



DEMYSTIFYING EMPLOYEE RETENTION STRATEGIES – FACTOR AFFECTING NURSES IN PRIVATE SECTOR

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Abstract

The Indian Healthcare Industry is growing very rapidly and one of the biggest problems the private sector hospital is facing is high rate of employee attrition. Nursing is one such mobile profession and creates lots of problem in the day to day operations of a healthcare organization if in short number as compared to patient. For organization to be successful at competing for new talent and retaining employees, they have to know what workers want, what keeps them happy, and what makes them stay. The present paper is based on empirical work. An experimental survey on nurses of Private sector hospitals were carried out and were evaluated on nine sub scales viz: measuring work relationship factors, job and work life factors, performance appraisal and reward factors, work life balance factors, training and development, work condition, work related stress factors, financial factors and patient related factors. Data calculation is done on various independent variables such as gender, age, marital status, work experience with the above mentioned 9 retention factors. The objective of the study is to investigate the factors contributes to the retention of nurses and to understand the major challenges in retaining the nurses in private sector hospitals.

Key Words: - Employee Retention, Nursing Retention, Nursing Turnover, Private Sector Hospital.

INTRODUCTION

Employee retention refers to the ability of an organization to retain its employee. Many consider employee retention as relating to the efforts by which employer attempt to retain employee in their workforce. Thus, retention becomes strategies rather than the outcome.

Employee retention is a process in which the employees are encouraged to remain with the organization for the maximum period of time. Employee retention is beneficial for the organization as well as the employee. Employees today are different. When they get dissatisfied, they move to other organization. It is the responsibility of the employer to retain their best employees, if not; the organization will lose the star performers (good employees). (Gurumani, 2010).

Effective retention strategies help organizations to provide effective employee communication to improve commitments and enhance workforce support for key corporate initiatives. Sound human resource practices are essential for retaining effective professionals in any organization.

Why Employee Retention Needed?

It is nothing but maintaining employees whole hearted commitment to the progress and welfare of the organization by keeping them satisfied and happy. Employee retention is important to make the talented and good people to stick to the organization as they are always in demand. By retaining old and trustworthy employees to provide a learning culture to the new hires, to bring stability to the organization and they have knowledge of the organization process and valuable experience.¹

Attrition: Employee attrition refers to the loss of employees through a number of circumstances, such as resignation and retirement. The cause of attrition may be either voluntary or involuntary, though employer-initiated events such as layoffs are not typically included in the definition. Each industry has its own standards for acceptable attrition rates, and these rates can also differ between skilled and unskilled positions. Due to the expenses associated with training new employees, any type of employee attrition is typically seen to have a monetary cost. It is also possible for a company to use employee attrition to its benefit in some circumstances, such as relying on it to control labor costs without issuing mass layoffs.²

Attrition among nurses: Any health care system the nursing professional form the backbone. All the clinical activities in a health care system somehow related to nurses. A nurse is the most appropriate person to comfort a patient and to comfort the nervous relatives. Nurses also play a very important role in supervising and cooperating to see that a personalized and customized care is provided. There are many factors that contributed to nursing turnover which is not limited only to financial incentives. Non economic factors that might lead to attrition include poor recruitment and retention strategies, poor working condition, poor job satisfaction, stress, more workload and poor social image of the nursing profession. The health



care system of the developing country like India faces one the major challenge is international migration of professional nurses, in search of better compensation, better working environment and quality of work life, and for better scope.

Private Hospital or Health care Organization is a hospital owned by a for-profit company or a non-profit organization and privately funded through payment for medical services by patients themselves, by insurers, Governments through national health insurance schemes, or by foreign embassies.³

The work environment of a Hospital is not as relaxed as all the employees work together for a common goal and that is well being of the patients. Nursing is a profession within the health care sector focused on the care of individuals, families, and communities so they may attain, maintain, or recover optimal health and quality of life.⁴

Need and Significance of the Study

Nursing is a profession which is very mobile in nature and currently one of the important matter of discussion at the top level of the health care organization are how to attract and retain the registered nurses. The recent legislation mandating minimum patient to nurse ration in hospitals demand an understanding of nurse staffing levels in different wards affect patient outcomes and retention of nurses in hospital practice.

The Nursing Council of India recommends a nurse - patient ratio of 1:1 in ICU, 1:3 in intermediate unit and 1:6 in the general units.⁵ A shortage of nurse in a healthcare setting can affect many aspects of quality health care delivery and many of the hospital are facing this problem of shortage of nurses as many of the fresher tend to leave after or within one year of job to find better financial assistance and scope. Many of the hospitals are not able to meet the basic requirement of nurses due to factors work condition, lack of appreciation, financial factors, and work stress or over workload and sometimes patient related factors. According to the Union Health Ministry India is currently facing shortage of over 60% nurses. According to Nursing Council of India, there are around 10.35 lakh nurses registered with them, but only 40% are in active service.⁶ Even some of the nursing professionals are changing their carries to other areas and many times among various reasons they felt that there is lack of respect for nurses in Indian society. So, this study intends to find out what are possible reasons or contributing factors that can influence nurse's decision to retain with a particular organization for a longer period.

REVIEW OF LITERATURE

The research study by Noufa A. Alonazi, MD, MSc and Maye A. Omar (2013) in the area of Factors affecting the retention of nurses at Prince Sultan Military Medical City identified a number of factors that played a key role in staff retention, which included nationality, marital status, job title, and job satisfaction. Each Contributing factor should be reviewed individually. More provision for married personnel, by offering benefits to attract employees will encourage staff to feel contented and remain longer in their jobs. Based on the results, any strategy developed should consider employing nurses within a certain age group, as younger staff has a more transient attitude to employment in this environment. The recruitment of experienced staff could benefit high stressful areas; with the introduction a rotation strategy should be considered. In addition, nurses working in areas where the workload is extreme could be supported with more frequent and longer breaks. Exit interviews could provide useful information on the work environment which in turn may be useful in the development of interventions to reduce turnover.

Cynthia L. Cummings (2011) on what factors affect nursing retention in the acute care setting showed that moral distress and professional stress affect the lives of acute care nurses every day. The impact of these stressors may be causing nurses to leave the acute care setting. The results of this study demonstrated that when combined, both professional stress and moral distress items were predictive of the nurses' intent to stay at the institution. Discriminant analysis indicated that the six factors of frequency professional recognition, intensity professional recognition, and frequency lack of confidence, frequency terminal illness, intensity professional patient care, and intensity moral dying were predictors of nurse's intent to stay in the hospital setting Some critical factors that need to be addressed are those related to employee recognition, pay, autonomy, and promotional opportunities. In addition to the structural factors, managers must make every effort to address job stress. As noted, nursing stress can lead to burnout, exhaustion, and an inability to adequately care for patients. Nursing managers must acknowledge the presence of job related stress and present programs to deal with these issues.

D. Rajan (2013) in his study on impact of nurse's turnover on organization performance analyzed that increased cost of recruitment; impaired service and morale are the effect of turnover on organization. The survey also reported that high cost of recruitment and poor quality of products and services due to high turnover. Another result of the present study such as increasing recruitment and training cost. The result of the present study explains that turnover increases the work load of remaining nurses. High load of remaining nurses because of high turnover of nurses produce minor injuries in the work place such as needle stick injuries and the like. That excessive work load for remaining staff, delay in daily routine procedures (e.g.



transfer of the patient to operation theatre, ICU and wards), poor patient satisfaction, complaints from patients (as newly joined staffs take long time to cope with routine procedures), poor job satisfaction of the remaining nurses, complaints from medical personnel about delay in routine procedure and incomplete procedure, complaints from housekeeping and biomedical department in terms of segregation of biomedical wastes and wastages and loss of resources as newly joined staff has not known the routines well are the foremost impact of turnover of nurses on organization performance.

Ehlers, V.J. & Oosthuizen, M.J (2011) in their research on factors influencing the retention of registered nurses in the Gauteng Province of South Africa found that the most important factors that would influence more than 90.0% of these nurses' decisions to stay with their current employers related to finances, safety and security, equipment and/or supplies, management, staff and patients. In terms of Maslow's Hierarchy of Needs Theory, deficiency needs (physiological, safety and social needs) should be met by improved salaries revised on an annual basis, paying long-service and outstanding-service bonuses, and improving the safety and security, as well the available equipment and supplies, at institutions. Sufficient numbers of nurses should be employed and vacancies should be filled rapidly. However, not all changes required to enhance nurses' retention rates involve increased costs. Managers should lead by example and respect nurses, and encourage doctors as well as patients to do so, to meet nurses' self-esteem needs. Recognizing and rewarding outstanding service would meet nurses' self-actualization needs, as well as opportunities to further their education.

A Ramachandra Aryasri and S.Suman Babu (2009,) in their study of impact of flexi time as a work -life balance practice on employee retention showed that when the average flexi-time score increases the average employee retention score also increases. Provision for work life balance practices like flexi-time may benefit organizations by increasing retention rate where employee can perform to the best of their potentials and it does not add any cost to the organization and adds many organizational benefits to the bottom line like increased satisfaction & productivity, reduced stress & absenteeism apart from retention of valuable employees.

John E. Sheridan (1992) in his research organizational culture and employee retention that cultural values vary significantly across six public accounting firms with offices located in the same city. Three firms were characterized as having a culture emphasizing the interpersonal relationship values of team orientation and respect for people. Three other firms were characterized as having a culture emphasizing the work task values of detail and stability. Professionals hired in the firms emphasizing the interpersonal relationship values stayed 14 months longer than those hired in the firms emphasizing the work task values. This large difference in voluntary survival rates has important consequences for organizational effectiveness.

Sulakhs Dwivedi, Sanjay Kaushik and Luxmi (2014) in their study impact of organizational culture on commitment of employees an empirical study of BPO sector in India it stated that employee in BPO sector are particularly sensitive to six dimensions of organizational culture viz. proaction, confrontation, trust, authenticity, experimentation and collaboration. Thus, more the BPO employees perceive higher level of these dimensions; more will be their committed to their organization.

OBJECTIVES

1. To identify the factors contributes to the retention of nurses.
2. To understand the major challenges in retaining the nurses.

METHODOLOGY

Data Collection: The present research is a cross sectional descriptive study and is based on primary data. The Primary data has been collected from 3 Private Hospital situated at Bangalore.

A structured questionnaire was adopted for collecting primary data as also the literature and interview has been conducted with executives from Human Resource Department and Nursing Administration Dept. Secondary sources include information from the journals, periodicals, magazines and the related websites.

The Tool: A detailed questionnaire is designed keeping in view the objectives of the study and administered among sample respondents. The questionnaire has two sections, with five point Likert⁷ rating scale, ranging, 1=strongly disagree, 2=disagree, 3=can't say, 4=agree, 5=strongly agree.

Section A: Personal information of respondents was sought. It constitutes age group, experience, gender, marital status of the respondents.

Section B: This section is regarding factors of nurses retention, questions were designed on nine sub-scales measuring work relationship factors, job and work life factors, performance appraisal and reward factors, work life balance factors, training and development, work condition, work related stress factors, financial factors and patient related factors.

Sample Size: Samples of 150 responses was included for this study. Respectively from Hospital “A” total 51 respondents, Hospital “B” total 28 respondents and from Hospital “C” total 71 respondents have been selected and data have been collected. Each nurse was contacted personally and the questionnaire items were discussed thoroughly.

Table1.1: Showing the Research Sample

Hospitals	A	B	C	Total
Respondents	51	28	71	150

Sampling Method: Simple random sampling method was adopted. It is a probability sampling technique. Respondents considered for data collection were at various positions at senior, middle and at entry level at three different private hospitals.

DATA ANALYSIS

Gender:Table1.2: Showing the Frequency Of Gender.

Gender of Nurses	Number	(%)
Male	21	14%
Female	129	86%
Total	150	100%

Educational Qualification

Table1.3: Showing the frequency of educational qualification.

EDUCATION	Number	(%)
DIPLOMA IN NURSING	20	13.40%
GNM	80	54%
B.SC NURSING	50	32.60%
TOTAL	150	100%

Experience

Table1.4: Showing the frequency of experience in current organization.

Experience In Current Organization	0-1 Year	1-2 Years	2-5 Years	Above 5 Years	Total
NUMBER	65	46	27	12	150
(%)	43.33%	30.67%	18%	8%	100%

Marital Status

Table1.5: Showing the frequency of Marital Status.

MARITAL STATUS	MARRIED	SINGLE	TOTAL
NUMBER	59	91	150
PERCENTAGE	39.33%	60.67%	100%

Table1.6: Descriptive Statistics for work relationship factors

Items	Total(150)*		Male(21)*		Female(129)*	
	Mean	SD	Mean	SD	Mean	SD
My relationship with my supervisor is good.	4.38	0.66	4.28	0.56	4.39	0.67
My relationship with my co-worker is good.	4.41	0.65	4.47	0.51	4.4	0.67
I am satisfied with my supervisors support and guidance.	4.31	0.69	4.09	0.7	4.34	0.69
My supervisors or in charge listen to my job related problem and try to solve them.	4.28	0.79	4.14	0.65	4.3	0.81
My supervisor tells how to improve performance.	4.35	0.76	4.23	0.88	4.37	0.75

*number in bracket denotes the number of respondents

Interpretation: The Table 1.6 explains item wise responses for employees towards the factors that affect work relationship of nurses. The mean and standard deviation for the responses for every item is calculated. Results indicate that respondents

are very comfortable to work with their supervisors (mean=4.38) and very much comfortable to work with their co-workers. The Nurses are also satisfied with their supervisors support and guidance (mean=4.31), respondents agree that their supervisors or in charge listen to their job related problem and try to solve them (mean=4.28) and about their supervisor tells how to improve performance (mean=4.35).

Table1.7: Descriptive Statistics Job and Work Life Factors.

Items	Total(150)*		Male(21)*		Female(129)*	
	Mean	SD	Mean	SD	Mean	SD
I feel proud as an employee of this organization.	4.13	0.87	3.95	0.92	4.15	0.87
My job is challenging	4.25	0.74	4.28	0.56	4.24	0.77
I am allowed to take independent decision to execute my work properly.	3.81	0.99	3.76	1.09	3.82	0.98
My current role and working environment match my expectation.	3.85	0.97	3.9	0.94	3.83	0.98
I think my qualification and skills could have been used to better advantage.	4.1	0.79	4.09	0.62	4.1	0.81

*number in bracket denotes the number of respondents

Interpretation: The table 1.7 shows the responses of respondents on factors related to their job and work life. Most of the respondents feel that they proud as an employee of their organization (mean=4.13) and doing a challenging job (mean=4.25). Not a very high percentage but not much less respondents (mean=3.81) feel that they are allowed to take independent decision to execute their work properly and their current role and working environment match their expectation (mean=3.85). Respondents agree that their qualification and skills could have been used to better advantage (mean=4.1).

Table1.8: Descriptive Statistics for work life balance factors

Items	Total(150)*		Male(21)*		Female(129)*	
	Mean	SD	Mean	SD	Mean	SD
I am happy with the working hour of the hospital.	4.14	0.75	4.38	0.74	4.1	0.74
After my working hours I get time for my family.	3.97	0.89	4.23	0.76	3.93	0.91
The organization takes initiatives to manage work life of nurses.	3.86	0.82	3.61	1.07	3.89	0.77
The policy of work life management helps to increase productivity of the organization.	3.9	0.78	3.95	0.8	3.89	0.77
Using effective work life management policy hospitals retain nurses.	3.85	0.77	3.71	0.84	3.87	0.76

*number in bracket denotes the number of respondents

Interpretation: The table 1.8 show the responses of respondents on factors related to work life balance. Respondents are happy with their working hour at the hospitals (mean=4.14). Respondents do agree that after their working hour they get time for family (mean=3.97) and the organization takes initiatives to manage work life of nurses (mean=3.86). The respondents also agree that the policy of work life management helps to increase productivity of the organization (mean=3.9) and they also do agree that using effective work life management policy hospitals can retain nurses (mean=3.85)

Table1.9: Descriptive Statistics for work relationship factors among the three different hospitals:-

Hospitals Items	"A"(51)*		"B"(28)*		"C"(71)*	
	Mean	SD	Mean	SD	Mean	SD
My relationship with my supervisor is good.	4.29	0.87	4.5	0.51	4.39	0.52
My relationship with my co-worker is good.	4.49	0.85	4.46	0.57	4.33	0.5
I am satisfied with my supervisors support and guidance.	4.19	0.93	4.35	0.55	4.38	0.51
My supervisors or in charge listen to my job related problem and try to solve them.	4.17	1.04	4.17	0.77	4.39	0.57
My supervisor tells how to improve performance.	4.12	1.03	4.39	0.68	4.5	0.5

*number in bracket denotes the number of respondents

Interpretation: The result of the table 1.9 indicates the responses of all the three hospitals separately on work relationship factors. Respondents of Hospital “A” strongly agree that they are very much comfortable working with supervisors and co-workers (mean= 4.29) and (mean=4.49). Respondents of Hospital “A” also very satisfied with their supervisor support and guidance (mean=4.19) and that do agree that supervisors or in charge listen to their job related problem and try to solve them (mean=4.17). Most of the respondents are very happy that their supervisors actually give importance to improve their performance (mean=4.12). Respondents of Hospital “B” strongly agree that they are very much comfortable working with supervisors and co-workers (mean= 4.5) and (mean=4.46). Respondents of Hospital “B” also very satisfied with their supervisor support and guidance (mean=4.35) and that do agree that supervisors or in charge listen to their job related problem and try to solve them (mean=4.17). Most of the respondents are very happy that their supervisors actually give importance to improve their performance (mean=4.39). Respondents of Hospital “C” strongly agree that they are very much comfortable working with supervisors and co-workers (mean= 4.39) and (mean=4.33). Respondents of Hospital “C” also very satisfied with their supervisor support and guidance (mean=4.38) and they happy and comfortable that supervisors or in charge listen to their job related problem and try to solve them (mean=4.39). Most of the respondents are very happy that their supervisors actually give importance to improve their performance (mean=4.35).

Table1.10: Descriptive Statistics for job and work life factors among the three different hospitals:-

Hospitals	"A"(51)*		"B"(28)*		"C"(71)*	
	Mean	SD	Mean	SD	Mean	SD
I feel proud as an employee of this organization.	3.54	1.02	4.32	0.72	4.46	0.55
My job is challenging	3.96	0.89	4.53	0.69	4.35	0.56
I am allowed to take independent decision to execute my work properly.	3.47	1.13	4.1	1.03	3.94	0.8
My current role and working environment match my expectation.	3.64	1.18	3.78	1.22	4.01	0.62
I think my qualification and skills could have been used to better advantage.	3.92	0.89	4.39	0.83	4.12	0.65

*number in bracket denotes the number of respondents

Interpretation: The result of the table 1.10 indicates the responses of all the three hospitals separately on job and work life factors. Respondents of Hospital “A” do agree with all Items of job and work life factors of retention as the mean indicates they feel proud as employee of their organization (mean=3.54) and doing a challenging job (mean=3.96). Respondents also agree that they are allowed to take independent decision at work (mean=3.47). Respondents agree that their current role and working environment match their expectation (mean=3.64) but feel and agree that qualification and skills could have been used to better advantage (mean=3.92).

Respondents of Hospital “B” strongly agree with all Items of job and work life factors of retention as the mean indicates they feel proud as employee of their organization (mean=4.32) and doing a challenging job (mean=4.53). Respondents agree that they are allowed to take independent decision at work (mean=4.1). Respondents agree that their current role and working environment match their expectation (mean=3.78) but strongly agree that qualification and skills could have been used to better advantage (mean=4.92). Respondents of Hospital “C” also strongly agree that they feel proud as employee of their organization (mean=4.46) and doing a challenging job (mean=4.35). Respondents agree that they are allowed to take independent decision at work (mean=3.94). Respondents agree that their current role and working environment match their expectation (mean=4.01) but also agree that qualification and skills could have been used to better advantage (mean=4.12).

Table1.11: Descriptive Statistics for Work Life Balance Factors In Three Hospitals

Hospitals	"A"(51)*		"B"(28)*		"C"(71)*	
	Mean	SD	Mean	SD	Mean	SD
I am happy with the working hour of the hospital.	4.01	1	4.42	0.63	4.11	0.52
After my working hours I get time for my family.	3.78	1.11	4.25	0.79	4	0.71
The organization takes initiatives to manage work life of nurses.	3.52	1.13	3.96	0.83	4.05	0.37
The policy of work life management helps to increase productivity of the organization.	3.72	0.91	3.85	1.04	4.05	0.47
Using effective work life management policy hospitals cal retain nurses.	3.6	0.91	3.85	1	4.02	0.44

*number in bracket denotes the number of respondents

Interpretation: The result of the table 1.11 reveals the responses of all the three hospitals separately on work life balance factors.” I am happy with the working hour of the hospital” for this item the mean of the three hospital indicates that respondents of Hospital “A” agree to this factor (mean=4.01), respondents of Hospital “B” very happy(mean=4.42) and respondents of hospital “C” also agree (Mean=4.11). For the next item “After my working hours I get time for my family” almost same responses from the three hospital respondents as compared to the previous item as that respondents of Hospital “A” agree to this factor (mean=3.78), respondents of Hospital “B” very happy(mean=4.25) and respondents of hospital “C” also agree (Mean=4). Respondents of Hospital “A” agree for the other three item of work life balance factor as the mean indicates the organization takes initiatives to manage work life of nurses (mean=3.52), the policy of work life management helps to increase productivity of the organization (mean=3.72) and using effective work life management policy hospitals cal retain nurses (mean=3.6). Respondents of Hospital “B” agree for the other three item of work life balance factor as the mean indicates the organization takes initiatives to manage work life of nurses (mean=3.96), the policy of work life management helps to increase productivity of the organization (mean=3.85) and using effective work life management policy hospitals cal retain nurses (mean=3.85). As the mean indicates respondents of Hospital “C” also agree for the other three item of work life balance factor such as the organization takes initiatives to manage work life of nurses (mean=4.05), the policy of work life management helps to increase productivity of the organization (mean=4.05) and using effective work life management policy hospitals cal retain nurses (mean=4.02).

Table1.12: Descriptive Statistics for looking change in job:

PAREETERS			NO OF RESPONSES
GENDER	MALE	YES	13
		NO	8
	FEMALE	YES	57
		NO	72
MARITAL STATUS	MARRIED	YES	23
		NO	36
	SINGLE	YES	47
		NO	44
EDUCATIONAL QUALIFICATION	DIP	YES	4
		NO	16
	GNM	YES	39
		NO	41
	B.SC	YES	27
		NO	23
EXPERIENCE IN CURRENT ORG.	0-1 YR	YES	29
		NO	36
	1-2YR	YES	23
		NO	23
	2-5YR	YES	15
		NO	12
	>5 YR	YES	3
		NO	9

Interpretation: The result of the table 1.12 reveals the responses of all the respondents on whether they are looking for change in job and the responses are calculated on four parameter as gender, marital status, educational qualification and year of experience in the current organization. The result indicates that among male respondents 62% are looking for change and 38% are not and 44% of female respondents are looking for change and 56% are not.

Among married respondents 39% willing to change their job and 61% are not willing and among single respondents 52% are willing to change and 48% are not willing to change the job. When responses calculated on educational qualification it reveals that among diploma holders only 20% respondents are looking for change in job and 80% of them are not, among GNM nurses 49% are looking for change and 51% are not, among B.Sc nurses 54% wanted to change job and 46% do not want to change. Responses are also calculated on the basis of years of experience in the current hospital and the result shows that among 0-1 year 45% are willing to change and 55% are not willing, among 1-2 years the responses are 50-50, among 2-5 years 55% are looking for change and 45% are not and among >5 years only 25% are looking for change on job and 75% of them are not looking for change in job.

FINDINGS AND CONCLUSION

Unruh. L (2005) on Employment condition at the bedside, a cause of and solution to the RN⁸ shortage stated that today's healthcare system and nursing workforce issues are facing limited resources and increasing demand on their services.

The study found that in the nursing employees are happy working under their supervisors or in charge or managers and very comfortable with their co workers. Nurses of the all three hospitals are satisfied and happy with the support and guidance they are getting, that their problems are listened. These means they are influenced by work relationship factors and getting motivated. Most of the respondents are also influenced by job and work life factors such as they feel proud as an employee of their organizations, they feel their job is challenging etc. On the other hand they also felt that their qualification and skills could have been used to better advantage and that can be negatively affect the work life of the nurses. Most of the nurses are satisfied with work life balance factors. That means work life balance factors can positively motivate them to retain.

Nurses are happy with the other factors as well such as training and development, work condition, but most of them from hospital A and B around 60% and 89% nurses said that they need to work longer than their working hours due to shortage of nurses and feel stressed. Which can lead to dissatisfaction and affected by stress related factors. When asked whether looking for change in job and from the result found that male nurses are more willing to change job than female, most of the single nurses respondents said yes than married and most of the nurses with 1-5 years of experience are willing to change the job but a very few of nurses with experience >5 years said yes. That means more the experienced nurses are more they are retaining with one organization.

LIMITATIONS OF THE STUDY

1. Respondents are limited only to Bangalore city, Karnataka.
2. This study is confined only to staff nurses of Private sectors Hospitals.
3. This study is restricted for one year.
4. It is assumed that the respondents have provided genuine inputs and reflect true experience.
5. Responses were taken only from those who agreed to give their valuable inputs.

SCOPE FOR FURTHER RESEARCH

1. The study was conducted in Bangalore city only but can also be done across cities.
3. The study was conducted only on staff nurses but can be extended other professional of the health care industry, such as Doctors, Paramedical staff staffs and Administration staffs.
4. The study was conducted only in Private sector Hospitals but Public Hospitals can also be a part of such research and comparative studies can also be done.

***The present work is part of research work undertaken by the first author in Jain University, for the M.Phil degree to be awarded.**

¹<http://en.wikipedia.org/wiki/Strategy>

² <http://www.wisegeek.com/what-is-employee-attribution.htm>

³ https://en.wikipedia.org/wiki/Private_hospital

⁴ <http://www.jacksonvilleu.com/resources/nursing/nursing-profession-today/#>.

⁵ and ⁶ Deepa Suryanarayan (2010), "Public hospitals in city have one nurse for 60 patients", DNA Syndication, <http://dnasyndication.com/showarticle.aspx?nid=DNMUM173422>.

⁷ Likert scale is a scale commonly involved in research that employs questionnaire and is the most widely used approach to scaling responses in survey research

⁸ Registered Nurse: - a fully trained nurse with an official state certificate of competence



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