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Review article

Impact of HR retention strategies in healthcare: The case of Qatar

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ABSTRACT

Retention of healthcare workers is an international challenge. The World Health Organization (WHO) warned that in two decades, the shortage of healthcare workers will double. This puts a pressure on the policy makers to come up with serious HR interventions to retain their employees and ensure the delivery of high quality care. In Qatar, the healthcare sector depends greatly on expatriates. This unique characteristic imposes risk on the stability of the healthcare workforce. Therefore, the Qatar National Health Strategy (2011–2016) emphasises the importance of exercising effective HR retention strategies. This review tries to explain the relationship between the retention strategies and employees' satisfaction and performance and how they impact the quality of care as perceived by patients/clients.

Keywords: human resource management, retention strategies, job satisfaction, employees' performance, organizational commitment, quality of care

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BACKGROUND

Qatar is one of the richest countries in the world with one of the fastest growing economies. Qatar's GDP had a tremendous growth during 2004–2011 from USD 31.7 billion in 2004 to USD 88.2 billion in 2011 (Al-Jabor & Ucar, 2013). According to the Qatar General Secretariat for Development Planning (2011), Qatar invested huge amounts of money in developing the industrial and service sectors to enhance the quality of life in the country and to support the economy. Therefore, Qatar puts great emphasis on improving the quality of healthcare systems with a vision to become in a leading position in healthcare delivery. The Qatar National Health Strategy 2011–2016 stresses the need to attract skilled staff and to implement effective retention strategies in the healthcare sector (Qatar National Health Strategy 2011–2016, n.d.). Moreover, due to the demographic structure of the workforce in Qatar, the need to develop a local skilled workforce becomes a priority in order to ensure the sustainability of the workforce in all sectors.

Latino (2008) stated that: "The healthcare industry is a labour intensive sector in nature" (p. 8). Therefore, with the intensive competition on hiring skilled practitioners in the Gulf Cooperation Council (GCC), human resource management practices (retention strategies, employees satisfaction, career pathway development, etc.) is thought to play an integral role in enhancing the sustainability of the healthcare work force in the country. This paper aims to review the literature to examine two main propositions: firstly, practicing effective retention strategies will enhance the employees' satisfaction. Secondly, that there is a positive relationship between the level of employee satisfaction and employee performance and organizational commitment. Eventually, the paper presents baseline information for the healthcare institutions in Qatar to illustrate the impact of human resource management practices on the sustainability of the sector. Importantly, it is thought that the sustainable workforce in Qatar's healthcare sector will result in higher competitiveness and increased healthcare sector attractiveness, which will eventually help achieve its overarching goal of delivering a world-class level of heathcare.

The first section provides a background about the characteristics of the healthcare workforce in Qatar. The second section provides a literature support to the propositions.

HEALTHCARE WORKFORCE CHARACTERISTICS IN QATAR

The healthcare sector in Qatar depends greatly on expatriates. For instance, Hamad Medical Corporation (HMC) – the principal public healthcare provider for the State of Qatar – reported that its employees are mixture of 60 different nationalities (Hamad Medical Corporation, n.d.). Interestingly, according to the US Department of State, 2008 estimates, Qatar's ethnic makeup is: Qatari 20 %; other Arab 20%; Indian 20%; Nepali 13%; Filipino 10%; Pakistani 7%; Sri Lankan 5%; other: 5% (e.g., American, Canadian, various European, etc) (as cited in Gonzalez, Karoly, Constant, Salem, Goldman, 2008). Furthermore, Qatar has recorded the highest proportion of international migrants in the world in its national censuses; approximately 87% of the population is made up of expatriates (Migrant Labour in the Gulf- Summary report, 2011). This unique demographic structure has critical implications on labour-pool stability and sustainability in all sectors, and particularly in the healthcare sector. Therefore, there is a growing demand for a skilled local workforce, effective retention strategies, career pathway development strategies and workers satisfaction enhancement strategies, especially given that Qatar's healthcare sector is facing difficulties in recruiting and retaining skilled workers. (Qatar National Health Strategy 2011–2016, n.d.).

On the other hand, it is important to know that Qatar's expenditure on healthcare in 2012 was approximately 2.2% of GDP, compared to 2.8% of GDP in UAE, and 3.2% of GDP in KSA (The World Health Organization, n.d.). Furthermore, practicing medicine in Qatar, especially in the private sector, is not attractive financially for the majority of physicians. For instance, a General Practitioner (GP) in Qatar earns 0.85 times the GDP per capita while in the UK and Germany, the figure is 4.9 and 3.6, respectively (Qatar National Health Strategy 2011–2016, n.d.). Importantly, the Qatar National Health Strategy homepage has acknowledged that healthcare professionals are paid less compared to engineers and finance professionals, for example (Qatar National Health Strategy 2011–2016, n.d.). This may have a negative impact on Qatar's competitiveness in the healthcare labour market. In the same vein, Qatar General Secretariat for Development Planning (2011) stressed the need to expand the primary and preventive healthcare sectors. Qatar has only 1.9 primary care physicians for every 10, 000 people, which is far from the World Health Organization recommended level of 5.6. Therefore, Bener & Al Mazroei (2010) concluded that, despite the improvement in Qatar's healthcare system, Qatar still needs more healthcare workers in the primary healthcare sector. Accordingly, Qatar needs

to develop the capacity to offer competitive salaries in order to attract highly skilled professionals from around the world. Away from the financial perspectives, Qatar National Health Strategy 2011–2016 has also pointed to another difficulty which is related to the Human Resource (HR) law of 2009, limiting the professional development opportunities for expatriates (Qatar National Health Strategy 2011–2016, n.d.).

This could be linked to the short-term view of expatriate employment which results in minimal career progression, benefits, training, and professional development.

Hence, Qatar National Health Strategy 2011–2016 has emphasized the importance of developing a skilled national workforce in order to achieve the stability and longevity of the healthcare sector and to achieve the ultimate vision of becoming a comprehensive world-class healthcare system (Qatar National Health Strategy 2011–2016, n.d.). Further, it has recommended a set of new directions as follows:

- 1. Boost compensation levels to make healthcare more competitive specifically, for Qataris, to ensure competitiveness with other sectors in the country (e.g., financial services, energy).
- 2. Change HR laws to be more flexible, and simplify licensing procedures.
- 3. Develop clearly defined career structures and promotions linked to performance.
- 4. Furnish improved working environments, both aesthetically and in terms of staff services.
- 5. Ensure career progression opportunities for both Qataris and expatriate workers.
- 6. Initiate structured professional development programs for both Qataris and expatriate workers.
- 7. Shift the current short-term view of expatriate employment to a longer-term perspective, and provide benefits such as training and professional development,
- 8. Allow greater employment flexibility (e.g., permit part-time contracts).
- 9. Establish secondment agreements with local employers and international partners to gain access to highly skilled professionals (Qataris and expatriates).

Based on the literature review, we have concluded that there is limited research in Qatar to evaluate the effectiveness of the retention strategies, job satisfaction among both domestic and expatriate workers, work performance, organizational commitment and their relation with quality of service as perceived by customers. Also, there are no studies on salary comparisons among the different nationalities that make up the healthcare workforce and its implications on the stability of workforce in all sectors, particularly in the healthcare sector, which is a skilled, labour-intensive sector.

The following discussion will attempt to shed the light on some research that articulates the relationship between the variables that are thought to be determinants for having a sustainable healthcare labour-pool in Qatar (employees' retention strategies, employees' satisfaction, employees' performance, and organizational commitment). It is noticeable that research on these issues is very limited in this region of the world. Therefore, it was decided to review the previous research in different regions in the world and in different service sectors including the healthcare sector. Literature search was performed in PubMed, Ebsco, ProQuest and Google Scholar databases. Articles were selected based on their relevance to the topic.

RETENTION STRATEGIES

The shortage in human resources in the healthcare sector is a concern in many countries around the world. World Health Organization (WHO) warned that in 20 years the shortage of healthcare workforce will rise to 12.9 million workers all around the world. The number now stands at 7.2 million (The World Health Organization, n.d.). Therefore, retaining healthcare workers is a challenge for any healthcare organization. Many researchers have attempted to study factors that are associated with staff retention in the healthcare industry. Alameddine, Saleh, El-Jardali, Dimassi, & Mourad (2012). have conducted a cross-sectional study that surveyed 755 healthcare providers from 81 Primary Healthcare Centers (PHC) all around Lebanon in order to identify the level of burnout and likelihood to quit, as well as other factors that are significantly associated with staff retention at PHC centers in Lebanon. The study found that poor salaries, better job opportunities outside the country, and a lack of professional development are the top three reasons behind high turnover rates. Further, the study indicated that in spite of the retention initiatives in the Lebanese PHC system, the healthcare sector's workforce in Lebanon is unstable. Accordingly, the study suggested that particular attention should be dedicated to enhancing

care providers' satisfaction and sense of job security in order to stabilize the workforce and ensure its sustainability.

Employee expectations of their jobs have shifted over the past few decades. Izzo & Withers (2002) identified five key changes in workers' expectations. Employees want more balanced lives, partnership with their employers, opportunities for personal and professional growth, to be able to make a meaningful contribution to the world through their work, and have opportunities to socialize at work. The employees do not therefore focus merely on big salaries and healthcare organizations have to respond effectively to these changes in order to be able to retain their manpower and to gain a competitive advantage in the market place.

Furthermore, Belbin, Erwee & Wiesner (2012) explored the perceptions of 379 nurses, in Queensland Health-Australia, using a survey to assess their awareness of, participation in, and effectiveness of, 28 workforce retention strategies offered by Queensland Health. The aim of that study was to find if there is any aspect of these strategies that has a significant influence on the turnover intentions. Interestingly, nurses have ranked the strategies as most effective "strategies that are related to monetary advantages", to least effective "strategies that are related to professional development". However, the study revealed a significant relationship between the retention strategies and turnover intentions.

There is a debate about the effectiveness of monetary retention strategies on the turnover intentions among the employees. Some researchers have challenged the conventional wisdom that dissatisfied people leave and more money makes them stay. Mitchell, Holtom, Sablynski, & Erez (2001) argued that many reasons, other than money, make people stay in their organizations although they are dissatisfied, such as employees' attachment to an organization and their sense of fit of the job as well as the community. In some instances, like in Qatar, changing jobs is not a simple task. Labor law in Qatar dictates that all non-Qataris have to have a sponsor, who could be an organization or a person. Therefore, migration between jobs for non-Qataris is not easy compared to many other countries in the world because it requires the worker to obtain an approval from his/her sponsor to change the sponsorship. Accordingly, this unique situation may hold a risk of people staying in their jobs despite their dissatisfaction and it is thought to influence the quality of their service. Very importantly, in healthcare, quality of service correlates highly to patients/clients safety, so the risk may be higher if the employee is dissatisfied. Kaddourah, Khalidi, Abu-Shaheen & Al-Tannir (2013) supported their argument when they studied 178 nurses from different clinical settings in Saudi Arabia. This review attempts to explore all of these dimensions and to come up with recommendations to researchers and policy makers to improve the healthcare employees' retention, quality of service, and ultimately patient safety.

There is a huge financial burden on organizations which have high turnover rates. Barney (2002) estimated the cost of replacing a nurse in the USA to range between \$10,000 and \$145,000 depending on the type of job, work experience and clinical skills. Further, if the shortage of nurses is added to the difficulty to find a new qualified one, the cost will be increased. This is another reason for the healthcare organizations to work seriously on developing effective retention strategies that take into consideration all the aspects of turnover intentions, not only the financial ones.

Furthermore, over the years, researchers have identified many reasons for people to stay and to leave. Practically, there is a strong relationship between the satisfaction and retention. Leveck and Jones (1996), who studied nurses' perception from 50 nursing units in the southwest region in the USA, found that job satisfaction is a predictor of staff nurse retention. However, the availability of many job alternatives makes people leave (Mitchell et al., 2001). In other words, people who are satisfied with their payment, management, work environment and development opportunities, will stay. Nonetheless, people with same level of satisfaction are likely to leave given that there are other job alternatives.

Generally, plenty of retention strategies have been implemented in different sectors aiming to enhance the job satisfaction, to reduce the turnover rates and to maximize the organizational commitment. Ratna & Chawla (2012) studied key factors of retention and retention strategies in telecom sector in India and how these strategies affect the employees' satisfaction. They have identified ten key factors that play a significant role in retention as perceived by 107 employees in three leading telecommunication companies in India: training opportunities, consultation of the employees during target setting, compensation level, rewards and recognition, working conditions, job capability, ability to meet targets, plans to start their own business, satisfaction with the initiatives taken by HR, and participation in management. Ratna & Chawla (2012) found that in some companies,

the retention initiatives that are taken by the HR are not properly communicated with the employees. So, these strategies have failed to enhance the employees' satisfaction. Therefore, staff needs to be fully aware of these initiatives in order to evaluate their effectiveness and accordingly he/she leaves or stays.

Zontek, DuVernois & Ogle (2009) has indicated that the major issues regarding retention among Environmental Health professionals in North Carolina were inadequate or poor salary and limited opportunities for career advancement. There was a significant difference in salaries and career advancement opportunities between different regions in North Carolina which led to significant difference in the satisfaction levels accordingly. Interestingly, El-Jardali et al. (2013) who studied the relationship between the job satisfaction and the intention of nurses to stay in post in Jordan, Lebanon, Yemen and Qatar found that job satisfaction was significantly associated with intent to stay in all study countries

In conclusion, literature supports that there is a relationship between the retention interventions that are taken by the management or HR and the job satisfaction level among the employees. Therefore, the healthcare sector in Qatar needs to ensure the availability of serious retention interventions that are well communicated with the employees in order to enhance their job satisfaction and reduce their turnover intentions. Eventually, the healthcare sector in Qatar will be able to achieve the stability of its workforce and enhance the quality of care provided to the patients.

JOB SATISFACTION

Researchers have, over the years, provided more than one definition for job satisfaction. Spector (1997) defined job satisfaction as "the extent people like or dislike their jobs" (p. 2). On the other hand, Ooi, Bakar, Arumugam, Vellapan, & Loke (2007) defined job satisfaction as "an emotional reaction that results from the perception that one's job fulfils or allows the fulfilment of one's important job values, provided that it is to the degree that those values are congruent with one's needs" (as cited in Zarea, Negarandeh, Dehghan-Nayeri & Rezaei-Adaryani, 2009 p. 329). Bonache (2005) provided a more comprehensive definition, based on psycho-sociological perspectives. He defined job satisfaction as "an effective or emotional response towards various facets of one's job, and in which processes of social comparison take place" (p. 111).

More broadly, Bakhshi, Kumar & Rani (2009) defined job satisfaction as one of the commonly used variables in the description of organizational behaviour. "It is an employee's attitudinal response to his/her organization" (p. 27). Further, Bakhshi et al. (2009) characterized job satisfaction as an attitude consisting of evaluative, cognitive and affective components as follows:

1- The Evaluative Component:

This component denotes the employees' general response to the institute as "Like vs. Dislike" kind of esponse.

2- The Cognitive Component:

It is the employee's perceptions, thoughts, principles and expectations regarding the institute.

3- The Affective Component:

This component is characterized by the positive versus negative feelings such annoyance or happiness and the feeling of security or stress.

DETERMINANTS OF JOB SATISFACTION

Over the decades, researchers tried to determine the factors that lead to job satisfaction versus dissatisfaction. Foster (2000); Spector (1997); and Abdulla, Djebarni, & Mellahi (2011) divided the determinants of job satisfaction into two perspectives:

- 1. **Content perspective**: this category is related to needs fulfilment aspects. It assumes that all the individuals have the same set of needs and therefore it dictates the characteristics that ought to be in the work environment. Many theories such as Maslow's hierarchy of needs and motivator-hygiene theory proposed by Herzberg have handled the content perspectives in their research
- 2. **Cognitive process perspective**: this category de-emphasises the impact of needs fulfilments on the job satisfaction. Instead, the scholars in this field such as Victor Vroom assume that the employees can take conscious choices among many different alternatives to maximize their happiness. In other words, employees have different sets of goals and expectations about what

they are able to do, and the management is responsible to discover what training, supervision and resources the employees need.

However, researchers in both perspectives have determined a set of different factors related to job satisfaction which can be categorized into two main categories: demographic characteristics and work environment (Dhammika, Ahmad, & Sam, 2012; Abdulla et al., 2010; Crossman & Abou-Zaki, 2003; Lambert, Hogan, & Barton, 2001).

1. Demographic characteristics: gender, age, education level and work experience. The main assumption here is that job satisfaction is significantly influenced by demographic characteristics (Crossman & Abou-Zaki, 2003). For instance, Crossman & Abou-Zaki (2003), who surveyed more than 200 employees in nine commercial banks in Lebanon, found that female Lebanese employees have higher job satisfaction from fair pay than male employees. On the other hand, Male employees have more satisfaction from quality of supervision than female employees.

In contrary, Alkhalaf, Singh, Malallah, & al Jak (2009) surveyed 320 physicians in the primary healthcare sector in Qatar to determine if there is a significant correlation between participants' demographics and job satisfaction. Interestingly, the study found that job satisfaction level is low. But, there was no relationship between the participants' demographics and job satisfaction. This conclusion contradicts the first school that correlates the demographics of the employees with job satisfaction, suggesting that further studies are needed to clarify the reasons.

2. Work environment: In his book, Spector (2008) argued that work environment has a significant effect on the level of (dis)satisfaction of employees. Lambert et al. (2001) identified a number of important environmental factors that are thought to influence job satisfaction: salary level, communication, promotion opportunities, fairness of appraisal systems, and satisfaction with immediate supervisors and co-workers. For instance, Fogarty et al. (2014) concluded that there is positive correlation between job satisfaction and work environmental factors such as good salaries and training opportunities in Afghanistan's healthcare. However, the study found that there is no correlation between satisfaction and intention to stay in work.

In another path, many researchers studied the impact of financial and economic dimensions on job satisfaction levels. Ducharme, Singh, & Podolsky (2005) argued that pay satisfaction is a key indicator for job satisfaction. Nevertheless, in some work context where the proportion of expatriates is high, the satisfaction with payment is significantly influenced with the perception of equality (Bonache, 2005). According to Vidal, Valle, & Aragón (2007), who surveyed 81 Spanish repatriated managers, expats are paid higher salaries than domestic workers for the purpose of retaining them and to compensate them for working and living abroad. Elamin (2011), who studied the influence of nationality of managers (domestic or expatriate) on work satisfaction in the banking industry in the United Arab Emirates (UAE) on 82 bank employees, disputed that low levels of pay satisfaction lead to expatriates failure. In conclusion, Nationality based benefits and compensation is thought to have serious implications on the job satisfaction due to the expatriates feeling of unfairness (Vidal et al., 2007). In the UAE, although expatriate employees occupy a full range of private sectors jobs ranging from janitorial and other blue-collar jobs to highly specialized medical jobs, their salaries and pay are typically lower than UAE nationals (Elamin, 2011).

Also, in Qatar, it is thought that Qataris, in general, are paid higher than expatriates. Nevertheless, westerners (Americans, British, Canadians and some other western European countries) are paid higher salaries than other expatriates and even higher than Qataris in some fields. There is no empirical evidence to accept or to reject this claim. Therefore, another objective of this review is to come up with a clear understanding about salary differences, reasons behind it and what the implications on the retention of human resources are, particularly in the healthcare sector in Qatar.

On the other hand, some researchers hypothesised that organizational justice is an important determinant for job satisfaction. Organizational justice is defined by Suliman (2007) as "the degree to which employees perceive the overall organizational rules, procedures and policies that are related to their work to be fair" (p. 294). Although the relationship between the perceived organizational justice and job satisfaction has been studied thoroughly especially in the western context, there is a lack of evidence regarding the nature, significance and the strength of this relationship (Suliman, 2007). Interestingly, Suliman (2007) surveyed 1500 employees from 29 organizations in the UAE and found that the employees' perception of organizational justice influences their job satisfaction which in turn mediates the work performance level.

IOB SATISFACTION AND EMPLOYEE PERFORMANCE

In another aspect of this review, the relationship between job satisfaction, employees' performance and organizational commitment was studied heavily in the human resource management field. Organizations, of all types, are highly concerned with their employees' performance since it has a direct relationship with the overall organizational performance (Dhammika et al., 2012).

The relationship between the employee's satisfaction and employee's performance is still being examined, and there is no empirical evidence to prove the nature and the significance of this relationship (Crossman & Abou-Zaki, 2003). However, Dhammika et al. (2012), who surveyed the employees of 139 public sectors in Sri-Lanka, found that there is a significant dimensional relationship between the employee's satisfaction and employee's performance. Also, Suliman (2007) concluded that there is a significant positive correlation between the job satisfaction and employees performance. In other words, the higher the satisfaction level, the better the performance. Nonetheless, the critique to this finding is that the employees' performance is measured by the employees themselves who self-administer the study surveys in many of the studies where it is thought that the employees tend to over rate their performance quality (Crossman & Abou-Zaki, 2003). Therefore, further studies are needed to provide more objective methodologies to test the causal relationship between the job satisfaction and employees performance.

JOB SATISFACTION AND ORGANIZATIONAL COMMITMENT

Arnold (2005) defined the organizational commitment as "the degree to which an individual's actions contribute to an organization" (p. 625). On the other hand, Miller (2003) argued that organizational commitment is an employee's degree of identification with a specific organization and its goals. It is also the employee's desire to sustain a relationship and membership with this organization.

Researchers have differentiated between two types of organizational commitment:

- 1- Continuance commitment: when an individual believes that the cost of leaving the organization is expensive. It is hard for the employee to leave after considering the time spent in the organization in addition to the investment and sacrifice made to the organization (Dee, Henkin, & Singleton, 2006; Moss, McFarland, Ngu, & Kijowska, 2007). In some situations, like in Qatar, the hindrances to leaving the organization maybe legislative.
- 2- Psychological commitment: It is also called normative commitment: it refers to an individual in an organization having an energetic and highly positive feeling towards the organization, and such feelings include identification with an organization's goals and values, commitment to a job, and loyalty to an organization (Trimble, 2006). According to Singh & Pandey (2004), normative commitment refers to the commitment generated due to the fact that an employee psychologically feels i.e. his responsibility to continue his job.

Moreover, Becker, Randal, & Riegel (1995) gave three dimensions of organizational commitment: the first is a need to remain a member of a specific organization. Second is a willingness to apply effort on behalf of the organization, and the third is acceptability of the principles and goals of the organization.

According to Lu, While, & Barriball (2005), who conducted a comprehensive literature review about nurses job satisfaction, retention and recruitment of nurses have shown that low wages and poor job satisfaction are the primary reasons nurses leave their positions.

Furthermore, Malik, Nawab, Basharat, & Danish (2010) - who surveyed more than 600 university teachers in Pakistani public universities - found that employees' satisfaction has a positive significant influence on the organizational commitment. Moreover, Wu & Norman (2006) have explored the relationship between job satisfaction and organizational commitment in a sample of undergraduate Chinese nursing students. The results revealed a positive significant relationship between job satisfaction and organizational commitment. Similarly, Al-Aameri (2000), who surveyed 290 nurses from public hospitals in Saudi Arabia, found a strong positive correlation between job satisfaction and organizational commitment. Likewise, Bishop et al. (2008), who surveyed 255 Certified Nursing Assistants (CNA) in the nursing homes, found that the satisfied CNAs expressed higher levels of commitment to their jobs.

QUALITY OF SERVICE

Quality of service, in many studies, has been measured based on customers' perspectives. Accordingly, Ying & Cheng (2006) defined quality of service as "the evaluation of the service performance

consumers received according to whether it meets certain standards" (p. 212). Further, Parasuraman, Zeithaml, & Berry (1988) defined it as "the degree and direction of discrepancy between consumers' perceptions and expectations" (p. 17). In another aspect, Ying & Cheng (2006) concluded that customers don't evaluate service quality in terms of service attributes; rather, they tend to measure it by how much pleasure they have received from a service.

Quality of service has many determinants; so, researchers such as Mekoth, George, Dalvi, Rajanala, & Nizomadinov (2012); Malik (2012); and Pantouvakis & Bouranta (2013) have considered customer satisfaction as a predictor for quality of service. Ramez (2012) supported this when his study concluded that there is a strong positive relationship between the customer satisfaction and perceived quality of care among 235 Bahraini patients in different hospitals and medical centers in Bahrain. Also, Ying & Cheng (2006) concluded that the role of perceived service quality in customer satisfaction is established but the conditions under different dimensions of effect will or will not influence service quality evaluation and customer satisfaction. Moreover, Lee, Lee & Yoo (2000) proved that there is a significant relationship between the perceived quality of service and customer satisfaction. However, this paper proposes that the quality of care is an antecedent for customer satisfaction rather than vice versa.

Another dimension of studying the quality of service is the relationship between the job satisfaction and the perceived quality of service. Many researchers tried to identify the significance and the direction of the relationship between employees' satisfaction and quality of service. Eklof & Selivanova (2008) argued that although it is generally accepted that satisfied employees would support and enhance satisfaction among customers, there is no empirical evidence to support this. However, they found a strong correlation between staff satisfaction and customer satisfaction. Therefore, they recommended that improving staff satisfaction will positively influence the perceived quality of service and in turn the customer satisfaction. Further, Pantouvakis & Bouranta (2013) found that there is a significant relationship between the job satisfaction and customer satisfaction. The study has indicated that the job satisfaction is an antecedent for customer satisfaction. Moreover, Yoo and Park (2007) have concluded that the perceived service quality can be improved by treating employees rightly. This conclusion substantiates the causal relationship between the staff satisfaction and retention strategies with the perceived quality of service.

In healthcare, patients tend to relate the quality of service to the perceived quality of the clinical staff (Mekoth et al., 2012). This leads us to hypothesize that there is a relationship between the performance level and the perceived quality of care. In a different context, Ueltschy, Laroche, Eggert, & Bindi (2007) has concluded, while comparing the quality of service in both Japan and USA contexts, that high performance will lead to high customer satisfaction and high perceived service quality.

On the other hand, Singh (2000) found that with increasing burnout levels, the quality of frontline employees deteriorates significantly. Again, this leads us to further study the relationship between the staff satisfaction, performance, and retention initiatives with the quality of service. Furthermore, Husin, Chelladurai, & Musa (2012) found that Increased support at work, reward system, supervisory assistance, which are considered as retention strategies in the previous section, resulted in higher levels of Perceived Service Quality.

Researchers found a positive relationship between the quality of service and the level of organizational commitment among the employees. For example, Boshoff & Mels (1995), who studied a sample of 140 insurance salespeople, found that the organizational commitment of insurance salespeople exerts a strong, positive influence on their internal service quality. Furthermore, Bishop et al. (2008) found that the greater levels of job commitment among the CNAs in the nursing homes resulted in better care and better quality of life as perceived by a sample of 105 nursing house residents.

CONCLUSION

Based on literature review, this paper suggests that the retention strategies that are exercised by the human resource management departments in the healthcare sector may significantly improve the employees' job satisfaction. In turn, this may improve the employees' performance and their organizational commitment which ultimately play a crucial role in enhancing the service quality. Also, this paper recommends further empirical studies to investigate the validity of this proposition and how human resource practices will influence the stability of Qatar's healthcare sector.

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