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MODERATING EFFECT OF PERCEIVED ORGANIZATIONAL SUPPORT ON THE INFLUENCE OF STRATEGIC HEALTH AND SAFETY PRACTICES PRACTICES ON EXTERNAL LABOUR MOBILITY IN PUBLIC LEVEL FIVE HOSPITALS IN KENYA

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ABSTRACT

Human resources for Health are a strategic asset in the implementation of the universal health care coverage and their motivation, attraction and retention is instrumental in attaining the set goals and objectives. The objective of this study was to investigate the influence of strategic health and safety practices on external labor mobility in public level five hospitals in Kenya. The study adopted the mixed research design method involved a variety of analytical methods. Heinrich's Domino theory was used to explain the relationship between the variables under study. The study targeted a population of 4,388 medical officers and nurses in the fourteen public level five hospitals in Kenya, from which a sample of 353 respondents were selected using stratified random sampling methods while purposive sampling technique was used to select the eight (8) public level five hospitals representing the former provinces in Kenya. Quantitative data was analyzed using both descriptive and inferential methods. The findings of this research indicated that strategic health and safety was not a significant predictor of external labour mobility. The study recommended that the Government of Kenya (GoK) and the County Governments should offer sponsorship programs to the human resources for health; provision of personal protective equipment/gear and adequate working conditions to protect themselves against occupational diseases and loss of life; formation of health and safety committees in the health facilities. Future researchers should focus on other strategic human resource management practices influencing external labour mobility especially on generational groups.

Key Words: *Health and Safety Committees, Health and Safety Inspection, Provision of Equipment and Lighting, Leadership in Health and Safety*

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INTRODUCTION

Human resources for health (HRH) are a strategic asset in the accomplishment of the Universal Health care coverage as envisioned in the Kenya Vision 2030 and their motivation, attraction and retention is paramount for attainment of goals and objectives both at the national and county level (Kenya Kwanza Manifesto on health, County Integrated Development Plan (CIDP) and as per the Governors' health manifesto) (Makhamara et al., 2017)

The high external labour mobility experienced in the health sector ought to be contained by the management of health institutions in Kenya in liaison with the Ministry of Health since it has affected the quality of services offered (total quality management), low employee morale and affective commitment. Increased training costs for new recruits, recruitment/advertisement costs, orientation costs of newly hired human resources for health, time wastage during interviews, disruption of work and life balance programs, increased workloads, role conflict, potential customers shy away from visiting the hospitals where qualified and experienced staff have exited and this affects the image and profit margins of the firm (Nduaci & Nzulwa, 2018).

The medical officers and nurses are exiting the public level five hospitals through resignations, request for unpaid leave, early retirement, inter-county transfer requests/swop, secondment and request for transfer of service from the respective county government to national government agencies, ministries and departments. This high attrition rates might negatively affect the quality of health services given to the patients where the management of the county hospitals might be forced to hire interns to fill the gap that was left out after exits and this can have detrimental effects in instances where the interns misdiagnose patients can result to loss of life, limbs and legal tussle between the hospital and the patients. (Wang et al., 2023)

Empirical studies conducted in China on the effect of workplace violence on turnover intention among nurses in public hospitals in Taiwan using a sample size of 268 nurses in Taiwan found out that 60-90% of nurses experiences physical, bullying, sexual harassment and verbal abuse from their peers, co-workers, patients and family members thus rendering them the primary victims of workplace violence hence the high levels of intention of nurses to leave due to toxic working environments that lack legal/policy framework on workplace violence (Te-feng & Chen-Chia, 2022).

The Ministry of Health and the respective County Public Service Boards need to incorporate an array of employee value proposition strategies if they want to be perceived as an employer of choice (Nkanata et al., 2021). Prakosa and Purwanza (2019) argue that it is imperative for organizations to link strategic human resource management practices, strategies, policies and systems with the business strategy in order to attain business excellence and superior employee performance and this can be envisioned through training programs, coherent appraisal systems, strategic recruitment and selection competency framework, performance based pay, work-life flexibility programs, employee involvement in decision making, promotional opportunities efficient appraisal systems, appropriate leadership styles and a conducive working environment are some of the practices that need to be incorporated to ensure staff retention and amicable employer-employee relations in the industry.

Statement of the problem

The Health sector performs a pivotal role in the social welfare of the Kenyan population since the onset of devolution in March 2013 (KMPG, 2013). However, the sector has been experiencing high exit of human resources for health (HRH-medical officers and nurses) as per the respective county government integrated payroll personnel records (IPPD) through resignations, inter-county transfer requests, request for unpaid leave to various state departments and agencies (Kenya Medical training College, Ministry of defense and Health respectively) private institutions and non-governmental organizations (NGO'S), request for secondment and transfer of service to various government institutions. This high labor turnover of qualified and experienced human resources for health (Medical officers and nurses) has negatively affected health service delivery

(Alkarabesh, O.H.M; Alkarabesh, Z.H.M, 2022). The Kenya National Bureau of statistics report (KNBS, 2022), portray that Kenya has the highest level of brain drain in the African Continent at the rate of 51% where human resources for health (HRH-medical officers and nurses) are migrating to European and Asian countries in search of better career prospects.

Kiiru and Kiiru (2022) opine that doctors and nurses are exiting the public sector due to poor management support framework (when it comes to provision of essential tools and personal protective equipment, inadequate organizational rewards, poor organizational climate dimensions, inadequate access to pertinent information) lack of career advancement opportunities, lack of training and refresher programs, health and safety inadequacies where human resources for health face occupational hazards in the dispensation of services due to lack of personal protective equipment such as gloves and syringes, laboratories, lack of a doctors plaza, poor inadequate lighting in the operating rooms (OR), lack of risk assessment, health and safety audit and poor supervisor-subordinate support has led to increased brain drain and external labor mobility and inadequate human resources for health will result to work-life imbalance leads to decreased productivity in the firm, sleep disorders, low sexual drives, strained family relations (divorce and infidelity in Marriages), drug and substance abuse issues, anxiety increase, poor cognitive function, depression, physical and psychological distress, increase in absenteeism rates, burnout, decreased productivity, poor dietary habits, increased stress levels and high intent to leave (Kamwenji et al., 2022).

Objective of the Study

The objective of this study was to investigate the influence of strategic health and safety practices on external labor mobility in public level five hospitals in Kenya.

LITERATURE REVIEW

Heinrich Domino theory on health and safety-Herbert Heinrich, 1931

The major proponent of this theory was Herbert William Heinrich (1931) who was an assistant engineer in the insurance industry. He investigated the causes of industrial accidents and he concluded that accidents in the workplace occurred due to a sequence of events or dominos such as; social environment, fault of person, unsafe acts, accident and injury (Gbadago et al., 2017):

Improved relations between the supervisor and the employees can have a positive ripple effect on the employee group since it boosts employee motivation, increase employee performance, reduces cases of accidents and mistakes, reduced grievances and conflicts, improvement of social values in the organization, culture of organizational citizenship behavior, improved organizational image in the eyes of its stakeholders, foster teamwork spirit (esprit de corps), reduced cases of turnover intentions (Memon et al., 2020).

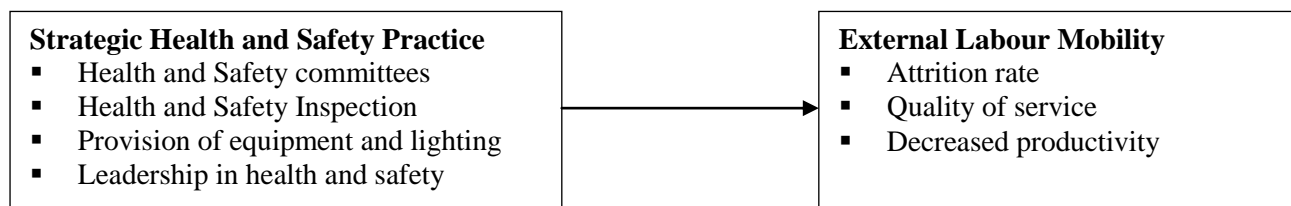
When employees are highly stressed in an organization due to excessive workloads, role ambiguity, role conflict and lack of organizational justice metrics (interactional, procedural and distributive justice) can have negative consequences to the organization since the employees cognitive ability is affected results to increased cases of accidents and mistakes in an organization as a result of breach of the employees social environment (Matloub *et al*, 2018)

Organizations need to ensure that they have employee assistance programs which are meant to assist the employee alleviate their personal problems relating to alcoholism, drug dependency, marital strife, work-conflicts which if not controlled can negatively spill over to the workplace and this can result to negative consequences relating to health and safety injury and accidents in the workplace. The social environment is very critical as the two domains of work aspect and home aspect need to be balanced in order to avoid clash and a negative spillover of the two domains as opined in the border theory of work-life balance as stated by (Li et al., 2019). The management of organizations have to ensure that there is a supportive working culture

metrics that encompasses safety, shuns violence and harassment in the workplace, and inculcation of social capital and cohesion metrics in the organization (Duan & Ni, 2019).

Risk assessments are very critical and essential in an organization since it helps in the identification of potential hazards in the workplace which might be related to the practices, policies and procedures on health and safety in order to ensure that the employee wellness, health and safety is safeguarded at all costs. Organizations ought to constitute Health and safety committees who will be mandated in giving a report to the management on the working conditions/environment and mitigating factors related to health and safety in order to come up with strategies to curb illness, accidents, damage of property and death in the workplace (Umugwaneza et al., 2019).

Conceptual Framework



Independent Variable

Dependent Variable

Fig 1: Conceptual Framework

Strategic health and safety practice are defined as programs, laws and regulations in regards to the working environment, employee well-being and the social environment in an organization in order to protect the employees from loss of life, injury and occupational diseases (Keter *et al.*, 2024). Strategic health and safety practices are aimed at improving the quality of life of the employees as well as the co-workers, family members, customers and other relevant stakeholders.

It is instrumental for the management of an organization to ensure that the employees are working in a clean, decent and conducive working environment (occupational hygiene) to foster organizational productivity and motivate the employees. Working environment encompasses provision of tools, lighting, temperature, personal protective equipment’s, ergonomics, well aerated offices, adequate lighting in the office and theatres, clearly defined role structure, reporting relationships and amicable relations between the immediate supervisor and the subordinates (Ekowati & Amin, 2019).

Employees’ well-being is of critical value to an organization because employees are pivotal in the attainment of set goals and objectives and their retention is critical for organizational survival and image. Employees wellbeing encompasses programs such as employee assistance programs, financial wellness workshops, pre-retirement workshops, work-life balance programs, leave programs/entitlements as per the Employment Act, 2007 (section 28-30), mental health programs, counselling programs, implementation of anti-bullying and anti-sexual harassment policies in the workplace. The employer has to implement employee well-being programs as a duty of care approach to employee’s needs, creation of an employee friendly environment and enhancement of employee commitment and loyalty in an organization. Implementation of employee wellbeing programs enhances employees’ psychological capital and thus makes employees work exemplary and expeditiously in the attainment of goals and objectives (Omune & Nyang’au, 2021).

METHODOLOGY

The researcher adopted the concurrent mixed methods research design. The target population of this study comprised of 4,388 (four thousand, three hundred and eighty eight) human resources for health (HRH- Medical Officers and Nurses) in public level five hospitals in Kenya.

Purposive sampling was used by the researcher to select the eight (8) public level five hospitals in Kenya. The scope of this research was limited to the influence of strategic human resource management practices on external labor mobility in Eight (8) Public Level Five Hospitals in Kenya namely Embu Teaching & Referral Hospital (Eastern province) ,Naivasha Level Five Hospital (Rift-Valley province) Kakamega Level Five Hospital (Western province), Coast General Hospital (Coast province), Mama Lucy Kibaki Level Five Hospital (Nairobi province) Nyeri Level Five Hospital (Central province) , Garissa Level Five Hospital (North eastern province) and Jaramogi Oginga Odinga Teaching & Referral Hospital (Nyanza province) to represent the former eight (8) provinces in (KNBS, 2023).

Primary data was collected with the aid of a questionnaire. Secondary data was obtained from existing literature in Human resources for health (HRH) Strategic work-plan 2014-2018, County Integrated Development Plan (CIDP), books, organization policy and procedure manual, stakeholders reports from (NITA, DOSH), dissertations and from the internet to acquire in-depth data pertaining the current study.

A pilot study was conducted on 35 employees (15 medical officers (general doctors and consultants) and 20 nurses (enrolled, registered or nursing officers) from Kiambu Level Five hospital to test the reliability and validity of the questionnaire. Kiambu Level five was not part of the study sample and it represented other public level five hospitals under review.

Reliability was tested on thirty -five (35) questionnaires that were tested with randomly selected employees who were included in the final study sample. The thirty -five (35) questionnaires were coded and input into SPSS version 22 for running the Cronbach Alpha reliability test (Sekaran, 2010).

Descriptive and Inferential statistics were used for data analysis. Descriptive methods include percentages, quartiles, measures of central tendency, deviation or measures of deviation. Inferential statistics include Pearson's correlation co-efficient, regression models Chi-square and Anova. Information was sorted, coded and input into the statistical package for social sciences (SPSS version 22) for production of graphs, tables, descriptive statistics and inferential statistics.

FINDINGS, INTERPRETATIONS AND DISCUSSIONS

Response Rate

In this study, 353 questionnaires were distributed to the sampled respondents, 331 questionnaires' were filled and returned. This entailed a response rate of 94%.

Descriptive Findings

Strategic Health and Safety Practice

The Study sought to establish the influence of Strategic health and safety practice on external labour mobility in public level five hospitals in Kenya. Respondents' opinions on the influence of strategic health and safety practice by their respective health facilities based on the Likert scale items were provided in Table 1.

Table 1: Descriptive Results for Strategic Health and Safety Practice on external labor mobility

The study used the parameters where the: 1=strongly disagree, 2=Disagree, 3=Neutral, 4=Agree, 5= Strongly Agree

Statements	SA (%)	D (%)	N (%)	A (%)	SA (%)	Mean	Std. Deviation
The management of this hospital is committed in ensuring that there are adequate health and safety practices, policies and procedures	23 (7.1)	35 (10.7)	32 (9.8)	138 (42.3)	98 (30.1)	3.78	1.191
The management of this hospital conducts health and safety audits per financial year in order to identify potential hazards in the work-place	29 (8.9)	39 (12.0)	34 (10.4)	118 (36.2)	106 (32.5)	3.71	1.278
The management of this hospital communicates in a timely manner any possibility of occupational hazards in this hospital	24 (7.4)	37 (11.4)	34 (10.5)	128 (31.4)	102 (31.4)	3.76	1.143
This hospital provides personal protective equipment and machines such as gloves, masks and syringes to protect the employees from injury and occupational diseases	21 (6.4)	28 (8.6)	52 (15.9)	134 (41.0)	92 (28.1)	3.76	1.194
The management of this hospital is proactive on matters of occupational health and safety	23 (7.0)	32 (9.8)	51 (15.6)	121 (37.0)	100 (30.6)	3.74	1.194
There is adequate lighting in all the working stations in this hospital	18 (5.6)	46 (14.2)	33 (10.2)	116 (35.9)	110 (34.1)	3.79	1.214
Risk assessments on occupational health and safety are periodically done in this hospital	17 (5.3)	54 (16.9)	37 (11.6)	105 (32.8)	107 (33.4)	3.72	1.237
The management of this hospital appointed a health and safety committee to assist in identification of hazards in the workplace	25 (7.7)	64 (19.8)	47 (14.5)	101 (31.2)	87 (26.9)	3.70	1.314
Inadequate personal protective equipment and lighting in the work stations has contributed to employee turnover intentions and low productivity in this hospital	25 (7.7)	64 (19.8)	47 (14.5)	101 (31.2)	87 (26.9)	3.50	1.285

Where: **SD= Strongly Disagree, D= Disagree, N= Neutral, A= Agree, SA= Strongly Agree**

According to study findings in Table 1; on average the respondents agreed that the management of the hospital is committed to ensuring that there are adequate health and safety practices, policies and procedures as indicated by a mean of 3.78 and a standard deviation of 1.191; on average the respondents agreed that the management of the hospital conducts health and safety audits per financial year in order to identify potential hazards in the work-place as indicated by a mean of 3.71 and a standard deviation of 1.278; on average the respondents agreed that the management of the hospital communicates in a timely manner any possibility of occupational hazards in the hospital as indicated by a mean of 3.76 and standard deviation of 1.143; on average the respondents agreed that this hospital provides personal protective equipment and machines such as gloves, masks and syringes to protect the employees from injury and occupational diseases as indicated by a mean of 3.86 and standard deviation of 1.194; on average the respondents agreed that the management of the

hospital is proactive on matters of occupational health and safety as indicated by a mean of 3.74 and standard deviation of 1.194.

On average the respondents agreed that there is adequate lighting in all the working stations in the hospital as indicated by a mean of 3.79 and a standard deviation of 1.214; on average the respondents agreed that risk assessments on occupational health and safety are periodically done in this hospital as indicated by a mean of 3.72 and a standard deviation of 1.237; on average, the respondents agreed that the management of the hospital had appointed a health and safety committee to assist in the identification of hazards in the workplace as indicated by a mean of 3.70 and a standard deviation of 1.314. Further, on average the respondents agreed that inadequate personal protective equipment and lighting in the workstations have contributed to employee turnover intentions and low productivity in the hospital as indicated by a mean of 3.50 and a standard deviation of 1.285.

The qualitative findings reveal that the respondents cited that strategic health and safety practices in an organization are quite integral in the attainment of organizational goals and objectives as per the respective County Governor's manifesto on healthcare and thus the hospitals administration ought to fully utilize the facility improvement fund (FIF) to ensure that there is adequate provision of tools, personal protective equipment (PPE), construction of nap pods/holding rooms and medicinal drugs for the patients.

The respondents cited that due to poor working environment in some county hospitals it resulted to acquisition of occupational diseases such as hepatitis B and C, which is contracted through exposure to blood and body fluids, pulmonary tuberculosis, HIV/AIDS, respiratory infections such as corona virus and influenza which are airborne, staphylococcus aureus and streptococcus pyogenes are diseases that can be transmitted by the healthcare workers, mental disorders, depression, chronic back pain, exposure to hazardous chemicals, exposure to x-ray radiations and violence and harassment from patients or relatives. The occupational diseases listed above can be fatal to the human resources for health since they can cause loss of life and result to external labor mobility.

The respondents cited that the following forms of health and safety practice are paramount in inculcating a health and safety culture in the organization. The practices include; health and safety training, regular inspections of the health facilities, comprehensive health and safety audits, top management support in the implementation of occupational health and safety programs as per the provisions of the Occupational Safety and Health Act, 2007, provision of personal protective equipment, adequate lighting in the theatres and offices, implementation of occupational health and safety programs such as stress counselling and institutionalization of mental health breaks and programs were deemed as instrumental by the respondents in order to protect them physically and psychologically.

The respondents also cited that it is imperative for the hospital management to conduct a comprehensive health and safety audit and inspection on a quarterly basis in each financial year so as to analyze potential risk factors and areas that can negatively affect the quality of working life and service delivery in the respective county hospital. The respondents also cited that some county hospitals do not have a health and safety committee in place that is crucial in planning for health and safety related activities and they mentioned that inculcating a health and safety culture is beneficial in the following ways; fulfilment of employees psychological contract, compliance with regulatory frameworks (OSHA, Employment Act, 2007, Labour Institutions Act, 2007), reduction of medical expenses/insurance, minimal absenteeism rates due to sickness, prevention of accidents and occupational diseases.

The findings of his study also significantly correlate with the research findings of Mulievi and Wanyama (2019) who assert that county government hospitals might improve on their work safety procedures, occupational health programs, health and safety audits and inspection and implementation of a staff medical comprehensive cover to protect staff from accidents and diseases in the organization. The authors assert that

an employee's mental health is instrumental in attaining organizational productivity and thus employees should not work in stressful conditions as a result of excessive working hours and poor leadership style exhibited by their line supervisors and medical superintendent.

Discussion of Findings

The aim of this study was to evaluate how health and safety practice influence external labour mobility in public level five hospitals in Kenya. Analysis of the data through descriptive methods revealed that a significant proportion of respondents agreed that strategic health and safety practice indeed influenced external labour turnover. The correlation analysis revealed a meaningful moderate and statistically significant correlation between strategic health and safety practice and external labour mobility. Furthermore, the regression analysis underscored that within the context of the public health sector in Kenya, strategic health and safety practice had a substantial influence on external labour mobility.

Strategic health and safety practice are instrumental in the organization by ensuring that the working environment, safety procedures practices, health and safety policies and health and safety risk assessments are conducted to protect the employees from loss of life and harm and thus safeguard the overall organizational and employee productivity. Strategic health and safety is an essential high performance work practices that need to be integrated in the organizations processes and procedures in order for the organization to comply with the international labour organization and occupational health and safety standards and regulations.

The findings of this study are in alignment with Pidada (2019) who conducted a study on determinant indicators of turnover intentions, work productivity, work safety, health and human relations. The findings of this study recommended that to avert employee turnover intentions it's imperative for the management of the organizations to ensure that there is adequate provision of personal protective equipment, and provision of accident prevention socialization programs. Respondent in the study indicated that it is imperative for the management to conduct a comprehensive health and safety audit in order to analyze potential areas of weakness in the organization in terms of health and safety and provision of tools of work (equipment) and adequate lighting in offices, theatres and the doctors plaza so as to avert the occurrence of occupational disease in the workplace which can negatively affect employees performance, commitments, retention thus influencing external labour mobility intentions.

The findings of this study also significantly correlate with research findings of Palanei, Mengenci and Emhan (2020) who idealized that occupational stress in an organization is caused by inadequacies in the implementation of strategic health and safety practice in an organization which results to negative outcomes such as: increased employee grievances and conflicts, increased external labour mobility intentions, occupational stress and in an organization is caused by inadequacies in the implementation of strategic health and safety practice in an organization which results to negative outcomes such as: increased employee grievances and conflicts, increased external labour mobility intentions, occupational stress and burn out, less of employee life, increased rate of accidents and mistakes, increased incidents of sick leave, increased cost of medical insurance claim, increased cases of mental health and the organizations image becomes dented due to poor health and safety in inadequacies.

The respondents in this study idealized that it's imperative for strong management commitment in terms of health and safety and formation of health and safety committee in order to identify risks and hazards in the organization. The study findings significantly correlate with Armstrong (2009) who assert that the management of an organization ought to reap immense benefits such as : high committed staff, sense of belonging, reduction of accidents and mistakes, reduced cases of fatalities, improved employees mental health and increase in organizational productivity which can be achieved through implementation of strategic health and safety practices and procedures.

The finding of this study also correlate with research endeavors of Bandel and Emeti (2023) who recommended that to avert employee turnover intentions, the management ought to ensure that there is adequate safety management practices in the enterprise (protection of employees, provision of equipment as prevention, aid and protection, completeness of health facilities, workloads and efficient working hours, health and safety training and strong commitment from the management in terms of health and safety practices.

The findings of this study also portrayed the challenges to the implementation of strategic health and safety practices where the respondents assert that lack of health and safety committees in the hospitals, inadequate provision of personal protective equipment, adequate lighting and ambience in the offices and theatres, in adequate health and safety training, lack of leadership and commitment from the management in terms of health and safety, lack of health and safety drills and poor employee assistance programs are inhibitors to an effective strategy in health and safety practice.

CONCLUSIONS AND RECOMMENDATIONS

The research study concluded that strategic health and safety practice was not a significant factor of external labour mobility. The management of the health facilities should implement strategic health and safety practices to attain a competitive advantage over its competitors. The study findings conclude that implementation of strategic health and safety practices in the health facilities is critical due to: reduction of accidents and mistakes, boost productivity, equip employees with right knowledge and skill base, boosts employee morale and performance.

The study concluded that the management of the health facilities should institute health and safety practices such as: formation of health and safety committees, conducting health and safety audits and inspections, provision of personal protective equipment, organizing health and safety programs, conducting health and safety training and conducting risk assessment in order to identify potential hazards in the health facilities are strategic components in health and safety management for a sustainable environment.

Recommendation based on practice

The County Chief Officers in the department of health should ensure that all staff working in the health facilities are provided with personal protective equipment/gear to protect themselves against occupational diseases and loss of life. This should be adhered to in accordance to the Occupational Safety and Health Act (OSHA), 2010.

The County Chief Officers in charge of health should ensure that there are health and safety committees in the health facilities who will conduct a periodic and a comprehensive health and safety audit in order to analyze risk assessment and mitigation measures in the health facilities to protect the employees from occupational diseases and any risk factors that might affect their quality of life in the organization.

The County Chief Officers should ensure that the human resources for health are working in a conducive environment and that there is top management support and commitment from the county executive on implementation of occupational health and safety programs in the organization.

Suggestions for further research

Future researchers should focus on other strategic human resource management practices influencing external labour mobility especially on generational groups (Baby boomers, generational X, millennials, generation Z & Alpha) such as strategic recruitment and selection, strategic orientation/induction programs, strategic voice, strategic involvement and participation, strategic employee relations, strategic human resource planning and strategic reward management practice.

Future scholars should also conduct a similar study in private hospitals in Kenya for comparative analysis and incorporate other cadres in the health sector during the research such as mortuary attendants, health administrators, medical laboratory technologist/technician, pharmacists/pharmaceutical technologists; health records management officers, radiologists/radiographers, public health officers/assistants, nutrition and dietetics officers etc

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