

**TURNOVER OF HEALTH CARE PROFESSIONALS AT POLOKWANE AND
MANKWENG TERTIARY HOSPITAL IN LIMPOPO PROVINCE**

BY

Mr M. L. SHIPALANA

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SUPERVISOR: PROF. K.G. PHAGO

DECLARATION

I am hereby declaring that the research report titled “Turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital in Limpopo Province” submitted to the University of Limpopo for Master’s degree in Public Administration has not previously been submitted for a degree at this or any other university, and it is my own work in design and execution. In addition, the references used therein have been duly acknowledged.

MR. ML SHIPALANA

[REDACTED]

DATE

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DEDICATION

I dedicate this study to my wife Pearl and my children, Sophie, Ntsako and Shaun. Your countless support has contributed to the successful completion of this study. This study is also dedicated to the Department of health in Limpopo Province. Let the outcomes of this study be applied to recruit and retain health professionals in the Province.

SUMMARY OF THE STUDY

Turnover of health care professionals is a global challenge and has severely affected developing countries. South Africa as a developing country is not exceptional on the problem of turnover rate of health care professionals. The high vacancy rate became evident in the recent years. The health institutions depend on the health professionals in providing quality health care services.

The challenges that are facing the health institutions include lack of a clear understanding by managers of the factors that are contributing to high turnover rate of health care professionals as well as the formulation of effective recruitment and retention strategies. The prevailing of the rapid changes in the internal and external environment make it difficult for the health institutions to develop and implement recruitment and retention strategies in an effort to minimise high turnover of healthcare professionals.

The purpose of this study is to analyse the factors that are contributing to turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital in Limpopo Province. The study also provides recruitment and retention strategies that the management may apply them to minimise the high turnover of health care professionals. The population sample was randomly selected from Polokwane and Mankweng Tertiary Hospital. Data was collected and analysed from a total number of 150 respondents. A structured questionnaire was used as an instrument for the collection of primary data. In this regard, factors such as lack of medical equipment, poor management style, poor working conditions and high workload are found to be critical factors that are affecting quality health care service and eventually the morale of employees, and resulting into turnover of health care professionals.

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CHAPTER 1: BACKGROUND AND ORIENTATION OF THE STUDY

1.1 INTRODUCTION

Staff turnover in the public institutions is a major concern due to the fact that it affects the stable development of the public institutions and the morale of the remaining employees. Ongori (2007:2) indicates that public institutions have invested much on their employees in terms of induction, training and development. It is therefore required that staff turnover be urgently minimised. Kevin, Joan and Adrian (2004:161) agree and further state that there is a need to develop a full understanding of staff turnover taking into consideration, factors contributing to staff turnover rate, effects and strategies that can be applied to reduce staff turnover in the public institutions. Public institutions must recognise that employees are assets within public institutions and that their value cannot be ignored (Meaghan and Nick, 2002:303).

In an attempt to bring an understanding and interpretation of the concept staff turnover, several explanations are taken into consideration. According to Wyss (2004:3), staff turnover takes place when employees terminate their service based on some of the following reasons: migrating to other countries, transfer from one institution to another, death, retirement, resignations or dismissals. In Abassi and Hollman (2000:322) view staff turnover is regarded as a ratio of workers around the labour market, jobs and occupations; and between the states of employment and unemployment. Price (1977:107) argues turnover as a ratio of the number of employees who have left public institutions during the period under review divided by the average number of employees in that public institution for the period. Price (1977:123) concludes that in most cases, public institution refers to turnover as an entire process associated with a reduction of vacancy rate.

Ongori (2007:6) argues that employee turnover is divided into three categories namely: sources of employee turnover or factors that contribute to staff turnover, effects of turnover in the public institution and the strategies that can be applied to minimise turnover. This study adopted the similar approach in bringing understanding or knowledge on the factors associated with turnover.

In this study, factors underlying staff turnover and their effects are examined and strategies that may be applied to minimise staff turnover at Polokwane and Mankweng Tertiary Hospital are identified. These factors are analysed in the context of health professionals as classified under scarce skill. In discussing and understanding these factors underlying staff turnover, this chapter includes, a background to the study, rationale, significance, statement of the problem, aims and objectives of the study; and research questions.

1.2 BACKGROUND TO THE STUDY

In many developing countries such as South Africa, the provision of health care is largely dependent on government intervention and investment. Part of this investment is placed on the training of health care professionals. However, anticipated benefits for developing countries are not realised due to inability of recruiting and retaining health care professionals. Whereas it takes an average of over seven years to produce suitably qualified and experienced health care professionals, the same could be lost easily to the developed world. This became evident in the World Health Organisation's Report (2006), which pointed out that over 5000 health care professionals in South Africa migrated to the western countries such as Canada, Australia and United Kingdom.

Wyss (2004:8) argues that the extent of migration and other losses of professional skills are difficult to be quantified. However, the effects of these are multifaceted and have far-reaching consequences for both the economy and the maintenance of health services in the country. Peltier and Dahl (2009) state that the remaining healthcare workers are subjected to increased workloads, which could lead to a decline in health care and as a result, the service delivery and general population's access to health services are affected.

It is evident that the turnover of health care professionals is also exacerbated by the impact of HIV/AIDS. According to Wyss (2004:7), nearly half of all patients (46%) in State hospitals are HIV positive, and that nearly 29% of all deaths of health workers

are attributable to AIDS. This situation is contributing to the workload of the health care professionals who are already overburdened and further resulting to burnouts.

Bhorat, Meyer and Mlatsheni (2002:19) argue that this trend is particularly evident where understaffing leads to personnel being utilised outside their scope of practice and further indicate that ethics, professionalism, discipline and morale are affected by the loss of skills and expertise. The turnover rate of health care professionals creates a high risk environment for the patient, employee and employer in the public institutions. It is therefore counterproductive to recruit and train employees to assume a productive role within the institutional structure only to lose them. It is further pointed out that their services and their institutionally acquired knowledge, is solid enough to compete successfully in the global village.

However, Larmabee, Janney, Ostriow, Hobbs and Burant (2003) argue that this loss is particularly relevant where a public institution deploys certain strategies such as awarding of bursaries to health care related professionals as recruitment and retention strategy. These authors further point out that a turnaround time from selection to date of assumption of duty may be as long as seven years. Training the individual to be fully proficient may take a further eighteen to twenty four months. Retention, therefore, has a significant survival value to public institutions, particularly in relation to “critical specialists in high demand”. Retention strategies need to be developed to ensure that the health sector does not lose the skills and expertise of its health care professionals.

Grindle (1980:310) argues that effective retention needs to be prefaced by the formulation and implementation of policies supportive of such retention initiatives. To this end policies aimed at increasing retention require evaluation, to determine the degree of congruence between the goals that are aimed at and whether these outcomes are realised in society. Abassi and Hollman (2000:49-54) argue that managers must recognise employees as major contributors to the stable development of the public institutions. The efficacy of the various retention strategies and their impact require thorough research so that priority can be given to those strategies that have demonstrated their sustainability and return on investment (Meeus, 2003:53).

It is on this background that factors that are contributing to turnover of health professionals at Polokwane and Mankweng Tertiary Hospital are analysed and a consideration of strategies to recruit and retain health professionals is undertaken.

1.3 RATIONALE/MOTIVATION OF THE STUDY

This study is an attempt to examine factors that are contributing to staff turnover and explore strategies that can be applied to curb the recurrence of the problem. The study focuses on the turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital and further considers retention strategies that will enable the hospital management to review the existing recruitment and retention strategy.

1.4 SIGNIFICANCE OF THE STUDY

The significance of the study is to assist Polokwane and Mankweng Tertiary Hospital with current developments when reviewing the existing recruitment and retention strategy for health care professionals. The study would positively benefit the management of Polokwane and Mankweng Tertiary Hospital, policy implementers and the community at large. It would also assist in attracting and providing highly skilled health care professionals in the hospital and further provide strategies that would enable the hospital to effectively recruit and retain health care professionals.

1.5 STATEMENT OF THE PROBLEM

According to Kumar (2005:20) formulating a research problem, is the first and most important step in the research process, as the research problem identifies the destination and the intention of the study.

The Department of Health in Limpopo Province is currently experiencing high staff-turnover of medical officers, especially at Polokwane and Mankweng Tertiary Hospital as its Provincial hospital. This state of affairs drastically affects service

delivery. According to the Department of Health in Limpopo (2010) the past three year trends show magnitude of the staff turnover of health professionals are analysed as indicated table 1 below:

TABLE 1: THE TURNOVER RATE TRENDS

Occupational Classification	2008/09			2009/10			2010/11		
	Filled	Losses	losses rate	Filled	Losses	losses rate	Filled	Losses	Losses rate
Medical Specialist	81	5	6.17	80	9	11.25	83	14	17.50
Medical Officers	783	201	25.67	858	313	36.48	843	336	39.86
Dentist	90	10	11.11	99	22	22.22	128	20	15.63
Professional Nurse	6782	54	0.80	7190	464	6.45	7663	512	6.68
Staff Nurse	2753	82	2.98	2776	70	2.52	3885	119	3.06
Nursing Assistant	4715	73	1.55	4534	130	2.87	6140	133	2.17
Pharmacist	230	113	49.13	266	232	82.22	313	166	53.04
Allied Health Prof.	859	120	13.92	1107	289	26.11	1188	275	23.15
Total	16293	658	4.04	16910	1529	9.04	20243	1575	7.78

Source: (Department of Health, 2010)

This table indicates clearly that for the period between 2008 and 2011, the Department of Health has lost about 3 762 health care professionals in various categories. It is interesting to note that while the Department is losing health care professionals at an average of 7% a year, the population growth rate in Limpopo is estimated at 5% (Statistics South Africa, 2011). According to Nobilis (2012), the acceptable level of turnover rate in the institution is estimated at 5%. It is evident that the average turnover in the Department of health is above the acceptable norm of 5%.

The high turnover rate of health care professionals at Polokwane and Mankweng tertiary Hospitals is a major concern. The main research problem to be investigated in this study is: What were the causes to the high turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital?

1.6 AIM OF THE STUDY

The study is aimed at identifying and measuring factors that contribute to the high turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital.

1.7 OBJECTIVES OF THE STUDY

The objectives of this study include the following:

- To obtain theoretical perspective on factors that contribute to turnover of health care professionals.
- To identify possible factors that contribute to turnover of health care professionals.
- To measure the relative contribution of these factors to the actual turnover at Polokwane and Mankweng Tertiary Hospital.

1.8 RESEARCH QUESTIONS

Bak (2004:21) states that formulating a research problem in the form of a research question, is fruitful for giving writing and reading a direction. It further compels the researcher to answer the questions raised. The research questions also assist coherence of the dissertation that each chapter contributes to the overall answer of the questions raised. According to O'Leary (2004:28) research questions give focus, set boundaries and provide direction. It is therefore imperative to have research

questions, in that, the questions provide a focus for data collection, and keep the researcher focused on the initial interest.

For the purposes of this study, the following questions are formulated:

- What are theoretical perspectives on factors that contributing to turnover of health care professionals?
- What are possible factors that contributing to turnover of health care professionals?
- What is the extent contribution of these factors to the actual turnover at Polokwane and Mankweng Tertiary Hospital?

1.9 DEFINITION OF KEY CONCEPTS

Munzhedzi (2011) in his study indicates that conceptualisation is regarded as the analysis of the key words or concepts through clarification and elaboration of different dimensions of meaning. In this study, the following concepts are defined:

- **Staff turnover:** According to Wyss (2004:3), staff turnover takes place when employees terminate their service based on some of the following reasons: migrating to other countries, transfer from one institution to another, death, retirement, resignations or dismissals.
- **Health care professional:** According to the World Health Organisation (2010), health care professional is defined as an individual who is qualified to provide curative, preventive, promotional or rehabilitative health care services in a systematic way to individuals, families or communities. The practice of health care professionals and operation of health care is typically regulated by national authority through appropriate regulatory bodies for the purpose of quality assurance.

- **Tertiary Hospital:** According to National Health Act 61 (2003), Tertiary Hospital is an institution that renders specialist and sub-specialist care to a number of regional hospitals. This hospital serves as a platform for training of health care workers and conduct research on health related issues.
- **Medical facility:** refers to any location at which medicine is practiced regularly and ranging from small clinics, urgent care centres and larger hospitals with elaborate emergency rooms and trauma centres. It is a requirement that medical facility should be regulated by statutory bodies before it can be operated (World Health Organisation, 2010).
- **Retention strategies:** Meeus (2003) refers to retention strategies as the various policies and practices which allow the employees to remain in the institution for a longer period of time. Retention strategies take into account the various measures that are employed to let employees stay in the institution for the maximum period of time.

1.10 LAYOUT OF CHAPTERS

In this study, the contents of each chapter is briefly summarised to provide short presentation of what the reader may expect in the dissertation. The chapters are outlined as indicated below:

CHAPTER 1: This chapter presents an introduction to the study. It includes, a background on the turnover of health care professionals, rationale, significance, statement of the problem, aims and objectives of the study; and research questions. The objective of the background is to inform the reader of the value of the study and to provide the context in which the study is undertaken. The importance, relevance of the study, and the justification for the research are clearly spelled out.

Chapter 2: This chapter reviews the literature on the subject matter, presenting a critical assessment of what has been done previously in the given topic, regarding the revision and reconsiderations. A review of literature provides the researcher with

important background information about the turnover of health professionals as the subject under study. Such a review also enables the researcher to avoid duplicating previous research.

Chapter 3: This chapter consists of the research methodology employed in the present study and explains briefly how the researcher will achieve the objectives or purpose of the study. It includes research design, population, sampling method, methods used to collect data and ethical considerations.

Chapter 4: This chapter presents data analysis of the study. In this regard, collected data is analysed by means of the selected technique or tool. Presentation of the findings is done by means of tables and charts and the results are interpreted based on the findings.

Chapter 5: In this chapter, the researcher will draw conclusion, recommendations and implications of the study based on the findings. It gives indications to areas where action or corrective measures should be undertaken. Conclusions, recommendations and implications as part of the research report will be made available.

1.11 CONCLUSION

This chapter presents an introduction to the study. It includes, a background on the turnover of health care professionals, rationale, significance, statement of the problem, aims and objectives of the study; and research questions. The chapter further provides the definition of concepts on the turnover of health care professionals and the summary of chapters in the study. The background of the study informs the reader on the value of the study and further provides the context in which the study is undertaken. The importance, relevance of the proposed study, and the justification for the research are clearly spelled out. In the next chapter, a literature review is undertaken to analyse the existing body of knowledge of the existing knowledge gaps and how they should be filled.

CHAPTER 2: LITERATURE REVIEW

2.1 INTRODUCTION

While chapter one entails an introduction of the study, chapter two provides detailed review of the literature on the turnover of health care professionals by presenting a critical assessment of what has been done previously in the investigation of a similar research problem. A review of literature provides the researcher with important background information about the subject under study. Such a review also enables the researcher to avoid duplication of previous research and allows the researcher to develop various parts of the study. In this regard, it is important that the concept of literature review be theoretically explained to provide a clear understanding as outlined hereunder.

2.2 THE CONCEPT OF LITERATURE REVIEW

Munzhedzi (2011:12) asserts that a good literature review makes the researcher aware of what has already been written to avoid duplication and unnecessary repetition. Bless, Higson-Smith and Kagee (2006:24) point out that a literature review serves as the compilation of the most significant sources on a subject to be undertaken and relates the findings in a rational manner while providing support on the subject matter and further indicate that it is a critical evaluation of other theorists that have researched on the same subject. Mouton (2003:86) agrees that literature review plays an important role in the study, because any research project starts with the review of the existing literature.

Babbie (2007:112) outlines one of the most critical elements in literature review as to assess whether there has been consistency on the findings of the research project or disagreement with the previous studies. Munzhedzi (2011:13) further points out that a literature review is necessary in that it deepens the researcher's theoretical framework. In contrast, Munzhedzi's study argues that in the instances where research findings are mostly influenced by the literature review, new ideas may be prevented. However, a literature review remains the most important assessment tool

in any research project. In this study, the literature review has been used to examine factors that are contributing to turnover rate of health care professional.

2.3 TURNOVER OF HEALTH CARE PROFESSIONALS

There is a need to develop a clear understanding on the staff turnover including factors that are contributing to turnover, effects and strategies that can be applied to reduce turnover. Turnover among various public sectors may be as a result of factors including economic growth, multiple job opportunities, high demand of commodities and globalisation; and high competition in the local and global market (Ahmad and Riaz, 2011:58). Ahmad and Riaz in their study of turnover of medical practitioners further indicate that employees in public institutions are regarded as the most important assets due to the fact that public institutions cannot function without them. It is therefore, necessary that managers develop strategies that can be applied to reduce turnover in the public institutions to remain effective in the provision of service delivery.

In bringing the understanding and classification of the term employee turnover the theoretical definition is imperative. Nobilis (2011:2) defines employee turnover as the number of permanent employees leaving the public institution within the reported period versus the number of actual active permanent employees on the last day of the previous reported period (physical headcount). The number of leavers, that are included in the employee turnover, only includes natural turnover such as resignations, terminations, retirement, death, transfers to other sectors and dismissals. The number of leavers excludes any redundancies. Turnover is also defined as voluntary or involuntary permanent withdrawal from the public institution (Abassi and Hollman, 2002:49). Ahmad and Riaz (2011:57) further define turnover as the rotation of workers around the labour market; amongst public institutions, jobs and occupations; and between the states of employment and unemployment. Nel, Werner, Haasbroek, Poisat, Sono and Schultz (2008:583) agree with Abassi and Hollman (2002:49) and define turnover as the movement of employees in and outside the institutional boundaries and they further distinguish controllable and uncontrollable turnover. Controllable turnover concerns where public institutions are having ability to prevent the recurrence, while uncontrollable turnover is beyond the

public institution's control. In this regard internal environmental factors may contribute to the controlled turnover and external environmental factors are contributing to uncontrollable turnover.

Ongori (2007:54) states that frequently, managers refer to turnover as the entire process associated with filling of vacancies, each time when a position is vacated, either voluntarily or involuntarily such vacancy must be filled and this replacement cycle is called turnover. It is further indicated that turnover is often used in an effort to measure relationships of employees in a public institution as they leave, regardless of reason. It is therefore required that managers in the public institutions have a clear understanding and classification of staff turnover in order to accurately address its adverse effects.

It is important that turnover rate be calculated on a regular basis as it enables the public institutions to develop strategies that may assist to prevent the recurrence of the high turnover rate of health professionals. Baumann (2010) argues that turnover rate as a measurement can be used to assess the institutional capacity to attain strategic goals. In other words, it can assist in analysing the public institution's stability and development. Baumann, Fisher, Blythe and Oreschina (2003) further distinguish turnover rate and vacancy rate by indicating that vacancy rate is a numerical value of vacant positions derived from the difference between budgeted and worked hours converted to full-time equivalent (FTE) vacancies. Meltz and Marzetti (2003) view "vacancy rate" as a proportion of all vacancies. Common understanding of the calculation of the turnover rate is clearly presented by the above mentioned theorists.

According to Nobilis (2011:2) the following standard formula for employee turnover rate has been identified to calculate the institutional turnover rate:

$$\text{YTD TURNOVER \%} = \frac{\text{Number of Permanent Leavers in the reported period} \times 100}{\text{Average actual number of Permanent Employees}}$$

This model is commonly used in the private and some public institutions to calculate vacancy rate. It includes the number of permanent employees who leave the institution within a specific period versus the total number of active permanent employees. The model also takes into account the number of leavers due to natural turnover causes such as resignations, terminations and retirements. However, it does not include any post that is no longer required in terms of the existing structure in the calculation.

The calculation of employee turnover can also include total separate rate, controlled and uncontrollable turnover rates. According to Grobler, Warnick, Carrel, Elbert, and Hartfield (2006) formula for the three measures are identified as following:

- Total separation= $\text{Separation} / \text{average number of employees} \times 100$
- Resignation rate= $\text{Resignation} / \text{average number of employees} \times 100$
- Avoidable turnover rate= $\frac{\text{total separation} - \text{Unavoidable separation}}{\text{average number of employees}} \times 100$

Grobler *et al.* (2006) further explains the above mentioned formula and refer total separation as the total number of terminations of employees over a specific period that took place due to reasons such as transfer out, death, dismissals, retirements and medical unfit. The terminations of employees may not include employees who are on suspension because they are still in the pay roll of the institution. A comparison between avoidable and unavoidable turnover rate was also made. Avoidable turnover rate refers to the turnover rate that the employer has a control over it and may include terminations of employees due to reasons such as transfers out and dismissals while unavoidable turnover rate is defined as terminations that the employer does not have a control over them. Unavoidable turnover rate may include reasons of terminations such as death, retirement and medical unfit.

Although, formula for calculating turnover rate is provided, it is still difficult in public institutions to keep an accurate record of staff turnover. It is not known whether this is caused by the incompetence of responsible officials or complexity due to

unpredictable movement of employees. However, an accurate staff turnover rate enables management of the public institutions to make informed decision choices about strategies that can be applied to minimise turnover rate.

The rapid changes that are taking place in the public institutions require that continuous studies be undertaken to ensure effective recruitment and retention of health care professionals. According to Alam (2009:11), the health care profession is regarded as one of the noblest professions in the world. It is only natural that professional bodies as well as the general public expect health care professionals to demonstrate the highest standards of professionalism. Alam and Haque, (2010:4) agree and indicates that health care professionals are expected to adhere to the highest standards even in the face of such adversity as unfavourable job environment, poor conditions and low earnings that are also viewed as contributing factors to staff turnover. However, Khurram and Nemati (2010:6) argue that the major changes in demographics pattern, composition of the employment sector, consumerism coupled with declining moral standards are increasingly exerting pressure on health care professionals.

The study conducted by Ongori (2007) entitled "A review of the literature on employee turnover" Department of Management, University of Botswana examined the sources of employee turnover, effects and strategies to minimise employee turnover within public institutions. Ongori (2007:51) in his findings asserts that turnover rate in the public institutions is attributed by poor selection procedures and wage rates which produce earnings that are not competitive with other sectors. Ongori (2007:52) in his conclusion indicates that managers must continue to examine the sources of employee turnover and recommend the best options to fill the gaps in order to be in a position of retaining employees in the public institutions and further indicates that employees in the public institutions must be regarded as valuable asset. While Ongori's study provides the broader understanding of the sources of the employee turnover in the public institutions, it does not address the specific issues that affect health care professionals.

A similar study was conducted by Mdindela (2009) entitled “Staff turnover at selected Government hospitals in Bhisho, Eastern Cape Province” in fulfilment the requirements for Master of Human Resource Management. The study examined factors that contribute to employee turnover and provided strategies that can be applied to minimise turnover rate. Mdindela (2009:134) in her findings indicates that health professionals are leaving the hospitals because of poor management, lack of career development, poor working conditions, workload and poor incentives. In highlighting strategies that can be used to minimise turnover, Mdindela (2009:36) argues that management must develop succession planning, implement flexible benefits to all health professionals, create climate of decision making and develop training programmes for health professionals. Considering efforts made by Mdindela in the building of knowledge, the study focused at selected hospitals and findings were based on the specific environment which may be similar with the situation in the Limpopo Province.

Another similar study was conducted by Vosloo (2009) entitled “Brain drain or brain gain of health care professionals in Limpopo” in fulfilment the requirements for Master of Business Administration. The study determined if migration of health care professionals is contributing to an imbalance and unequal distribution of health care service in rural and urban areas. Vosloo (2009:49) concludes that the retention and recruitment strategy does not have an effect in retaining the health care professionals. The study further outlines that health care professionals are leaving to other provinces or countries, because of high workload, inadequate remuneration and poor working conditions. While Vosloo provided major challenges faced by health professionals, the study focused at a single category of health care professionals which may not represent the views of other categories of health care professionals as it is the case in this study.

An attempt to answer the question of what causes employees to terminate their employments was made by most researchers (Bluedom, 1982; Kaliath and Beck, 2001; Saks, 1996) through investigating possible antecedents of employee’s turnover. However, to date there has been little consistency in findings, which resulted in diversity of employment. Khurram and Nemati (2010:6) argue that the level of job satisfaction among health professionals, especially young doctors,

appear to be declining, as they are often found complaining about their inappropriate working conditions, lack of career development opportunities, inadequate compensation and exhaustive working hours. Firth, Mellor, Moore and Loquet (2007:19) indicate that the experience of job related stress and the range factors that lead to job related stress, lack of commitment in the public institutions; and the job dissatisfaction make employees to quit their employments.

Khurram and Nemati (2010:71-83) in their study further argue that it is generally believed that health care professionals such as doctors are increasingly showing dissatisfaction with their jobs. Though doctors have achieved noticeable success in terms of career and finances, they often remain overworked and stressed. As a result the frustration, anger and restlessness are taking a lead; and eventually they lose vision of their profession as well as personal ambitions. Murray, Montgomery, Chang, Rogers and Safran (2001) in their study conclude that the workload, unsuitable working hours and lack of incentives are the major contributing factors to the dissatisfaction of health professionals and that eventually leads to high turnover rate.

There is a correlation between burnout due to workload, job satisfaction and turnover. According to Zhang and Feng (2010) burnout is a comprehensive concept, first proposed in the clinical psychology. It is stemming from continuous work pressures that are not effectively handled and comprises the following three dimensions: emotional exhaustion, depersonalisation and reduced personal accomplishment. The study observes that the correlation between job satisfaction and burnout has been confirmed in health care institutions and further note that few dimensions of job satisfaction can significantly contribute to occupational burnout among health care professionals.

A study has shown that satisfaction of health care professionals such as medical doctors in rural areas may not be the same with those in urban area. Pathman and Konrad (2002:7) argue that in these settings, a less than satisfying work environment sometimes leads health professionals to leave their jobs, with subsequent costs for needy communities. The study observes that indeed, unhappiness is increasing among health professionals, with growing numbers of considering job changes, non-

clinical work and early retirement and some medical doctors regret ever pursuing a medical career.

Furthermore, it is necessary to bear in mind that turnover intention is more likely to occur for employees with high-degree burnout in many professions. Stodel and Stewart-Smith (2011:2) argue that junior doctors in South Africa work long hours which contribute to workload and stress. It is further indicated that HIV/AIDS has resulted in increasing numbers of patient deaths, and a higher burden of the disease. This has added to the workload and in many cases also to the complexity of decisions. All these factors have increased the workload and burnout rate among health care professionals.

Hayes, O'Brien, Dufield, Shamian, Hughes, Heather, Laschinger, North and Stone (2006:43) indicate that employee turnover behaviour occur due to career aspiration if expectation for advancements are not realised. Such employee may develop intentions to quit, but may remain in the institution due to minimal options. Hayes, et al. (2006) further argue that career attitudes prospect distinctly affect prospective turnover behaviour of employees who are found in a stable internal labour market.

According to Mdingela (2009:12) individuals who lack security in the workplace develop a careerist attitude towards work. Such attitude is based on staying in the job only until a better job is found. Some employees with careerist attitude quit their jobs for no other reasons. These employees are seen as more cosmopolitan than their colleagues or over-reacting to unfriendly job situations. Mdingela (2006) further argues that it will be difficult for the public institutions to retain such employees.

Stodel and Stewart-Smith (2011:2) state that there has been a significant exodus of health professionals in South Africa. The study shows that health care professionals tend to be young (under 42 years), male and not yet specialised. This exodus vastly increases the workload of the health professionals who remain in the public institutions. Stodel and Stewart-Smith further indicate that unless sufficient emphasis is placed on the effects of burnout and other causes of medical migration, and attempts are made to mitigate them, South Africa will continue to lose doctors to the global labour market, ultimately resulting in detrimental standards of medical

care. Hayes *et al.* (2006:43) add that high turnover affects the morale of nurses and doctors as well as productivity of those who remained to provide health care services in public hospitals.

Public institutions that are experiencing instability due to poor management style and operations are having high degree of turnover (Ongori, 2007:49). Zuber (2001:21) argues that there is high possibility that employees are more likely to stay in the organisation where there is a predictable environment. Alexander, Bloom and Nichols (1994:4) indicate that usually public institutions that have high inefficiency are experiencing high turnover. Abassi and Hollman (2000:3) over and further allude that there are also other institutional factors which make employees to terminate their employment from public institutions and these are poor hiring practices, managerial style, lack of recognition, lack of competitive compensation system in the public institutions and toxic workplace environment. These factors are regarded as pushing factors since health professionals are left with no option, but to terminate their employment.

Price (1997) differentiates involuntary turnover and voluntary turnover as follows: involuntary turnover are due to reasons that are beyond the control of the affected employees such as the need for the reduction of institutional costs, restructuring or downsizing where employees are compelled to quit. This is the public institution's prerogative. In contrast, voluntary turnover is due to the decision taken by the employees. However, this may occur as a result of the push factors on the part of the public institutions such as low pay and poor working conditions.

Griffeth, Horn and Gaertner (2000) indicate that pay and pay-related variables have a modest effect on turnover. In this study, the relationship between pay, employee's performance and turnover was confirmed. It is concluded that when employees are underpaid, performance is affected and turnover increases. Khurram and Nemati (2010) add that if jobs provide adequate financial incentives the more likely health care professionals remain in public institutions.

Wiley (2010:31) argues that health care professionals turnover is a problem around the world and more especially with internal medicine specialists and those doctors

who care for patients with chronic illness. These medical specialists are arguably in the shortest supply globally. Several trends are contributing to the acceleration of turnover of health care professionals. Wiley (2010) in his study further indicates that if health care professionals are not appreciated on their performance, there is no reason for them to remain in the public institutions. Wyss (2004) adds that staff turnover in the developing countries is contributed by several factors such as poor working conditions, inadequate production and poor deployment of health professionals associated with poor human resource planning.

Zhang and Feng (2010) indicate that though turnover is to some extent favourable for the optimal allocation of human resources, high turnover rates clearly affect the sustainability of the public institution's development and also deeply disrupt the morale of the remaining employees. In a case of medical doctors, who require extended education and training period, high turnover rates can result in enormous transition costs and loss of patient confidence, which are problems for the hospitals. Thus in this context, ensuring the institutional stability of health care professionals turnover is necessary.

Stilwell, Diallo, Vujicic, Adams and Poz (2004:598) argue that several developed nations are increasingly relying on immigration as a means of coping with domestic shortages of health professionals. These highly skilled professionals, in terms of the health care workforce, refer to physicians, nurses, dentists, and pharmacists. Reid and McCormack (2004) further point out that this trend has led to the concerns, especially within Africa that the outflow of health professionals is adversely affecting the health care system. However, three types of migration can be distinguished: Internal, international and cross-industry. Internal migration describes the movements of health professionals within national borders, or between rural and urban areas. International migration describes the movements of health care professionals who temporarily or permanently settle abroad. Diallo (2004) argues that cross-industry migration refers to a type of internal migration that occurs when health care professionals leave their respective health care related fields for activities in non-health-related fields. All of these types of migration have an impact on the quality of health care services as they result in understaffing and open vacancies.

It is also necessary to make a distinction between temporary and permanent migration. Temporary migration encompasses situations where health care professionals temporarily settle abroad and then return to their source countries (Forcier, Simoens & Gluffrida, 2004). Permanent migration occurs when health professionals settle permanently abroad (Diallo, 2004). It is further indicated that temporary migration may be beneficial to source countries as health care professionals return with more experience, skills and personal resources than when they left. However, permanent migration results in a loss of the resources spent to educate health care professionals (Forcier *et al.*, 2004).

Factors influencing migration can be further divided into push and pull factors. Pull factors may be regarded as those factors which attract health care professionals to a particular health care system or country. Push factors are those that encourage health care professionals to leave their country or location of work. Push and pull factors are further subdivided into those that are exogenous (outside the health care system); and those that are endogenous (related directly to the health care system) (Forcier *et al.*, 2004). The turnover factors relating to the public institutions are affecting the overall strategic objectives of the public institutions and therefore, they need to be dealt with at the strategic level of the institution. Ongori (2007:19) adds that employee turnover is expensive from the view of the public institution. The strategic plans of the public institutions need highly skilled and competent employees to be successfully implemented. High turnover rates can have a negative impact on the overall business strategic goals of the public institutions.

Firth *et al.* (2007:19) argue that intention turnover which represents an exodus of health care professionals and subsequent replacement process results to the major institutional costs. Ongori (2007:49) indicates that these replacement costs among others, include search in the external labour market for possible substitute, selection between competing substitutes, induction and orientation of the selected substitutes, formal and informal training until they attain equivalent performance level to the individuals who quit. Jones (2000:7) states that in addition to these replacements costs, the input and the expected outcome in the institution can be affected and contribute to a major loss. Johnson, Griffeth and Griffin (2000) conclude that the hiring and replacement of employees cost approximately 50 percent of the worker's

annual salary. Furthermore, the loss of intellectual capital also contribute to this cost, since not the institution that is losing human capital only, in contrast the competitors are potentially gaining these health care professionals (Meaghan and Nick, 2002:3).

Weldman, Kelly, Aurora and Smith (2004:29) indicate that turnover of health care professionals does not necessarily cost the public institutions only, but also creating an opportunity for the public institutions to gain new skills. Weldman, *et al.* (2004) further argue that a recurring expense created by employee turnover in the public institutions provide an opportunity to improve employee satisfaction, ability to develop strategies to reduce high turnover rate, cut the costs by diverting funds into programmes and policies that are applied to retain employees. Bland and Gates (2007) agree with the opinion of Weldman *et al.* (2004) and add that the benefits of employee turnover in the public institutions among others include, the generation of ideas by new employees, salary savings and elimination of employees that are having problems with regard to performance.

Individuals can also benefit from employee turnover more especially in the health care sector. Hesselhorn, Miller, and Tackenberg (2005) indicate that the employee turnover from the health care profession might be advantageous for certain individuals who are having severe health problems or who may wish to further their career in other fields of study. In contrast, this may also benefit the institution, since it offers the public institution to appoint new employees with new ideas as indicated above.

However, public institutions should not capitalise on the benefits of employee turnover and view it as an opportunity only but, they must strive to eliminate it. The Chartered Institution of Personnel and Development (CIPD) (2010) provide that although some employee turnover positively benefits the institution, in the instances where skills are relatively scarce and where recruitment takes several weeks to fill vacancies, turnover is likely to be problematic. Dovlo (2005) states that every effort must be made to retain highly skilled health care professionals.

Vroom (1968:1) asserts that health professionals are the core of the public institutions and one of the most important resources in any public institution. Putting

various people together to achieve the institutional goals is a challenge as individuals are motivated by different aspects. The practice of management has been a necessity within the public institutions to manage people and various functions in order to achieve optimal results. As public institutions grow in size and complexity the management function also becomes more complex. Philosophers and scholars created various management theories over the years to help managers in the public institutions to determine the most effective means of managing people to create better bottom-line results. Many management theories are practically sound and effective for given situations. Managers often look to motivation theories and motivational management when trying to improve employee motivation and performance. Motivational theorists posit that when an environment is provided to maximise motivation, performance will improve and the turnover rate is reduced.

The expectancy theory was proposed by Victor Vroom of Yale School of Management in 1964. The theory is one of management theory that focuses on motivation. In Holdford and Lovelace-Elmore (2001:43), Vroom posits that the intensity of work effort depends on the perception that an individual's effort will result in a desired outcome. In Droar (2006) Vroom suggests that for a person to be motivated, effort, performance and motivation must be linked. Vroom (1968:2) identified three factors that direct the intensity of effort put forth by an individual as follows: expectancy, instrumentality, and valence.

Vroom (1968:1) stresses and focuses on outcomes and not on needs. The theory states that the intensity of a tendency to perform in a particular manner is dependent on the intensity of an expectation that the performance will be followed by a definite outcome and on the appeal of the outcome to the individual. The Expectancy theory focuses on two main aspects namely, Valence and Expectancy. Valence refers to the employee's motivation influenced by how much an individual employee wants a reward while Expectancy refers to the effort that leads to expected outcome and the belief that the performance will lead to reward.

It is necessary to note that Valence is the significance associated with an individual about the expected outcome. However, it is not the actual satisfaction that an employee expects to receive after achieving a goal. Expectancy is the faith that better efforts will result to better performance. However, it is influenced by factors

such as possession of appropriate skills for performing a job, availability of resources, availability of crucial information and getting the required support for completing the job. Instrumentally is the faith that if one performs well, and then a valid outcomes be realised. It is affected by factors such as believe in the people who decide and who receive the outcome. The simplicity of the process of the process to decide of who get the outcome and clarity of relationship between performance and outcomes. According to Vroom (1968), the Expectancy theory concentrates on the following three relationships:

- Performance-reward relationship: It talks about the extent to which the employee believes that getting a good performance appraisal leads to Institutional rewards.
- Rewards-personal goals relationship: It is all about the attractiveness or appeal of the potential reward to the individual.
- Effort-performance relationship with reference to the likelihood that the individual's effort be recognised in his or her performance appraisal.

It must be noted that expectancy theory, although recommended it does not address the problem of turnover, because it is focusing on the satisfaction of the individual employee and not on the expectations of the institution. The theory creates problems in the instances where employers are not at the position of meeting the employee's demands or work is not performed at the required standard and this situation may contribute to employees quitting their jobs. This opinion is confirmed in Herzberg (1966) although, it is suggested the needs have to be satisfied for the employee to be motivated. Herzberg argues that it is difficult to meet all individual needs and that the remaining needs may cause dissatisfaction if they are not addressed accordingly. It is at this point that strategies of dealing with recurrence of employee turnover rate be developed.

In an attempt of addressing the problems of employee turnover, it is important to note that the strategies to respond to the high employee turnover in the public institutions are necessary to create stability and institutional development. The public institutions must develop these strategies within the ambit of the legislative framework and regulatory framework. Baumann, Yan, Degelder and Malikov (2006)

indicate that in an effort to improve retention and strengthening the development of health care workers must be made in order to minimise turnover rate of health professionals.

Baumann (2010) agrees with the opinion in Baumann, *et al.* (2006) that retention of highly skilled workforce needs cooperation at the national, local and institutional level and must be within the approved legal frameworks and further indicate that strategies may not be developed in isolation from national labour, financial and retention policies. He also emphasised that policies must be implemented at all levels in the public institution and take the public institution's situations into consideration.

It is clear from the literature that there is still a wider scope for scientific investigation of turnover of health care professionals to be undertaken since different views still exist in the understanding and interpreting what contribute to turnover of health care professionals. The underlying factors that contribute to turnover of health care professionals in public institutions are still a major challenge. These factors are influenced by the rapid change in the external and internal environment in the public institutions. The review of regulatory frameworks as the guiding principles is further discussed below. Thus, the examining factors contributing to high turnover rate of these health care professionals in the context of Polokwane and Mankweng Tertiary Hospital is necessary to contribute to the body of knowledge.

2.4 REGULATORY FRAMEWORK

In addition to the review of literature, it is important to review regulatory frameworks that are established to provide guidelines on the development of recruitment and retention strategies. Regulatory frameworks are introduced to serve as mandates on the development of policies by the public institutions. Erasmus, Swanepoel, Schenk, Van der Westhuizen and Wessels (2005:270) indicate that there are several regulatory frameworks that provide guidelines on the development of policies in the public institutions. According to Baumann, *et al.* (2006), public institutions must develop strategies of responding to the high employee turnover within the ambit of regulatory frameworks. In an effort of improving retention and strengthening the

development of health professionals, a Seven - Point Framework Critical Elements is developed to provide and outline the commitment of the public institutions towards workforce planning and minimising turnover of health care professionals. Baumann (2010) argues that the strategies of recruitment and retention may not be developed in isolation from national labour, financial and retention policies. Baumann (2010) further mentions that the policies must be implemented at all levels within the public institutions. Baumann, *et al.* (2006), outline the Seven - Point Framework Critical Elements as indicated in table2 below:

TABLE 2: THE SEVEN –POINTS FRAMEWORK CRITICAL ELEMENTS IN RETENTION TO TURNOVER

Priority No	Area of Focus
1	GDP and Investment in Health
2	Mix of Private/ Public Investment
3	International Migration
4	Health Policy Framework
5	Countrywide Strategies
6	Province/Regional Strategies
7	Professional Association/ Regulatory bodies

Source: (Baumann, Yan, Degelder and Malikov 2006)

This framework was successfully used to analyse retention strategies in four countries namely, Uganda, the United Kingdom, Canada and Thailand. Baumann, *et al.* (2006: 4) mention that the framework draws upon available data and includes the

following focus areas: Growth and Development Programme (GDP) and investment, mix of private and public investment, health policy framework, countrywide strategies, Provincial and Regional strategies, and professional association and regulatory bodies. Baumann et al. (2006: 7-10) explains briefly each focus area as follows:

2.4.1 Growth and Development Programme and investment

The economic growth of the country should take into account the social institutions such as health care sectors and make provision of the funds available to strengthen the functionality of these sectors and to retain health professionals.

2.4.2 Mix of private and public investment

It became evident that health care professionals are attracted to the private sectors and health care services are compromised. The mix of private and public investment as a retention strategy will create interest of health professionals to work at both private and public institution.

2.4.3 Health policy framework

Policy framework stipulates issues that need to be implemented to retain health professionals in the public institutions. It includes issues such as improvement of salaries of health professionals, working conditions, professional development and recruitment of health care professionals.

2.4.4 International migration

The international migration requires that control measures should be put in place in the form of government to government agreement. This will reduce direct recruitment of health care professionals from developing countries such as South Africa.

2.4.5 Countrywide strategy

The National Department of Health should develop a retention strategy that will serve as a framework for the whole country. The strategy should provide a framework for guidelines and procedures, including funding mechanisms to the provincial and national administrations.

2.4.6 Provincial or regional strategies

This focus area provides that once the National retention strategy is completed, the provincial or regional strategies should be developed based on the national strategy.

2.4.7 Professional association and regulatory

The professional associations as major stakeholders in the health care sector play a vital role to the development of retention strategy. These stakeholders usually influence policy development and implementation.

Although, the seven points framework serve as the guiding principles in the decision making process regarding the development of recruitment and retention strategies; they are too broad. In the South African scenario, the development of strategies at the institutional level requires specific practical actions to be undertaken. The implementation of the seven point framework may be possible at the higher level than at the institutional level where the actual problems are experienced.

The World Health Organisation has identified best practices for recruitment and retention strategies to strengthen the objectives of the seven point framework. In the World Health Organisation Report (2006) best practices for recruitment and retention strategies are outlined as follows: enhancing workforce performance, firm and fair supervision, fair and reliable compensation, critical support system, lifelong learning, managing migration and attritions, safe environment and succession planning. These best practices are recommended for adoption and application at all levels of the public institutions in order to facilitate the retention of health care professionals.

Medicines Sans Frontiers (2007) provides fundamental changes that are required to improve the quality of care in the country and eliminate the shortage of local health professionals. The following recommendations are introduced for the health sector to take them into consideration:

- Development of emergency retention measures at national level to break the cycle of high attrition rate so that patients can receive quality care services.
- Improving salaries, working conditions and incentives to retain and attract health workers in rural and underserved areas.
- More flexible scope of practice and work rules to allow staff to take on crucial tasks.
- Mobilisation of funds to allow support for recurrent human resource costs.
- Lift national spending limits and allow the health sector to increase salaries of the health care professionals.

These recommendations are relevant to the challenges that are facing health sector with regard to high turnover rate of health care professionals in the South African context. However, a clear action plan needs to be developed in order to implement the recommendations successfully. Systems for monitoring and evaluation on implementation for the recommendations should be developed and supported. This will allow public institutions to generate strategies that will ensure that recruited health care professionals are retained within the institutions to provide the quality health care.

2.5 CONCLUSION

Based on the above literature review, it is clear that employee turnover is a major concern in the public institutions especially in the health care sector. It is therefore required that managers in the public health care systems should be prepared to make sure that strategies to eliminate recurrent employee turnover rate are developed. It is also necessary to note that such strategies need to be reviewed on a regular basis through continuous scientific research for the public institutions to keep abreast with the current developments on the issues of employee turnover that are relevant to their situations. As earlier indicated, this study is necessary to identify and

measure factors that contribute to turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital. This is a necessary intervention which seeks to understand the employee turnover in the context of Polokwane and Mankweng Tertiary Hospital which should also contribute to the general body of knowledge in the human resource scholarship and practice.

The next chapter explains a design of the study and methodology undertaken to validate the collected data.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 INTRODUCTION

In chapter 2 both the literature review and regulatory framework pertaining to turnover of health care professionals were discussed. The objective of this chapter is to present research methodology that was undertaken to facilitate the collection of data in order to provide the credible research findings. This chapter further outlines the research design and rationale of the study, population, sampling method data collection, data analysis and ethical consideration.

3.2 RESEARCH DESIGN AND RATIONALE

Mouton (2003:55) refers to research design as a tool to enable the researcher to anticipate what the appropriate research decisions should be, so as to maximise the validity of the eventual results and serves as the framework for collecting data and how the study will be conducted. Burns and Grove (2005:211) state that a research design guides the researcher in planning and implementing the study in a way that is likely to achieve the intended goals. The rationale for a research design is to plan and structure a research project in such a way that the validity of the research findings is maximised through minimising or eliminating potential errors.

Research design deals with the following questions in the study: what data is needed? Where will data be collected? How will the data be collected? How will the data be analysed and interpreted? Mouton (2003:57) further defines research design to mean the entire process of research from conceptualising the problem to writing the narrative report. Babbie and Mouton (2003:647) argue that a research design refers to a structured framework of how a researcher intends to solve a research problem. However, research methodology on the other hand, is concerned with steps, procedures, techniques and specific tasks to be considered by a researcher to implement the research design.

Quantitative and qualitative research methods are accepted by many researchers because these methods are compatible and their application is determined by the type of research project undertaken. Mouton and Marrais (1996:38) argues that quantitative and qualitative methods may be combined in one research project. In this study, the discussion of the research methods, namely, quantitative and qualitative provides a researcher with a clear understanding in choosing an appropriate method.

According to Klaas (2007:2) quantitative research design tends to be highly structured and it includes tight controls of eliminating contaminated and influenced variables. Quantitative research is a formal, objective, systematic process in which numerical data is used to obtain information about the subject to be studied (Burns and Grove, 2009: 22). Polit and Beck (2006: 18) explain quantitative research as the investigated phenomena that is used to measure and quantify, often involves a rigorous and controlled design. Babooa (2008:137) argues that quantitative research involves the use of structured questions where the response options have been predetermined and a large number of respondents.

Therefore qualitative research involves an in-depth understanding of behaviour and opinions of the participants. Mouton (2003:148-160) states that qualitative research is categorised into the following: The study of human beings and their behaviour through field studies, case studies, interviews and direct observation; and the study of products on human behaviour.

In this study, quantitative research design is employed to obtain data for identifying and measuring the factors that contribute to turnover of health professionals at Polokwane and Mankweng Tertiary Hospital. The similar research design is applied in the study of Voslo (2009) to investigate brain drain and brain gain of Allied health care professionals in Limpopo. The other study of Mdindela (2009) as reported in chapter 2 of this study used quantitative research design to analyse factors that cause staff turnover at selected government hospitals in the Eastern Cape.

3.3 POPULATION

Burns and Grove (2005:83) define population as a group of people who share common or attribute of interest to the researcher. The specification of the population influences the decision that researcher should make about sampling and resources in the study. According to Bless, Higson-Smith and Kagee (2006:98) population is a set of elements that the research focuses on and the results arrived at and may be generalised depending on the type of sampling used. In this study, the population includes health care professionals namely; doctors, professional nurses, allied health care professionals and pharmacists permanently employed at Polokwane and Mankweng Tertiary Hospital (see Table 3 below).

3.4 SAMPLING

According to Bless *et al.* (2006:100) a sample is defined as a subset of the whole population which is actually investigated by a researcher and whose characteristics may be generalised to the entire population depending on the type of sampling. It is further explained that sampling is a technique used to rationalise the collection of information and to select the objects, persons or events from which actual information can be drawn. Kumar (2005:164) explains sampling method as the process of selecting a few samples from a bigger group to become a basis for eliminating or predicting the prevalence of unknown piece of information, situation or outcome regarding the bigger group.

3.5 SAMPLING METHOD

Non probability sampling refers to the cases where the probability of including an element of a population in a sample is unknown (Bless *et al.*, 2006:100). According to Bak (2004:205), non-probability sampling is a sampling process in which a sample is selected from elements or members of a population through non-random methods. In the study, the researcher has applied non-probability sampling to select the desired number of various categories of health professionals working at Polokwane and Mankweng Tertiary Hospital to participate in the study.

3.6 SAMPLING TECHNIQUE

Neuman (2006:222) states that purposive sampling is largely used to obtain opinions of participants and applies the judgement of an expert to select cases or the researcher select cases with a specific purpose in mind. Nueman (2006) further mention that purposive sampling is based on the belief that the researcher's knowledge about the population can be used to select sample members. For the purposes of this study the researcher has used purposive sampling in selecting respondents. The researcher's view is that the sampling technique is applicable for this study as not every health care professional employed at Polokwane and Mankweng Tertiary Hospital will be selected.

3.7 SAMPLING SIZE

Sampling size as undertaken in this study is illustrated in Table 3 below:

TABLE 3: THE SAMPLE SIZE

Occupational categories	Total population	% of the total population	Sample size
Doctors	204	30.0	45
Professional Nurse	220	30.0	45
Allied Health Professionals	105	30.0	45
Pharmacist	30	10.0	15
Total	559	100.0	150

Source: (De Vos, 2005:196)

De Vos (2005:196) indicates that 10% of the total sample population can be regarded as a representative sample. The total sample size of 150 in Table 3, which

is 26.8% of the total population, represents a total number of participants that were selected to take part in the study.

3.8 DATA COLLECTION

3.8.1 QUESTIONNAIRE

According to Mouton (2003:55) data collection is a means of collecting information from different sources. This is the most time-consuming exercise in that the population targeted for the study should ideally be reduced to a small manageable group or portion, but still be representative of a larger group. According to Joseph, Barry, Money and Samoel (2003), a questionnaire is a set of prepared questions or measures to which respondents or interviewer's record answers.

Wegner and Hollenbeck (2002) further indicate that the importance of ensuring that the correct research questions need to be addressed in order to obtain accurate information. A structured questionnaire is reliable and valid if information obtained is accurate to the related phases of the research. Saunders, Lewis and Thornhill (2003) argue that the layout of a questionnaire should be attractive to encourage the respondents to participate in the study. This will ensure that the respondents are completing the questionnaires and return them on time. It is further indicated that the main requirement of the questionnaire should be kept simple and short.

According to Nueman (2006), questionnaires are used to gather self-report information from respondents through self-administration of questions in paper and pencil. In this study, the administered questionnaires are used to obtain information from health care professionals at Polokwane and Mankweng Tertiary Hospital. The closed-ended questionnaires with a Four - Point and Five – Point Likert scale, respectively, are used in the survey. Likert scale allows the respondents to indicate their attitudes on a weighted scale of 1-4 and 1-5. The questionnaire took approximately 30 minutes to be completed to ensure that the respondents are not strained.

3.9 DATA ANALYSIS

An analysis of data followed the data collection thereof in this study, which helped the researcher to find possible solutions to the problems that lead to high staff turnover of health care professionals. Data analysis helped the researcher to discard data that is irrelevant to the research project and retain only what is relevant. This is the process of determining what the data mean and irrelevant information is filtered out reducing the final information to manageable proportions (Mouton, 1996). The sampling method contributes to well-presented results as outlined in chapter four.

As a result of the type and values of data being mostly nominal, data was not treated as ordinal or interval, but only calculations based on frequencies of occurrence was appropriate. The Micro Soft Excel spread-sheet programme is used to analyse data. The Micro Soft Excel programme was also applied for coding and cleaning of data. Values are the arbitrary numbers that represent categories. The expected results were presented in chapter 4 by using graphical and tabular descriptive techniques like frequencies, percentages, tables and graphs.

3.10 ETHICAL CONSIDERATIONS

In social sciences research participants are human beings and the researcher should observe ethical standards throughout the study. According to Strydom (2005:57) ethics is defined as a set of moral principles that is suggested by an individual or group subsequently widely accepted, and which offers rules and behavioural expectations about the most correct conduct towards experimental subjects and respondents, employers, sponsors, other researchers, assistants, and students. Ethical consideration pertinent to this study was based on the three ethical principles of the Belmont Report, namely beneficence, respect for human dignity and justice, including consent (Polit and Beck, 2006).

3.11 INFORMED CONSENT

Kumar (2005:55) indicates that informed consent implies that participants are made adequately aware of the type of information the researcher wants from them, why the information is being sought, what purpose it will be put to, and how indirectly the study will affect them.

The participants were fully informed about the nature and purpose of the study, why they have been selected to complete a questionnaire. The issue of confidentiality and voluntary participation was stressed.

3.12 CONFIDENTIALITY

Confidentiality is an ethical requirement in most research. Information provided by participants, particularly sensitive and personal information, should be protected and not disclosed to anyone other than the researcher (Bless *et al.*, 2006). Given the importance of confidentiality in research, the data collected should be protected all the times. Babbie (2007:67) emphasises that a research project guarantees confidentiality when the researcher can identify a given person's response, but promise not to do so publicly. The participants' right to confidentiality was maintained by ensuring that their names and addresses are not disclosed. Information was not linked to any individual participant.

3.13 PRIVACY

Kumar (2005:215) states that questions such as marital status, age and income may be considered to be invasion of privacy by some people. The participant's privacy should not be violated in any manner. In this study, the researcher informed the participants about the type of information needed and gave them time to decide if they would like to participate. The researcher further respected the participants' right to privacy by allowing the participants to discuss issues that they are not comfortable with them.

3.14 CONCLUSION

This chapter presented research methodology and design that were undertaken in this study. This chapter further outlines sampling method, sample size, data collection method, data analysis method and ethical consideration. Quantitative approach was highlighted as preferred method that was used to collect data. In the next chapter, this study presents the data analysis and research findings.

CHAPTER 4: DATA ANALYSIS AND RESEARCH FINDINGS

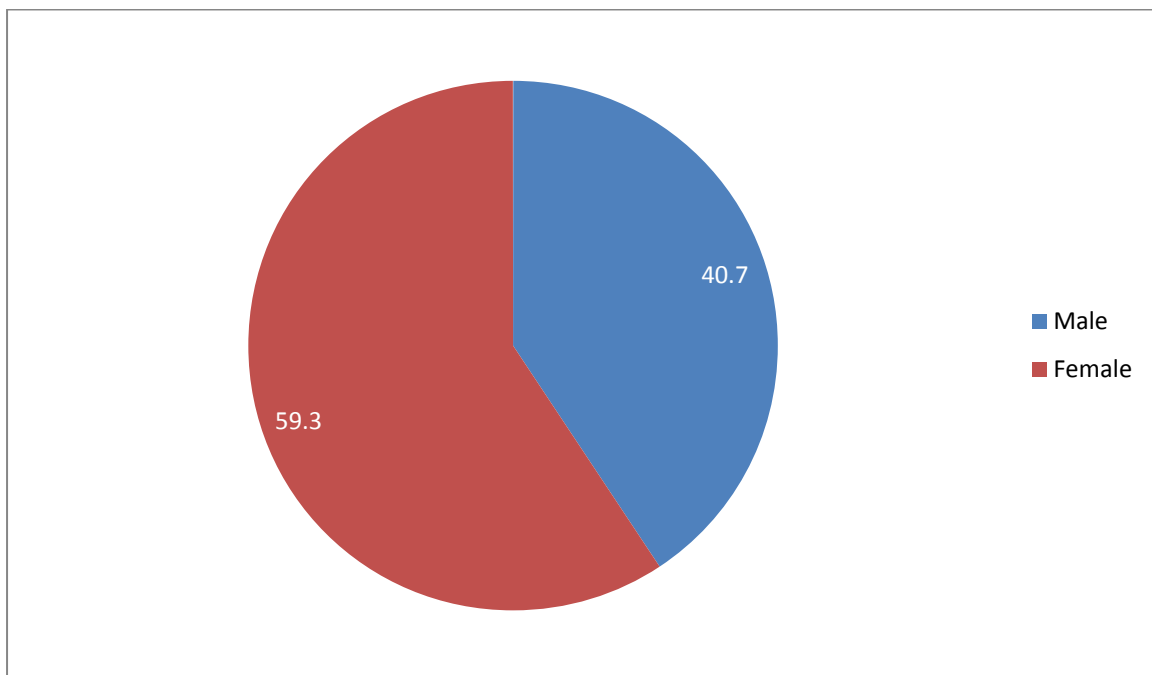
4.1 INTRODUCTION

Chapter three presented the research design, methodology and data collection methods that were used to guide this study and obtain data from the respondents. This chapter presents data analysis of the study. In this regard, collected data has been analysed by means of the selected technique or tool namely, Microsoft Excel programme. Presentation of the findings is done by means of Pie Charts and tables.

4.2 THE DEMOGRAPHICS PROFILE

The findings on the demographics characteristics as indicated on the section A of the questionnaire are presented in terms of Figure 1 to 9 (see Appendix 2).

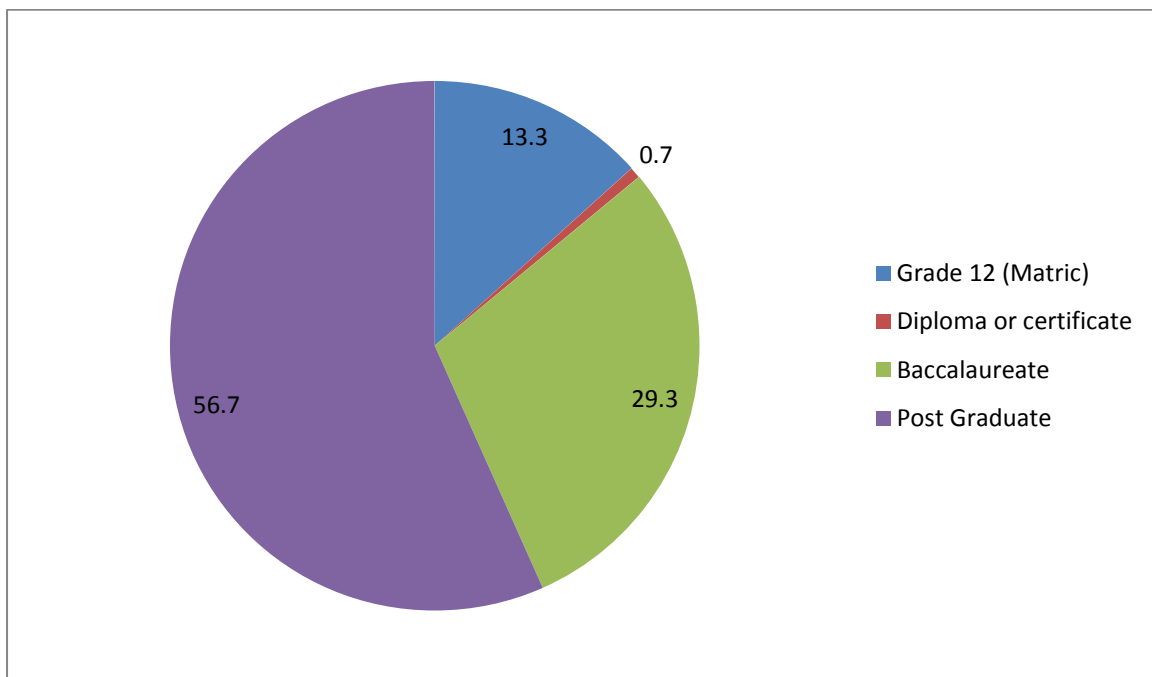
FIGURE 1: GENDER COMPOSITION



The majority of respondents who took part in the study are females with 59.3% and males are at 40.7%. However, there is a balance with regard to gender participation and this played an important role in obtaining opinions from both males and females

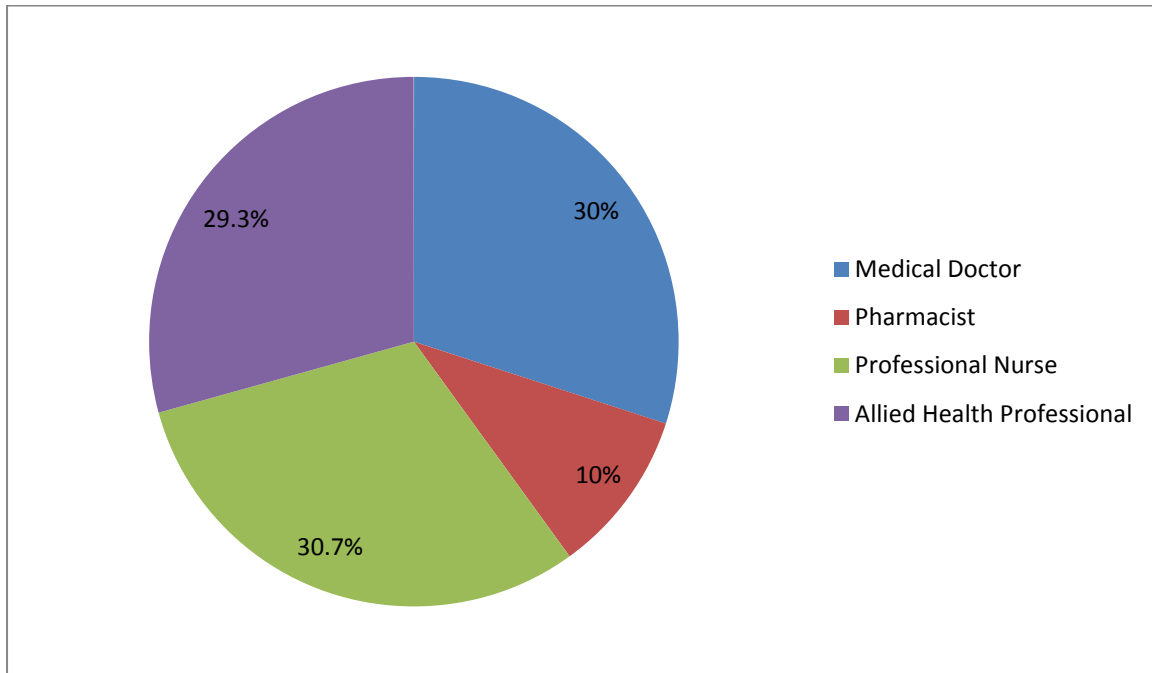
on the analysis of factors that are contributing to turnover of health professionals at Polokwane and Mankweng Tertiary Hospital. Although, the study is showing a balance of responses with regard to gender, the gap between females and males in the health institutions is caused mainly by the nursing profession that is dominated by females and constitutes 70% of the total workforce. The other professions were at 30% of male composition.

FIGURE 2: QUALIFICATION



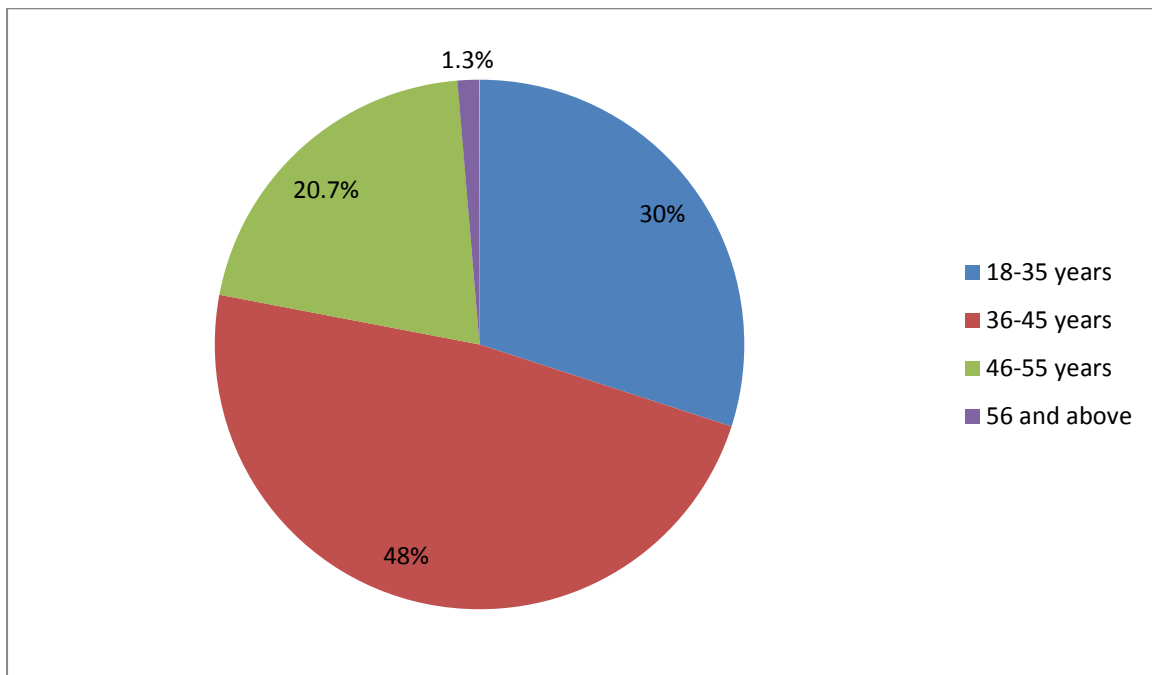
The majority of respondents who took part in the study have qualified with 56.7% post-graduate degrees and those with Baccalaureate degrees are at 29.3%. The data obtained reflects biasness towards qualifications since health professionals are by law required to be qualified before practicing in the health care institution. However, this helps to determine whether health care professionals are practicing within the scope of their qualifications.

FIGURE 3: POST TITLE



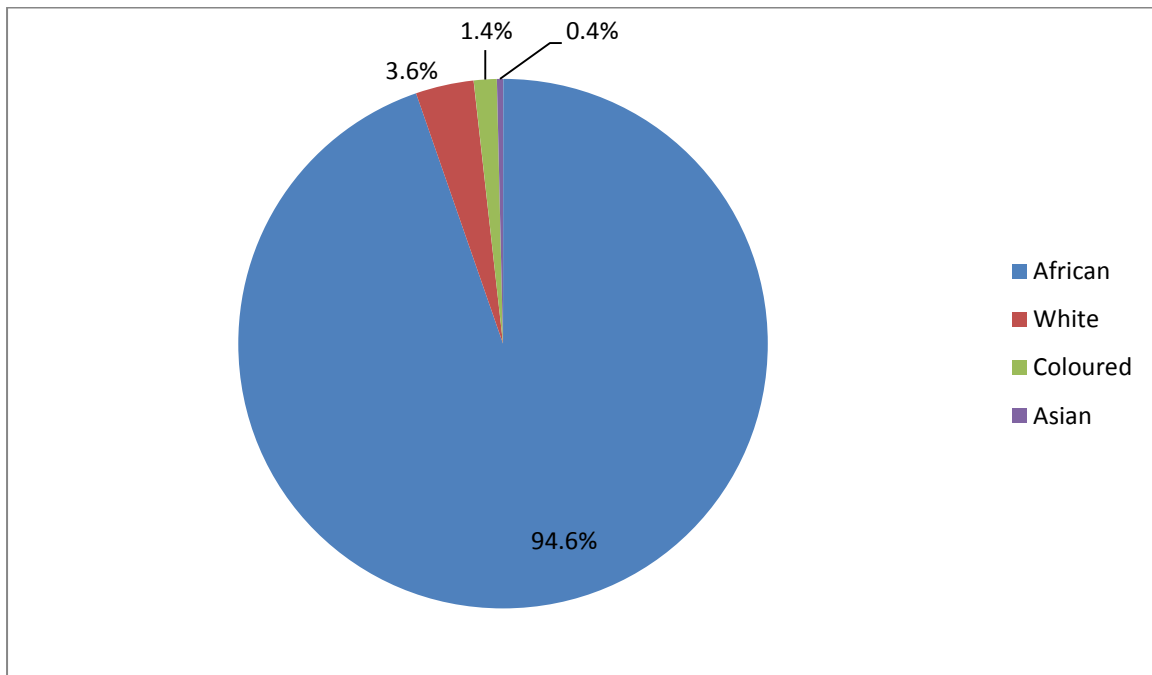
The study involved various categories of health care professionals as respondents with 30.7% Professional Nurses and 30% of Medical Doctors. Pharmacists were at 29.3% and Allied Health Professionals at 10%. According to the demographics in the Department of Health, Professional Nurses are in the majority. However, the results reflected fair and inclusive representative of health care professionals in the sample characteristics of the population in the study. This assisted the researcher to obtain opinions of various health care professionals on the analysis of factors that are contributing to turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital.

FIGURE 4: AGE GROUP



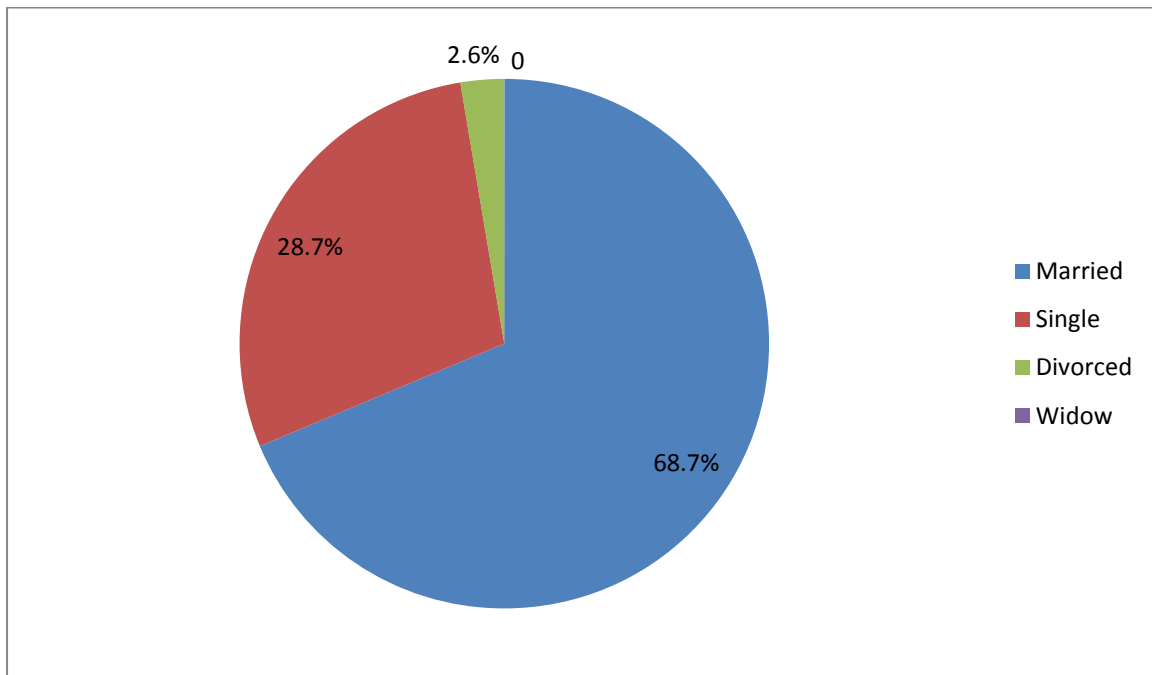
The study has involved respondents of various age groups. At least individuals ranging between 36 and 45 years are in the majority with 48% and followed by individuals ranging between 18 and 35 years that are classified in South Africa as youth with 30%. Individuals that are highly experienced are between the age of 46 and 55 years with 20.7% were respondents in the study. In this regard, the results determined as to whether the institution is able to attract and retain young health care professionals. However, the results show that Polokwane and Mankweng Tertiary Hospital is unable to attract and retain young health care professionals. The results are consistent with opinion of Stodel and Stewart-Smith (2011) when indicating that public institutions are unable to attract and retain young health care professionals due to their mobility.

FIGURE 5: POPULATION GROUP



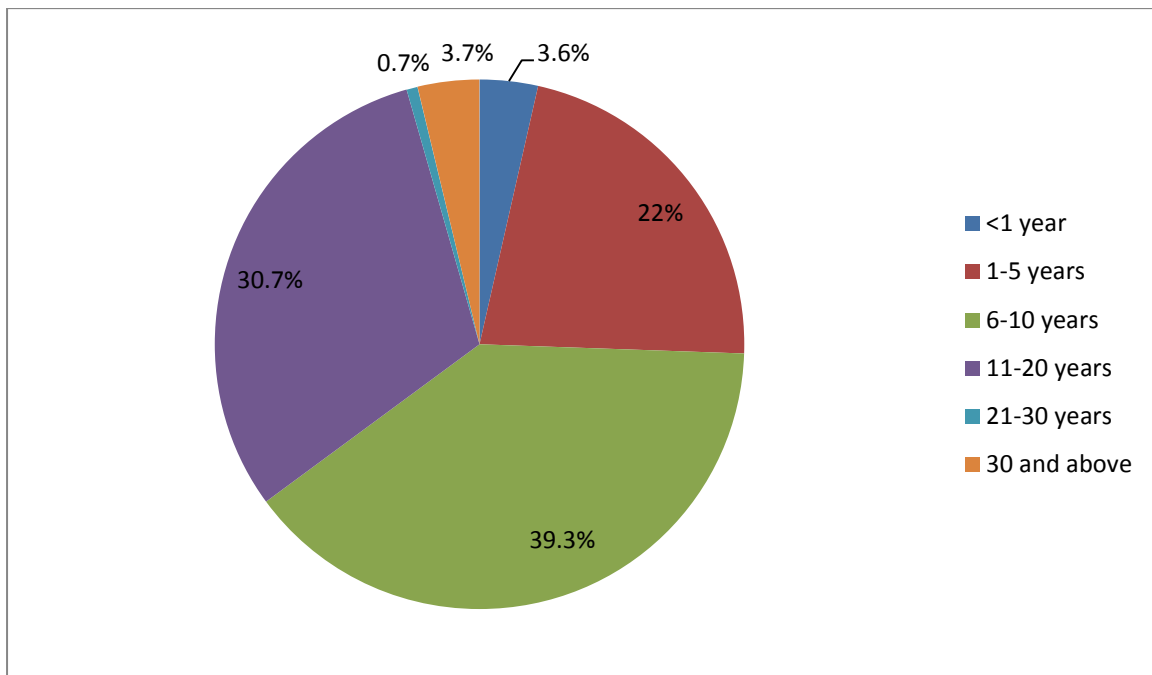
The study has involved various racial groups. The majority of respondents who took part in the study, constituting 94.6% of the entire respondents are Africans and followed by whites with 3.6%. Coloureds are at 1.4% while Asians are at 0.4. The results reflect that the turnover rate of Africans would be high since they constitute 94.67 of the entire population. The data reflects the demographics of Limpopo Province where in Africans are in majority as compared to other population groups. The inclusion of various population groups in the study assisted the researcher to obtain opinions from various population groups.

FIGURE 6: MARITAL STATUS



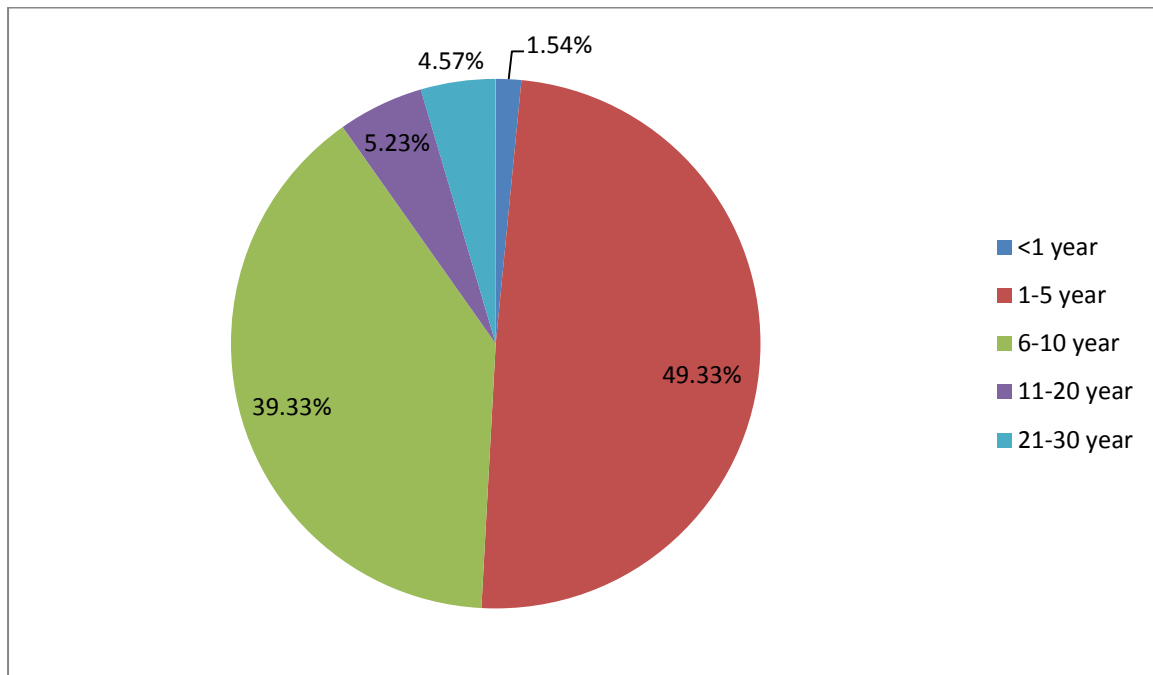
The study has involved respondents from various categories of marital status. The majority of respondents (68.7%) who participated in the study are married and followed by the respondents who are single with 28.7%. This assisted the researcher to obtain opinions from both married and unmarried respondents. The marital status also assists in determining the assumption of whether family responsibility could be one of the factors that contribute to turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital.

FIGURE 7: YEARS OF SERVICE IN THE PROFESSION



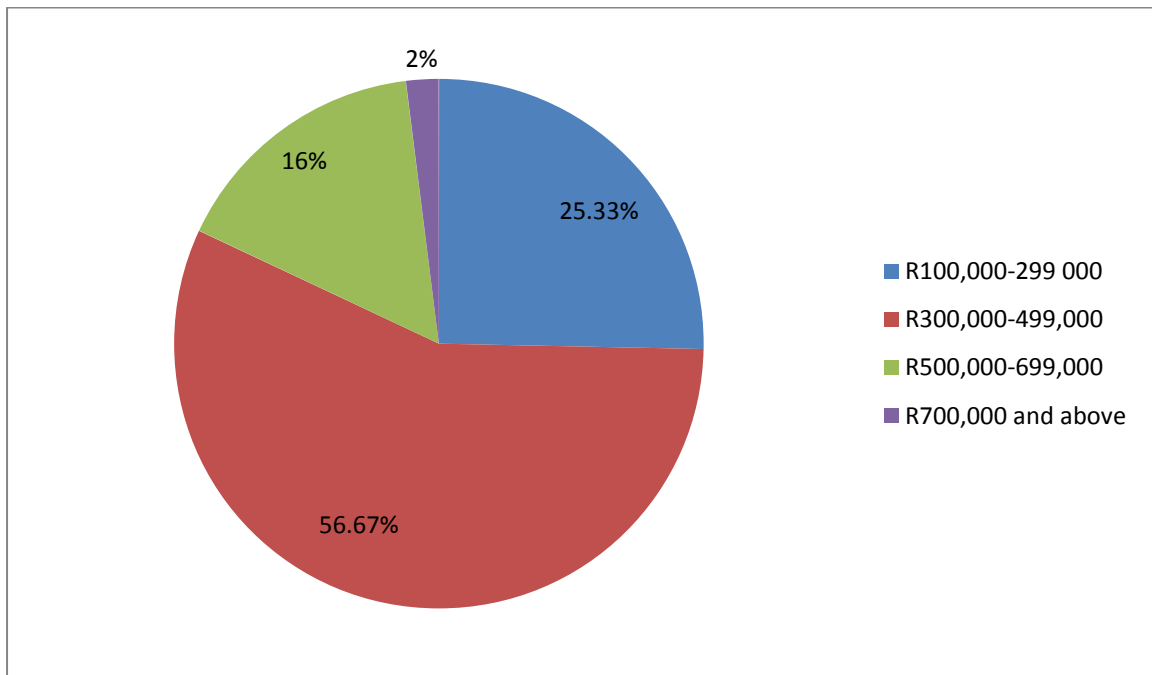
The study has involved the respondent's years of service in their profession. The largest group of these respondents were between 6 and 10 years of service in the profession with 39.33%; and followed by individuals ranging between 11 and 20 years with 30.7%. The years of service in the study also determine the stability of health professionals in the health sector. According to data collected in this study, it is observed that there is a sufficient balance between the new entrance and the experienced health professionals. The results show that an average experience that the health care professionals are having at Polokwane and Mankweng Tertiary Hospital is 20 years.

FIGURE 8: YEARS OF SERVICE AT THE CURRENT INSTITUTION



The study has involved the individual's years of service in their current institution. The largest group of respondents, who took part in the study are ranging between 1 and 5 years with 49.3%; followed by those ranging between 6 and 10 years with 39.3%. This data indicates that the institution has difficulties in retaining health care professionals until they reach their retirement age. My observation in this regard includes the fact that since there are sufficient experienced health care professionals as indicated in figure 7, Polokwane and Mankweng Tertiary Hospital successfully attracted such people with experiences. However, it is necessary to note that when these two figures (figure 7 and 8) are considered in the context of Polokwane and Mankweng Tertiary Hospital, it shows significant mobility of these health care professionals as they tend not to stay in one institution from entry until retirement. The results show that an average period that health care professionals have stayed at Polokwane and Mankweng Tertiary Hospital is 10 years.

FIGURE 9: SALARY NOTCH GROUP



The study has involved the individual's salary notch groups. The majority of the respondents who participated in the study, their salary notches are ranging between R300 000 and R499 000 with 56.7%; and followed by individuals ranging between R100 000 and R299 000 with 25.3%. The salary notches in the study help to determine whether the issue of salaries may be one of the contributing factors for health care professionals to terminate their services. The results are consistent with the opinion of Vroom (1968:1) when indicates that that employee's motivation is usually an outcome of how much an individual wants a reward (Valence), the assessment of the likelihood that the effort will lead to expected performance (Expectancy) and the belief that the performance will lead to reward (Instrumentality).

4.3 FACTORS RELATED RUITMENT AND RETENTION

Table 4 to Table 16 presents results indicating the frequency and percentage on the importance of factors in recruiting and retaining health care professionals as presented in section B of the questionnaire (see Appendix 2).

TABLE 4: RESIDENTIAL ACCOMMODATION FOR HEALTH CARE PROFESSIONALS

Scale	Frequency	Percentage
Totally unimportant	8	5.3
Unimportant	5	3.3
Important	43	28.7
Very important	94	62.7
Total	150	100.0

The majority (62.7%) of respondents who participated in the study indicated that the residential accommodation for health care professionals is regarded as a very important factor to attract and retain health care professionals at the institution and followed by those who indicated the residential accommodation for health care professionals as important factor with 28.7%. Although it is not an obligation for the public institutions to provide residential accommodation for public servants, however, this obligation is not applicable with regard to scarce skills such as health professionals and also taking into consideration that Limpopo Province is rural and therefore provision of residential accommodation would serve as recruitment and retention incentives.

The results are consistent with the view of Ahmad and Riaz (2011:58) in their study when they indicate that provision of accommodation to health care professionals should be given priority in the public institutions since they are regarded as the most important assets and further indicate that public health care institutions cannot function without their expertise and availability. According to majority respondents in the study, it is evident that residential accommodation for health care professionals is a very important factor to attract and retain health care professionals at Polokwane and Mankweng Tertiary Hospital.

Table 5: SALARIES

Scale	Frequency	Percentage
Totally unimportant	6	4.0
Unimportant	1	0.7
Important	21	14.0
Very important	122	81.3
Total	150	100.0

The majority of respondents who participated in the study indicated that salary is a very important factor to recruit and retain health care professionals in the institution with 81.3% and followed by the individuals who indicated salary as important factor with 14%. Mdingela (2009:134) in her findings indicates poor salaries as one of the factors that contribute to turnover of health care professionals. Although, the introduction of occupational specific dispensation was aimed at improving the salaries of health care professional, it did not create competitive urge with other sectors. The results in the study reflect that health care professionals are regarding financial consideration as a very important factor in attracting and retaining health care professionals at Polokwane and Mankweng Tertiary hospital.

TABLE 6: CAREER DEVELOPMENT

Scale	Frequency	Percentage
Totally unimportant	5	3.3
Unimportant	1	0.7
Important	29	19.3
Very important	115	76.7
Total	150	100.0

The majority of respondents who took part in the study indicated that career development is a very important factor to attract and retain health care professionals with 76.7% and followed by individuals who indicated career development as important factor with 19.3%. The results are consistent with the view of Mdingela (2009) who indicates that career development serves as a motivational factor to

health care professionals and as a result, it plays a critical role in recruiting and retaining health care professionals at Polokwane and Mankweng Tertiary Hospital.

TABLE 7: LEADERSHIP AND MANAGEMENT STYLE

Scale	Frequency	Percentage
Totally unimportant	4	2.7
Unimportant	2	1.3
Important	25	16.7
Very important	119	79.3
Total	150	100.0

The majority of respondents who participated in the study, 79.3% are of the opinion that leadership or management style in the institution plays a very important role in recruiting and retaining health care professionals and followed by 16.7% individuals who are of the opinion that leadership or management style is an important factor in recruiting and retaining health care professionals. As Ongori (2007:49) states, public institutions that are experiencing instability due to poor management style and operations are having high degree of staff turnover (Ongori, 2007:49) The type of leadership or management style determines whether employees may be comfortable or uncomfortable with at Polokwane and Mankweng Hospital.

TABLE 8: EFFECTIVE COMMUNICATION

Scale	Frequency	Percentage
Totally unimportant	5	3.3
Important	38	25.3
Unimportant	0	0
Very important	107	71.4
Total	150	100.0

The majority of respondents who participated in the study, 71.4% are of the opinion that effective communication is one of the factors that plays a very important role in recruiting and retaining health care professionals in the institution. This opinion also confirmed by 25.3% of respondents who indicated effective communication as an important factor in recruiting and retaining health care professionals.

TABLE 9: PHYSICAL RESOURCES AND EQUIPMENTS

Scale	Frequency	Percentage
Totally unimportant	4	2.7
Unimportant	1	0.7
Important	23	15.3
Very important	122	81.3
Total	150	100.0

The majority of respondents who took part in the study, 81.4% are of the opinion that allocation of physical resources or equipment plays a very important role in recruiting and retaining health care professionals. 15.3% of respondents from the data in the study supported by indicating physical resources or equipment as an important factor in recruiting and retaining health care professionals in the institution. Medical equipment at hospitals is an enabling tool for health care professionals to work effectively in serving the lives of their patients.

TABLE 10: RURAL ALLOWANCE

Scale	Frequency	Percentage
Totally unimportant	3	2.0
Unimportant	3	2.0
Important	27	18.0
Very important	117	78.0
Total	150	100.0

The majority of respondents who took part in the study, 78% are of the opinion that payment of rural allowance to health care professionals in the institution serves as a very important factor in recruiting and retaining health care professionals. The opinion is confirmed by 18% of individuals in the study who indicated rural allowance is an important factor in the recruitment and retention of health care professionals at Polokwane and Mankweng Tertiary Hospital. According to Statistics South Africa (2009), almost 80% of the Limpopo Province is rural. This indicates that the majority of health care professionals employed at the institutions in Limpopo Province should qualify for a rural allowance incentive.

TABLE 11: OVERTIME PAYMENTS

Scale	Frequency	Percentage
Totally unimportant	3	2.0
Unimportant	5	3.3
Important	34	22.7
Very important	108	72.0
Total	150	100.0

The majority of respondents (72%) indicated that payment of overtime to health care professionals plays a very important role in recruiting and retaining health care professionals in the health institutions. This statement is further confirmed by 22.7% respondents in the study who indicated the payment of overtime allowance to health care professionals as an important factor to recruit and retain health care professionals. It is evident that currently the health care institutions are understaffed. This results are consistent with the view of Stodel and Stewart-Smith (2011:2) when

indicate that health care professionals are working beyond the scope of their normal working hours.

TABLE 12: CONDUCTIVE WORKING CONDITIONS

scale	Frequency	Percentage
Totally unimportant	2	1.3
Unimportant	3	2.0
Important	34	22.7
Very important	111	74.0
Total	150	100.0

The majority of respondents in the study (74%) indicated that conducive working conditions is one of the factors that serves a very important role in recruiting and retaining health care professionals. 22.7% supported the opinion of conducive working conditions as recruitment and retention strategy for health care professionals at Polokwane and Mankweng Tertiary Hospital. Safety and healthy environment are required to be taken into consideration in the health facilities to create conducive working environment due to the fact that patients are kept in the health facilities.

TABLE 13: FILLING OF POSTS TO REDUCE WORKLOAD

Scale	Frequency	Percentage
Totally unimportant	4	2.7
Unimportant	2	1.3
Important	17	11.3
Very important	127	84.7
Total	150	100.0

The majority (84.7) of the respondents indicated that the filling of vacant posts can play a very important role in reducing workload for health care professionals. 11.3% of the respondents viewed the filling of posts as an important factor in reducing the workload to health care professionals. The results are consistent with the study conducted by Vosloo (2009) when indicating that health care professionals are

leaving to other provinces or countries, because of high workload, inadequate remuneration and poor working conditions Department of Health Report (2011) and the MEC Budget Speech suggested that posts for health care professionals be filled to reduce the workload of health care professionals in the health institutions.

TABLE 14: OFFICE SPACE

Scale	Frequency	Percentage
Totally unimportant	3	2.0
Unimportant	4	2.7
Important	56	37.3
Very important	87	58.0
Total	150	100.0

The results show that the majority (58%) of the respondents indicated that the provision of the office space or consulting rooms serve a very important role to attract and retain health care professionals in the institution. 37% of the respondents indicated the provision of office space as an important factor. The importance of the office space or consulting rooms was also observed by the management of the institution when they introduced the revitalisation of the buildings in the institution which would also cover the improvement of office or consulting rooms.

TABLE 15: ENTERTAINMENT FACILITIES

Scale	Frequency	Percentage
Totally unimportant	5	3.3
Unimportant	15	10.0
Important	70	46.7
Very important	60	40.0
Total	150	100.0

The results indicate that the largest group (46.7) of respondents indicated that provision of the entertainment areas in the institution plays an important role in attracting and retaining health care professionals. 40% of health care professionals pointed out that provision of entertainment areas in the institution is one of the most important factors that serve as a recruitment and retention strategy. The results were consistent with the revitalisation programme that the Department of Health in Limpopo Province has introduced in an attempt to improve health care facilities, including the entertainment facilities.

TABLE 16: EFFECTIVE MANAGEMENT OF WORK OUTSIDE THE PUBLIC SERVICE

Scale	Frequency	Percentage
Totally unimportant	5	3.3
Unimportant	8	5.3
Important	65	43.3
Very important	72	48.1
Total	150	100.0

The result show that the largest group (48.1) of the respondents were of the opinion that effective management of remuneration outside the public service is regarded as a very important factor to recruit and retain health professionals in the institution. 43.3% of the respondents regarded it as an important factor. The importance of effective management of remuneration outside the public service was also recognised by the Department of Health in Limpopo Province when introducing a policy in that regard.

4.4 JOB FACTORS

Table 17 to Table 32 presents the results on the analysis of factors that contribute to turnover of health professionals by indicating the whether the respondents are agreeing or not agreeing with the identified factors as presented in section C of the questionnaire (see Appendix 2).

TABLE 17: ADEQUATE RESIDENTIAL ACCOMMODATION FOR HEALTH PROFESSIONALS

Scale	Frequency	Percentage
Strongly disagree	47	31.3
Disagree	65	43.3
Uncertain	4	2.7
Agree	10	6.7
Strongly Agree	24	16.0
Total	150	100.0

The largest group (43.3%) of the respondents disagreed with the statement of whether the institution has an adequate residential accommodation for health care professionals. 31.3% of the respondents strongly disagreed with the statement. The results were consistent with the results in Table 4 where in 62.7% of the respondents indicated residential accommodation for health care professionals as very important factor in retaining health professionals. These findings suggest that residential accommodation at Polokwane and Mankweng Tertiary Hospital be provided for health care professionals.

TABLE 18: FAIR PAYMENT OF THE WORK DONE

Scale	Frequency	Percentage
Strongly disagree	75	50.0
Disagree	61	40.7
Agree	8	5.3
Strongly Agree	6	4.0
Total	150	100.0

The results show that the largest group (50%) of the respondents strongly disagreed with the statement of whether they are paid fairly for the work done. 47.7% of the respondents disagreed with the statement. The results are consistent with the study of Mdingela (2009), which indicates that poor remuneration is one of the contributing factors of turnover of health professionals. Griffith, Horn and Gaertner (2000) argue that pay and pay-related variables have a modest effect on turnover. In this study, the relationship between pay, employee's performance and turnover was confirmed. It is concluded that when employees are under paid, performance is affected and turnover increases.

TABLE 19: TRAINING AND DEVELOPMENT OPPORTUNITIES

Scale	Frequency	Percentage
Strongly disagree	41	27.3
Disagree	90	60.0
Uncertain	6	4.0
Agree	9	6.0
Strongly Agree	4	2.7
Total	150	100.0

The results show that the majority (60%) of the respondents indicated the statement that they receive training and development on a regular basis. 27.3% of the respondents strongly disagreed with the statement. The results can be correlated with the outcomes in Table 6 where in the majority (76.7%) indicated that training and development play an important role in recruiting and retaining health care

professionals. It is therefore observed that the institutions have not been considering training and development interventions for health care professionals.

TABLE 20: PROFESSIONAL DEVELOPMENT IS EFFECTIVE

Scale	Frequency	Percentage
Strongly disagree	34	22.7
Disagree	85	56.7
Uncertain	7	4.7
Agree	10	6.7
Strongly Agree	14	9.2
Total	150	100.0

The results show that the majority (56.7) of the respondents disagreed with the statement of whether there is effective professional development of health care professionals in the institution. 22.7% of the respondents strongly disagreed with the statement. The results are consistent with the findings of Hays, *et al.* (2006:43) who indicated that employee turnover behaviour occurs due to career aspiration if expectation for advancements are not realised. Such employee may develop intentions to quit the job. Taking into consideration rapid development of medical technology globally, it is imperative that health care professionals be exposed to professional development in order to be effective in their job.

TABLE 21: PERFORMANCE IS DISCUSSED WITH SUPERVISOR

Scale	Frequency	Percentage
Strongly disagree	17	11.3
Disagree	86	57.3
Uncertain	5	3.3
Agree	34	22.7
Strongly Agree	8	5.4
Total	150	100.0

The majority (57.3%) of the respondents disagreed with the statement of whether performance is discussed with supervisors on a regular basis. 11.3% of the respondents strongly disagreed with the statement. The results are consistent with

the Department of Health's Annual Performance Report (2010) in which only 57% of the total staff were evaluated in line with Performance Management System. Although 22.7% of health care professionals agreed with the statement, it is evident that there is a gap between supervisors and subordinate in discussing performance on a regular basis as prescribed in the Performance Management System.

TABLE 22: JOB IS PERFORMED WITH MINIMAL SUPERVISION

Scale	Frequency	Percentage
Strongly disagree	15	10.0
Disagree	75	50.0
Uncertain	3	2.0
Agree	39	26.0
Strongly Agree	18	12.0
Total	150	100.0

The results show that half of the respondents (50%) of the respondents disagreed with the statement of whether a job is performed with minimal supervision and 10% of the respondents strongly disagreed with the statement. It is interesting to note that the results confirmed that the majority of health care professionals are not being supervised when performing the job.

TABLE 23: SUPERVISORS ARE MOTIVATING SUBORDINATES TO DO THE JOB

Scale	Frequency	Percentage
Strongly disagree	18	12.0
Disagree	94	62.7
Uncertain	7	4.7
Agree	25	16.6
Strongly Agree	6	4.0
Total	150	100.0

The majority (62.7%) of the respondents disagreed with the statement of whether supervisors are motivating subordinates for the job done. At least 12% of the respondents strongly disagreed with the statement. Although, Table 19 confirmed

that health care professionals are being supervised when performing their job, it is interesting to note that supervisors are regarded as not motivating staff. The theory of needs indicate that motivation of employees may be through a reward or encouragement if satisfactory performance is realised. It is clear that health care professionals at Polokwane and Mankweng Hospital are not properly motivated and this may contribute to the current turnover.

TABLE 24: EMPLOYEES GET RECOGNITION

Scale	Frequency	Percentage
Strongly disagree	21	14.0
Disagree	109	72.7
Uncertain	7	4.7
Agree	9	6.0
Strongly Agree	4	2.6
Total	150	100.0

The results show that the majority (72.7) of the respondents disagreed with the opinion of whether employees are getting recognition for the job performed. 14% of the respondents strongly disagreed with the statement. Although, the Department of Health adopted Performance Management System as a tool for recognising performance of employees, the results indicate that it is not effectively implemented at Polokwane and Mankweng Tertiary Hospital; and may contribute to job dissatisfaction. Zhang and Feng (2010) note that few dimensions of job satisfaction can significantly contribute to occupational burnout among health professionals.

TABLE 25: INSPIRED LEADERSHIP

Scale	Frequency	Percentage
Strongly disagree	36	24.0
Disagree	98	65.3
Uncertain	8	5.3
Agree	1	0.7
Strongly Agree	7	4.7
Total	150	100.0

The results indicate that the majority (65.3%) of the respondents disagreed with the statement that the institution is having inspired leadership and 24% of the respondents strongly disagreed with the statement. The results are consistent with the findings in Ongori (2007), when puts an emphasis on the importance of availability of inspired leadership in the institution as a recruitment and retention of health care professionals at the public health care institutions and indicates that health care professionals are motivated by strong and visionary leadership. My observation is that Polokwane and Mankweng Tertiary Hospital does not have inspired leadership when these responses are taken into consideration.

TABLE 26: TEAM WORK IS ENCOURAGED

Scale	Frequency	Percentage
Strongly disagree	22	14.7
Disagree	99	66.0
Uncertain	10	6.7
Agree	12	8.0
Strongly Agree	7	4.6
Total	150	100.0

The majority (66%) of the respondents disagreed with the statement of whether teamwork is encouraged in the institution and 14.7% strongly disagreed with the statement. At least 8% of the respondents agreed with the statement. However, the results show that there is a problem with regard to team work in the institution. The results are consistent with the findings of Alam and Hague (2010) when indicate that lack of teamwork in the health care profession can result into low morale of health care professionals.

TABLE 27: OPEN COMMUNICATION AT THE INSTITUTION

Scale	Frequency	Percentage
Strongly disagree	34	22.7
Disagree	99	66.0
Uncertain	8	5.3
Agree	4	2.7
Strongly Agree	5	3.3
Total	150	100.0

The results indicated that the majority (66%) of the respondents disagreed with the statement of whether there is open communication at the institution. 22.7% strongly disagreed with the statement. Only 2.7% of the respondents agreed with the statement. The results show that there is a problem with regard to communication at Polokwane and Mankweng Tertiary Hospital. Health care professionals are not well informed about the new developments in the institution. This affects the morale of the employees and eventually leads to turnover of these professionals.

TABLE 28: EMPLOYEES ARE COPING WITH THE WORKLOAD

Scale	Frequency	Percentage
Strongly disagree	69	46.0
Disagree	58	38.7
Uncertain	4	2.7
Agree	10	6.6
Strongly Agree	9	6.0
Total	150	100.0

The results show that the majority (46%) of the respondents strongly disagreed with the statement of whether employees are coping with the workload and 38.7% of the respondents disagreed with the statement. From the results, it is observed that health care professionals at Polokwane and Mankweng Tertiary Hospital are not coping with the workload. The results are consistent with the findings in Stodel, *et al.* (2011:2) who indicated that health care professionals in South Africa are working long hours which contribute to workload and stress. It is further indicated that HIV/AIDS pandemic has resulted in increasing numbers of patient deaths, and a higher burden of the disease that contribute workload and stress.

TABLE 29: JOB ALLOWS PROFESSIONAL GROWTH

Scale	Frequency	Percentage
Strongly disagree	38	25.3
Disagree	85	56.7
Uncertain	7	4.7
Agree	11	7.3
Strongly Agree	9	6.0
Total	150	100.0

The results indicated that the majority (50.7%) of the respondents disagreed with the statement of whether their job allows professional growth and 25.3% of the respondents strongly disagreed with the statement. At least 7.3 of the respondents agreed with the statement. The result are consistent with the outcomes in Table 17 in which the majority (56.7) of the respondents disagreed with the statement of whether there is effective professional development of health care professionals in the institution. It is observed that professional growth is not being considered at the institution and as a result health care professionals are not motivated to work in such an environment.

TABLE 30: INVOLVEMENT IN THE DECISION MAKING PROCESSES

Scale	Frequency	Percentage
Strongly disagree	36	24.0
Disagree	91	60.7
Uncertain	9	6.0
Agree	8	5.3
Strongly Agree	6	4.0
Total	150	100.0

The majority (60.7) of the respondents disagreed with the statement of whether there is involvement of employees in the decision making processes in relation to the job. It is interesting also to note that 24% of the respondents strongly disagreed with the statement. The results show that health care professionals are not involved in the decision making processes in relation to their job. This type of omission makes employees to feel not forming part of the institution and eventually contributes to turnover of these health care professionals.

TABLE 31: PERFORMANCE OF WORK OUTSIDE THE PUBLIC SERVICE

Scale	Frequency	Percentage
Strongly disagree	33	22.0
Disagree	95	63.3
Uncertain	12	8.0
Agree	6	4.0
Strongly Agree	4	2.7
Total	150	100.0

The results show that the majority (63.3) of the respondents disagreed with the statement of whether health professionals are involved in the performance of work outside the public service and 22% of the respondents strongly disagreed. These results indicate that health care professionals are not involved in performance of work outside the public service. This response is against the popular belief that health care professionals are undertaking work outside the public service. This would require further studies to test and verify this concept of performance of work outside the public service by health care professionals.

TABLE 32: ADEQUATE ENTERTAINMENT AREAS

Scale	Frequency	Percentage
Strongly disagree	33	22.0
Disagree	98	65.3
Uncertain	11	7.3
Agree	5	3.3
Strongly Agree	3	2.1
Total	150	100.0

The majority (65.3) of the respondents disagreed with the statement of whether there is an adequate entertainment areas in the institution and 22% of the respondents strongly disagreed with the statement. The results show that there is a need for the institution to create an environment for the establishment of recreational facilities in order to attract and retain health care professionals.

4.5 GENERAL OBSERVATIONS ON THE FINDINGS AND ANALYSIS

The overall findings in this study show that the identified factors that contribute to turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital are indeed the causes of staff turnover rate in the institution. The findings are consistent with literature as indicated by Mdindela (2009) that health care professionals are leaving the public institutions because of factors such as poor management, lack of career development, poor working conditions, workload and poor incentives. These findings are also in line with the study conducted by Murray, Montgomery, Chang, Rogers and Safran (2001) when state that the workload, unsuitably working conditions and lack of incentives are the major contributing factors to the dissatisfaction of health care professionals and that eventually leads to turnover of health care professionals.

In this study, the respondents generally confirmed most of the factors as the contributing factor of their dissatisfaction, with the exceptional of the remuneration of work outside the public service. Given the overall picture about this factor and that for any health care professional who is found engaged in the performance of work outside the public service for the purpose of remuneration without approval by the authorities may face disciplinary actions; may have contributed to dishonesty in their response. A further enquiry on this matter would require different instrument to ensure integrity and reliable data.

This study also sought to identify retention strategies that may be deployed to minimise the turnover rate of health care professionals at Polokwane and Mankweng Tertiary Hospital. The findings on this aspect are consistent with the study conducted by Meeus (2003) when stating that various retention strategies and their impact need to be developed to demonstrate sustainability and return on investment of the public institution. These results are also in line with the study of Grindle (1980:310) when indicating that effective retention needs to be prefaced by the formulation and implementation of policies supportive of such retention initiatives. In this study, the suggested retention strategies that may be applied at Polokwane and Mankweng Tertiary Hospital are formulated mainly on the identified factors that contribute to turnover of health care professionals and explained in Chapter 5.

4.6 CONCLUSION

This chapter outlined data analysis of the primary data. The analysed data was obtained from the respondents by means of self-administered questionnaires. The Pie Charts were used to analyse the biographical information while the tables were used to analyse the factors for recruitment and retention of health professionals. In the next chapter conclusion and recommendations are presented.

CHAPTER 5: CONCLUSION AND RECOMMENDATIONS

5.1 INTRODUCTION

Chapter 4 presented data analysis and the findings of the study. This chapter presents the conclusion and recommendations drawn from this study regarding a turnover of health professionals at Polokwane and Mankweng Tertiary Hospital. The conclusion and recommendations drawn from the study are informed by the research objectives as well as findings of the study which were obtained from the primary data.

5.2 CONCLUDING REMARKS

Data analysis and the findings in Chapter 4 assisted the researcher to arrive to the conclusion of the study. The factors that are contributing to turnover of health professionals at Polokwane and Mankweng Tertiary Hospital were analysed through the responses from sampled health care professionals as participants in the study and the following conclusions were drawn based on the identified factors:

5.2.1 RESIDENTIAL ACCOMMODATION

The provision of residential accommodation for health care professionals was found to be the critical factor in recruiting and retaining of health care professionals at Polokwane and Mankweng Tertiary Hospital. However, the results suggested that indeed the institution is currently experiencing some difficulties in providing residential accommodation for health care professionals, especially Medical Specialists and other categories classified as scarce skills. The institution was found not having enough residential accommodation, even for health care professionals who are on call or standby duties. This adversely affects the provision of quality health care service to the people of Limpopo Province.

5.2.2 SALARIES AND INCENTIVES

The results in the study reflected financial consideration as a very important factor in attracting and retaining health professionals at Polokwane and Mankweng Tertiary Hospital. It was also found that pay and pay-related variables have a modest effect on turnover. In this study, the relationship between pay, employee's performance and turnover was confirmed. It was concluded that when employees are underpaid, performance is affected and turnover increases. It was further found that if jobs provide adequate financial incentives the more likely health care professionals remain in public institutions. In this regard, it can be concluded that poor remuneration is one of the contributing factors for health care professionals to leave the institution.

5.2.3 CAREER DEVELOPMENT

The majority of health care professionals who participated in the study indicated career development as one of the important factors that can be used to attract and retain health care professionals in the institutions. It was found that employee turnover behaviour occurs due to career aspiration if expectation for advancements are not realised. Such employee may develop intentions to quit the job. Taking into consideration rapid development of medical technology globally, it is imperative that health care professionals be exposed to professional development in order to be effective in their job. The results in the study reflected that career development for health care professional was not given priority at Polokwane and Mankweng Tertiary Hospital.

5.2.4 LEADERSHIP AND MANAGEMENT STYLE

The results reflected that leadership and management style plays an important role in attracting and retaining health professional in the institution. It was found that public institutions which are experiencing instability due to poor management style and operations are having high degree of turnover. The type of leadership or management style determines whether employees could remain loyal in the institution. In this study, the results reflected that health professional were not

comfortable with the management style of the institution. It could be concluded that the turnover rate of health care professionals at Polokwane and Mankweng Tertiary Hospital is contributed by the poor leadership and management style.

5.2.5 EFFECTIVE COMMUNICATION

In any given public institution, communication play an important role in bringing understanding of the overall functions that are supposed to be achieved and also to make informed decisions. The results show that there is a problem with regard to communication in the institution. Health care professionals were not involved in the decision making process and not well informed about the new developments in the institution. This affects the morale of the employees and could eventually lead to turnover of health care professionals. In this regard, it can be concluded that communication at Polokwane and Mankweng Tertiary Hospital is not effective.

5.2.6 PHYSICAL RESOURCES AND EQUIPMENTS

Physical resources or medical equipment serve as an enabling tool in the performance of duties for health care professionals. When medical equipments are not provided or maintained, health care service is adversely affected. The findings in this study further reflected that majority of health care professionals are not comfortable with the current status of physical resources or medical equipment in the institution. It was found that there is a relationship between shortage of physical resources or medical equipment and turnover of health care professionals.

5.2.7 WORKLOAD

The results in study reflected that the majority of health care professionals are not coping with the workload in the institution. It was found that most of the health care professionals have developed burnouts and stress due to heavy workload. The austerity measures of appointments in the Department of Health aggravated the situation of the health care professionals in the institution. It is further indicated that HIV/AIDS pandemic has resulted in increasing numbers of patient deaths, and a higher burden for the health care professionals. This has added to the workload and

in many cases also to the complexity of decisions. The results reflected that there is relationship between workload and the turnover of health professionals in the institution. It can be concluded that health professionals are not coping with the workload at Polokwane and Mankweng Tertiary Hospital. In the finalising the conclusive remarks, it is necessary to provide the recommendations hereunder.

5.3 RECOMMENDATIONS

Based on the concluding remarks above, it is observed that there is a need for the development of retention strategies at Polokwane and Mankweng Tertiary Hospital. It is therefore recommended that recruitment and retention strategy be developed in line with the best practices for recruitment and retention of health care professionals as identified by the World Health Organisation (2010) namely, enhancing workforce performance, firm and fair supervision, fair and reliable compensation, critical support system, lifelong learning, managing migration and attritions, ensure safe environment and development of succession planning.

It is recommended that the recruitment and retention strategy be informed by the fundamental changes that are required to improve the quality of care and eliminate the shortage of health care professionals as provided by Medicines Sans Frontiers (2007) with the following recommendations:

- Development of emergency retention measures at the institutional level to break the cycle of high attrition rate.
- Improving salaries, working conditions and incentives to retain and attract health workers in rural and underserved areas.
- More flexible scope of practice and work rules to allow staff to take on crucial tasks.
- Mobilisation of funds to allow support for recurrent human resource costs.
- Lift national spending limits and allow the health sector to increase salaries of the health care professionals.

There are however, practical issues that the management at Polokwane and Mankweng Tertiary Hospital needs to take them into consideration as part of the recruitment and retention strategies:

- In the provision of residential accommodation, the management of the institution should look at two approaches namely, the short term and long term approaches. The short term approach should include the provision of accommodation allowance in relation to the market value of rental accommodation, while the long term approach should include a clear improvement plan for the development of the infrastructure in the institution.
- The current salary structure of health care professionals is found not attracting health care professionals. Therefore, there is a need to be reviewed and a report with recommendations should be made available for implementation. The payment of overtime and rural allowances should be done to all health care professionals regardless of the area, since the Limpopo Province is almost 80% rural.
- In ensuring the reduction of workload, the management at Polokwane and Mankweng Tertiary Hospital needs to develop a comprehensive recruitment plan of health care professionals and should be developed in line with the Medium Term Expenditure Framework (MTEF) and should be made available for implementation.
- The management of the institution should conduct assessment of physical resources or medical equipment to determine those which need to be repaired and those which need to be replaced. A comprehensive report with costing should be compiled and made available for implementation.
- The management of the institution should conduct skills audit for all health care professional in order to determine skills gaps of individuals. A comprehensive developmental plan needs to be developed with the consultation of all stakeholders. Monitoring and evaluation of the implementation should be done to ensure that the developmental plan is done according to the agreement.

- Lastly, the management of the institution should develop communication strategy that would ensure effective communication in the institution. The strategy should be developed in consultation with all stakeholders. Monitoring and evaluation should be done to ensure proper implementation of the strategy. These strategies may assist to retain health care professionals at Polokwane and Mankweng Tertiary Hospital.

The objectives of the study as indicated in section 1.7 of Chapter 1 namely, to examine turnover rate of the health care professionals and to describe the possible recruitment and retention strategies for health care professionals at Polokwane and Mankweng Tertiary Hospital have been properly addressed. The research questions asked in section 1.8 of Chapter 1 with regard to the identification of factors that contribute to the turnover rate and the strategies for recruitment and retention for health care professionals as indicated in Chapter 5 above were responded accordingly. The set objectives of the study assisted and guided in developing an informed and correct conclusion and recommendations as stipulated in Chapter 5 of the study. The recommendations may serve as guiding principles for the management of Polokwane and Mankweng Tertiary Hospital in developing and improving the existing recruitment and retention strategy for health care professionals.

5.4 CONCLUSION

This chapter outlined the concluding remarks and recommendations of the study. In addition, the study has provided the recruitment and retention strategies that may be applied at Polokwane and Mankweng Tertiary Hospital to minimise the turnover rate of health care professionals. However, successful implementation of these strategies depends entirely on the commitment of the management of the institution.

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APPENDIX 1-LETTER TO THE RESPONDENTS

**P.O. Box 1047
Faunapark
0787**

Dear Respondent

I ML Shipalana, student number: 201108392 hereby conducting a survey on the analysis of factors that are contributing to turnover of health professionals at Polokwane and Mankweng Tertiary Hospital. The survey is conducted in fulfilment of the requirements for the degree of Master of Public Administration in the faculty of Management and Law at the University of Limpopo.

Participants in the survey are encouraged to respond freely as the information provided by the respondents will be treated with confidentiality and identity of respondents shall under no circumstances be published. The information will remain solely for the purpose as outlined above.

In completing the questionnaire, the respondent may take approximately 20 minutes and the completed questionnaire should be returned on or before 15th of August 2012 at Office number 80 Whitoc building, 18 College Street, Polokwane.

Your cooperation is highly appreciated

**For any enquiry, please contact ML Shipalana at the following contacts:
Tel: 015 293 6000
Cell: 071 675 1100
Email: lukship@gmail.com**

APPENDIX 2: QUESTIONNAIRE

SURVEY ON THE ANALYSIS OF FACTORS THAT ARE CONTRIBUTING TO TURNOVER OF HEALTH PROFESSIONALS AT POLOKWANE/MANKWENG TERTIARY HOSPITAL IN LIMPOPO PROVINCE

The purpose of this survey is to analyse factors that are contributing to turnover of health professionals at Polokwane and Mankweng Tertiary Hospital

SECTION A: DEMOGRAPHICS PROFILE

Please provide the following information by indicating an “X” in the appropriate block.

1. What is your gender?

Male	1
Female	2

2. What is your highest qualification

Grade 12 (Metric, std 10)	1
Diploma or certificate	2
Baccalaureate Degree (s)	3
Post- Graduate Degree (s)	4

3. What is your post title?

Doctor	1
Dentist	2
Pharmacist	3
Professional Nurse	4
Allied Health Professional	5

4. What is your age group?

18-35	1
36-45	2
46-55	3
56-and above	4

5. What is your population?

African	1
White	2
Coloured	3
Asian	4

6. What is your marital status

Married	1
Single	2
Divorced	3
Widow	4

7. What is your year of service in the profession?

>1	1
1-5	2
6-10	3
11-20	4
21-30	5
30 and above	6

8. How long have you been working at the current institution?

>1	1
1-5	2
6-10	3
11-20	4
21-30	5
30 and above	6

9. What is your salary notch group?

100,000-299,000	1
300,000-499,000	2
500,000-699,000	3
700,000 and above	4

SECTION B: FACTORS RELATED TO RECRUITMENT AND RETENTION OF HEALTH CARE PROFESSIONALS

How important are the following factors in retaining health professionals?
Please indicate your answer using the following 4-point scale.

1= Total unimportant

2= Unimportant

3= Important

4= Very important

	Factors	Very important	Important	Unimportant	Totally unimportant
10.	Residential accommodation for health professionals	4	3	2	1
11.	Financial consideration	4	3	2	1
12.	Career development	4	3	2	1
13.	Leadership/management style	4	3	2	1
14.	Effective communication	4	3	2	1
15.	Physical resources (equipment)	4	3	2	1
16.	Rural allowance	4	3	2	1
17.	Overtime payments	4	3	2	1
18.	Conducive working conditions	4	3	2	1
19.	Filling of posts to reduce workload	4	3	2	1
20.	Office space	4	3	2	1
21.	Entertainment facilities	4	3	2	1
22.	Effective management of remuneration outside the public service (ROPS)	4	3	2	1

SECTION C: JOB RELATED FACTORS

Please indicate the extent to which you agree with each statement by means of an “X” in the appropriate block.

- 1- Strongly disagree
- 2 –Disagree
- 3- Not sure
- 4- Agree
- 5- Strongly agree

	Job factors	Strongly agree	agree	Not sure	Disagree	Strongly disagree
23.	Adequate residential accommodation for health professionals	5	4	3	2	1
24.	I am paid fairly for the work I am performing	5	4	3	2	1
25.	I am receiving regular training and development opportunities on my job	5	4	3	2	1
26.	Professional development is effective	5	4	3	2	1
27.	I discuss my performance with my supervisor on a regular basis	5	4	3	2	1
28.	I perform my job with minimal supervision	5	4	3	2	1
29.	My supervisor motivates me to do a job	5	4	3	2	1
30.	I get recognition for my performance	5	4	3	2	1
31.	Institution is having inspired leadership	5	4	3	2	1
32.	Team work is encouraged	5	4	3	2	1
33.	There is open communication at the institution	5	4	3	2	1
34.	I cope with the workload	5	4	3	2	1
35.	My job allows me to grow professionally	5	4	3	2	1
36.	I am involved in the decision making processes related to my job	5	4	3	2	1
37.	I am involved in work outside the public service	5	4	3	2	1
38.	Adequate entertainment areas in the institution	5	4	3	2	1

APPENDIX 3: PERMISSION LETTER



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH

Enquiries: Selamolela Donald

Ref:4/2/2

Shipalana ML
Box 1047
Faunapark
0787

Dear Mr Shipalana

Re: Permission to conduct the study titled: Analysis of factors contributing to turnover of health professionals at Polokwane/Makweng tertiary hospital in Limpopo Province.

1. The above matter refers.
2. Permission to conduct the above mentioned study is hereby granted.
3. Kindly be informed that:-
 - Further arrangement should be made with the targeted institutions.
 - In the course of your study there should be no action that disrupts the services.
 - After completion of the study, a copy should be submitted to the Department to serve as a resource.
 - The researcher should be prepared to assist in the interpretation and implementation of the study recommendation where possible.

Your cooperation will be highly appreciated.

General Manager: Strategic Planning, Policy and Monitoring

Date: 22/08/2018

18 College Street, Polokwane, 0700, Private Bag x9302, POLOLKWANE, 0700
Tel: (015) 293 6000, Fax: (015) 293 6211/20 Website: <http://www.limpopo.gov.za>

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