

Assessing Human Resource Management Practices on Health Care Services in Banadir Region, Somalia

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Abstract: The study is aimed at assessing human resource management practices on health care services in Banadir region Somalia. Human capital was used in theoretical literature. Descriptive research design was used in the methodology. The study targeted three categories of employees in Banadir Region in Somalia namely; 17 top level management who comprise the heads of the health departments, 53 middle level management are the technical staff in the public hospitals who include medical officers, nurses, laboratory technologists, dentists, social workers and public health officers and 32 lower level management/support who include clerical officers, subordinate staffs, and secretaries. These makes a total population of 102 employees. Simple random sampling was applied to select 81 respondents in the respective strata. Primary data was collected using questionnaires. Qualitative and quantitative data analysis methods was used. Analysis of quantitative data was analysed through the use of mean, standard deviation, frequencies and percentages. Qualitative data was analysed through the use of content analysis. The findings indicated that training and development has a positive but insignificant effect on healthcare service delivery ($\beta = .492$, $\text{Sig} = .134 > .05$). The results established there is an insignificant and negative effect of rewards and recognition on healthcare service delivery ($\beta = -.224$, $\text{Sig} = .302 > .05$). The research noted a positive and significant effect of employee involvement on healthcare service delivery ($\beta = .799$, $\text{Sig} = .048$). This demonstrated that a change in employee involvement by a unit will lead to a 0.799 change in healthcare service delivery. Based on this, the research recommends that the county government should develop capacity building programmes that will help expand the competency and professionalism of health workers

Key words; employee, training and development, employee involvement

I. INTRODUCTION

Among the top priorities for a significant number of governments worldwide is enhancing the quality of public service. Available, affordable and prompt public service is necessary for all public institutions to enhance citizens' well-being and create an atmosphere of confidence (William, Victor, Krista, Piret, & Lars, 2017). Decent work in the health sector is an important prerequisite for achieving successful and efficient health systems; resolving the shortage of health workers, and achieving the goal of equal access to quality health care. In real life, the health sector is about people and their technical capacity; there can be no health care without health staff (Afshan, Sobia, Kamran & Nasir 2012).

Initiatives in recent global policy highlighted the critical role of investments on the health sector and the health workforce for improved sustainable healthcare development, pointing to the integrative power of strengthening the health sector by simultaneously addressing various Sustainable Development Goals (SDGs). The SDGs recognize decent work in healthcare as a central factor in ensuring inclusive economic growth and its contribution to social progress. Pursuing full and productive employment and decent work for all women and men is an integral part of SDG eight (8) that also underlines protection of labour rights. In regards to the health sector, SDG 8 links directly to the call for increasing the recruitment, development, training and retention of the health workforce as part of SDG three (3) to ensure healthy lives for all.

Most countries around the world have reported unacceptably poor health results on a regular basis. In comparison, relative to developed countries, these countries face long-standing deep inequities in healthcare results around the world (Vermeeren *et al.*, 2014). Only through the creation and improvement of their health systems can developed countries continue to ensure better health outcomes. Hyde, Sparrow, Boaden and Harrisa (2013) suggest that it is important to foster a shared view of what the health system means and what makes the strengthening of health systems a common structure with six building blocks. Healthcare building blocks include the provision of services; human capital for health; healthcare information; medical tools and devices, medical drugs and vaccines and technologies integrated in healthcare; funding requirements for healthcare; and management and governance (stewardship).

Health indicators are among the worst in the world in Somalia, with under-five and maternal mortality at 22.4% and maternal mortality at 16 per 1,000 live births, respectively. Wasting (as calculated by low height weight) is especially important in the assessment of short-term stresses that have occurred frequently during the civil conflict in Somalia and in the recent four-year drought in the central and northern regions (UNDP, 2019). Despite this, the remarkable resilience of the Somali people has led to civil society, NGOs, religious groups, and the private sector doing an impressive job of maintaining certain services such as education, health, and water (UNDP, 2019). Some of the major strategies/reforms employed to recover the economy in Somalia includes; partnership with NGOs and friendlier groups, Agriculture development, innovation strategies, new urbanization,

peacebuilding missions, human resource management practices and encouraging investment.

The health system support is provided through a two pronged approach, the first is the multi-year Consolidated Appeals Process (CAP) or the humanitarian response plan, aimed to deliver relief operations, currently targeting a population of about 1.1 million internally displaced persons (IDPs) and focusing its planned efforts during 2013-2015 on promoting the recovery and resilience of the health system. These interventions are also designed to deal with future crises, reduce vulnerability and lead to robust resilience building activities, while disaster risk reduction and management will shape the longer term perspective action agenda. The second approach is launched in the framework of a health sector development process, through the implementation of the essential package of health services (EPHS), and health system strengthening, aiming at improving equitable access to acceptable, affordable and quality health services. This developmental health process envisages the scaling up of government leadership, management and service delivery capacity, while sustaining health partners' support, thus averting the transitional funding gap, often encountered during the post-conflict period, when the health system is transiting to recovery, institutional building and development.

Banadir region is the most populous among the 18 prewar regions of Somalia. It is mainly urban with a population of 1.6 million people, and it had the highest number of internally displaced persons in the country by 2014 (Kulane, 2017). Banadir Hospital, also known as the only national referral hospital in Somalia, has since its establishment been the center of health care delivery in Mogadishu. The hospital comprises both maternity and pediatric departments where mothers and children are treated, respectively; however its emergency department offers routine medical and surgical services. The current study will target Banadir Hospital in the Banadir region.

A skilled and motivated human resource is necessary to achieve a qualitative and comprehensive delivery of healthcare (UNDP, 2019). In addition, to ensure effective and efficient provision of health care services, it is important to consider the challenges and difficulties faced by healthcare providers (Kumar & Khan, 2013). HRM activities have a remarkable influence on the organizational efficiency of health care. Nevertheless, unfortunately, inadequate quantities of studies in the field of health care workers and health systems have guided in this area. Human resources management practices is one of the major variables used by many studies to predict health service delivery..

Somalia national government strategic practices on human development, economic development, inclusive politics and security practices are bearing fruits. This is as a result of support from Somalia government, Somalia citizens, partners such as IMF, USAID and neighbouring countries. The human resource management practices have been supported by 12 million Somalia citizens, supported by more than 1.5 million

Somalis in the diaspora (USAID, 2019). Researchers have done research on human resource management practices in both public and private sectors, and they have varied observations and contradicting findings on the subject. For instance, Banwet and Pradmod (2018) did a study on a new approach for human resource management practices; and found that poor recruitment and selection hindered response to issues facing countries administration. However this study did not focus on the health care service delivery. Zablon (2014) did a study on human resource management practices by the Kenya Prisons Services. It was established in the study that employees involvement, consultation, obtaining executive level commitment, effective communication, encouraging participation, training, recruitment, delegation of duties, teamwork, use of change agents and intervention by outsiders, stakeholders' engagement, collaboration and transparency played a big role in public service delivery.

Arising from all the findings, it is clear that various indicators of human resource management practices have been used to predict service delivery. However, scanty of studies have been done in Somalia health care provision. In addition, the influence of HRM Practices on Health care service provision is not clear and therefore the current study will fill the gaps by determining the relationship between human resource management practices on health service in Banadir region, Somalia.

A few private hospitals offer some specialised treatment but it is expensive to afford many people in the region and its surroundings. Those who can afford to travel abroad will seek specialised care in other countries. NGOs and or the UN run some health facilities but the services depend on funding capacities. Obstacles to reach health care as mentioned by sources included but were not limited to geographical distance and cost of services. There is no national health insurance scheme available in the country. Patients either seek health services which are provided free of charge at a government or an NGO run health facility or patients pay out of pocket at a private health facility.

Purpose of the study

The general objective will be to analyse the influence of human resource management practices on health care service provision in the Banadir Region in Somalia.

Significance of the Study

This study forms the basis for future studies in this area, for academia. The human resource management practices adopted by institutions and governments are subject to limited empirical investigations. It provides a reasonable platform for academics to evaluate the weaknesses in the report. This is because the findings in this study will be looked at in light of its gaps in knowledge. It is important that future studies evaluate the present limitations so as to provide more information on this subject.

The analysis would also be useful to the Somalia national government, Banadir hospital management and staff. This will

shed more light on Somalia national human resource activities that may be important for countries and governments in the effective and efficient execution of their duties. It would help policymakers in acting as a funnel to gather information through consultation and research and to reduce and extract from the information, a policy or a set of policies which serve to promote what is the preferred course of action. The findings and recommendations of this study would form a basis of reference to other researchers for further studies in the related areas.

Scope of the Study

The study will be carried out in Banadir Region Hospital which is located in Somalia. It will cover the medical services department. It will involve 102 respondents who will be selected. The study will investigate the influence of performance review, training and development, compensation practices and retention practices on health care service provision. Data on health care service provision in Banadir hospital will be sought. The study will target three categories of employees in Banadir Region in Somalia namely; 17 top level management who comprise the heads of the health departments, 53 middle level management are the technical staff in the public hospitals who include medical officers, nurses, laboratory technologists, dentists, social workers and public health officers and 32 lower level management/support who include clerical officers, subordinate staffs, and secretaries. These make a total population of 102 employees. Stratified random sampling method will be used where employees in Banadir Hospital will be clustered in three strata. Simple random will be applied to select 81 respondents in the respective strata. Primary data will be collected using questionnaires. Qualitative and quantitative data analysis methods will be used. Quantitative and Qualitative data will be analysed accordingly through the use of appropriate measures in consideration to the content data analysis.

II. THEORETICAL REVIEW

Human Capital Theory

According to the human capital theory, employability among the general labor force tends to increase when high investment is diverted to education and job training (Peers, 2015). This theory has therefore had a significant impact on various areas including sociology, economics and education (Tan, 2014). According to Fitzsimons (2017), human capital can be described as the overall wisdom and experience of healthcare employees as a crucial factor of competitive advantage which cannot be mimicked by competitor firms. Besides, this theory plays a major role when it comes to attracting, selecting, compensating and developing healthcare employees. This reveals that the human capital theory is irrefutably significant in HRM practice and in the context of financial cooperatives. HRM practices are integrated in healthcare organizations to ensure they attract and retain highly skilled and knowledgeable employees. In addition, Wali Rahman & Zekeriya Nas (2013) states that human capital theory is founded on the notion that education plays a major role in

improving employee productivity. If applied to healthcare organizations, human capital is considered to be a valuable factor, which determines productivity of these organizations. This aspect also enhances the employability of healthcare

Empirical Literature

Retention strategies are approaches used in human resource management where employees are motivated to linger in the organization for a longer time. Every employer, therefore, has a duty to ensure they retain their best employees (Carsen, 2015). Employee turnover that reflects the number of staff who has departed within a particular period is, therefore, one of the largest though widely unknown costs an organization faces. Although it is difficult to hold onto all desired staff, the loss can be certainly minimized. In most business settings, the primary goal of human resource managers is to minimize the attrition rate. The process of employee retention will benefit the organization as follows; first the cost of employee turnover increases company's expenditure and reduces profits (Connel 2013).

A higher retention rate tends to motivate potential employees to join the organization and also helps in regaining efficiency. If an employee quits, considerable effort is wasted in re-hires, subsequently other costs such as training of new hire and other costs are suffered directly by firms often without their realization. Moreover, even after these companies rehire, there is no assurance of efficiency from the new employee (Connel, 2013). It should be done by aligning the firms' human capital processes such as recruitment, with its overall business strategy. The procedure involves boosting the retention strategies to a more strategic point which in turn yields irrefutable business advantages and employee's satisfaction to remain with the organization. In the next step, organizations must regularly review and analyze the productivity of these systems, ensuring that all personnel data are captured and aligned. The result will help raise the productivity of the organization and also serve as an early caution for problem areas (Ulrich & Smallwood, 2005).

According to Zakaria *et al.* (2011), a reward strategy enhances commitment, retention and employee engagement that eventually translates into employee performance. Paying for performance is a huge concern in current HRM. Establishments had long thought that efficiency improved after pay was connected to performance. While payment by outcomes schemes and inducements are established to back the belief (Dessler, 2013). Researchers, Adeniji and Osibanjo, (2012); Cho *et al.*, (2006); Terpstra and Rozell, (2013); Bardot, (2014) have also established a positive nexus between retention of employees on productivity. According to Armstrong (2010), rewards proved to employees that the behaviour they exhibited was fitting and must be replicated.

A study conducted by Waiganjo, Mukulu and Kahiri (2013) showed that selective resourcing which is a key component of strategic recruitment and selection, influenced firm performance of corporate organizations in Kenya in the manufacturing sector. The researcher also found that

recruiting and selecting the right employees increased employee performance and effectiveness, and contributed to employee retention in the organization. Chen and Huang (2009) on the other hand, examined pre-employment tests as a key component of selection and the researcher found out that when employed, these tests showed that selected employees stayed with the organization longer and had the potential to perform.

Howes (2010), Ernst and Young's office of workforce retention (2000), Handin (2000), Cuthie (2010) and Werbler and Harris (2009) stated that best practices for improving employee retention and having motivated employees are summarized such as selection process, leadership, growth and development, meaningful work and ownership, rewards, organizational influences, individual influences, financial benefits, good working conditions, personal loyalty to employee, tactful discipline, empowerment, creativity and innovation and quality of life. Howes (2010) researched that better communication and attention to personal needs of employees are to improve motivation and performance. The study by Chaudhry, Sohail and Riaz (2013) found a direct positive relationship between motivation and retention and employee performance

Tzafir (2015) posits that training is a key aspect in enhancing the human resources. Training programs can make employees feel indebted to the company since training as a practice of HR is viewed to have a very encouraging impact on the job performance of employees. Training acquaints employees with the proficiency, capabilities and information necessary to perform at their work. Organizations can offer training and development programs to its workers so as to give them confidence that they can be counted upon in future. This ensures employees put more effort and deliver in an effective manner so that they are not let down to the organization. Formal training as opposed to casual training is more efficient and is considerably related to improved performance. Trainer chosen is usually dependent on the type of training to be done. For instance, external trainers convey diverse and crucial knowledge from the corporate world sharing it with learners as well as in-house instructors too (Jayawarna *et al.*, 2017).

Denby (2010) espoused that training is an ongoing process and needs to be continually refreshed and improved according to the desires and needs of an individual and organization. Training needs analysis should be carried out by organization to ascertain how often they should carry out training programs either yearly, half yearly or every three months since the training needs may vary from organizations and also within different individuals.

Strategic training is an important element in producing highly skilled human capital (Wallen *et al.*, 2013). Investing in training programmes makes employees feel indebted to the organization and contributes to their retention (Bohlander and Snell, 2014). Strategic training enhances an organization's specificity of employment skills, which is exhibited in increased employee performance and overall organizational

performance (Wallen *et al.*, 2013). When an organization strategically trains its employees, the cost of selecting, recruiting and internalizing outsiders is reduced, leading to an increase in their performance in the given organization (Mbugua, 2015).

Training is administered in two ways; on the job training where employees are given training while at their place of work. This is a simple and cost effective way of training. Both employees that are not proficient and those that are proficient can be trained using this method (Wallen *et al.*, 2013). The method embraces learning by doing, for instance, it could be done through job rotation, job enlargement and coaching (Denby, 2010). Off the job training is another method where employees are provided with training away from their working place in the form of seminars, workshops and conferences. The method is costly to an organization, but when training a large number of employees, it is cost effective (Wallen *et al.*, 2013).

Strategic training has a positive effect on quality of work, influences participant's knowledge, enhances organizational based self-esteem and in turn increases employees' performance (Budhwar, 2007). Wright (2009) emphasized that strategic training is a critical subscriber to a corporate strategy premised on nurturing the rational capital. It develops administrative aptitude that permits workers to account for individual professional progression where it translates to increased employee performance (Bohlander and Snell, 2014; Wright, 2009).

Strategic training ensures that there is professional faculty mandatory to effectively implement a strategy of growth in an organization. It is the process that enables people to procure new information, acquire emerging skills and improve on completion of tasks (Denby, 2010). Cober and Brown (2012) notes that strategic training helps an organization craft a labour force capable of handling transformation, conform to the growing clients' demands and fix its prospective leadership. Denby (2010) states that employees are enabled to maintain standards, improve their competence leading to their increased performance.

A study by Hall *et al.* (2013) shows that one of the main goals of strategic training programs is to build strong, competent and qualified personnel whose work performance could be felt in both private and public sectors. A study by Magiri (2009) indicated that improving public service and quality of its delivered services was strictly contingent on the effectiveness of strategic training programs and specificity that were provided to its employees. These results strengthened the importance of the use of SHRM while focusing on strategic training and employee performance.

Ngeno's (2014) study showed that upgrading employees' skills and knowledge, puts them in a better position to produce high-quality products and services in the most cost effective way, they adapted to change and it increased their contribution to their work through product or process innovation. According to Ivancevic *et al.*, (2007), managing

workers strategically required administrators to commit time, cash and devotion to train and develop the entire staff. These cases show that strategic training practice is a necessary prerequisite for empowerment of employees to work. Conversely, Amaoka (2013) states that, investing in the training and development of employees would be of limited benefit if their jobs and roles are structured in such a way as to deny them the opportunity to put their knowledge and skills into practice.

Nielsen (2012) notes that strategic training not only equipped employees with most of the knowledge and skills needed to accomplish jobs, but it also helped them achieve overall organization objectives by contributing to the satisfaction and productivity of employees and the organization at large. Waiganjo *et al.* (2013) noted that extensive training captured the creativity of employees and increased their skills. In a study in America on the impact of human capital investments such as employer-provided training and development, Belcourt (2013) found that returns on training and development investments increased productivity by 16-19% and enhanced employee performance. Training needs and how they were assessed, coupled with the criteria for selection and types for training like orientation, job training and career development were also implemented.

The study also found out that formal training in comparison with informal training was more effective and significantly associated with employee performance. According to Denby (2010), strategic training is a continuous process, one that is constantly refreshed and renewed according to the needs and requirements of the individuals. The Scholar encouraged organizations to revisit the contents after training. Accordingly Amaoka (2013) the framework for reshaping attitudes of public organization employees must involve staff training and development. The scholar emphasized that traditionally, training programmes had a skill-based focus, but recent trends in customer-oriented Civil Service required an attitudinal-focused training. This had led to the need for a strategic approach to training in order to develop the capacity of public servants for the improvement of service delivery.

Compensation involves the provision of fiscal value to its staff for the work they perform. Compensation includes BasePay, Overtime, Bonuses and allowances, Profit Sharing, Stock Options and Commissions. Compensation and rewarding strategies not only focus on the attracting, retaining and motivating workers but can be used in the attainment and sustenance of an organization's competitive edge. Reward and compensation strategies are vital practices that significantly enhance individual and organizational performance. A key responsibility in employee resourcing is retention of a skilled workforce. Individual compensation may be affected by their needs, level of education and training, social class or environment (Gerhart, 2013).

Most of the organizations use compensation focused on performance to reward employees since it positively impacts employee's performance (Brown *et al.*, 2013). Teseema and

Soeters (2016) reveal there is a positive link between compensation and employee performance. It is imperative that employers have good faith since the practice greatly influences employee recruitment, turnover and productivity. Organizations should effectively maintain and establish compensation systems that are efficient so as to link employee job performance with improved overall firm performance. A study done revealed that reward benefits have an influence on employee performance as it helps increase the energy level, enhance employee proficiency, capability and knowledge base so as to spur achievement of organizational goals.

Various researchers have strongly ventilated on the essence of team enticements. For instance, Dessler (2013), asserted that corporations that bestowed trust on teams to handle their task cultivated plans for incentive that promoted team effort and emphasized team member's devotion to performance. According to Ngui *et al.* (2014), compensation that was premised on performance effectively motivates and relays a strong communication that extraordinary levels of an employee's productivity is expected and has to be rewarded.

An empirical study by Hall *et al.*, (2013) proved that incentives increased the value people attached to work goals. Rewarding people for exceeding targets motivated them to spend more time on the rewarded tasks which lead to heightened interest and satisfaction. It also appeared to strengthen self-confidence and employee loyalty. Well-designed and implemented reward systems increased employee motivation, commitment, cost effectiveness and congruence (Snelgar *et al.*, 2013). In support of the above findings, empirical evidence adduced by Uzman and Daish (2010) on categories of rewards found that 95% of the workers who participated in his study confirmed that adequate rewards like salary and bonus pay induced in employees the urge to attain their desired results.

A study carried out by Duberg and Mollen (2010) on reward systems within the health and geriatric care sector sought to find out whether the reward systems affected the quality of healthcare, as well as determine how the systems were designed, and what their effects were on quality of health services provided by employees. The study found out that salary was an important aspect in the reward system; however incentives like bonuses and shares were seen to generate an enjoyable workplace with happy workers. This motivated employees and improved their effectiveness.

According to Zakaria *et al.* (2011), a reward strategy enhances commitment, retention and employee engagement that eventually translates into employee performance. Paying for performance is a huge concern in current HRM. Establishments had long thought that efficiency improved after pay was connected to performance. While payment by outcomes schemes and inducements are established to back the belief (Dessler, 2013). Researchers (Adeniji and Osibanjo, 2012; Cho *et al.*, 2006; Terpstra and Rozell, 2013; Bardot, 2014) have also established a positive nexus between performance-related pay and staff productivity. According to

Armstrong (2010), rewards proved to employees that the behaviour they exhibited was fitting and must be replicated.

Performance review involves logical assessment of how an employee performs in his delegated duties (Singh, 2014). Performance review is a crucial aspect of HRP for the progression of the employees as well as operations of a firm (Francis & Kleiner 2014). Rating the employees is obligatory as it helps to identify the strengths as well as areas of improvement by an employee. The execution of the performance evaluation system is a sophisticated job since it requires a precise and objective judgment of an employee’s performance, rather than being subjective. However, most performance reviews are always seen to be subjective. Evaluations of performance should be geared towards self-esteem and increased motivation. Performance evaluation should enhance improvement. A well designed performance review system that incorporates fairness and equity of the results in contentment, enhanced performance, enthusiasm and positive awareness towards performance reviews. In order to reap from the performance reviews, supervisors should ensure that they notify the appraises of the improvement required in the skills, knowledge and attitudes so as to have a substantial improvement.

Feedback in performance review is a vital factor while focusing on the factors relating to the job rather than the personality characteristics that may lead to subjectivity. Other competencies of an employee can actually be discovered during the appraisal process as fellow employees are given a chance to rate the colleagues and this may lead to personal growth and innovation within the organization. Accuracy, clarity of the goals as well as measurable standards should be used during the review process. Organizations should ensure that they carry out the evaluation either annually, semi-annually or quarterly.

Brigid (2013) studied employee perception of performance improvement programs in Kenya Commercial Bank Limited, Nairobi. The study concluded that the performance improvement programs affect employees’ performance to a great extent and that coaching helps in promoting and stimulating the learning and development of employees at the bank as well as helping individual employees realize their own potential and improve their performance.

Mwamburi (2012) studied managers’ perception of the effect of training and performance review on performance and the findings indicated that managers agreed that their perception of the training and employee review they undergo do influence their individual performance. A study by Nassazi (2003) on effects of training on employee performance found that employees require constant training and development programs to keep them updated with their skills as well as the company developments, for example, technological and customer related developments to improve their performance.

Archana (2013) carried out research on employee development and its effect on their performance and

concluded that there is a direct relationship between employee reviews and employee performance. The researcher observed that when employees are more developed, they would become more satisfied with the job, more committed with the job and the performance would be increased. The findings indicated that coaching is an important activity for the employee development and organizations can solve personal problems of the employees by providing coaching. The study further found that when problems are resolved, this leads to an increase in organizational performance as employees would be able to achieve organizational goals.

Conceptual Framework

Figure 1.1 presents the variables and their measures and how the study will be conceptualized. The independent variables will be retention practices, training and development practices, compensation practices and performance review practices and the dependent variable is health care service provision.

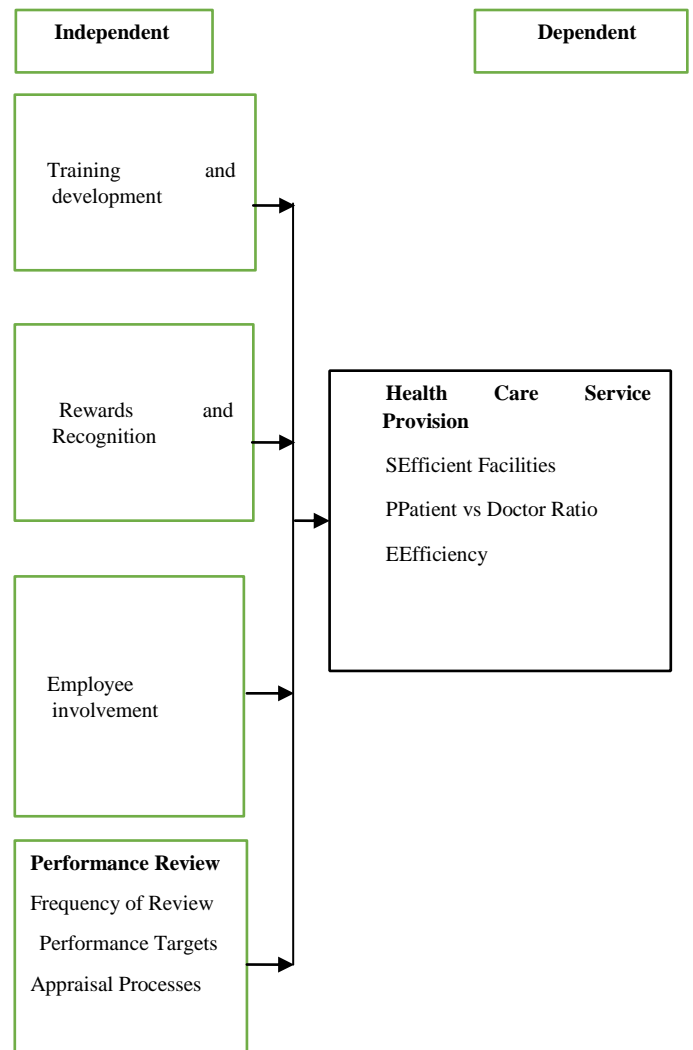


Figure 1.1 Conceptual Framework
Source: Researcher (2020)

III. RESEARCH METHODOLOGY

The study will employ a mixed methodology and specifically a convergent parallel mixed-methods perspective. This method involves the collection of both quantitative and qualitative data concurrently. The study employed a descriptive survey research design. The study was conducted in Benadir Hospital. The hospital is chosen because there have been misappropriations of funds and a lot of funds have been spent and the hospital lacks proper documentation. The study targeted three categories of employees in Banadir Hospital in Somalia namely; 17 top level management who comprise the heads of the health departments, 53 middle level management are the technical staff in the public hospitals who include medical officers, nurses, laboratory technologists, dentists, social workers and public health officers and 32 lower level management/support who include clerical officers, subordinate staffs, and secretaries. These make a total population of 102 employees. In determining the sample size in each stratum, Taro Yamane formula was used. Yamane (1973) The data for the study will be gathered by using a self-administered questionnaire.

Techniques of data Analysis

Analysis of data is a process of inspecting, cleaning, transforming and modeling data with the goal of discovering useful information, suggesting conclusions and supporting decision making (Creswell, 2009). Further Wambugu *et al.*, (2015) defines data analysis technique as examining what has been collected from the field and making deductions and inferences and should be carefully thought out. This is because data is transferred into knowledge when it is properly analyzed, interpreted and interpretations give it meaning. Data Analysis has multiple facets and approaches, encompassing diverse techniques under a variety of names, in different business, science, and social science domains.

In the study both qualitative and quantitative data will be collected. Data will be then classified according to the properties that characterize each of them. Respondents' total scores and percentages will be used to analyze data. Respondents' scores will be presented in descriptive statistics using mean, standard deviation and percentages. Data will be analyzed using the computer programme, Statistical Package for Social Sciences (SPSS). Pearson product correlation coefficient which will be used to find out whether there is a significant and positive relationship between the independent and dependent variables.

Ethical Considerations

Since the data collected will be sensitive, the data will be treated confidentially. The information will only be used for study purposes. The researcher will obtain an authorization letter for data collection from MKU and a NACOSTI research permit. The respondents will provide information for the study without the disclosure of their identities. Respondent's information will not be revealed in any communication

method, it will only be written. The respondents will be assured that their data will be treated with care. This will encourage them to provide accurate information. Respondents names will not appear anywhere in the research instrument. The researcher must ensure the members are protected and their data classified (Taylor & Bogdan, 2014). The researcher will collect information from the respondents voluntarily, no member will be forced to partake in the study. The respondent's consent will be sought by signing a consent form. The information collected will be kept for reference in future. Analyzed data will be in form of hard copies and it will also be kept in soft copies in flash diskettes VDs.

IV. RESULTS AND FINDINGS

Healthcare Service Delivery

The dependent variable for this study examined the Benadir region healthcare service delivery level. The health officials were presented with various statements and asked to rate their level of agreement. The received responses were coded and analyzed using descriptive statistics such as means and deviation to get a clear view of the pattern of the responses.

Table 1 Descriptive Analysis of Healthcare Service Delivery

	N	Sum	Mean	Std. Deviation
There are adequate supply and access to essential drugs in the health facilities	52	184.00	3.5385	1.11076
There is access to and provision of quality emergency health services at the hospitals	52	190.00	3.6538	.96781
The hospital adequately provides health services to marginalized and vulnerable populations	52	196.00	3.7692	1.00226
The hospital regularly conducts medical outreach programs for marginalized communities	52	168.00	3.2308	1.14815
There are clear emergency preparedness and response mechanisms within the health facility	52	191.00	3.6731	.96449
The health facility has improved access to safe and affordable health services within the community	52	208.00	4.0000	.90749
There is the ease of information sharing among health Workers	52	208.00	4.0000	.86319
There is an improvement in the number of patients being served within the health facility	52	217.00	4.1731	.80977
The health facility has put in place an effective decision support mechanism for patient management	52	213.00	4.0962	.84621

The results note agreement among respondents there is improvement in the number of patients being served within the health facility as denoted by a mean of 4.1731 and moderate deviation of .8097. The participants agreed that the health facility has improved access to safe and affordable health services within the community as shown by a mean of 4.00. The respondents also agreed that the health facility has put in place an effective decision support mechanism for patient management as indicated by a mean of 4.0962. The results also showed agreement that there are adequate supply and access to essential drugs in the health facilities with high dispersion in the responses (mean = 3.5385, dev = 1.1107). The study also showed that respondents neither agreed nor disagreed that the hospital regularly conducts medical outreach programs for marginalized communities (mean = 3.2308, dev = 1.1481) noting high variation in responses.

Effect of Human resource management practices on Healthcare Service Delivery

The first objective of the study sought to establish the effect of human resource management practices on healthcare service delivery in public hospitals within Banadir Region of Somalia. The study analyzed the collected research data using both descriptive and inferential analysis. The findings are presented chronologically; descriptive, correlation and regression results as shown below.

4.4.1 Descriptive Analysis of Human resource management practices

The participants were presented with statements on key human resource management practices broken down into; training and development, reward and recognition and employee involvement. The results of the analysis are presented below.

Table 2 Descriptive Analysis of Human resource management practices

z	The hospital ensures that all personnel receive some form of on-job training to boost their skills	52	205.00	3.9423	.97846
	The hospital continuously supports employees to pursue career advancement opportunities	52	182.00	3.5000	1.19640
	The hospital normally conducts seminars and workshops to improve personnel knowledge on emerging trends	52	199.00	3.8269	1.02366
	The hospital supports employees to meet their professional skills, which are key to improving job Performance	52	188.00	3.6154	1.10531
	Rewards and Recognition				
	The hospital offers employees bonuses to stimulate their work productivity	52	122.00	2.3462	1.28161
	The hospital offers personnel competitive remuneration packages to stimulate their work performance	52	122.00	2.3462	1.21888

	The hospital has put in place rewards schemes such as incentives and overtime pay	52	108.00	2.0769	1.21826
	The hospital ensures that top-performing employees are recognized to foster their achievement	52	125.00	2.4038	1.15910
	Employee Involvement				
	The employees within the hospital have opportunities to actively participate in management meetings	52	200.00	3.8462	.93692
	The employees exhibit emotional attachment in the dispense of their duties within the hospitals	52	189.00	3.6346	.99072
	The hospital employees are physically involved in their	52	226.00	4.3462	.78926
	Duties				
	The hospital ensures that employee views are taken into consideration during the decision making	52	211.00	4.0577	.93753

Concerning the training and development, the respondents agreed with all the statements. Particularly respondents indicated agreement that the hospital ensures that all personnel receive some form of on-job training to boost their skills (mean = 3.9423, dev = .97846). The results also showed agreement (mean = 3.8269, dev = 1.02366) that the hospital normally conducts seminars and workshops to improve personnel knowledge on emerging trends. The analysis indicated agreement that the hospital continuously supports employees to pursue career advancement opportunities (mean = 3.50, dev = 1.1964).

Regarding the rewards and recognition within the hospitals, there was disagreement among participants across all statements with findings showing disagreement that the hospital has put in place rewards schemes such as incentives and overtime pay (mean = 2.0769, dev = 1.21826). The respondents also disagreed that the hospital offers personnel competitive remuneration packages to stimulate their work performance (mean = 2.3462, dev = 1.21888). The participants further disagreed that the hospital offers employees bonuses to stimulate their work productivity (mean = 2.3462, dev = 1.28161).

Concerning the concept of employee involvement, there were varying responses obtained from participants. The study indicated strong agreement (mean = 4.3462, dev = .78926) the hospital employees are physically involved in their duties. Findings demonstrated agreement that the hospital ensures that employee views are taken into consideration during the decision making (mean = 4.0577, dev = .93753). The participants as well agreed that employees within the hospital have opportunities to actively participate in management meetings (mean = 3.8462, dev = .93692).

Correlation between Human resource management practices and Healthcare Service Delivery

The study further sought to establish the direction and significance of the effect of human resource management practices and healthcare service delivery. The study applied Pearson correlation tests and the findings are presented below.

Table 3 Correlation Test for Human resource management practices and Healthcare Service Delivery

		Health Service Delivery
Training And Development	Pearson	.397**
	Correlation	
	Sig. (1-tailed)	.002
	N	52
Reward and Recognition	Pearson	.023
	Correlation	
	Sig. (1-tailed)	.437
	N	52
Employee Involvement	Pearson	.439**
	Correlation	
	Sig. (1-tailed)	.001
	N	52
Health Service Delivery	Pearson	1
	Correlation	
	Sig. (1-tailed)	
	N	52

The correlation results showed there was a weak and positive effect of training and development on the healthcare service delivery ($P = .397$, $Sig = .002$). The tests also showed the weak positive and insignificant effect of rewards and recognition on the healthcare service delivery ($P = .023$, $Sig = .437 > .05$). The findings also established that employee involvement has a weak positive and significant effect on healthcare service delivery ($P = .439$, $Sig = .001$).

Regression between Human resource management practices and Healthcare Service Delivery

The research adopted a simple linear regression analysis to determine the strength of the relationship between human resource management practices and healthcare service delivery. The results of the regression analysis are presented in this section.

Table 4 Regression Summary for Human resource management practices and Healthcare Service Delivery

				Std. Error of the
Model	R	R Square	Adjusted R Square	Estimate
1	.487 ^a	.237	.190	6.24476

a. Predictors: (Constant), Employee Involvement, Reward and Recognition, Training And Development

The results yielded a regression coefficient of .237. This indicated that holding other factors human resource management practices have a positive effect on healthcare service delivery. This implied that 23.7% of changes in healthcare service delivery are predicted by employee involvement, reward and recognition, training and development within health institutions in Banadir Region of Somalia

Table 5 ANOVA Test for Human resource management practices and Healthcare Service Delivery

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	582.203	3	194.068	4.976	.004 ^b
	Residual	1871.855	48	38.997		
	Total	2454.058	51			

a. Dependent Variable: Health Service Delivery

b. Predictors: (Constant), Employee Involvement, Reward and Recognition, Training and Development

The findings of the ANOVA analysis yielded a F -calculated = $4.976 >$ (f -critical) and $Sig = .004 < .05$. These results showed there is a positive and significant effect of human resource management practices and health care service delivery in Banadir Region of Somalia.

Table 6 Regression Coefficients for Human resource management practices and Healthcare Service Delivery

		Unstandardized		Standardized		
		Coefficients		Coefficients		
	Model	B	Std. Error	Beta	t	Sig.
1	(Constant)	16.174	5.143		3.145	.003
	Training And Development	.492	.323	.250	1.523	.134
	Reward And Recognition	-.224	.214	-.140	-1.044	.302
	Employee Involvement	.799	.394	.322	2.026	.048
a. Dependent Variable: Health Service Delivery						
			40			

The findings above indicated that training and development has a positive but insignificant effect on healthcare service delivery ($\beta = .492$, $Sig = .134 > .05$). The results established there is an insignificant and negative effect of rewards and recognition on healthcare service delivery ($\beta = -.224$, $Sig = .302 > .05$). The research noted a positive and significant effect of employee involvement on healthcare service delivery ($\beta = .799$, $Sig = .048$). This demonstrated that a change in employee involvement by a unit will lead to a 0.799 change in healthcare service delivery.

V. CONCLUSION

The study concluded that that human resource management practices have an insignificant negative effect on healthcare service delivery. The findings showed that considering other organization factors; training and development, rewards and recognition and employee involvement have not been able to significantly determine healthcare service delivery.

VI. RECOMMENDATIONS

The study findings established that human factors are vital to healthcare service delivery within Banadir Region of Somalia. Based on this, the research recommends that the county government should develop capacity building programmes that will help expand the competency and professionalism of health workers. Further, through collaboration with non-governmental institutions, the county government should design regular training seminars that will help advance the personnel knowledge on emerging medical practices and technologies. The study also recommends that the county government should advocate for the national government to advance funding's and medical supplies promptly to ensure that the hospitals can adequately serve the public.

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