

Journal of Management & Business Studies

ISSN 2452-5340 / Vol. 6

Recibido: 14/marzo/2024 · Aprobado: 04/noviembre/2024

doi: 10.32457/jmabs.v7i1.2486

The Recruitment and Retention of Critical Healthcare Professionals: Focus at Polokwane Provincial Hospital

La contratación y retención de profesionales críticos de la salud: enfoque en el Hospital Provincial de Polokwane

SIMON MATOME NKGAPELE (1)

Xolani Thusi

University of Limpopo, Department of Public Administration, South Africa.

Autor para correspondencia: Xolani Thusi. Correo: Xolani. Thusi@ul.ac.za

ABSTRACT

Internationally, there is a demand to enhance the recruitment, training, development, and retention of health professionals in developing nations. In South Africa, this demand is demonstrated by the National Development Plan (NDP): Vision for 2030 which acknowledges the significance of recruitment, development, and retention of talented health professionals. Access to public health care is a fundamental right as stipulated in Chapter 2 of the Constitution of the Republic of South Africa. Therefore, public health is one of the services that ought to be provided to society, the government is mandated to provide access to healthcare facilities to those who cannot afford to get private health. This implies that the South African public health system must acquire and retain skilled, capable, and competent health professionals to make certain that the government provides public health as part of its service delivery mandate. This study utilized a mixed approach to explore the difficulties that the hospital experiences in acquiring scarce skilled health professionals and socioeconomic factors affecting health professionals. The study identified notable obstacles in recruiting and retaining skilled health professionals in the hospital, even with attempts to fill open roles. These challenges, intensified by inadequate working conditions, leadership problems, and socio-economic factors, impede the hospital's capacity to deliver sufficient healthcare services to the community. The findings underscore the need for a strategic approach to improve recruitment and retention, ensuring the hospital can meet the health needs of the population.

Keywords: Recruitment, Retention, Healthcare Professional, Public Hospital.



RESUMEN

En el plano internacional, existe la demanda de mejorar la contratación, capacitación, desarrollo y retención de profesionales de la salud en los países en desarrollo. En Sudáfrica, esta demanda se demuestra por el Plan de Desarrollo Nacional (PND): Visión para 2030 que reconoce la importancia de la contratación, el desarrollo y la retención de profesionales de la salud con talento. El acceso a la atención pública de salud es un derecho fundamental, según se estipula en el capítulo 2 de la Constitución de la República de Sudáfrica. Por lo tanto, la salud pública es uno de los servicios que debe ser proporcionado a la sociedad, el gobierno está obligado a proporcionar acceso a las instalaciones de atención médica para aquellos que no pueden permitirse el lujo de obtener atención médica privada. Esto implica que el sistema de salud pública sudafricano debe adquirir y retener profesionales de la salud calificados, capaces y competentes para asegurarse de que el gobierno proporcione salud pública como parte de su mandato de prestación de servicios. Este estudio utilizó un enfoque mixto para explorar las dificultades que experimenta el hospital en la adquisición de profesionales de salud escasamente calificados y los factores socioeconómicos que afectan a los profesionales de la salud. El estudio identificó obstáculos notables para la contratación y retención de profesionales de la salud calificados en el hospital, incluso con intentos de llenar los roles abiertos. Estos desafíos, agravados por condiciones laborales inadecuadas, problemas de liderazgo y factores socioeconómicos, dificultan la capacidad del hospital para prestar servicios de atención médica suficientes a la comunidad. Los resultados subrayan la necesidad de un enfoque estratégico para mejorar la contratación y retención, asegurando que el hospital pueda satisfacer las necesidades de salud de la población.

Palabras clave: Reclutamiento, Retención, Profesional de la Salud, Hospital Público.

1. Introduction

World Health Organisation (WHO) provides an estimate that there will be 18 million shortfalls of health professionals by 2030 (World Health Organisation, 2021). The work of Markovoitz and Heading (2023) affirms that by 2030 there will be a ten million scarcity of health professionals globally, especially in developing undeveloped nations. Shipalana (2019), also agrees that the recruitment and retention of health professionals is a serious challenge in developing nations such as South Africa. This demonstrates a need to amend the recruitment and retention of health professionals. De Beer (2019) in support of the above attests that internationally, there is a demand to enhance the recruitment, training, development, and retention of health professionals in developing nations. In South Africa, this demand is demonstrated by the National Development Plan (2011) which acknowledges the significance of recruitment, development, and retention of talented health professionals. This means that the acquisition

of talented and skilled health professionals in the public health sector should be enhanced.

The work of Moeti et al. (2023) provides an indication that public health is one of the services that ought to be provided to society, the government is mandated to provide access to healthcare facilities to those who cannot afford private health. Huisman (2021) concurs that "health care is a fundamental right" as stipulated in chapter 2 of the Constitution of the Republic of South Africa section 27 (1a) and highlights the significance of health professionals and the role they play in ensuring that there are health services. In addition, if society cannot access healthcare facilities that would imply that their right is violated. This implies that human resources in the public health sector need to be well managed to ensure that critical health positions get the attention of scarce skilled health professionals and retain them in public hospitals. The biggest difficulty that public hospitals encounter is the competition with private hospitals (Khalil & Alameddine, 2020).

However, most citizens cannot access private healthcare due to their socioeconomic status, instead, they rely on public hospitals to have access to healthcare services. The consequence that comes with an excessive turnover of skilled health professionals is that when health professionals leave public hospitals, the poor might suffer from illnesses such as Human Immune Deficiency (HIV) and Tuberculosis (TB), which require the intervention of skilled health professionals. An article by the Polokwane Observer (2017) asserts that the Polokwane Provincial Hospital stands a chance to lose half of its health professionals in other provinces. This is because some health professionals such as medical doctors are not satisfied with the way the hospital is doing and are looking for employment in other provinces. Moreover, the hospital has large shortfalls health professionals, and due to the abolition of staff appointments, yet it is noted that the Limpopo Department of Health (LDoH) is unable to appoint more staff as per Treasury Instruction Note 7. Erasmus (2019) pointed out several challenges encountered by health professionals at Polokwane Provincial Hospital, such as directives from management for nurses to perform tasks like cleaning and gathering medicines, which makes health professionals uneasy.

This indicates that the hospital must develop retention strategies and remove any elements that might lead to health professionals departing, as recruiting qualified health professionals can be challenging. Additionally, the entire Limpopo province is troubled by the lack of health professionals, as evidenced by the 2018/2019 LDOH annual report highlighting deficits in health personnel (LDOH Annual Report, 2018/2019). The report demonstrates the vacancy rate for specialists at 81.28%, medical

officers at 55.02%, pharmacists at 11.48%, nurses at 37.27%, allied health professionals at 56.19%, and paramedics at 81.15%. These elevated vacancy rates underscore the need for research on recruiting and retaining health professionals, as this issue impacts the entire Limpopo province population. Therefore, drawing from a mixed-method approach, this study aims to explore the difficulties in recruiting and retaining health professionals at the hospital under exploration. This will further discover how socioeconomic factors affect health professionals at the hospital. Lastly, the study will avail recruitment and retention strategies that can be used by the hospital to retain crucial scarce skilled health professionals.

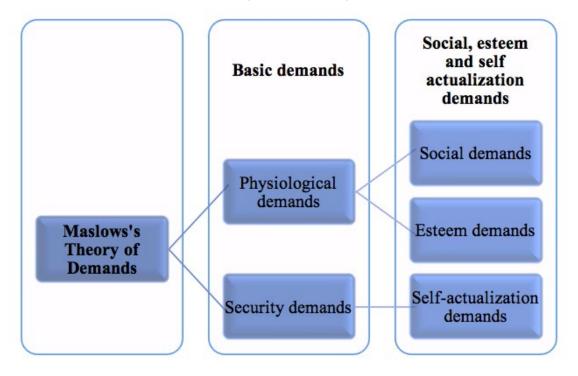
2. Theoretical Literature review

Maslow's Theory of Hierarchy of Demands

According to Maslow and Lewis (1987), maslow's hierarchy of demands is a psychological theory formulated by Abraham Maslow in 1943, proposes that human demands are structured in a hierarchy (Maslow & Lewis, 1987). McLeod (2007) assert that these demands are organized by priority, beginning with physiological and safety demands and extending to social, esteem, and self-actualization demands. Simons et al. (1987) highlight that these levels in the hierarchy usually need to be met in sequence, with lower-level demands being addressed before higher-level demands can act as motivational influences. Simons et al. (1987) further illustrate that this theory is founded on the following demands:

Figure 1: Maslow's Theory of Hierarchy of Demands

Maslow's Theory of Hierarchy of Demands



According to this theory, people are driven to satisfy the requirements of a lower level before advancing to higher-level requirements. Using Maslow's theory in the context of healthcare professionals helps explain the motivational factors influencing their decisions to join, stay with, or leave an institution. For example, Stefan et al. (2020) emphasizes the significance of physiological needs, like financial stability, adequate living conditions, and other basic necessities, in keeping health professionals. Public health institutions that provide adequate compensation and safe working conditions help fulfil these essential demands. Thusi and Chauke (2023) suggest that healthcare institutions could improve recruitment and retention by acknowledging and addressing these primary needs, potentially through offering competitive salaries or incentives such as grocery vouchers. Wahome (2022)

points out that the need for safety is crucial in supporting retention, as professionals are more likely to remain in their jobs when they perceive their work environment to be secure. Once these foundational demands are met, social demands come into play, where healthcare professionals desire a sense of inclusion, teamwork, and support at work.

A strong team environment can thereby bolster job satisfaction and commitment (Shoib et al., 2022). At a more advanced level, demands for esteem, such as recognition and respect, become essential. Employees who feel appreciated are more inclined to stay with the institution. Desmet and Fokkinga (2020) argue that self-actualization, or achieving one's full potential, is the pinnacle of Maslow's hierarchy, where employees pursue meaningful work and chances for professional development. In the healthcare context, this reflects a dedication to patient

care and career advancement, key factors in attracting and retaining driven professionals. This theoretical viewpoint indicates that addressing a spectrum of demands for healthcare professionals, from fundamental to ambitious, can enhance recruitment and retention, ultimately leading to better patient care quality and institutional stability.

Empirical Literature Review

In South Africa, the government carries the mandate to provide equal access to all members of the society as stipulated in Section 27(1) of the Constitution of the Republic of South Africa (RSA, 1994). Business Tech (2020) mentions that South Africa is countering serious shortfalls of health professionals. Moreover, a document from the Department of Health has been spotted which portrays that South Africa is encountering a severe shortfall of health professionals at both national and provincial levels. Business Tech (2019) provides an estimation that a total number of 97,000 health professionals will be needed by the year 2025 to tackle the unfairness across provinces. There are shortfalls of health professionals such as nurses in South Africa to supply healthcare services, and this has the potential to affect health services in a negative manner (Nkengasong et al., 2021). These shortfalls result in prolonged waiting times in public hospitals, unsatiated patients, prolonged stays in public hospitals, and inaccessible health professionals such as doctors when needed. De Beer (2019) indicates that public health institutions struggle in the recruitment of health professionals due to the skills shortage crisis in the health sector. Moreover, the author is of the view that in South Africa public hospitals acquired roughly 41% of the health professionals throughout the country, this indicates that the remaining 59% of health professionals are acquired by private hospitals.

However, many of the citizens rely on public health due to their socioeconomic statuses which does not grant them the opportunity to access private health. The work of Bisseker (2018) asserts that the president of the Republic of South Africa, Cyril Ramaphosa attempted to solve this problem through the 2018 Economic Stimulus and Recovery Plan by promising to acquire 2 200 health professionals to make certain of good management of the public health sector. This decision was made as an attempt to address some of the shortages of staff in the country's public hospitals. However, the shortfalls of health professionals persist across the country. The work of Terry et al. (2021) is of the view that there are several elements that influence the recruitment and retention of health professionals. Malakoane et al. (2020) highlight elements such as deficient supervision, lack of referral and support structures, working conditions, poor managerial structures, and shortage of necessary equipment and drugs. Maphumulo and Bhengu (2019) concur that public health establishments mostly characterized by poor infrastructure, lack of equipment and supplies, and other resources are likely to encounter difficulties in the acquisition and retention of health professionals. This remains a difficulty for public hospitals in the sense that health professionals desire to work in an establishment that has better infrastructure and in most cases health establishments that have better infrastructure it is the private health establishments (Mumbauer, et al., 2021).

Therefore, it is clear that effective delivery of the health system relies on having the right health professionals, a conducive working environment, good infrastructure, and adequate remuneration and benefits as these serve as motivation to health professionals to perform their duties. It must be noted that the performance of health professionals translates to the delivery of public health services. Ntuli and Maboya (2017) indicate that Limpopo Province, home to 6.01 million inhabitants as of 2021, ranks as the fifth most populous province in South Africa. Public health services in the province are provided through 40 public hospitals, including two tertiary institutions: Polokwane and Mankweng Hospital, which together form the Limpopo Academic Complex. These hospitals serve as the only referral centers in the province, offering specialized services essential for patients requiring tertiary healthcare. However, the shortage of human resources is a significant challenge in Limpopo Province, particularly in the healthcare sector as a whole. Netshisaulu, Malelelo-Ndou and Ramathuba (2019) assert that the Ministry of Health reports that more than 44,000 healthcare positions are funded in the state of Limpopo. However, only 35,450 of these positions were filled, leaving almost 10,000 vacant, or about 25 percent of the total workforce.

Furthermore, the Human Science Research Council's (HSRC) report further highlighted the seriousness of the shortage, showing that 75 percent of doctors and 67 percent of nurses are vacancies in the state. These alarming figures highlight the critical challenges facing the Limpopo health system and have a major impact on the province's ability to provide adequate health services. This calls for the Limpopo province to begin relying on the training, recruitment, and retention of trained health professionals, particularly, doctors in the health system in order to ensure a bright future for health care. There is a belief that there is a demand for evaluating the existing health workforce and it is should be

prioritized (Marufu, Collins, Vargas, Gillespie & Almghairbi, 2021). It is imperative to note that it is feasible to close the gap between private health care and public hospitals in terms of quality care, but it is not feasible to compete with private sector services to patients. Everyone needs high-quality health care, Verulava (2021) emphasizes that it is because it is a right, not a privilege. However, most of the hospitals in Limpopo cannot fully offer this at present due to a lack of qualified health professionals. This is due to the less effective recruitment and retention strategies. This notion is also supported by the work of Mukwevho (2023) who believes that these strategies fail dismally to address the shortfalls of health professionals because of budget constraints.

3. Research and Methodology

Research approach

The study utilized mixed-method a approach, this method is suitable for this study because it enabled the researcher to get a hold of information in both qualitative and quantitative methods. According to Hlongwane (2020), the mixed method is empirical research that employs both qualitative and quantitative data collection techniques, methods, approaches, concepts in a single study to respond to the research questions that arise from several perceptions. On the other hand, Dawadi et al. (2020) attest that the intended purpose of the use of mixed method research is that it gives a researcher a chance to obtain a clearer picture than utilizing only qualitative or quantitative methods as it concatenates the advantages of both methods. Therefore, employing a mixedmethod approach has led to an in-depth grasp of the matter in question. In this study, the application of the qualitative research approach was through semi-structured

personal interviews, and the application of the quantitative research approach was through a self-administered semi-structured questionnaire. The data gathered from semistructured interviews were analysed using thematic content analysis. The key objective of qualitative data was to determine patterns, concepts, themes, and elucidations. The qualitative data of the study therefore aimed to clarify and elucidate perceptions, patterns, themes, and explanations of the recruitment and retention of health professionals at the hospital. Concerning the analysis of quantitative data, descriptive and inferential statistical analyses were employed such as graphs and pie charts while words and for qualitative data analysis quotations were employed to dispense the data around the interpretive analysis.

Target Population, Sampling, and Sample Size

The target population is a group of individuals or items that demonstrate identical features

to what the researcher intends to study (Satishprakash, 2020). According to Ahlin (2019), sampling is significant as it enables the researcher to choose participants to make certain that the data obtained is obtained from knowledgeable individuals. This study employed non-probability sampling as well as purposive sampling. Omeihe (2021) indicates that non-probability sampling includes a target population that has not been chosen at random, therefore the target population stands a better chance of being chosen than others. Whitehead and Whitehead (2020) regarded purposive sampling as judgmental sampling in that participants are selected due to the qualities that they have. Therefore, participants in the study were sampled based on a judgment that they could provide useful information. Table 1 below demonstrates the target population for the study:

Table 1: Target Population and Sampling

PARTICIPANTS	DATA COLLECTION TECHNIQUE	TARGET	SAMPLE
Hospital manager	Semi-structured individual interview	1	0
HRM practitioners	Semi-structured individual interviews	7	5
Health professionals	Semi-structured questionnaires	16	9

Research Instrument

Semi-structured interviews are mostly utilized in qualitative research and further mention that semi-structured interviews are mostly suitable for data collection in health services research (Melissa & Lisa, 2019).

Saarijärvi and Bratt (2021) state that semistructured interviews can be regarded as suitable for mixed-method studies. **Semistructured questionnaires** are utilized in cases where a researcher has the desire to profile the sample in terms of numbers or to obtain

the frequency of ideologies, beliefs, processes, behaviours, and predictions (Rana et al., 2021). The study made use of semi-structured interviews and questionnaires to gather data. Questionnaires with a semi-structured format were handed out to health professionals within the hospital to uncover their views on the hospital's retention strategies, current challenges in attracting and retaining health staff, and to examine the socioeconomic factors affecting health professionals. These questionnaires provided the researcher with the assistance of analysing the data that was gathered based on the response provided by the participants. On the other hand, the study comprised semi-structured interviews that were carried out between human resource management (HRM) practitioners to gather information regarding the difficulties experienced in the acquisition and retention of health professionals at the hospital.

4. Results, Interpretation, and Discussion of Findings

Introduction

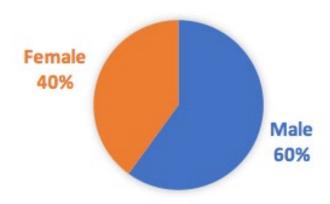
This section intends to discuss and analyse the data that was gathered through semi-structured interviews and questionnaires. The data gathered was intended to explore the difficulties in the acquisition as well as retention of health professionals at the hospital. The research findings will be analysed through data gathered from HRM practitioners and health professionals. The study employed a mixed-method approach to gather data. In some sections, the data is presented through graphs, words, and pie charts.

The Demographic Data

This section represents 13 participants' sex, age, and population information.

Gender Distribution

Figure 2: Gender of the participants of the semi-structured interviews

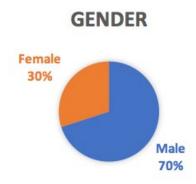


(Source: Researcher's compilation)

Figure 2 indicates the gender of the participants of the study, it demonstrates that

60% of participants were male while 40% of them were female.

Figure 3: Gender of the participants of the semi-structured questionnaires.



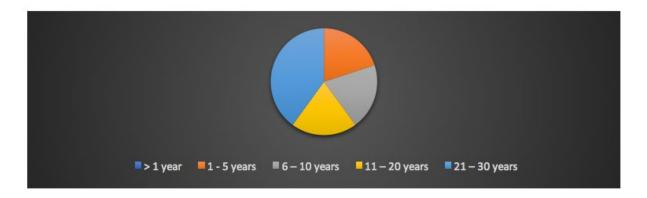
(Source: Researcher's compilation)

Figure 3 illustrates the gender of the health professionals who participated in the semi-structured questionnaires. Moreover, 70% of

the health professionals that completed the questionnaires were male while the remaining 30% were females.

Years of service in the hospital

Figure 4: Duration of employment of the participants of the semi-structured interviews

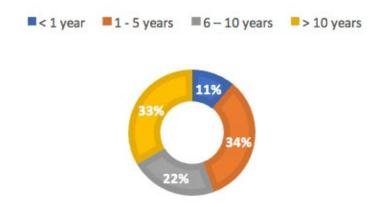


(Source: Researcher's compilation)

The outcomes of the study indicate that 40% of the participants have been employed at the hospital for 21-30 years while 20% of the participants have 11-20 years of experience in the hospital. Moreover, the other 20% of the participants have 6-10 years' experience while the other 20% have been employed between 1-5 years' experience. The purpose

of requesting the experience of the HRM practitioners who are employed at the hospital aided the researcher in selecting participants who were equipped with experience that is sufficient to aid in identifying and exploring the difficulties in the acquisition and retention of health professionals at the hospital.

Figure 5: Duration of employment of participants of the semi-structured questionnaires



(Source: Researcher's compilation)

The findings illustrate that 11% of the participants have been employed for a period of 0-1 year, and 34% of the participants have been employed at the hospital for a period of 6-10 years. On the other hand, 22% of the participants have been employed in the hospital for more than 10 years and lastly, 33% of the participants have been employed for 1-5 years. In a nutshell, healthcare professionals who participated in the questionnaire were relevant and suitable for the study as they possess the necessary experience.

Primary Data Collection and Analysis

The research findings were analysed through data gathered from both semistructured interviews and questionnaires. As previously indicated, a mixed-method approach was utilized to gather data for this study. To analyse quantitative data descriptive statistical analysis and inferential statistical analysis such as graphics and graphs, words, and citations for qualitative data analysis were used to disperse the data around interpretation analysis. The gathered data were used to investigate the difficulties in the acquisition and retention of health professionals at the hospital.

Theme 1: Recruitment and Retention

The key purpose of the study was to explore the challenges faced in recruiting and retaining health professionals in the Polokwane Provincial Hospital. Participants stated that the hospital had advertised its jobs through the LDoH. Despite these recruitment efforts, however, the hospital remains facing considerable difficulties in attracting health professionals. Consequently, the hospital often suffers from prolonged delays in filling critical health care positions that require scarce special skills.

One of the participants elucidated that:

"Limpopo Department of Health advertises vacant positions for all the public hospitals in the Limpopo province. A circular is published, and potential candidates apply through the website link provided in the advertisement."

Another participant indicated that:

"Polokwane Hospital through the department, mostly re-advertises most of the employment opportunities for health professionals due to not finding health professionals who are suitable".

Concerning the period taken to acquire health professionals, a participant clearly indicated that the acquisition process can be time-consuming. To illustrate this a participant indicated that:

"Sometimes the recruitment process can take a month or two months. The timeframe is good as it enables the hospital to find competent and qualified health professionals, however, it must be noted that the hospital receives a lot of applications that need to be screened, applicants must be shortlisted and interviewed which contributes to the increase in the time taken to make hiring decisions".

Concerning the retention strategies a participant indicated that:

"The Department aimed to increase the development of health professionals by offering bursaries to health students. However, this strategy has constraints, and it may not really keep health workers within the hospitals forever."

Another participant indicated that:

"The Department of Health awards bursaries to increase the total number of health professionals to students in health sciences. But it should be noted that it may happen that after a student completes their studies, they terminate their contracts with the Department instead of serving their contractual service obligations."

The study's findings on this theme highlight significant challenges faced by the hospital in the recruitment and retention of health professionals, particularly those with scarce and critical skills. Despite the efforts made by the hospital and the LDoH to fill vacant positions, the hospital continues to struggle with attracting and maintaining qualified healthcare professionals. This problem impacts hospitals throughout the province, as evidenced by the LDoH

2021/2022 Annual Report, which states that while the LDoH is authorized to have 64,436 employees, it only has 29,965 employees on staff. As a result, the LDoH operates at a vacancy rate of 53,50%. This has a negative impact on the provision of health services in the province. Participants pointed out that the hospital recruitment process was cumbersome and often failed to attract the appropriate candidates. Although the LDoH advertises vacant positions through online platforms, the hospital often needs to re-advertise these opportunities because initial recruitment efforts do not yield the desired results. This suggests that currently existing recruitment strategies are unable to reach or attract the target population of health professionals. Kroezen et al. (2015) demonstrated that isolated recruitment and retention strategies have minimal effect, whereas a combination of multiple interventions proves to be more successful. Thus, this suggests that the hospital ought to integrate recruitment and retention approaches to achieve effective public health service delivery. Furthermore, as noted by a participant, the lengthy recruitment process adds more pressure on the hospital's capability to promptly fill essential positions. According to Mokgolobotho and Nkgapele (2024), the inability of the health sector to successfully hire healthcare professionals often poses a significant issue that negatively affects the delivery of health services. Furthermore, the authors suggest that the hiring process should be entirely online to locate skilled and well-prepared healthcare professionals who are keen to work in the public sector.

The retention of health professionals is another important challenge for the hospital. The results show that although the LDoH offers scholarships to students in health sciences as a strategy to increase the number of health professionals, this approach has its limitations. Many of the recipients of these awards do not comply with their contractual obligations to work in the public health system after completing their studies and instead choose to look for other opportunities to provide better wages and working conditions. This means that financial incentives alone cannot be sufficient to retain skilled workers, especially if other factors such as workplace, leadership, and career development opportunities are not taken into account. The participants' comments also highlighted the lack of adequate retention strategies in the current framework. The inability to retain health professionals affects not only the level of hospital staff but also the continuity and quality of care provided to patients. On the basis of the labour force, due to budgetary and other constraints, there is a shortage of important health support personnel. More, evidence suggests that Limpopo has a high turnover of health staff (Parliamentary Monitoring Group, 2015).

These elevated turnover rates suggest that hospitals may need to re-evaluate their retention policies, adopting a more comprehensive approach to meet the needs and expectations of more health professionals. The findings make it clear that the current recruitment and retention strategies employed by the hospital are insufficient and require significant improvements. To attract and retain skilled healthcare professionals, the hospital must consider implementing more targeted recruitment campaigns that reach the right candidates, possibly through more diverse channels or by offering competitive compensation packages that reflect the market demands (Rose & Janse van Rensburg-Bonthuyzen, 2015). Moreover, streamlining the recruitment process to reduce the time taken to hire could help fill critical vacancies more quickly. This could be

achieved by conducting the entire recruitment process for health professionals online. For retention, the hospital might explore strategies beyond financial incentives, such as improving working conditions, offering more professional development opportunities, and creating a supportive work environment that values employee well-being. In a nutshell, the findings highlight the need for a comprehensive review and review of recruitment and retention tactics in the hospital. As a result, by responding to these difficulties, the hospital can better ensure that they have a stable and qualified workforce capable of providing high-quality health services to the community.

Theme 2: Leadership and working conditions

The other aim of this study was to point out current difficulties in recruiting and retaining health professionals at the hospital. Participants identified the difficulties that the hospital encounters in acquiring and retaining scarce skilled health professionals due to the hospital's leadership and working conditions.

One of the participants elucidated that:

"The leadership of the hospital is poor, sometimes medical doctors and nurses work overtime due to shortages of health workers".

Another participant indicated that:

"The working conditions at this hospital have the potential to affect health workers in general and negatively, most of them work long hours.".

One participant indicated that:

"Most health professionals in their exit interviews and surveys indicate that there is a lot of stress which is caused by some supervisors

because they don't want to take responsibility, and they don't handle issues in the right way."

Whereas another participant elucidated that:

"Health professionals during exit interviews highlight the issue that the management gives them with a lot of work which is stressful and most of the health professionals complain because they believe that they perform more paperwork than patient care."

Participants pointed out that hospital leadership was perceived as ineffective and poses several operational challenges. The lack of leadership is evident in the reported overtime work that health professionals are required to do due to staff shortages. This indicates that there is a lack of adequate staff management and that there is not a proactive approach to staff planning. Poor leadership seems to contribute to an environment in which health professionals feel overworked and under-supported, which has a major impact not only on their employment satisfaction but also on the overall quality of patient care. The work conditions in the hospital are also an important factor contributing to the difficulty of maintaining qualified health professionals. According to the Parliamentary Monitoring Group (2015) indicates that at a leadership and governance level within the department, positions had been filled by unqualified persons, making decision-making and progress slow. Reports of long working hours and the resulting stress highlight a demanding and potentially unsustainable work environment for longterm employment. The stress situation, exacerbated by the tendency of management to over-assign staff with administrative tasks instead of allowing them to focus on patient care, demonstrates a disconnect between management practices and the actual needs

of health professionals. This misalignment may lead to dissatisfaction with the job and could be an important driver of employee turnover. Additionally, a study by Rad and De Moraes (2009) supports this by indicating that job dissatisfaction is a key factor behind absenteeism and elevated employee turnover in the healthcare sector. Therefore, it is crucial to address this issue as it impacts both employee dedication to the institution and the excellence of healthcare services.

The mention of stress demonstrates the severity of these issues. Health professionals expressed that they face unnecessary stress from inadequate management and excessive workloads, indicating that hospital managers may not provide the necessary support or resources to ensure a healthy working environment. This not only leads to burnout but also reduces the hospital's ability to retain healthcare professionals. If health professionals are more focused on paperwork than on caring for patients, they may feel ill-equipped or misdirected which may lead to frustration. The results indicate that improving the quality of leadership and working conditions in the hospital could be crucial steps to promoting the recruitment and retention of health professionals. This is in line with NDP Chapter 10, which calls on public health institutions to comply with the Municipal System Act 2000 (as amended) and establish procedures and criteria of competence for the appointment of managers of hospitals. This includes setting clear criteria for removing inadequate managers of hospitals. Therefore, it is important that the hospital recognizes that difficulties acquiring and maintaining professionals not only affect the hospital but also deny the society the right to access health care, as stated in Chapter 2 of Section 27(1) of the South African Constitution.

Theme 3: Socioeconomic factors

One of the goals of the study was to explore socioeconomic factors that affect health professionals at the hospital. Most of the participants of the study agreed that socioeconomic factors affect their decision to take employment or to remain at the hospital for a long time.

One of the participants indicated that:

"Due to an increase in the cost of living such as petrol price, groceries, and other essentials the money I earn becomes little. I think the hospital should ensure that they adjust the salaries every time there is a rise in the cost of living".

Another participant indicated that:

"High levels of unemployment affect me negatively as I am the breadwinner. I have to care for the whole family because I am the only one with a source of income. The income I get is no longer able to meet the demands I have."

One participant emphasized that:

"The geographical location of the hospital indirectly affects me as I am far from my social support system. During difficult times I struggle to cope without them."

One participant indicated that:

"I am actively applying for other opportunities to seek better remuneration packages that will aid me in meeting my demands and enable me to provide for my family".

The findings on this theme show that socio-economic factors have a major impact on the decisions of hospital health professionals on the acceptance and maintenance of employment. These factors include increasing living costs, supporting the burden of extended families, hospitals' geographical location, and the search for

better pay. The research results highlight the direct and indirect impact of these socioeconomic pressures on the hospital workforce and, consequently, on recruitment and retention. One key finding is the pressure on health professionals due to rising living costs. Participants expressed concern about the insufficient payment of wages to cope with inflationary pressures such as rising gasoline prices, food, and other essential goods. This concern fits the wider economic context of South Africa, where inflation often exceeds wage growth, resulting in a reduction in purchasing power, particularly in the public sector (Olusola et al., 2022). In response to these pressures, participants suggested that hospitals should adjust salaries in line with rising living costs. The recommendation was supported by the work of Thusi and Chauke (2023), who emphasized that salaries were a critical factor in the recruitment and retention of qualified workers. In this context, regularly adjusting wages is a crucial strategy for hospitals to stay competitive in the labour market and to keep their workforce motivated and financially stable. However, relying solely on this approach may not be entirely effective.

The Basic Conditions of Employment Act of 1998 (BCEA) in South Africa sets minimum standards employment, for including provisions relating to salaries. The law provides that employers must provide fair compensation to reflect the cost of living. Furthermore, public service regulations require periodic reviews of pay to ensure that public sector pay remains fair and competitive. As a result, the hospital can address the socio-economic challenges faced by their employees and increase their retention rates. Another important finding is the impact of the geographical location of hospitals on the health of health professionals.

Because of their geographical location far away from the social support system, staff stress and difficulties become more difficult, especially during difficult times. This factor indirectly affects their job satisfaction and overall mental health and can contribute to the turnover of employees. Despite the geographical challenges the hospital should consider providing additional support to staff far away from families and communities.

This may include providing relocation allowances, access to mental health resources, or facilitating periodic travel allowances for family visits. The Occupational Health and Safety Act, 1993 (OHSA) emphasizes the importance of ensuring a safe and healthy working environment, which can be interpreted to include mental health and social well-being. By providing a secure and healthy work environment, the hospital can enhance employees' overall job satisfaction, which in turn may lead to lower turnover rates. This approach can also increase the hospital's ability to attract and retain health professionals. The findings also highlight the burden faced by many health professionals who are the only earners of their families. It must also be noted that many of these professionals have to support large family networks due to elevated unemployment, putting additional financial pressure on their income. Because their wages do not meet these demands, some health professionals seek better opportunities elsewhere contributing to high turnover rates (Aluttis, Bishaw & Frank, 2014).

5. Conclusion

The study has revealed significant challenges that impact the hospital's ability to maintain a stable and skilled workforce. Despite the efforts made to attempt to fill vacant positions, the hospital continues to face difficulties in attracting suitable candidates and retaining them over the long term. Evidence from the literature shows indicates that this issue is not confined to the hospital where the study was conducted but is also prevalent in the Limpopo province. These conundrums hinder public hospitals from delivering health services, as they struggle to meet the obligations under Section 27 (1a) of the South African Constitution due to a lack of skilled health professionals. The study identifies that the most concerning result of difficulties in hiring and retaining health professionals is the potential inadequacy of hospital care for the people in Polokwane, its neighbouring areas and the province. As a result, the community might be deprived of necessary health services. The study emphasizes the necessity for a broad and strategic plan to tackle these conundrums, ensuring the hospital can effectively attract, retain, and nurture a workforce capable of fulfilling the community's healthcare requirements.

6. Recommendations

To ensure the hospital meets the demands of patients, a sufficient number of health professionals should be recruited and retained to ensure a successful public health service delivery. Thus, the following recommendations are consistent with the conclusions of the study:

Recruitment and Retention Strategies

The hospital can improve the efficiency of its recruitment processes by incorporating part-time healthcare professionals into its recruitment strategy. This approach can involve employees who are retired, people looking for additional income, or recent graduates eager to gain experience. In order to implement this strategy effectively, the hospital could develop a strategic staffing plan clearly describing the roles,

responsibilities, and specialties of part-time and on-call professionals. In addition to this, the hospital can regularly monitor the performance of these part-time and standby health professionals and gather feedback from them and full-time staff. Through this feedback, the hospital can improve and improve their programs to improve their effectiveness over time. In order to maintain highly qualified personnel, the hospital can focus on providing opportunities for continuous professional development, such as the updating of training and certification. Furthermore, the implementation of working rotations and internships in other provinces can help integrate best practices and promote professional growth. These initiatives could be further supported by improving emotional compensation, such as working-life balance, recognition programmes, and career development opportunities, especially if short-term budget constraints make it difficult to increase direct wages. This suggests that with the adaptation of these measures, the hospital can better address the challenge of recruiting and retaining health professionals and ensure a stable and responsive workforce.

Socioeconomic factors

In order to address social-economic factors, the hospital can regularly review and adjust the pay packages and benefits offered to health professionals. In addition, the hospital could introduce retention bonuses and incentives for long-term employees. Therefore, the implementation of these measures can foster stability reduce turnover and strengthen the retention of health professionals. This approach could significantly improve hospitals' ability to provide high-quality, consistent medical services to the community.

Leadership and working conditions

The hospital could implement development programs for current and future leaders and conduct regular performance reviews to hold leaders accountable for their actions and decisions. This recommendation aligns with the NDP of 2011 Vision for 2030, which prioritizes strengthening the public health system by ensuring competent leadership and management across all levels of the healthcare system, from clinics to tertiary hospitals (RSA, 2013).

Acknowledgment

All authors have read and agreed to the published version of the manuscript.

Author Contributions: S.M Nkgapele

Funding: This research was not funded

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: The data presented in this study are available on request from the corresponding author. The data are not publicly available due to restrictions.

Conflicts of Interest: The author declares no conflict of interest.

References

Ahlin, E. M. (2019). Semi-structured interviews with expert practitioners: Their validity and significant contribution to translational research.

Aluttis, C., Bishaw, T., & Frank, M. W. (2014). The workforce for health in a globalized context–global shortages and international migration. *Global health action*, *7*(1), 23611.

Business Tech. (2019). 5 ways to bridge the global health worker shortage, World Economic Forum. Available at: https://www.weforum.org/agenda/2019/07/5-ways-to-bridge-the-global-health-worker-shortage/ (Accessed: 24 April 2023).

Business Tech. (2020). South Africa faces massive healthcare worker shortage - businesstech. Available at: https://businesstech.co.za/news/lifestyle/430618/south-africa-faces-massive-healthcare-worker-shortage/ (Accessed: 25 May 2023).

Dawadi, S., Shrestha, S., & Giri, R. A. (2021). Mixed-methods research: A discussion on its types, challenges, and criticisms. *Journal of Practical Studies in Education*, 2(2), 25-36.

De Beer, J. N. (2019). The recruitment and retention of medical practitioners and specialists in rural areas: the case of the Northwest Department of Health (Doctoral dissertation, North-West University (South Africa)).

Erasmus, N. (2019). "There are going to be problems," - nurses on New Rotation System at Pietersburg Provincial Hospital, Review. Available at: https://reviewonline.co.za/321778/going-problems-nurses-new-rotation-system-pietersburg-provincial-hospital/ (Accessed: 30 April 2023).

Hlongwane, P. (2020). The application of mixed methods research in public administration: opportunity missed or taken?. International Conference on Public Administration and Development Alternatives (IPADA).

Hopper, E. (2020). Maslow's hierarchy of needs explained. ThoughtCo.

Huisman, B. (2021). *Interview: Dr Thembisile Xulu on a year at the head of sanac, Spotlight*. Available at: https://www.spotlightnsp.co.za/2021/12/01/interview-dr-thembisile-xulu-on-a-year-at-the-head-of-sanac/ (Accessed: 18 April 2023).

Kroezen, M., Dussault, G., Craveiro, I., Dieleman, M., Jansen, C., Buchan, J.,... & Sermeus, W. (2015). Recruitment and retention of health professionals across Europe: A literature review and multiple case study research. *Health policy*, 119(12), 1517-1528.

Kurdi, B., & Alshurideh, M. (2020). Employee retention and organizational performance: Evidence from banking industry. *Management Science Letters*, 10(16), 3981-3990.

Limpopo Department of Health. (2019). LDoH 2018/2019 Annual Report. Available at: http://www.ldoh.gov.za/ldoh-admin/documents/latestnews/documents/Annual%20Report%20%20LDoH%20202122.pdf (Accessed: 10 March 2024).

Malakoane, B., Heunis, J. C., Chikobvu, P., Kigozi, N. G., & Kruger, W. H. (2020). Public health system challenges in the Free State, South Africa: A situation appraisal to inform health system strengthening. *BMC health services research*, 20, 1-14.

Maphumulo, W. T., & Bhengu, B. R. (2019). Challenges of quality improvement in the healthcare of South Africa post-apartheid: A critical review. Curationis, 42(1), 1-9.

Markovoitz, G. and Heading, S. (2023). Global risks report 2023: We know what the risks are here's what experts say we can do about it, World Economic Forum. Available at: https://www.weforum.org/agenda/2023/01/global-risks-report-2023-experts-davos2023/ (Accessed: 25 March 2023).

Marufu, T.C., Collins, A., Vargas, L., Gillespie, L. and Almghairbi, D. (2021). Factors influencing retention among hospital nurses: systematic review. *British Journal of Nursing*, 30(5), pp.302-308.

Maslow, A., & Lewis, K. J. (1987). Maslow's hierarchy of needs. *Salenger Incorporated*, 14(17), 987-990.

McLeod, S. (2007). Maslow's hierarchy of needs. *Simply psychology*, 1(1-18).

Melissa, D., & Lisa, M. (2019). Semistructured interviewing in primary care research: A balance of relationship and rigour. *Chinese General Practice*, 22(23), 2786.

Moeti, T., Mokhele, T., Weir-Smith, G., Dlamini, S., & Tesfamicheal, S. (2023). Factors affecting access to public healthcare facilities in the City of Tshwane, South Africa. *International journal of environmental research and public health*, 20(4), 3651.

Mokgolobotho, R. M., & Nkgapele, S. M. (2024). International Journal of Social Science Research and Review.

Mukwevho, N. (2023). Limpopo budget constraints leave junior doctors without community service contracts, Health. Available at: https://health-e.org.za/2023/07/13/__trashed-8__trashed/ (Accessed: 01 September 2024).

Mumbauer, A., Strauss, M., George, G., Ngwepe, P., Bezuidenhout, C., de Vos, L., & Medina-Marino, A. (2021). Employment preferences of healthcare workers in South Africa: Findings from a discrete choice experiment. *PLoS One*, *16*(4), e0250652.

Netshisaulu, K.G., Malelelo-Ndou, H. and Ramathuba, D.U. (2019). Challenges experienced by health care professionals working in resource-poor intensive care settings in the Limpopo province of South Africa. *Curationis*, 42(1), pp.1-8.

Nkengasong, J. N., Raji, T., Ferguson, S. L., Pate, M. A., & Williams, M. A. (2021). Nursing leadership in Africa and health security. *EClinical Medicine*, 36.

Ntuli, S.T. and Maboya, E. (2017). Geographical distribution and profile of medical doctors in public sector hospitals of the Limpopo Province, South Africa. *African Journal of Primary Health Care and Family Medicine*, 9(1), pp.1-5.

Olusola, B. E., Chimezie, M. E., Shuuya, S. M., & Addeh, G. Y. A. (2022). The impact of inflation rate on Private consumption expenditure and economic growth—evidence from Ghana. *Open Journal of Business and Management*, 10(4), 1601-1646.

Omeihe, K. O. (2021). Non-Probability Sampling.

Parliamentary Monitoring Group. (2015). National and provincial Department of Health Briefings: Challenges in Eastern Cape, Free State, Limpopo, in presence of minister of health: PMG, Parliamentary Monitoring Group. Available at: https://pmg.org.za/committee-meeting/20946/ (Accessed: 01 September 2024).

Polokwane Observer. (2017). *Pietersburg Provincial Hospital: In the heart of the beast, Review*. Available at: https://www.citizen.co.za/review-online/news-headlines/2017/10/19/pietersburg-provincial-hospital-in-the-heart-of-the-beast/ (Accessed: 10 March 2023).

Rad, A. M. M., & De Moraes, A. (2009). Factors affecting employees' job satisfaction in public hospitals: Implications for recruitment and retention. *Journal of General Management*, 34(4), 51-66.

Rana, J., Dilshad, S., & Ahsan, M. A. (2021). Ethical issues in research. Global Encyclopedia of Public Administration. *Public Policy, and Governance. Farazmand A (ed): Springer, Cham, 10, 978-3.*

Republic of South Africa (RSA). (1996). The Constitution of the Republic of South Africa, 1996. Available at: http://www.gov.za/documents/constitution/constitution-republic-south-africa-1996-1%20. (Accessed: 23 May 2023).

Republic of South Africa (RSA). (1997). Basic Conditions of Employment Act 75 of 1997. Department of Labour. Available at: http://www.labour.gov.za/DOL/downloads/le-

gislation/acts/basicconditions-of-employment/Amended%20Act%20-%20Basic%20 Conditions%20of%20Employment.pdf (Accessed: 15 April 2023).

Republic of South Africa (RSA). (2011). National Development Plan (NDP), Vision 2030. National Planning Commission (NPC). Available at: http://www.npconline.co.za/medialib/downloads/home/NPC%20National%20Developme nt%20Plan%20Vision%20 2030%20-lo-res.pdf (Accessed: 15 April 2023).

Republic of South Africa (RSA). (2013). National Development Plan 2030: Our Future - make it work. National Planning Commission (NPC). The Presidency. Available at: http://www.poa.gov.za/news/Documents/NPC%20National%20Development (Accessed: 25 May 2023).

Rose, A., & Janse van Rensburg-Bonthuyzen, E. (2015). The factors that attract healthcare professionals to and retain them in rural areas in South Africa. *South African Family Practice*, *57*(1), 44-49.

Saarijärvi, M., & Bratt, E. L. (2021). When face-to-face interviews are not possible: tips and tricks for video, telephone, online chat, and email interviews in qualitative research.

Satishprakash, S. (2020). Concept of population and sample. *Gujarat University. Research-Gate*.

Shipalana, M. L. (2019). Recruitment and retention of healthcare professionals in the public health sector: focus at the Limpopo Department of Health.

Simons, J. A., Irwin, D. B., & Drinnien, B. A. (1987). Maslow's hierarchy of needs. *Retrieved October*, 9(2009), 222.

Terry, D., Phan, H., Peck, B., Hills, D., Kirschbaum, M., Bishop, J.,... & Schmitz, D. (2021). Factors contributing to the recruitment and retention of rural pharmacist workforce: a

systematic review. BMC Health Services Research, 21, 1-15.

Thusi, X., & Chauke, R. (2023). Strategies for retaining scarce skills and reducing turnover in the South African Public Sector. *International Journal of Management, Entrepreneurship, Social Science and Humanities*, 6(1), 120-134.

Verulava, T. (2021). Access to Healthcare as a Fundamental Right or Privilege?. *Siriraj Medical Journal*, 73(10).

Wahome, C. (2022). What is Maslow's hierarchy of needs.

Whitehead, D., & Whitehead, L. (2020). Data collection and sampling in qualitative research. *Nursing and Midwifery Research Methods and Appraisal for Evidence-Based Practice*. 6th Edition. Sydney: Elsevier, 118-135.

World Health Organization. (2021). WHO guideline on health workforce development, attraction, recruitment and retention in rural and remote areas: web annexes.