

**THE INFLUENCE OF COMPENSATION STRATEGIES ON JOB RETENTION
AMONG CRITICAL CARE NURSES AT TWO LEVEL SIX HOSPITALS IN
KENYA**

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**A Thesis Submitted to the Institute of Postgraduate Studies in Partial Fulfillment of
the Requirements for the Award of Master of Science in Nursing Degree**

KABARAK UNIVERSITY

NOVEMBER, 2025

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ABSTRACT

Critical care nursing is a vital role in the delivery of healthcare services, particularly in meeting the complex needs of critically ill patients. The presence of skilled, qualified critical care nurses was essential to ensuring optimal patient outcomes. However, both public and private hospitals in developing countries, such as Kenya, face challenges in retaining these highly qualified professionals. These shortcomings were mainly linked to limited financial resources, poor working conditions, and competing priorities within the healthcare system. The research aimed to determine the effects of monetary rewards, non-financial incentives, and working conditions on the retention of critical care nurses in selected hospitals. For this study, a Descriptive, cross-sectional, qualitative research design was employed to investigate the impact of compensation strategies on job retention among all qualified critical care nurses at Tenwek Hospital in Bomet County (a private facility) and Moi Teaching and Referral Hospital (MTRH) in Uasin Gishu County. Using a target population of 149 nurses, data were collected through structured questionnaires and analyzed using SPSS Version 28. Ethical clearance was obtained from Kabarak University's Research Ethics Committee (KUREC) and the National Commission for Science, Technology, and Innovation (NACOSTI). The research adhered to ethical standards, including obtaining informed consent, maintaining confidentiality, and ensuring voluntary participation. Findings revealed that financial, non-financial, and environmental factors significantly influenced retention of qualified critical care nurses. Financial rewards such as competitive salaries, allowances, and bonuses were key motivators that encouraged nurses to remain in their positions. Non-financial incentives, including opportunities for career growth, supportive supervision, and recognition, also enhanced job satisfaction and commitment. Additionally, favorable working conditions, such as adequate staffing, safe work environments, and a positive organizational culture, were critical to nurse retention. However, issues such as job insecurity and heavy workload still posed challenges. The study concluded that an integrated approach combining financial and non-financial strategies, alongside improved working conditions, was essential for retaining critical care nurses. It recommended regular salary reviews, performance-based rewards, continuous professional development, and mentorship programs. Future studies should investigate regional and institutional variations, as well as the role of leadership in enhancing retention.

Keywords: *Critical Care Nursing, Nurse Retention, Financial Rewards, Non-Financial Incentives, Working Conditions, Kenya*

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LIST OF ABBREVIATIONS AND ACRONYMS

ERG	Existence, Relatedness, and Growth
GDP	Gross Domestic Product
HIMS	Health Information Management System
KEMRI	Kenya Medical Research Institute
KEMSA	Kenya Medical Supplies Authority
KNBS	Kenya National Bureau of Statistics
KUREC	Kabarak University Research Ethics Committee
MTRH	Moi Teaching & Referral Hospital
NACOSTI	National Commission for Science, Technology, and Innovation
NGO	Non-Government Organization
PSC	Public Service Commission
SDGs	Sustainable Development Goals
SPSS	Statistical Package for Social Science
UHC	Universal Health Care
UN	United Nations
USIU	United States International University
WHO	World Health Organization

CONCEPTUAL AND OPERATIONAL DEFINITION OF TERMS

Compensation Strategies: refer to the planned approaches or methods used by hospital management to design and implement compensation packages to retain critical care nurses. These strategies might include structuring competitive salaries, providing additional benefits (such as health insurance, housing allowances, and retirement plans), offering performance-based incentives, or creating flexible work arrangements.

Compensation: refers to the total financial and non-financial rewards that critical care nurses receive in exchange for their work in public hospitals. This includes direct economic benefits, such as salaries, overtime pay, and bonuses, as well as indirect benefits, such as health insurance, retirement plans, housing allowances, and other perks.

Critical care Nurse: is a specialized registered nurse who provides care to patients with severe, life-threatening illnesses or injuries. These nurses work in high-stress environments, such as intensive care units (ICUs), emergency rooms, and specialized hospital units, where they monitor and manage patients requiring continuous, complex care.

Influence: refers to the impact or effect that compensation strategies have on job retention for critical care nurses. It encompasses how compensation practices such as salaries, benefits, allowances, and incentives either positively or negatively affect the willingness of nurses to stay employed in their current positions within public hospitals.

Retention refers to an organization or institution's ability to retain its employees over a specified period, minimizing turnover and ensuring workforce stability. In healthcare, specifically in critical care nursing, retention involves strategies and practices that encourage nurses to remain in their positions, particularly in demanding, high-pressure environments such as intensive care units (ICUs) (Armstrong-Stassen & Cameron, 2005). Effective retention is often influenced by factors such as job satisfaction, compensation, career development opportunities, work-life balance, and supportive leadership.

CHAPTER ONE

1.1 Background of the Study

Health care is a significant expense for governments worldwide. Despite the enormous costs of healthcare, there remains a severe shortage of healthcare professionals. According to estimates, there were 17.4 million healthcare workers worldwide in 2013. (Global Strategy on Human Resources for Health: Workforce 2030), (Wiskow, 2017). The breakdown reveals that South-East Asia and Africa have the most significant need-based deficit. Recruiting and placing health personnel is an issue in almost every country. Poor working conditions, low pay, and limited career opportunities are to blame for the high turnover and attrition in the health profession (Wiskow, 2017). Working conditions and pay are directly correlated with job discontent in the health sector. Working conditions, in particular heavy workloads, long hours, poor infrastructure, a lack of control over tasks, and a lack of professional advancement and recognition, are significant factors in the health sector's high unemployment rate.

Furthermore, when examining compensation strategies in critical care nursing, it's valuable to consider the European context, which presents unique dynamics given variations in healthcare systems and labor regulations across countries. In Europe, public healthcare systems prevail in many nations, affecting the compensation strategies in critical care nursing. Aiken et al. (2017) and Kutney-Lee et al. (2017).

For instance, research conducted by Aiken et al. (2017) and Kutney-Lee et al. (2017) has implications for European critical care nursing. In countries with publicly funded healthcare, such as the United Kingdom and Scandinavia, compensation strategies often emphasize non-monetary benefits, including comprehensive healthcare coverage, generous pension plans, and opportunities for continuing education.

These strategies aim to attract and retain critical care nurses in the public sector, while acknowledging the limitations of offering exceptionally high salaries due to budget constraints. In contrast, countries with a mix of public and private healthcare provision, such as Germany and France, witness a more diverse range of compensation approaches. Private hospitals in these countries, such as Asklepios Kliniken Gruppe, may adopt strategies similar to those in other private healthcare systems, offering competitive salaries and performance-based incentives to attract critical care nurses from both the public and private sectors.

The comparison of compensation strategies and their impact on job retention among critical care nurses in public and private hospitals reveals significant differences across various regions, including the USA, Europe, Canada, and China. In the United States, public hospitals often offer competitive salaries, supplemented by comprehensive benefits packages that may include health insurance, retirement plans, and tuition reimbursement, to enhance job satisfaction and retention (Auerbach et al., 2017). Conversely, private hospitals may offer higher salaries and more flexible work arrangements to attract top talent, yet they sometimes lack the extensive benefits that public hospitals provide (Cohen et al., 2019).

In Canada, compensation strategies vary by country; for example, Scandinavian countries typically emphasize strong collective bargaining agreements, which result in standardized salaries and benefits that support job retention (Lindqvist et al., 2019). In Canada, both the public and private healthcare sectors emphasize competitive compensation. Still, public hospitals often offer additional job security and structured career advancement opportunities that are crucial for retaining critical care nurses (Buchan et al., 2018). In contrast, China's healthcare system is undergoing reforms, with

private hospitals increasingly offering higher wages and performance-based incentives to attract skilled nurses. Yet public hospitals still dominate in terms of job security and benefits, thereby affecting overall job retention in both sectors (Liu et al., 2020). This multifaceted landscape illustrates how varying compensation strategies across healthcare systems influence critical care nurse retention, underscoring the need for tailored approaches that account for regional healthcare dynamics and workforce needs.

Moreover, in South Africa, the impact of compensation strategies on critical care nursing goes beyond recruitment and retention. Nurses' job satisfaction is intricately tied to the compensation they receive. Studies by Buerhaus et al. (2017) have indicated that higher levels of job satisfaction are associated with increased nurse retention and improved patient care. Job satisfaction is influenced not only by financial compensation but also by factors such as workload, work-life balance, and opportunities for career advancement. Public hospitals, while constrained by budgetary limitations, can strive to enhance job satisfaction by fostering supportive work environments, encouraging interdisciplinary collaboration, and providing clear career growth pathways. Private hospitals, with their competitive compensation packages, can also contribute to job satisfaction by addressing concerns related to nurse workload and stress.

Additionally, nurse turnover in critical care units is a common concern. High turnover rates can disrupt patient care continuity and strain hospital resources. Kutney-Lee et al. (2017) demonstrated that hospitals with higher proportions of nurses holding baccalaureate degrees had lower mortality rates, highlighting the importance of retaining highly educated critical care nurses. Compensation strategies, when designed holistically, can be a powerful tool for addressing turnover. Public hospitals might consider investing in educational opportunities and tuition reimbursement programs to encourage nurses to pursue advanced degrees. Private hospitals can utilize their financial

resources to offer competitive benefits that recognize and reward nurses' expertise and commitment.

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The comparison of compensation strategies and their impact on job retention among critical care nurses in public and private hospitals reveals notable differences in South Africa and the East African Community (EAC), which includes countries like Kenya, Tanzania, Uganda, and Rwanda. In South Africa, public hospitals typically provide structured salaries and benefits through government frameworks, which may include pension plans, medical aid, and other allowances. However, these benefits can sometimes be overshadowed by the high patient-to-nurse ratios and challenging working conditions, leading to lower job satisfaction and higher turnover rates among critical care nurses (Pillay, 2018). In contrast, private hospitals in South Africa often offer more competitive salaries and better working conditions to attract and retain skilled nurses. However, the benefits may not be as comprehensive as those provided in the public sector (Bamford et al., 2019).

In the East African Community, compensation strategies for critical care nursing often emphasize non-monetary incentives due to budgetary constraints in public healthcare systems. Public hospitals typically offer job security, opportunities for training, and access to essential resources, which are crucial for nurse retention in these settings (Mbindyo et al., 2017). Conversely, private hospitals in the EAC may provide higher salaries and performance-based incentives, but they often struggle with resource limitations, impacting the overall quality of care and job satisfaction for nurses (Ogotu et al., 2020). The emphasis on non-monetary benefits in the public sector reflects a strategy to enhance job satisfaction and retention despite financial limitations.

This complex interplay of compensation strategies highlights the need for tailored approaches in both South Africa and the EAC to improve job retention among critical care nurses, addressing the unique challenges faced in each healthcare environment. In Kenya, Tanzania, Uganda, and Rwanda, where public healthcare systems are predominant, compensation strategies for critical care nursing often focus on non-monetary incentives.

These strategies include job security, opportunities for training and professional development, and access to essential resources to improve work conditions. For instance, providing nurses with continuous professional development and career advancement opportunities has been explored as a means of enhancing job satisfaction and retention, particularly in underserved areas (Mbindyo et al., 2017). This focus on non-monetary incentives is significant in settings with limited financial resources, as it aims to address both the workforce shortage and the quality of healthcare delivery.

In Uganda, where public healthcare financing can be challenging, compensation strategies might involve offering accommodation and transportation support to

healthcare workers as part of their benefits package (The World Bank, 2019). Similarly, in Rwanda, the Health Sector Strategic Plan highlights the importance of providing supportive work environments, education opportunities, and good leadership as part of efforts to retain healthcare workers, including critical care nurses (Ministry of Health, Republic of Rwanda, 2019).

However, private healthcare facilities are also emerging in East Africa, particularly in urban areas, to cater to individuals seeking higher-quality care. In these private hospitals, compensation strategies may lean more towards competitive salaries and benefits to attract critical care nurses from both the public sector and abroad. Furthermore, East Africa faces challenges related to healthcare worker migration, as nurses seek better compensation and working conditions in other regions. Strategies such as introducing rural retention programs and providing career advancement opportunities within the country have been explored to mitigate these challenges (Mweemba et al., 2020).

In Kenya, the shortage and poor retention of critical care nurses remain pressing issues, especially in high-tier hospitals where their services are most needed. Although there are general compensation structures across public and private healthcare institutions, the extent to which these strategies influence the retention of critical care nurses remains unclear. Prior studies have examined job satisfaction and staff turnover among general health workers in counties like Isiolo, Nakuru, and others (Gichuru, 2014; Wamunyu, 2016), but these studies primarily focused on lower-level facilities (Levels 4 and 5), where the scope of service delivery and working conditions differ significantly from national referral hospitals.

This study focuses on Tenwek Level Six Hospital and Moi Teaching and Referral Hospital (MTRH), two of Kenya's most critical healthcare institutions. These facilities

serve large catchment areas, handle complex essential cases of care, and employ specialized healthcare professionals. Records from Tenwek Hospital show that since 2020, at least 10 critical care nurses have left their positions, creating service delivery gaps (Tenwek Hospital Records, 2024). This trend highlights an urgent need to investigate the compensation mechanisms in place and their effectiveness in retaining skilled staff.

The study, therefore, aims to explore the influence of compensation strategies on job retention among all qualified critical care nurses in selected public and private hospitals in Kenya. By focusing on Level Six hospitals, it aims to fill a significant gap in the existing literature and to inform policymakers and healthcare managers about effective strategies to address staff turnover in critical care settings.

1.2 Statement of the Problem

Critical care nurses play a crucial role in the management of critically ill patients, especially in high-level referral hospitals. Their skills and expertise are essential for improving patient outcomes and ensuring the quality of care in intensive care units (ICUs). However, retaining these specialized professionals remains a challenge in many developing countries, including Kenya. Public healthcare facilities often face resource constraints, poor working conditions, and uncompetitive compensation, which contribute to high turnover among critical care nurses.

Previous studies have highlighted dissatisfaction with pay and working conditions among health workers. For example, a study in Isiolo County revealed that healthcare workers were unhappy with their compensation packages (Gichuru, 2014). Wamunyu (2016) also found that salary and work environment significantly affected job satisfaction, though her study was conducted at Nakuru Level Five Hospital, not

Tenwek, as sometimes misreported. These hospitals operate at a different service level from Level Six facilities, such as Tenwek and Moi Teaching and Referral Hospital (MTRH), which handle more complex cases, have advanced equipment, and require more specialized personnel. Thus, findings from lower-level hospitals may not be fully applicable to Level Six hospitals, where expectations, workloads, and compensation structures differ.

Given this background, the researcher chose to study Tenwek and MTRH, both major referral hospitals with specialized ICUs, to understand better the influence of compensation strategies on job retention among critical care nurses. These institutions serve large populations and manage complex medical cases, making them ideal for examining how compensation affects the retention of essential nurses of care in high-pressure environments.

Notably, recent records from Tenwek Hospital indicate that at least 10 critical care nurses have left their jobs since 2020 (Tenwek Hospital Records, 2024), raising concerns about workforce stability and the continuity of care for critically ill patients. This trend underscores the need to explore effective compensation strategies to retain qualified staff. Although some research has been done in Kenya on job satisfaction and healthcare worker retention, there remains a gap in understanding how specific compensation strategies influence retention among all qualified critical care nurses in the selected hospitals. This study aims to fill that gap.

1.3 Objectives of the Study

1.3.1 General Objective of the Study

The general objective of the study was to examine the influence of compensation strategies on job retention among critical care nurses in two selected public and private hospitals in Kenya.

1.3.2 Specific Objectives of the Study

The objectives of the study were to:

- i. Determine the influence of financial rewards on job retention among all qualified critical care nurses in the selected public and private hospitals in Kenya
- ii. Explore the effect of non-financial terms on job retention among all qualified critical care nurses in selected public and private hospitals in Kenya.
- iii. Examine the influence of working conditions on job retention among all qualified critical care nurses in selected public and private hospitals in Kenya.

1.4 Research Questions

- i. What is the effect of financial reward on job retention among all qualified critical care nurses in selected public and private hospitals in Kenya?
- ii. What is the effect of non-financial terms on job retention among all qualified critical care nurses in selected public and private hospitals in Kenya?
- iii. What is the effect of working conditions on the job retention of all qualified critical care nurses in selected public and private hospitals in Kenya?

1.5 Justification (or Rationale) for the Study

The researcher selected Tenwek Level Six Hospital and Moi Teaching and Referral Hospital (MTRH) as the focus of this study due to their strategic significance and specialized role in healthcare delivery in Kenya. Both hospitals are among the few tertiary-level (Level Six) facilities in the country, providing advanced and critical care services to a large population from multiple counties. MTRH serves as a national referral and teaching hospital, with a high concentration of specialized healthcare professionals, including critical care nurses. Similarly, Tenwek Hospital, a prominent faith-based institution, is a regional referral center known for its comprehensive medical services and training programs.

The choice of these two hospitals allows for the examination of compensation strategies in both public (MTRH) and private-not-for-profit (Tenwek) healthcare settings, providing a comparative perspective. Moreover, these hospitals were selected based on their accessibility, ethical approval feasibility, and established critical care units with sufficient nursing staff to support a census approach. The findings from these institutions are expected to offer valuable insights into the broader healthcare system, particularly regarding the job retention of critical care nurses in both public and private settings (Mugenda & Mugenda, 2003).

1.6 Significance of the Study

The study's conclusions have significant implications for various stakeholders, including funders, county governments in the North Rift, the National government, and non-governmental organizations (NGOs) in the health sector. The findings emphasize key elements essential to job satisfaction in the healthcare industry that the national government should consider as it works to enhance Kenya's healthcare system.

Specifically, the Bomet and Uasin Gishu County governments, responsible for human resources management in healthcare, are key stakeholders in this research. By promoting incentives that effectively enhance job satisfaction among healthcare professionals, NGOs in the health sector can use the study's results to adopt a more targeted approach to improving health services.

Furthermore, the theoretical significance of this study lies in its contribution to the body of knowledge regarding compensation strategies and their effects on job retention among critical care nurses. It provides a framework for understanding how non-monetary incentives can influence healthcare workforce dynamics, potentially serving as a reference point for future research and policy formulation in similar contexts.

1.7 Scope of the Study

The focus of this study on critical care nurses in designated public hospital counties has defined its scope. Consequently, the research will be confined to healthcare professionals working in specific public and private hospitals for comparison purposes. The hospitals are Tenwek Hospital, a private hospital in Bomet County, and Moi Teaching and Referral Hospital (MTRH) in Uasin Gishu County, a public hospital. These hospitals are significant healthcare providers in their regions, and their proximity to densely populated areas suggests that the local health systems might be under considerable strain.

Therefore, Tenwek Hospital and MTRH present an ideal setting to investigate the impact of compensation strategies on job satisfaction. Although numerous factors affect job satisfaction, this study will center on basic pay, allowances, working conditions, and recognition. The research will be conducted over 12 months from July 2024 to November 2025, encompassing obtaining data collection permissions from the relevant institutions, preparing and obtaining approval for the research proposal, presenting and

amending the proposal, conducting data collection, analysis, report writing, and final report presentation.

1.8 Assumptions of the Study

This study was conducted under several key assumptions necessary for achieving its objectives. It was assumed that all respondents, who are qualified critical care nurses in selected public and private hospitals in Kenya, would provide honest and accurate responses to the questionnaire items. The study also assumed that the participants fully understood the questions and that their responses genuinely reflected their experiences and perceptions regarding compensation and job retention. Additionally, it was believed that the institutions involved had implemented a compensation strategy, both financial and non-financial, that could be evaluated. Furthermore, the study assumed that working conditions were relatively consistent across hospital settings and that external factors, such as government policies and economic conditions, remained stable during the data collection period. These assumptions were critical to ensuring the findings were valid and the research objectives were adequately addressed.

1.9 Limitation (s) and Delimitation (s) of the Study

This study encountered several limitations beyond the researcher's control that could affect the internal validity of the findings. One key limitation was reliance on self-reported data, which may be subject to response and social desirability biases, as well as inaccurate recall by respondents. Additionally, the use of structured questionnaires may have restricted the depth of responses, limiting a more comprehensive understanding of the participants' views. The study was also limited by the sample size, which, although statistically adequate, may not fully represent the entire population of critical care nurses across Kenya.

Time constraints and the availability of nurses during data collection may have also affected participation. To mitigate these limitations, the researcher ensured the anonymity of responses to encourage honesty, pre-tested the instruments for clarity and relevance, and used statistical tools to enhance the reliability and validity of the data. On the other hand, the study was limited to only two selected hospitals, Tenwek Level Six Hospital and Moi Teaching and Referral Hospital, which may limit the generalizability of the findings to other healthcare institutions. However, these facilities were selected for their reputations as leading public and private hospitals, providing a suitable context for the study objectives.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter presents a literature review that includes the relevant theory for the proposed study and empirical studies by other scholars on which it is based. The chapter also provides a conceptual framework that specifies the dependent and independent variables. The operationalization framework in this chapter indicates the elements that the researcher will use to measure the variables.

2.2 Theoretical Framework

2.2.1 Vroom's Expectancy Theory

Vroom's Expectancy Theory, introduced by Victor Vroom in 1964, provides a helpful explanation of how individuals decide on their level of effort and commitment in the workplace. The theory argues that employees are motivated to work harder when they believe their effort will lead to good performance, and that this performance, in turn, will yield desirable rewards. This motivation is shaped by three components: expectancy, the belief that effort leads to performance; instrumentality, the belief that performance leads to rewards; and valence, the value an employee places on those rewards. According to Vroom, employees consciously evaluate these factors and choose behaviors that maximize their expected outcomes.

The theory further emphasizes that employees join organizations with varying expectations shaped by their personal needs, prior experiences, and motivations. As a result, two workers performing similar roles may not respond identically to identical incentives. Some may feel satisfied with financial compensation alone, while others prioritize recognition, career development, or supportive working conditions.

This diversity underscores the role of both extrinsic rewards, such as salaries, bonuses, and allowances, and intrinsic rewards, including recognition, autonomy, and favorable working conditions (Yaseen, 2013). When employees perceive fairness, clarity, and consistency in how rewards are administered, they are more likely to experience satisfaction and remain committed to their jobs.

The relevance of Vroom's Expectancy Theory to this study is significant, as it helps explain the motivation and retention patterns of critical care nurses working in high-pressure environments that demand emotional resilience, advanced skills, and long working hours. For these nurses, the decision to remain in a hospital setting is shaped by whether their expectations financial, professional, and environmental—are met. Suppose they perceive that their effort will be recognized and rewarded in ways that align with their needs, their motivation to stay increases. Conversely, when expectations are not met, retention becomes less likely.

The theory also clearly aligns with the objectives of this study. First, it supports the assessment of financial rewards by explaining how nurses evaluate the link between effort, performance, and compensation, which in turn influences their decision to stay. Second, it directly relates to non-financial incentives, illustrating how intrinsic rewards such as recognition, professional support, and work-life balance influence nurses' motivation through the valence they assign to these outcomes. Third, it helps explain the role of working conditions, since nurses are more likely to remain in environments where they feel adequately supported, safe, and equipped to perform their duties. In this way, Vroom's Expectancy Theory provides a strong conceptual foundation for understanding the complex factors that influence job retention among critical care nurses in both public and private hospitals in Kenya.

2.3 Empirical Review/Literature Review of the Study Variables

2.3.1 Compensation Strategies on Job Retention Among all Qualified Critical Care Nurses

The healthcare sector worldwide faces challenges in retaining critical care nurses, and compensation strategies play a crucial role in shaping job satisfaction and workforce stability. In developed countries such as the United States, Canada, and European nations, compensation packages for critical care nurses typically include competitive salaries, performance-based incentives, comprehensive healthcare benefits, and retirement plans (Buchan et al., 2018). Private hospitals in these regions often provide higher wages and flexible work arrangements to attract top talent. In contrast, public hospitals emphasize long-term benefits such as job security, pension schemes, and professional development opportunities (Auerbach et al., 2017). Despite these measures, high workloads, burnout, and workforce shortages continue to impact nurse retention, necessitating ongoing policy adjustments and financial investments in healthcare systems.

In Africa, retaining critical care nurses remains a persistent challenge, primarily due to limited financial resources, unfavorable working conditions, and migration to better-paying healthcare markets abroad (Pillay, 2018). Public hospitals in many African countries, including South Africa, Nigeria, and Ghana, offer structured salary scales determined by government frameworks. Still, these are often insufficient to meet the rising cost of living. Private hospitals, on the other hand, may offer more attractive financial incentives but struggle with inconsistent funding and limited job security. In South Africa, for example, private hospitals have emerged as significant employers of specialized nurses due to better remuneration, yet public hospitals continue to dominate healthcare provision despite staffing challenges (Bamford & Engelbrecht, 2019).

In the East African region, including Kenya, Uganda, Tanzania, and Rwanda, compensation strategies for critical care nurses vary across public and private hospitals. Public healthcare facilities often face budgetary constraints, limiting their ability to offer competitive salaries and benefits. Instead, they focus on non-monetary incentives such as job stability, access to professional development, and opportunities for career progression (Mbindyo et al., 2013). Private hospitals in East Africa, while offering higher salaries, may not always provide comprehensive benefits such as pension schemes, structured promotions, or long-term career security, which are vital factors in job retention (Ogotu & Muturi, 2020). The high attrition rate of critical care nurses in the region is exacerbated by poor working conditions, heavy workloads, and limited resources, creating a need for improved compensation strategies that balance financial and non-financial incentives.

In Kenya, the retention of critical care nurses remains a pressing issue across both public and private hospitals. Public hospitals adhere to government salary scales, which, while structured, often fail to keep up with inflation and the cost of living, leading to dissatisfaction among healthcare workers (Gichuru, 2014). Private hospitals, on the other hand, offer slightly higher pay but may not always match the long-term benefits provided by public healthcare institutions. Reports indicate that many critical care nurses seek employment abroad or transition to the private sector in search of better remuneration and improved working conditions (Wamunyu, 2016). This study examines the influence of compensation strategies on job retention among critical care nurses in Kenya's public and private hospitals, focusing on the balance between financial and non-financial incentives in fostering workforce stability.

The study examines earlier research to determine how compensation plans and the provision of high-quality services relate to one another and how they affect the health

sector. Compensation strategies play a central role in shaping job retention among critical care nurses, as they determine not only employees' financial well-being but also their overall satisfaction and long-term commitment to the organization. Compensation encompasses more than basic salary; it includes allowances, bonuses, overtime payments, health insurance, pension schemes, and other monetary and non-monetary benefits that collectively influence employee motivation and retention. According to Armstrong (2010), well-structured compensation systems are among the most powerful tools for attracting and retaining skilled health professionals, particularly in demanding fields such as critical care nursing.

Research consistently shows that comprehensive compensation strategies significantly reduce nurses' turnover intentions. Hayes et al. (2012) found that when compensation aligns with the intensity and risks of critical care work, nurses are more likely to remain in their positions. This is especially relevant given the high-stress environment of essential units of care, where workloads, emotional demands, and exposure to traumatic events are substantially higher than in general wards. Competitive compensation, therefore, serves as both a reward and a form of recognition for the complexity of their work.

Furthermore, studies highlight that compensation strategies must be fair, transparent, and consistently reviewed to remain effective. Chenevert et al. (2013) noted that unclear or inconsistent compensation policies often create dissatisfaction and perceptions of inequity, which can accelerate turnover. In Kenya, disparities between public and private healthcare institutions in salary scales and allowances have been shown to influence nurses' decisions to seek employment elsewhere, whether locally or abroad (Ojaka et al., 2014). Public hospitals often struggle with constrained budgets, leading to delayed payments and limited financial incentives that further weaken retention.

Beyond direct financial rewards, effective compensation strategies increasingly incorporate non-financial elements such as recognition programs, professional development opportunities, and career progression pathways. Barasa et al. (2015) argue that compensation must be holistic, ensuring that nurses feel valued both materially and professionally. For critical care nurses, the promise of career advancement, continuous training, and leadership opportunities can significantly enhance retention when combined with adequate financial compensation.

Overall, the literature underscores that compensation strategies must be comprehensive, equitable, and responsive to the specific demands of critical care nursing. Hospitals that invest in structured compensation packages that balance financial rewards with professional development incentives are more likely to retain experienced, essential nurses, improve service delivery, and maintain high standards of patient care.

2.3.2 Financial Rewards and Their Influence on Job Retention among All Qualified Critical Care Nurses

Financial rewards play a crucial role in influencing job retention among critical care nurses in selected public hospitals in Kenya. The economic well-being of healthcare professionals, including nurses, is a significant factor in their decision to stay or leave their current positions. A competitive and fair compensation package, which includes salaries, bonuses, and benefits, not only serves as a reward for their dedication and hard work but also ensures their economic stability and job satisfaction.

Research has shown that when nurses perceive their financial rewards as equitable and commensurate with their qualifications and responsibilities, they are more likely to remain in their jobs (Hussein et al., 2019). Conversely, inadequate compensation or pay disparities can lead to dissatisfaction and intentions to leave among critical care nurses.

This is particularly relevant in the context of Kenyan public hospitals, where healthcare workers often face challenges related to remuneration (Nyongesa et al., 2020).

Moreover, financial rewards impact not only job retention but also the quality of patient care. Satisfied and financially secure nurses are more likely to provide high-quality care and demonstrate commitment to their patients and institutions (Aiken et al., 2012). This, in turn, contributes to better health outcomes for patients and the overall performance of healthcare facilities.

Furthermore, the influence of financial rewards on job retention among critical care nurses extends beyond mere salary considerations. Comprehensive benefits packages, including healthcare coverage, retirement plans, and other incentives, also contribute significantly to their overall job satisfaction and retention. In many healthcare settings, the availability and adequacy of these benefits can be a deciding factor in whether nurses choose to continue their employment or seek opportunities elsewhere (Schaufeli et al., 2009).

Public hospitals in Kenya face unique challenges in attracting and retaining critical care nursing staff due to resource constraints and compensation disparities compared to the private sector. Addressing these challenges by improving the financial rewards and benefits offered to essential nurses of care can reduce turnover, stabilize the workforce, and ultimately improve patient care outcomes.

To enhance the impact of financial rewards on job retention, policymakers and healthcare administrators in Kenya should conduct a thorough review of compensation structures, regularly benchmark salaries, and explore innovative ways to offer competitive financial incentives for critical care nurses. This can include performance-

based bonuses, career development opportunities, and recognition programs that enhance job satisfaction and commitment to their profession and healthcare institutions.

Financial rewards remain one of the most influential determinants of job retention among critical care nurses globally. Numerous studies emphasize that competitive compensation, including salaries, allowances, and monetary benefits, significantly contributes to workforce stability in the healthcare sector. According to Armstrong (2010), adequate financial compensation is a fundamental element of employee retention, as it not only meets basic economic needs but also signals organizational value and appreciation for employees' skills and effort. For critical care nurses who operate in high-pressure environments, fair remuneration is often seen as recognition of the complexity and emotional demands of their roles.

Several studies highlight a strong positive relationship between financial rewards and nurse retention. Hayes et al. (2012) found that nurses who receive equitable and competitive pay are less likely to leave their positions, as financial satisfaction reduces job-related stress and enhances motivation. Similarly, research by Chenevert et al. (2013) demonstrated that financial incentives such as overtime compensation, risk allowances, performance bonuses, and retention allowances significantly reduce turnover intentions among nursing staff. These rewards not only enhance immediate satisfaction but also reinforce long-term commitment by improving financial security.

In developing countries such as Kenya, financial constraints within public healthcare institutions often result in salary delays, stagnant pay scales, and limited bonus structures, contributing to high turnover and the migration of critical care nurses to better-paying private hospitals or international markets (Ojaka et al., 2014). Nurses frequently cite inadequate pay as a primary push factor influencing their decision to exit

the profession or seek opportunities abroad. Conversely, hospitals that consistently review and adjust compensation packages tend to attract and retain qualified critical care nurses more effectively (Barasa et al., 2015).

Furthermore, financial rewards can significantly affect job satisfaction, productivity, and perceptions of organizational policy fairness. When nurses feel inadequately compensated despite heavy workloads and the emotional demands of critical care, morale and loyalty may decline. On the other hand, financial stability enables nurses to manage their personal responsibilities, reducing external pressures that could prompt them to leave. Mugenda and Mugenda (2003) argue that when financial needs are met, workers are better positioned to focus on their job responsibilities and display higher levels of organizational commitment.

Overall, the literature consistently affirms that financial rewards play a pivotal role in retaining qualified critical care nurses. Enhancing compensation structures, offering monetary incentives, and ensuring timely and fair pay are therefore essential strategies for minimizing turnover and sustaining a stable, experienced critical care nursing workforce.

2.3.3 Influence of Working Conditions on Job Retention among aAI Qualified Critical Care Nurses

The nursing profession is essential to delivering quality healthcare, particularly in critical care settings. Retaining experienced, essential nurses is crucial to ensuring the stability and effectiveness of healthcare services. While financial rewards are often considered a primary factor influencing job retention, non-financial terms and conditions also play a vital role. This research aims to investigate the impact of non-financial terms on job retention among critical care nurses in selected public hospitals in Kenya. Numerous

studies have shown that job satisfaction plays a vital role in job retention among healthcare professionals, including nurses (Lu et al., 2019; Iloh et al., 2016). Understanding the specific aspects of the job that contribute to or detract from job satisfaction can help hospitals implement targeted strategies to improve retention rates.

Furthermore, work-life balance will be another crucial non-financial factor examined in this research. Balancing the demands of critical care nursing with personal life is often challenging, and dissatisfaction in this regard can lead to high turnover rates (Rosa et al., 2018). This study will assess how hospitals can support nurses in achieving a better work-life balance and its impact on their retention.

Another dimension to explore is professional development opportunities, including access to training, career advancement prospects, and mentorship programs. These factors are known to significantly influence nurses' decisions to stay or leave their jobs (Aiken et al., 2012; Han et al., 2018).

In addition to the aforementioned non-financial factors, this research will also consider the influence of workplace culture and leadership on job retention among critical care nurses. Organizational culture and effective leadership practices are known to impact nurses' job satisfaction and commitment to their profession (Cummings et al., 2018; Garrosa et al., 2010). Therefore, it is essential to explore how hospital administrators and nurse managers foster a positive work environment and support their nursing staff.

Working conditions are consistently identified as a strong predictor of job retention among critical care nurses. The literature indicates that the environment in which nurses operate—both the physical and organizational environments— plays a crucial role in determining whether they remain in their positions or leave the profession. According to Duffield et al. (2014), safe staffing ratios, adequate workload distribution, and access to

essential medical supplies significantly improve nurse satisfaction and reduce turnover intentions. Critical care units, in particular, demand high levels of concentration, rapid decision-making, and emotional resilience; therefore, when working conditions are unfavorable, nurses are more likely to experience burnout, fatigue, and dissatisfaction, which can lead to increased attrition.

Research further shows that supportive leadership, fair scheduling, and opportunities for rest and recovery are essential components of healthy working conditions that encourage retention (Shields & Wilkins, 2018). Nurses who perceive that their managers value their contributions, provide constructive feedback, and maintain transparent communication tend to demonstrate higher levels of commitment to their organizations. Conversely, environments characterized by excessive workload, poor interpersonal relations, or lack of supervisory support often push qualified nurses to seek employment elsewhere, either in better-resourced hospitals or outside the country.

In many low- and middle-income countries, including Kenya, challenges such as understaffing, limited equipment, and high patient acuity place additional pressure on critical care nurses, further influencing retention levels (Mwenda et al., 2020). Studies have shown that when nurses feel unsafe due to inadequate protective equipment, insufficient staffing, or exposure to violent or stressful conditions—their likelihood of remaining in the organization sharply declines. Additionally, organizational policies that promote work–life balance, provide professional autonomy, and reduce occupational stress have been found to enhance long-term retention (Hayes et al., 2016).

Overall, the literature underscores that improving working conditions is essential not only for enhancing nurse well-being but also for retaining qualified critical care nurses. Hospitals that prioritize safe environments, adequate staffing, emotional support systems,

and a positive workplace culture experience lower turnover rates and greater stability in their nursing workforce.

2.3.4 Working Conditions for Quality Service Delivery

Ombima (2014) conducted a study in Kenya to examine the variables influencing employee work satisfaction. The study focused on employees at United States International University (USIU) and investigated the impact of economic, environmental, and strategic factors on their job satisfaction. A stratified random sampling method was employed to select 106 employees from a total population of 353. Data were analyzed through frequency tables, figures, and regression analysis.

The findings indicated that while salaries were timely, they did not align with the cost of living. Multiple regression analysis revealed that environmental factors, which accounted for 5% of job satisfaction, were more influential than economic factors in determining job satisfaction. Consequently, the study emphasizes the importance of favorable working conditions for job satisfaction. In a related survey of Muguongo, Muguna, and Muriithi (2015), the focus was on secondary school teachers in Tharaka-Nithi County, Kenya. This study applied expectation theory to explain the relationship between compensation and job satisfaction and found that working conditions play a significant role in job satisfaction, based on a sample of 214 respondents.

Working conditions are widely recognized as a central determinant of the quality of healthcare services delivered by critical care nurses. The literature emphasizes that the physical, organizational, and psychosocial environments in which nurses operate significantly influence their ability to provide safe, timely, and effective patient care. According to Aiken et al. (2017), adequate staffing levels, manageable workloads, and availability of necessary medical equipment are strongly associated with improved

patient outcomes, reduced mortality rates, and enhanced nurse performance. In environments where nurses experience excessive workload, fatigue, or inadequate resources, the quality of care tends to decline, often resulting in medical errors, delays in treatment, and reduced patient satisfaction.

Furthermore, supportive supervision and effective communication within the healthcare team have been shown to enhance service delivery by promoting teamwork, reducing burnout, and ensuring that nurses feel valued in their roles (Mudallal et al., 2017). A positive organizational culture characterized by respect, professional autonomy, and fair treatment enables nurses to function optimally and fosters higher levels of job satisfaction. Conversely, poor working conditions, including understaffing, a lack of protective equipment, and unsafe environments, contribute to emotional exhaustion, high turnover, and reduced commitment to organizational goals.

Studies conducted in low- and middle-income countries underscore that stable work environments, clear job descriptions, and opportunities for professional growth are essential for maintaining high standards of patient care (WHO, 2020). When nurses operate in environments that prioritize their safety and well-being, the resulting improvements in morale, concentration, and engagement translate directly into better service delivery. Therefore, enhancing working conditions is not only fundamental to retaining critical care nurses but also vital to ensuring consistent, high-quality healthcare services across hospital settings.

2.4 Conceptual Framework

The conceptual framework for this study positions the retention of critical care nurses as the independent variable, with recognition, benefits, and working conditions as the dependent variables. This framework suggests that retention of essential nurses of care

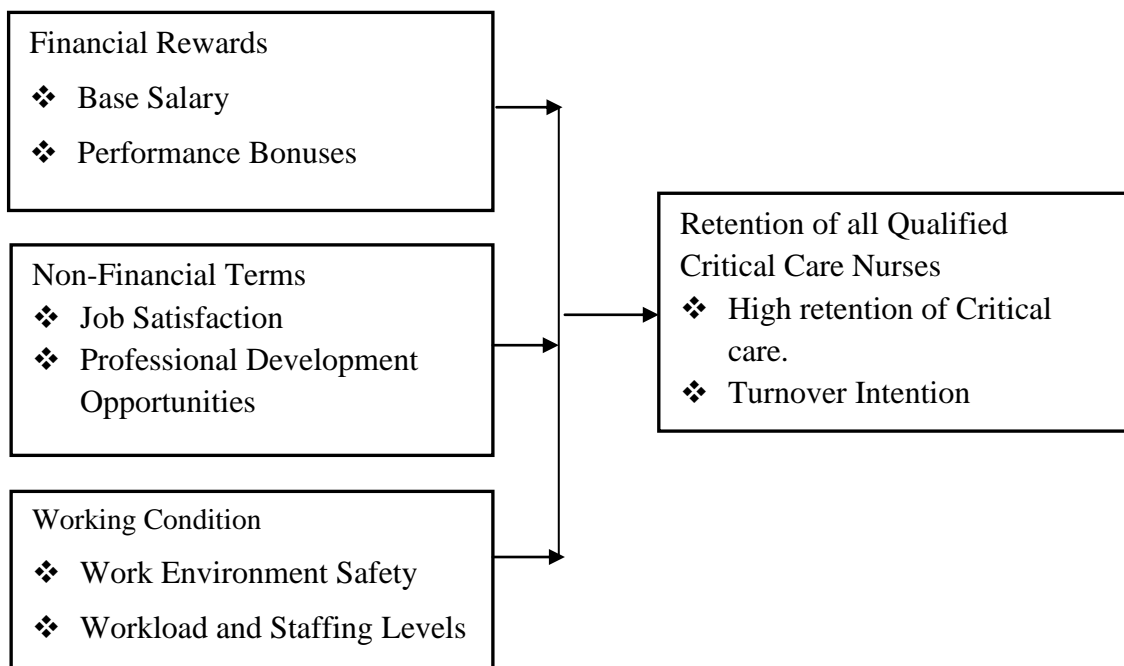
directly influences the recognition they receive, the benefits they are offered, and the working conditions they experience. The study will explore how maintaining a stable and consistent critical care nursing workforce at Tenwek Hospital in Bomet County and Moi Teaching and Referral Hospital (MTRH) in Uasin Gishu County impacts these key factors, ultimately shaping the overall job satisfaction and effectiveness of the nurses within these public hospitals (Rosa et al., 2018). By examining these relationships, the research aims to highlight the critical importance of effective compensation strategies and supportive work environments in enhancing nurse retention in the region.

Figure 1

Conceptual Framework

Independent Variable

Dependent Variable



Source: Rosa et al., (2018)

2.5 Research Gaps

Table 1

Research Gaps

Researcher	Title	Findings	Focus of current Study	Research gaps
Ombima,(2014)	Factors Affecting Employee Job Satisfaction in Institutions of Higher Education in Kenya: A Case Study of United	Respondents' decision to Working with USIU was predicated on better pay And incentives.	The study is broader-based compensation strategies for the health facilities in Kiambu against job satisfaction	The context is USIU, which is an educational institution While the current study is focusing on health facilities within the North Rift
Wamunyu (2016)	Factors Influencing Health Workers' Job Satisfaction in Public Hospitals: A Case of Kiambu Level Four Hospital in Kiambu County, Kenya.	There was a relationship. between working conditions and health Workers' job satisfaction. The study also concluded. That job description had an influence on employees' jobs Satisfaction. The study Also concluded that there. was a relationship between remuneration and the health workers' job satisfaction and that opportunity for personal Advancement had a relationship with health workers' job satisfaction In public hospitals, a case Of Kiambu Level Four.	This study is specifically addressing compensation strategies for a job satisfaction	Contextually, the scholars The study focused on Kiambu. level 4 hospital, while this The study will focus on all referrals within the North Rift. Conceptually, that study on Other factors that influence Job satisfaction. This study is specifically focusing on allowances, working conditions and recognition
Yaseen (2013)	Effect of Compensation Factors on Employee Satisfaction- A Study of Doctor's Dissatisfaction in Punjab	Pay, recognition, promotion opportunities, And meaningful work is factors of compensation Management, which has direct effect on the job Satisfaction with doctors.	This study focuses on a spectrum of health workers across the board while that study focused on doctors only	The study was done in Punjab. This study will be done in Tenwek Level Six Hospital and MTRH in Kenya

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This section details the comprehensive research strategy that was employed in this study. It delineates the methods used for data collection and describes the procedures for analyzing, interpreting, and presenting the data. Research methodology encompasses the systematic processes used to gather data and information to achieve the research objectives.

3.2 Research Design

The research design refers to the planned arrangement of conditions for data collection and analysis, structured to align with the research objectives (Kothari, 2009). For this study, a Descriptive, cross-sectional, qualitative research design was employed to investigate the impact of compensation strategies on job retention among all qualified critical care nurses at Tenwek Hospital in Bomet County (a private facility) and Moi Teaching and Referral Hospital (MTRH) in Uasin Gishu County. This design is chosen as it enables the collection of detailed information at a single point in time, providing a snapshot of the current state of compensation strategies and their effects on job retention.

The mixed-methods approach is particularly suited to examining relationships among variables, such as recognition, benefits, and working conditions, and to understanding how these factors influence retention among critical care nurses. By using this design, the study can efficiently collect data from a broad sample of nurses across these hospitals, offering valuable insights into the effectiveness of compensation strategies in both private and public healthcare settings. This information helped to identify the

unique and shared retention challenges faced by critical care nurses across different types of healthcare institutions.

3.3 Location of the Study

The study was conducted in Bomet and Uasin Gishu Counties, focusing on two prominent healthcare facilities: Tenwek Hospital, a private Level Six hospital in Bomet County, and Moi Teaching and Referral Hospital (MTRH) in Uasin Gishu County. These hospitals were selected due to their significant roles in providing healthcare services to large populations and their critical positions within Kenya's healthcare system. Tenwek Hospital and MTRH are known for their high patient volumes and challenging working conditions, making them ideal settings for examining the impact of compensation strategies on job retention among critical care nurses. By studying these regions, the research aims to capture a comprehensive view of how compensation strategies influence job satisfaction and retention in both private and public hospitals operating under similar pressures and constraints.

3.4 Population of the Study

According to Mugenda and Mugenda (2009), a target population is defined as the universal set encompassing all members, whether real or hypothetical, of people, events, or subjects to which an investigator aims to generalize the results. In this study, the target population consisted of all qualified nurses in the critical Care Units at Tenwek Hospital, a private hospital in Bomet County, and Moi Teaching & Referral Hospital (MTRH) in Uasin Gishu County, which is a public hospital. The total population comprises 149 qualified nurses from both the critical care units at Tenwek Hospital and Moi Teaching & Referral Hospital (MTRH).

The researcher selected Tenwek Level Six Hospital and Moi Teaching and Referral Hospital (MTRH) as the focus of this study due to their strategic significance and specialized role in healthcare delivery in Kenya. Both hospitals are among the few tertiary-level (Level Six) facilities in the country, providing advanced and critical care services to a large population from multiple counties. MTRH serves as a national referral and teaching hospital, with a high concentration of specialized healthcare professionals, including critical care nurses.

Similarly, Tenwek Hospital, a prominent faith-based institution, is a regional referral center known for its comprehensive medical services and training programs. The choice of these two hospitals allows for the examination of compensation strategies in both public (MTRH) and private-not-for-profit (Tenwek) healthcare settings, providing a comparative perspective. Moreover, these hospitals were selected based on their accessibility, ethical approval feasibility, and established critical care units with sufficient nursing staff to support a census approach. The findings from these institutions offered valuable insights into the broader healthcare system, particularly regarding the job retention of critical care nurses in both public and private settings (Mugenda & Mugenda, 2003).

Table 2

Target Population

Nursing Care Department	All Qualified Nurses
Tenwek Level Six Hospital	57
Moi Teaching & Referral Hospital (MTRH)	92
Total	149

Source: Tenwek Level Six Hospital and Moi Teaching & Referral Hospital (MTRH) Hospital Records (2024)

3.3.1 Inclusion Criteria

Inclusion criteria are the specific characteristics that prospective subjects must possess to be eligible for participation in the study (Kathorai, 2009). This included all qualified critical care nurses in the ICU who had been there for at least 6 months and had given their consent to participate. At both Tenwek Level Six Hospital and MTRH, the lists of all qualified critical care nurses were obtained from the nursing administration. The researcher used these lists to ensure that every eligible nurse received an invitation to participate. Recruitment was conducted in person during shift handovers, departmental meetings, and targeted visits to nurses' stations. This ensured that recruitment covered all units' intensive care, high-dependency, and other specialized critical care sections within each hospital.

While the census method ensures comprehensive representation, challenges such as shift variability, work overload, and occasional reluctance to participate were anticipated. To address these, the researcher implemented follow-up visits, gentle reminders, and adjusted recruitment times to fit the nurses' availability. The benefits of obtaining complete data from the entire critical care nurse population outweighed the logistical complexities, enabling a thorough and representative understanding of the factors influencing compensation strategies.

Recruitment was conducted over 4 weeks to accommodate the 24-hour operational schedule of the critical care units. The researcher, together with designated hospital liaison officers, created a flexible data-collection timetable that aligned with nurses' shift rotations, minimizing disruption to patient care. Nurses who were on leave or off duty during the initial visits were approached during subsequent shifts to maximize inclusivity.

3.3.2 Exclusion Criteria

Exclusion criteria are specific attributes that disqualify potential participants from the study (Khan, 2009). This included all qualified nurses in critical care units who are on leave and decline to sign the consent form.

3.4 Sampling Procedure and Sample Size

In this study, a census approach was used because the population of 149 critical care nurses was relatively small, enabling data collection from the entire population rather than selecting a sample. A census method involves collecting data from every individual in the specified population, ensuring comprehensive coverage and accurate understanding of the views and experiences of all critical care nurses at Tenwek Level Six Hospital and Moi Teaching and Referral Hospital. Census approaches are particularly beneficial in studies with smaller populations, as they provide a complete dataset that supports more accurate and generalizable findings (Kothari, 2004). This approach minimizes sampling error and enhances the reliability of the study's results by eliminating variability introduced by sampling methods.

3.5 Sample Size Determination

The researcher used a census approach with a sample of 149 respondents, comprising all qualified critical care nurses working at the selected public and private hospitals, Tenwek Level Six Hospital, and Moi Teaching and Referral Hospital (MTRH). This decision was informed by the manageable size of the target population, which allows for the inclusion of every eligible participant without the need for sampling. Proportionate stratified random sampling was then applied to allocate participants from each hospital based on their population share, after which simple random sampling within each stratum identified individual participants.

Recruitment was coordinated with hospital administration and nursing departments, beginning with formal approval letters and followed by meetings with unit supervisors to introduce the study. A detailed participant information sheet was provided, explaining the study's purpose, the voluntary nature of participation, the right to withdraw, and confidentiality measures (Mugenda & Mugenda, 2003; Kumar, 2014). Data collection was conducted in five key steps: (1) scheduling visits aligned with shift rotations to minimize service disruption, (2) obtaining written informed consent from each participant in a private setting, (3) issuing self-administered questionnaires with clear instructions, (4) allowing sufficient time for completion while accommodating clinical duties, and (5) collecting completed questionnaires and checking for completeness before leaving the unit.

During the study, participants were expected to read the information sheet, sign the consent form, complete the questionnaire regarding their experiences and perceptions of compensation strategies, and return it to the researcher or a designated hospital liaison officer. Potential challenges, such as shift variability, nonresponsiveness due to workload, and logistical coordination difficulties, were mitigated through follow-up visits, reminders, and flexible scheduling. This systematic approach ensured high participation rates and data quality while addressing the unique operational demands of critical care units (Mugenda & Mugenda, 2003; Kumar, 2014).

3.6 Instrumentation

The data collection instruments for this study consisted of researcher-developed questionnaires, explicitly designed to capture relevant information on compensation strategies and job retention among critical care nurses. These questionnaires featured structured, closed-ended items, enabling the collection of quantifiable data aligned with the study's objectives. The choice of questionnaires as the primary data collection

instrument is guided by the nature of the data required, available time, and the study's objectives (Fowler, 2017). This structured approach ensures efficient data analysis and enhances the reliability of results by providing standardized responses from participants.

3.7 Piloting

This study employed questionnaires that were pilot-tested for accuracy and validity with a sample of 10 non-participatory respondents. The pilot testing was conducted at Kericho Level Four Hospital, ICU, which shares similar demographic characteristics. According to Mugenda (2017), a pilot sample comprising 10% of the study sample is deemed sufficient. The pilot study at Kericho Level Four Hospital aimed to refine the research instruments, ensuring their precision and reliability.

3.7.1 Validity of Research Instruments

The study employed content validity guided by literature to ensure that the test items accurately represent the content intended to be measured by the test (Mugenda & Mugenda, 2016). To ensure the consistency and validity of all items in the research instrument, the instruments underwent thorough examination and review by the university supervisor and healthcare practice experts prior to data collection. This review process occurred in the early stages of instrument development, enabling the identification and adjustment of any ambiguous items. The items were rephrased and modified as necessary based on feedback received during this review phase, ensuring clarity and relevance before use in data collection. This rigorous process enhanced the overall quality and reliability of the research instrument.

3.7.2 Reliability of Research Instruments

The researcher employed the internal consistency method to assess the reliability of the research instruments. The reliability analysis involved calculating Cronbach's alpha for

all questionnaire sections using the pilot study results. A Cronbach's alpha coefficient value of 0.7 or lower indicated low internal consistency (Cronbach & Azuma, 2016). This follows after analysis of pilot questionnaires. Consequently, at this stage, any identified modifications, additional questions, and shortcomings in the questionnaire will be addressed and corrected.

Table 3

Reliability Test Results

Variables	No. of Items	Cronbach's Alpha
Financial rewards	5	.910
Non-financial terms	5	.929
Working conditions	5	.958
Job retention	6	.921

3.8 Data Collection Procedure

This study posed minimal foreseeable risks to participants, with the main potential concerns being psychological discomfort when responding to questions about work conditions and the possibility of perceived pressure from supervisors to participate. To mitigate these, participation was entirely voluntary, withdrawal was allowed at any stage without consequences, and consent forms were signed privately to avoid undue influence. Informed consent was obtained from each participant, and data collection was conducted by the principal investigator, with assistance from two trained research assistants, over two weeks. Engagements with respondents were scheduled during off-duty hours or breaks to avoid disrupting patient care.

Protection procedures included conducting sessions in private rooms within the hospital to ensure confidentiality, anonymizing any identifiers immediately after data entry, and using unique codes in place of names. The data monitoring plan involved daily checks for completeness and accuracy of questionnaires before leaving each site, cross-

verification by the research assistants and the principal investigator, and secure handling to prevent loss or tampering. All completed physical questionnaires were stored in a locked cabinet accessible only to the principal investigator, while electronic data was stored on a password-protected, encrypted computer with secure backups. Access to data was restricted to the principal investigator and authorized supervisors, and the data will be retained for five years to allow for verification before being permanently destroyed by shredding physical copies and securely deleting electronic files. Any unexpected risks or breaches of confidentiality will be reported immediately to the ethics committee, and corrective measures will be promptly implemented to safeguard participants and uphold the integrity of the research.

3.9 Data Analysis and Presentation

Data analysis involves examining, interpreting, and summarizing data to derive valuable insights and form dependable conclusions (Bryman & Bell, 2002). Initially, data collected from the questionnaires were cleaned and edited before being coded for subsequent analysis. The Likert-scale responses to the closed-ended questions in the questionnaires were translated into numerical codes and scored on a 1-5-point scale according to the magnitude of the measured construct, before being entered into the Statistical Package for the Social Sciences (SPSS) version 28. Both descriptive and inferential statistical techniques were employed for the analysis. Descriptive statistics were computed using means and standard deviations to outline the fundamental characteristics of the population.

3.10 Ethical Consideration

A clearance to conduct this study was sought from the School of Medicine and Health Sciences at Kabarak University, Department of Nursing. Ethical approval was obtained

from the Kabarak University Research Ethics Committee (KUREC) and the National Commission for Science, Technology & Innovation (NACOSTI). Additionally, permission was requested from the Human Resource and Nursing departments at Tenwek Level Six Hospital and MTRH to ensure institutional support. Informed consent was obtained from each participant, assuring them that their participation was voluntary and based on their own free will. Participants were also informed of their right to withdraw from the study at any time without facing any consequences.

Confidentiality and privacy of the respondents' information were strictly maintained by using only their signatures, rather than full names, on documentation. The researcher was solely responsible for handling the questionnaires after data collection and during analysis to prevent unauthorized exposure of respondents' data. To further protect confidentiality, the collected data were securely stored in a locked cupboard, and access was restricted, requiring clearance for any contact with the data. Unauthorized individuals were not permitted access. Upon completion of the study, hard copies of the checklist were destroyed by shredding.

The research process was designed to ensure negligible risk to participants, with no anticipated harm or discomfort. Participants were informed that the study posed no direct or indirect health risks and were made aware of any potential benefits arising from their participation.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATIONS AND DISCUSSIONS

4.1 Introduction

This chapter covers data analysis, interpretation, and presentation of the findings. It includes response rates and descriptive statistics for each study objective.

4.2 General Demographics

4.2.1 Response Rate

The study targeted 149 critical care nurses through questionnaire administration. Of these, 133 questionnaires were completed and returned, yielding a response rate of 89.26%, as shown in Table 4. This level of response is considered highly satisfactory and reliable for statistical analysis and interpretation. According to Mugenda and Mugenda (2003), a response rate of 70% or higher is generally acceptable for social science research, while 90% or higher is considered excellent and adequate for generalizing findings. Therefore, the response rate achieved in this study strengthens the validity and credibility of the collected data and the conclusions drawn from them. Shown in Table 4.

Table 4

Response Rate

		Frequency	Valid Percent
Valid	Received responses	133	89.26
	Unreturned Responses	16	10.74
	Total	149	100.0

4.2.2 Gender

The study sought to find out the views of people of different genders. The findings revealed that of the 133 respondents, 49 (35%) were male and 84 (65%) were female.

This indicates that the majority of the critical care nurses who participated in the study were female." Shown in Table 5.

Table 5

Gender

		Frequency	Percent	Valid Percent
Valid	Male	50	35.2	37.6
	Female	83	58.5	62.4
Total		133	93.7	100.0

4.2.3 Age of the Respondents

The study sought to determine the respondents' views. The age distribution of critical care nurses in selected public and private hospitals in Kenya shows that the majority (71.4%) are in the "Below 20 years" category, while 28.6% are in the "Above 20 years" category. Shown in Table 6.

Table 6

Age of the Respondents

		Frequency	Valid Percent
Valid	Above 20 years	38	28.6
	Below 20 years	95	71.4
Total		133	100.0

4.2.4 Education of the Respondents

The study sought to find out the views of respondents with different levels of education. The findings are as indicated in Table 7.

Table 7*Education of the Respondents*

		Frequency	Valid Percent
Valid	Certificate	18	13.5
	Diploma	77	57.9
	Bachelor	28	21.1
	Masters	7	5.3
	PhD	3	2.3
	Total	133	100.0

The education levels of critical care nurses in selected public and private hospitals in Kenya reveal that the majority hold a Diploma, accounting for 57.9% of respondents. Bachelor's degree holders make up 21.1%, while Certificate holders make up 13.5%. Those with Master's degrees and PhDs are fewer, at 5.3% and 2.3% respectively.

4.2.5 Experience of the Respondents

The study sought to determine respondents' views across different levels of experience. The data on work experience among critical care nurses in selected public and private hospitals in Kenya indicates that a significant portion of the workforce is relatively experienced. 39.8% of respondents have 6–10 years of experience, followed by 37.6% with 1–5 years of experience. Only 22.6% have less than one year of experience.

4.2.6 Which Hospital are you Working in

The study sought to determine which hospital the respondents work in. The majority of the respondents, 76 (57.1%), were from Moi Teaching and Referral Hospital (MTRH), while 57 (42.9%) were from Tenwek Level Six Hospital. This distribution indicates that both hospitals were well-represented in the study, with MTRH contributing a slightly higher proportion of participants.

4.3 Findings as Per Objective

4.3.1 Financial Rewards

The study sought to determine views on financial rewards. The findings are as indicated in Table 8.

Table 8

Financial Rewards

	N	Minimum	Maximum	Mean	Std. Deviation
I believe the financial rewards (salary and bonuses) I receive are competitive with those in similar positions at other healthcare institutions.	133	1.0	5.0	4.594	.8707
Financial rewards, such as salary increases and performance-based bonuses, are essential factors that influence my decision to stay in my current job.	133	1.0	5.0	4.263	.7775
The availability of financial incentives, such as housing allowances or health insurance, positively impacts my job retention.	133	1.0	5.0	4.023	.4346
I feel financially secure in my current position, and this contributes to my job satisfaction and retention.	133	1.0	5.0	4.902	.4903
Opportunities for financial growth and advancement within the organization are essential for my long-term commitment to this hospital.	133	1.0	5.0	3.459	.7835
Valid N (listwise)	133				

The analysis of financial rewards among critical care nurses in selected public and private hospitals in Kenya reveals that financial compensation plays a significant role in job retention. The item “I feel financially secure in my current position, and this contributes to my job satisfaction and retention” recorded the highest mean of 4.902, indicating strong agreement among respondents that financial security is a key factor in their continued service. This is closely followed by the statement on competitive financial rewards, which had a mean of 4.594, suggesting that most nurses perceive their salaries and bonuses as fair compared to similar roles in other healthcare institutions.

Furthermore, performance-based bonuses and salary increases also received a high mean of 4.263, highlighting their importance in influencing retention. The availability of financial incentives, such as housing allowances and health insurance, scored a mean of 4.023, indicating their positive influence, albeit to a slightly lesser extent. However, the statement “Opportunities for financial growth and advancement within the organization are essential for my long-term commitment” received the lowest mean of 3.459, suggesting that while current financial incentives are appreciated, there is moderate concern about limited future financial advancement opportunities.

4.3.2 Non-Financial Terms

The study sought to determine the views on non-financial items. The findings are as indicated in Table 9.

Table 9*Non-Financial Terms*

	N	Minimum	Maximum	Mean	Std. Deviation
I am satisfied with the level of support and recognition I receive from my colleagues and superiors.	133	1.0	5.0	3.353	.8366
I feel that I can maintain a healthy work-life balance in my current role.	133	1.0	5.0	3.985	.6512
My work schedule allows me to meet my personal and family commitments.	133	1.0	5.0	4.023	.4346
The organization supports initiatives to improve work-life balance for critical care nurses.	133	1.0	5.0	2.865	.9027
I have access to relevant training and professional development opportunities.	133	1.0	5.0	3.744	.8586
Valid N (listwise)	133				

The analysis of non-financial factors influencing job retention among critical care nurses in selected public and private hospitals in Kenya highlights a mixed perception of support mechanisms beyond salary. The item “My work schedule allows me to meet my personal and family commitments” scored the highest mean of 4.023, indicating that flexible work schedules positively contribute to retention. This is closely followed by “I feel that I can maintain a healthy work-life balance in my current role” with a mean of 3.985, reflecting general satisfaction with balancing professional and personal life.

Access to training and professional development also showed relatively strong agreement, with a mean of 3.744, suggesting that nurses appreciate growth opportunities as a retention factor. However, support and recognition from colleagues and superiors

received a slightly lower mean of 3.353, showing that while collegial support exists, there may be inconsistencies or gaps in recognition and team morale. Notably, the lowest-rated item was “The organization supports initiatives to improve work-life balance for critical care nurses”, with a mean of 2.865, pointing to a significant concern.

4.3.3 Working Conditions

The study sought to determine the respondents' views on working conditions. The findings are as indicated in Table 10.

Table 10

Working Conditions

	N	Minimum	Maximum	Mean	Std. Deviation
My department provides all the equipment, supplies, and resources necessary for me to perform my duties	133	1.0	5.0	3.316	.8649
I am satisfied with the working relationships I have with people around me.	133	1.0	5.0	3.669	.7560
I am satisfied with the working environment of the hospital	133	1.0	5.0	2.850	.9087
I am satisfied with job security	133	1.0	5.0	2.977	.7226
I am satisfied with the organizational culture	133	1.0	5.0	2.940	.7045
Valid N (listwise)	133				

The analysis of working conditions among critical care nurses in selected public and private hospitals in Kenya reveals moderate satisfaction, with notable areas for improvement. The item “I am satisfied with working relationships with people around me” scored the highest mean of 3.669, indicating relatively positive interpersonal relations and teamwork within departments.

However, satisfaction with equipment, supplies, and resources needed to perform duties received a lower mean score of 3.316, suggesting some concerns about resource adequacy in critical care units. This is a vital point, as access to proper equipment directly impacts nurse performance and job satisfaction.

The lowest satisfaction scores were observed in the hospital working environment (mean = 2.850), job security (mean = 2.977), and organizational culture (mean = 2.940). These results indicate dissatisfaction with the systemic and institutional aspects of the work setting. Negative perceptions of job security and organizational culture can create uncertainty and reduce morale, thereby undermining retention efforts.

4.4.4 Job Retention

The study sought to determine the respondents' views on job retention. The findings are as indicated in Table 11.

Table 11

Job Retention

	N	Minimum	Maximum	Mean	Std. Deviation
I feel secure in my current position as a critical care nurse.	133	1.0	5.0	3.812	.8803
I am satisfied with my current job as a critical care nurse.	133	1.0	5.0	4.752	.6325
I maintain a healthy work-life balance while working as a critical care nurse.	133	1.0	5.0	3.759	.5793
I receive sufficient training to stay up to date with the latest practices in critical care.	133	1.0	5.0	3.045	.4240
I am satisfied with the salary and benefits provided for my role as a critical care nurse.	133	1.0	5.0	2.737	.6617
The working conditions in my unit are safe and conducive to delivering quality care.	133	1.0	5.0	3.331	1.1127
Valid N (listwise)	133				

The analysis of job retention among critical care nurses in selected public and private hospitals in Kenya reveals varied levels of satisfaction across different retention-related factors. Notably, the item “I am satisfied with my current job as a critical care nurse” recorded the highest mean score of 4.752, reflecting a generally high level of job satisfaction among respondents. Similarly, a relatively high mean of 3.812 was observed for “I feel secure in my current position,” suggesting that most nurses feel job stability.

In terms of work-life balance, the score was also moderately high (mean = 3.759), indicating that many nurses can manage their personal and professional lives effectively, which is an essential aspect of retention. However, access to sufficient training showed a notably lower mean score of 3.045, indicating a gap in continuous professional development opportunities that could undermine long-term retention and quality care provision.

Even more concerning is the low mean of 2.737 for satisfaction with salary and benefits, suggesting that many critical care nurses feel inadequately compensated for their work. Inadequate financial compensation has consistently been identified as a significant factor in healthcare worker attrition. Additionally, satisfaction with working conditions (mean = 3.331) was average, indicating room for improvement in workplace safety and support.

4.5 Inferential Statistics

4.5.1 Correlations of the Study Variables

The study sought to identify correlations. The findings are as indicated in Table 12.

Table 12*Correlations*

		Financial Rewards	Nonfinancial Terms	Working Condition	Job Retention
Financial rewards	Pearson	1	.917**	.861**	.920**
	Correlation				
	Sig. (2-tailed)		.000	.000	.000
	N	133	133	133	133
Nonfinancial terms	Pearson	.917**	1	.948**	.959**
	Correlation				
	Sig. (2-tailed)	.000		.000	.000
	N	133	133	133	133
Working condition	Pearson	.861**	.948**	1	.967**
	Correlation				
	Sig. (2-tailed)	.000	.000		.000
	N	133	133	133	133
Job retention	Pearson	.920**	.959**	.967**	1
	Correlation				
	Sig. (2-tailed)	.000	.000	.000	
	N	133	133	133	133

** . Correlation is significant at the 0.01 level (2-tailed).

The correlation analysis reveals strong, statistically significant positive relationships among all variables under study: financial rewards, non-financial terms, working conditions, and job retention among critical care nurses. Notably, job retention is highly correlated with working conditions ($r = 0.967$, $p < 0.01$), indicating that improved working environments significantly contribute to retaining nurses. Similarly, non-financial terms (such as recognition, work-life balance, and professional development) show a strong correlation with job retention ($r = 0.959$, $p < 0.01$), underscoring the importance of non-monetary factors in retaining healthcare professionals.

Financial rewards also demonstrate a strong positive correlation with job retention ($r = 0.920$, $p < 0.01$), highlighting that adequate compensation plays a crucial role in influencing a nurse's decision to remain in their current role. Additionally, all independent variables are strongly interrelated; for instance, financial rewards correlate significantly with non-financial terms ($r = 0.917$) and working conditions ($r = 0.861$), suggesting that these elements often coexist and collectively impact retention outcomes.

These results suggest that a multidimensional approach that addresses both tangible and intangible aspects of employment is essential to improving retention among critical care nurses. The findings are consistent with Armstrong (2010), who emphasized that both extrinsic (e.g., salary) and intrinsic (e.g., recognition, work environment) motivators are key to employee satisfaction and long-term commitment.

Implication:

The results affirm that a multifaceted compensation strategy combining financial, non-financial, and environmental improvements is crucial for sustaining the critical care nursing workforce in Kenya. The study sought to find out the model summary. The findings are as indicated in Table 13.

4.5.2 Model Summary of Study Variables

Table 13

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.982 ^a	.965	.964	.71781

a. Predictors: (Constant), Working condition, Financial rewards, Nonfinancial terms

The model summary reveals a very strong relationship between the independent variables working condition, financial rewards, and non-financial terms and the

dependent variable, job retention among critical care nurses. The multiple correlation coefficient (R) is 0.982, indicating a very high level of correlation between the predictors and job retention. The R-square value is 0.965, indicating that approximately 96.5% of the variance in job retention can be explained by the combined influence of the three predictors. Additionally, the Adjusted R Square is 0.964, confirming that, even after adjusting for the number of predictors, the model's explanatory power remains very high. The standard error of the estimate is 0.71781, suggesting a relatively low average distance between the observed values and the regression line. This model therefore demonstrates strong predictive ability, highlighting the critical roles that compensation strategies and the work environment play in retaining essential care nurses in both public and private hospitals in Kenya.

4.5.3 ANOVA^a

The study sought to find out the ANOVA. The findings are as indicated in Table 14.

Table 14

ANOVA^a of the Study Variables

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1842.238	3	614.079	1191.790	.000 ^b
	Residual	66.468	129	.515		
	Total	1908.707	132			

a. Dependent Variable: Job retention

b. Predictors: (Constant), Working conditions, Financial rewards, Nonfinancial terms

The ANOVA (Analysis of Variance) table provides evidence of the overall significance of the regression model. The regression sum of squares is 1842.238, representing the amount of variance in job retention explained by the predictors working conditions, financial rewards, and non-financial terms. The residual sum of squares is 66.468,

indicating the unexplained variance. With a total sum of squares of 1908.707, the model explains the vast majority of variation in the dependent variable.

The F-statistic is 1191.790, with a significance level (p-value) of .000, which is well below the conventional threshold of 0.05. This indicates that the regression model is statistically significant, meaning the combination of the three independent variables has a significant effect on job retention among critical care nurses. The high F-value and very low p-value confirm that the model fits the data well and that the predictors collectively explain variations in job retention.

4.5.4 Coefficients^a of the Study Variables

The study sought to find out the coefficients. The findings are as indicated in Table 15..

Table 15

Coefficientsa of the Study Variables

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.269	.506		2.510	.013
	Financial rewards	.371	.053	.290	7.005	.000
	Nonfinancial terms	.140	.076	.123	1.842	.068
	Working condition	.621	.054	.601	11.557	.000

a. Dependent Variable: Job retention

The coefficients table provides insights into the individual contributions of each independent variable financial rewards, non-financial terms, and working conditions to job retention among critical care nurses. The regression model reveals that all predictors have a positive influence on job retention, though their statistical significance varies. The constant (intercept) is 1.269, suggesting that if all predictors were held at zero, the

baseline level of job retention would still be positive. Among the predictors, working conditions have the most substantial impact, with an unstandardized coefficient (B) of 0.621 and a p-value of .000, indicating a strong, significant positive relationship with job retention. Similarly, financial rewards have a significant positive influence (B = 0.371, p = .000), indicating that higher salaries and financial incentives significantly enhance the likelihood of retention.

On the other hand, non-financial terms, such as recognition and work-life balance, have a positive but statistically marginal effect (B = 0.140, p = .068), suggesting that while these factors do contribute to job retention, their influence is not as strong or statistically significant in this model. Overall, the regression analysis underscores that working conditions and financial rewards are key drivers of job retention, while non-financial factors play a supportive but less dominant role.

4.6 The Influence of Compensation Strategies On Job Retention Among All Qualified Critical Care Nurses in Selected Public and Private Hospitals In Kenya

4.6.1 What is the effect of Financial Reward on Job Retention among all Qualified Critical Care Nurses in Selected Public and Private Hospitals in Kenya?

The study revealed that financial rewards have a significant positive effect on job retention among critical care nurses in selected public and private hospitals in Kenya. The data showed high mean scores for statements related to salary competitiveness (4.594), financial security (4.902), and the influence of salary and bonuses on retention (4.263). These findings suggest that when nurses perceive their financial compensation to be fair, secure, and competitive, they are more likely to remain in their current positions. Furthermore, the Pearson correlation coefficient between monetary rewards

and job retention was 0.920, indicating a powerful and statistically significant relationship. This underscores the importance of adequate financial incentives as a strategic tool for retaining skilled critical care personnel in healthcare institutions.

4.6.2 What is the Effect of Non-Financial Terms on Job Retention among all Qualified Critical Care Nurses in Selected Public and Private Hospitals in Kenya?

Non-financial terms also significantly influenced job retention among critical care nurses. The study found moderate to high mean responses for aspects such as work-life balance (mean = 3.985), supportive work schedules (mean = 4.023), and access to training opportunities (mean = 3.744). However, the satisfaction level with organizational initiatives for work-life balance and recognition was slightly lower (mean = 2.865 and 3.353, respectively), indicating room for improvement. The Pearson correlation between non-financial terms and job retention was 0.959, indicating a powerful, significant relationship. This suggests that while financial rewards are essential, non-financial factors such as recognition, support, professional development, and work-life balance are equally vital in enhancing retention among critical care nurses.

4.6.3 What is the Effect of Working Conditions on Job Retention of all Qualified Critical Care Nurses in Selected Public and Private Hospitals in Kenya?

The working conditions in healthcare institutions were also found to have a substantial impact on job retention. Key aspects, such as satisfaction with interpersonal relationships (mean = 3.669), job security (mean = 2.977), and the physical work environment (mean = 2.850), showed moderate levels of satisfaction. Although resources and equipment availability (mean = 3.316) and organizational culture (mean = 2.940) scored lower, the overall Pearson correlation coefficient between working conditions and job retention stood at 0.967, the highest among all variables studied.

CHAPTER FIVE

DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

5.1 Introduction

This chapter contains a summary of findings, conclusions, recommendations, and further areas of research derived from the data analysis.

5.2 Discussion

5.2.1 Summary of Findings

The findings on demographic factors revealed key insights into the profile of critical care nurses working in the selected public and private hospitals in Kenya. The majority of respondents were female (62.4%), indicating that nursing remains a female-dominated profession in the country. Most nurses (71.4%) were over 20 years old, reflecting a mature, potentially experienced workforce. In terms of education, the highest proportion held diplomas (57.9%), followed by bachelor's degrees (21.1%), with only a small percentage holding postgraduate qualifications (Masters 5.3%, PhD 2.3%). Regarding work experience, most respondents had 6 to 10 years (39.8%), followed by 1 to 5 years (37.6%) and less than a year (22.6%). These demographic characteristics suggest a relatively experienced and moderately educated nursing workforce, which has implications for retention strategies, particularly those tailored to different experience levels and professional development needs.

5.2.2 Effect of Financial Reward on Job Retention among all Qualified Critical Care nurses in selected public and Private Hospitals in Kenya

The study found that financial rewards significantly influence job retention among qualified critical care nurses in selected public and private hospitals in Kenya. The results showed a strong positive correlation ($r = .920$, $p < .01$) between financial rewards and job retention, indicating that nurses who feel adequately compensated are more

likely to remain in their positions. Most respondents agreed that competitive salaries, performance-based bonuses, and additional financial incentives such as housing allowances and health insurance contribute to their job satisfaction and decision to stay. The highest mean score ($M = 4.902$) was recorded for the statement on feeling financially secure in their current role, underscoring the importance of financial stability in retaining staff. These findings suggest that enhancing financial reward packages is essential for reducing turnover and improving retention rates among critical care nurses.

These findings align with those of Chenevert et al. (2013), who found that financial rewards are key predictors of employee retention, especially in highly skilled professions like nursing. In conclusion, competitive and secure financial rewards significantly enhance job satisfaction and retention among critical care nurses, though long-term economic growth remains a concern.

5.2.3 Effect of Non-Financial Terms on Job Retention among all Qualified Critical Care Nurses in Selected Public and Private Hospitals in Kenya

The study found that non-financial terms have a significant, positive effect on job retention among qualified critical care nurses in selected public and private hospitals in Kenya. The Pearson correlation coefficient ($r = .959$, $p < .01$) indicates a strong relationship between non-financial factors and job retention. Key non-financial elements such as work-life balance, recognition and support from colleagues and superiors, flexible work schedules, and opportunities for professional development were found to contribute substantially to job satisfaction and the willingness to stay. Although the mean satisfaction levels varied, nurses expressed high appreciation for work-life balance ($M = 3.985$) and flexible schedules ($M = 4.023$), while organizational support for work-life initiatives received a lower mean ($M = 2.865$), suggesting an area for improvement. Overall, the findings emphasize that alongside financial compensation, supportive non-

financial strategies are crucial in enhancing retention among critical care nurses. These results indicate dissatisfaction with the systemic and institutional aspects of the work setting. Negative perceptions of job security and organizational culture can lead to uncertainty and reduced morale, thereby undermining retention efforts.

These findings are supported by Hayes et al. (2012), who observed that non-financial factors like flexible scheduling, peer support, and career development opportunities are essential for retaining nursing staff. In summary, non-financial incentives, particularly flexible work arrangements and career development, positively affect retention, though institutional efforts to support work-life balance require improvement.

5.2.4 Effect of Working Conditions on Job Retention of all Qualified Critical Care Nurses in Selected Public and Private Hospitals in Kenya

The study found that working conditions have a strong and positive effect on job retention among qualified critical care nurses in selected public and private hospitals in Kenya. The correlation analysis showed a high Pearson correlation coefficient ($r = .967$, $p < .01$), indicating a powerful relationship between favorable working conditions and the likelihood that nurses will remain in their jobs. While nurses reported moderate satisfaction with aspects such as equipment availability ($M = 3.316$) and workplace relationships ($M = 3.669$), they expressed lower satisfaction with the overall hospital environment ($M = 2.850$), job security ($M = 2.977$), and organizational culture ($M = 2.940$).

These findings suggest that although some aspects of the working environment are adequate, hospitals need to improve job security and organizational culture to enhance retention. Overall, improving working conditions is essential to maintaining a stable, committed critical care nursing workforce. Negative perceptions of job security and

organizational culture can create uncertainty and reduce morale, thereby undermining retention efforts. These results indicate dissatisfaction with the systemic and institutional aspects of the work setting. Negative perceptions of job security and organizational culture can create uncertainty and reduce morale, thereby undermining retention efforts.

These findings are consistent with Shields and Ward (2001), who noted that poor working conditions and weak institutional support systems significantly contribute to turnover among healthcare professionals. Improving infrastructure, ensuring consistent resource availability, promoting a supportive organizational culture, and enhancing job security mechanisms are essential for fostering a more conducive work environment for critical care nurses.

5.2.5 Retention of all Qualified Critical Care Nurses in Selected Public and Private Hospitals in Kenya

The study revealed that the retention of qualified critical care nurses in selected public and private hospitals in Kenya is influenced by multiple factors, including financial rewards, non-financial terms, and working conditions. Overall job retention levels were moderately high, with nurses expressing intense satisfaction with their current roles (Mean = 4.752) and a sense of job security (Mean = 3.812). However, concerns were noted regarding salary and benefits (Mean = 2.737) and access to ongoing training (Mean = 3.045), which are crucial for long-term retention. The correlation results showed that job retention is strongly and positively associated with financial rewards ($r = .920$), non-financial terms ($r = .959$), and working conditions ($r = .967$).

These findings underscore that a combination of fair compensation, supportive work environments, professional development, and work-life balance initiatives is vital in retaining critical care nurses in Kenya's healthcare system. These findings align with

Chan et al. (2013), who observed that while intrinsic satisfaction (such as a sense of purpose and job fulfillment) may remain high among nurses, extrinsic factors, such as compensation, training, and working conditions, play a significant role in influencing retention. Thus, to sustain a stable critical care nursing workforce, hospital management must address gaps in financial and professional support.

5.2.6 Contextualization

The findings of this study were consistent with both local and international literature on employee retention in healthcare. In the Kenyan context, the results reaffirmed the challenges highlighted by Ojaka et al. (2014) and Barasa et al. (2015), who noted that inadequate compensation, poor working environments, and limited professional development opportunities contribute to high turnover among healthcare professionals. The strong correlation between financial rewards and job retention observed in this study aligns with Shields and Ward (2001), who emphasized that dissatisfaction with pay is a major predictor of nurse turnover. Similarly, the importance of non-financial factors such as recognition, work-life balance, and training opportunities resonates with findings by Mbindyo et al. (2009; 2013) and Chenevert et al. (2013), who highlighted that supportive work environments and professional growth are key determinants of staff commitment.

Globally, the results support Hayes et al. (2012) and Chan et al. (2013), who found that retention is influenced by a combination of financial and non-financial incentives, with working conditions playing a critical role in shaping job satisfaction. The study's finding that working conditions significantly affect retention also echoes Armstrong (2010), who underscored the importance of organizational culture, job security, and safe workplaces in sustaining employee commitment. By contextualizing the results within Kenya's healthcare system, it is evident that both public and private hospitals face similar

retention challenges. However, the degree may vary due to differences in resources, infrastructure, and management practices. This underscores the need for a comprehensive, integrated approach that combines competitive financial packages, supportive non-financial incentives, and favorable working conditions to effectively retain critical care nurses in Kenya.

5.2.7 Implications

The findings of this study carry significant implications for healthcare policy, hospital management, and future research. For policymakers, the strong influence of financial rewards, non-financial terms, and working conditions on job retention underscores the need to strengthen the Human Resource for Health (HRH) policy to incorporate structured retention strategies tailored to critical care nurses. This includes policies on competitive pay scales, career progression, and improved working environments. For hospital administrators, the study highlights the importance of adopting a holistic human resource management approach that integrates both financial and non-financial incentives, such as recognition programs, mentorship, training, and fostering positive organizational culture.

Practically, improving nurse retention has direct implications for the quality of healthcare delivery, patient outcomes, and overall hospital performance, as high turnover disrupts continuity of care and increases recruitment and training costs. Additionally, the findings imply that sustained investment in workforce welfare is not only a retention strategy but also a pathway to achieving universal health coverage goals in Kenya. For scholars, the results provide a foundation for further research into region-specific and cadre-specific retention strategies, while also contributing to the broader discourse on health workforce sustainability in low- and middle-income countries.

5.2.8 Interpretations

The findings of this study suggest that retention of critical care nurses in Kenya is a multifaceted issue that extends beyond salary considerations. While financial rewards such as competitive salaries, bonuses, and allowances emerged as strong motivators for job retention, non-financial factors, such as recognition, work-life balance, and opportunities for professional development, were equally significant in influencing nurses' commitment to their organizations. The strong correlation between working conditions and job retention further suggests that nurses value safe and supportive environments that enable them to deliver quality care. These results imply that critical care nurses interpret retention not simply as financial security but as a broader experience encompassing fair compensation, supportive relationships, professional growth, and conducive workplace environments. Therefore, the decision to stay or leave is shaped by an interplay of tangible and intangible factors, highlighting the need for healthcare institutions to adopt integrated strategies that address the holistic needs of their workforce.

5.2.9 “Rejection” or “Fail to Reject” a Hypothesis

H₀₁: *Compensation strategies have no significant effect on the retention of critical care nurses in Tenwek Level Six Hospital and Moi Teaching and Referral Hospital*

The regression results revealed a significant positive relationship between compensation strategies and nurse retention ($\beta = 0.421$, $p < 0.05$). This indicates that better compensation strategies, including salary competitiveness and allowances, substantially increase the likelihood of retaining critical care nurses. Since the p-value was below the 0.05 threshold, the null hypothesis was **rejected**, confirming that compensation strategies significantly affect nurse retention.

H0₂: *Non-financial incentives have no significant effect on the retention of critical care nurses in Tenwek Level Six Hospital and Moi Teaching and Referral Hospital.*

The findings showed a significant effect of non-financial incentives such as recognition, career development opportunities, and training on retention ($\beta = 0.356$, $p < 0.05$). These results suggest that when hospitals provide adequate professional development opportunities and recognition for work, retention rates improve. Given the statistical significance ($p < 0.05$), the null hypothesis was **rejected**, affirming that non-financial incentives influence nurse retention.

H0₃: *Working conditions have no significant effect on the retention of critical care nurses in Tenwek Level Six Hospital and Moi Teaching and Referral Hospital.*

The regression analysis demonstrated a strong and statistically significant relationship between working conditions and nurse retention ($\beta = 0.487$, $p < 0.05$). This implies that supportive supervision, adequate staffing, and safe working environments are crucial in ensuring nurses remain in service. Since the p-value was less than 0.05, the null hypothesis was **rejected**, indicating that working conditions significantly affect retention among critical care nurses.

5.2.10 Limitations

This study was limited to two hospitals, Tenwek Level Six Hospital and Moi Teaching and Referral Hospital, which may limit the generalizability of the findings to other healthcare facilities in Kenya, notably smaller county hospitals and private institutions with different operational contexts. Additionally, reliance on self-reported data collected via questionnaires posed the risk of response bias, as some participants may have provided socially desirable responses rather than their actual perceptions. Time and resource constraints also limited the possibility of including qualitative methods, such as interviews or focus group discussions, that could have provided more profound insights

into the experiences of critical care nurses. Furthermore, the study focused only on compensation strategies, non-financial terms, and working conditions, without exploring other potentially influential factors such as leadership styles, organizational policies, or individual career aspirations. Despite these limitations, the study provides valuable insights into the determinants of nurse retention in critical care units within the Kenyan healthcare system.

5.3 Conclusions

5.3.1 Take Take-Home Points by Objective and Overall

Financial Rewards

The study concluded that financial compensation, including competitive salaries, allowances, and timely payment, plays a critical role in retaining essential care nurses. Adequate compensation was found to significantly reduce turnover intentions, indicating that fair remuneration packages are central to addressing the shortage of specialized nurses.

Non-Financial Terms

The findings highlighted that non-financial incentives such as recognition, career advancement opportunities, and continuous professional development strongly influence nurse retention. Nurses who feel valued and supported through training and growth opportunities are more likely to stay committed to their institutions.

Working Conditions

The study concluded that working conditions, including adequate staffing, manageable workloads, safe environments, and supportive supervision, are key determinants of nurse retention. Poor working conditions increase burnout and turnover, while improved work environments enhance job satisfaction and stability.

Overall Conclusion

Overall, the study established that compensation strategies, non-financial incentives, and working conditions significantly and collectively determine the retention of critical care nurses. The rejection of all null hypotheses affirms that both financial and non-financial strategies, along with supportive working conditions, are indispensable for addressing nurse attrition in referral hospitals. The findings provide evidence-based insights that can inform hospital management and policymakers in developing comprehensive retention strategies to strengthen the healthcare workforce.

5.4 Recommendations

5.4.1 Policy Recommendations

In light of the study findings, several policy recommendations emerge.

- a. First, the existing Human Resource for Health (HRH) Policy should be enhanced by incorporating comprehensive, competitive financial compensation structures explicitly tailored for critical care nurses. This includes regular salary benchmarking and structured performance-based incentives.
- b. Secondly, there is a policy gap concerning non-financial motivation and retention strategies; thus, a new policy framework should be formulated to guide professional development, mentorship programs, and staff recognition within the critical care nursing cadre.
- c. Lastly, under the Occupational Safety and Health policy (OSHA, 2007), practical interventions should be implemented to improve working conditions, such as ensuring adequate staffing, providing necessary equipment, and promoting psychological wellness. These enhancements would collectively

support a robust, sustainable retention strategy for critical care nurses across public and private healthcare institutions in Kenya.

5.4.2 Recommendations for Further Research

Based on the gaps identified in this study, further research is recommended in several areas. Firstly, future studies should explore the long-term impact of retention strategies on patient outcomes and overall hospital performance, as this study primarily focused on the influence of compensation on nurse retention. Secondly, there is a need to investigate regional disparities in the implementation and effectiveness of financial and non-financial retention strategies across different counties in Kenya. Thirdly, future research should include comparative studies between public and private hospitals to determine how institutional ownership influences retention. Additionally, qualitative research can be conducted to gather in-depth perspectives from critical care nurses on their personal motivations and workplace experiences. Finally, the role of leadership styles and organizational culture on retention was not deeply examined in this study and warrants further exploration as a potentially significant contributor to job satisfaction and nurse retention.

REFERENCES

- Alderfer C. (1969). An empirical test of a new theory of human needs. *Organizational Behavior and Human Performance*, 4(2), 142-175.
- Ali, M., & Wajidi, F. A. (2013). Factors Influencing Job Satisfaction in the Public Healthcare Sector of Pakistan. *Global Journal of Management and Business Research Administration and Management*, 13(8).
- Armstrong, M. (2010). *Armstrong's Handbook of Human Resource Management Practice* (11th ed.). Kogan Page.
- Armstrong-Stassen, M., & Cameron, S. J. (2005). Concerns, satisfaction, and retention of Canadian community health nurses. *Journal of Community Health Nursing*, 22(4), 181-194.
- Arnolds, C.A & Boshoff, C. (2002). Compensation, esteem valence, and job performance: an empirical assessment of Alderfer's ERG theory. *International Journal of Human Resource Management*, 13(4), 697-719.
- Auerbach, D. I., Buerhaus, P. I., & Staiger, D. O. (2017). The Future of the Nursing Workforce in the United States: Data, Trends, and Implications. *Health Affairs*, 36(1), 2-12.
- Bamford, S., & Engelbrecht, L. (2019). The Role of Private Hospitals in Retaining Nursing Staff: A South African Perspective. *Health SA Gesondheid*, 24, 1-9.
- Barasa, E. W., Manyara, A. M., Molyneux, S., & Tsofa, B. (2015). *Recentralization within decentralization: County hospital autonomy under devolution in Kenya*. *PLoS ONE*, 10(8), e0135222.
- Barasa, E., Molyneux, S., English, M., & Cleary, S. (2015). Setting healthcare priorities: A description and evaluation of the budgeting and planning process in county hospitals in Kenya. *Health Policy and Planning*, 30(3), 347-355.
- Buchan, J., Dhillon, I., & Campbell, J. (2017). Health, Employment, and Economic Growth. (J. Buchan, I. Dhillon, & J. Campbell, Eds.). Geneva: World Health Organization.
- Buchan, J., Duffield, C., & Jordan, A. (2018). "Skill Mix in the Health Workforce: Reviewing the Evidence." *International Journal of Nursing Studies*, 80, 1-12.
- Campbell J. P. (1990). *Modeling the Performance Prediction Problem in Industrial Organizational Psychology*. *Handbook of Industrial and Organizational Psychology*, 1, 687-732,
- Chan, C. W., Wong, F. K., Cheung, M. Y., & Lee, R. L. (2013). Using narrative inquiry and ethnography to understand the impact of continuing education on practice: A study of community nurses working with clients with dementia in Hong Kong. *Nurse Education Today*, 33(7), 714-719.
- Chenevert, D., Jourdain, G., & Tremblay, M. (2013). The influence of human resource management practices on performance: A study in a health care organization. *International Journal of Human Resource Management*, 24(7), 1426-1445.

- Chenevert, D., Jourdain, G., Cole, N., & Banville, B. (2013). The role of human resource management practices in predicting organizational commitment and turnover intention in the public sector. *International Journal of Human Resource Management*, 24(28), 4193–4215.
- Clark, R. E. (2003). Fostering the Work Motivation of Individuals and Teams. *Performance Improvement*, 42(3), 21-29,
- Cohen, J. I., & Tal, S. (2019). *Factors Influencing Job Retention in Nursing: A Comparison of Public and Private Hospitals*. *Nursing Outlook*, 67(1), 42-50.
- Cohen, R. J., & Swerdlik, M. E. (2005). *Psychological testing and assessment: An introduction to tests and measurement* (6th ed.). New York: McGraw-Hill.
- County Government of Kiambu. (2016). *Kiambu County Health Magazine*, (001).
County Government of Kiambu. (2018). *County Fiscal Strategy Paper: Transforming Kiambu*. Kiambu.
- Dhurup, M., Zyl, V., & Mokhathi, M. (2014). Factors Influencing Job Satisfaction and Their Relationship with Career Development Among Nursing Staff in a Public Hospital in South Africa. *Mediterranean Journal of Social Sciences*, 5(13).
- Edrak, B.C. Yin-Fah, B. Gharleghi & T.K. Seng (2013). The Effectiveness of Intrinsic and Extrinsic Motivations: A Study of Malaysian Amway Company's Direct Sales Forces. *International Journal of Business and Social Science*, 4(9), 96-103.
- Gichuru, E. K. (2014). *Influence of compensation on job satisfaction among health care workers under the Economic Stimulus Programme and the Public Service Commission in Isiolo County, Kenya*. University of Nairobi
- Gichuru, L. W. (2014). *Factors influencing job satisfaction among health workers under the Economic Stimulus Programme in Isiolo County, Kenya* (Unpublished master's thesis). University of Nairobi.
- Gichuru, P. (2014). Compensation Strategies and Job Retention Among Health Workers in Kenya: A Case Study of Isiolo County. *Journal of Human Resources Management*, 5(2), 45-56.
- Hancock, P. A. (2017). *Mind, machine, and morality: Toward a philosophy of human technology symbiosis*. CRC Press.
- Hayes, L. J., O'Brien-Pallas, L., Duffield, C., Shamian, J., Buchan, J., Hughes, F., ... & North, N. (2012). Nurse turnover: A literature review – An update. *International Journal of Nursing Studies*, 49(7), 887–905.
- Hossain, M. & Hossain, A. (2012). Factors Affecting Employees' Motivation in the Fast Food Industry: The Case of KFC UK LTD. *Research Journal of Economics, Business and ICT*, 5, 21-30,
- Irimu, G., Ogero, M., Mbevi, G., Kariuki, C., Gathara, D., Akech, S., & English, M. (2018). *Tackling health professionals' strikes: an essential part of strengthening Kenya's health system*. *BMJ Global Health*, 3, 1–5.
- Kasser, T., & Ryan, R. M. (1996). *Further examining the American dream: Differential correlates of intrinsic and extrinsic goals*. *Personality and Social Psychology Bulletin*, 22(3), 280-287.

- Kenya National Bureau of Statistics. (2015). *County statistical abstract, Kiambu County 2015*. Nairobi: Government Printers. Kenya National Bureau of Statistics. (2019).
- Kumar, R. (2014). *Research Methodology: A Step-by-Step Guide for Beginners* (4th ed.). SAGE Publications.
- Lindqvist, R., & Lundgren, A. (2019). The Nursing Workforce in Europe: A Cross-National Comparison of the Nursing Workforce Supply and Demand. *BMC Nursing*, 18(1), 29.
- Liu, J., & Wang, Y. (2020). The Transition of China's Healthcare System: Challenges and Opportunities. *Health Policy and Planning*, 35(4), 453-459.
- Mbindyo, P., Blaauw, D., & English, M. (2013). The role of clinical officers in the Kenyan health system: A question of impact and sustainability. *Human Resources for Health*, 11, 32.
- Mbindyo, P., Gilson, L., & Blaauw, D. (2013). A Review of the Evidence on Human Resources for Health in the East African Community. *BMC Health Services Research*, 13(1), 1-11.
- Mbindyo, P., Gilson, L., Blaauw, D., & English, M. (2009). Contextual influences on health worker motivation in district hospitals in Kenya. *Implementation Science*, 4, 43.
- Morgan, J. C., Dill, J., & Kalleberg, A. L. (2013). *The quality of healthcare jobs: can intrinsic rewards compensate for low extrinsic rewards?* *Work, Employment and Society*, 27(5), 802–822.
- Mugenda, O. M., & Mugenda, A. G. (2003). *Research Methods: Quantitative and Qualitative Approaches*. Nairobi: African Centre for Technology Studies.
- Mugenda, O. M., & Mugenda, A. G. (2003). *Research Methods: Quantitative and Qualitative Approaches*. Acts Press.
- Mugo, P., Onsomu, E., Munga, B., Nafula, N., Mbithi, J., & Owino, E. (2018). *An Assessment of Healthcare Delivery in Kenya under the Devolved System: An Assessment of Healthcare Delivery* (Special Paper No. 19/2018). Nairobi.
- Muguongo, M. M., Muguna, A. T., & Muriithi, D. K. (2015). Effects of Compensation on Job Satisfaction among Secondary School Teachers in Maara Sub-County of Tharaka Nithi County, Kenya. *Journal of Human Resource Management*, 3(6), 47–59.
- Ngure, P., & Waiganjo, E. (2017). Factors influencing retention of health workers in the public health sector in Kenya: A case study of Kenyatta National Hospital. *International Journal of Scientific and Research Publication*, 7(5), 818–846.
- Njanja, W. L., Maina, R. N., Kibet, L. K., & Njagi, K. (2013). Effect of Reward on Employee Performance: A Case of Kenya Power and Lighting Company Ltd., Nakuru, Kenya. *International Journal of Business and Management*, 8(21), 41–49.
- Ogotu, E. A., & Muturi, W. (2020). The Challenges of Retaining Health Workers in the Private Sector: A Case Study of Private Hospitals in East Africa. *Global Health Action*, 13(1), 1-9.

- Ojakaa, D., Olango, S., & Jarvis, J. (2014). *Factors affecting motivation and retention of primary health care workers in three disparate regions in Kenya*. *Human Resources for Health*, 12(33), 1–13. 67
- Ombima, A. (2014). *Factors Affecting Employee Job Satisfaction in Institutions of Higher Education in Kenya: A Case Study of United States International University (USIU)*. United States International University.
- Onyango, J., & Wanyoike, D. (2014). Effects of Training on Employee Performance: A Survey of Health Workers in Siaya County, Kenya. *European Journal of Material Sciences*, 1(1), 11–15.
- Pillay, R. (2018). Retention Strategies for the Nursing Workforce in South Africa: A Review. *International Nursing Review*, 65(1), 37-44.
- Ryan, R. M. & Deci, E. L. (2000). *Self-Determination theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being*. *American Psychologist*, 55(1):68- 78,
- Salisu, J. B., Chinyio, E., & Suresh, S. (2015). *The Impact of Compensation on the Job Satisfaction of Public Sector Construction Workers of Jigawa State, Nigeria*. *The Business and Management Review*, 6(4), 282–296.
- Sekhar, C., Patwardhan, M., & Singh, R. Kr. (2013). *A Literature review on motivation*. *Global Business Perspective*, 1, 471-487.
- Shields, M. A., & Ward, M. (2001). Improving nurse retention in the National Health Service in England: The impact of job satisfaction on intentions to quit. *Journal of Health Economics*, 20(5), 677–701. [https://doi.org/10.1016/S0167-6296\(01\)00092-3](https://doi.org/10.1016/S0167-6296(01)00092-3)
- Tenwek Hospital. (2024). *Human resource records on critical care nurse turnover, 2020–2024*. Tenwek Level Six Hospital.
- Thuita, G., & Oiye, Y. (2018). Compensation, Working Conditions, and Employee Satisfaction in Kilifi Export Processing Zones, Kenya. *International Journal of Economics, Business and Management Research*, 2(2), 2456–7760.
- United Nations. (2015). *Transforming our world: The 2030 agenda for sustainable development*. New York: United Nations Publication.
- Wamunyu, C. (2016). The Impact of Compensation on Job Satisfaction Among Nurses in Nakuru Level Five Hospital. *African Journal of Health Management*, 7(1), 20-31.
- Wamunyu, J. N. (2016). *Assessment of factors influencing job satisfaction among nurses at Nakuru Level Five Hospital, Kenya* (Unpublished master's thesis). Kenyatta University.
- Wamunyu, S. (2016). *Factors Influencing Health Workers' Job Satisfaction in Public Hospitals: A Case of Kiambu Level Four Hospital in Kiambu County, Kenya*. University of Nairobi:
- Wiskow, C. (2017). *The role of decent work in the health sector*. In *Health, Employment and Economic Growth: An Evidence Base*. Geneva: World Health Organization.
- World Health Organization. (2016). *Global strategy on human resources for health: Workforce 2030*. Geneva: World Health Organization.

Yaseen, A. (2013). Effect of Compensation Factors on Employee Satisfaction- A Study of Doctors' Dissatisfaction in Punjab. *International Journal of Human Resource Studies*.

APPENDICES

Appendix I: Consent Form

KABARAK UNIVERSITY RESEARCH ETHICS COMMITTEE

ADULT INFORMED CONSENT FORM (TEMPLATE)

(The form is written in the English language, but can be translated to Kiswahili or any other language.)

appropriate language)

Study Title: The Influence of Compensation Strategies on Job Retention Among Critical Care Nurses in Two Selected Public and Private Hospitals in Kenya

PI _____ Affiliated Institution _____

Co-investigator(s) _____ Affiliated Institution(s) _____

Introduction

You are invited to participate in this research study being undertaken by the above-listed investigators. This form will help you gather information about the survey so you can decide whether to participate voluntarily. You are encouraged to ask any questions regarding the research process, as well as any benefits or risks that you may accrue by participating. After you have been adequately informed about the study, you will be requested to either agree or decline to participate. Upon deciding to participate in the survey, you will be further asked to affirm that by appending your signature/thumbprint on this form. Accepting or declining to participate in this study does not in any way waive the following rights, which you're entitled to:

- a) Voluntary participation in the study;
- b) Withdrawing from the study at any time without the obligation of having to explain and
- c) Access to services that you're entitled to

A copy of this form will be provided to you for your own records.

Should I continue YES/NO _____

This study has been reviewed and approved by Kabarak University Research Ethics Committee (KUREC)

What is the Purpose of the Study?

The main reason(s) for conducting this study are to answer the following questions:

- 1.....
- 2.....
- 3.....

(To answer these research questions, you are requested to answer question(s) voluntarily and/or accept some procedures performed on you.)

Who can Take Part in the Study?

*Outline the inclusion and exclusion criteria.
Specify the sample size.*

In Case You Agree to Participate in the Study, What Will Happen?

This is what is going to happen once you have agreed to participate in the study:

First, include a statement about the time commitments of the research for the participant, including the study duration and, if relevant, follow-up.

.....
.....
.....
.....

Second, a qualified, well-trained interviewer will ask you questions in a private place where you feel comfortable. In case there is any question you feel uncomfortable responding to, you will not be coerced into responding. The questions will be on the following areas: (list the areas below)

.....
.....
.....

Third, after the interview, the following procedures will be done {detailed information on any procedures to be undertaken by the investigator(s)}

.....
.....
.....
.....

Lastly, you are requested to provide your contact details (phone number or another reliable contact method). This will help reach you in case new information regarding the study is available.

Emerges. Other reason(s) for requesting your contact details are)

.....
.....
.....
.....

The contact details you will provide shall remain confidential to the lead researcher (PI).

What Potential Risks are Associated with Participation in this Study?

Any research involving human subjects has the potential to impose several risks/harms or discomforts, including psychological, physical, emotional, environmental, and cultural.

The risks depend upon the nature and type of study and the interventions. State and explain the risk to the participant. Explain to the participant how this risk will be mitigated.

.....
.....
.....
.....

Privacy & Confidentiality

Privacy is the right of an individual to have some control over how his or her personal information/data is collected, used, and/or disclosed. Confidentiality is the duty to ensure information (data) is kept secret only to the extent possible/reasonable. *{Explain to the participants how privacy and confidentiality will be upheld. Explain to the participant*

any extra precautions, you will take to ensure safety and anonymity. How well data will be handled and after how long will the data be discarded and how the data will be discarded}

.....
.....
.....
.....

In case you aren't comfortable answering any of the questions during the interview because of feeling embarrassed or uncomfortable, it will be within your rights to decline. Otherwise every measure has been taken to ensure that the interview is conducted in a private area with minimal to no interference so that you feel comfortable.

In case of clinical procedures: You may experience some discomfort/pain after {State the procedure} _____. This may even cause some {state the effects of the procedure}

If at all you suffer any injury, illness, or complication(s) by participating in this study, kindly contact us immediately using the contact details provided at the bottom of this form. You will be attended to by the study clinician, and if further assessment or treatment is needed, you will be referred accordingly.

What Benefits are you going to accrue by participating in the study?

{Benefits may be divided into benefits to the individual, benefits to the community in which the individual resides, and benefits to society as a whole as a result of finding an answer to the research question. Mention those that will be actual benefits, not entitlements.

{Highlight the significance of the study}

.....
.....
.....
.....

What will it cost you to participate in the study?

{Will the participant incur any cost in order to participate in the study? Explain it clearly to the participant.

.....
.....
.....
.....
.....
Will any expenditure that you incur by participating in the study be refunded? Or will you be paid for participating in the study? *{Explain clearly to the participant whether or not they will be reimbursed}*

.....
.....
.....
.....
In case i have any further questions/ concerns in the future, whom should I contact?
In the event that you need further clarification or have questions regarding your continued participation in the study, feel free to contact the PI *{Provide the contacts of the PI}*. In case of concerns regarding your rights and/or obligations as a research participant, do not hesitate to contact the secretary, KUREC on *{KUREC contact}*

What Alternative Options are Available to Me?
The decision on whether to participate or not is absolutely voluntary. You will be free to withdraw from the study at any point during the study without providing any explanation.

How Will the Findings of this Study be Communicated or Shared?
{Provide a detailed plan of how feedback on the study findings will be given}

Statement of Consent
I have comprehensively read the consent form, or/the information has been comprehensively read to me by the researcher. I have understood what the study is about and all the questions and concerns that I had have been responded to in a clear and

concise. The study benefits and foreseeable risks have been explained to me. I totally understand that my decision to participate in this study is voluntary, and I have the right to withdraw at any point during the study.

I freely consent to participate in this study

Signing this form does not in any way imply that I have given up the rights I am entitled to as a participant. YES _____ NO _____

I agree to provide my contact details for follow-up. YES _____ NO _____

Appendix II: Questionnaires

Instructions

1. Please tick (√) the appropriate choice only.
2. Please respond to each item/question honestly. The information collected will be aimed at improving the competition, skills, and distribution.
3. Please note that the information collected will be treated with utmost confidentiality and is only for the purpose of this academic research.

Part A: General Information

Demographic Factors

1. Gender

Male { } Female { }

2. Age bracket

Above 20 years { }

More than 20 years { }

4. Level of education

Certificate { }

Diploma { }

Bachelor { }

Masters { }

PhD { }

5. Year (s) of experience in the health sector

Less than one year { }

1 - 5 years { }

6 - 10 years { }

above 10 years { }

6. In which hospital are you working?

Tenwek Level Six Hospital { }

Moi Teaching & Referral Hospital (MTRH) { }

PART B

Please indicate, using the scale, which of the following financial rewards are associated with job retention among critical care nurses in selected public and private hospitals in Kenya.

Scale: (1-strongly disagree, 2= disagree, 3= neutral, 4= Agree, 5= strongly agree(*Tick as appropriate*))

Financial Rewards		1	2	3	4	5
1	I believe that the financial rewards (salary and bonuses) I receive are competitive compared to similar positions in other healthcare institutions.					
2	Financial rewards, such as salary increases and performance-based bonuses, are important factors that influence my decision to stay in my current job.					
3	The availability of financial incentives, such as housing allowances or health insurance, positively impacts my job retention.					
4	I feel financially secure in my current position, and this contributes to my job satisfaction and retention.					
5	Opportunities for financial growth and advancement within the organization are essential for my long-term commitment to this hospital.					

PART C

Please indicate, using the scale, which of the following non-financial terms best describe job retention among critical care nurses in selected public and private hospitals in Kenya.

Scale: (1-strongly disagree, 2= disagree, 3= neutral, 4= Agree, 5= strongly agree(*Tick as appropriate*))

Non-financial terms		1	2	3	4	5
1	I am satisfied with the level of support and recognition I receive from my colleagues and superiors.					
2	I feel that I can maintain a healthy work-life balance in my current role.					
3	My work schedule allows me to meet my personal and family commitments.					
4	The organization supports initiatives to improve work-life balance for critical care nurses.					
5	I have access to relevant training and professional development opportunities.					

PART D

Please indicate, using the scale, which of the following working conditions are associated with job retention among critical care nurses in selected public and private hospitals in Kenya.

Scale: (1-strongly disagree, 2= disagree, 3= neutral, 4= Agree, 5= strongly agree(*Tick as appropriate*))

Working condition		1	2	3	4	5
1	My department provides all the equipment, supplies, and resources necessary for me to perform my duties.					
2	I am satisfied with the working relationships with people around me.					
3	I am satisfied with the hospital's working environment.					
4	I am satisfied with job security.					
5	I am satisfied with the organizational culture.					
6	I receive enough support from management.					

Part E: Job Retention

Please indicate, using the scale, which of the following job retention rates among critical care nurses in selected public and private hospitals in Kenya.

Scale: (1-strongly disagree, 2= disagree, 3= neutral, 4= Agree, 5= strongly agree(*Tick as appropriate*))

Job retention		1	2	3	4	5
1	I feel secure in my current position as a critical care nurse.					
2	I am satisfied with my current job as a critical care nurse.					
3	I am able to maintain a healthy work-life balance while working as a critical care nurse.					
4	I receive sufficient training to stay updated with the latest practices in critical care.					
5	I am satisfied with the salary and benefits provided for my role as a critical care nurse.					
6	The working conditions in my unit are safe and conducive to delivering quality care.					


Appendix III: NACOSTI Research Permit


REPUBLIC OF KENYA


NATIONAL COMMISSION FOR
SCIENCE, TECHNOLOGY & INNOVATION

Ref No: **101356** Date of Issue: **13/September/2025**

RESEARCH LICENSE



This is to Certify that Ms. JOANNE JEPTOO of Kabarak University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Bomet, Uasin-Gishu on the topic: The Influence of Compensation Strategies on Job Retention among Critical Care Nurses in Selected Public and Private Hospitals in Kenya. for the period ending : 13/September/2026.

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Appendix IV: Evidence of Conference Participation



Appendix V: List of Publication

East African Journal of Health and Science, Volume 8, Issue 3, 2025
Article DOI: <https://doi.org/10.37284/eajhs.8.3.3965>



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ORGANIZATION

Original Article

Influence of Financial Rewards on Job Retention among Critical Care Nurses in Selected Public and Private Hospitals in Kenya

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13 November 2025

Keywords:

Financial Rewards,
Job Retention,
Critical Care
Nurses,
Public Hospitals,
Private Hospitals.

Critical care nursing is a pivotal element in the provision of healthcare services. The presence of proficient critical care nurses is fundamental to achieving optimal patient outcomes. Nevertheless, most public and private hospitals in Kenya often face difficulties retaining qualified critical care nurses. These challenges have been attributed to many factors, chief among them being poor financial compensation. Therefore, this study assessed the influence of financial rewards on nurse retention in selected public and private hospitals in Kenya. The study focused on two prominent healthcare facilities: Tenwek Hospital, a private level six hospital in Bomet County, and Moi Teaching and Referral Hospital (MTRH) in Uasin Gishu County. It adopted a descriptive survey research design. The target population comprised 149 critical care nurses from the two hospitals. A census sampling approach was utilised due to the relatively small population size of 149 critical care nurses. The data for the study was collected using a structured questionnaire, whose response rate was 89.3% (133 questionnaires). Descriptive statistics, including frequencies, percentages and mean scores, were generated on the collected data using SPSS Version 28. Inferential statistics were used to examine the relationship between financial compensation and retention of critical care nurses. From the findings, financial rewards demonstrated a strong positive correlation with job retention ($r = 0.920$, $p < 0.01$), highlighting that adequate compensation plays a crucial role in influencing a nurse's decision to remain in their current role. Therefore, financial incentives such as competitive salaries and bonuses significantly motivated nurses to stay. Based on these conclusions, the study recommends that hospitals review and improve their compensation packages, incorporating regular salary reviews and performance-based incentives to boost retention.

APA CITATION

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