had challenges with retention management of professional nurses. The study has proposed the recommendations and suggests that Gelukspan Public District Hospital in the North West Province adopt the identified retention management strategies for retention of professional nurses.

Areas for further research

Further research is needed in terms of identifying types of career development training programmes that can be offered to professional nurses to change attitudes with respect to turnover.

Bibliography

- Abushaikha, L. and Saca-Hazboun, H. (2009). Job satisfaction and burnout among Palestinian nurses. *Eastern Mediterranean health journal*, 15(1), pp.190-197.
- Ader, H. J., Mellenbergh, G. J. and Hand, D. J. (2008). *Advising on research methods*. Consultant's companion, Netherlands: Johannes van Kessel.
- ALnems, A., Aboads, F., AL-Yousef, M., AL-Yateem, N., Abotabar, N. (2005). *Nurses' perceived job related stress and job satisfaction in Amman private hospitals*.
- Babbie, E. and Mouton, J. (2007). *The Practice of social research*. Cape Town: Oxford University Press.
- Bally, J. M. G. (2007). Role of nursing leadership in creating mentoring culture in acute care environments. *Journal of nursing economics*, 25(3), pp. 143-149.
- Bless, C. C. Higson-Smith, P. and Kagee, A. (2006). *Fundamentals of social research methods*. Cape Town: Juta & Co Ltd.
- Brink, H. I. 2006. *Fundamentals of research methodology for health care professionals*. 5th Edition, Cape Town: Juta & Company Ltd.
- Bryman, A., and Bell, E. (2007). *Business research methods*. 2nd Edition Oxford: Oxford University Press.
- Burns, A .C. and Bush, R. F. (2010). *Marketing research*. 6th Edition, Upper Saddle River: Prentice Hall.
- Chimbari, M. J., Madhina, D., Nyamangara, F., Mtandwa, H. and Damba, V. (2008). *Retention incentives for health workers in Zimbabwe*. Regional Network for Equity in Health in East and Southern Africa.
- Cho, J., Laschinger, H. K. S. and Wong, C. (2006). Workplace empowerment, work engagement and organizational commitment of new graduate nurses. *Journal of nursing leadership*, 19(3), pp. 43-60.
- Cooper, D. R. and Schindler, P. S. (2005). *Business research methods*. 8th Edition. Tata McGraw Hill, New Delhi.
- Cooper, D. R. and Schindler, P. S. (2008). *Marketing research*. New York: McGraw-Hill.

Cooper, E. (2009). Creating culture of professional development: Milestone pathway tool for registered nurses. *Journal of continuing education in Nursing*, 40(11), pp. 501-508.

Cortese, C. G. (2012). Predictors of critical care nurses' intention to leave the unit, the hospital and the nursing profession. *Open journal of nursing*, 2(1), pp. 311-326.

Creswell, J. W. (2009). *Research design: A qualitative, quantitative and mixed method approaches*. 3rd Edition, Los Angeles: Sage.

Dambisya, Y. D. (2007). *A review of nonfinancial incentives for health worker retention in east and southern Africa*. University of Limpopo, South Africa.

Depoy, E. and Gilson, S. (2008). *Evaluation practice: how to do good evaluation research in work settings*. London: Routledge.

Esau, S. and de Waal, L. (2009). *Where have all the health scientists gone?* Centre for research on science and technology, University of Stellenbosch, South Africa.

Ferreira, E. J. (2007). *Analysis of business interventions and their effect on the success of small and medium enterprises*. Pretoria: University of South Africa.

Fisher, G. (2004). An exploration of innovative teaching methods in the area of entrepreneurship on MBA programmes. *MBA research report*, Gordon Institute of Business Sciences. Pretoria: University of Pretoria.

Gill, J. and Johnson, P. (2010). *Research methods for managers*. 4th Edition. London: Sage publications limited.

Humphreys, J., Wakerman, J., Pashen, D., Buykx, P. (2009). *Retention strategies and incentives for health workers in rural and remote areas: What works?* The Australian National University, Australia.

Iwu, C. G., Allen-Ile, C. and Ukpere, W. I. (2012). Model of employee satisfaction of health professionals. *African journal of business management*, 6(34), pp. 9658-9670.

Iwu, C. G., Allen-Ile, C. O. K. and Ukpere, W. I. (2012). Key factors of employee satisfaction for the retention of health-related professionals in South Africa. *African journal of business management*, 6(39), pp. 10486-10506.

Khamisa, N., Peltzer, K. and Oldenburg, B. (2013). Burnout in relation to specific contributing factors and health outcomes among nurses. *International journal of environmental research and public health*, 10(1), pp. 2214-2240.

Laschinger, H. K. S., Leiter, M., Day, A., and Gilin, D. (2009). Workplace empowerment, incivility, and burnout. *Journal of nursing management*, 17(1), pp. 302–311.

Leedy, P. D. and Ormrod, J. E. (2010). *Practical research. Planning and Design*, 9th Edition. New Jersey: Pearson.

Machayo, J. A. and Keraro, V. N. (2013). Brain drain among health professionals in Kenya: A case of poor working conditions? - *A critical review of the causes and effects*. Jomo Kenyatta University of Agriculture and Technology, Nairobi, Kenya.

Malhotra, N.K. 2010. *Marketing research: An applied orientation*. 6th Edition, Upper Saddle River: Prentice-Hall.

Malik, M. I., Zaheer, A., Khan, A. A. and Ahmed, M. (2010). Developing and testing a model of burnout at work and turnover intentions among Doctors in Pakistan. *International journal of business and management*, 5(10), pp. 234-247.

Mitchell, M. L. and Jolley, J. M. (2010). *Research Design Explained*. 7th Edition. New York: Wadsworth Cengage Learning.

Molina-Azorin, F. F. (2011). The use and added value of mixed methods in management research. *Journal of Mixed Methods Research*, 5(1), pp. 8-14.

Mouton, J. (2005). *How to succeed in your master and doctoral studies*. Pretoria: Van Schaik.

Neuman, W. L. (2006). *Social research methods: Qualitative and quantitative approaches*. 6th Edition, Boston: Pearson Education.

Oelke, N. D., White, D., Besner, J. Doran, D. Hall, L. M. and Giovannetti, P. (2008). Nursing workforce utilization: An examination of facilitators and barriers on scope of practice. *Journal of nursing leadership*, 21(1), pp. 58-71.

Omar, K., Anuar, M. M., Majid, A. H. A. and Johari, H. (2012). Organizational Commitment and Intention to Leave among Nurses in Malaysian Public Hospitals. *International Journal of Business and Social Science*, 3 (16): 194-199.

Osei, B. K. (2007). *Romancing stone: Government's policy for retention and return migration of health professionals in Ghana*. Institute of Social Studies, Netherlands.

Pathirage, C. P., Amaratunga, R .D. G. and Haigh, R. P. (2009). Role of philosophical context in the development of theory: Towards methodological pluralism. *The Built & Human Environment Review*, 1.

Patra, S. and Singh, V. P. (2012). Challenge of retaining employees. *Global journal of arts and management*, 2 (1), pp. 53-60.

Pillay, R. (2007). Conceptual framework for the strategic analysis and management of the brain drain of African health care professionals. *African journal of business management*, 1(1), pp. 026-033.

Pillay, R. (2009). Work satisfaction of nurses in South Africa: Comparative of public and private sectors. *Human resources for health*, 7(15), pp. 1-10.

Saks, M. and Allsop, J. (2007). *Researching health qualitative, quantitative and mixed methods*. London: Sage.

Salkind, N. J. (2006). *Exploring research*. 6th Edition, Upper Saddle: Pearson Education.

Saunders, M. Lewis, P. and Thornhill, A. (2009). *Research methods for business students*. 8th Edition. Essex: Prentice Hall.

Shakantu, W. (2010). *Research methodology*. Presentation slides delivered at an Arcom Doctoral Workshop, September 2010, Durban.

Shoaib, M., Noor, A., Tirmizi, S. R. and Bashir, S. (2009). *Determinants of employee retention*. Proceedings 2nd CBRC, November 14, 2009, Lahore, Pakistan.

Shumba, C. S. (2007). *Investigation factors influencing motivation of nurses to leave Sub-Saharan Africa and work in Amsterdam*. Royal Tropical Institute, Amsterdam.

Spooner-Lane, R. and Patton, W. (2006). Determinants of burnout among public hospital Nurses. *Australian journal of advanced nursing*, 25(1), pp. 8-16.

Sutrisna, M. (2009). *Research methodology in doctoral research: Understanding the meaning of conducting qualitative research*. Proceedings of the Association of Researchers in Construction Management, Liverpool John Moores University, UK.

Tharenou, P., Donohue, R. and Copper, B. (2007). *Management research methods*. London: Cambridge university press.

The National Institute for Health and Clinical Excellence 2007. How to Change Practice: Understand Identify and Overcome Barriers to Change, London [online]. Available WWW: www.nice.org.uk. (Accessed 20 September 2013).

Tustin, D. H. Lighthelm, A. A., Martins, J. H. and Van Wyk Hde, J. (2005). *Marketing research in practice*. Pretoria: Unisa Press.

Welman, J. C. and Kruger, S. J. (2005). *Research methodology for the business and administrative sciences*. Cape Town: Oxford University Press.

Wieck, K. L., Dols, J. and Landrum, P. (2010). *Retention priorities for the intergenerational nurse workforce*. *Journal of nursing forum*, 45(1): 7-17.