

INFLUENCE OF DIVERSITY RECRUITMENT PRACTICE ON THE PERFORMANCE OF LEVEL FIVE PRIVATE HOSPITALS IN NAIROBI, KENYA

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Abstract: *Diversity plays a crucial role in the performance of private hospitals especially in the ever-changing environment characterized by globalization, new technology, immigration, and new legislation. This study overall objective was to establish the influence of human resource diversity management practices on performance of level 5 Private Hospitals in Kenya with a specific objective of determining the influence of diversity recruitment practice on the performance of private healthcare in Kenya.*

Methodology: *The study adopted both qualitative and quantitative research approaches for data analysis. Specifically, it employed a census research design to collect data. The study covered a sample of 100 drawn from a population of 10 level five private hospitals in Nairobi, Kenya. The sample was selected through simple random sampling.*

Findings: *The literature on diversity recruitment revealed that performance in any Organization is driven by the excelling talents that enable an organization to reach out and embrace an increasingly diverse labour pool. The study found a strong positive correlation coefficient between performance of level five private hospitals in Kenya and diversity recruitment practice, as shown by correlation factor of 0.333, this strong relationship was found to be statistically significant as the significant value was 0.001 which is less than 0.05. The established relationship confirmed organisations attempt to increase its effort in attracting diverse workforce the more the organisation stood a better chance of improving in performance. Secondly, proper executed diversity recruitment practices resulted to more innovation and people bringing different ideas on board in turn resulted to higher performance*

Keywords: *Human Resource Diversity, Private Hospitals, Health Care Industry*

1. Local perspective of Human Resource Diversity Management Practices

The Kenyan constitution (2010) emphasizes of the right to equal opportunities in all spheres of life including political, cultural, economic, and social (Namachanja & Okibo, 2015). This empowered the employees from contrary human resource diversity management practices as it prevented discrimination against any person individual on any ground including race, sexmarital status, pregnancy, health status, origin, culture, colour, age, disability, ethics, social, religion, conscience, belief, dress, birth or language (Constitution of Kenya, 2010). Employers both in private and the public sectors were to abide by the provision of the constitution in regards to equal employment opportunity requirement. Organizations that have tapped into new markets, provided quality and comprehensive services, achieved stability and ensured succession had highly benefited

by restructuring their organizational culture and human resource diversity management practices in line to the provision of the constitution.

A study by Safaricom on what makes and breaks diversity found three critical points of leadership: Accountability, Passion for variety, and Sustained involvement. Leadership commitment in the entire organization on diversity issues was demonstrated by appointing diverse candidates at the top-level management, assigning duties, and responsibilities to the senior management team regarding diversity management. According to a research done by (Safaricom, 2012) Managers Accountability created sustained involvement to deliver workforce diversity result thereby causing leadership participation in diversity recommended as a development path. A study carried out on connecting corporate performance, and gender diversity shows that the group companies with the highest numbers of women in their top management teams achieve better financial performance than the group with lowest women's representation (Campbell, & Mínguez-Vera, 2008). A gender analysis of the Kenya health training institution found out that women made up 76% of the nursing profession and unfortunately men held 62% of the faculty positions, states WHO report (Alvarado & Keane 2006). In a second scenario data report from the Kenya medical practitioner and dentist board (KMPDB) showed that of the current retained 7475 doctors, 4437 are men 3138 are women, of the total 2284 specialists' only 696 are women. These cases were highly influenced by gender norms and job stereotype that affect the role women play, with a report titled human resources for health showing that occupations such as Nursing, Nutrition, community health extension work and Community health work, are perceived as female jobs whereas pharmacy and medical Doctor appears to be a male job (England, 2017).

The speed to change the board composition was a direct result of the trend toward corporate governance and human resource diversity, customer base, and other members affiliated to the organization. A broader range of leadership skills, work flexibility, perspectives and expertise, as well as and minorities among of directors (waiganjo, mukulu,& kahiri, 2012) However, despite having equal numbers of men and women graduates from medical or nursing school, only a small fraction of the female gender healthcare workers become medical leaders. Lesser diversity existed Whenever women got closer to the top. Typical positions that women got that reports to the CEO, they are usually as technical experts such as a chief of human resources officer, chief legal officer, or principal information's officer.

1. Organizational Performance

Performance encompasses the completion of a given task, which is measured against preset known weights of accuracy, completeness, cost, and speed (Borman & Motowidlo, 2000). It entails three specific spheres of firms outcomes; financial performance, shareholder return and product market performance. Organizations need to come up with a performance measurement system which comprises of a set of interrelated activities designed to enable management to determine, directly or indirectly, how an organizational system is performing. This will gauge if it is improving or deteriorating, in or out of control so that it will provide information in support of decisions and actions aimed at improving the performance of the system. Attaining an excellent health services needs a high standard of performance on a wide range of preset factors, including clinical care, patient satisfaction, cost control, and short waiting times, and learning from best practice elsewhere. Innovation and strive for excellence has made health care industry to realize that evaluating performance is far beyond financial measures, although a lot of the health care sector still find it challenging on how to use and derive result from the measurement.

2. Health Care Industry

Kenya's healthcare system has been split into three subsystems, the public sector, private sector, and faith-based organization sectors. The public health sector is the largest in terms of healthcare facilities, followed by the private sector then the religious organization. With 9,696 officially registered health facilities in the country. The Kenyan government spending on healthcare is approximately 6% of GDP (Wamai, 2009). Human Resource for Health (HRH) is being managed at the national level. Kenya has a high-level worker shortage, mostly affecting the rural areas. Most of the workers are being employed in the private sector in which the competition for doctors drives the costs of healthcare. Although Kenya is a frontrunner in the region in terms of economic and technical development, In terms of health financing, the country still only has a prepaid healthcare coverage of about 25%. The remaining 75% of the Kenyan population does not have the insurance cover. Kenya's health sector is growing faster at an expected rate greater than the overall economy. The sector is valued at USD 2.2 billion and it contributes 2% of our country's GDP. This growth is made possible factors such as: 6% increase in life expectancy in the last 10 years, 2.7% annual Population growth rate of (Cohen, 2003), by 2015 the country's GDP had grown economically at a rate of 6%, the reported increasing trends in communicable and non-communicable diseases, urbanization as well as awareness of preventative health care. An average of 10.8% compound annual growth rate is expected in 2019, which is valued at US\$3.1 billion

3. Private Hospitals

In the last 20 years, the private health sector in Kenya has shown significant growth and is one of the most developed and dynamic sector in Sub Saharan Africa (Mbanya, 2010). Factors that have led to immense growth in the sector are perceived to be poor quality in public health services, health sector reforms that eased the licensing and regulation of private healthcare providers, the introduction of user fees in the public facilities and allowing public sector staff to work in the private sector as well. Approximately 47% of the poorest group of Kenyans will seek treatment in private hospitals, and two-thirds of the money spent in the private sector is on health services rendered in hospitals. KES 20.7b is the size of the private healthcare market in Kenya estimated by the 2005/06 NHA (about USD 260 million), a conservative estimation due to the exclusion of health policy expenses and health education. Two-thirds of kes20.7b of the money spent in the private sector is on health services rendered in hospitals. The private sector owns and manages almost two-thirds of all Kenya's health facilities. The Private industry is the largest employer of healthcare professionals in Kenya (Rosen, 2007). Private sector hospital groups have discovered the importance of high level branded equipment for quality, and most hospitals have the latest, most expensive, medical devices. However, the Kenyan market is very price-oriented, whereby many players do not have the luxury to choose from a wide range of devices due to costing implications.

4. Statement of the Problem

Private hospitals plays a big role in our country's economy that advance healthcare provision, especially where our public healthcare services are wanting and they come in to help achieve the goal of ensuring the provision of equitable, affordable, accessible, and quality healthcare for all (Mohammad, 2013). Private Hospitals sector owns and manages almost two-thirds of all Kenya's health facilities and it is the leading employer of healthcare professionals in Kenya (Scorgie, 2013). Performance in any sector is a product of better relationships among a diverse workforce with minimal work grievances and complaints. A successfully addressed and embraced workforce diversity within the organization leads to a healthier and happier organizational culture with new talents emerging, improved customer service, revenue growth, and employee retention.

Private hospitals are more flexible in their processes thus giving it an upper hand in quick decision making in matters relating to employee: recruitment, training, organizational culture and other strategic goals. In relation to the above Private Hospitals in Kenya have a larger workforce as compared to the public sector who come from diverse backgrounds in terms of ethnicity, gender, disability, religion, and education just to mention a few. Nairobi County is known to be a business hub for East Africa and one of the biggest cities in Africa with a heterogeneous population. Level five Private hospitals in Nairobi serve a world-class patient which in itself serves as a challenge to ensure all the diverse patients are given timely and quality services. According to Kobia and Mohammed (2011) they identified lack of transparency, accountability, and failure to institute clear diversity management practices as the key issues challenging performance in the Kenya government agencies hospitals included. Within this framework, the diverse workforce in the workplace calls for optimal utilization of clear human resource diversity management practices to achieve the organization's performance (Kiura, 2010). The potential of private hospitals in Kenya lies in its diverse workforce and its performance depend on the utilization of human resource diversity management practices. The study, therefore, sought to investigate the influence of human resource diversity management practices on the performance of private hospitals in Nairobi Kenya.

5. Objectives of the Study

The study was guided by the objective: To determine the influence of diversity recruitment practice on the performance of private healthcare in Kenya.

6. Research Methodology

The study adopted both qualitative and quantitative research approaches for data analysis. Specifically, it employed a census research design to collect data. The study covered a sample of 100 drawn from a population of 10 level five private hospitals in Nairobi, Kenya. The sample was selected through simple random sampling. A semi-structured questionnaire was used to collect primary data. The collected data was analyzed using descriptive (percentage frequencies and mean) while inferential statistics was analyzed by (T-test, correlation and regression).

7. Research Findings And Discussion

Ethnicity Representation

Level five Private hospitals in Nairobi had a diverse work force when it came to their ethnic background largely attributed to its heterogeneous population and secondly the quest to provide quality services that matches that of the world class as they were serving patients from within and without the country. The results showed that 58% of the respondents were African, 18% were Indian, 10% Americans, 8 % Asians and 6% Somalis. As illustrated in figure 1 next page.

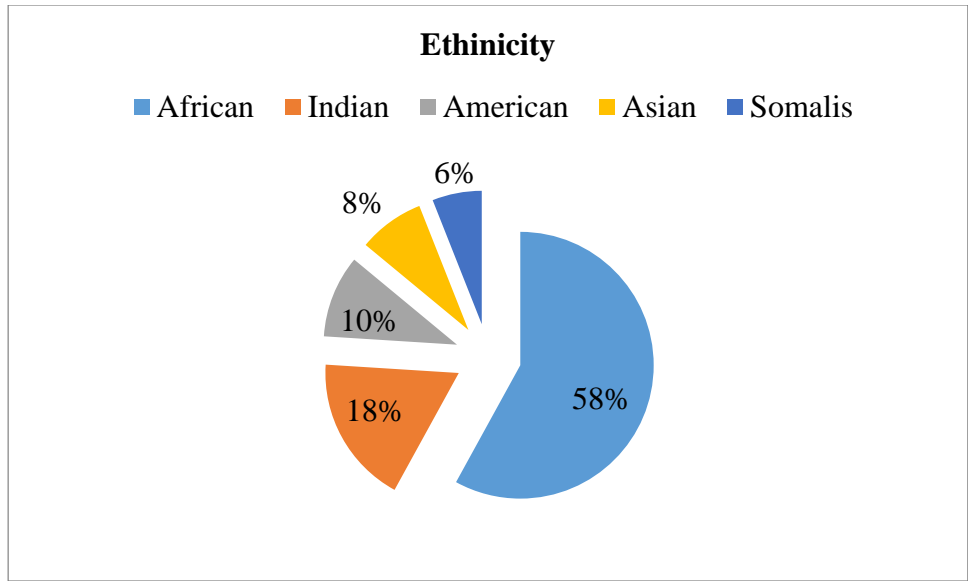


Figure 1: Ethnicity of the respondents

Diversity Recruitment

The respondents were given a set of statements regarding the influence of Diversity Recruitment on performance of level five private hospitals in Nairobi, Kenya. They were to rate them on a scale of 1 to 5, where 1 denoted strongly disagreed and 5 strongly agreed. The literature on diversity recruitment revealed that performance in any Organization is driven by the excelling talents that enable an organization to reach out and embrace an increasingly diverse labour pool (Joshi, 2002). According to the study, 81%, of the respondents agreed that diversity recruitment practices brought on board talented employees, 76% felt equal employment for all was adhered to In conclusion it was evident that this policy was agreeably implemented and was in line with what literature revealed that organizations should adopt recruitment policies and practices which are consistent with the guidelines on fair employment (Dimaggio & Powel, 2005).74% felt that one third gender rule was upheld and 81% of the respondent agreed that diverse recruitment models were used during interviewing process. However, when it came to diversity research study prior to determining new hires, only 21% of the respondents felt it was done, according to (Kirton et al., 2010) assert that organizations should allocate over 75% of time to research on diversity dynamics, market workforce trends to diagnose and improve their existing diversity recruitment campaign . A mean score of the responses for each statement was computed and the results are as presented in Table 1 next page. The mean scores were 1.86, 3.93, 3.86, 3.99 and 2.27. Since, the score for majority was above the score of 3 signified that the respondents agreed with statements regarding recruitment. Only one statement had 2.27 where majority the respondents were not in agreement.

Table 1: Diversity Recruitment practice

Statement	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Mean	Std. deviation
	F /%	F/%	F/ %	F /%	F /%		
Diversity recruitment practices brought on board talented employees	39	42	8	6	3	1.86	.975
Equal employment for all	35	41	10	8	6	3.93	1.139
One third gender rule	40	34	6	12	8	3.86	1.287
Use diversity recruitment models	33	48	8	7	4	3.99	1.030
Diversity research study done	7	14	5	34	40	2.27	1.270
Total	N=100						

Organizational Performance

The study also examined the performance of level five private hospitals in Nairobi, Kenya. The study conducted a comparative assessment of hospitals’ performance in the last five years of business. The performance indicators evaluated is quality of services.

Quality of Services

Quality of services was measured using quality certification by accredited bodies. The specific one used for this study was ISO certification; this index captured the increase in quality of services in level five private hospitals. If the hospital’s quality was less than the ISO standards it was deemed as very low thus given a score of 1, those that were working to achieve ISO were deemed as low and were given a score of 2, those that had ISO certification were deemed to have high quality thus given a score of 3 and finally those who had attained more than one certification on quality in addition to ISO were deemed to have very high standards thus given a score of 4. According to the data collected in regards to ISO certification 89% of the respondent reported that the quality of services was lower 5 years ago but currently 100% compliance to ISO certification had been achieved. In addition, 69% of the respondents confirmed that currently more than half of the private hospitals have additional quality certifications like SGS and some had JCIA in addition to the ISO certification. (See table 2 next page).

Table 2: Quality of services

Statement	5 Years ago		Currently	
	Frequency	Percentage	Frequency	Percentage
Very low	21	21%	0	0%
low	68	68%	0	0%
high	8	8%	31	31%
Very high	3	3%	69	69%
Total	=	100		

Correlation analysis

On the correlation of the study variables, the researcher conducted a Pearson moment correlation which was used to determine if there is a significant relationship, at 5% level of significance. As stated above if the significance value is less than 0.05 ($p < 0.05$) then it is considered statistically significant otherwise, the relationship is not statistically significant.

Table 3: Correlations

		Performance of private hospitals	level 5 Diversity practice	recruitment
Performance of level 5 private hospitals	Correlation Coefficient	1	.333**	
	Sig. (1-tailed)		.001	
	N	100	100	
Diversity recruitment practice	Correlation Coefficient	.333**	1	
	Sig. (1-tailed)	.001		
	N	100	100	

On the correlation of the study variable, the researcher conducted a Pearson moment correlation. from the finding in the table above, the study found a strong positive correlation coefficient between performance of level five private hospitals in Kenya and diversity recruitment practice, as shown by correlation factor of 0.333, this strong relationship was found to be statistically significant as the significant value was 0.001 which is less than 0.05, The findings concurs with study findings by Happle, (2010) advancing diversity goals through inclusion of diversity in recruitment was a key tool in managing organizations culture.

Summary of Findings

The purpose of this study was to establish the influence of human resource diversity management practices on performance of 10 level five private hospitals in Nairobi, Kenya. In particular the study sought to establish the influence of diversity recruitment practice.

According to the findings of this study, it was evident that diversity recruitment influenced organisational performance of level five Private hospitals in Nairobi, Kenya. Majority 81%, of the respondents agreed that diversity recruitment practices brought on board talented employees. The established relationship confirmed organisations attempt to increase its effort in attracting diverse workforce the more the organisation stood a better chance of improving in performance. Secondly, proper executed diversity recruitment practices resulted to more innovation and people bringing different ideas on board in turn resulted to higher performance. It was reported that 76% of the respondent felt equal employment for all was adhered to. During advertising the hospitals clearly indicated its commitment to this statement however, due to dominance of a certain gender in some area of specialization example Nursing had more of female applicants as compared to male and this automatically lead to recruiting more female than male. Similarly specialization such as sonography and radiology was male dominant and it lead to more male being recruited as compare to female.

According to the finding, 74% of the respondents felt that one third gender rule was upheld, the recruitment in health sector tend to neutralize itself when it came to this rule. According to the study most of the departments had almost balanced gender apart from those with dominance of one gender in the profession. The only challenge in regards to this rule was at the top management. Most of the top executive level management position were occupied by male with female counterparts being dominant in the post of chief nursing officer “matron” then when it came to those managing clinics the lady managers where more prevalent. Diverse recruitment models revealed that good diversity recruitment related practices were upheld. 81% of the respondent agreed that diverse recruitment models were used during interview process. This included; Interviewing tools having disability options and consideration in diversity interview questions. The findings also indicated that job advertisements were done to reach all the diverse groups. There was a positive correlation between Diversity recruitment and performance of level five private hospitals with a correlation coefficient of 0.333. Diversity recruitment is a strong practice in managing organization performance and this study has elaborated this clearly.

According to the findings of this study, it was concluded that there has been a high performance in level five private hospitals in Nairobi, Kenya. This was highly attributed to better Human Resource Diversity management practices. Private hospitals reported improved service quality, increased growth and stability, rapid market expansion and ensured succession planning. This performance is attributable to Diverse Recruitment practices, Diversity Training Practices, Diversity leadership commitment and diversity retention practices.

Based on the findings, it was evident that diversity recruitment practices had a significant influence on the private hospital performance. Diversity recruitment practices such as equal employment opportunities and one third gender rules played strategic roles in bringing on board the minority and satisfactorily acted as instruments to increase innovation and creativity. In addition having interview tools that covered all aspects of diversity helped private hospitals to excel in areas with unique needs. When recruitment is well handled it ensures right set of requirements in human capital that will enhance the achievement of the overall organizational performance and it offers a competitive advantage over others.

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