ASSESSING THE FACTORS INFLUENCING HIGH TURNOVER AMONGST DOCTORS AND PROFESSIONAL NURSES IN ETHEKWINI HEALTH DISTRICT

by

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College of Law and Management Studies

School of Management, IT and Governance

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November 2020

DECLARATION

I, **Howard Sihle Kwenzakufani HLONGWA,** declare that:

(i) The research reported in this dissertation, except where otherwise indicated, is my original research.

(ii) This dissertation has not been submitted for any degree or examination at any other university.

(iii) This dissertation does not contain any other person's data, pictures, graphs or other information, unless specifically acknowledged as being sourced from other persons.

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Signature: Signed

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Date: 22 November 2020

DECLARATION

I, **Howard Sihle Kwenzakufani HLONGWA,** declare that:

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Signature

22/09/2020

Date

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ABSTRACT

Employee turnover is a widely used term in business circles. Most of the researchers focus on the causes of employee turnover but little work has been executed regarding the examining of the sources of employee turnover, the effects and the advisement of different strategies which can be employed by administrators in various organisations to ensure that there exists employee continuity to enhance organisational competitiveness. In order for this objective to be realised, South Africa need doctors and nurses and other related healthcare practitioners. The reality is that public sector institutions are losing many healthcare professionals on a regular basis. In other words, there is a high turnover rate of healthcare professionals. Service delivery of the patients' health is compromised as a result. The main aim of the study was to examine the sources, causes and effects of the employee turnover of doctors and professional nurses in the eThekwini health district. A qualitative case-study design was adopted whereby semi-structured interviews were used to collect data from the sampled participants. The collected data was then arranged, categorised and analysed accordingly using thematic analysis. The empirical survey revealed that healthcare professionals like doctors and nurses have a major role in combating the scourge of the said issue. The challenge is that there is an acute shortage of doctors and nurses which has exposed the KZN Department of Health in terms of the recruitment and retention of this category of human resources. The shortage of doctors and nurses has become a major challenge that needs to be addressed as a matter of urgency. The importance of hiring and retaining healthcare professionals in public sector healthcare facilities cannot be over-emphasised. The conclusion drawn by this study is that strategies on how to reduce employee turnover in organisations must be established. When the job market improves, many employees who have had few opportunities will be looking for and exploring new alternatives. Employee turnover can be very expensive, disruptive and damaging to organisational success. Therefore, key recommendations were made. This, among other factors, is the need for new retention strategies to be developed in order to address the contemporary impasse of the scarcity of the healthcare professionals in question.

Keywords: Employee turnover; health professionals; recruitment and retention; KZN Department of Health; eThekwini health district

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LIST OF ABBREVIATIONS/ACRONYMS

ACA –	Adversary conflict attitude
CEO –	Chief Executive Officer
CFS –	Chronic fatigue syndrome
CHC –	Community Health Clinic
COSATU –	Congress of South African Trade Union
DENOSA –	Democratic Nurses Organisation of South Africa
DPSA –	Department of Public Service Administration
EPMDS –	Employee Performance Management and Development System
HR –	Human Resources
HRD –	Human Resource Development
IOT –	Internet of Things
JET –	Job Embeddedness Theory
LC –	Litigation cases
LHOD –	Long hours of duty
LOPO –	Lack of promotion opportunities
LOT –	Lack of training
LSCM –	Long supply chain management
MS –	Meagre salary
NAA –	Negative aggressive attitude
NJS –	No job satisfaction
NME –	No medical equipment
NPGPMS –	No personal growth, poor management and supervision
NPPIB –	Negative publicity and insufficient budget
OSD –	Occupational Specific Dispensation
PCOS –	Poor conditions of Service
PI –	Political interference
PI –	Poor infrastructure

PQOPH –	Poor quality of patient healthcare
PSCBC –	Public Service Co-ordinating Bargaining Chamber
RDCOPA –	Reputational damage and cancellation of patients' appointments
ROWE –	Results only work environment
RWOPS –	Remunerative work outside the public service
SAMA –	South Africa Medical Association
SCM –	Supply Chain Management
SHRM –	Systems Human Resource Management
SS –	Shortage of Staff
UKZN –	University of KwaZulu-Natal

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CHAPTER ONE
INTRODUCTION AND OVERVIEW OF THE STUDY

1.1 INTRODUCTION

The Constitution of the Republic of South Africa of 1996 stipulates that all the people living in South Africa have the right to life. In order for this objective to be realised, South Africa needs doctors, nurses and other related healthcare practitioners. The reality is that public sector institutions are losing many healthcare professionals on a regular basis. In other words, there is a high turnover rate of healthcare professionals. Thus, healthcare service delivery is compromised. When patients visit public sector healthcare facilities, they expect to be seen and treated by doctors and nurses. If this fails to occur, their health deteriorates. In the end, the government of the day is to blame for the lack of provision of professional healthcare services to its communities. For the purposes of this research topic, the focus is on why doctors and nurses are exiting the eThekwini Healthcare District. The research will focus on and interrogate the motives behind leaving the public sector. One would have to look at the intrinsic and extrinsic factors causing doctors and nurses to leave the eThekwini Healthcare District hospitals and their peripheries. Ultimately, the researcher will make some conclusions and recommendations in terms of the possible solutions that may be employed to address the challenge in question. Therefore, the purpose of the study is to investigate and analyse the existing high turnover problem for the Department of Health and the affected communities.

1.2 BACKGROUND OF THE STUDY

The Department of Public Administration (DPSA), through the Public Service Co-ordinating Bargaining Chamber (PSCBC), introduced a new salary dispensation called the Occupational Specific Dispensation (OSD) with the intention to recruit and retain doctors within public sector institutions in 2007. The introduction of this package, effective from the 1st of July 2007, proved to be a failure in the entire public service sector, as doctors and nurses continued to resign and left public sector institutions thus causing excessive shortages in this category of employees. This resulted in an increase of absenteeism, sick leave, burn-outs, litigation cases, poor performance,

resistance and misconduct cases. Finally, service delivery suffered the most. The moratorium placed on the replacement of outgoing or exiting staff exacerbated the problem. This was introduced as one of the cost-cutting measures or mechanisms in the Department of Health considering the inadequate budget of the compensation of employees. The budget expenditure, as a whole for the department, was extremely high.

EThekwini healthcare hospitals were badly affected by this move/action and it became difficult for the healthcare facilities to effectively and efficiently operate. The human resources department is one of the key elements of ensuring the smooth running of any institution. There could be no hospitals or clinics without doctors and nurses. The wide assumption for their leaving was that they emigrate due to better opportunities abroad or to simply relocate to private sector healthcare facilities within the Republic of South Africa. This is what this study will interrogate further to draw a conclusion. One needs to analyse the push and pull factors around the issue of doctors and nurses leaving the eThekwini healthcare district's hospitals. The study will focus on the following healthcare facilities: Prince Mshiyeni Memorial Hospital and King Edward VIII Hospital. The reason behind choosing these healthcare facilities is that they are large hospitals that service rural and urban areas, respectively. Prince Mshiyeni Memorial Hospital is classified as a rural healthcare facility whereas King Edward VIII Hospital is classified as an urban institution.

It would be interesting to interrogate the root causes and underlying factors as to why doctors and professional nurses leave these rural-urban institutions. Currently, when the authority to fill a critical clinical post has been obtained, the post is advertised, only to find that there are sometimes no applicants. Sometimes the post will be re-advertised, and the suitable candidate fills the post. All of a sudden, six to eight months down the line, the doctor or nurse leaves. Thus, the situation needs to be attended to urgently, as it is crippling the smooth provision of healthcare services in the abovementioned hospitals. The said tendency cannot be allowed to continue and an immediate solution to address it is urgently needed. In order to arrive at an informed decision in terms of the possible solution to the existing challenge, one has to research the cause of this problem. Structural interviews will have to be conducted in a sizeable number of the categories affected in order to gather information. Indeed, the authority to conduct such interviews with some doctors and professional nurses from the said healthcare facilities will have to be sought from the Head of the Health Department. The generalisation seems to suggest that doctors and nurses are leaving

because of the poor conditions of service, meagre salaries offered, long hours of working which are not consistent with the remuneration offered or overtime, cumbersome tedious procedures of procuring equipment to support the healthcare system, non-existence of monetary incentives, poor management style, limited promotion opportunities, rapid changes, career change and poor relationships with seniors.

1.3 RESEARCH PROBLEM/ STATEMENT OF THE PROBLEM

Job satisfaction is an essential element for the maintenance of the workforce numbers of any organisation. Lack of job satisfaction for employees not only leads to high turnover rates but could also have detrimental effects on the individual such as 'burnout'. Turnover provides the organisation with new ideas or innovations and is a normal process. However, it does not need to be unnecessary and excessive. A high turnover rate leads to the inability of an organisation to provide quality care and job satisfaction to its employees.

Staff turnover is a major problem in South Africa, but the rate could be reduced if the factors influencing doctors and professional nurses to leave an organisation are investigated. The eThekwini healthcare district is the one of the districts experiencing problems in maintaining sufficient numbers of doctors and nurses to provide healthcare services to the community. Some doctors and nurses who resign might not leave nursing but move from one healthcare facility to another. The purpose of this research was to identify factors that contribute to the high turnover rates among doctors and professional nurses working in the eThekwini health district in order to address these factors and reduce turnover.

1.4 RESEARCH OBJECTIVES

The main aim of the study was to examine the sources, causes and effects of the employee turnover of doctors and professional nurses in the eThekwini health district.

The objectives of the study were to:

- determine the intrinsic factors influencing the turnover rate of doctors and professional nurses in the eThekwini health district;
- assess the extrinsic factors influencing the turnover rates of doctors and professional nurses in the eThekwini health district;

- evaluate doctors and professional nurses' attitudes regarding turnover intentions in the eThekwini health district; and
- analyse the extent of the impact of the turnover of doctors and nurses in healthcare service delivery in the eThekwini health district.

1.5 RESEARCH QUESTIONS

The study attempted to answer the following key questions:

- What are the intrinsic factors influencing the turnover of doctors and professional nurses in the eThekwini health district?
- What are the extrinsic factors influencing the turnover of doctors and professional nurses in eThekwini health district?
- What are doctors and nurses' attitudes regarding turnover intentions in the eThekwini health district?
- To what extent does the turnover of doctors and nurses thus impact on health service delivery in the eThekwini health district?

1.6 LITERATURE REVIEW

Literature was reviewed by the researcher to determine whether the research topic is worth studying. Literature provides insight into the mechanisms which the researcher can implement to limit the scope of the research area (Creswell, 2014:25). Martinelli (2017) defines employee turnover rate as the term used to describe the percentage of workers that leave a company and need to be replaced within a certain period of time. People join and leave companies which is not something new. There are many reasons why someone would leave an organisation. Some reasons are nothing to be concerned about, as they are unavoidable. However, if workers are leaving due to unhappiness at work or one is constantly firing underperforming staff, there is a problem (Martinelli, 2017). High employee turnover is taxing. It costs precious time and money and can result in the loss of staff morale.

Some employee turnover is inevitable. For instance, retirement, relocation and leaving for schooling cannot be avoided. Martinelli (2017) attributes the following as the main causes of employee turnover: a lack of growth and progression, being overworked, a lack of feedback and recognition, little hope for decision-making and poor employee selection. From the afore-

mentioned points, one realises the importance of recognising the work performance of employees. Employees need to be involved in some matters of decision-making in order for them to inform management's decisions.

Strategies to reduce employee turnover, according Martinelli (2017), include the following: investing in employees, rewarding and compensating employees, perfecting the selection process, providing considerate and thorough feedback and ensuring a good work-life balance.

Due to the shortage, nurses often end up working long hours under very stressful conditions which can result in fatigue, injury and job dissatisfaction. Nurses suffering in these environments are more prone to making mistakes and medical errors (Schumacher, 2016). The factors contributing to the nursing shortage are multifaceted. The biggest challenges facing healthcare are demographic changes that are pushing the expansion of the workforce and the time that it takes to educate and train the new healthcare workers to fill those needs (Schumacher, 2016). The most critical factor affecting the nursing shortage in the US is the nursing schools' inability to increase enrolment due to a scarcity of nursing school faculties. Other factors contributing to the nursing shortage include the following: hospital acuity, an aging population and workforce, heavy workload, and a poor work environment. Some common reasons for absenteeism are bullying and harassment. If an employee is being bullied or harassed by someone at work, they may stay at home so they can avoid the unpleasant situation (Schumacher, 2016).

Maslow's theory of human motivation stipulates the following conclusions:

- the integrated wholeness of the organism must be part of the foundation of the motivation theory,
- the hunger drive or any other physiological drive was rejected as a central point or model for a definitive theory of motivation. Any drive that is somatically based was shown to be atypical rather than typical in human motivation,
- such a theory should emphasise and centre itself upon ultimate or basic goals rather than partial or superficial ones or upon ends rather than means to these ends. Such a stress would imply a more central place for unconscious than for conscious motivation,
- there are usually various available cultural paths to achieve the same goal,
- any motivational behaviour, either preparatory or not, must be understood to be a channel

through which many basic needs may be simultaneously satisfied,

- all organismic states are to be understood as motivated and as motivating, and
- human needs arrange themselves in a hierarchy order of pre-potency. In other words, the appearance of one need usually rests on the prior satisfaction of another, more proponent need (Buchner, 2007).

Furthermore, any classification of the motivations must deal with the problem of the levels of specificity or the generalisation of the motives to be classified. The classifications of the motivations must be based upon goals rather than upon instigating drives regarding motivated behaviour. The motivation theory should be human-centred rather than animal-centred. The field theory cannot be a substitute for the motivation theory. Not only must the integration of the organism be taken into account but the possibility of an isolated specific, partial or segmental reaction must be included. The motivation theory is not synonymous with the behavioural theory.

Maslow categorises and classifies the five basic human needs. The basic human needs are as follows (Buchner, 2007):

- Physiological needs: The needs that are usually taken as the starting point for the motivation theory are the so-called physiological needs (e.g. food),
- Safety needs: If the physiological needs are relatively well gratified, then there emerges a new set of needs. An example that could be cited for safety needs is finding a decent and stable job,
- Social or love needs: If both the physiological and safety needs are fairly gratified, then there will emerge the need for love, affection and belongingness. Thus, the whole cycle already described will repeat itself with this new centre. The person will now aspire to fall in love, get married, have friends and so on,
- Self-esteem needs: Most people have the desire for a stable, firmly based high evaluation of themselves, for self-respect or self-esteem and for the esteem of other people. These needs may be classified into two subsidiary sets. These are the desire for strength, achievement, adequacy and confidence in the face of the world and for independence as well as freedom,
- The need for self-actualisation: A human being will naturally, even though all these other needs have been satisfied, aspire to attain higher recognition. In terms of Maslow's theory

> a human being is a wanting animal. He/she does not remain satisfied. What a man can be, he must be. This need is called self-actualisation (Buchner, 2007).

This term, first coined by Kurt Goldstein, is being used in a much more specific and limited fashion. It refers to the desire for self-fulfilment, namely, to the tendency for one to become actualised in what he/she is potentially (Whitehead, 2011. The vivid appearance of these needs rests upon the prior satisfaction of the physiological, safety, social or love and self-esteem needs.

Translating this to what is happening regarding the high turnover rate of employees in the public sector, the motive behind employees' attrition would be natural causes like deaths and retirements. The interview questionnaires given to the doctors and nurses on their last day of duty reveal that the reasons for their leaving include a poor management style, conditions of service that are not favourable, under-staffing versus working long hours (overtime) which result in burn-outs, tedious and cumbersome procedures to procure medical equipment and a lack of sufficient remuneration.

The reality is that those exit questionnaires become a 'white elephant'. This means that they are not analysed by management to determine the root cause as to why employees leave. The reasons stated by the exiting staff remain as allegations, as they are not properly investigated and analysed by the higher authorities within the department. It then follows that the status quo in terms of high turnover remains. If the information is not thoroughly analysed using the proper tools, it means that the solution to the existing problem cannot be located. Doctors and professional nurses will continue to leave the public service if a solution to the problem in question is not implemented. The reasons cited by employees for their leaving might not be correct until someone takes the responsibility of investigating the factors influencing the turnover rate of doctors and nurses. Once the problem, reasons and findings have been identified, it becomes easy for the employer to put in the appropriate corrective measures to curb the scourge. Hence, the research on the assessment of the factors that influence the turnover rate among doctors and professional nurses in the KwaZulu-Natal eThekwini district hospitals. The assumption is that this study will unearth the factors causing the employees to leave the public service, after which, the findings and recommendations will be made.

1.7 THEORETICAL OR CONCEPTUAL FRAMEWORK

This research is on the assessment of the factors that influence the turnover rate among doctors and professional nurses in the KwaZulu-Natal eThekwini district hospitals. The study is informed by the Job Embeddedness Theory (JET), as the main theory, and supported by the Hertzberg's Two-Factor Motivation-Hygiene Theory.

The Job Embeddedness Theory (JET) stipulates or states that employees have many connections and links within their organisation and within their communities (Holtom, Mitchell and Lee, 2006). Consequently, they feel so fully integrated in their professional and social environment that they do not want to lose or sacrifice those links and connections for an unknown job or unfamiliar environment. This theory singles out colleagues, relatives and friends as the key members shaping the work and community links of an employee. The JET claims that employees' organisational and community integration depends on parameters such as their personal values, career aspirations and knowledge and skills.

It also depends on the organisational culture, job requirements and general factors such as climate, religious beliefs and entertainment activities (Holtom, Mitchell & Lee, 2006). The sacrifices that are identified by the job embeddedness theory include giving up familiar colleagues, interesting projects or desirable benefits and giving up an easy commute, good day care or local club membership. According to the JET, employees stay in their current jobs if they are still feeling a sense of embeddedness towards their professional and social environment, especially for talented and skilled employees.

They become receptive to turnover intention appeals (Foss & Robertson, 2005). Retention strategies must, therefore, seek to maintain this sense of embeddedness towards the professional and social environment, especially for talented workers.

Recent research suggests that a better understanding of emotional exhaustion requires the development of new theoretical perspectives (Wright, 1998). To that end, with the conservation of the resources model as the theoretical framework, the current study was undertaken. Composed of 52 social welfare workers, the research examined the relationship between emotional exhaustion and job satisfaction, voluntary turnover and job performance. Positive and negative affectivity

were used as control variables. Whereas emotional exhaustion was unrelated to job satisfaction, it was associated with both performance and subsequent turnover. In addition, the relationship between emotional exhaustion and turnover remained significant above and beyond the effects of positive and negative affectivity (Wright, 1998).

There are problems regarding the fit between standard research practices in the domain of turnover research and evolutionary decisional processes like job searches (Steel, 2002). Reanalysis of the data suggests that the ability to accurately estimate employment opportunity is related to one's temporal positioning within the turnover process (Steel, 2002). Turnover process models have been appearing in the organisational literature since 1950s (Steel & Lounsbury, 2009). A review of this conceptual literature was performed. Consensus analysis revealed a high level of cross-model agreement on the importance of three standard turnover-theory components, namely, employee morale, labour-market mechanisms and intentions to quit/stay (Steel & Lounsbury, 2009). In addition, a review of secondary turnover dimensions indicated some degree of consistency in the way particular dimensions have been utilised in the conceptual literature.

The relationship between how an employee perceives support for participation in human resource development practices, engagement and turnover intent has been underrepresented in the literature (Shuck et al., 2014). Using the social exchange theory as a guiding framework, the research sought to better understand the possible synergy of human resource development practices and employee engagement to turnover intentions. An internet-based self-report survey battery utilising a four-stage preparation method was used as the primary data collection tool (Shuck et al., 2014). Research was conducted in the healthcare industry. Linear, simultaneous and mediated regression analyses were used to examine the variables of interest. The results suggested that participation in HRD practices and cognitive, emotional and behavioural engagement were negatively related to turnover intent. The mediated regression analyses indicated that engagement partially mediated the relation between human resource development practices and turnover intent. The findings support the utility of supporting employee participation in HRD practices to improve employee engagement and reduce turnover intent (Shuck et al., 2014). From the aforementioned theories, a conclusion could be made that in order for employees to stay longer within an organisation, they deserve to be recognised and participate in human resource development practices processes. Employees must be engaged in terms of organisational human resource development.

1.8 SIGNIFICANCE/IMPORTANCE/CONTRIBUTION OF THE STUDY

The study will uncover factors that influence healthcare practitioners like doctors and professional nurses to leave the organisation. There is the likelihood that its findings may assist in developing or improving the recruitment and retention policies or strategies in the department that will ensure that doctors and nurses remain within the public sector for a very long time or until their retirement. The research might develop better skills development policies complemented by sound monetary incentives to help retain skilled employees. The findings and recommendations of this study might be implemented by the relevant department and be a future reference to academics. It could be stored in UKZN libraries for future use by academics and students, thus becoming a stock of knowledge. It will be of value to the community at large, as students aspiring to become doctors and nurses will have access to the research report. The researcher would have contributed immensely towards community development.

1.9 JUSTIFICATION/RATIONALE

There is an acute shortage of doctors and professional nurses in South Africa. South Africa, therefore, cannot afford to lose more of these health practitioners when the population growth is so high. The eThekwini health district is not an exception to this. The prevalence of many different diseases justifies a sufficient number of doctors and nurses to help provide the necessary medical healthcare where possible. Doctors and nurses work for long hours which could result in them making careless mistakes. The Department of Health is then subsequently sued by powerful attorneys for those careless mistakes, thus costing the Department of Health millions of rand in litigation cases.

The importance of finding an immediate solution for doctors and nurses to remain within the public sector cannot be overemphasised. If the exodus of doctors and nurses is not stopped, the quality of healthcare will diminish. South Africa is close to a disaster. Politically, the government of the day will have a huge challenge in that the opposition parties will criticise it for its failure to provide the Constitutional right of the provision of healthcare to all the inhabitants of South Africa. Hence, the importance of conducting a research on factors influencing the high turnover rate of doctors and nurses. If this study is not conducted, the status quo will remain.

1.10 RESEARCH METHODOLOGY

The study will use the mixed-methods approach. In-depth interviews will be used. Qualitative data will be scrutinised and analysed using thematic analysis while quantitative data will be analysed using descriptive and inferential statistics. This study will cover and encompass the following aspects: Research Design, Research Approaches, Study Site, Target Population, Sample, Sampling and Sample Size, Data Collection Instruments, Interviews, Document Collection and Data Analysis. Each one of the said aspects will be discussed in detail as the discussion of the research project continues.

1.10.1 Study Site

The study or research will be conducted at King Edward VIII Hospital and Prince Mshiyeni Memorial Hospital. Permission to conduct the study was approved by the Head of the KZN Health Department.

1.10.2 Target Population

The researcher chose to apply the qualitative method when embarking on the study in question. The target population of doctors and professional nurses in the eThekwini District equals 1600.

1.10.3 Sample, Sampling and Sample Size

When one takes into account the target population given above and the qualitative nature of the study, the researcher will only interview five doctors and ten professional nurses from the hospitals in question. To be more precise, fifteen employees, overall, from the two hospitals will be interviewed for this study. Once the information has been gathered, proper data analysis will be conducted. In addition, the research will, among other things, cover the findings, conclusion and recommendations that could be employed as a solution to this impasse. The research report will be forwarded to the University of KwaZulu-Natal as additional information and knowledge for future use by academics and students.

1.11 DATA ANALYSIS

The data collected using interviews and document collection will be analysed using the research question-oriented thematic analysis (De Vos, 2005). Research question-oriented analysis in its simplest form is a categorising strategy for qualitative data using the research questions

underpinning the study (Creswell, 2013).

1.12 ETHICAL CONSIDERATIONS

Authority to conduct this research will be sought from the Head of the Health Department at the head office in Pietermaritzburg. Over and above this, consent will first be sought from the respondents to voluntarily participate in the study. The participants will further be informed and reminded pre- and post-interview that privacy, confidentiality and anonymity will be maintained and upheld regarding the information obtained. The interviews will be conducted during the participants' free time and will, therefore, not compromise service delivery.

1.13 LIMITATIONS OF THE STUDY

There will be limitations to this study because doctors and professional nurses are always busy given the shortage of staff alluded to above. It might not be easy to locate them for the study. This may impact negatively on the study, as the researcher may not receive the expected number of participants. To obviate this problem, the researcher will work with the personal secretaries of medical managers and chief executive officers to determine the availability of the targeted employees. The supervisor will be advised of the progress of the study on a regular basis.

1.14 STRUCTURE OF THE DISSERTATION

The dissertation is structured as follows:

Chapter 1: This section introduces the research study by giving an overview of employee engagement. The research problem statement, including the objectives, questions and the justification for the study are outlined.

Chapter 2: This section reviews the literature regarding staff turnover and retention. Various theories will be explored, including other constructs that are related to the concept.

Chapter 3: This section outlines the methodology that was used in the research study. The selection of the sample, sample size, research instrument used in the data collection process, site of the study and ethical considerations that were addressed in the study are all presented in this chapter.

Chapter 4: This chapter presents the analysed data that was gathered from the research study. The data collected from the interviews was presented in a table form and interpreted.

Chapter 5: This chapter presents the summary of the findings, the conclusion, and the recommendations of the study.

1.15 CONCLUSION

This initial chapter has served as an introduction and a provision of the background information of the study. There is a problem statement which serves to indicate the issues that were of concern to the researcher when deciding to embark on the study. The research objectives, the related research questions and the research methodology used in this study were also highlighted. This was followed by a discussion of the significance and limitations of the study, and the structure of the dissertation.

CHAPTER TWO
LITERATURE REVIEW

2.1 INTRODUCTION

The high turnover rate of doctors and nurses in the eThekwini health district is quite a challenge. In the literature review, the researcher aims to determine whether the research or study topic is

worth studying and provides insight into mechanisms which the researcher can use to limit the scope of the research area (Creswell, 2014:25). This chapter presents the literature review conducted in this study with the aim of explaining the complex nature of the factors that influence the retention of employees from different perspectives.

The plethora of contemporary literature on voluntary turnover clearly reflects that it is a growing concern for most organisations, as it usually indicates the loss of the most talented and skilled workers (Collins, 2008). In fact, there are claims that high levels of turnover are a curse for institutions. They are destructive and detrimental for both the organisation and the employees. Many scholars also claim that turnover leads to the loss of a valuable financial and social capital (Chapman, 2012). It affects the morale of the remaining workforce as well as the reputation and dignity of the organisation. At the same time, the turnover disrupts teamwork and causes serious delays for important projects in situations where it involves members who are playing a key role within a project team. It also highlights the negative effect of turnover on employee commitment and on staff morale.

2.2 CONCEPT OF EMPLOYEE TURNOVER

In his study, Martinelli (2017) defines employee turnover rate as the term used to describe the percentage of workers that leave a company and need to be replaced within a certain period of time. Some writers refer to the said period as succession planning. That is forecasting the future human resource planning and utilisation for the sustenance of service delivery or production in the public or private sector, respectively (Winchester & Salji, 2016). People join and leave companies. This is not a foreign occurrence. Vacancies will always open and the process of advertising such vacancies would commence (Huslinda, 2009).

The entire process of filling the vacant positions in different companies and the public sector is called recruitment and selection (DPSA, 1995) In the public sector, there exists recruitment and selection policies that must be followed and adhered to when filling vacant positions (either lower grade positions or high/top grade positions). Those relevant policies would guide public sector officials to properly fill the required posts with people who possess the right competencies, skills, educational qualifications, experience and knowledge. These are the same policies that would be referred to and utilised when dealing with grievances regarding why certain people were

overlooked in the selection process by higher authorities like the Commission for Conciliation, Mediation and Arbitration, commonly known as the CCMA, and Labour Courts. There so many reasons as to why someone could leave an organisation. It could be personal reasons, poor management, poor conditions of service or unsatisfactory salaries and meagre wages.

Some reasons are nothing to be concerned about since they are unavoidable. However, if workers are exiting the system because of unhappiness at the workplace and employers are constantly firing underperforming employees, there is a huge problem (Martinelli, 2017). High employee turnover is taxing and expensive. It is expensive because organisations find themselves paying huge sums of money to the exiting staff. This includes some pertinent benefits attached to exits and embarking on an immediate process of recruitment and selection. This is a long, tedious and draining exercise which involves high costs, inter alia, time to advertise, the advertisement of a post or posts, inviting candidates from afar and providing them with comfortable accommodation and flights etc. It costs precious time and money and could result in a loss of staff morale which leaves the workforce demotivated. Some employee turnover is inevitable. For instance, retirement, relocation and leaving for schooling cannot be avoided.

Martinelli (2017) attributes the following as the main causes of employee turnover: lack of growth and progression within an organisation, being overworked, lack of feedback and recognition, little or no hope for decision-making and poor employee selection. From the aforementioned points, one realises the importance of recognising the outstanding performance of employees. Employees need to be involved in decision-making to ensure that they don't resist management's decisions which are introduced and executed. Employees own the decision. Strategies to reduce the turnover of employees, according to Martinelli (2017), are as follows: investing in employees, rewarding and compensating employees, perfecting the selection process, providing considerate and thorough feedback and ensuring a good work-life balance.

Due to the shortage, nurses often end up working long hours under very stressful conditions which can result in fatigue, injury and job dissatisfaction. Nurses suffering in these environments are more prone to making mistakes and medical errors that result in litigations (Schumacher, 2016). The factors contributing to the nursing shortage are multifaceted. The biggest challenges facing healthcare are demographic changes that are pushing the expansion of the workforce and the time

it takes to educate and train new healthcare workers to fill those needs (Schumacher, 2016). The most critical factor affecting the nursing shortage in the United States is nursing schools' inability to increase enrolment due to a scarcity of nursing school faculties. Other factors contributing to the nursing shortage include the following: hospital acuity, an aging population, an aging workforce, heavy workload and a stressful work environment. Some common reasons for absenteeism are bullying and harassment. If an employee is being bullied or harassed by someone at work, they may stay at home so that they can avoid the unpleasant situation (Schumacher, 2016).

2.3 THE CONCEPT OF TURNOVER INTENTION

Contrary to actual turnover, turnover intention is ambiguous. It reflects the attitude that an employee has towards the organisation (Cole & Bruch, 2006). One can concur that attitudes are very complex in nature, therefore, several fundamental or basic components must be taken into account in order to understand them. Intentions are a statement about a specific behaviour of interest. Turnover intentions usually signal an accurate indication of the subsequent behaviour (Jiang & Klein, 2009). Thus, it is important to study the intentions because they can give someone useful indications regarding one's perceptions and judgements.

The terms, turnover intention, turnover intent, intention to leave and intention to quit, are used synonymously in the literature to explain the possibility of an employee leaving his/her job in the near future. Turnover intention is the conscious and deliberate wilfulness to quit the organisation. It is the probability that an employee will change his/her job within a particular period of time. Turnover intention is the extent to which an employee plans to leave the organisation. Turnover intention refers to the following three elements of the withdrawal cognition process: the thought of quitting the job, the intention to search for a different job and the intention to leave (Knippenberg & Sleebos, 2006).

Psychological research claims that there is a positive relationship between turnover intention and actual turnover (Inim & Kok, 2016). In fact, many scholars believe that the intention to leave is one of the main and immediate precursors of employee turnover. Thus, actual turnover positively increases with turnover intention. As a result, gauging employees' turnover intentions might assist in the determination of their propensity to quit the organisation. In fact, employees go through the process of leaving the organisation following three stages before deciding to leave the

organisation. Firstly, employees think of leaving the organisation, then they intend to look for jobs elsewhere, and thereafter, they follow their intentions to leave the organisation.

The intention is to present the main theories supporting the current existing research on turnover intentions. This is a dissimilarity compared to previous literature review papers where the description of these theories is either absent or mixed with the presentation of existing turnover intention models (Berry & Morris, 2008). Berry & Morris review include both turnover intention theories and turnover intention models. However, it is difficult to distinguish between the existing turnover intention theories and the existing turnover intention models. It is, however, worth noting that these difficulties in differentiating models from theories are well-documented in the existing literature. Models are closely related to theory and the difference between a theory and a model is not always clear (Berry & Morris, 2008). Hence, the purpose is to explain the contrast between theories and models in the context of turnover intention.

2.4 THEORIES OF TURNOVER: A REVIEW OF EXISTING TURNOVER INTENTION THEORIES

According to Ngo-Henha (2017), regarding the concept of turnover, employees' turnover is of growing concern to many organisations and companies. Thus, it is not surprising that it has attracted the attention of many scholars. In fact, the first empirical study on labour turnover dates back to 1925. The term employee turnover refers to the situation when an employee ceases to be a member of an organisation. Different scholars have provided similar definitions of employee turnover. Turnover refers to the permanent movement of an employee beyond the boundary of the organisation (Ngo-Henha, 2017). Employee turnover can be classified into three different categories, namely, unavoidable, desirable and undesirable turnover.

Unavoidable turnover may take place as a result of retirement, death, sickness or family matters. Desirable turnover applies to incompetent employees, as opposed to undesirable turnover which occurs when talented, highly-skilled and competent employees exit or leave the organisation against the will of their employers. They are still wanted by the employers, but they decide to leave for better opportunities elsewhere. These employees are a valuable asset within the organisation, and they are the ones who help the organisation to grow faster and bigger. Scholars have also classified turnover as voluntary or involuntary. Involuntary turnover is the permanent release of

the worker from his/her employment due to various reasons or motives. Involuntary turnover is an 'instance of discharge that reflects an employer's decision to terminate the employment relationship'.

In contrast, voluntary turnover is an employee's decision to leave the organisation at his/her own peril. Workers decide to leave organisations for many various reasons, including poor compensation, increased job stress, a poor performance appraisal, a lack of job satisfaction, a lack of career advancement opportunities, a lack of organisational commitment, a lack of autonomy, unfair labour practices and so on (Berry & Morris, 2008). In as much as there is a plethora of research on actual turnover, it is still a huge challenge for an organisation to determine its root causes in order to get rid of or reduce its high propensity. Hence, a number of scholars concur that studying turnover intentions will yield more proper results to understand the root causes of turnover. However, the attitude and behaviour of employees prior to their decision to leave their jobs are entirely dependent on various control variables or motives. This, therefore, means that the concept of voluntary turnover should be explained as a blend of social, economic and psychological processes (Berry & Morris, 2008). This implies that in order to understand one's intention to leave his/her job, the underlying social, economic and psychological factors should be taken into account or factored in.

Workers would normally have decided to leave their jobs after having thoroughly thought about the decision to do. They assess the situation before they think of leaving their organisations. They assess their different options, they look for opportunities and they ponder their feelings. They make comparisons in order to arrive at the final decision to leave their organisations. Therefore, the decision to leave a job is not taken lightly but very seriously. It is the result of a thorough and elaborate process that is carefully studied. Employees initiate the process of terminating their employment only when they wish to quit and when they think that their move will be convenient and easy. Finally, employees' eagerness to terminate their employment is generally synonymous with their turnover intention.

Eight theories are presented in the discussion: the Expectancy Theory, the Human Capital Theory, the Equity Theory, the Resource-Based View, Hertzberg's Two-Factor Theory, the Job Embeddedness Theory, the Social Exchange Theory and the Theory of Organisational Equilibrium

(TOE) (Armstrong & Shimizu, 2007). Even though many theories are discussed in this section, the study is informed by the Job Embeddedness Theory (JET).

- **The Theory of Organisational Equilibrium (TOE)**

It emphasises the need to balance employees' contributions and inducements with those of the organisation (Parsons & Fidler, 2005). It is commonly considered as the first formal theory on turnover intention. This theory owes its brand and name to the fact that it hypothesises that turnover is a decision taken after weighing one's perception of one's contribution to the organisation and vice versa. This theory assumes that the perceived desirability of the move and the perceived ease of the move are the two main factors that determine an employee's equilibrium. These two main factors also determine job satisfaction which directly affects turnover intention. According to the theory of equilibrium, job satisfaction mainly depends on one's compatibility with one's different roles and responsibilities at the workplace, and on the conformity of one's job with one's self-image (Braun & Guston, 2003).

It is worth mentioning that this model contains the connection between turnover, the organisation's size, the possibility of a transfer and the perceived desirability of a move (Foss and Robertson, 2005). In other words, according to the theory of equilibrium, turnover affects the size of the organisation, the size of the organisation affects the possibility of a transfer, and the possibility of a transfer affects the perceived desirability of a move. Thus, the perceived desirability of a move affects turnover, and the loop starts again with the turnover affecting the size of the organisation. Given that the perceived desirability and the perceived ease of movement are deemed by the theory of organisational equilibrium to have an influence on employee turnover, there is a need for management initiatives and interventions that can curb and counter turnover intentions and promote the retention of employees by maintaining the equilibrium between employee contributions and organisation inducements (Foss & Robertson, 2005).

- **The Social Exchange Theory**

The core principle of the social exchange theory is that the relationship between two social entities depends on the extent to which each of these entities respects the social rules and norms of exchange implicitly agreed upon between the two parties (Emerson, 1976). Some examples of the attributes defining the quality of such relationships include trust, loyalty and commitment. These

attributes depend on factors such as love, status, information, money, goods and services which people generally invest in relationships (Cropanzano & Mitchell, 2005). The social exchange theory claims that the social rules and norms of exchange enhance the rule of reciprocity as well as other explicitly negotiated rules (Cropanzano & Mitchell, 2005). The rule of reciprocity advocates that one should be treated according to how he/she is treating others. Therefore, negotiated rules are clearly detailed and documented in terms of an agreed set of rules and obligations between the participating parties.

Other examples of rules and norms of exchange include altruism, group gain, status consistency and competition. The social exchange theory claims that employees are connected by a network made of ties whose strength influences and dominates their intention to keep or leave their jobs. This, therefore, calls for more research on the inferences of the social networks theory and job embeddedness for voluntary turnover. Thus, in the perspective of the social exchange theory, turnover intention is a consequence of the non-respect of implicitly or explicitly agreed rules by management or colleagues (Gautam, Van Dick and Wagner, 2004). This means that an employee might voluntarily decide to leave the organisation if there is a breach of prior agreements. Consequently, management efforts to reinforce implicitly or explicitly agreed upon rules can be considered as a retention strategy.

- **The Job Embeddedness Theory**

The Job Embeddedness Theory (JET) stipulates or states that employees have many connections and links within their organisation and within their communities (Holtom, Mitchell & Lee, 2006). Consequently, they feel so fully integrated in their professional and social environment that they do not want to lose or sacrifice those links and connections for a new unknown job or unfamiliar environment. This theory singles out colleagues, relatives and friends as the key members shaping the work and community links of an employee. The JET claims that employees' organisational and community integration depends on parameters such as their personal values, career aspirations as well as knowledge and skills.

It also depends on the organisational culture, job requirements and general factors such as climate, religious beliefs and entertainment activities (Holtom, Mitchell & Lee, 2006). The sacrifices that are identified by the job embeddedness theory include giving up familiar colleagues, interesting

projects or desirable benefits and an easy commute, good day care or local club membership. According to the JET, employees stay in their current jobs if they are still feeling a sense of embeddedness towards their professional and social environment, especially for talented and skilled employees.

They become receptive to turnover intention appeals (Foss & Robertson, 2005). Retention strategies should, therefore, seek to maintain this feeling of embeddedness towards the professional and social environment, especially for talented workers.

- **Hertzberg's Two-Factor Motivation-Hygiene Theory**

This theory reveals that there are two sets of factors in organisations: those that contribute to job satisfaction, also known as 'motivation factors or motivators', and those that contribute to job dissatisfaction, the 'hygiene factors' (Maidani, 1991). Motivation factors include experience achievement, recognition, interesting work, increased responsibility, advancement and learning. The hygiene factors include unfair company policies, incompetent or unfair supervisors, unpleasant working conditions, unfair salaries, threats and job insecurity (DeShields Jr & Kara, 2005). The two-factor theory claims that motivation and hygiene factors are not simply opposites of each other. This suggests that an employee who is dissatisfied because of unpleasant working conditions will not necessarily become satisfied if his/her working conditions suddenly become pleasant. According to this theory, an employee starts to respond to his/her turnover intention appeals when the factors that are contributing to one's overall satisfaction start to become negatively affected. Therefore, retention strategies should seek to optimise motivation factors in order to inhibit employees' turnover intentions.

- **The Resource-Based View**

This theory postulates that 'resources contribute to the performance advantages of organisations, and are valuable, rare, costly to emulate and non-substitutable' (Hart, 1995). It aims at explaining what makes an organisation gain a competitive advantage over others. Resources are all the assets, capabilities, organisational processes, firm attributes, information, knowledge, etc. controlled by a firm (Wernerfelt, 1984). A firm is perceived as having a competitive advantage when it produces more economically and/or better satisfies customer needs. The firm thus enjoys superior performance relative to its competitors. In this theory, employees stay in their current jobs as long

as they feel that they are still valued and respected and regarded as special; a scarce resource that sustains the competitive advantage of their organisation. Otherwise, employees start becoming receptive to turnover intention appeals. Retention strategies should, therefore, seek to address and maintain employees' feelings of usefulness in order to reduce or stop turnover intentions.

- **The Equity Theory**

This theory's focus is on the exchange relationship where employees give something (their inputs) and expect something in return (the expected outcomes) (Adams, 1963). This theory posits that the assessment of the value outcomes against the value of the inputs reveals a sense of equity or inequity for a given person or reference group. These reference groups include fellow colleagues and relatives or the individual themselves in a different but comparable role (Huseman, Hatfield & Miles, 2013). While inputs refer to the experience, skills and efforts of an individual employee, his/her outcomes include, for example, pay, compensation, benefits, responsibilities and awards. This theory also assumes that people tend to act for the restoration of equity whenever they feel a sense of inequity (Huseman, Hatfield & Miles, 2013). Thus, the alteration of inputs and outputs are examples of equity restoration actions. The equity theory is applicable to labour turnover and retention research where turnover intention can be viewed as a consequence of perceived inequity. Consequently, management efforts to maintain an equitable work environment can be taken into account as a retention strategy to prevent and avoid turnover intentions.

- **The Human Capital Theory**

This theory explains that 'education, training and development, and other knowledge have a positive impact on productivity and wages' (Olaniyan & Okemakinde, 2008). It assumes that education is critical and important in increasing the production capacity of employees (Becker, 1993). Therefore, it is important for the organisations to invest in the development of their employees in order to enhance and improve their productivity levels. They should provide a skills development budget to train and develop their employees in terms of how to better perform in their jobs. Other forms of returns on investment outputs that are manually beneficial to the organisation and to the employee include increased productivity and profits, and increased wages and income. However, the Human Capital Theory also admits that education and training may encompass and enhance employees' employability in the job market and induce turnover for better paying jobs (Becker, 1993). In the perspective of the Human Capital Theory, managements' efforts to invest

in the education, training and development of their employees are an important and vital turnover intention factor (Becker & Woessmann, 2009).

Good organisations will, as a strategic planning exercise, budget a reasonable budget towards the skills development of their employees (Van Dijk, 2005). Right at the beginning of the particular financial year, the budget for skills development would be developed. Each and every department would prepare and submit their skills development plan for the entire workforce. Such a plan is submitted to a higher authority for consideration and approval. Once the skills development budget has been approved, it is then implemented by the Human Resource Training and Development Department. That component would have a database of all the employees who have been trained in various areas. HR will then be responsible for the monitoring and controlling of the use of the skills development budget and giving a comprehensive report to management (Majam, 2005).

- **The Expectancy-Confirmation Theory**

According to the review of this theory, the concept behind the Expectation-Confirmation Theory is that, prior to any event, one has an expectation (Lin & Tsai, 2005). If that expectation is met in a positive manner, then one is satisfied and happy whereas if it is met in a negative manner, then one is dissatisfied and unhappy. This theory argues that both the expectations prior to an event and the subsequent evaluation after the event combine to determine one's satisfaction with the event. The Expectancy Theory claims that people join work organisations with expectations and values and if these expectations are met, they will remain with the organisations. Negative behaviours such absenteeism and turnover intention will take place if those expectations are not met.

2.5 EFFECTS OF PERFORMANCE APPRAISAL POLITICS ON JOB SATISFACTION AND TURNOVER INTENTION

According to Poon (2019), there is tangible evidence that performance ratings are often manipulated for political purposes. This implies that there is political interference that might also contribute to people deciding to leave organisations. The current study interrogated and examined the effects of employees' perceptions of political motives in performance appraisals on their job satisfaction and intention to leave or quit using the survey data from an occupationally heterogeneous sample of white-collar workers from different organisations (Arshad, Masood & Amin, 2008).

Regression analysis results showed that when employees perceived performance ratings to be manipulated because of personal bias and the intent to punish subordinates, they expressed reduced job satisfaction which, in turn, led to greater intentions to leave their jobs (Arshad, Masood & Amin, 2008). However, the manipulation of ratings for motivational purposes had no effect on job satisfaction and turnover intention. Some workers are not politically affiliated to political parties. The assumption is that some managers would then play a 'dirty game' regarding the assessment of the work performance of such employees. Such workers' work performance is marked below average which frustrates workers with talent and skills. Thus, they subsequently decide to leave the organisation.

The workers do not feel special and recognised as well as respected by such an organisation. They ultimately develop the desire to leave the company or organisation which then frustrates and affects productivity and the organisation as a whole. It then results in a high turnover rate, which in turn, becomes a huge challenge for management. It has already been mentioned above that the process of hiring and maintaining turnover intentions is too expensive. That is why it should be avoided at all cost.

Administration, in actual fact, should be separated from politics (Hutchcroft, 2001). Politics must be dealt with by politicians and administration should be handled by the administration staff. When that is not seen to be done by the workers within the organisation, the workers may decide to quit the organisation. The turnover intention becomes rife which is the reason why the study on the high turnover rate continues to interrogate the root causes thereof. Scholars agree that turnover intention must be researched further, and that management must begin to take it seriously (Goodnow, 2017).

2.6 CAUSES OF THE HIGH TURNOVER RATE OF EMPLOYEES

The following are the causes of the high turnover rate of employees:

Lack of growth and progression: The opportunity for growth and development is very important for retaining efficient employees within an organisation or the public sector (Reynolds, 2019). If an employee feels trapped in a dead-end position, they are likely to look towards different

companies or organisations for the chance to improve their status and income. Most public sector nurses remain in the same lower medical and nursing post for a long time. They do not progress in terms of rank promotion or the compensation of employees. They become demotivated and resistant to management decisions. They suffer from burnouts which result in high absenteeism. Production or service delivery then suffers. Sometimes succession planning is non-existent, therefore, employees decide to exit the system to look for 'greener pastures' elsewhere (Reynolds, 2019).

It is human nature that some employees, if there is no growth and development, would feel less important within organisations (Kroth, 2007). The employees feel that they are not recognised as a workforce or regarding their work performance. Thus, they become dissatisfied and want to leave the organisation. Indeed, the government has a legal obligation to revise and adjust the cost of living at the beginning of every financial year using the basis of the consumer price index (DPSA, 2019). Usually, those salary adjustments are not sufficient and do not retain which fails to attract people from the outside to join the organisation. Despite all the salary adjustments, nurses and doctors still live in the public sector which proves to management that money or salaries are not the only factor causing employees to leave an organisation. Hence, the adage to say that money is not everything (Kroth, 2007).

Being overworked: It might seem natural that, in periods of economic pressure, staff is asked to take on extra responsibilities (Eckardt, Lepak & Boselie, 2017). People might need to be let go and the remaining employees would have to 'pick up the slack' by working longer hours, over weekends or overtime. However, asking workers to choose between their work life and personal life will never sit well with the workforce. Instead, it will contribute to a higher turnover, as employees grow frustrated. Generally, when employees leave the organisation for whatever reason, the workload increases. The increased workload should then be performed and executed by the few remaining employees. This becomes a burden and the employees become overloaded and overworked. They are sometimes forced by circumstances to compromise their leave days and lunch times. The reason for this is to compensate for the employees who have left the service for various reasons. An employee would find himself/herself compelled to perform the work that was supposed to be executed by two or three people. This is being done in the interest of service delivery by management. Employees would become frustrated and dehumanised in rendering the services to the community (Eckardt, Lepak & Boselie, 2017).

In fact, when employees are overworked, there is a high risk and possibility of them making simple medical errors (Pepper & Lubschaigne, 2017). That is why the Department of Health is always being challenged by astute lawyers in court regarding medical negligence. Recently, the national Minister of Health complained about the billions of rand that the Department of Health had to pay out as a result of negligent treatment by doctors and nurses. When people are overworked, they become sick and the absenteeism rate increases. It becomes difficult for management to effectively discipline misbehaving employees. When the department is filling the vacant positions as a result of employees who have left the service, it becomes another responsibility for the existing workers to train the new employees. It is indeed time consuming to train the new employees and, at the same time, continue to perform daily duties as normal. It becomes a burden on the existing employees and makes them more overworked.

Lack of feedback and recognition: If feedback is not given, employees grow discouraged. Feedback is the first step to ensuring that employees succeed, thus avoiding this process can be detrimental to said success (Patnaik and Padhi, 2012). If an employee is struggling, honest feedback can help them manage their workload and refocus. Ignoring the opportunity for feedback, or providing unhelpful feedback, will leave employees floundering which disheartens them, as they struggle. This can cause them to eventually give up. Generally, the tool of assessing the work performance of public servants is called the employee performance management development system (EPMDS). If there is no work performance management system in an organisation, employees will become demotivated, frustrated and unhappy (Patnaik & Padhi, 2012). At the beginning of the financial year, the employer and employee enter into a performance agreement which is signed by both parties. It is measured on a regular basis, usually on a quarterly basis.

The primary aim of the EPMDS is to measure and assess the work performance of employees (DPSA, 2019). It is when the employer gives feedback to every employee in terms of how they were performing their normal day-to-day duties. The secondary intention of the EPMDS is to reward the performance of employees by giving them a pay progression which is 1.5 per cent of a salary notch effective from the 1st of July of each year. Some public servants complain about the said system regarding its objectivity in terms of how it is implemented. Employees who rated three point out that there is no need for motivation, as that is regarded as an average work performance.

When an employee gets three points, he/she automatically qualifies for a pay progression. To the employees already on maximum salary notches, they do not benefit in terms of monetary compensation. They become less productive and frustrated in the following years. They then leave the public service because there is no grade progression. The exit questionnaires will reveal this fact from the Department of Human Resources. When employees are scored above and/or below three, supervisors are obligated to write motivations to justify such scores. Most supervisors do not want to do such a thing and prefer to give their employees a three, so that they do not have to write motivations. Hence, the system is subjective (Patnaik & Padhi, 2012).

Everybody wants and deserves to be recognised which is human nature (Foss & Robertson, 2005). When employees feel that they are not recognised within an organisation, they leave the service. It could either be when management does not involve employees in matters of decision-making or when their trade unions or organised labour are involved. Management has a tendency of making decisions for employees even though South Africa is a democratic country. This means that an employer or management team must always involve employees in decision-making matters, and by doing so, employees feel respected and recognised (Patnaik & Padhi, 2012). Ultimately, employees can execute management's decisions without any hassles because they would have been part of the process earlier on. Thus, the importance of recognising employees cannot be over-emphasised. The performance appraisal system should always be resuscitated within an organisation, so that people are recognised on a regular basis. When employees are not recognised, they decide to leave the organisation because they feel or assume that their views or input are not necessary or required.

Poor employee selection: Finding the perfect employee is difficult but forcing a match with an employee that is clearly not right for the company's culture or values will never end well (Hopkins, 1995). Even though one is desperate to fill a position, picking a poorly matched, incompatible employee is bad for both the company or organisation and the employee. No one does their best work when they are unhappy, and an incompatible employee is unlikely to be content with their new position. If the recruitment and selection process is not followed and adhered to, one might end up with the wrong employee or candidate (DPSA, 1995). This could be because of employing 'cronies' or applying nepotism to the selection process.

2.7 REASONS FOR A HIGH TURNOVER RATE

According to Marzullo (2018), there are ten reasons for high turnover rates. Some industries and businesses seem to naturally have a higher turnover rate than others. In fact, there is a close watch on the jobs with the highest turnover rates. That does not always have to be the case. One can ensure that a business is the exception by following a few key strategies that can drastically improve the odds of keeping quality employees (Marzullo, 2018). From employee retention strategies to better recruitment approaches, in all facets of employee recruitment and retention there are avenues to reduce turnover. Before building such a reduction strategy, it is important to determine why the turnover rate is so high.

Is it the norm or standard in an organisation? What is the average turnover rate of the organisation's competitors? Start by doing a little research to establish where the business stands (Marzullo, 2018). Ideally, the organisation's current turnover rate must be compared with other competitors. Once the numbers have been established, the top ten reasons for a high turnover rate must be explored (Marzullo, 2018). How many of them is the business guilty of? What can the business do to resolve these challenges or problems?

The following are the reasons for a high turnover rate:

Many entry grade or level employees who do not plan to stay in the position for very long are hired. If one owns or manages a call centre, fast food restaurant or other business that is popular for having many entry-level employees, not even the best employee retention techniques may work. A few of the employees may stay with a company long-term, and perhaps some of them will move into management positions (Karpova, 2018). Others may enjoy the work as a long-term source of extra income or as a low-stress job during retirement. However, by the nature of the business and by hiring many entry-level employees, a fantastic opportunity is being provided to these employees but it comes with a cost. Instead of focusing solely on employee retention ideas, a better move might be investing more in employee training programmes, so that newcomers adapt faster to the work environment with fewer hurdles.

Many minimum wage employees are hired. This may go hand-in-hand with entry-level employees, but not necessarily. It is well known that some college graduates are frustrated with jobs paying minimum wages while requiring degrees and diplomas and exceptional work experience. Even when it is an employer market, taking advantage of experienced, highly educated employees who are desperate for work comes at a cost to employers (Karpova, 2018). These employees are likely to be immediately looking for better jobs, as they do not think that they are recognised and appreciated.

Competitors are offering more. 'More' does not necessarily mean overtly financial through salaries, although it can (Karpova, 2018). 'More' can also mean more flexible schedules, more perks, more benefits and more of just about everything else. When researching competitors, keep an eye out for what they are offering beyond hourly rates and salaries. These extras and benefits, such as gym memberships or telecommuting, are going to lure employees away and decrease an organisation's employee retention (Bothma & Roodt, 2013).

Poor Management. Full-time employees spend the majority of their waking hours at work. They want and deserve to feel safe, secure and respected in their position. This is impossible when poor management in place. 'Poor management' can mean a lot of things, from illegal activities to maddening issues like micromanagement. If an employee feels like they are not appreciated or if they dread coming to work, they are going to start looking for another position. Managing managers becomes increasingly challenging the larger a company is which is why it is important to bring in third party consultants to ensure that the company's managerial techniques are suitable and effective (Bothma & Roodt, 2013).

Social media and internet in general. Twenty years ago, a person had to put in some serious effort to find a new job by searching through newspapers and going door-to-door. Since they also worked 40 hours and often had other responsibilities, like family, they were not afforded much time to look for a new job. The internet and social media changed all of that. It is entirely possible for an employee to spend all day at work looking for another job and their boss would be none the wiser. Access to information, including available jobs, has naturally helped increase the turnover rate.

Younger generations have different priorities. A couple of generations ago, the dream was to get a suitable job and stay with it until retirement. The idea of work and career has changed over the years, as have priorities. It is increasingly common for a person to only stay in a position for a few years before moving on. Maybe it is part of a trend towards instant gratification. After all, the brain prioritises instant gratification. Maybe the meaning of a career has changed for good. Regardless, younger employees tend to 'job-hop' more often than ever which is naturally detrimental to employee retention techniques.

Virtual work opportunities have increased. Unless one operates a brick-and-mortar establishment, it is unlikely that every single employee needs to work in an office. However, many business owners and companies cling to the idea that in order to work, an employee needs to be physically present. Virtual work is not for everyone or every position, but it is an appealing perk to many. In fact, along with childcare, it is one of the most desirable of non-monetary benefits. Check employee positions and see how many of them may be virtually done. It is a fantastic way to lower overhead and expenses.

Entrepreneurship, side gigs and small business ownership has increased. When the Great Recession of 2008 hit, it forced a number of would-be business owners and entrepreneurs out into the unknown. They had no other choice due to layoffs and zero job opportunities. Now, it is a lot more common for a person to own their own business or put together an income with a series of side hustles. With entrepreneurship on the rise, it is becoming more desirable than long term employment for some workers. There are numerous employees who are likely also working on their own small businesses or working side gigs for extra cash. This is remunerative work outside the normal work. Managers do not know when the draw of working for oneself may have employees turning in or submitting their notice (Kauffman, 2018).

Employees want their work to make a difference. Increasingly, younger workers want more than just a job. They want a job and a career that they are proud of and that makes a difference. Younger workers see their workmates as a second family. They are frustrated with a corporate culture filled with non-stop meetings that leave them feeling like they are not making a difference in the world. Some may call it idealism, but if an employer does not offer a more holistic job opportunity that clearly shows workers how their daily activities are making a difference, they may look elsewhere.

Fortunately, this is a relatively easy fix that is completely within the employer's control. Ensuring that employees feel heard and are part of decision-making processes, and that the work culture encourages positive relationships are critical. Offer ways for employees to connect, both within the business and the community, to satisfy their need to give back and feel part of the world (Goodnow, 1998).

Recent years have taught the art of hustling. Starting in 2009, people began to understand that if they lost their job, it probably was not the end of the world. Those who were laid off or who couldn't find a job after high school or college learnt to make it work however they could. Maybe they moved back in with family or they figured out that driving for a 'rideshare' company actually earned them more than many full-time jobs. Now South Africa is full of skilled hustlers who understand that having multiple sources of income is a lot safer than depending on a single job. It is a hard lesson learned by recessions which the world is now experiencing. Those who struggled through the Great Recession understand that there are plenty of options of income if one is not comfortable within a single job. Part of keeping an employee used to be largely dependent on the fact that the employee needed the job. However, with side gigs and multiple streams of income, total dependency is not always a given.

2.8 THE IMPACT OF A HIGH TURNOVER RATE ON EMPLOYEES

Are employees engaged? If not, are managers doing whatever they can to improve employee engagement? How is one's turnover rate so far? These are questions one will want to start asking in order to prepare for a great year ahead. All of the criteria mentioned above is important but looking at the overall turnover rate is exceptionally important. After all, if many employees decide to leave, not only do those positions need to be filled, but the root cause for so many employees leaving needs to be identified. Satisfied employees may start to see the team gradually shrink and they may be motivated to leave as well (Goodnow, 1998). These are some unsatisfactory situations, so with the employers in mind, let's take a look at how a high turnover rate impacts the employee base (McManus & Masco, 2015).

For all intents and purposes, let's first define what the turnover rate is. Most employers should already be familiar with this term, but some may be absolutely clueless. A company's turnover rate is the percentage of employees that voluntarily leaves the company over a year. With a low

turnover rate, less employees will decide to quit. Conversely, a high turnover rate means that many employees, over the duration of a year, have quit. Having a high turnover rate cannot be great for a company or organisation. Not only does it mean that the employees are unhappy, but it is costing the company a lot of money. According to Nicholson (1994), the following are a couple of negative impacts that a high turnover rate has on a company/organisation and its employees:

- **It is expensive**

Hiring is expensive and it takes up a lot of time and resources, and if it is not done right the first time, it is even more expensive (Tolan, 2019). If an employee that makes more than that quits, it will likely cost more than what he/she earned. The reason being that in order to fill an empty position, one will have to use a recruiter or employment agency or advertise the post. Either way, money will be spent. At the same time, the position which needs to be filled is now empty, so who is doing that work? Chances are that there is either no one doing the work or someone else is simply doing just a bit of it. Either way, productivity levels are dropping which costs money (Tolan, 2019).

- **Influenced by the power of suggestion**

Look at how one person yawns which sets off other people yawning. That is because people are influenced by the power of suggestion. Interestingly enough, it can work the same way with people leaving a company or organisation – perhaps not as instantaneous. If employees see that a handful of people have quit, they will start to ask themselves, 'Why did they quit? Did they find somewhere better to work? What is wrong that causes people to keep leaving?' These people will probably assume that the company or organisation is not a great one to work for and may start looking for another job too which only feeds the vicious cycle. They may also want to leave because they may have had to take over the work of those who left. As mentioned earlier, if someone leaves then there is an empty or vacant position. What happens to all that work? When, on average, it takes 45 days to hire a new employee, chances are that some of that work will have to be completed. Picking up the tasks of another position until it is adequately filled can be stressful and overwhelming. After all, the remaining employees did not quit, so why do they feel as though they are being punished? Chances are that this will lead to a lower employee morale which leads into the next impact (Goodnow, 1998).

- **Lower employee morale**

If there is a high turnover rate, then the employee morale was probably not too great to begin with. However, once employees start leaving, the employee morale is almost guaranteed to drop even further. Some of the remaining workers may feel left behind after their colleagues have left. Their peers moved on to 'greener pastures' and they remain. Once more and more people start leaving, they will wonder why they remain. When the employee morale is low (which in turn affects the company culture), it is difficult to attract top talent to a company or organisation (Goodnow, 1998). If there are a few employees leaving, do not ignore the implications. Chances are that there are some major issues within the company or its culture that must be solved before new employees are hired.

Turnover among clinical staff can have detrimental effects on service provision and organisational efficiency. But how does it affect those who remain within the organisation? Researchers at the Institute of Behavioural Research at Texas Christian University sought to answer this question by examining the impact of staff turnover on the perceptions of workplace demands and support among 353 clinical staff members from 63 outpatient substance abuse treatment programmes (Wang, 1999). Study results documented that counsellors in high turnover programmes reported higher demands (job stress and inadequate staffing) and lower support (communication, cohesion and peer collaboration).

Results from a series of multilevel models documented that counsellors working in programmes that had previously experienced high staff turnover perceived higher demands and lower support within their organisation, even after controlling other potentially burdensome factors such a budget, census and individual measures of workload. Two individual-level variables, caseload and tenure, were important determinants of work environment demands but were not related to supportive work relationships. Findings suggest that staff turnover increases workplace demands, decreases the perceptions of support and underscores the need to reduce stress and minimise subsequent turnover among clinical staff.

2.9 STRATEGIES TO REDUCE A HIGH TURNOVER RATE

If the employee turnover is high, it is best to reduce it. Free and inexpensive methods can be used to convince employees to remain. Employee turnover is something that every business with workers experiences. Employees will always come and go. When that happens, it is costly for a business. It takes time to find a replacement (McManus & Masco, 2015).

Hire the right people for the right jobs and place them in the right places. This is regarding the placement of staff. Keeping employees starts from the process of recruitment by ensuring that the right employees with the right competencies, knowledge, experience, skills and education are employed. Nepotism would not work if the proper procedures of following the recruitment and selection policy are adhered to. The avoidance of political appointments in critical positions should be encouraged and executed. There should not be any deviation from the prescribed recruitment and selection policy rules. Indeed, there is a clause that deals with the deviation in the recruitment and selection policy which stipulates how to go about deviations in terms of appointing people to fill vacant positions. In fact, the tendency of appointing 'cronies', relatives and friends has its own complications and dynamics when it comes time to discipline bad work ethic and reward the proper performance of work. It becomes, for example, difficult to discipline your family member if he/she has misbehaved. It backfires in a negative way to the employer. The best thing to do when filling a position is to follow the right employment prescripts and procedures.

Offer competitive pay and benefits. Naturally, people want to be recognised and compensated for a job well-done. As the employer, one needs to always improve the salaries of employees. The benefits attached to a particular post should be awarded to a deserving employee as a retention strategy. Some employees would leave the organisation or company because of meagre salaries. Some companies and organisations do not pay the benefits due to employees on the basis of financial constraints faced by the employees. Employees always deserve better. If competitive salaries and benefits are not paid to workers, they will leave the company and seek better paying companies (Collins, 2008).

That is why the cost of living benefits for employees should be revised on a regular basis. Pay bonuses when due to employees. Do not insist on production without awarding commensurate benefits to employees. Otherwise, the employees will leave the company. In the case of South

Africa, more nurses and doctors go and look for work overseas where salaries are relatively higher. The training and development programmes need to be revised and improved to retain employees. Once employees have been trained and developed, they have quality skills and must be compensated accordingly. Failing to do so is why employees emigrate. This is recognising the work employees perform for a company (DPSA, 2012).

Give praise. Employees need encouragement and recognition for the effort that they make within an organisation (Rosen & Michelle, 2016). There should be a performance appraisal system in place. This must be the tool used to commend the performance of employees. For example, in the public sector, there is an employee performance management development system commonly known as EPMDS which is used to measure the performance of employees (DPSA, 2012). Once a person has been assessed, he/she qualifies for a 1.5 per cent pay progression. The reality is that it is not the right tool to keep workers from leaving the public service. It is very subjective. One could reward an employee with a 'pat on the shoulder' or a 'well-done' message to recognise his/her hard work and effort. It is an indication that the employees' input or work is being recognised and respected. This tendency might convince the employees to stay longer within a particular organisation. Employees will feel comfortable with their positions even if their salaries are not that attractive. They develop a sense of belonging.

Show the career path. A good employer will guide his/her employees in choosing the right career. The employer must be able to identify the workers who would achieve in certain careers by crafting or doing a skills audit of the workforce. A good employer would grant bursaries to potential employees for them to study further in work-related qualifications in order to retain workers. When they come back after the completion of their studies, they will work better than before because they are more knowledgeable. In that way, both the company and worker benefit. It is a diplomatic way of hiring and keeping workers within an organisation for a longer period to avoid the unnecessary costs of replacing the leaving staff (Goodnow, 1998).

Allow flexible work schedules. Employers should be smart and accommodative. Make a provision for employees to 'knock-in and -off' to accommodate their own personal needs without compromising service delivery (e.g. those studying privately with institutions of higher learning). Employers must recognise and understand that employees have their own personal needs by

providing flexible work schedules. A worker may decide to sacrifice his/her lunch time in order to 'knock-off' early to do something private. Employers should accommodate such requests. The employees might not decide to leave the organisation and thus stay for a longer period which benefits the employer (DPSA, 2007).

According to Harper (2018), there are various effective ways of reducing employee turnover. Chances are, if one is searching how to reduce employee turnover, the high employee turnover rate is already high or one is worried because employees are leaving at a quicker rate. One simply wants to be pro-active rather than re-active to such a situation. A high turnover rate typically means that employees are unhappy or unsatisfied within a company/organisation or working within a team. This may be because they are overworked or underpaid. They may feel like they are treated differently to other employees. There may be no career pathing or development opportunities, poor management or non-recognition by superiors. It may also be because the culture within the company is not is not a pleasant one to work in.

The following are some effective ways to reduce a high turnover rate:

- Overall retention rate: Select a measurement period; this could be a month or as long as a year. Divide the total number of employees at the end of this measurement period by the total number there was at the start of the measurement period and multiply it by a hundred (100).
- Overall turnover rate: Select a measurement period. Divide the total number of employees who have left the company or organisation during that time period and multiply the total by a hundred (100).
- Calculate the average length of employment: To do this, add the length each employee has been in the organisation or company for, and then divide it by the total number of employees. Look for trends. The longer the average contract length, the better. If the retention rate is low and the turnover rate is high, there are solutions to address this. Some are listed hereunder:

Offer competitive salaries and packages. At the end of the day, the main reason why people go to work is to earn money. So, use this to keep employees within an organisation. One way to ensure that the employee turnover rate reduces and that retention increases, is to offer more competitive salaries and benefit packages. When hiring new employees, make sure that the salary is competitive for the role and location. Look at other organisations of a similar size and recognition

and see what they offer as a salary or bonus package in the market for a role similar to the one advertised (DPSA, 2012).

Try and offer more than, or the same as, your competitors. This action will attract the best candidates for the job and ensure that employees do not feel that they could get a better deal elsewhere, reducing their desire to leave in the future. The same thing applies to current employees. Look at what other companies are offering their employees and pay them more. This may come at a cost initially, but experts reckon that the cost of hiring a new employee is double that of old employees' salaries. Thus, one is saving money in the long run.

There is also the opportunity of offering enticing workers-benefit packages. The packages can be set and therefore the same for all employees. For instance, all employees will receive a monthly gym membership or get discounted car insurance through the company or organisation. Alternatively, the company could offer packages that allow the workers to choose what they most need. For instance, covering fuel costs, a higher pension scheme or free/discounted childcare to those employees with young children. This will save money, as the company won't be offering all the employees the same benefit packages and will therefore not be paying for benefit packages that the employees won't use. The addition of these benefit packages will raise morale, increase satisfaction and reduce employees' desire to leave an organisation or company.

Finally, money or benefit packages could be used as incentives. When a team exceeds their weekly targets, offer a bonus. Carry out annual reviews with all employees. If employees are performing exceptionally well, reward them with a raise or salary adjustment for their good work, loyalty and cooperation. These incentives will encourage employees to work more efficiently and boost employee morale which will increase the retention rate and decrease the overall turnover rate (Majam, 2005).

Ensure the workload is fair. Nobody likes to feel overworked and exhausted. Surely, some employees will feel excited and livened by a challenging role, but setting only a select few employees excessive amounts of work will cause them to feel underappreciated, overworked and overwhelmed, making them want to leave the organisation or company. A solution to not exhausting employees is to make sure the workload is split fairly between each team. To do this,

make sure there are enough people to complete the workload. Then, check that each and every team member has the required skills and adequate knowledge to complete the task they are being set to do (Hopkins, 1995).

After this exercise, check that each task member has a similar workload. Remember that some jobs take longer to finish than others. To ensure that the workload is fair, ask the team members if they feel that the workload is balanced. From the feedback, create plans of workload distribution and implement these plans to balance the workload and improve overall productivity (John, 2016). These plans should promote healthy competition amongst employees to complete their workload first. Finally, meet with the team once a week to discuss how they think the workload has been for the week. If they feel that their tasks are longer or harder than the other employees, change the distribution plan. Making this workload fair should mean that all the employees feel satisfied at work, as they are not bombarded with a huge workload. This will increase morale and reduce turnover.

Get to know the employees and let them get to know each other (Chapman, 2012). One of the most important things to do is to get to know the employees on a more personal level. Get to know if they have any kids, their dog's name or where they went on holiday last year. People love to know that someone else is interested in them. It will make them feel wanted as part of the organisation, increase their morale and encourage them to stay. Personality tests can be used to get to know the employees better. Studies have shown that individuals who are low on agreeableness or high in openness to experience are more likely to engage in unplanned quitting. Employees who have low emotional stability may quit for reasons other than workplace dissatisfaction. By using personality tests, one has an idea of which employees are more likely to leave the company or organisation. One can then work closely on their morale and make them want to stay in the team.

Finally, to get employees to know and trust each other, engage the whole team in 'ice-breaking' or team building activities (Hopkins, 1995). It is always a pleasing and enriching experience to change the work environment when conducting team building exercises. People feel relaxed and distress in an environment outside of the organisation. They express and submit their views freely. They make decisions whilst engaging in such exercises. They feel a sense of belonging and recognition. They, therefore, learn to work together as a team. The spirit of 'esprit de core'

(togetherness) develops amongst the workers. They become reliable and are not vulnerable to outside influences. When engaging workers in team building exercises, allow them to ventilate and express their feelings about the organisation. Never suppress their opinions. By so doing, they feel free to commend and/or criticise the company's management style. The employees then project their wishes and needs in taking the organisation forward. This process is called a brainstorming exercise.

Make the employees feel respected and trusted. Some of this will come from using the solutions outlined above. Employees will feel respected if they earn a fair salary, are not overworked and feel trusted by their team leaders and fellow colleagues. The trust building activities outlined above will increase the employees' trust in other. If the team leader participated, this would increase the employees' trust in them and allow them to feel trusted by the team leader. Some of the easiest and simplest ways include sharing the responsibility, engaging them in decision-making and asking for their opinion. One should always aim to create a positive work environment and to be open and transparent with one's employees. Always remember that trust and respect is a 'two-way street'. Employers should trust and respect their employees, and vice versa. Make sure to promote a trusting and respectful environment and take action against employees who are distrustful or disrespectful toward other employees. This gives more in-depth ideas and views on how to build a team (McManus & Masco, 2015).

Hire the right employees in the first place. Hiring the right people who instantly feel like they have the correct skills and fit into the culture will reduce the turnover rate. These employees will feel happy and satisfied in their role, thus they will want to stay. To hire the right people for the right job, one must be upfront in the recruiting process regarding what will be expected of the employee once they start working (DPSA, 1995). This way, there will be no nasty surprises that will make them want to leave. There are numerous ways to assess whether the employee is right for the job. Below are a few examples:

- Skills testing: This will assess whether potential new hires have the desired skills for the job.
- Emotional intelligence tests: These measure potential new hires' abilities to handle their emotions and feelings in all types of situations.
- Cognitive skills testing: This measures a potential new hire's memory, intelligence, mathematics skills and personality.

- Personality testing: There is a wide range of personality tests available which can measure whether a potential new hire has the right characteristics and strengths to fit into both the job role and the organisational culture.

Be flexible. In recent years, there has been a rise in the number of remote business, many of which are successful (Collins, 2008). They are more successful because people want to work for them. Generally speaking, remote businesses offer something invaluable that every business should offer where possible – flexibility. Studies have shown that organisations or companies with employees with greater time control and flexibility have reduced turnover rates. So, if possible, flexibility should be allowed during working hours within the team. Allow workers to work during the chosen hours in order to ultimately suit their personal needs without compromising the overall working hours per day or any given time. Some employees would prefer to come in a little bit earlier than the normal starting time in order to 'knockoff' a little bit early to suit their needs. The employer should allow that so long as service delivery is not compromised (DPSA, 2007). There are a few ways to do this, including the following:

- Allow one day a week to work from home. Allow workers to work at their own peril and leisure time and perform some duties at home without any supervision. Thus, they are doing work in a relaxed environment.
- Allow 'flexitime' where the employees work a set number of hours per week, but they can choose when they work these hours.
- Allow employees to finish earlier on a Friday. This will increase their morale and confidence and give them something to look forward to as a collective.
- There are also 'results only work environments' (ROWE) programmes. These essentially pay employees for their results rather than for the hours worked. These are great for motivating workers to work quickly. It works for companies or organisations that are focused on producing lots of products at a fast rate. They, however, will not work for all companies or organisations.

Allow for career development. Finally, if employees are leaving the company or organisation, they might not actually be dissatisfied within the company or organisation or their current role. Sometimes, employees do, unfortunately, want more than what the company can offer. They may just feel that it is time for them to progress which is something that cannot be stopped by offering

them an alternative. If valuable employees are leaving because they are not being offered career development, this a huge mistake which will cost the organisation or company at a later stage (Supeli, Peter & Creed, 2015).

Ideally, one should aim for internal promotions and job filling. If someone leaves a high position, pick a current employee that fits the role and promote them following the proper promotion measures. Most employees these days are unionised, so one must be careful with how the workers' promotions are affected. Otherwise, organised labour could get involved. In the public sector, it is impossible to apply these because all vacancies must be advertised, so all employees, including the outside candidates, must be subjected to a recruitment and selection process which is quite lengthy. This relaxation to advertise within or locally is only reserved for the entry grade/level posts in the public sector. As the HR Manager in an organisation, one could find it difficult to absorb all the hard-working employees already working for the company.

One could also offer career development advice within the company. Perhaps employing a freelance life coach or career advisor would help employees to figure out where they want to be in the next few years, and will allow somebody to adapt to these needs.

2.10 TWELVE 'SURE-FIRE' TIPS TO REDUCE EMPLOYEE TURNOVER

It is a reality that employee retention is without a doubt one of the most intense challenges facing most human resources departments. Sadly, with the improving economy and the coming talent crunches due to retiring boomers, retention rates promise to only to get worse (Jacobsen, 2013). Already, turnover rates for all industries hover around 13 per cent and those rates are far higher in the service sector, where the average is 30 per cent. The retention crisis will undoubtedly intensify as the talent war rages and millennials, who are notorious for job hopping, become a bigger part of the workforce. With that in mind, here are various tips on how to slow down the revolving door of organisations. Some may be familiar, some may be new, but all should help inspire vigorously long-term loyalty from the best employees (Jacobsen, 2013).

Hire the right people. The best way to ensure that employees do not leave the organisation or company is to make sure that the right employees are hired to begin with. Define the role clearly, both as the employer and to the candidates. Be absolutely sure the candidate is the right fit, not only for the role, but for the company and organisational culture.

Fire people who do not fit. Sometimes there is an employee who, no matter what is done, he/she just doesn't fit in with the organisation or company. Furthermore, no matter how effective they might be at their job, an employee who is a bad fit is also a bad fit for the company culture. This creates 'culture debt' which is when such an employee is a liability to the organisation. They will do more damage than good by poisoning the wellbeing of the company or organisation. Cut them loose or just fire them.

Keep compensation and benefits current. Be sure that employees are paid fair-going wages for their work. Offer employees competitive benefits. If the salaries are not good, employees will leave. This might seem like a no brainer, but it is surprising how few companies offer raises that keep up with an employee's development and rising growth (Chapman, 2012).

Encourage generosity and gratitude. Encourage pro-social behaviour in employees. When they are given the opportunity to connect with one another through acts of generosity and the expression of gratitude, employees will be healthier, happier and less likely to leave the company. By encouraging them to be on the lookout for good behaviours to commend, employees are given a sense of ownership within the organisation (McManus & Masco, 2015).

Recognise and reward employees. Show employees that they are valued and appreciated by offering them real-time recognition that celebrates their successes and efforts. Make it specific, social and supported by tangible rewards, and the company will be rewarded with their loyalty (DPSA, 2012). Do not be hard on the employees by focusing on productivity without caring for their wellbeing. Be human without losing the seniority status of being a boss. Do not compromise accountability and one's managerial position.

Offer flexibility. Today's employees crave a flexible life-work balance. Gone are the days whereby employees would work long hours. This is more so because they are unionised, and no trade union would allow their members to work a number of hours that is not balanced. This directly impacts retention. In fact, a Boston College Centre for work and family study found that 76 per cent of managers and 80 per cent of employees indicated that flexible work arrangements had positive effects on retention. More and more companies are aware of this reality. This means

that if one is not offering workers flexibility around work hours and locations, they might easily leave for someone who will (Galinsky, Sakai & Wigton, 2011).

Pay attention to engagement. This one sounds obvious, but far too many leaders and managers are interested in engagement and it is limited to the results of engagement surveys. It is not enough to perform an engagement survey once a year. One needs to take action based on the results and needs to work to build a culture of engagement in the company or organisation all year long (Galinsky, Sakai & Wigton, 2011).

Prioritise employee happiness. Happiness may sound odd to many executives, but the numbers behind it are rewarding. Employee happiness is a key indicator of job satisfaction, absenteeism and alignment with values. Investing in the happiness of employees will pay dividends in engagement, productivity and retention (Galinsky, Sakai & Wigton, 2011).

Make opportunities for development and growth. Employees place huge value on opportunities for self-development and growth. There is a direct connection between the lack of development opportunities and high turnover intentions. If employees are not being developed, they are not being investing in. If one is not investing in them, why should they remain? Ensure that there are provisions for training and development programmes for the entire workforce within the organisation. Using the skills development budget, conduct internal and external training programmes for employees (DPSA, 2012). The human resources department managers should drive and advocate such programmes. At the end of each financial year, the human resources department should gather the information on all the employees trained and developed and prepare a submission to executive management for final analysis purposes. HR should also keep a database of all the employees trained for future usage.

Clean up performance reviews. The most recent workforce Mood Tracker survey painted a dismal picture of how employees feel about performance reviews (DPSA, 2012). Only 49 per cent of them found the reviews to be accurate, and only 47 per cent found them to be motivating. Performance reviews offer a prime opportunity to increase trust and fortify relationships with employees. Improve performance management by overhauling reviews and watching employee trust and satisfaction grow.

Provide an inclusive vision. One key factor in employee engagement and happiness, according to experts, is to provide them with a sense of purpose and meaning in their work environment (Collins, 2008). Offer employees a strong vision and goals for their work and increase their sense of belonging and loyalty to the organisation. Involve the employees in the strategic planning session of the organisation. A strategic planning meeting is the forum whereby the vision, mission, goals and objectives of the organisation are discussed at length by all parties including organised labour. The workers will own the decisions of the organisation if they participated in the strategic planning meeting and were afforded an opportunity to share their views (Collins, 2008).

Demonstrate and cultivate respect. Finally, do not discount respect when it comes to creating a magnetic culture. According to Heathfield (2020), respect in the workplace was revealed to be a key factor in voluntary turnover. It will be necessary to establish and execute ways to cultivate and nurture respect in the workplace. It will pay off in the higher retention of staff. It is imperative that one uses these tips to help build the culture within the organisation that will reduce the turnover rate and retain the most productive employees for years to come (Chapman, 2012).

2.11 FIVE TIPS TO CREATE HAPPIER EMPLOYEES TO RETAIN THEM

According to Blake (2017), happier workers help their colleagues 33 per cent more often than unhappy ones. Happy employees also achieve their goals 31 per cent more often and are 36 per cent more motivated in the workplace. Employee happiness has become an important and growing business concern over the past few years, as more and more companies or organisations recognise the benefits of having more than just satisfied and engaged employees. Also, employees who are happy at the workplace and in good moods will stay longer. Health, safety, productivity, absenteeism, customer service and profitability; it seems that there is no business metric that is not impacted by the happiness of employees. (Blake, 2017).

Here are five (5) things to consider as one tries to build a happier workforce in an organisation:
Offer meaning and alignment. People, naturally, want to feel that they are part of something bigger than themselves whether it is a team, company or community. Some employees actively search for companies or organisations that have strong values and give back to society. For many employees, ‘meaning’ is as simple as a desire to be aligned with the company goals and mission, and to feel

like a valued member of the team. A study conducted by researchers at the University of Alberta found that companies who emphasised the meaning and purpose in employees' work experienced a 60 per cent drop in absenteeism and a 75 per cent reduction in turnover (Blake, 2017).

Provide opportunities for success and personal growth. Growth and professional development is among the top demands of job seekers in the United States labour force. Employees must feel like they are progressing toward a goal, are optimistic, are part of something bigger than day-to-day work and are being supported by and supporting others. Those are legendary times at a company. Notice how people are sustained through them, hour by hour, by the conviction and affirmation that they are making progress toward a goal. Happiness comes from both the end goal and making progress towards it (Mosley, 2013).

Encourage gratitude. According to Clarke (2018), studies on ways to express gratitude have shown that recognised employees are happier and more motivated to succeed. Employees who are giving recognition and rewarded benefit more from it than colleagues who are not. It turns out, giving people the opportunity to express gratitude is also amazingly good for their health, productivity and happiness at the workplace. Employees who are enabled to recognise one another are significantly more likely to say that they are highly engaged than those who are not able to recognise one another (Clarke, 2018).

Build flexibility. Organisations that see the biggest jumps in employee happiness are those who, among other things, emphasise great work life balance. The importance of flexibility in driving worker happiness with 80 per cent of employees saying that they would be happier with more flexible work options. Of those workers who already have flexibility at work, 90 per cent said that it eased the burden of their work-life balance (Galinsky, Sakai & Wigton, 2011).

Create trust. Many experts argue that one of the single biggest contributors to employee happiness is simply creating a culture of trust within the organisation (McManus & Masco, 2015). This means not only the workers' trust in leadership, but also their trust in one another. That trust is a two-way street. Enhancing trust and employee commitment creates an environment that fosters happy, committed and productive team members. Maintain an open, multilateral dialogue within an

organisation, help employees to understand and contribute to the bigger picture, and above all, be sure that leaders are honest and accountable for their decisions.

The abovementioned five tips should be introduced and implemented in the organisation at all times. Monitoring the application of the said trips should be done on a regular basis. For example, bi-monthly in order to gauge adherence and productivity.

2.12 ADVANTAGES AND DISADVANTAGES OF EMPLOYEE ATTRITION

Attrition and turnover are used interchangeably nowadays by organisations. The term has gone through a lot of change over the years. Employee attrition means the process of gradually becoming worn out. That is when the employees, after years of service, would want to leave and relax (Peteraf, 1993). This process, as coined, should take around 40 years. This is what the working years of any profession were in the past. The term has changed and, in this century, the process takes just three to four years on average. It has become abrupt, sudden and sometimes highly drastic. The term has thus become synonymous with employee turnover.

2.12.1 Kind of Turnovers and their Meaning

Employee turnovers takes place in various forms in an organisation and each form has a different effect on the organisation. These types are mentioned hereunder.

- **Internal Turnover**

There are times when employees leave one project or function in an organisation and move on to another one. It could be through internal cross departmental transfers. This is mostly a positive change and a skilled-professional stays within an organisation. This generally happens under an organised HR process and under the policies of the company or organisation. However, if there are many changes within the organisation, it can be alarming. It is best that the reasons for the change are examined and remedial actions are taken, as it creates a negative image of the current process whereby people leave.

- **External Turnover**

Employees leave their organisations and join competitors' organisations because of better remuneration and pay packages, working conditions, flexibility and superiority. These situations

are the reasons why employers needs to closely look for the reasons as to why employees are leaving the organisation.

- **Ease of Employment Opportunity**

Unskilled labourers are generally seen leaving organisations and moving on in no time. This is due to many reasons, mainly because they feel exploited given that there is no job security. Skilled professionals on the other hand are secured by policies, contracts and their qualifications. They remain within the organisation for a long period of time unless something major happens. The organisation generally does not realise the need to create a positive environment for unskilled labourers. This should be changed, as they are the major workforce, especially in manufacturing units and similar undertakings.

2.12.2 Disadvantages of Employee Turnover

When employees leave the organisation, it is a loss to the company, team and individuals (John, 2016). Employees are the backbone of any organisation and their departing may lead to various losses within the company in different aspects. The following are the disadvantages:

- **Decreased overall performance**

The whole business process is affected when an employee leaves the organisation. It is even more risky when this happens all of a sudden (e.g. short notice). There is no time to train the new employee who is to replace the outgoing one and carry on with the job. Thus, the entire team is affected. It can be directly seen in the overall decrease of performance of the team. Sometimes this may lead to drastic measure changes in customer relationships. Customer networks with other employees in an organisation and those leaving all of a sudden may lead to doubts in customers' minds regarding what is happening within the company (John, 2016).

- **Daily task management**

Sudden attrition may lead to difficulty in managing day-to-day tasks. Even huge organisations find it difficult to manage their responsibilities when employees leave jobs (John, 2016). Gathering information and managing day-to-day tasks or duties become difficult, as they cannot be managed by the small team left behind. Organisations have notice periods stipulated by the relevant prescripts and regulations to ensure that there is a smooth transition but attrition does the opposite.

- **Increased cost**

When employees leave an organisation, it automatically affects the business financially. It is costly to replace somebody that has vacated the position. This has the highest disadvantage to a company when employees leave their jobs. There is an increased cost associated with every level of the process. That is losing and paying the previous employee and, at the same time, recruiting and training a new one. Research indicates that these costs are much more than the losses incurred in managing and the missing out on work (Hopkins, 1995).

- **Lack of knowledgeable employees**

People will leave the company with their experience and expertise that they have accumulated over years. Generally, with organisations with a high attrition rate, the average years of experience of employees are low. This comes with underperformance or low performance and a lack of trust and loyalty (Hopkins, 1995). The organisation ends up appointing and training new, inexperienced staff for some time. This is a costly exercise since there is not even a guarantee that such an employee will stay with the company for a long time. It impacts even the customers for they become suspicious as to why people are leaving the organisation. They then lose hope and trust in the particular company. The company is left with not enough experienced staff. This greatly hampers productivity. Experienced employees with their years of experience can take over critical matters which can never be entrusted to the new employees.

- **Create a negative image**

Both parties (employer and employee) need one another. It is not just that employees are looking for a job but also that the employers are looking for workers, especially qualified professionals. When any company has a high attrition rate, it negatively impacts the product or brand of the organisation. Recruiters state that they find it challenging to attract qualified candidates to the organisation, as candidates opt out fearing the attrition rate. The reasons may differ as to why the negative image works against the company (Hopkins, 1995).

- **Employee development**

A lot of organisations have different employee development plans and higher attrition means losing out on it. Employee development plans take time and are huge investments for companies (Hameed & Waheed, 2011). When there is a disturbance within company due to workers leaving,

it affects the development process for all employees. All the investment in the employee when he/she leaves is just wasted. It also comes as a negative effect on other fellow workers who have to take over the tasks. These plans are structured and need commitment, dedication and time to achieve the organisational goals. A change mid-way mostly means a loss of the past gains achieved which no one benefits from (Hameed & Waheed, 2011).

12.3 Advantages of employee attrition

It is not that all turnovers are negative. Generally, the feeling is that an employee leaving the organisation is detrimental to the organisation but there is a 'flipside' to it. Employees leaving companies may lead to benefits. This is called 'healthy attrition', and it is meant for the development and growth of the company.

- **Higher manpower costs**

Sometimes workers will stay within the company for a long time which might mean that they are receiving top or maximum salary notches or pay. When old experienced workers are paid more salaries comparatively than those newly appointed, it comes as an advantage to them. This excessive manpower costs more and leads to financial constraints and burdens which are immediately identified on a regular interval within organisations (McManus & Mosca, 2015).

- **Negative effect of people**

Some workers in the organisation will work against the culture of the organisation, thus negatively impacting the conducive working environment. This could be equated to the wrong individuals within the organisation who have the possibility of influencing the other good workers to change their behaviour. (Hopkins, 1995). Such employees also impact the loyalty of other workers and the way that they view the company or organisation. They are a bad influence and they must be constantly watched by managers and supervisors. The immediate assumption is that those employees are working against the organisation from inside, which might be dangerous to the company. When such workers leave the organisation, the company might experience more profit than loss, as they are a good loss.

- **New idea**

It is common knowledge that when old employees, who have accumulated vast experience, leave the organisation, they open opportunities for new talent to join the company. When those new workers join the company, they come with new ideas and innovations (Anderson, Potocnik & Zhou, 2014). It comes with a challenge to the management of the company because they will have to accommodate and adapt to the new ideas by the new workers. Mostly employees who are in the organisation easily acclimatise to the working atmosphere or environment and become complacent and less productive. This means a lack of risk and definitely no new ideas. When the old employees exit the system for the new employees who have a high risk-taking calibre, it stops the firm from becoming stagnant, as the old employees become redundant and less productive (Anderson, Potocnik & Zhou, 2014).

- **Higher performance**

Over the years, there have been employees who have been performing their work at a slow pace. There are reasons and motives for this such as poor performance and slow growth. When such employees leave the organisation, the new workers or team become fast-paced and the turnover time is considerably reduced. This means that the cost will be reduced, and the customers will become happy and satisfied with their work. Thus, the organisation will grow and develop (Anderson, Potocnik & Zhou, 2014).

- **Setting the culture right**

Some workers forget to abide by the policies and procedures of the organisation which creates a brand for the organisation. When strong actions and decisions are instituted by management such as employees who are fired because they negatively affect the brand of the organisation, it leads to a strong message and creates a professional culture in an organisation (Aktas & Kiyak, 2011).

2.13 RETAINING THE BEST AND BRIGHTEST EMPLOYEES

When the wrong employees gradually leave the organisation, the real advantages of attrition are realised. It is of utmost importance that employees who are productive should be retained in the organisation to make sure that the organisation has the strongest workforce (Mitchell, 2018). The reasons or motives for high attrition, low performance and lack of motivation are not the fault of the employee but that of the superior under which they serve. Mostly, employees who become

supervisors lack people skills which leads to a negative impact on the workforce. This should not become a reason for employees to leave the workplace. There are various things organisations can do to make sure that the workers remain with the organisation for a long time (DPSA, 2012).

- **Measure employee satisfaction**

Most reasons for the discomfort and dissatisfaction of the workers are only heard when they leave the company. A strong measure to identify the satisfaction of the employees should be built within the organisation (Heathfield, 2019). A very powerful way to be used by organisations is the survey method. The details of all the workers are captured and kept confidential and some organisations even recruit other organisations to get to this work done for them. The surveys in question are crafted around the parameters that display how comfortable employees are working within the organisation. These surveys also assist in identifying the challenging or problem areas which should be strategically taken care of by the organisation (Heathfield, 2019).

- **360 feedback**

When employees exit the organisation, they feel useless and powerless in front of their superiors (Atkins & Wood, 2002). They feel like they are not recognised and respected. Managers and supervisors are responsible for their rating and feedback which makes employees insecure and cheap in terms of status. Thus, 360-degree feedback is very effective since it involves the subordinates providing feedback about how they feel about their managers and supervisors within the organisation. It is a top-down and vice versa approach. This, then, creates a balance or state of equilibrium amongst the workers and employers and resolves a lot of issues that exist between the employees and employers (Atkins & Wood, 2002).

- **Compensation**

If the motive behind high attrition is higher compensation or benefits with a competitor, it should be addressed immediately. The solution to this would be the formulation and implementation of compensation or remuneration policies which would be on par with other competitors (Patnaik, 2012). This will enable the company to keep up with other competitors and retain talent and skills. Mostly, company remuneration is a good measurement used to assess or measure company policies, fridge benefits and perks. It also plays an important part, as employers are held as dearly

by employees as compensation is (Patnaik, 2012). That could be the strategy to retain employees within an organisation.

- **Setting the organisational culture**

There exists many departments and sections to set a culture within an organisation. The most effective is clear communication. Effective communication within the organisation between all levels of workers is critical. Where there is two-way communication, all information is communicated in the right manner. Employees and employers will definitely benefit when anything that has to be communicated is direct and reaches the right person in time (Aktas & Kiyak, 2011).

- **Exit interviews**

Exit interviews are the best way to find out the cause for workers leaving. Employees are honest and fearless when they come for the exit interview and they state the real reasons for them leaving. These can be used to craft changes in the policies or rectify the faults within the organisation. At times, some good employees, during the exit interviews, are convinced and retained within the organisation by rectifying issues and accepting their demands (Bhuvaneswaran, 2019). Companies work on a larger scale and it is a common understanding and characteristic of employees joining and leaving organisations. Anything in excess is always detrimental, thus organisations should always ensure that they have a strong response to attrition. Attrition, even when disadvantageous, can be managed when the organisations have a plan. A strong strategy to deal with the attrition rate is advisable (Bhavaneswaran, 2019).

2.14 THE EFFECTS OF A HIGH TURNOVER IN ORGANISATIONS

High turnover implies that the organisation or company is losing a relatively high percentage of employees each year compared with the number of employees one recruits and employs. Whilst losing poor performers may have its benefits, the effects on the turnover rate are typically negative and costly. Understanding and comprehending how turnover impacts on the organisation and developing strategies to retain employees and combat the issues are critical in human resource management (Surji, 2013).

Some of the effects of a high turnover are as follows:

High costs. High turnover is very expensive for companies and organisations to manage. Losing an employee may result in costs such as severance package pay and administrative responsibilities and tasks such as exit interviews (Surji, 2013). This is a costly process. When people leave the organisation, the process of recruitment, selection and employing starts all over again. Once a new employee has been identified, he/she has to be orientated, trained and developed in terms of how a particular job is done. Over and above, one cannot guarantee that an employee will deliver after being employed, trained and developed at a cost. So, the risk to hire, train and develop an employee is very high. There are no guarantees that such an employee will remain with the company for a long time. Some employees have the tendency of leaving an organisation once they have been trained, as they see themselves as more valuable and decide to look for other job opportunities elsewhere. They then leave with such skills and talent and the process of replacement starts all over again. This becomes stressful for the organisation and sometimes management ends up also leaving the organisation. This then becomes a crisis situation for the whole organisation (Surji, 2013).

Low morale. Morale in high turnover organisations or companies is typically weak. Organisational culture is the shared norms and values of a collection of workers who work together as team members. It becomes difficult for management to motivate staff to share the vision of the organisation and perform at high levels when employees and co-workers are disappearing all around them. Workplace relationships are key to an employee's satisfaction with work performance (Hopkins, 1995). It becomes a challenge even to the remaining workers to get used to the new workers and connect with them to work as a team. So, it becomes a challenge to the organisation or company.

Poor performance. High turnover within the organisation implies that the basic levels of experience across the company are lower than normal. Thus, the productivity levels become low. Employees with no knowledge and experience in the company will not produce as well as those who are knowledgeable. In lower level job production, it is likely to be lower. The major challenge is that high turnover contributes to a downward trajectory that is tough to discern since poor performance leads to poor organisational results (Chapman, 2012). This often compels the organisation or company to freeze salaries or introduce stringent cost cutting measures. For example, introducing a moratorium on the filling of posts, freezing remunerative incentives,

suspending bonus payments and the like. Obviously, no worker will ever be motivated to satisfactorily perform the work resulting in poor performance. Thus, the company vision is not realised (Chapman, 2012).

Management frustration. When a lot of employees are leaving the company within a short space of time, it becomes a frustration for management (Pawliczek et al., 2013). Management has an obligation to deliver the mandate of the company and when workers leave the company it becomes a management frustration. When things are good and or bad within the organisation, the only people who are looked at is management. When the turnover is high, all eyes are on the management of the organisation. Management must account for and take remedial actions to heal the crisis or situation at hand. Sometimes management is fired.

Distractions. One of the worst effects of high turnover, is its need to be fixed. Some companies hire consultants to improve the company systems to deliver more effectively and efficiently. They hire the services of the consultants to eradicate the high turnover rate (Pawliczek et al., 2013). When the services of the consultants help eliminate the turnover, which is high within the company, the aim is to restore the brand name and dignity of the company. It does, however, not come cheap to utilise the services of consultants. They skew the company's budget depending on how long they are going to be kept by the particular company. In the public sector, when a particular department or municipality is dysfunctional, the particular institution is put under administration until it has completely recovered. It becomes chaos in an organisation and the blame is placed on management. It will always be viewed as management having failed to run the company and introduce and implement contingency measures to reduce the turnover rate within organisation (Machalinnski, 2016)**.**

2.15 SURVIVING EMPLOYEE TURNOVER: LESSONS FROM SPORTS AND MILITARY LEADERS

Organisations that battle constant employee turnover can learn some valuable lessons from the military and professional sports teams. These two organisations have always been challenged to serve performance in a high turnover environment. Experts say that the company may be working laboriously to improve or better staff retention. Sometimes workers leave at inopportune times.

Thus, one keeps the business moving forward when continually faced with staff turnover (Harbour, 2018).

The following are a few lessons learnt from sports and military organisations to assist in maximising performance whilst addressing high turnover.

Run superior training programmes. Whether it is a training camp, basic training, a company bootcamp or well-organised introductory programmes, get new employees up-to-speed faster. The assumption is that the new workers will start providing input, new ideas and taking the organisation forward (Blagrove, Howatson & Hayes, 2018).

Soldiers are taught in basic training to be mission-focused. 'As a soldier, you know you're interchangeable with any soldier of your specialty.' Soldiers are rotated to assume new roles and functions, frequently separated as their tour ends or are 'tragically removed' from the line of duty. 'Smart military leaders value superior orientation programmes aimed at fast acclimatisation much like a player joining a game coming from the bench' (Berry and Morris, 2008).

Take a look at the content of the on-boarding and training programmes to make sure that they include basic training on the organisation's software programmes, the work position, company-specific topics and any industry-specific compliance topics (Blagrove, Hawatson & Hayes, 2018).

Build trust. Quickly building trust between all workers and management as well as between workers themselves is very important for quick service delivery. It has a positive impact on the performance and in a high turnover environment. Managers and supervisors should develop trust between themselves and workers or production level workers. A manager must delegate some of his/her work to the junior staff as an indication of displaying trust. Employees would feel trusted and respected by managers and supervisors if they found themselves performing the work that is done at a higher level (McManus & Mosca, 2015).

In the business world, it takes a lot of time to build and sustain trust, but in a high-turnover environment, it is best to reduce that time as much as possible. Another way to build trust amongst employees is to empower them through delegation. Nowadays, the public and private sector emphasise the 12 principles of *Batho Pele* (People First) when rendering goods and services.

Amongst those principles, is communication and openness. They are the vehicle for service delivery. So, the communication principle is key, as it cuts across all sectors (Ngidi, 2013).

Crash course in company culture. Like close-knit families, businesses often develop their own way of doing things as a result of culture and traditions. It is completed with buzzwords, unwritten regulations and rules and habits. Familiarise the new workers quickly and get them up-to-speed on the organisation's culture to speed up and improve performance. Bells (2018) says that company commanders or leaders regularly asked platoon leaders how the new soldier was performing, and the platoon leaders would ask the same of his/her squad leaders. This created a spirit of togetherness and a sense ownership in the company.

Promote potential, not necessarily performance. The management in the organisation is not only reducing turnover but concentrating on keeping the business on track when old employees leave, and new ones start. Businesses can strengthen management by changing the criteria or norm they use to select managers. Too many times, that promotion goes to top individual performers. However, the best performers are not necessarily the best managers (Turnage, 2017). Promoting individuals with leadership potential has two strong benefits for companies. Firstly, it recruits and retains a good employee, reducing the future high turnover at a management level. Secondly, it provides a reliable coach to assist employees in higher-turnover positions to do very well in the new roles and responsibilities.

Create and share definitive guiding principles. In the military and sports worlds, organisations find ways to excel despite unusually high turnover rates. Companies must also thrive to find ways to grow in the face of constant change. A strong framework and formal guiding principles help professional team members and military divisions succeed. Employees will always leave and join companies, but the framework should remain intact (Bells, 2018). High performing organisations maintain excellence despite personnel mix (Dickersin, 2013).

This demands the creation of a definitive mission and vision statements, precise codes of conduct and clearly written expectations of a character in the workplace. It also implies that one must promptly reward team members when they exceed the prescribed expectations. Employees may choose to adhere to the guidelines and expectations (Rathi et al., 2012). If the workers abide by

the given rules and expectations of the company, then it should not come as a surprise if the high turnover problem resolves itself. The organisation should have prescribed procedure manuals and duty sheets or job descriptions for each worker. In-service and external workshops on how the work should be done should be organised by the human resource component. On a regular basis, assessments, in terms of whether employees adhere to the prescribed ground guidelines and expectations or not, should be done. Multi-skilling should be encouraged by managers and supervisors. By doing so, the high turnover of employees will be drastically reduced (Teden, 2013).

Sometimes when people are provided with opportunities for training and development, they decide to stick with the organisation and become assets and not a liability to the company or organisation. Guidelines help to assist employees to know exactly what is expected of them. The productivity of the organisation, therefore, increases and organisational growth is realised.

2.16 WORKFORCE TURNOVER AROUND THE WORLD

Worker turnover could bring a mixed bag of positive and negative impacts. In as much as some turnover brings impasse and interjection to continuous projects and programmes as well as costly recruiting, sometimes it is beneficial or revitalising for organisations. It keeps managers and supervisors on their toes. They have to institute some remedial actions to reduce turnover. They have to ensure that the training and development programmes are resuscitated and kept alive within organisations. This being done with the intention to keep the existing talent within the company for a long time. That would save the company a lot of money. Management is the one that should introduce the cost cutting measures in order to save money.

In either way, it is critical and important that one prepares for unforeseen turnover so that one can be pro-active rather re-active to situations. Steps should be taken to retain the top talent. Workforce turnover presents a dilemma to all companies around the world. Some estimate that the cost of losing and replacing a single worker can equal more than twice that employee's salary, with the costs increasing further based on the exit employee's seniority. Be proactive with the existing talent retention and workforce planning efforts. Look for information pertaining to voluntary and involuntary turnover across six career levels for over one hundred markets. Monitor voluntary and involuntary turnover by management on a regular basis. Contingency measures to assess and

address worker turnover should always be in place and they must be reviewed to meet the prevailing market demands. Economic and labour market trends like unemployment and workforce participation must be studied and analysed and the necessary action taken. Voluntary and involuntary turnover and company workforce changes by district, region or country and by industry or company must be studied and analysed carefully by the management of organisations.

2.17 SOUTH AFRICAN WORK INSTITUTE NATIONAL EMPLOYEE RETENTION REPORT

Franklin and Tenn (2018) wrote that workplace turnover is increasing, and that the employee-driven marketplace demands for the Chief Executive Officers (CEOs) and managers to concentrate and focus more on employee retention. They need to take employee retention seriously, as it is negatively affecting the economy of the country. The consequences of the turnover are very serious. An estimated 42 million employees left their jobs in the year 2018 according to the findings of a comprehensive national study or research conducted by Work Institute. Management must first understand and comprehend the root causes of the high turnover as the first step (Smith, et al, 2012). Reports offer insights to assist employers to understand how to curb the retention within their organisations going forward.

While many studies report that most employees exit their current jobs for better paying job opportunities, the report showed that career development opportunities, a better work-life balance and poor management are consistently the real issues that spur employees to leave their jobs (Smith et al, 2012). The 2018 Work Institute retention report showed the 50 most important reasons employees decided to leave their jobs. They were grouped into ten categories. Seven were considered more preventable by employers, however, the other three could not be prevented. The top five categories of the reasons as to why employees exit their jobs are as follows:

- Career development – no opportunity to grow in a preferred job career (21%);
- Work-life balance – better work-life balance which includes more favourable schedules, shorter commute times and scheduling flexibility (13%);
- Manager behaviour – unprofessional or unsupportive managers (11%);
- Well-being – personal or family health issues (9%); and
- Compensation and benefits – pay was cited more often than benefits (9%).

The report identified other key aspects such as when employees are more likely to leave. Approximately 40 per cent of employees left within 12 months of being employed. The highest first year turnover rate in eight years. The percentage of employees who said that they were aware of unethical, illegal or fraudulent behaviour at their former place of employment increased to 6.1 per cent the previous year. A 500 per cent increase over the year 2010 (Nel, 2018).

2.18 TALENT EMERGENCE

Recent theorising reveals and explores how human resource management practices can create/cause competitive advantages and facilitate organisational work performance. More employees would be hired and retained by employers. This idea assumes and suggests that retaining the talents (i.e. knowledge, skills, abilities, experiences, relationships, attitudes and motivations associated or linked with individual employees within the organisation) can result in the emergence of organisational level talent that enhances a competitive advantage and can lead to improved organisational work performance.

Retaining talent of the experienced employers within an organisation is key. Retaining high quality and emergent talent has been an important concern for managers, leaders and supervisors in all types of organisations for a very long time (Curtis, 2012). It is believed that talent management within organisations is becoming more important and paramount than ever before. Many managers and organisations embark on an exercise to organise workshops on talent management. Some companies have got human resource development components which are solely responsible for identifying and nurturing talent and skills. Employees would be groomed and nurtured on a regular basis with a long term vision to keep or retain them.

Some organisations do not care about the identification of talent from their employees and, as a result, the good, talented workers leave the organisation. Therefore, a good organisation will provide talent management programmes. Human resource management departments should create data on talent management. This must be used for future reference should the need arise. By doing so, the brand name of the organisation will be improved. There is always a need formulate a retention strategy cannot be over-emphasised. That retention strategy should be reviewed on a regular basis to make the accommodation or provision for other benefits to keep the workers satisfied and their personal needs met (Department of Public Service Administration, 2008).

2.19 CONCLUSION

This chapter has presented the literature review. The chapter presented factors that motivate employees to stay in an organisation. The motivational factors include working conditions, pay, incentives, organisational practices, interpersonal relationships, opportunities for career development and promotion, training and development and positive job attitudes. The next chapter presents the research methodology underpinning the study.

CHAPTER THREE

RESEARCH METHODOLOGY AND DESIGN

3.1 INTRODUCTION

The aim of this chapter is to describe the research paradigm and methodology approach. It outlines the target population, sampling techniques and procedures that were used in the study. The purpose of the research methodology is to systematically solve the research problem (Kothari 2004). It describes how the study unfolded and which sources were utilised for data collection. The purpose of this chapter is to provide a guide on the approaches that were followed to solve the research problem. Leedy and Ormrod (2013) describe research as a process that involves collecting, analysing and interpreting information to increase the understanding of a phenomenon. This chapter defines the data collection methods and how data was analysed to address the research objectives. Finally, it presents issues related to ethical considerations.

3.2 RESEARCH METHODOLOGY

A research methodology involves or includes specific techniques that are adopted and applied in the research process to collect, assemble and evaluate or assess data. It defines and elucidates those tools that are used to gather relevant and valid information in a specific research study. Usually surveys, questionnaires and interviews are the common tools of research. Research methodology is a way to find out the result of a given problem on a specific matter or problem that is also referred to as the research problem. In methodology, a researcher uses different criteria for solving or searching the given research problem. Different sources use different type of methods for solving the problem.

The term ‘research’ is used in different ways by several people. These meanings are often accepted it without considering exactly what they mean (Brink et al., 2012). In the vernacular, research has come to symbolise almost any sort of information gathering or checking. Research is not the mere transfer of information from one location to another, the collection of facts or a catchword used to persuade and convince people of what of one wants to say (Leedy & Ormrod 2010). In science, research refers to the exploration, discovery and careful study of unexplained phenomena. It is proposed that a distinction can be made between vernacular and scientific definitions by

emphasising the first syllable of the word when the former process (research) is implied and the second syllable of the word when the latter process (research) is implied (Burns & Grove, 2009).

The term 'research' in health sciences is used to symbolise the latter definition. The characteristics of research are explained and indicated as follows, according to Brink et al. (2012):

- The result of research is an increase in knowledge which in turn contributes to the existing body of knowledge. The ultimate goal or aim of research in health sciences is to provide strong evidence on which the practice of quality care can be based (Burns & Grove, 2009).
- Research begins with a question or problem (Leedy & Omrod, 2010).
- There is at least one method by means of which this knowledge is obtained or gathered, be it search, discovery or enquiry. This means that the researcher is actively involved in looking or searching for information which is not yet readily available or for which there is no generally accepted evidence.
- The search is systematic and diligent which means planning, organising and persistence.
- Research is a process which means that there should be a purpose, series of actions and goal. The purpose gives the direction to the process, and the series of actions are organised into steps to achieve the identified gaol. This clearly indicates that research is planned and not done haphazardly.
- Research is a scientific process. This implies that it is the systematic manner of applying the scientific method. Science as a process implies orderly, logical and public activity. 'Public' in the context means that research findings, and the methods used to acquire them, are made known to the members of the research community.

According to Welman (1999), research entails the application of various methods and techniques in order to create scientifically obtained knowledge by using objective methods and procedures. It seems appropriate at this introductory stage to briefly explain how research methodology varies from research methods, such as opinion polls and techniques (e.g. attitude scales). Different studies use different methods or techniques because they have different aims or goals. Different studies use different methods or techniques because they have different aims. The techniques must be appropriate for the tasks or responsibilities. Research techniques entail specific things that researchers use to sample.

Table 3.1: Definitions of Research

Definition 1	Definition 2	Definition 3
'Systematic investigation or inquiry aimed at contributing to the knowledge of a theory, topic, etc., by careful consideration, observation or a study of a subject. It is an original, critical or scientific investigation carried out under the auspices of an academic or other institution' (Oxford English Dictionary, 2011).	'Research is a systematic process of collecting, analysing and interpreting information in order to increase the understanding of phenomena of interest' (Leedy & Ormrod, 2010).	'Diligent systematic enquiry to validate and refine existing knowledge and generate new knowledge' (Burns & Grove, 2009).

Source: Oxford English Dictionary (2011); Leedy and Ormrod (2010) and Burns and Grove (2009)

3.2.1 Ways of acquiring knowledge

The scientific method of enquiry is not only an essential element of research, it is also generally considered to be the most sophisticated and reliable way of acquiring knowledge (Brink, 2012). However, it is only one source of health information. Healthcare professionals have come to depend on several sources of knowledge to guide their practice. Below is a discussion of alternative sources of knowledge according to Brink (2012).

- **Tradition**

Knowledge can be conveyed or passed over from one generation to the next. It leads to action that happens because 'it has always been done that way' (Kapoor, 2012). There are certain advantages. A researcher does not need to start anew in the attempt to understand the world or an aspect of the world. Tradition facilitates communication, since it provides a common frame of reference for each member of an investigative group or team. However, tradition also poses some challenges. Many traditions have never been tested or evaluated for validity. They may also contribute to the stagnation of a practice instead of encouraging innovation. This may lead to the ritualisation of a practice in which the basis becomes inflexible and developments in the field are rejected without examination.

- **Authority**

Authorities are persons with specialised expertise, experience or power in the field who able to influence opinion and behaviour. For example, much of healthcare practice is guided by knowledge obtained from authorities (Brink, 2012). Healthcare authorities formulate and establish policies and procedures that dictate and map the ways in which a particular aspect has to be dealt with.

- **Logical reasoning**

A solution to various perplexing problems could be found by means of logical reasoning. It could be through using a process of either induction or deduction, or both. Both systems are useful as means of understanding and organising phenomena, and both play a vital role in the scientific approach. Neither system, however, is without limitations when used by itself as a basis of knowledge (Brink, 2012). Inductive reasoning is the process of developing generalisations from specific observations. In other words, with this type of reasoning, the researcher obtains information through observation and makes generalisations based upon these facts. For example, a physiotherapist observes that certain patients in a spinal ward seem to be more anxious than other patients.

Through a discussion with all of the patients, he/she discovers that the anxious patients have little knowledge of their medical conditions and its implications and expected outcomes, whereas the calmer patients are fully aware of what their condition involves. He/she thus concludes that the ignorance of one's condition contributes to a high degree of anxiety. He/she therefore uses inductive reasoning to reach that conclusion. He/she has observed the phenomenon of anxiety in certain patients. He/she has interviewed all the patients and has come to a conclusion based on his/her findings. The disadvantage of inductive reasoning is that the knowledge arrived at through this process is highly dependent upon representativeness of the specific examples used as a basis of the generalisation.

Deductive reasoning is the process of developing specific observations from general principles. In other words, with this type of reasoning, the researcher moves from the point of departure to a particular situation or conclusion. Deductive reasoning can lead to an erroneous conclusion since the validity of reasoning is dependent upon the truth of the general premise on which the prediction is based. Cultural stereotypes, for example, can be the basis of faulty reasoning (Brink, 2012). Nevertheless, both deductive and inductive reasoning are critical or important in the development

of knowledge. The difference is that the questions asked will be followed with a systematic investigation. As Streubert, Speziale and Carpenter (2005) postulate, the researcher might select an inductive or a deductive stance or reasoning or a combination of both, depending on the research question.

- **Experience**

One's experience represents a familiar and functional source of knowledge. Hence, the saying 'there is no teacher like experience'. An individual experience may be too restricted to allow generalisations regarding new situations to be developed. Furthermore, each person tends to experience or perceive an event differently. A person's experiences are coloured by his/her values and prejudices (Brink, 2012).

- **Trial and error**

The 'trial and error' approach is closely related to experience. The 'trial and error' method is similar to informal experimentation. A researcher comes across a problem, tries an intervention and, if the intervention works, he/she finds a suitable solution. If it does not work, the researcher tries another approach until he/she finds a suitable solution. This approach is also not perfect. While it tries to provide means of securing knowledge, it is often fallible and inefficient.

- **Intuition**

Knowledge is a sudden insight which happens or arises without conscious reasoning. For instance, one wakes up in the middle of the night with a creative answer to a problem that one has spent days trying to resolve. Unfortunately, at times, even the most impressive intuition is proven false when put to an empirical test. Therefore, intuition is generally considered to be an insufficient means of approaching information in a research context.

- **Borrowing**

This refers to academic ideas of knowledge from other fields or disciplines. Over the years, health sciences have borrowed in two ways. First, some healthcare professionals have taken information from disciplines such as medicine, sociology, psychology, physiology and education, to name a few, and applied it directly to their practice. Second, borrowing has entailed the integration of information from other disciplines into the focus of health sciences. When information is used out

of context, significant distortion may result. Borrowed knowledge, therefore, is not necessarily adequate for answering questions generated in the healthcare practice.

3.3 RESEARCH PARADIGM

Saunders, Lewis and Thornhill (2009) define a paradigm as a way of examining and assessing social phenomena from which a particular understanding of these phenomena can be gained or achieved, and an explanation tried. A paradigm is also regarded as an arrangement or design of scientific and academic ideas, values and assumptions (Thomas, 2010). This arrangement specifies data collection and analyses techniques to be used to enrich the understanding of the research problem. This study is located within the pragmatic paradigm, as it seeks to understand and analyse the perceptions and experiences of doctors and professional nurses regarding the reduction of the turnover rate.

3.3.1 Pragmatism

Saunders, Lewis and Thornhill (2009), Le Roux (2012) and Bryman (2012) have discussed pragmatism and defined it as that which advocates or stands for solving problems that exist in a specific situation in a reasonable manner. It is sensible and logical and based on practicality that fits the conditions that currently exist, rather than obeying fixed theoretical foundations, ideas or rules. Creswell (2003) discovered that within the pragmatic paradigm, individual researchers have the freedom of choice. They are free to choose the methods, techniques and procedures of research that best meet their needs and purposes. Creswell (2003) further posits that, for the methods researcher, pragmatism opens the door to multiple methods, different world ideas or perspectives and different assumptions, as well as different forms of data collection and analysis in the mixed methods study.

Davies (2015) and Kalolo (2015) regard pragmatism as an alternative epistemological paradigm to positivism and ‘metaphysical’ thinking. It complements the weakness of the one methodology by the strength of the other one. According to Feilzer (2010), pragmatism accepts philosophies that are open to empirical inquiry and positions itself towards solving practical problems in the ‘real world’. Pansiri (2005) also argued that pragmatism rejects the forced choice between positivism (including post-positivism) and interpretivism with regard to methods, logic and epistemology, emphasising how it accommodates both points of view and that it is more geared towards using both qualitative and quantitative approaches. Morgan (2014) and Punch (2009)

regard pragmatism as the main paradigm associated with the mixed methods approach by moving it beyond the contracted viewpoint of practicality.

Morgan (2014) is convinced of a dissociation of the pragmatism philosophy from abstract concerns and highlighted exposed human experiences. Morgan (2014) maintains that there are two inextricable phenomena around which experience is built: the sources of one's beliefs and the meanings of one's actions. This argument suggests that the beliefs that people have accumulated from past experiences are, in a way, adequate in dealing with the demands for action in the current circumstances. Furthermore, the suitability and relevance of pragmatism in this study is largely rooted in its strengths, flexibility and applicability in the discovery of the underlying phenomena. Pragmatism advocates for a balanced use of subjectivity and objectivity throughout the inquiry process (Morgan, 2014; Johnson & Onwuegbuzie, 2004).

3.4 RESEARCH APPROACH

According to Cresswell (2009), there are three commonly used research approaches when carrying out a study or research, namely, qualitative, quantitative or mixed methods. The researcher will choose the research approach based mainly upon the research problem, the type of data to be collected, the paradigm chosen or selected and the research design to be used.

The qualitative approach focuses on interpretation rather than quantification. There is more use for words about real situations than numbers (Ritchie & Lewis, 2012). Its focus is on the context with regards to the behaviour or situation in which they are inextricably linked or connected in forming experiences. It is also influenced by the researcher as the primary source. Johnson and Onwuegbuzie (2004) note that qualitative research has been criticised for not providing an adequate underlying principle for data interpretations and for data not being available for public scrutiny.

According to Bryman and Bell (2011), a qualitative approach is a means of testing theories by examining the relationship among variables. Creswell (2014) notes that the quantitative approach starts by identifying a research problem based on trends in the field. Bryman and Bell (2011) add to this argument saying that it uses a systematic process where numerical data and measurements are utilised to obtain information on the phenomenon under study. A qualitative approach applies

natural science such as positivism and objectivism in the conception of social reality. Its criticism emanates from its treating of the social world as if it is not different from the natural order (Bryman & Bell 2011). Vanderstoep and Johnson (2009) recommend the mixed methods approach because it comprises of the best of both qualitative and quantitative approaches.

According to Punch (2009), mixed methods is an empirical research approach that brings together quantitative data methods and qualitative data methods. Cresswell (2009) emphasises and stresses that the mixed methods approach has to use both the qualitative and quantitative approaches coherently in order to strengthen the overall result of the study. This study uses a mixed methods approach. It observes that the qualitative and quantitative approaches are, on their own, not able to adequately address all the research objectives of this study, thus the decision to use the mixed methods approach was taken. VanderStoep and Johnson (2009) were of the opinion that when used separately, the quantitative and qualitative approaches have their limitations. It was further noted that for future studies that secure only a quantitative approach, research participants might provide superficial answers because of the large number of participants. In pure qualitative research, the findings may not be generalisable to a greater population because the sample sizes are small and non-random (VanderStoep & Johnson, 2009).

The mixed methods research approach helps to shed light on a phenomenon by drawing findings from various methods and, as such, it is becoming more popular as a research approach. Other terms used to explain mixed methods include multi-methods, quantitative and qualitative methods and mixed methodology (Cresswell, 2013). The notion of combining the qualitative and quantitative methods into one methodology with various typologies is needed to extend the range of social science and health research (Cresswell, Plano Clark & Gutmann, 2006; Hanson, 2003; Giddings, 2006). Its ability to elaborate on the findings of one method with another method (Cresswell, 1998) and its capability to overcome the weakness and biases of single approaches (Elia, 2013) permits for a better understanding of research problems. Cresswell and Plano Clark (2007) also concur with the opinion that qualitative methods are often used in the mixed methods approach in order to provide a supportive role for the qualitative methods.

According to Bogdan and Taylor (1990), qualitative research is a scientific method of observation to gather non-numerical data and this type of research refers to the meanings, concepts, definitions,

characteristics, metaphors, symbols and the descriptions of things; not their counts or measures. Quantitative research refers to quantify the problem by way of generating numerical data or data that can be transformed into usable statistics. It is used to quantify attitudes, opinions, behaviours and other defined variables and generalise the results from a larger sample population (Bogdan & Taylor, 1990). Mixed methods research is a methodology for conducting research that involves collecting, analysing and integrating quantitative (e.g. experiments, surveys) and qualitative (e.g. focus groups, interviews) research.

Mixed methods research has become increasingly used and accepted as a research approach to conducting research in different disciplines such as social sciences (Felizer 2010, Bryan & Bell 2011). Leedy and Ormrod (2013) attribute the acceptance, growing popularity and the wide use of mixed methods in social sciences to motives such as completeness, a complimentary approach, triangulation, the resolution of puzzling findings and the development of appropriate research tools and strategies. Similarly, Punch (2009) targeted its ability to combine methods in a way that derives complementary strengths and non-overlapping weaknesses as the fundamental rationale for the use of the mixed methods approach in research.

Johnson and Onwuegbuzie (2004) describe seven data analysis stages that are involved in mixed methods research. (1) Data collection such as the use of thematic and factor analysis and (2) data display that involves the use of lists, tables, charts and graphs. (3) Data transformation where quantitative data is transformed into narrative data while qualitative data is converted into numerical codes which can be represented by statistics. (4) The data correlation of both sets of data followed by (5) data consolidation where both data sets are combined to create new consolidated variables or data sets. (6) Data comparison is then performed on both data sets and is finally integrated into either a coherent whole or two separate sets. (7) The mixed methods research approach has been encountered by some criticism.

Leedy and Ormrod (2014) note that combining the two methodological traditions is a challenging task. Cresswell (2014) also notices that the mixed methods approach has further been criticised as being tedious, cumbersome, expensive and time consuming due to its extensive data collection. In order to overcome the proceeding challenges, this study undertook prior planning for the field work.

3.5 RESEARCH DESIGN

Research design refers to the procedures for research that strike the decisions from broad assumptions to detailed methods of data collection and analysis (Cresswell, 2003). It represents the structure of the investigation and the procedural plan or blueprint for the collection, measurement and analysis of data, and facilitates the flow of research operations (Kothari, 2004; Kumar, 2011). Punch (2009) defines research design as a description of the strategy and framework from whom and how the data is collected and analysed. This study adopted a survey research design because it allows for many types of approaches. Bryman (2006) observed and noticed that survey research can be conducted from both quantitative and qualitative perspectives and ideas. As this study adopted a mixed method research design that combined the quantitative and qualitative approaches, a survey design was used to achieve the research objectives.

It was concluded that the best method to adopt for this investigation was the mixed methods approach, as a bigger number of data was achieved and analysed quantitatively. Results from the quantitative approach helped to properly reflect the overall population of doctors and professional nurses, whilst the results from the qualitative approach provided a richer understanding of the doctors and professional nurses studied (VanderStoep & Johnson, 2009). The study used the qualitative method to seize and represent the data solicited from the staff of doctors and professional nurses through the use of interview questions.

One advantage of this approach is that it provides a rich understanding of how individuals think and feel, thus leading to better triangulation. According to Cohen, Marion and Morrison (2009), triangulation may be the use of two or more methods of data collection in the study of some aspect of human behaviour. Triangulation was used to clarify meanings and verify interpretations. In other words, the use of an interview helped to map out and explain the rich data derived from the research participants. It also helps to achieve accuracy with data analysis.

3.6 STUDY SITE

The study will be conducted in the KwaZulu-Natal Province in Prince Mshiyeni Memorial Hospital and King Edward VIII Hospital. The motive behind doing the study in the said hospitals is because King Edward is classified as an urban hospital and Prince Mshiyeni is regarded as a

rural hospital. Therefore, it will be vital for the researcher to receive data from both rural and urban hospital staff. This information will be crucial for further analysis.

3.7 TARGET POPULATION

According to Magenda (2008), the population of a study refers to the entire group of individuals or a set of objects or cases which are the focus of the research whose characteristics the researcher seeks to study. Cooper and Schindler (2008) also describe 'population' as a total collection of elements about which one wishes to make inferences. In this study, the target population comprised of the Head of Departments of Medicine, doctors and professional nurses at King Edward VIII and Prince Mshiyeni Memorial hospitals. The researcher chose to apply the qualitative method when embarking on the study in question. The target population of doctors and professional nurses in the eThekwini health district equals one thousand and six hundred. The researcher focused on the doctors and professional nurses working at King Edward VIII and Prince Mshiyeni Memorial hospitals under the eThekwini health district. There were five doctors and ten professional nurses interviewed on different dates. Therefore, the total number of participants will be 15 healthcare practitioners in the eThekwini health district. The rationale behind being to find out the factors that cause doctors and professional nurses to leave. In other words, the study is trying to assess the factors casing doctors and nurses to leave the eThekwini health district.

3.8 SAMPLING METHODS

There are various methods of sampling that can be used when conducting research. Depending on the objectives of the research, sampling allows a researcher to achieve their aims and objectives. Sampling is the process of selecting a number from a population that will be representative of the total population (Polit & Hungler, 1999). A sample is any part of a population of individuals from whom information is selected (Fraenkel & Wallen, 2009). It is the actual population of individuals from which data is obtained. A representative sample according to Densocombe (2014) allows a researcher to draw valid conclusions regarding the total research population. Sampling helps to achieve greater precision in determining sample size and to avoid bias in selecting the sample (Kumar, 2005). Babbie (2007) further described a sample as any ration of the population.

In this research, purposive or judgemental sampling was used which is a non-probability sampling technique in which, according to Cooper and Schindler (2008), a researcher chooses participants

for their unique characteristics, experiences, attitudes or perceptions. Saunders, Lewis and Thornhill (2009) attribute the strength of the purposive sampling technique to its ability to enable the researcher to select cases that are most suited to answer the research questions. Cohen, Manion and Morrison (2007) argue that purposive sampling addresses the real purpose of objectives of discovering and gaining insight and understanding into a phenomenon.

3.8.1 Sample Size

Saunders, Lewis and Thornhill (2009) describe sample size as a group that is a subset of the population of interest. According to Cooper and Schindler (2008), data collected from samples can be used to draw inferences regarding a population without examining all its members, hence the economy of time, effort and money. Eligible for this research were the doctors and professional nurses working at King Edward VIII and Prince Mshiyeni Memorial hospitals under the eThekwini health district.

3.9 DATA COLLECTION METHODS

This study adopted structured interviews which are often used in the qualitative method to confirm the results that develop from various methods of data collection, analysis and interpretation (Harris & Brown, 2010). The researcher had an interview with each participant and, as an introduction, preliminary issues of confidentiality assurance were highlighted and emphasised. Participants were told to express their views openly and freely, as everything discussed was strictly confidential. Each interview took at least 30 to 40 minutes. Finally, the participants were thanked for having contributed and answered all the research questions.

3.10 DATA QUALITY CONTROL

The most important thing to do in research is to ensure that the data collection methods used to measure should effectively assess in order to ensure quantitative discourse reliability and validity. For qualitative research, trustworthiness and credibility are observed. Reliability and validity assessments are regarded as the first step towards understanding complex issues of measurement in theoretical and applied research settings (Litwin, 1995). Reliability is concerned with the extent to which an experiment test or any measuring procedure yields the same result on a repeat trial. This can take various forms, including retesting (Litwin, 1995). For the purposes of this research, to ensure reliability, the respondents were interviewed in a private boardroom in each hospital.

Validity is defined as the extent to which the concept, conclusion and/or measurement is well-founded and corresponds accurately to the real world. In other words, some may refer to validity as the ability of the credibility and believability of the research result (Litwin, 1995). Validity can take two forms: internal and external validity. For the purposes of this research, external validity will be used which concerns itself with generalising the result beyond the immediate study.

The trustworthiness of qualitative research is usually questioned by the positivist. This may be because the concept of validity and reliability cannot be addressed and sorted out in the same way in natural science. It is also a known fact that trustworthiness is vital in research to make sure that both validity and reliability are observed (Shenton, 2004). According to Shanton (2004), the quality's criteria to achieving and ensuring trustworthiness is the one to be used in qualitative research. It is better for the purposes of this research because the suggested criteria also includes credibility. There are four points that must be complied with. They are as follows:

Credibility means doing the following according to Guba in Shanton (2004):

- Adoption of appropriate, well-recognised research methods;
- Development of early familiarity with the culture of the participating organisations;
- Random sampling of individuals serving as informants;
- Triangulation via the use of different methods, types of informants and sites;
- Tactics to help ensure honesty in informants iterative questioning in data collection dialogues;
- Negative case analysis;
- Debriefing sessions between researcher and superiors;
- Peer review of project;
- Use of 'reflective commentary';
- Description of the background, qualifications and experience of the researcher;
- Member checks of the data collected and the interpretations/theories formed;
- Thick description of phenomenon under scrutiny; and
- Examination of previous research to frame findings.

Transferability – The provision of background data to establish the context of the study. A detailed description of the phenomenon in question to allow comparisons to be made.

Dependability – The employment of 'overlapping methods.' An in-depth methodological description to allow the study to be repeated.

Confirmability – Triangulation to reduce the effect of investigator bias. The admission of the researcher's beliefs and assumptions. Recognition of the shortcomings in the study's methods and their potential effects. An in-depth methodological description to allow the integrity of the research results to be scrutinised. The use of diagrams to demonstrate the 'audit trail'.

The above criteria by Shanton (2004) provides guidance to follow in this study in order to make sure trustworthiness and credibility are achieved.

3.11 DATA ANALYSIS

Data analysis consists of a number of interconnected processes that help to summarise the gathered data and to organise them in such a manner that provides responses to the research questions (Kothari, 2004). There are so many principles and strategies that must be observed when dealing with data analysis. According to Mar Iman (2001), when doing data analysis, the researcher must be as follows:

- Objective;
- Accurate;
- True;
- Able to separate facts and opinion; and
- Able to avoid wrong reasoning argument.

Furthermore, before a researcher becomes careful of the above facts, he/she must first understand the goal of analysis, though it may differ from one researcher to another. Mar Iman (2001) believes that the goals of data analysis are:

- To elucidate cause and effect phenomena;
- To relate research with the real world;
- To forecast the real world;
- To seek and obtain answers to a particular problem;
- To recommend conclusions regarding real world events based on the problem; and
- To learn a lesson from the problem.

In this study, the analysis of data was done through thematic analysis since the researcher had chosen a qualitative research approach in conducting this research study.

3.12 QUALITATIVE DATA ANALYSIS

Qualitative data was gathered using the structured interview schedule that was analysed through thematic content analysis. Structured interviews allow for the thematic analysis of the qualitative data (Anil & Charatdao, 2012). According to Cohen, Manion and Morrison (2007), data analysis involves organising, accounting for and explaining the data. In other words, making sense of data in terms of the participants' definitions of the situation, noting patterns, themes, categories and regularities. Terre Blanche and Kelly (1999) stipulate that data analysis involves reading through data repeatedly and engaging in activities of breaking the data down (thematising and categorising) and building it up again in novel ways (elaborating and interpreting). Engaging with the data requires a constantly close exploration of the themes. Data analysis also involves carrying out the elaboration of the data. Terre Blanche and Kelly (1999) argue that elaboration has a purpose which is to capture the finer distinctions of meaning not captured by an original, quit possibly crude, coding system.

The norm is that when data is collected through interviews, focus groups, observations and/or documentary analysis, content analysis will be used to analyse it. Content analysis is defined as a procedure of the categorisation for the purposes of classification, summarisation and tabulation. When one analyses data qualitatively, the information is coded and classified. This enables one to make good sense of the information received from the participants or respondents. Furthermore, to clarify things, the researcher followed the content analysis steps as follows: Copied and read through the transcript. Crafted brief notes in the margin of interesting or relevant information that was found;

- Went through the notes made in the margins and listed the various types of information found;
- Read through the list and categorised each item in a way that offered a description of what it was about;
- Identified whether or not categories could be linked in any way and listed them as major categories or themes and/or minor categories or themes;

- Compared and contrasted the different major and minor categories;
- If there was more than one transcript, the first five stages were repeated for each transcript;
- When one had accomplished the above with all the transcripts, all the categories or themes collected were each examined in detail and its fit and relevance was considered;
- Once all the transcript data was categorised into minor and major categories or themes, they were reviewed in order to make sure that the information was categorised into minor and major themes as they should be;
- Reviewed all the categories and established whether some categories could be merged or linked or if some of them needed to be sub-categorised; and
- Went back to the original transcripts and ensured that all the information that needed to be categorised had been done.

Qualitative research can describe the magnitude and distribution of change whilst qualitative research gives an in-depth understanding of the social, political and cultural context. Mixed methods, therefore, assists the researcher to triangulate the findings which could strengthen validity and increase the utility of the work researched.

3.13 ETHICAL CONSIDERATIONS

The researcher informed the participants that he/she would like to audio tape the interviews so as to be able to focus on the interview without taking notes. The researcher also asked permission to use the tape recorder for the above purpose. Ethical issues, such as respect, confidentiality and informed consent, were addressed. The researcher assured the participants that only he/she would have access to the information that they have shared in the consent forms. Ethical approval for this research was granted by the University of KwaZulu-Natal. The gatekeeper's letter from the office of the Head of Department of Health in KwaZulu-Natal was obtained.

3.14 CONCLUSION

This chapter highlighted the detailed research methodology adopted for the study. The next chapter presents the data collected from the participants as proposed in the study.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION OF FINDINGS

4.1 INTRODUCTION

This chapter will focus on the process of collecting data from the research participants. The expected responses are from 15 participants. The data collected will be analysed in detail. This chapter deals with the analysis and presentation of the data collected though fieldwork for the purposes of the study. The specific objectives for the study include the root causes influencing the turnover rate among doctors and professional nurses, the perception of the participants, their insight into the matter in question and their inputs. It will also focus on how the recruitment and retention strategies are being implemented by the Department of Health to ensure that the nursing and medical staff is kept in service for a long time. Subsequently, a conclusion would have to be drawn regarding this study. The research project will make recommendations based on the findings and conclusions drawn from the responses of which could be considered by the Department of Health, either provincially or nationally, should they deem it fit to do so.

4.2 PROFILE OF THE RESPONDENTS

The demographic characteristics of the respondents featured in the study include gender, age, marital status, nationality, race, ranks, classification and service.

Gender of the respondents

- Ten (10) female participants or respondents were interviewed for the study.
- Five (5) male participants or respondents were interviewed for the study.

Age of the respondents

- The ages of the female participants or respondents were between 25 and 55 years.
- The ages of the male participants or respondents were between 25 and 51 years.

Marital status of the respondents

- Seven (7) of the female participants or respondents interviewed were married.
- One (1) female participant or respondent interviewed was single.

- Two (2) of the female participants or respondents interviewed were divorced.
- Five (5) of the male participants or respondents interviewed were married.

Nationality of the respondents

- Nine (10) of the female participants or respondents interviewed were South African.
- One (1) female participant or respondent interviewed was a Nigerian citizen.
- Four (4) of the male participants or respondents interviewed were South African.

Race of the respondents

- Six (6) of the female participants or respondents interviewed were African.
- Two (2) of the female participants or respondents interviewed were white.
- Two (2) of the female participants or respondents interviewed were Indian.
- One (1) female participant or respondent interviewed was coloured.
- Three (3) of the male participants or respondents were African.
- One (1) male participant or respondent interviewed was white.

Ranks of the respondents

- Eight (8) of the female participants or respondents interviewed were professional nurses.
- Two (2) of the male participants or respondents were professional nurses.
- One (1) female participant or respondent interviewed was the chief specialist.
- Four (4) of the male participants or respondents were Grade 3 medical officers

Classification of the respondents

- Six (6) of the participants or respondents worked in the general ward and were professional nurses.
- Four (4) of the participants or respondents operated in the specialty ward and were professional nurses.
- One (1) participant came from the paediatric ward and was a medical officer.
- One (1) participant worked in the obstetrics and gynaecology clinic and was a medical officer (doctor).
- One (1) participant worked in the oncology department and was a medical officer (doctor).

- One (1) participant was stationed at the orthopaedic department and was a medical officer (doctor).
- One (1) participant worked in internal medicine and was a medical officer (doctor).

Service of the respondents

The service of the participants ranged from four to twenty years in public health facilities.

4.3 PRESENTATION OF DATA

The analysis and presentation of the data collected, through personal or person-to-person interviews, were in terms of the following:

- demographic data of the respondents
- gender of the participant
- age of the participant
- marital status of the participant
- nationality of the participant
- race of the participant
- rank of the participant
- service of the participant

The table below clearly illustrates the nature of the participants that the researcher interacted with when conducting the research interviews.

Table 4.1: Nature of the Participants

Participant	Gender	Age	M/Status	Nationality	Race	Ranks	Classification	Service
P1	F	32yrs	M	SA	White	P/N	Speciality	7yrs
P2	F	27yrs	M	SA	African	P/N	General	5yrs
P3	M	28yrs	M	SA	African	P/N	General	8yrs
P4	F	28yrs	S	SA	African	P/N	General	6yrs
P5	F	33yrs	Divorced	SA	Indian	P/N	Speciality	9yrs
P6	F	30yrs	Single	SA	Indian	P/N	General	8yrs
P7	F	28yrs	Divorced	Nigerian	African	P/N	Speciality	5yrs
P8	M	26yrs	M	SA	African	P/N	General	5yrs
P9	F	35yrs	M	SA	African	P/N	Speciality	9yrs

P10	F	31yrs	M	SA	Coloured	P/N	General	8yrs
P11	M	38yrs	M	SA	African	M/O grade3	Paediatric Ward	10yrs
P12	M	44yrs	M	SA	White	M/O grade 3	O&G	13yrs
P13	F	55yrs	M	SA	White	C spec	Oncology	20yrs
P14	M	51yrs	M	SA	Indian	M/O grade 3	Orthopaedic Ward	19yrs
P15	F	45yrs	M	SA	African	M/O grade 3	Internal Medicine	18yrs

The letter P above represents 'Participant'. So, P1, for instance, stands for Participant 1.

- From the above table, it must be noted that the researcher interviewed ten female participants.
- Nine of whom were African and one Nigerian female.
- The ages of the female Africans interviewed ranged from 25-45 years.
- Eight females were from the nursing fraternity and two female participants were from the medical profession.
- There were five male participants interviewed.
- All five of them were African and were between 25-55 years of age.
- Ninety-eight per cent (98%) of the participants interviewed were married. There was only one (1) single as well as one who was divorced.
- Seventy per cent (70%) of the professional nurses worked in the general ward and 30 per cent operated their nursing responsibilities in speciality wards such as the intensive care unit (ICU), theatre etc.
- Seventy per cent of the participants were African in nationality. Twenty per cent were white in nationality. Eight per cent were Indian and two per cent were coloured.
- All the nursing staff interviewed were professional nurses.
- The years of service of the participants interviewed range from 5-20 years.
- The participants' ranks vary in terms of seniority (i.e. some are professional nurses, Grade 1, 2 and 3, and some are medical officers, Grade 2 and 3).
- There was only one chief specialist interviewed.

4.4 PARTICIPANTS' RESPONSES TO THE RESEARCH QUESTIONS

The study attempted to answer the following research questions:

- What are the intrinsic factors influencing the turnover of doctors and professional nurses in the eThekwini health district?
- What are the extrinsic factors influencing the turnover of doctors and professional nurses in the eThekwini health district?
- What are doctors and professional nurses' attitudes regarding turnover intentions in the eThekwini health district?
- To what extent does the turnover of doctors and professional nurses, impact on health service delivery in the eThekwini health district?

4.4.1 Participant No. 1

The first respondent or participant complained about a number of things but regarding the questions asked, she replied as follows:

i) *Poor salaries that are not attractive, conditions of service were not of the expected quality like the one in the private sector hospitals, there is always shortage of staff, no adequate incentives, overworked which kills the morale and oomph to commitment to work.*

ii) *Limited promotion opportunities, too much red tape when one is looking for an equipment to be procured.*

iii) *Some nurses have decided to cheat the system by moonlighting in the private hospitals, morale is low since there nothing motivating nursing staff to do their work better, no training courses because of no skills development budget, burnouts, late coming, long queues not attended to timeously by some nurses, resistance to anything being introduced.*

iv) *The impact is huge and will always be huge because the patients suffer a lot, some patients end up dying undeservedly, more litigation cases cropping up since stupid mistakes are made, discharging of patients early before full recuperation, unnecessary expenditure, infighting or conflict amongst staff or between management/ supervisors and employees, who in this case are nurses, resignations with no replacements, frustration among staff, long waiting hours.*

4.4.2 Participant No. 2

i) *no personal growth, nurses do not get opportunities to further their studies like the other professions and that is why nurses end up leaving the service for personal growth elsewhere, conditions of service were appalling, duty roster uneven, supervisors don't understand the problems of the workers doing work on the ground, meagre salaries and overworked, poor management style,*

ii) *no medical equipment, staff shortages, poor infrastructure, no career path, favouritism when promoting staff, supply chain management processes are frustrating to procure a medical equipment.*

iii) *resignations since people are looking for greener pastures outside the public service, absenteeism increases, no job satisfaction at all, misunderstanding among staff as a result of different directives or instructions from seniors, taking of leave unnecessarily by nurses just to take a rest.*

iv) *many professional nurses leave the service either to private sector or to other hospitals in other provinces like Cape Town where remunerative is relatively better, resistance to change, patients die, no close supervision or monitoring of patients, frustrated staff or employees, absenteeism rises up,*

4.4.3 Participant No. 3

i) *personal growth is non-existent, moratorium on the filling of posts which results in no replacement and no filling of posts, overworked staff, boredom or fatigue, poor supervision, not caring superiors, payment of service benefits by human resources management department takes a long time, very poor service conditions all round etc.*

ii) *no adequate medical equipment, every time we are told by management there is no money, it is boring to hear that story year after year's like a buzzword now to say no budget for training or to do this or that in the department of health, supply management processes leave much to be desired, political decisions that makes life difficult to work, etc.*

iii) most nursing staff decide to decide to absent themselves from work and do moonlighting, not enough caring for patients, negative or confrontational behaviour develops among nurses or staff, conflict crops up, resignations become rife,

iv) the impact is quite massive and huge, some patients die, poor quality healthcare, demotivate and demoralised staff, exits and turnover of staff, people would relocate to more appealing places or greener pastures in the private sector or within the public sector but in other provinces where benefits are relatively better than in KwaZulu-Natal, long queues, cancellation of theatre cases, etc.

4.4.4 Participant No. 4

i) The future of the health professionals looks bleak in this current government, the working conditions are appalling, lack of support and resources for effective and efficient service delivery, overstaffing and less pay, meagre salaries, lack of incentives, poor management in the nursing department, too much work versus less staff.

ii) no sufficient resources and infrastructure, no attractive working environment, no medical equipment, one has to wait for a long time for an equipment to arrive, no career path, you are a professional nurse for many years without any promotion, favouritism in the appointment of higher posts being advertised, political connections play a role or it depends how close you are with your seniors.

iii) the attitude of staff is bad but caused by the existing contemporary situations, staff's morale is very low, absenteeism is high, burnouts, some nurses prefer to absent themselves and moonlight, cheating or manipulation of the health system, the shift roster is a headache, no incentives, payment of overtime is coupled by too much tax, one ends up not seeing the difference etc.

iv) staff exit the public service, they look for greener pastures, no healthy work environment, poor quality healthcare being rendered to some patients, infrastructure is another big problem, litigation cases grow because nursing staff are short-staffed and overworked, moratorium on the filling of posts kills everything, absenteeism, moonlighting of staff, fatigue.

4.4.5 Participant No. 5

i) poor salaries, working under difficult working conditions, no incentives paid to the hardworking staff, everybody is just treated the same come pay progression system effective from 1st July of each, loafers also get the average scoring, that demotivates the hard working class, working conditions appalling, nurses' salaries are low and that is why nursing leave, posts are not filled which results in the remaining staff be overworked, etc.

ii) people retiring, dying or resigning are not replaced, shortage of medical equipment or delays in procuring medical equipment as a result of long cumbersome supply chain management procedures.

iii) very long queues, poor service delivery and healthcare services, patients end up staying longer in the hospital, conflict among staff.

iv) staff turnover rate high, more resignations and other kind of exits, staff begin to moonlight or do remunerative work outside the public service (RWOPS), nurses relocate to other provinces and some resign, outcry in communities regarding their relatives who are sick in the hospitals not getting satisfactory service delivery or healthcare from nursing, litigation cases increase, infight between nurses and doctors at times, long queues, the image of the healthcare or department of health gets tarnished by poor service delivery, the impact is massive, staff leave the service, etc.

4.4.6 Participant No. 6

i) personal development, poor salaries are a problem, the price of commodities grow up all the time and the cost of living is not consistent with the cost of living, I don't feel motivated to pursue my nursing profession in the light of the poor working conditions we work under, poor management, one tries to report to management and management fails to reason with the nursing staff, lack of incentives for hard-working staff, moratorium on the filling of posts by the department of health is the main cause for nurses to leave the province, it becomes a problem when vacant post are not being filled etc.

ii) poor old infrastructure, supply chain management processes make it hard to procure medical equipment or resources, one would wait for a long time for a medical instrument to arrive, infrastructural problems, working conditions not appeasing, high risk or danger allowance not paid to nurses etc.
iii)negative attitude, absenteeism of staff is high, demoralised workforce, etc.

iv) the attitude obviously is an issue because of the shortage of staff, patients have to wait for a long time in long queues, resignations or staff turnover increases because people fail to cope, litigation cases become higher, anger and frustration among staff develops, performance appraisal system causes staff's attitude to be negative, they lose a sense of belonging and tend to neglect every instruction that comes higher authority, boredom or fatigue and the like, finally the prestige or image of the department of health is always tarnished by the negative publicity, litigations increase and skewing the budget of health even more further, the nursing staff then leave the service, etc.

4.4.7 Participant No. 7

i) we get a raw deal from the employer in that we get paid peanuts, poor working conditions, limited promotion opportunities, meagre salaries, burnout because of shortage of staff, overworked individuals, the department cannot fill the vacant positions even when a nurse has died or retired I mean it's so bad to work under those conditions, new changes after the other make us feel scared and uncertain about our future, limited promotion opportunities, not enough incentives, personal growth is another factor since there isn't any in the department of health, etc.

ii) lack of medical and protective resources for instance no masks during the lockdown period as a result of coronavirus pandemic and yet we were expected to deal with the patients that might have been infected by the disease in question, cumbersome tedious supply chain management procedures to procure medical goods are a big problem, etc.

iii) bad attitude as a result of overworked staff, posts not being filled leaves a vacuum in terms of staff, staffing norms not alright, poor attendance of staff, absenteeism of staff, burnouts, long queues, cancellation of patients' appointments or unreasonable appointments being given to patients e.g. a patient would be told to come back in August 2021, conflict among ourselves and

doctors sometimes in front of patients, some doctors have a tendency of despising us in front of patients, management not playing the ball with the nurses, come hard on us etc.

iv) the imperatives of the department of health are never adhered to, the impact is huge in that resignations, exits increase, demotivated and demoralised workforce as a result of posts being not filled when they a vacated, staff turnover increase, people leave the public service for greener pastures, some change their careers, litigation cases increase, boredom, nurses exit the system etc.

4.4.8 Participant No. 8A

i) scarce promotion opportunities, limited career path, salaries are not attractive to recruit and retain more staff, working conditions are appalling, no enough budget all the time, performance appraisal fails to retain nurses to stay within the public service, not enough incentives, poor management because they fail to understand what happens in the coalface of things, the future of the public service is bleak regarding the nursing profession, etc.

ii) the moratorium on the filling of posts is a challenge to nursing staff because they end up being depressed, overworked and experiencing burnouts, no adequate medical equipment, financeé department would always tell us about the supply chain management processes that are long, you have medical problem now but one can's fix it now because of the SCM procedures, lack of modern infrastructure etc.

iii) long queues, patients stand in those long queues, patient appointments delayed, conflict and confrontational attitude among staff, litigation cases increase, negligence and carelessness, poor quality healthcare service to patients, patients stay longer and sometimes shorter in the hospital bed, arrogance among staff to patients, unruly untoward behaviour to patients.

iv) the impact is huge, it dents the image of our institution and the department of health as a whole, more complaints from the communities are received, negative publicity by the relatives or patients themselves on the kind of services they receive become surprisingly higher, nursing profession is tarnished, the moratorium on the filling of posts makes it very hard for us to function, it becomes a challenge to recruit new staff, etc.

4.4.9 Participant No. 8B

i) poor salaries being paid to us, post is not filled when vacated, one becomes a professional nurse without any upward movement meaning no promotion opportunities, payment of service benefits take time coupled with heavy tax, management style not acceptable, limited promotion opportunities, moratorium on the filling of vacant position is a curse to the department, overworked staff, etc.

ii) no sufficient medical equipment to render healthcare services to patients, takes too long to procure medical goods, poor working conditions and lack of infrastructure, etc.
iii) attitude is sometimes bad, staff is short tempered and become impatient easily, long queues, conflict among professional nurses and doctors in front of patients, confrontational behaviour, uncompromising workforce, resistance to changes and management, etc.

iv) resignations by staff become he order of the day, staff turnover rate increases, moratorium on the filling of vacant positions make the workload to be performed, relationship between management and nurses become sour because there would be many mistakes, inefficiencies, late coming loafing, sick leave reports, moonlighting in the neighbouring private hospitals, increase in the number complaints to the Chief Executive Officer (CEO) or Nursing Manager and the Public Relations Officer (PRO), resistance to any change, lack of confidence among staff, litigation cases increase, the image of the hospital gets dented, becomes a mammoth task to recruit new staff, staff leave the resign, conflict among staff, confrontational behaviour and attitude, I don't care attitude becomes glaringly visible among staff, doctors become harsh to the nursing staff in front of the patients, the shouting behaviour and so on.

4.4.10 Participant No. 9

i) personal growth and development, nurses are not being recognised by the government, why they do give us better salaries, meagre salary paid to us despite the workload we face almost every day, nobody recognises that, poor working conditions make it worse, shortage of nurses, posts are not filled when they are open, sometimes nurses are made to perform the work that is not in their job description like dishing food for the patients when there is shortage of staff, that I blame it on poor management and abuse of power by the superiors, scarce resources to do our work, no good

working conditions despite the danger that our lives is faced with on a day to day basis, no thank you from management, etc.

ii) the moratorium on the filling of posts, political decisions sometimes discourage us and make us think the future is bleak and uncertain, no enough medical equipment, infrastructure too old and must be revamped, improvement of service benefits is done centrally by the Department of Public Service and Administration and we do not have a say, unions are biggest betrayals because they do not fight for the nurses, medical resources are always scarce just look at the shortage of masks and sanitizers during the coronavirus pandemic and lockdown, we are not protected and yet we are expected to do so much with lives, it is a total health risk, it is frustrating to realise that the hospital or department does not care about our lives, long procurement of goods procedures, etc.

iii) depressing and stressful working environment leads to conflicts, negative attitude is obvious, resistance by staff, conflict behaviour, rude behaviour, nurses are sick and tired of attending to long queues of patients and yet there is a shortage of them, finger pointing or blame game is sometimes noticed among staff when there had been a mistake in treating of a patient, confrontational behaviour between doctors and nurses as well as patients, untoward treatment of staff in general, etc.

iv) the image of the department is dented by negative publicity in some newspapers, number of litigations cases increases, poor or inefficient quality healthcare to the patients, nursing profession is denigrated, we receive lot of insults from staff, management is not happy with the performance of nurses, nurses exit the system for greener or better pastures, poor quality of healthcare to patients, etc.

4.4.11 Participant No. 10

i) instead the other categories are given opportunity to do so, that frustrates the nursing staff, hence some leave the service to look for greener pastures, personal growth, nurses are not afforded opportunities for personal growth low salaries paid to the nurses, nurses are less recognised by the department of health, if a nurse has made a mistake she is immediately taken to task but if it is a doctor that committed the same mistake that would be condoned by management, bleak future, less or no promotion opportunities, career path is non-existent, non-filling of vacant post is a big

challenge, shortage of staff results in burn-outs, less incentives, poor management of the department as a whole, lack of resources is a challenge, overtime performed is paid 2 to 3 months after we performed it, this frustrates nurses, lack of recognition, finance department always report that medical goods order is underway but we would have to be patient because of the supply chain management that are too long, one cannot fix the problem immediately because of the SCM procedures, it is frustrating everybody, some equipment would come after every one has forgotten that it was ever ordered, infrastructure is too old and the department must renovate it to make it to be more attractive to recruit new employees, etc.

ii) poor infrastructure, shortage of medical equipment, etc.

iii) the attitude of staff is negative, patients wait in the long queues, patients are given unreasonable appointments like a year ahead, some appointments are being cancelled because of inadequate beds, it's negative publicity on the other hand that make nursing staff to be arrogant, resistance to change, poor work performance by some staff, confrontational attitude among staff, no smiles to the patients sometimes, waiting times guidelines are not being met, wrong medicines end up being given to the patients resulting in litigation cases, norms for the nurse per patient ratio are not adhered to because of the shortage of staff.

iv) patient care suffers or service delivery suffers, communities complain every day, there is negative publicity in most of the newspapers about the healthcare falling down in the public hospitals, number of litigation cases begin to increase, the department of health budget skewed further making difficult for the healthcare facilities to function, nursing profession is tarnished, communities lose confidence and trust on public sector institutions, we, nurses, are always blamed, demotivated and demoralised employees, staff decide to leave the service, some do moonlighting, absenteeism rate becomes high, nurses would submit medical certificate from medical practitioners claiming they were ill and yet they were moonlighting, the remaining nurses would carry the can and there would be burnouts, fatigue and dissatisfaction, etc.

4.4.11 Participant No. 11

i) lack of job satisfaction due to poor management style, too many programmes, doctors are frustrated by a combination of many factors inter alia, too much red-tape or bureaucracy, no medical equipment for us to execute our responsibilities, scarce resources, the supply chain management process is a killer, one waits for ages, some doctors leave because of poor, working

conditions, salaries are not an issue to us as doctors but we feel we should be allowed to perform remunerative work outside the public service (RWOPS), lack of support from either hospital management or Head Office, it would seem like does not have a clear understanding of clinical responsibilities doctors do, the frustrating part of it is that every year we gather together to prepare the strategic and operational plans based on our needs and only to find that when the budget comes it is not aligned to our needs, it is always less or under-budgeted right from the beginning of the financial year, we cannot fill post because of the moratorium on the filling of posts vacant, that frustrates, poor management places a role in this, etc.

ii) ordering or procurement and replacement of medical equipment is always a problem, that frustrates doctors, a doctor has a patient to treat but would be let down by the tools to execute his or her job forcing the doctor to book a patient for the next 6 months or so, it's not nice at all to do that, sometimes other patients demise before the appointment date, the supply chain management, if possible, must be shortened, or be replaced by another better system.

iii) the attitude of staff is sometimes not that better, uncooperative behaviour and some resistance to some staff but it is manageable, frustrating to find yourself teaching the people all over again, workload increases stress, etc.

iv) patients' safety is compromised, the impact is pathetic and has bad reflections on the department of health as a hole, department pays a lot of money for litigation cases and that drains the coffers of the department more, people sometimes make silly mistake because they are short-staffed and they are faced with a number of patients, they get receive negative publicity sometimes for something that is beyond reproach, moratorium on the filling of vacant posts compounded the problem, doctors are fed up and they leave the public sector hospitals, they get frustrated by the system and feel let down by the lack of support from Head Office, as we speak we don't have an organogram that will enable us to fill posts in our clinical departments, the situation is bad, it is poor reflection on the department of health, doctors leave to the provinces which offer RWOPS unconditionally and without restrictions. The situation must be improved in order to allow us to recruit more doctors, infrastructure adds up on the negative, the Head Office structure is too big, perhaps it needs to be smaller to allow for more money to be given to the health facilities to render

the quality services to the communities that will be in consistent with the principles of Batho Pele, patients first in this case, etc.

4.4.12 Participant No. 12

i) poor working conditions, job satisfaction is the factor, red-tape system, lack of support from management sometimes, moratorium on the filling of vacant post is a factor for doctors to leave, doctors have so many challenges and one of them is the lack of medical equipment to execute their responsibilities, shortage of staff is a problem, doctors end up working for more hours than necessary which further results to fatigue, which is usually linked to a medical condition or health problem. It may also be its own chronic condition known as myalgic encephalomyelitis (ME)or chronic fatigue syndrome (CFS), no support staff, a doctor would always need a person to do housekeeping duties, a doctor needs to be assisted, doctors leave because of lack of support, etc.

ii) because it takes too long for Head Office to approve the procurement process, it takes to long for the supplier to provide the medical equipment and that is a challenge, it frustrates the whole system, doctors end up cancelling the patient's appointment which again reflect not good to the department and leads to negative publicity, etc.

iii) the attitude of staff towards staff is negative unfortunately, patients end up suffering and waiting in long queues unattended, there is sometimes confrontational and arrogant behaviour among staff, waiting time target or norm cannot be met because of the staff shortage, the situation is tense, etc.

iv) the impact leaves much to be desired, it reflects badly on the department of health and public sector health facilities, more deaths, a number of litigation cases increase drastically resulting in milking the hospital budget that is already not enough, staff end up leaving for greener pastures or to the private sector health facilities, it becomes a challenge to attract more new doctors to join the public sector institutions, etc.

4.4.13 Participant No. 13

i) lack of job satisfaction due to poor management and supervision, no career pathing, the work load is unbearable, remunerative work outside the public service, poor working condition, they are appalling,

ii) poor infrastructure, no medical equipment, too many programmes with poor co-ordination and support, staff shortages, political decisions impacting negatively on healthcare services.

iii) depressing and stressful environment, unconducive work environment, have to teach new employees all the time because of the staff shortages or turnover of staff, increased workload.

iv) massive damage to the healthcare system, poor quality of healthcare, patient's' safety incidents, increase of litigation cases, department loses money to the claimants, too much mistakes, negative publicity to health care facilities, reputational damage to the department of health, conflict among staff members, resignations with no replacements, frustrations.

4.4.14 Participant No. 14

i) no happiness at the workplace, poor infrastructure, lack of job satisfaction due to poor management and lack of support, inadequate medical resources are a problem, too much workload, working for long hours causes boredom or lead to boredom, burnouts.

ii) no medical equipment, supply chain management route to procure a medical equipment is frustrating and should be taken off the system, no doctor would like to work in an old infrastructure, moratorium on the replacement of vacant positions frustrates doctors, staff shortage is huge.

iii) stressful environment, confrontational behaviour, long patient's queues, the World Health Organisation doctor to patient's standards not followed, aggressive behaviour, more silly mistakes leading to litigations.

iv) the patients' safety is compromised, the impact is huge because doctors just resign and go elsewhere without any replacement, more workload to the remaining doctors, litigation take place

and the department loses billions of money on such cases, poor reflection on the medical profession, reputational damage and son, crisis management, recruitment of new doctors become a challenge.

4.4.15 Participant No. 15

i) poor infrastructure, non-existent of job satisfaction due to poor management and supervision, too much workload which causes doctors to work for unbelievably long hours, long hours of work result in fatigue and restlessness, hopelessness.

ii) no medical equipment for us to carry out our clinical responsibilities, working in a very old infrastructure, clinical programmes not financially supported.

iii) negative attitude, depressing environment, long queues leading to untoward behaviour of staff, unnecessary cancellation of patients' appointment with the doctors, aggression, dissatisfaction, resistance, unruly behaviour, conflict.

iv) poor quality of healthcare to patients, reputational damage to the healthcare profession, criticism and negative publicity by newspapers, number of litigation cases increase, loss to the department, no confidence in the healthcare system in the public sector, the non-replacement of vacant posts forces doctors to leave because some cannot cope with the workload, causes stressful working conditions due to the shortage of staff, working long hours is killing doctors' patience, more doctors decide to leave the public sector institution, RWOPS not allowed in the department and yet other provinces allow it makes doctors to move away, insufficient budget year after year is another factor for doctors to leave, etc.

4.5 DISCUSSIONS AND ANALYSIS OF THE RESPONDENTS' RESPONSES

All the participants or respondents (fifteen of them) were interviewed as planned. In other words, 100 per cent of the participants or respondents were interviewed as initially intended.

- 100 per cent of the participants attributed, among other things, reasons for the high turn-over rate of doctors and professional nurses to poor, appalling conditions of service saying that they left much to be desired. They mentioned emphatically that they worked under stressful and depressing conditions. They were overworked and worked long hours. They had to attend to

many patients. The doctor-patient ratio or quota was never adhered to by the Department of Health.

- 100 per cent of both the doctors and professional nurses complained about the staff shortages. The hospital management and head office were blamed for their lack of support and the introduction of a moratorium on the filling of vacant posts. The attrition rate was high and people leaving were never replaced because of the inadequate budget by the Department of Health. All the participants felt they did not receive full support from either hospital management or head office. The non-replacement of people leaving was cited as the most extrinsic factor influencing the turnover rate of doctors and professional nurses. Some doctors and professional nurses would resort to exiting the public sector system to look for better opportunities elsewhere.
- 33 per cent of the respondents attributed the high turnover rate of doctors and professional nurses to the lack of job satisfaction. There are no incentives to recruit and retain the new staff. In other words, they felt that there were no recruitment and retention strategies even though they knew they were on paper. That was one of the intrinsic factors influencing the high turnover rate of doctors and professional nurses in the eThekwini health district.
- 100 per cent of the participants or respondents blamed the high turnover rate of doctors and nurses on the poor infrastructure saying that it was too old to attract and keep them within the system. This is why some of them exited the system. The buildings needed to be revamped or modernised to cater for modern patients or society. The buildings were too old to work in.
- 47 per cent of the respondents or participants attributed the high turnover to personal growth and career progression or pathing saying that one becomes a professional nurse until retirement and that there was no personal growth. It was noted that the 33 per cent came from the respondents who were nurses and participants who were doctors.
- 53 per cent of the participants or respondents attributed the turnover rate to meagre salaries being paid to them by the government despite the introduction of the occupation specific dispensation (OSD) introduced in 2007. The assumption is that doctors supplement their salaries by claiming commuted overtime which is about 33 per cent that is added to their monthly salaries. Perhaps that is the reason why the doctors never mentioned this factor.
- 100 per cent of the respondents mentioned the unavailability of medical equipment as a major setback and turnover extrinsic factor influencing doctors and professional nurses to leave the public service. They mentioned that it was very challenging and demeaning to find that there

was no medical equipment to execute particular medical treatments. It was frustrating to borrow the medical equipment from neighbouring health facilities. This was blamed on management.

- 100 per cent of the respondents attributed the supply chain management processes as too tedious and cumbersome to procure medical resources. The processes are too long and need to be replaced by a shorter supply chain management system. One participant waited for a long time to procure medical equipment which was frustrating for doctors and nurses alike.
- 86 per cent of the respondents cited the increase of the litigation cases due to staff shortages and working under pressure. The long working hours performed by both the medical and nursing staff was another intrinsic factor influencing the turnover of doctors and nurses. Some would succumb to the unnecessary pressure and made careless mistakes leading to litigations. The Department of Health would end up losing a lot of money on such litigation cases. Respondents felt that those mistakes could be avoided if there was adequate staff. People leaving the service must be replaced according to the respondents. The respondents did not anticipate that this challenge of litigation cases would come to an end if doctors and nurses were forced to work under such stressful conditions. The problem would thus continue.
- 20 per cent attributed the turnover rate of doctors and nurses to a lack of training. Each time they applied to attend workshops or courses, they were told that there was not a skills development budget. They would work in their facilities to excel in terms of work performance. This forced some doctors and professional nurses to exit the system. Some provinces were encouraging their staff to attend courses or workshop related to their professions, but KwaZulu-Natal had no skills development budget to do that according to the participants or respondents. This was frustrating for nurses and doctors alike.
- 47 per cent of the respondents or participants mentioned poor management and supervision as one of both the intrinsic and extrinsic factors causing doctors and professional nurses to leave the service. Some managers or supervisors had no idea of what was happening within the health facility according to some respondents. Some managers or supervisors were output-orientated according to the participants. They just demanded service delivery and turned a blind eye on stressful and depressing working conditions. This caused some doctors and nurses to leave the service. After their departure, they were not replaced.
- 100 per cent of the respondents or participants mentioned the poor quality of patient healthcare as the end result or impact of all the abovementioned factors. All postulated the damage or

impact as being huge. The impact is costly to the Department of Health and its reputation. It is even a poor reflection on the ruling party according to the participants.

- 86 per cent of the respondents submitted that the employees' attitude is negative because of working under stressful and depressing conditions. Conflict among staff is often observed. Sometimes, conflict between some doctors and professional nurses in front of the patients is disturbing and undermines the medical and nursing professions.
- 46 per cent of the respondents mentioned a lack of promotion opportunities as the cause for the turnover of some doctors and professional nurses in the public service. They cited that when posts are advertised, they are 'earmarked' for certain individuals. The process is followed but it is just a formality. Some staff, when they notice this kind of practice, are demotivated and demoralised and decide to leave the public service.
- 13 per cent attributed the turn-over of doctors and nurses to political interference or decisions which impact negatively on service delivery. These participants mentioned that some politicians meddle in the administration of the health facilities which has a negative impact on service delivery. Some doctors and nurses get frustrated and leave the service.
- 45 per cent of the respondents complained about spending long hours on duty which results in fatigue which is another reason why medical and nursing staff leave the public service.
- Ten per cent of the respondents attributed the stopping of remunerative work outside the public service (RWOPS) as a factor for doctors leaving the service. They alluded to the fact that they were aware that ROWPS have since been re-introduced. One must apply for permission to perform RWOPS before he/she can do so. Some doctors left and were not replaced. In other provinces within the same country, they were never stopped.
- 47 per cent of the respondents or participants attributed the high turnover rate of doctors and professional nurses to a lack of incentives. The department only implements the pay progression system every July of each year. This is not enough because everybody, including the slow workers, get it. It is demotivating for the hard workers according to the respondents. Other incentives like bonuses for outstanding performance are not payable in the department according to the participants. They felt the department is not doing enough to incentivise the workers to keep up the good or outstanding work.
- 80 per cent submitted that the impact is that of reputational damage to the department and society. The community loses trust in the Department of Health. The trust between the health

department and community is broken. A patient no longer prefers to utilise the public sector health facilities but rather prefers to go to private sector institutions.

- 100 per cent of the respondent or participants complained about the negative, aggressive and confrontational attitude of some staff towards each other either among doctors and professional nurses or health professionals and patients. This was one of the factors influencing the turnover of doctors and nursing staff.
- 93 per cent of the respondents or participants spoke about the litigation cases that are costing the department millions of rand because people are working under stressful and depressing conditions which leads them to make careless mistakes. Mistakes which are costly to the department because the claimants win such cases in court. The Department of Health is always found guilty and cannot defend such cases.
- 45 per cent of the respondents or participants attributed the factor of bureaucracy to the high turnover of doctors and professional nurses. This factor could be associated with long tedious supply chain management processes according to the respondents. This is because when a health professional needs medical equipment, it takes a long time to procure the equipment. There are many committees or persons that must sign a submission to procure medical equipment. Doctors and professional nurses are frustrated by this and leave the service.
- 60 per cent of the respondents or participants mentioned negative publicity as another factor that influences the high turnover of doctors and nurses in the eThekwini health district. It is not palatable to be in the news for the wrong things at all times. It is a poor reflection on the profession and they are blamed. They fail to cope and succumb to the pressure. They decide to leave the eThekwini health district which is a public sector institution. They do this to protect their dignity and profession. In the face of many people, they are seen as failures.
- 80 per cent of the respondents or participants spoke about the unnecessary cancellation of patients' appointments as one of the factors influencing the high turnover of doctors and professional nurses in the eThekwini health district. Dates to see the patients are set by the doctors under the impression that all the medical tools will be available on the set date. When the date arrives, the doctor realises there is not enough medical equipment to treat the patient and he/she cancels the patient's appointment. The patient is given another date which frustrates them. The doctor or nurse is then seen as a person that does not know what he/she is doing. Thus, some doctors and nurses exit the public service. They feel that the procurement or supply chain management system let them down.

- 60 per cent of the respondents or participants complained about the lack of budget in the department. The respondents are told at the beginning of a financial year that there is no money. According to the respondents, this demotivates and frustrates them because it is something that is out of their control. In other words, it is an extrinsic factor. This kills morale and they then decide to leave the service.

4.6 PRIORITISATION OF THE PARTICIPANTS' RESPONSES

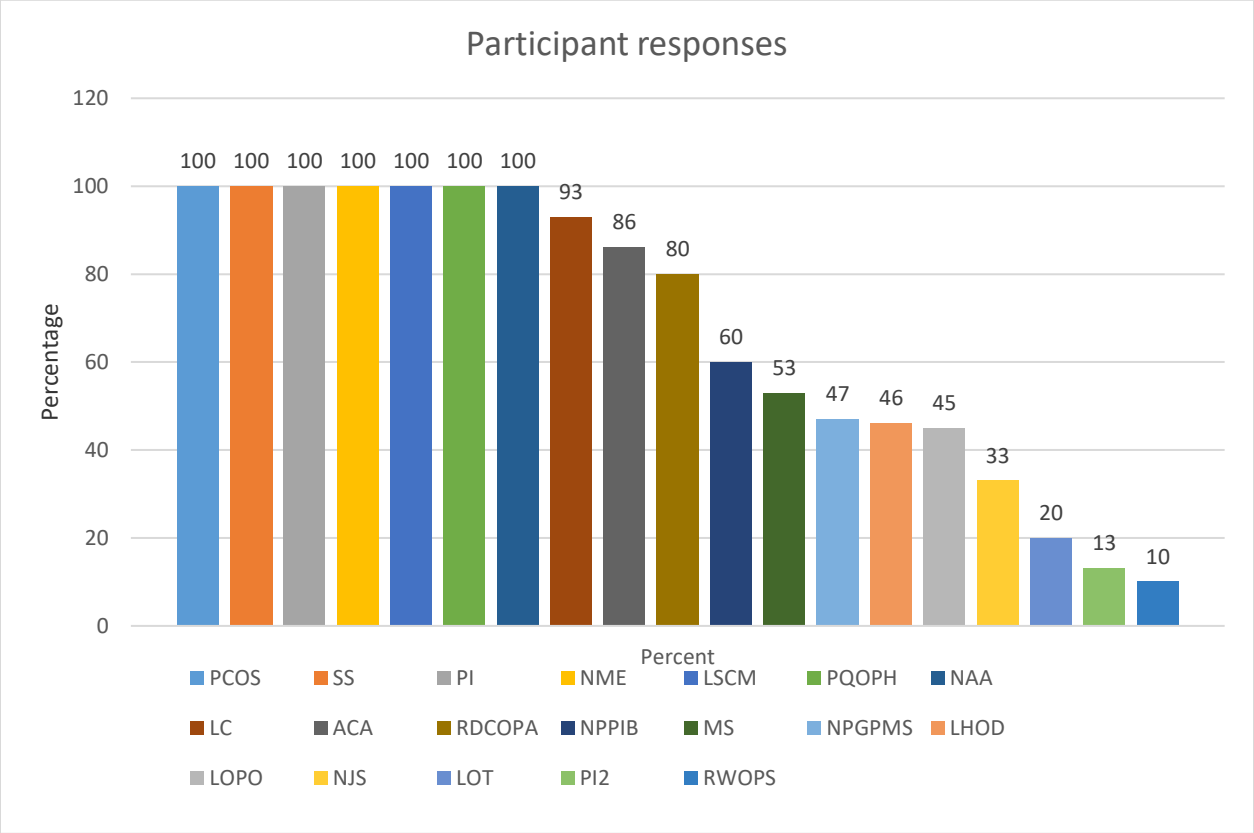
The researcher prioritised the participants' responses in a descending order as follows:

- One hundred per cent (100%) of the participants unanimously agreed that the factors influencing the turnover rate of doctors and professional nurses include poor conditions of service, shortage of staff, poor infrastructure, no medical equipment, long tedious supply chain management, poor quality of patient healthcare and negative, aggressive as well as confrontational behaviour or attitude of the staff.
- Ninety-three per cent (93%) of the participants attributed the turnover rate of the staff as a result of the increasing litigation cases which affect the budget of the department.
- Eighty-six per cent (86%) of the participants or respondents highlighted the adversary conflict attitude towards patients or among fellow staff members as the motive behind doctors and professional nurses leaving the service.
- Eighty per cent (80%) of the participants submitted that the impact of the turnover rate of doctors and professional nurses was the reputational damage of the Department of Health. The cancellation of patients' appointments leaves communities complaining.
- Sixty per cent (60%) of the participants mentioned negative publicity and insufficient budgets to run institutions as factors influencing the high turnover of doctors and nurses.
- Fifty-three per cent (53%) of the participants or respondents raised the issue of meagre salaries. It is not an attractive salary that would keep them within the public service despite them working long hours under stressful conditions. It was noticeable that this kind of factor affected the nursing staff and not the medical staff.
- Forty-seven per cent (47%) of the participants or respondents mentioned that there was no personal growth, poor management and supervision and a lack of incentives. It seems as if everybody is treated equally when it comes to rewarding staff in terms of the pay progression system because everyone (hard and slow workers included) gets an average score.

- Forty-six per cent (46%) of the participants or respondents raised the issue of the lack of promotion opportunities at the workplace. It is discouraging to remain in the same level or grade over a long period of time. They felt that the government was not doing enough to create more senior positions for them to get an opportunity to move upwards.
- Forty-five per cent (45%) of the participants spoke of long working hours and bureaucracy in supply chain management processes. They wait too long for medical equipment which is frustrating.
- Thirty-three per cent (33%) of the participants submitted the lack of job satisfaction at the workplace as one of the factors which drive doctors and professional nurses to leave public sector institutions. One cannot be satisfied with what he/she does every day (i.e. boredom).
- Twenty per cent (20%) of the participants or respondents attributed the factor of training at the workplace to better one's day-to-day duties. There were no training courses arranged for the staff to develop their skills because of the lack of a skills development budget which causes doctors and professional nurses to leave the service.
- Thirteen per cent (13%) of the participants submitted that political interference on administrative issues was one of the factors that led to doctors and professional nurses leaving the service. Some political decisions negatively affect service delivery. For an example, the imposition of a moratorium on the filling of posts cripples service delivery at a ground level. If there is not sufficient staff, the work will suffer. They claimed there should be a separation between politics and administration. They boldly asserted that politics should be left to the politicians and administration left to the administrators or managers.
- Ten per cent (10%) of the participants raised the issue of Remunerative Work Outside the Public Service (RWOPS) claiming that the Department of Health once stopped it and were aware that it has since been re-introduced. Doctors complained that RWOPS was another way of supplementing their salary during their own leisure time. Some doctors just decided to leave because of the non-availability of RWOPS. It was also interesting to note that this factor did not affect nurses.

The chart below clearly explains and illustrates all the participants' responses during the interview sessions. It also indicates their performance in terms of percentage.

Fig 4.1: Participants' Responses



The abbreviations on the chart represent or stand for the following:

- PCOS – poor conditions of service
- SS – staff shortage
- PI – poor infrastructure
- NME – no medical equipment
- LSCM – long supply chain management
- PQOPH – poor quality of patient healthcare
- NAA – negative aggressive attitude
- LC – litigation cases
- ACA – adversary conflict attitude
- RDCOPA – reputational damage and cancellation of patients' appointments
- NPPIB – negative publicity and insufficient budget
- MS – meagre salary
- NPGPMS – no personal growth, poor management and supervision

- LOPO – lack of promotion opportunities
- LHOD – long hours of duty
- NJS – no job satisfaction
- LOT – lack of training
- PI – political interference
- RWOPS – remunerative work outside the public service

Personal observation

It became clearly during the interviews with the participants that some nursing staff would manipulate the leave management system by claiming to be sick and perform duties in neighbouring private hospitals (i.e. moonlighting) during that period. When they resumed duties, they would produce the proper medical certificate covering their absence from duty. This, as a result, led to a greater workload for the loyal nursing staff left behind at the healthcare facilities.

If the service benefits are not paid on time by the HR department, doctors and nurses grow frustrated (i.e. payment of allowances and overtime). They end up leaving the system. Some nursing staff are in possession of the speciality qualification but because of the insufficient number of speciality posts, they are allocated to general wards where salaries are relatively low. They end up giving up and leaving the healthcare facilities.

Certain nursing staff would prefer not to be rostered to work during the day because working during the days is not coupled with incentive like working during the night because there is night duty allowance. Nurses performing night duty benefit from the night duty allowance payment which supplements their salaries. If they are made to work during the day, some decide to exit the public healthcare facilities.

Some nursing staff would request or apply for permission to do further training (bridging courses) and the department would disapprove the applications. Alternatively, the nurses would strive to do further training with private nursing schools and when they produce their qualifications after the completion thereof, they are not translated to professional nurses. The health institutions would translate those nurses who were trained by the department and the other nurses become frustrated

and demotivated and leave the institutions. When they leave, posts are not filled because of the moratorium regarding the filling of posts.

Some nurses and doctors would prefer to emigrate and look for greener pastures without any valid reasons. In the exit interviews, they would write 'personal reasons' for leaving the eThekwini health district hospitals. The motive is to obtain experience by working overseas or in private sector hospitals. Thus, the turnover rate or statistics drastically increase.

4.7 QUALITATIVE ANALYSIS

This section examines the results from the qualitative data collected from the respondents. Four structured interview questions were utilised to establish qualitative information. The motive behind the interview questions was, primarily, to drive and support research objectives. The study was intended to explore the following objectives:

- To determine the intrinsic factors influencing the turnover rate of doctors and professional nurses in the eThekwini health district;
- To assess the extrinsic factors influencing the turnover rate of doctors and professional nurses in the eThekwini health district;
- To evaluate doctors and professional nurses' attitudes regarding the turnover rate in the eThekwini health district; and
- To analyse the extent of the impact of the turnover rate of doctors and professional nurses in the eThekwini health district.

The responses from the structured interview questions were cited verbatim. This means that they were crafted as such without any alterations of the original statements from the participants. They were written in italics to avoid plagiarism. Concordant and corresponding material or responses have been consolidated and then analysed. Sekaran et al. (2014:62) posit that it is difficult to interpret data until the data is organised as well. Part of the data organisation process is to synthesise contradictory and dissimilar information into their different themes. The process of coding assists to clearly highlight or identify themes that emanate from the responses. In this study, the gathered extracts from the respondents' responses were collated and analysed.

The respondents cited a lack of job satisfaction and stressful working conditions as factors that influence the turnover of doctors and professional nurses in the eThekwini health district. This factor is supported by the article crafted by Abuhashesh et al. (2019) which states how to help the Jordanian industrial sector to minimise the amount of time and money currently spent on recruiting and training new employees due to the rapid employee turnover rate. This study aims to identify the factors which encourage employees to remain in their jobs for a long term as opposed to those that create negative sentiments, leading employees to quit. The factors under focus are wages, organisational culture, benefits, job satisfaction, stress, training and development, promotion prospects and job security. The study measures the impact of each factor on employee satisfaction.

Stressors have a major influence upon one's sense of well-being, mood, behaviour and health (Schneiderman et al., 2018). Certain characteristics of a situation are associated with greater stress responses (Kendler et al., 2003). Factors associated with the development of symptoms of mental health disorders include injury, damage to property, loss of resources, bereavement and a perceived life threat (McNally, 2003).

Lack of career development was mentioned as one of the reasons for employees leaving their jobs. This factor is supported by the literature which states that South African businesses are experiencing a general skills crisis by losing top talent or the knowledgeable workforce, also referred to as the 'brain-drain' (du Preez, 2002). These retention challenges in the contemporary world of work have led to a renewed interest in career development and factors that influence individuals' commitment to an organisation (Coetzee & Gunz, 2012). There is a need for further research that goes beyond merely supporting the career development of individuals. The need is for research involving the effect of employee development constructs on the success in the careers of workers (Maurer & Chapman, 2013).

4.8 SUMMARY OF ANALYSIS

From the above mentioned variables influencing the high turnover rate of doctors and professional nurses in the eThekwini health district, the Department of Health should indeed, study, scrutinise and analyse the research report in order to make an informed decision in terms of how to curb the challenges that it is facing. After the research report has been submitted to the Department of Health, it would be incumbent upon them to give priority to all the aforementioned challenges.

Priority should be given to the participants' responses, especially where all the respondents unanimously agreed on a particular factor. As a researcher, the suggestion is that the department pays attention to the 80-100 per cent ratio of the participants' responses. These call for urgent intervention strategies and plans to restore the reputation and image of the department.

It is not a secret that doctors and professional nurses are unhappy with some of the activities of the Department of Health. The recruitment and retention strategies should be reinforced and made appealing for new recruits to join the public sector health institutions. The participants' responses cannot be overemphasised and overlooked. Looking at the data analyses of the study, the Department of Health has a responsibility to address the challenges highlighted before it deteriorates. In conclusion, the objectives of the study were achieved. All the intrinsic and extrinsic factors were uncovered by the study. Beyond the attitude of the staff, the impact of all the challenges were revealed by the study. Hence, the research objectives of Chapter 1 were met.

4.9 CONCLUSION

This chapter has discussed and analysed the results of the findings, incorporating the literature and theories informing the study. The next chapter will discuss the conclusions and recommendations based on the primary study and literature review.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

The purpose of this chapter is to delineate the summary of findings as submitted by the research respondents, the conclusions that one would have arrived at after completing the data collection and analysis process and some recommendations and directions for future research. Overall, this chapter is to depict Chapters one to four collectively and to synthesise the contribution of this study through its conclusion. After the findings, conclusions and recommendations have been made, the Department of Health will hopefully consider the contents of the report, especially the recommendations aspect with an intention to implement them. Indeed, the department will have to be assertive and scrutinise what will best suit it for the betterment of its workforce. The recommendations are not exhaustive and the research findings, conclusions and recommendations are subject to scrutiny by the Department. It must be authenticated by the Department of Health. One is hopeful that the University of KwaZulu-Natal will also keep this confidential piece of research work in its archives for future reference by prospective students. It must be used as a source of information if it makes sense to both the university and Department of Health. By doing so, the future generation will be knowledgeable and can proceed from there.

5.2 OBJECTIVES OF THE STUDY

The main aim of the study was to examine the sources, causes and effects of the turnover of doctors and professional nurses in the eThekwini health district.

The objectives of the study were to:

- determine the intrinsic factors influencing the turnover rate of doctors and professional nurses in the eThekwini health district;
- assess the extrinsic factors influencing the turnover rate of doctors and professional nurses in the eThekwini health district;
- evaluate doctors and professional nurses' attitudes regarding turnover intentions in the eThekwini health district; and
- analyse the extent of the impact of the turnover of doctors and nurses on healthcare service

delivery in the eThekwini health district.

5.3 RESEARCH QUESTIONS

The study attempted to answer the following key questions:

- What are the intrinsic factors influencing the turnover of doctors and professional nurses in the eThekwini health district?
- What are the extrinsic factors influencing the turnover of doctors and professional nurses in the eThekwini health district?
- What are doctors and nurses' attitudes regarding turnover intentions in the eThekwini health district?
- To what extent does the turnover of doctors and nurses, impact on health service delivery in the eThekwini health district?

5.4 SUMMARY OF FINDINGS

Research findings will contribute to the body of knowledge in the resource planning literature on employee retention programmes and educate employers on the organisational benefits associated with a loyal, committed workforce. The benchmarks to be set by this study will assist employers in making informative decisions regarding the building of their human capital. The high turnover rate of healthcare professionals might be reduced, and productivity thus improved. The lack of support by head office was cited as one of the causes for doctors and professional nurses leaving the public service. The moratorium on the filling of posts by head office is one of the impediments that causes doctors and professional nurses to exit the system.

Doctors and professional nurses are often told that they cannot fill vacant posts by the local management. This is the reason why they are overworked. They are discouraged and demotivated, and thus leave the service. The moratorium on the filling of posts does not have an end date. Posts become vacant for a number of reasons but are never replaced. The remaining staff’s morale is very low. Some doctors and professional nurses move to other hospitals or provinces that do not have the moratorium on the filling of posts. Everything becomes a nightmare for the doctors and nurses as well as the executive management who remain.

A lack of training and development for doctors and professional nurses was cited as one of the causes for the high turnover rate. There is no skills development budget for the healthcare institutions to train and develop their staff. Each time the said category of staff applies to attend courses or workshops elsewhere, their application is not supported or approved because of the lack of a skills budget which destroys staff morale and they, in turn, leave the service. Thus, crippling service delivery and increasing the high turnover rate.

Some doctors submitted that due to the shortage of medical or clinical staff, they ended up making mistakes when performing their duties which resulted in litigation or medico-legal costs. They are sued by the affected families and the department loses money in medico-legal cases since they lose the cases in court. Doctors become discouraged and leave the public service. Thus, causing the high turnover rate amongst doctors and professional nurses. Medico-legal costs are counted in billions paid by the Department of Health.

Most doctors do not approve of the E-disclosure process introduced by DPSA stating that each public servant, including doctors, must disclose the number of assets he/she possesses. Doctors, through their union, South African Medical Association (SAMA), allege that they were not consulted on this and are reluctant to comply with this process. Some decide to leave the public service which increases the turnover rate of doctors. They posit that they cannot allow everybody to know about their private, personal life.

The non-payment of pay progression bonuses to employees after being assessed on their work performance in the Department of Health was identified as one of the causes of the high turnover rate of doctors and nurses. This happens despite the legal provision or authority to pay performance bonuses to employees that would have performed their duties outstandingly (DPSA, 2007). The other departments in the same province do pay performance bonuses to their staff, except the Department of Health. Some doctors and nurses find that as an excuse for them to leave public service healthcare institutions causing the high turnover rate.

Overall, staff morale is very low. Employees have developed a sense of low self-esteem and some have lost confidence in their day-to-day work because mistakes happen when delivering services to the public. There are no adequate incentives payable to the employees despite the long hours

performed by the workers, and staff shortages. Ultimately, the workforce is demotivated and demoralised, resulting in poor quality services. If the organisational leaders or managers do not take employee morale seriously or as a top priority, then the particular organisation may be at a disadvantage. Several studies have revealed that positive work cultures are more productive than those that are not (Zulkey, 2019). Where employees rate workplace culture, leaders cannot afford to ignore the benefits of happiness at the workplace.

The Health Department's processes and systems are still manual. The patients' information is still captured manually instead of been captured electronically on the system. There has been talk to introduce computerised data for many years but it has never taken off. As a result, the systems and processes are slow. The resistance to change might be the problem. The manual system is now obsolete and outdated. When one wants to extract any information, a particular file needs to be drawn out and that is time consuming. If the information was computerised, like in the private sector healthcare institutions, it would be easier to access particular information or data. Some doctors and professional nurses get frustrated by the system and decide to leave the service resulting in a high turnover rate increase.

Some doctors and nurses are frustrated by inadequate medical equipment for them to execute or their responsibilities. It takes too long to procure the medical equipment because of tedious and cumbersome chain management processes. For instance, a doctor would place an order for equipment, only to find that it will take three to four years for the equipment to arrive. It is worse if the equipment is from overseas. When the equipment arrives, there is no budget for it anymore. So, it means there would have to be a virement of funds elsewhere to pay for the equipment which would skew the budget of the department. Supply chain management processes in the Department of Health leave much to be desired. There are so many committees before authority or order numbers could be given to the successful bidder. The system is frustrating.

Poor management was one of the causes of the staff turnover rate increase. Some managers did not have a clue of how to manage people in terms of the allocation of staff, especially the nursing personnel. Performance appraisals were indeed lacking and improperly executed in the workforce, as slow workers would benefit from the pay progression. The motive being that some managers would give everyone average marks, even those who were underperforming, because they were

lazy or reluctant to motivate as to why they gave higher or lower scores. The best way to skip motivations would be for a manager or supervisor to give an average score since no motivation is necessary if an employee gets an average score. The hard workers would, in turn, be demotivated and staff morale would decrease.

There was no clear punishment for the underperforming employees. There were no consequences for the transgressors of regulations. Discipline for the employees was on the wrong side of the law and included long suspensions with full emoluments which ended up diluting the cases. Ultimately, the suspended individuals would emerge as winners. Justice delayed is justice denied, meaning that if legal redress is available for a party that has suffered some injury, but is not forthcoming in a timely fashion, it is effectively the same as having no redress at all. This principle is the basis for the right to a speedy trial and similar rights which are meant to expedite the legal system. It is unfair for the injured party to have to sustain the injury with little hope for resolution. Some hardworking doctors and nurses would lose hope and decide to leave the service when noticing this tendency. This also causes the existing staff to bear a greater burden of work. They are overworked and mistakes are likely to happen.

In each and every financial year, the budget is not adequate to fulfil all the service delivery requirements. This causes frustrations for doctors and nurses. Each time there is a post to be filled or any medical equipment to be procured, the answer from management would be that there are no funds which destroys staff morale. The budget by head office is not allocated according to the needs of each healthcare facility as laid out in the strategic plans. The budget on the compensation of employees is always on a negative. It is allocated in such a way that it does not even cater for the existing staff and that is why when posts are vacated during the current financial year, there are no replacements. This practice then defeats the purpose of the formulation of strategic and operational plans by health institutions.

Some doctors and nurses express their concern regarding the meagre salaries that they were earning despite the long hours of work. The overtime is paid in compensation of the hours worked over the normal official hours, but it is not enough. It is not retaining the medical and nursing staff. In 2007, DPSA introduced the Occupational Specific Dispensation (OSD) for doctors and nursing staff with revised higher salaries with the intention to keep medical and nursing personnel within

the system. This has proved to be ineffective because they are leaving the service regardless. The salary adjustment of public servants is, however, the responsibility of the Department of Public Service and Administration and not the provincial departments.

Some of the staff in question cited personal reasons for leaving and did not want to expand upon them or reveal more details. Some said that they left because the service conditions in the public service were appalling. Some went overseas or to other provinces in South Africa. Some simply moved to the private sector. The reality is that people will come and go. The scourge of employees leaving their employers does not only affect the eThekwini health district, but the country and world. Management should employ solid retention strategies.

5.5 CONCLUSIONS

From the employees' perspective, it can be concluded that employee turnover is not a natural phenomenon. There are reasons which lead to the increase in attrition. It is observed that both the external and internal factors are responsible for employee turnover. Among the external factors, the opportunity for growth and promotion outside the organisation, location and work-life balance are crucial. Among the internal factors, compensation. working hours, shifts, working conditions, relations with supervisors or managers, the opportunity to apply skills and workload are relatively important. From management's perspective, it can be concluded that the factors that lead to an increase in employee turnover are mainly in the internal factors of the organisation. Although the external factors also influence, management does not have any control over them, and can only focus on modifying the internal factors to enhance the recruitment and retention of the employees in the organisation.

The world is currently experiencing a workplace revolution due to the impact of digital collides with transformations in learning, social values, workers' expectations and other global trends. Like any revolution, there will be opportunities and challenges (advantage and disadvantages), risks and rewards and winners and losers. Despite much attention being placed on rapid developments or advancements in technology and their impact on the workplace, centre-stage in this workplace revolution are humans. People are at the very heart of the workplace, powering workplaces daily and propelling them onwards and upwards.

It is no surprise that organisations worldwide continue to grapple with the perpetual issue of employee retention. Managers ask themselves questions like: How do we keep our valued employees? How do we avoid the costly impact of the high turnover rate of employees? Hiring and retaining the best clinical staff is a massive challenge these days. The competition for skilled and talented clinical staff is at an all-time high. Millennials are renowned for their 'job hopping', as they look to accumulate experience as well as work out what they want to do long-term.

It is natural that the death trajectory of human beings would continue to improve given the fact that various illnesses emerge such as the coronavirus in China. Human beings are born and die every day. Therefore, the importance and cognisance of recruiting and keeping health professionals within healthcare facilities can never be emphasised. The powers that be should endeavour to implement progressive retention strategies that make doctors and nurses remain within the public sector institutions. From the discussions and analyses, it would be noted that certain factors that push away healthcare professionals could be avoided.

Sometimes there is no political will to ensure the recruitment of doctors and nurses. For example, the Member of Executive would at times interfere with the administrative recruitment of doctors and professional nurses. In that way, the hands of Chief Executive Officers of both the King Edward VIII and Prince Mshiyeni Memorial hospitals would remain tied. An example that could be cited is the placing of a moratorium on the filling posts that have been vacated. It would be difficult for senior managers to deliver services if the vacant positions of doctors and nurses are not filled for a long period of time, even if they were vacated during the current financial year.

The motive for introducing a moratorium on the filling of posts would be a lack of funds. It was apparent from the analysis that it could be attributed to poor planning. The other apparent conclusion was that there were no organograms. At other institutions, there are old organograms which are not adhered to or funded accordingly. This boils down to poor planning by the department as a whole. Thus, service delivery suffers. If few doctors and nurses are overworked, it results in a high turnover rate. Doctors and professional nurses leave the public service. Poor management was cited as one of the causes of the high turnover rate of doctors and professional nurses. The intrinsic factors need to be addressed and provided for at all times to retain staff.

The said healthcare facilities have embarked on the creation of strategic and operations plans, but those plans have become a 'white elephant' after being sent to Head Office for consideration. The plans are never funded which defeats the purpose of having the strategic and operational plan session within a particular financial year. Finally, such plans are never implemented by the institutions in question. Plans are done as a matter of compliance.

Some doctors and professional nurses cited late payments of service payments due to them by the HR Department which caused them to leave. This was coupled with poor conditions of service which are regarded as extrinsic factors. Some cited long hours of work with less pay. Absenteeism and burnouts were also some causes of the high turnover rate of doctors and nurses in the said healthcare facilities. These are the challenges that could be overcome and avoided in future. They are not insurmountable challenges.

Remunerative work outside the public service (RWOPS) is forbidden. Certain doctors like to practise medicine privately with private institutions or surgeries to complement their salary every month. The Department of Health decided to put a stop to this because some doctors were abusing this privilege. This was done regardless of the existence of the Public Service Commission Remunerative Work outside the public service policy formulated in 2004. They would be found doing the medical duties in the private hospitals whilst, according to the roster, they were supposed to be on duty in the public sector institutions. That caused unhappiness amongst staff and when the department pursued the necessary disciplinary measures against such doctors, they chose to leave the service. They resigned from service even when they were given the latitude to disclose the number of hours they would be working outside their normal hours of work or to indicate that they were performing RWOPS. They felt displeasure in that and resigned.

Some nurses like to 'moonlight' which often causes burnouts. They are then tired and fail to perform their public duties. They are also absent from time to time. The observation discovered that some nurses would use cunning ways to abuse or manipulate the system in that they would claim to be sick from the public sector institutions whilst working in private hospitals. When they resumed their duties, they produced sick notes from medical practitioners to cover the days of their absence from work. This then drives doctors to leave the public service and go to provinces where this practice is allowed, resulting in the high turnover rate of doctors and nurses.

Most of the departmental processes are still being executed manually which delays the finalisation process. The Fourth Industrial Revolution cannot be overlooked by the government. Processes have got to be done electronically to expedite the payment of service benefits and the allowances of employees. The Fourth Industrial Revolution is a term used to describe the digitalisation that is occurring across value chain processes in many organisations and companies. The Fourth Industrial Revolution has introduced the pervasive use of digital technology to manage, track and monitor every aspect of business processes.

The Fourth Industrial Revolution is underpinned by the increasingly pervasive use of the Internet of Things (IoT) and big data to enable better, smarter and more efficient business processes. This enables organisations to implement smart production systems and allows for horizontal integration across the entire value chain, through the networking of previously siloed business areas. When utilised effectively, the tools provided by the Fourth Industrial Revolution can uncover new opportunities for businesses that increase competitiveness and reduce risk. It is important and crucial for organisations to embrace these new technologies or they run the risk of being left behind.

Regarding the meagre salaries paid by government to the medical and nursing staff, very little can be done by the Provincial Department of Health because it is not the department's responsibility to increase or revise the cost of living adjustment. Submissions in the form of inputs requesting the revision of salaries could be done by organised labour to PSCBC for further deliberation.

5.6 RECOMMENDATIONS OF THE STUDY

The proper functioning of any public healthcare institution depends entirely on the strong political will from its ministry right through administration divisions. There needs to be a clear separation of responsibilities. Politics should be separated from administration although there is a thin line between the two. The Member of Council would be there to give a political direction to a department whereas the administration is mainly responsible for the execution and implementation of day-to-day duties in line with the relevant policies. Some healthcare professionals, because of no clear distinction between political and administrative roles, end up leaving the service resulting in a high turnover rate which creates confusion amongst managers and administrators.

The Department of Health should review the recruitment and retention policies to make them more attractive and effective in terms of curbing the high turnover rate of doctors and professional nurses. This must be coupled with subjecting managers to various effective leadership and management workshops to improve their skills. The recruitment of competent managers in the right positions should be reinforced. Managers that are well-trained would be able to manage and treat their workforce in a desired professional way. Poor management of staff leads to workers leaving the service resulting in a high turnover rate.

Strategic and operational plans should be reviewed annually. The monitoring of these plans should be done quarterly to establish if the desired targets are met. Management should be made accountable for the non-compliance of the said responsibility. Non-compliance should be punishable to keep service delivery on track. There should be consequences for management for dereliction of duties for any public servant.

Ideally, no institution should operate without the well-crafted organogram which has been costed and adequate funds provided for its implementation. Healthcare facilities should ensure that there exists a structure that will cater for the total number employees for each category, including doctors and professional nurses. Clear, key performance areas should be identified and stipulated for each post being created in the establishment. The main idea is to create a post according to a need and not a want. Work study (organisational, efficiency Services) officials would be responsible to execute the role of identifying the need for each post to be created in the establishment. The availability of the well-functioning organogram would enable managers to recruit and retain many doctors and nurses. Thus, the challenge of a high turnover rate would drastically decrease. The reality is that people will come and go, especially due to attrition or unpredictable circumstances like death, but it should not be difficult to replace such workers.

Regarding the poor provision of service benefits timeously to doctors and nurses, HR departments in the respective institutions should introduce control mechanisms for the flow of work in order for the service benefits to be paid on time. Sometimes, it would take a long time for the necessary documents to arrive at the HR department for processing from the relevant nursing and medical

departments. HR should monitor the control mechanism of effective timeous service payments. Communication between the departments within an institution should always be improved.

The HR department, through the Human Resource Managers, should give a report to executive management of all the exits and new appointments monthly. Such reports should be thoroughly analysed by Senior Executive Management to check if it is in line with the strategic plan or not within the healthcare facilities under the Department of Health. This observation was discovered, as some institutions are relatively bigger than the others with less staff. Some smaller institutions have unnecessary staff that does tally with the responsibilities assigned to them. For example, one finds the posts of the Chief Executive Officer, Finance Manager and HR Manager in the Community Health Clinic (CHC). The structure should be redone to delink all these management posts from the clinics. By doing so, the Department of Health might save a lot of money. Clinics should be linked to the hospitals and not be a standalone. In fact, the structure used to be like that and was subsequently changed which has now increased the compensation of employees.

The existence of District Health Offices is a waste of money since their role is minimal in the rendering of service delivery. There would be no need for a moratorium on the filling of posts if the District Health Offices were dismantled completely. Their existence is just a duplication of duty. The reporting channel of communication should be from the hospital to the Head Office, thus service delivery will be efficient and effective. Staff, including doctors and nurses working in those offices, would be relocated to institutions needing them. Hence, service delivery and high turnover will be curbed and addressed effectively. The department will save money by flattening the structure to avoid bureaucracy. Unnecessary delays in terms of documentation submission could be circumvented. This is the researcher's observation that it takes too long for a document from the clinic to reach Head Office for approval which affects service delivery.

The Department of Public Service and Administration Skills Development Act (1998) stipulates that for each budget given to an organisation, 15 per cent should be reserved for the Skills Development Budget for the training and development of staff. The purpose of the Skills Development Act is to develop the skills of the South African workforce in order to improve the quality of life of the workers, their prospects of work and labour mobility and the productivity in the workplace as well as the competitiveness of employers to promote self-employment (DPSA,

1998). It would be appreciated if the department could comply with this act. It is an obligation for every public sector institution to train and develop the workforce to better their service delivery. The non-existence or availability of skills development funds has been identified as one of the causes of doctors and nurses leaving the system. Therefore, the department must train and develop its workforce. The department has a retention strategy to do so.

The Department of Health should reinforce the policy on remunerative work outside the public service to doctors with the intention of recruiting and retaining them within public sector institutions. Other provinces are allowing doctors to do so. In fact, it is not illegal to practise medicine outside the public service whilst being employed by public sector institutions according to Public Service Commission on RWOPS (2004).

The department must provide a budget for the payment of performance bonuses in line with the provisions of the DPSA performance management system of 2007. It is quite disappointing that the Department of Health in the KwaZulu-Natal Province has never implemented this policy since it was introduced. Over and above, the department should try and implement policies on employee service benefits to motivate and keep them within the system. If proper planning, including the budget allocation process, was done, this challenge could be averted futuristically. The other challenges identified within the Department of Health are not surmountable.

The Department of Health should employ the following strategies: promote a healthy work-life balance among employees to boost their morale; invest in trust building; go beyond an open-door policy narrative; give teammates or colleagues a chance to interact outside the office; support and acknowledge employee-led initiatives and leaders should not overlook the power of small gestures (Zulkey, 2019). Employee morale boosts are an ongoing effort by management. In reality, morale is tended throughout the life of an organisation.

Communication strategies by the department should be strengthened and made efficient and effective. Communication is key. If there are changes that are work-related that might impact on employee performance such must be communicated to all the role-players, including doctors and professional nurses as well as organised labour. If any management decision is communicated to the employees at the right time, it likely to be owned by the workforce. The opposite is likely if

the decision or policy is imposed without proper consultation. An example to this effect could be the introduction of the e-disclosure of information to all workers. From the research, it was clear that the doctors were never consulted. Hence, there was and is resistance to comply.

In a democratic country like South Africa, the top-down approach does not work. Some doctors are refusing to complete and submit the e-disclosure forms to their employers because of the top-down approach. If proper consultation on this matter was done, there would not be a problem for the doctors to comply and co-operate. There are legal structures where matters of this nature are deliberated and concluded nationally called the Public Service Co-Coordinating Bargaining Chamber (PSCBC). In that structure, all trade unions, including SAMA, DENOSA and COSATU, are represented. Internally, the department must conduct workshops to introduce new changes and their impact on the workforce. Communication between Head Office and the healthcare facilities should improve since the core function of Head Office is to provide support services to the healthcare institutions.

The Department of Health will have to be pro-active in terms of introducing the Fourth Industrial Revolution concept or allow itself to remain behind. Processing patient information should be done electronically and kept on a computer system, not in files like it is currently happening. A lot of systems and processes need to be computerised to cope with the Fourth Industrial Revolution. Employees must be exposed to global digitalisation processes through workshops organised by the department, so that the workforce is familiar with the concept and the importance of the Fourth Industrial Revolution. Thus, the processes and systems in the Department of Health would be more effective and efficient. Staff may be tempted to stay within the department for longer years and by so doing, the reduction of staff turnover would take place. Service delivery would also improve. Therefore, the Fourth Industrial Revolution should be viewed as a positive by the department since it could be used as a staff retention strategy. Indeed, there must be a budget provided for this project.

Supply chain management processes should be reviewed to allow for the faster procurement of goods. Some doctors and nurses get frustrated by the system and end up leaving the department. Special attention should be paid to medical equipment procurement. It must be quicker to replace or purchase medical equipment. In any event, the core function of doctors and nurses is to treat

patients and if there is no equipment to do that, then the purpose of having them work in the hospital is defeated.

The expeditious finalisation of misconduct cases should be done by the Department of Health. There are policies for dealing with misconduct cases or unbecoming behaviour of employees, but the process of execution is too long or slow. It was caused by the appointment of Investigating Officers and Presiding Officers which took time given the parameters on which they should operate. It would be highly appreciated if the unit dealing with misconduct cases could be created and consist of its establishment at a central point (e.g. Head Office). That unit would be specialising in the misconduct cases in the entire KwaZulu-Natal Province. In other words, it must be centralised. The motive being that it is not easy to find the investigating and presiding officers. Some are scared of victimisation when dealing with misconduct cases which would have happened in the institution where they work.

The department should align its budget to the strategic and operational plans of the healthcare facilities in order for service delivery to be effectively realised. The department should try and source additional funds from the national treasury, if need be.

In the interest of quality service delivery, the moratorium on the filling of posts by way of appointment or transfers should be introduced as a last resort by the Department of Health. It should take into account some very critical clinical and non-clinical posts that a moratorium should not be placed on, irrespective of the inadequate funds or budget. An example here would be a doctor for a clinical post and a cleaner for a non-clinical post. The moratorium on the filling of management posts should never be applicable in order to ensure the smooth running of a healthcare facility. Provincial and national treasuries might be approached regarding the provision of an additional budget to fill the vacant clinical and non-clinical as well as management posts for effective quality service delivery.

5.7 SUGGESTIONS FOR FUTURE RESEARCH

This study uncovered a lot of factors mentioned from the sites specified above. However, it would be recommended if a similar study could be conducted nationally to establish if the high turnover rate of doctors and professional nurses is not a national impasse. This research was only confined

to the two healthcare institutions in the eThekwini district. The researcher would recommend that it is nationally pursued by the Provincial Department of Health to develop a picture of what is going on nationally regarding the high turnover rate of doctors and nurses.

It is an obvious reality that workers will come and go. Management and leaders must strive to have progressive recruitment and retention strategies in place. Global benchmarks should also be conducted to assess how other world health departments cope with staff turnover rates. Perhaps one could learn and find a befitting solution to this existing challenge of high turnover rates.

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Annexure A: Interview Schedule

Interview Schedule

I, Howard Sihle K Hlongwa (214582444), am a student at the University of KwaZulu-Natal studying for a Master of Public Administration. I am conducting a research on the topic "Assessing factors influencing high turnover rate of doctors and professional nurses in eThekwini Health District".

The main purpose of the study is to understand the intrinsic and extrinsic factors as well as the impact of such to service delivery. Your participation through availing yourself and taking time to respond to interview questions will be highly appreciated.

Interview Questions

1. What are the intrinsic factors influencing turnover rate of doctors and professional nurses in eThekwini Health District?
2. What are the extrinsic factors influencing turnover rate of doctors and professional nurses in eThekwini Health District?
3. What are doctors and professional nurse's attitudes regarding turnover intentions?
4. To what extent does the turnover of doctors and nurses impact on Health service delivery in eThekwini Health District?
5. How often does turnover of doctors and nurses take place in a particular financial year?
6. How does management or seniors react to higher turnover rate of doctor's and professional nurses?
7. What, in your opinion, could be the solution to the current turnover rate?

Annexure B: Informed Consent

UKZN HUMANITIES AND SOCIAL SCIENCES RESEARCH ETHICS COMMITTEE (HSSREC)

APPLICATION FOR ETHICS APPROVAL
For research with human participants

Information Sheet and Consent to Participate in Research

Date:

Greetings,

My name is **Howard Sihle Hlongwa** (214582444) from 73 Fiona Street, Mobeni Heights, Durban, 4092 shlongwa693@gmail.com. 082 591 0967 mobile.

You are being invited to consider participating in a study that involves research on assessing the factors influencing high turnover rate amongst doctors and professional nurses in eThekwini Health District. The aim and purpose of this research is to understand the intrinsic and extrinsic factors influencing turnover rate of doctors and professional nurses in eThekwini Health District and provide recommendations as well as solutions thereof. The study is expected to include fifteen (15) participants. The sites for the research will be King Edward hospital and Prince Mshiyeni hospital in the eThekwini District. It will involve the following procedures: An interview between the researcher and the respondent for about 20-25 minutes each. The respondent will be given the confidential ethical consent form before being interviewed. The duration of your participation if you choose to participate and remain in the study is expected to be 20-25 minutes. There is no funder for the study.

The study may involve the following risks and/or discomforts time management, unavailability of participants due to unforeseen circumstances etc. I hope that the study will create the following benefits like mutual understandings of root courses of turnover, provision of the possible solutions to the scourge by both the Department of Health and the future University students. It will be the source of information to the future University students. The researcher must disclose in full any appropriate alternative procedures and treatment etc. that may serve as possible alternate options to study participation.

If the research could potentially involve risk, explain in full if compensation exists for this risk, what medical and/or psychosocial interventions are available as treatment, and where additional information can be obtained.

This study has been ethically reviewed and approved by the UKZN Humanities and Social Sciences Research Ethics Committee (approval number_____).

In the event of any problems or concerns/questions you may contact the researcher at (provide contact details) or the UKZN Humanities & Social Sciences Research Ethics Committee, contact details as follows:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION
Research Office, Westville Campus
Govan Mbeki Building
Private Bag X 54001
Durban 4000 KwaZulu-Natal, SOUTH AFRICA
Tel: 27 31 2604557 Fax: 27 31 2604609
Email: HSSREC@ukzn.ac.za

Your anonymity will be maintained by the researcher and the School of Management, I.T. & Governance and your responses will not be used for any purposes outside of this study.

All data, both electronic and hard copy, will be securely stored during the study and archived for 5 years. After this time, all data will be destroyed.

If you have any questions or concerns about participating in the study, please contact me or my research supervisor at the numbers listed above.

Sincerely

Howard Sihle Hlongwa

Annexure C: Editor's Letter

Celine Lourens

57 Somerset Country Estate
450 Queen Elizabeth Avenue
Westridge, Berea
Durban
4091

078 905 8517

Lourens.r.celine@gmail.com

6 September 2020

Letter of Editing

This report serves to state that the dissertation submitted by ***Howard Hlongwa*** has been edited.

The dissertation was edited for errors in syntax, grammar and punctuation. The in-text referencing system used has also been edited along with the bibliography.

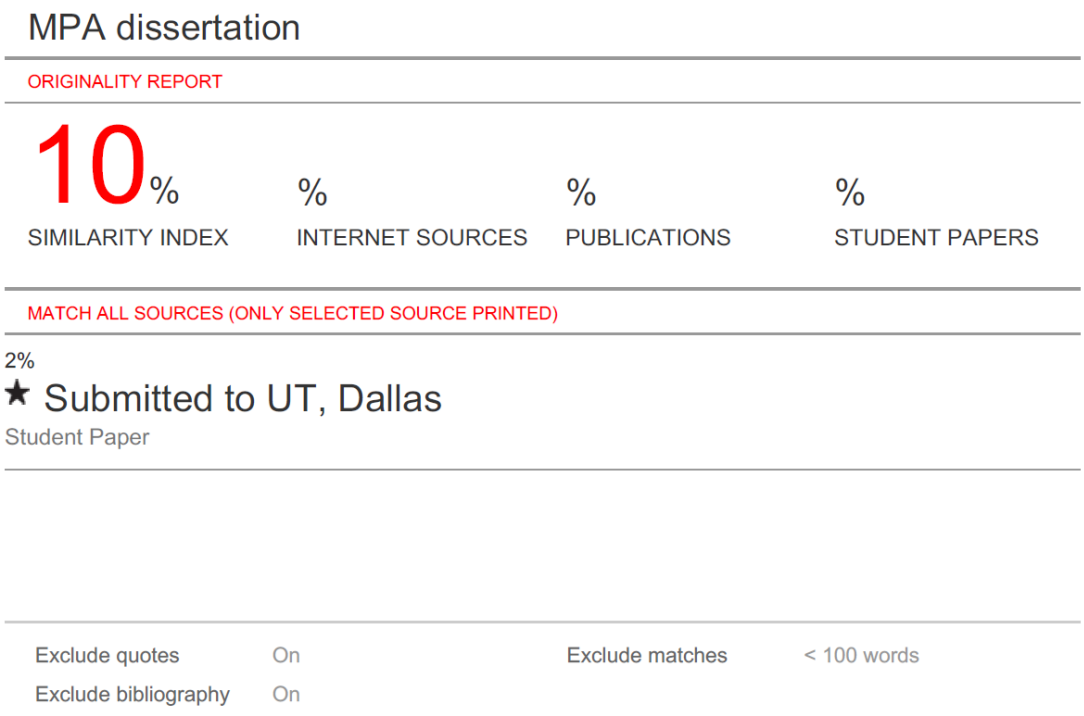
The edit will be regarded as complete once the necessary changes have been made and all the comments have been addressed.

Thank you for your business.

Yours sincerely,

Celine Lourens

Annexure D: Turnitin



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Annexure E: Ethical Clearance

22 May 2020

Mr Howard Sihle Kwenzakufani Hlongwa (214582444)
School Of Man Info Tech & Gov
Westville Campus

Dear Mr Hlongwa,

Protocol reference number: HSSREC/00000940/2020
Project title: Assessing the factors influencing high turnover rate amongst doctors and professional nurses in eThekwini Health District.
Degree: Masters

Approval Notification – Expedited Application

This letter serves to notify you that your application received on 10 January 2020 in connection with the above, was reviewed by the Humanities and Social Sciences Research Ethics Committee (HSSREC) and the protocol has been granted **FULL APPROVAL**

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number. PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

This approval is valid until 22 May 2021.
To ensure uninterrupted approval of this study beyond the approval expiry date, a progress report must be submitted to the Research Office on the appropriate form 2 - 3 months before the expiry date. A close-out report to be submitted when study is finished.

All research conducted during the COVID-19 period must adhere to the national and UKZN guidelines.

HSSREC is registered with the South African National Research Ethics Council (REC-040414-040).

Yours sincerely,