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The Role of Career Development Management on Health Sector Service Delivery in Devolved Units in the Western Kenya Region

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Abstract:

The reformation of the healthcare system in Kenya is anchored on the objectives of Articles 10, and 232 of the Constitution of Kenya promulgated on 27th August, 2010. However, these reforms have not achieved the envisioned results due to the transfer of functions to counties before building capacity at the county level to enable them to undertake the devolved functions effectively and efficiently, especially in the health sector despite the major policy, system, and infrastructural changes to 'fix' the health system to increase access, improve service delivery, reduce costs and increase accountability and improve responsiveness. The health sector in the county governments is still facing a myriad of challenges like delayed or lack of promotion, a severe shortage of staff in essential cadres, workers' strikes, and diminishing productivity among health workers. There is evidence of failure to provide sustainable access to quality and affordable healthcare occasioned by frequent strikes by HRH. Their major grievances have been lack of promotion and poor remuneration among cadres disrupting the only health system accessible to the poor majority. This informs the study's objective of assessing the influence of career development management on the health sector service delivery in devolved healthcare units in western Kenya. The study was anchored on Hertzberg's two-factor theory and agency theory. The study targeted a population of 3,547, and a sample size of 367 (201 HRH and 166 inpatients) was obtained based on the sample size determination table proposed by Krejcie and Morgan (1970) and Proportional allocation. Simple random sampling was used to obtain sample sizes for each stratum. Multi-stage, purposive and simple random sampling procedures were used to get the health facilities to participate in the study. Stratified cluster sampling, purposive and simple random sampling were used to include pre-described sample targets. Structured questionnaires were used to obtain data from the human resources for health and inpatients, whereas interview schedules were used to collect data from the in-charge of cadres. An explanatory research design was used. Data were analysed using descriptive and inferential statistics, which included correlational and Simple Linear Regression Analysis on SPSS (version 23). The results of the regression coefficient indicated that β = 0.108, t =0.966, p=0.000<0.05. It showed that career development management significantly influenced service delivery in the health sector in the devolved units. The study recommends that promotion decisions should be based on employee performance to encourage fairness. Adequate training opportunities be provided to all employees to prepare them to do their job efficiently. It proposes policies and frameworks for the welfare of health care workers and improves service delivery to the citizens of these counties. County governments should have a clear succession plan so that healthcare providers can align their productivity to their career goals and aspirations.

Keywords: Career development management, service delivery, public health sector, devolved Units, Human Resources for Health

1. Introduction

The Kenya public health sector is constantly implementing reforms by strengthening its systems to provide quality healthcare to the citizenry that is equitable, affordable, and of good quality (Ministry of Medical Services and Ministry of Public Health and Sanitation, 2012). Despite the above, it is still facing a myriad of challenges like:

- An acute shortage of staff in crucial cadres
- Poor pay among cadres

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- Delayed or lack of promotion
- Delayed salaries
- Diminishing productivity among health workers
- Underfunding
- Unequal distribution of health workers
- Poor work ethics
- Workers' strikes
- Leadership crisis and governance
- Poor working conditions and now
- The COVID-19 pandemic

These are the major impediments to quality and efficient service delivery (Gwaro & Owino, 2017; Lankeu & Maket, 2012; Ministry of Medical Services and Ministry of Public health and Sanitation, 2012; Waithaka et al., 2017). The level of adherence to sound HR practices has posed challenges for organizations (Maher & Bedawy, 2014). Lack of formal job classification was determined to have a negative impact on motivation as higher-level officers were transferred to inferior jobs, which demotivated staff (Maher et al., 2015). In Mauritius, it was determined that the public sector is bogged down by bureaucratic red tape, inefficiency, and a complex network and guidelines but loyalty to the Mayor determined upward mobility in career growth and development (Ramgutty-Wong, 2014). This adversely affected the issues of motivation related to the career development of employees.

Ramgutty-Wong's (2014) study established that many employees in Mauritius are cynical that Performance Management System (PMS) improve their chances of career growth. Additionally, very few public institutions can use Performance management systems as a ground for employee training approaches, plans, and advancement resolutions. Performance appraisal forms are bulky and impractical, and there is a poor emphasis on commitment to performance management structure by the top management. Ramgutty-Wong (2014) concludes that performance management systems 'seem to fall foul of their loft ideas.' Lack of employee development in any organization results in a career plateau, resulting in increased employee intention to quit (Ongori & Agolla, 2009) and a decline in productivity (Kwenin, 2013). Kenya's public service has been grappling with corruption, poor service delivery, ineptitude, lack of transparency, and ethnicity that is manifested in recruitment and provision of training opportunities and accountability (Lankeu & Maket, 2012). They conclude that for Kenya's public service to command trust and respect, there is a need for a clean and more efficient operation of the government. This impetus for organizations to strengthen their relationships with their employees by investing in their development, as employees who benefit from their organization's training and development programs have a high propensity to commitment and loyalty to their organizations (Kwenin, 2013).

2. Statement of the Problem

Accessing efficient health services from healthcare institutions is anchored on the type of HRM functions within the health ministry, county and sub-counties, devolved HR structures, and policies. Thus, it is linked to career development for healthcare workers. Between 2010 and 2017, there were 6 strikes involving multiple cadres of human resources for health (HRH), which lasted for months. The more serious one was the 100-day doctors' strike in 2017 and the 150-day nurses' strike the same year, resulting in the loss of lives of public members (Waithaka et al., 2017). Addressing these frequent disruptions directly begs for the diligence of HRM function in Kenya's Health sector functions. Lankeu *et al.* (2012) suggested that there is a need to initiate programs that inculcate the right attitudes and ethical standards among public health workers if they are to provide quality and efficient service delivery. According to Gilson *et al.* (2017), health systems are unstable due to a major break in public management traditions compounded with an autocratic attitude of some managers, staff shortage, and unclear policy imperatives. This article explored the role of HRM on service delivery in the health sector, particularly in the Western part of Kenya, where the local communities experienced poor health service delivery. The research focused specifically on Siaya and Bungoma, both in the Western part of Kenya.

3. Research Objective

The study aimed to assess the influence of career development management on health sector service delivery in devolved units in the Western Kenya region.

3.1. Research Hypothesis

The study was guided by the following null hypothesis:

• H_{01:} Career development management has no significant influence on health sector service delivery in devolved units in the Western Kenya region.

4. Literature Review

4.1. Career Development Management

According to Fieldman *et al.* (2004), career development is an endless process of building an employee's vocation that entails moving to higher occupational obligations and preparing new aptitudes for professional growth. It involves career goal advancement, professional ability development, promotion, and speed of remunerating growth (Weng, 2012). Blau (1998) defines it as the career advancement process based on experience in a specific field of interest, achievement at each development, and educational accomplishment that involves learning, developing employees, and mentoring them to

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ensure that they direct their career path in an organization. It is a sequence of activities or the continuing process of developing one's career. It entails career goal advancement, development of professional ability, speed of promotion, and remuneration progression (Weng *et al.*, 2010, cited in Biswakarma, 2016).

Savickas (2011) observed that the career of employees initially was the preserve of an organization. However, today employees steer their careers. It is worth noting that younger generations emphasize career development and tend to leave organizations more easily, looking for better options. Tsui *et al.* (1997) opine that career development implies an individual's intention to leave. Therefore, organizations that provide mechanisms for employee career advancement create a common investment type of relationship with their employees, tying career development to important outcomes like organizational commitment (Weng *et al.*, 2012) and retention.

Conversely, a lack of employee development in any organization results in a career plateau, resulting in increased employee intention to quit (Ongori & Agolla, 2009) and a decline in productivity (Kwenin, 2013). Ongori et al. (2009) opine that many employees are caught in jobs that do not offer opportunities in terms of upward movement in organizations. They contend that it is the responsibility of HR professionals to manage career plateau in order to increase employee retention in their organizations and enhance performance. Employees become job seekers when they lack opportunities for career growth. Plateau employees have a higher labour turnover due to their desire to advance their careers in a different environment (Lee, 2003) and have a high propensity to quit their organization because of reduced opportunity for growth in their present organization (Yamamoto, 2006). This gives impetus for organizations to strengthen their relationships with their employees by investing in their development. This is because employees who benefit from their organization's training and development programs have a high propensity to be committed and loyal to their organizations (Kwenin, 2013). She further posits that educated and trained employees play a vital role in increasing production resulting in an unremitting competitive advantage for the organization. A good career development practice develops employees' capabilities to match contemporary workplace issues and provides learning and growth opportunities that improve employee commitment, motivation, and job satisfaction (Huselid, 1993).

Currently, an employee's career is not pegged to one organization as career switching, and job mobility are now common. Employees need to strike a balance between their need for career progression and their attitudes toward the organization (Biswakarma, 2016; Rousseau, 1998). Weng *et al.* (2010) allude that an employee's career development is a combination of both his/her efforts and the readiness of the institution and its ability to remunerate such effort. Weng *et al.* (2010) (as cited in Weng and McIroy, 2012) agree that organizations that have put in place mechanisms for career growth for their employees create a common investment kind of relationship with them. It nurtures future leaders within those organizations with the relevant abilities and experiences required for implementation strategies within an organization.

Hurwitz (1990) postulates that training helps to enhance the capabilities of employees for them to perform their job efficiently and effectively. In contrast, development is an ongoing set of activities intended to take an employee or the organization to the next level of performance to enable him/her to perform certain jobs or new responsibilities in the future. Since lifetime employment is no longer considered in organizations today unless employees are given opportunities for growth, they must train and develop their staff to enable them to meet their career needs and the organization's needs too. Career development can be used to nurture future leaders in organizations. To achieve these, organizations ought to develop and implement career development initiatives to ensure that employees are contented, engaged, and motivated. Career development is a tool to strengthen organizational capabilities. According to Foday (2014), most organizations are grappling with a lack of properly structured career development programs. However, those focused on improving performance ought to invest in the career development of their employees. He further observes that an employee's career development is intertwined with recruitment and selection, induction, performance management, learning, reward, and recognition which call for effective implementation. Organizations, therefore, ought to realize that every employee has career development needs, and it is vital that they (organizations) pay attention to and support career development as it improves performance and productivity.

The career development process entails providing opportunities for development and learning by the employer to the employees as they steer their career path, ensuring a highly skilled and effective workforce that has the requisite knowledge for executing their duties (Foday, 2014).

According to Foday (2014), organizations are alive to the fact that they cannot achieve their bottom line if they do not develop and implement programs that aim at ensuring employee satisfaction, motivation, and engagement. Career development, apart from motivating employees, influences employee retention. Employers must implore their employees to enhance not only job performance but the network as well. Provision of training and development opportunities hence becomes imperative for employee job performance. Biswakarma's (2016) study on Nepalese private commercial banks established the rate of promotion and remuneration progress as factors that impact employee turnover intentions. He further concludes that organizations ought to enhance the rate of promotion and remuneration progress of their employees for effectiveness and productivity. Kwenin (2003) established that career development opportunities significantly affect employee retention in organizations. Employees must strike a balance between their personal preferences and work and should make decisions on their careers based on prevailing circumstances and personal preferences. If employees have a match between their career and the job setting, they will experience high work satisfaction levels and organizational commitment and reduce the level of intentions to leave as opposed to those who have a mismatch (Clinton-Baker, (2013).

5. Methodology

The study used an explanatory research design since it sought to explain the relationship between the variables; career development management and service delivery. This is justified because it endeavored to elucidate the relationship between two or more aspects of a situation or phenomenon. The study adopted the constructivist philosophical approach. This was premised on the fact that employees from selected devolved units were targeted to respond to various qualitative questions aimed at explaining HRM practices and their influence on Service delivery in the health sector in devolved units of Bungoma and Siaya Counties in western Kenya. The target population was 1,892 Human Resource for Health (HRH) from the five cadres: medical officers, clinical officers, nurses, Pharmaceutical Technologists/Technicians, and Laboratory Technologists/Technicians from both counties participated in the study. The study also utilized a target population of 1,655, being inpatients aging 5. These consisted of 1,156 from Bungoma and 499 from Siaya Counties, respectively. The sample size determination was based on Krejcie and Morgan's (1970) sample size determination table (Krejcie & Morgan, 1970). Here proportional allocation was done to obtain samples from each stratum (medical officers, clinical officers, nurses, pharmaceutical technologists/technicians, and laboratory Technologists/technicians).

First, a multi-stage sampling technique was used to get the number of health facilities participating in the study. Here all the health facilities in each county were grouped according to the levels, and purposive and simple random sampling methods were used to get the health facilities that participated in the study. Then stratified sampling and cluster stratified sampling procedures were used to get the respondents (HRH) from each stratum. Krejcie and Morgan's (1970) method of determining sample size was used to calculate sample size, and proportional allocation was used to obtain samples from each stratum (medical officers, clinical officers, nurses, pharmaceutical technologists/technicians, and laboratory Technologists/technicians).

Purposive sampling was also used to get the health facilities from which patients who had been admitted to the County Referral Hospitals in the two counties participated in the study. The researcher focused on inpatients attended to in the County Referral hospitals in the two counties only within a specified period because a large number of patients attended to in these facilities and due to the rising cases of COVID-19 positivity rate in the country at that time that led to restrictive containment protocols from the Ministry of Health. Based on proportionate stratified sampling using Krejcie & Morgan's (1970) sampling table, the sample size is given as follows in the table below:

SN	County	Cadre of Staff	N	S	Proportional Allocation for Each Cadre (10% of N)
1	Bungoma	Medical Officers	76	63	8
		Clinical Officers	172	118	18
		Nurses	864	265	87
		Pharmaceutical Technologists	43	40	4
		Laboratory Technologists	104	80	11
		In charge of each cadre	5	5	5
		Sub Total	1,264	291	133
2	Siaya	Medical Officers	26	24	3
		Clinical Officers	72	59	7
		Nurses	485	214	49
		Pharmaceutical Technologists	13	10	1
		Laboratory Technologists	32	28	3
		In charge of each cadre	5	5	5
		Sub Total A	628	234	68
	Patients				
I	Bungoma	Inpatients with ages above 5	1,156	285	116
	Siaya	Inpatients aging above 5	499	214	50
	·	Sub Total B	1,655	313	166
		Grand Total	3,547	351	367

Table 1: Sample Size for Bungoma and Siaya County Governments
Using Krejcie and Morgan (1970) Sampling Table
Source: Data from the Office of the Directors of Health, Bungoma and
Siaya Counties and Kenya Health Information System, KHIS)

Here, N is the population and S is the target population.

Data was collected using both interview guides and interview schedules. A pilot study was undertaken on the following cadres, as indicated in table 2 below, in Busia County Referral Hospital to determine the reliability and validity of the research instruments. A simple random sampling procedure was used to get the inpatients to participate in the pilot study. The facility was chosen because Busia County was not covered in this study. The county's health sector also presents characteristics similar to those under study: Bungoma and Siaya. Due to the nature of the 5-point Likert scale used, the study adopted Cronbach's alpha coefficient to establish reliability. A minimum threshold of Cronbach's Alpha coefficient of 0.7 is acceptable to rely on the scale for further analysis (Gill et al., 2010).

Data collected was analyzed using both quantitative and qualitative methods and Statistical Package for Social Sciences (SPSS) version 23. Descriptive statistics studies the distribution of one variable. To test the hypothesis and the relationship between the independent and dependent variables, inferential statistics included:

- Simple linear regression to describe the relationship between the variables, career development, and service delivery,
- Multiple linear regression for testing the moderating variable (Campbell & Campbell, 2008), and
- Pearson Correlation Coefficient

6. Findings and Discussions

6.1. Descriptive Analysis for Career Development Management

A Likert scale of 1- 5 was adopted to indicate the extent of agreement with each item on career development management in the respondents' organization.

Here: 1-Strongly Disagree, 2-Disagree, 3-Neutral, 4-Agree, and 5-Strongly Agree.

The results are presented in table 2 below.

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strong	ly Agree	
This organization provides very	4	99	22	13	11		
good opportunities for promotion.	3%	66%	15%	9%	7%		
The process of promoting	7	91	17	23	12		
employees in this organization is	5%	61%	11%	15%	8%		
fair to all.							
Opportunities for promotion are	83	15	19	18	15		
offered equally to all employees.	55%	10%	13%	12%	10%		
Those who get additional	12	5	90	16	22		
qualifications are usually considered for promotion.	8%	3%	62%	11%	1	5%	
Only qualified and deserving	5	13	97	20	12		
employees get opportunities for promotion.	3%	9%	66%	14%	8	3%	
There is a clear succession plan in	4	85	30	17	15		
this organization.	3%	56%	20%	11%	10%		
Employees are adequately and	9	89	19	19		13	
properly trained when their job	6%	60%	13%	13%	9%		
entails new tasks and responsibilities.							
My chances of being promoted in	12	90	21	16	10		
this organization are very high.	8%	60%	14%	11%	7%		
This institution provides	13	90	16	15	16		
adequate training opportunities	9%	60%	11%	10%	11%		
to prepare employees to do their job efficiently.							
The training opportunities	6	86	15	28		16	
provided suit my job needs.	4%	57%	10%	19%	11%		
I have been well equipped to	7	87	21	23	12		
handle more challenging work and situations better.	5%	58%	14%	15%	8%		
Employees who have a clear path	6	93	22	18	9		
for career growth tend to perform better.	4%	63%	15%	12%	6%		
I discuss my career aspirations	9	93	16	17	12		
with my supervisor.	6%	63%	11%	12%	8%		
Employees are advised and	11	84	16	22	16		
encouraged to be responsible for	7%	56%	11%	15%		1%	
their own personal growth and development.							
Average level of Career Development Management	Mean(%Mean)	Std. Dev.	Std. Err mea		Min Max		
	2.6508 (53%)	0.80960	0.065		1.29	5.00	

Table 2: Descriptive Analysis for Career Development Management

Source: Field Research, 2020

Generally, the level of career development management in the public health sector in the devolved units, on average, was at 53% (Mean=2.6508, Std. Dev. =0.80960), a low rating. This is an indication that there is a need for improvement in career development management in the devolved units as it tends to affect the health workers' morale towards service delivery. These results can be supported by the interview findings. The findings show that although most

of the key informants indicate that there is a training policy at their respective facilities, some disagreed that all employees have an equal opportunity for training. These findings are supported by Kirwa and Leting (2017), who established that the HRH in Bungoma County did not get access to training in their health facilities. These could be occasioned by the public health sector's limited training opportunities for HRH, making the demand for training slots high but insufficient capacity (Kiambati *et al.*, 2013). On their part, Weng *et al.* (2014) postulate that organizations that have provided mechanisms for their employee's career development create a common investment type of relationship with their staff tying career development to essential outcomes like organizational commitment and retention.

6.2. Correlation Analysis between Employee's Career Development Management and Health Sector Service Delivery in Devolved Unit in Western Kenya

The study determined the strength and direction of the relationship between career development and service delivery in the devolved units in the Western Kenya region. It was attained through Pearson Correlation analysis, and the results are indicated in table 3 below.

		Service Delivery	
Career Development	Pearson Correlation coefficient (r)	0.876**	
Management	Sig. (2-tailed)	0.000	
	N	151	

Table 3: Correlation Analysis Output between Employee Career Development, Management and Health Sector Service Delivery in Devolved Units

From the results in table 3 above, the career development management variable had a significantly strong positive relationship with the service delivery in devolved units in the Western Kenya region (r = 0.876 > 0.5, p = 0.000 < 0.05). A coefficient (r) between +0.5 and +1 or -0.5 and -1 indicates a strong relationship, as stated by Lyndsay (2009). Therefore, we conclude that career development management had a significantly strong positive relationship with the Health Sector service delivery in devolved units in the Western Kenya region.

6.3. Simple Linear Regression Analysis between Career Development Management and Health Sector Service Delivery in Devolved Unit in Western Kenya

Simple Linear Regression Analysis Model was used to assess the influence of career development management on health sector service delivery in devolved units in the Western Kenya region. The researcher pursued to test for the following hypothesis:

• H₀₁: Career development management has no significant influence on health sector service delivery in Devolved Units in the Western Kenya region.

The findings were as presented in table 4 below:

				Model	Summary			
Model R		R	R Square	Adjusted R	Std. Error of the Estimate			
				Square				
1		.876a						
a. Predictors: (Constant), Career Development Management								
b. Dependent Variable: Service Delivery (HR)								
ANOVA ^a								
Mod	Model Sum		of Squares	df	Mean Square	F		Sig.
1		Regression	78.303	1	78.303	492.752		.000b
		Residual	23.678	149	0.159			
	Total		101.981	150				
			a. Depe	endent Variabl	e: Service Delivery (HR)			
			b. Predictors: ((Constant), Cai	reer Development Manageme	ent		
				Coeff	icients ^a			
Model		Unst	andardized Coefficients		Standardized Coefficients	t		Sig.
			β		Beta			
1		(Constant)		0.108	0.112	0.966		0
		Career De	evelopment	0.898	0.04	0.876 22.198		0
		Mana	gement					
			a. Depe	endent Variabl	e: Service Delivery (HR)			

Table 4: Linear Regression Analysis Output between Career Development Management and Health Sector Service Delivery in Devolved Units

The outcome of the ANOVA test results, as shown in table 4, was F (1, 149) = 78.303, P = 0.000< 0.05. It signifies that the simple linear regression model was suitable for the study dataset. The model (career development management) managed to clarify 76.6% of the variation in service delivery in the health sector in devolved units, as revealed by the Adjusted R Square = 0.766, as shown in the model summary of table 4. The results of the regression coefficient indicated

that β = 0.108, t =0.966, p=0.000<0.05. The results also rejected the null hypothesis and concluded that career development management significantly influenced service delivery in the health sector in the devolved units. Career development management had a positive standardized beta coefficient = 0.876, as shown in the coefficients results in table 4. This signifies that a unit improvement in career development management was likely to improve the health sector service delivery in the devolved units by 87.6%. To predict the health sector service delivery in devolved units when given the level of career development management, the study adopted the use of the following model:

Health sector service delivery = 0.108 + 0.898 Career development management

According to these results, it is evident that career development management leads to improvement in service delivery in the public health sector in the devolved units in the Western Kenya region. A study by Kwenin (2013) supports the findings of this study. She established that work environment and career development opportunities are positively associated with employee retention. Her study employed a descriptive research survey design and was conducted in Ghana in Vodafone. Further, Muathe and Nyambane (2017) concur with the finding of this study. They established that strategic human resource management practices like career development management have not been fully exhausted and that employees' competence, output, and capability to meet deadlines are low. From the findings, it was observed that employers in the public health sector do not provide very good opportunities for the promotion of human resources for health and the process of promoting employees was not fair to all. A descriptive research design was conducted in Nairobi County on the Ministry of Health employees. It is further agreed by Ongori and Agolla (2009) that a lack of personal development in an organization leads to a career plateau which results in increased employee intention to quit causing a decline in productivity. They further assert that it is the responsibility of HR professionals to manage career plateau in order to increase employee retention in their organizations and enhance performance.

Kakui and Gachunga (2016), too, support the findings by postulating that the objective of career development management is to reduce the gap between present performance and anticipated future performance. Further, they opine that most staff in the public sector have trained yet remain stagnant with little evidence of career advancement, as observed by 60% of the respondents who disagreed that their chances of being promoted in the organization are high. The development of capacity and ability of employees, especially managers, have an impact on the efficacy, effectiveness, motivation, and viability of an organization (Kakui *et al.*, 2016). Having internal promotions create a feeling that career development provides good career progression opportunities that lead to the motivation of employees to remain in the public sector (Balaji, 2004, as cited by Kakui and Gachauga, 2016). However, lack of advancement after training is still a great challenge, and the hindrances to career development are not yet well-known (Kakui *et al.*, 2016). Hence, organizations need to come up with ways of developing their employees for efficient service delivery. The findings of this study are anchored on the Resource Based Review theory. The theory proposes the need to:

- Train the resources from within the organizations to ensure they create a competitive advantage,
- Train the managers to make a deliberate effort to identify, understand, and classify core competencies of an organization, and
- Focus on developing and nurturing organizational learning and maintaining resources for effective service delivery

He concludes by indicating that RBV is a lens through which organizations are to nurture and develop their human resource to gain a competitive advantage.

7. Conclusion

The null hypothesis that career development management does not influence health sector service delivery was rejected. Consequently, the study concludes that career development management significantly influences health sector service delivery in the devolved units.

8. Recommendations

The results uncover the challenges of career development management in the public health sector in the devolved units and propose policies and frameworks to improve career development management of health care workers and, at the same time, improve service delivery to the citizens of this country.

Devolved units in Western Kenya should ensure that there is a policy framework that regulates training, development, and promotion of HRH to ensure fairness in training and promotion of the human resource for health to enhance efficiency and effectiveness in service delivery in the public health sector.

County governments should have a clear succession plan. This will help healthcare providers be aware of the career path they can follow and align their productivity to their career goals and aspirations.

Further, this study recommends that promotion decisions should be based on employee performance to encourage fairness and consistency in the training and promotion of human resources for health in the public health sector and develop the skills and capabilities of healthcare workers.

Managers in the health sector in County Governments should ensure that they embrace good career development management practices that will stimulate the performance of the health care providers to upscale their services and meet the expectations of the citizenry.

9. References

- i. Bartol, K. M., & Martin, D. C. (1998). Management: International Edition (3rd ed.). McGraw-Hill.
- ii. Blau, G., (1998). Further Exploring the Meaning and Management of Career Commitment. Journal of Vocational Behavior, 32 (12) 284-297

- iii. Biswakarma, G., (2016). Organizational Career Growth and Employees Turnover Intentions: An empirical evidence from Nepalese Private Commercial Banks. International Academic Journal of Organizational Behavior and Human Resource Management Vol. 3, No. 2, pp. 10-26
- iv. Chipeta, E., Bradley, S., Chimwaza-Manda, W., & McAuliffe, E. (2016). Working relationships between obstetric care staff and their managers: A critical incident analysis. BMC Health Services Research, 16(1), 441. https://doi.org/10.1186/s12913-016-1694-x
- v. Clinton- Baker, M., (2013). The Relationship between Career Anchors, Organisational Commitment and Turnover Intention. Submitted in Accordance with the Requirements for the Degree of Master of Commerce in the Subject Industrial and Organisational Psychology at The University of South Africa
- vi. Colbert, B. A. (2004). The Complex Resource-Based View: Implications for Theory and Practice in Strategic Human Resource Management. The Academy of Management Review, 29(3), 341–358. https://doi.org/10.2307/20159047
- vii. Gberevbie, D. E. (2009). Personnel Recruitment and Retention Strategies in Lagos State Civil Service of Nigeria. African Research Review, 3(3).
- viii. GOK (2010) The Constitution of Kenya, 2010. National Council for Law Reporting.
- ix. GOK (2010) The County Governments' Act, 2012. National Council for Law Reporting.
- x. Fieldman, D.C., & Thomas, D.C. (2004). Career Management Issues Facing Expatriates. Journal of International Business, Vol.23 (2), 271-293.
- xi. Foday, A., (2014). Perceived Relationship between Career Development and Employee Retention at Deloitte Kenya. A Research Project Submitted in Partial Fulfillment of the Requirements for The Award of the Degree of Master of Business Administration, School of Business, University of Nairobi.
- xii. Gwaro, J., & Owino, J. (2017). An inquiry into industrial action among nurses in Kenya: A management problem or leadership failure? Baraton Interdisciplinary Research Journal, 7 (Special Issue), 1–5.
- xiii. Huselid, M., (1995). The impact of Human Resource Management Turnover, Productivity, and Corporate Financial Performance. Academy of Management Journal, 38. Management Journal, 40, pp. 1089-1121.
- xiv. Hurwitz, W, (1990). Notes on Intercultural Training and Development: Quarterly Journal of Career Development Practices 76(3)262-281
- xv. Jensen, M. C., & Meckling, W. H. (1976). Theory of the firm: Managerial behavior, agency costs, and ownership structure. Journal of Financial Economics, 3(4), 305–360. https://doi.org/10.1016/0304-405X(76)90026-X
- xvi. Kakui, I. M., and Gachunga, H., (2016) Effects of Career Development on Employee Performance in the Public Sector: A Case of National Cereals and Produce Board. The Strategic Journal of Business & Change Management. Vol. 3, pp 307-324,
- xvii. Kiambati, H., Kioo, C., and Toweett, J., (2013) Understanding the Labour Market of Human Resources for Health in Kenya. Working Paper. Technical Planning and Coordination, Ministry of Medical Services
- xviii. xxxiv. Krejcie, R. V., & Morgan, D. W. (1970). Determining sample size for research activities. Educational and Psychological Measurement, 30(3), 607–610.
- xix. Lankeu, M. R., & Maket J L. (2012). Towards A Results-Oriented Public Service in Kenya: The Modern Human Resource Management Perspective. International Journal of Business and Social Science, 3(21), 265–270.
- xx. Maher, A., & El Bedawy, R. (2014). Human Resources Management in Southeastern Asia's Local Government Case Study: Philippines and Thailand. International Journal of Recent Advances in Organizational Behavior and Decision Sciences, 1(2), 133–148.
- xxi. Ministry of Medical Services and Ministry of Public Health and Sanitation. (2012). Accelerating Attainment of Health Goals: The Kenya Health Sector Strategic and Investment Plan KHSSP July 2012 June 2017. Government Press.
- xxii. Muathe, M., A., and Nyambane, J., A., (2017) Strategic Human Resource Management Practices and Performance of Employees in the Ministry of Health, Nairobi City County, Kenya. International Journal for Innovation Education and Research Vol: 5 No-12, 2017
- xxiii. Ramgutty-Wong, A. (2014). The Future of Public Sector HRM in Mauritius from an Accountability Perspective. Open Journal of Social Sciences, 2(3), 55–63. https://doi.org/10.4236/jss.2014.23011
- xxiv. Ongori, H. and Agolla, J.E. (2009). Paradigm Shift in Managing Career Plateau in Organization: The Best Strategy to Minimize Employee Intention to Quit. African Journal of Business Management, 3(6), 268-271
- xxv. Kwenin, D., O., (2013). Relationship between Work Environment, Career Development Opportunities and Employee Retention in Vodafone Ghana Limited. Global Journal of Human Resource Management Vol.1, No. 4, pp. 1-9,
- xxvi. Gilson L, Barasa E, and Nxumalo N, (2017). Everyday Resilience in District Health Systems: Emerging Insights from the Front Lines in Kenya and South Africa. BMJ Global Health Vol.2
- xxvii. Savickas, M. L. (2011). New Questions for Vocational Psychology: Premises, Paradigms, and Practices. Journal of Career Assessment, 19 (3), pp. 251–258.
- xxviii. Tsui, A., Jone, L., Pearce, Leyman, W., P., J., Porter, L., & Tripoli, A., M., (1997). Alternative Approaches to the Employee–Organization Relationship: Does Investment in Employees Pay Off? Academy of Management Journal, Vol. 40, No.5, pp 1089 1121
- xxix. Weng, Q. X., & McElroy, J. C. (2012). Organization Career Growth, Affective Occupational Commitment, and Turnover Intentions. Journal of Vocational Behavior, 80(2), pp. 256–265