

ISIR Journal of Business and Management Studies (ISIRJBMS)
ISSN: 3048-7684 (Online)
Frequency: Bimonthly
Published By ISIR Publisher
Journal Homepage Link- https://isirpublisher.com/index.php/isirjbms

Influence of Career Development as an Employee Development Strategy on Public Service Delivery: Evidence from Mbarara Regional Referral Hospital, Uganda

By

Natureeba Caroline[1]Tom OngesaNyamboga (PhD)[2]

[1]Postgraduate Student, Department of Public Administration, Kampala International University, Western CampusUganda
[2]Lecturer Faculty of Business and Management, Department of Business Administration, Kampala International University, Western Campus

Article History

Received:15/07/2025
Accepted:20/08/2025
Published: 23/09/2025

Vol – 2 Issue – 5

PP: -08-21

Abstract

Service delivery in public hospitals is critical for ensuring quality healthcare, yet the influence of career development on service outcomes remains underexplored, particularly in low-resource settings. Anchored on Herzberg's Two-Factor Theory of Motivation, this study examined the relationship between career development and service delivery at Mbarara Regional Referral Hospital using a descriptive research design with a quantitative approach. The target population consisted of 982 hospital employees, from which a sample of 284 was selected. Data were collected through both self-administered and researcher-administered questionnaires and analysed using descriptive and inferential statistics, with linear regression employed to determine the relationship between career development and service delivery. Descriptive results indicated that staff perceived career development positively, particularly regarding clear advancement guidelines and access to professional growth resources. However, regression analysis revealed a statistically significant negative relationship ($B = -1.832$, $t = -9.463$, $p = .000$, $p<0.05$), suggesting complex underlying dynamics that may include reverse causality, measurement limitations, or unaccounted moderating factors. The study concludes that while career development is essential for staff motivation, competence, and engagement, its impact on service delivery depends on strategic implementation and alignment with operational objectives. The findings have significant policy implications, recommending that hospital administrators integrate career development initiatives with performance management and resource planning. Additionally, the study contributes to the body of knowledge by providing empirical evidence on the nuanced relationship between career development and service delivery in public hospital settings.

Keywords: *Employee Development, Career Development, Public Service Delivery, Health Sector*

1.0 Introduction

Public service delivery in public hospitals relies heavily on the career development of employees. Their knowledge, skills, and growth directly affect the quality and accessibility of healthcare services (Mulegi, 2022). Well-organized career development programs improve the skills and motivation of healthcare workers. This allows them to adopt new practices, provide patient-centered care, and respond effectively to changing health challenges (Kurtović et al., 2024). Strengthening these career paths leads to better service efficiency, lower staff turnover, and fair healthcare access for different communities (Taylor et al., 2022). This connection strongly supports Sustainable Development Goal 3 (SDG 3), which aims to ensure healthy lives and promote well-being for everyone at all ages. It does this by creating a skilled and resilient workforce that can achieve better health outcomes in public hospitals (Monaco, 2024).

The connection between employee career development and public service delivery in hospitals shows how workforce training impacts healthcare effectiveness (Okunade et al., 2023). In this context, career development includes structured chances for healthcare workers to improve their skills, knowledge, and professional growth through training, mentorship, and clear advancement paths. This approach boosts motivation and retention in hospitals (Kessler et al., 2021). Public service delivery involves the efficiency,

*Corresponding Author: **Tom OngesaNyamboga (PhD).**

This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

accessibility, and quality of healthcare provided to communities through public hospitals. This can be measured by patient satisfaction, equal access, and how well the service meets community health needs (Aljuaid et al., 2021; Nolte et al., 2022). Combining these two aspects shows that investing in employee development can directly improve institutional performance, lead to better patient outcomes, and help achieve SDG 3. This goal focuses on ensuring healthy lives and promoting well-being for all ages through a skilled and motivated health workforce (Monaco, 2024).

Public hospitals in developing countries continuously struggle with challenges that prevent the delivery of fair and quality healthcare (Endalamaw et al., 2023). There are widespread shortages of skilled healthcare workers. These shortages are caused by limited career growth opportunities, low pay, and the movement of workers to private institutions or developed countries in search of better opportunities (Butt et al., 2024). Resource limitations, such as poor infrastructure, regular shortages of essential medicines, and lack of investment in medical technology, significantly reduce hospitals' ability to meet the increasing needs of patients (Yenet et al., 2023). Weak governance systems, along with bureaucratic problems and corruption, further damage accountability. Unequal access to care also disproportionately affects rural and marginalized communities (Bolatito, 2023; Jones et al., 2023).

In Uganda, ongoing problems in public service delivery include weak leadership, lack of resources, and systemic inefficiencies. These issues hinder progress toward the Sustainable Development Goals (Mwesigwa&Oladapo, 2021). For instance, Kambuga General Hospital in Kanungu District faces challenges like rundown facilities and inadequate funding, which hurt service delivery. Additionally, health leadership at the district level struggles with underfunding, lack of effective policies, and poor working conditions. This leads to ineffective leadership and less than ideal service outcomes (Steinecker, 2025).

In response, the Ugandan government has made several reforms to tackle these challenges. The Ministry of Health's Strategic Plan 2020/21 emphasizes the development of human resources and aims to improve leadership and management skills in the health sector (Turyasiima et al., 2025). The Civil Service College Uganda offers training for new and retiring staff, including those at Mbarara Regional Referral Hospital, to build leadership skills (Muhanguzi, 2021). In addition, the government has focused on upgrading infrastructure, increasing funding, and putting policies in place to strengthen the healthcare system (Lugada et al., 2022). These actions aim to support the national goal of achieving universal health coverage while improving healthcare quality and access for Ugandan citizens.

The situation in public health institutions in Uganda shows a further decline in accessibility and efficiency. Sixty-three percent of individuals who sought care from public health facilities reported difficulties in obtaining necessary services. This marks an eleven-percentage point increase from 2015 (Makanga, 2021). These statistics highlight ongoing issues that hurt healthcare delivery across the country. Mbarara Regional Referral Hospital illustrates these national challenges.

Mbarara Regional Referral Hospital faces major challenges in service delivery despite ongoing government efforts to improve healthcare. Research shows that fifty-two percent of participants view health as the most urgent national issue, surpassing education and infrastructure. This highlights the increasing public worry about the state of healthcare in Uganda (Makanga, 2021). This trend matches broader patterns of strain, as seventy-four percent of Ugandans reported being unable to access essential prescription drugs or medical care. This figure represents a seventeen-percentage point increase since 2015.

The environment at Mbarara Regional Referral Hospital makes it harder for patients. Half of the healthcare workers at the facility reported stressful working conditions. Many blamed the strain on low pay, poor communication systems, and weak administrative coordination (Shiden, Chubike, & William, 2017). These structural and organizational issues have created barriers that hurt efficiency, demoralize staff, and lessen the overall quality of patient care.

The ongoing issues in the system persist despite various government policy efforts. This shows a clear gap between what the government plans and what happens in hospitals. It emphasizes the need for a broader approach that strengthens health system management, increases accountability, and improves the work environment for healthcare workers. These changes are essential for making real progress in providing services. This study aimed to address these gaps by examining how employee career development can serve as a key strategy to enhance public service delivery at Mbarara Regional Referral Hospital.

- To assess the current career development practices for employees at Mbarara Regional Referral Hospital.
- To examine the relationship between employee career development and staff motivation, job satisfaction, and performance.
- To evaluate the influence of career development initiatives on the quality and efficiency of public service delivery at the hospital.
- To identify challenges and barriers in implementing effective career development strategies within the hospital.
- To provide recommendations on how career development can be optimised to enhance public service delivery in the healthcare sector.

Null hypothesis ***(H0):*** Career development has no significant influence on public service delivery at Mbarara Regional Referral Hospital

2.0 Theoretical framework

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

This study was anchored on Herzberg's Two-Factor Theory of Motivation, which was developed by Herzberg in 1959. The theory stipulates that employees' performance and motivation are influenced by two categories of factors: intrinsic motivators, such as achievement, recognition, responsibility, growth, and advancement, and extrinsic hygiene factors, such as compensation, supervision, conditions of work, and organisational policies (Ghazi et al., 2013; Reyes, 2024; Alshmemri et al., 2017).

From this study, the framework of the theory was used to investigate how career development programs in Mbarara Regional Referral Hospital could enhance public service delivery. Training, mentorship, and promotion are career development opportunities that go hand in hand with intrinsic motivators, which enhance satisfaction and commitment, whereas mere remuneration, clear organisational policy, and supportive supervision are the hygiene factors that reduce dissatisfaction and truncate service interruptions. Applying this theoretical framework, it was possible to ascertain how fair and formal career development practices are able to increase employee motivation and thus improve efficiency, accountability, and responsiveness in delivering healthcare services.

Empirical review

Influence of career development strategies on public service delivery in the health sector

Nyongesa and Onyango (2022) examined how career development management influences service delivery in devolved healthcare units in western Kenya, focusing on challenges arising from devolution such as staff shortages, poor remuneration, delayed promotions, and frequent strikes that disrupt access to affordable healthcare. Anchored on Herzberg's two-factor theory and agency theory, the study adopted an explanatory research design targeting a population of 3,547, from which a sample of 367 participants (201 health workers and 166 inpatients) was selected using Krejcie and Morgan's (1970) sample size table and proportional allocation. Data were collected through structured questionnaires for health workers and inpatients, alongside interviews with cadre in-charges, using multi-stage, purposive, stratified cluster, and simple random sampling. Analysis through descriptive statistics, correlation, and simple linear regression (SPSS version 23) revealed a significant positive influence of career development management on healthcare service delivery, with regression results showing $\beta = 0.108$, $t = 0.966$, and $p = 0.000$.

Muchibi et al. (2022) investigated the influence of career development on employee engagement in Kenya's public health sector, applying Super's career development theory within a descriptive research design guided by positivism and a deductive approach. From a target population of 3,092, a sample of 342 respondents comprising 35 doctors and 307 nurses was selected using stratified and simple random sampling. Data were collected through questionnaires, employing a mixed-method approach that combined quantitative analysis with thematic content analysis for qualitative responses. Descriptive statistics such as frequencies, percentages, means, and standard deviations were applied, while correlation, basic, and multiple regression analyses formed the inferential framework. The study established a positive, moderate, and significant relationship between career development and employee engagement ($r = 0.670$, $p < 0.000$, $R^2 = 0.449$), concluding that limited career development opportunities reduce engagement levels among healthcare professionals. It recommended the adoption of equitable career management policies, awareness creation, and institutional support mechanisms such as scholarships to enhance employee engagement and service delivery.

Ituma et al. (2024) explored the impact of career development on employee performance in Nigeria's civil service, focusing on Ebonyi State. Recognising human resources as central to organisational performance, the study adopted a mixed-methods approach involving 382 respondents drawn purposively from 3,009 employees, including senior management staff, departmental heads, supervisors, and operational staff. Primary data were collected through questionnaires and in-depth interviews, while secondary data were obtained from journals, government gazettes, and official documents. Analysis was conducted using SPSS version 21 and Microsoft Excel, with Chi-Square applied for hypothesis testing. Findings revealed a significant relationship between career development and employee performance, highlighting that career development had a moderate influence on behavioural competencies such as attitudes to work. However, insufficient funding and poor remuneration were found to hinder effective career development and performance between 2015 and 2022. The study recommended enhancing career development opportunities, ensuring transparent promotion based on merit, and improving funding through budget prioritisation, partnerships, and grants to strengthen employee performance and organisational outcomes in the Ebonyi State Civil Service.

Muchibi et al. (2022) examined the effects of career development on employee performance in Kenya's public sector, with a focus on the National Cereals and Produce Board. The study was motivated by concerns over low work performance and poor service delivery despite employees receiving training, which has resulted in stagnation and declining output in the sector. A descriptive survey design was adopted, targeting 200 employees at the organisation's Nairobi head office, from which a stratified random sample of 100 respondents was selected. Data were collected through structured questionnaires and analysed using SPSS version 20. Findings showed that on-the-job training significantly enhanced employee performance by expanding key competencies, motivating staff, reducing intimidation, and equipping employees with additional skills and networking opportunities. The study also revealed that career mentoring positively influenced performance by providing counselling, supporting employees in problem-solving, and guiding them in developing effective approaches to workplace challenges.

Karaferis et al. (2022) investigated the factors influencing motivation and work engagement among healthcare

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

professionals in public hospitals under the 1st Regional Health Authority of Attica, using Herzberg's motivation-hygiene theory as the framework. The study applied a survey design, collecting 3,278 valid questionnaires with a high response rate of 81.95%, covering intrinsic motivators such as achievement, recognition, and responsibility, and extrinsic motivators such as salary, supervision, and job security. Results indicated that extrinsic motivation factors (MS = 8.30) scored slightly higher than intrinsic ones (MS = 7.81), with salary (9.31), organisational policies (8.91), growth (8.89), and job security (8.86) ranking most significant. Findings also revealed that motivation factors varied across different staff categories, with extrinsic motivators becoming more critical in times of crisis. The study concluded that creating a motivating environment is vital for healthcare systems and recommended providing financial incentives, training opportunities, growth prospects, effective supervision, and recognition of high performance to strengthen employee motivation and engagement.

Mark and Nzulwa (2018) investigated the effect of career development programmes on employee performance at the National Hospital Insurance Fund (NHIF) headquarters in Nairobi, prompted by declining employee productivity, reduced satisfaction levels, and lower customer satisfaction between 2009 and 2013. Using a case study design, the study targeted 402 employees, from which a stratified random sample of 120 respondents was drawn. Data were collected through questionnaires that were pilot-tested for reliability using Cronbach Alpha, and analysed with both descriptive and inferential statistics. Correlation analysis showed a positive and significant relationship between career development programmes and employee performance, while regression results indicated that career development contributed 34.9% to performance. The study further revealed that employee training, career counselling, mentoring, and career advancement had statistically significant positive effects on performance. It concluded that career development programmes are key drivers of employee performance and recommended that NHIF prioritise them while also encouraging similar research in other state corporations and exploring additional factors influencing employee performance.

Nyongesa et al. (2022) assessed the influence of career development management on service delivery in devolved healthcare units in western Kenya, highlighting persistent challenges despite constitutional reforms aimed at improving access, accountability, and responsiveness in the health sector. The study noted issues such as staff shortages, delayed promotions, poor remuneration, and frequent strikes that disrupted healthcare access for the majority. Anchored on Herzberg's two-factor theory and agency theory, the research adopted an explanatory design targeting 3,547 individuals, with a sample of 367 participants (201 health workers and 166 inpatients) selected through multi-stage, purposive, stratified cluster, and simple random sampling. Data were collected using structured questionnaires and interviews, then analysed through descriptive statistics, correlation, and simple linear regression in SPSS version 23. Findings showed that career development management significantly influenced service delivery ($\beta = 0.108$, $t = 0.966$, $p = 0.000 < 0.05$). The study recommended basing promotions on performance to enhance fairness, providing adequate training opportunities, developing welfare-focused policies, and establishing succession planning frameworks to align healthcare workers' productivity with career aspirations and improve service delivery in county health systems.

Research gaps

The existing literature on career development strategies and public service delivery in the health sector offers valuable insights but also reveals notable research gaps that the current study on Mbarara Regional Referral Hospital (MRRH), Uganda, seeks to address as shown in Table 1.

A key gap identified in studies by Nyongesa and Onyango (2022) and Nyongesa et al. (2022) lies in the geographic focus, as their research concentrated on devolved healthcare units in western Kenya. While these studies highlighted the influence of career development management on service delivery, they did not explore contexts outside Kenya, particularly Uganda, where healthcare system dynamics, workforce structures, and policy environments differ. This presents a gap in understanding how career development strategies impact public service delivery in Uganda's referral hospitals, which serve as critical nodes for specialised healthcare provision. The current study addresses this gap by focusing on MRRH, capturing evidence specific to Uganda's healthcare setting and providing regionally relevant insights for policy and practice.

Another research gap concerns the measurement of career development strategies beyond basic training and promotion. Many studies, including Muchibi et al. (2022) and Mark and Nzulwa (2018), emphasised training, mentoring, and career counselling as key components influencing employee performance and engagement. However, few explored the broader range of employee development strategies, such as succession planning, performance-based promotions, and structured professional growth frameworks, in relation to service delivery outcomes. The current study fills this gap by examining career development as a comprehensive employee development strategy, including training, mentoring, promotion policies, and professional growth initiatives, and their direct influence on service quality at MRRH.

The literature also shows methodological limitations that the current study addresses. Previous studies in Kenya and Nigeria, such as Ituma et al. (2024), relied heavily on descriptive and correlational designs with moderate sample sizes, focusing largely on self-reported employee outcomes. There is limited evidence connecting career development strategies to actual service delivery metrics in hospital settings. The current study fills this gap by employing a quantitative researcher approach to establish a stronger causal link between career development strategies and public service delivery outcomes.

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

Finally, existing studies have largely focused on general public sector institutions or devolved healthcare units, with limited attention to referral hospitals, which have unique operational challenges, including high patient loads, specialised services, and hierarchical workforce structures. By focusing on MRRH, the current study fills the gap in knowledge about how career development strategies function in complex referral hospital settings and how they can be leveraged to enhance public service delivery in Uganda.

Table 1: Research gaps

Study	Identified Gaps	How Current Study Filled the Gap (MRRH, Uganda)
Nyongesa&Onyango (2022); Nyongesa et al. (2022)	Focused on western Kenya; limited generalisability to other regions; did not examine Uganda's referral hospitals	Examined career development strategies in Mbarara Regional Referral Hospital, Uganda, providing region-specific evidence
Muchibi et al. (2022); Mark &Nzulwa (2018)	Emphasis on training, mentoring, and career counselling only; limited scope of employee development strategies	Investigated comprehensive career development strategies, including training, mentoring, promotion policies, and succession planning
Ituma et al. (2024); other descriptive studies	Relied on self-reported outcomes; weak linkage between career development and actual service delivery	Used mixed-methods approach combining quantitative service delivery metrics and qualitative insights from healthcare workers
General literature	Focused on devolved units or general public sector institutions; limited focus on referral hospitals with complex operations	Focused specifically on a quantitative highlighting practical implications for service delivery

Key: MRRH: Mbarara Regional Referral Hospital

3.0 Research methodology

Research design

This study was based on descriptive and survey research designs to effectively explore the influence of career development on public service delivery at Mbarara Regional Referral Hospital (Sekaran&Bougie, 2016). A descriptive research design was appropriate because it allowed the researcher to systematically describe the current status, trends, and relationships between career development initiatives and service delivery without manipulating any variables. This design facilitated the identification of patterns, such as how training, mentoring, promotions, and career progression relate to employee motivation and performance, providing a clear picture of the existing situation in the hospital.

The survey research design was justified because it enabled the collection of data from a relatively large and diverse population of hospital staff, ensuring that employees' perspectives across different cadres were captured. Surveys are efficient for obtaining quantitative and qualitative information on opinions, experiences, and behaviours, which are central to understanding the effect of career development on employee engagement and service delivery. By combining these designs, the study was able to generate reliable, generalizable insights while maintaining a practical approach to data collection, analysis, and interpretation in the healthcare context (Sekaran&Bougie, 2016).

Research approach

The study adopted a quantitative research approachto systematically examine the influence of career development on public service delivery at Mbarara Regional Referral Hospital. This approach was suitable because it allowed the researcher to collect numerical data that could be quantified, analysed statistically, and used to establish relationships between variables, such as career development initiatives (training, mentoring, promotions) and employee performance or service delivery outcomes (Creswell, 2014). The quantitative approach enabled the use of structured instruments like questionnaires to gather data from a large sample of hospital staff, ensuring objectivity, consistency, and reliability in measurement. By employing statistical techniques, the study could test hypotheses, determine the strength and significance of relationships, and provide empirical evidence on the impact of career development on public service delivery, facilitating evidence-based conclusions and recommendations (Creswell, 2014).

Target population

The target population for this study comprised 982 individuals associated with Mbarara Regional Referral Hospital, including hospital staff, management personnel, and clients. Hospital staff included 118 medical professionals (doctors,

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

nurses, specialists), 17 allied health professionals (pharmacists, lab technicians, radiologists), 9 administrative staff, and 202 support staff. Hospital management consisted of the hospital director, 17 department heads, 4 human resources personnel, and 7 training and development coordinators as shown in Table 2. Clients, comprising 608 patients and their families, were included to provide perspectives on service delivery. These categories were targeted because they were believed to possess the necessary information to assess the influence of career development on public service delivery comprehensively (Mbarara Hospital Human Resource, 2024). Medical and allied health professionals, administrative staff, and management personnel were included because they are directly involved in implementing career development initiatives and delivering services, while patients and their families were included to provide feedback on the quality, responsiveness, and efficiency of services received.

Inclusion and justification: Individuals were included if they had direct involvement in hospital operations, decision-making, or service provision, as well as clients who interacted with hospital services. Including these groups ensured a holistic understanding of how career development initiatives influence both employee performance and service delivery outcomes.

Exclusion and justification: Individuals were excluded if they had no direct interaction with hospital service delivery or career development processes, such as temporary visitors, external contractors, or individuals without experience of the hospital's services. Excluding these groups ensured that the data collected remained relevant, accurate, and reflective of the experiences and perspectives of those directly impacted by career development initiatives and hospital service delivery.

Sampling techniques

The sample size drawn from the target population of 982.Using Yamane's (1967) formula the sample size of 284 was arrived as shown below.

Yamane (1967):$n = \frac{N}{1+N(e)^2}$ Where: **N** – represents the target population; **n** – represents the sample size; **e**- is the margin of error (0.05).

Thus,n $= \frac{982}{1+982(0.05^2)}$ =284

Table 2: Sample Size

Stratum	Population	Sample Size
Medical professionals	118	34
Allied health professionals	17	5
Administrative staff	9	3
Support staff	202	58
Department heads	17	5
Human resources personnel	4	1
Training and development coordinators	7	2
Patients	608	176
Total	**982**	**284**

Source: Researcher, 2025

The study employed stratified random sampling, proportionate sampling, and simple random sampling to select respondents in order to ensure representativeness, accuracy, and fairness in data collection. Stratified random sampling was used to divide the target population into distinct subgroups or strata, such as medical professionals, allied health professionals, administrative staff, support staff, management personnel, and clients. This approach ensured that each category of respondents, which may have different perspectives and experiences regarding career development and service delivery, was adequately represented in the study.

Proportionate sampling was applied within the strata to select respondents based on the relative size of each subgroup in the overall population. This method ensured that larger groups, such as support staff and clients, were sampled proportionately more than smaller groups, maintaining the accuracy and generalizability of the findings.

Finally, simple random sampling was used within each stratum to select individual respondents randomly, giving every member of a subgroup an equal chance of being included. This minimized selection bias and enhanced the reliability and validity of the data collected. By combining these sampling techniques, the study ensured that the sample reflected the diversity of the hospital population while providing precise and unbiased insights into the influence of career development on public service delivery.

Research instruments

This study employed self-administered questionnaires as the primary data collection tool for hospital staff and researcher-administered questionnaires for patients at Mbarara Regional Referral Hospital. The self-administered approach allowed staff to complete the questionnaires independently, reaching a larger sample efficiently and enhancing representativeness and statistical reliability (Smith, 2018). For patients, researcher-administered questionnaires were used to guide respondents through the questions, ensuring clarity and accurate responses, particularly for those who might have had difficulty understanding the questions due to literacy or health-related challenges.

The questionnaire design was closely aligned with the study's objectives and research questions, ensuring that each item provided relevant data on the influence of career development on public service delivery. The instruments primarily featured closed-ended questions with a 5-point Likert scale, enabling the collection of quantitative data consistent with the study's quantitative research approach. This format allowed respondents to express their level of agreement or perception regarding employee development strategies and service delivery without ambiguity, facilitating systematic analysis. Ethical considerations, including confidentiality and privacy, were observed throughout the process. The combination of

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

self-administered and researcher-administered questionnaires was justified as it ensured standardization, reduced bias, and accommodated the diverse capacities of respondents while maintaining data accuracy and reliability.

Data analysis

The study employed a structured approach to quantitative data analysisto ensure systematic interpretation of the data collected at Mbarara Regional Referral Hospital. Descriptive statistics, including means, frequencies, percentages, and standard deviations, were first used to summarise and present the characteristics of the respondents and their responses. This allowed the researcher to obtain a clear overview of patterns, trends, and distributions in the data, providing a foundation for further inferential analysis.

To examine the influence of career development strategies on service delivery**,** simple linear regression analysis was conducted. This method was appropriate as it enabled the study to determine the direct relationship between career development and service delivery, providing insight into the predictive effect of career development initiatives on hospital performance.

The null hypothesis for this study was tested at a 5% significance level ($\alpha = 0.05$) to determine whether career development has a significant influence on service delivery at Mbarara Regional Referral Hospital. Simple linear regression analysis was used to test the hypothesis.

Ethical consideration

The study adhered to strict ethical considerations to ensure compliance and protect participants' rights. Approval was sequentially obtained from the Directorate of Higher Degrees and Research, the Institutional Research Ethics Committee of Kampala International University, and the Uganda National Council for Science and Technology, with permissions presented to the relevant university management before data collection commenced.

Informed consent was central to the study, with participants clearly informed that participation was voluntary, and they could withdraw or decline to answer any questions at any time, ensuring full autonomy in their decision to participate. Confidentiality and privacy were strictly maintained by using numerical codes instead of names, safeguarding participants' identities and ensuring anonymity for both individuals and their departments.

Participant selection followed principles of fairness and inclusivity, using simple random and purposive sampling to provide equal opportunity for all eligible individuals, irrespective of tribe, religion, race, or interest group, thereby promoting a diverse and representative sample. The study also respected the local community, its culture, traditions, and values, aligning research procedures accordingly. As a gesture of reciprocity, key findings were shared with university management prior to publication, providing feedback and value to the institutions that facilitated the study.

4.0 Findings

Response rate

The study successfully collected a total of 284 completed questionnaires from the sampled participants, achieving a 100% response rate. This robust sample size meets and exceeds the minimum threshold required for conducting comprehensive statistical analysis, ensuring sufficient statistical power for reliable results.

Descriptive Statistics on career development

This study looked at how respondents feel about the effectiveness of career development strategies in improving service delivery at regional referral hospitals in Uganda, at Mbarara Regional Referral Hospital as shown in Table 3. Participants rated their agreement on a 5-point Likert scale, where 1 means Strongly Disagree and 5 means Strongly Agree.

Table 3: Descriptive Statistics on Career Development

	N	Mean	Std. Deviation
My organization provides clear guidelines on the requirements for advancement in my chosen career path.	284	4.92	.279
I have access to resources and support to help me progress along my desired career path.	284	4.86	.348
I am aware of the potential career paths available to me within the organization.	284	4.77	.419
The promotion criteria in my organization are clearly communicated and understood.	284	4.70	.457
I believe the promotion criteria used in my organization are fair and objective.	284	4.40	.490
My performance evaluations align with the established promotion criteria.	284	4.24	.425
Overall	**284**	**4.65**	**.403**

Source: Primary data, 2025

The data in Table 3 above presents a highly positive assessment of career development processes within the organization, with all six measured dimensions receiving exceptionally high mean scores (ranging from 4.24 to 4.92 on what is likely a 5-point Likert scale). The overall mean of 4.65 (SD = 0.403) suggests employees overwhelmingly perceive the organization's career development systems as transparent, accessible, and fair. The remarkably low standard

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

deviations (all <0.5) indicate strong consensus among respondents regarding these positive perceptions.

Employees reported the highest agreement with statements concerning clear advancement guidelines (M = 4.92, SD = 0.279) and access to career development resources (M = 4.86, SD = 0.348), suggesting the organization excels in communicating career pathways and providing support for professional growth. The near-perfect scores with minimal variation imply these strengths are consistently experienced across the workforce. Awareness of available career paths (M = 4.77) and clearly communicated promotion criteria (M = 4.70) also scored exceptionally well, reinforcing the finding that the organization maintains transparent and well-structured career development systems. These results may reflect robust HR practices in career pathing and internal communication.

While still strongly positive, slightly lower scores emerged for fairness of promotion criteria (M = 4.40) and alignment between performance evaluations and promotion criteria (M = 4.24), suggesting these aspects may warrant additional attention. The marginally higher (though still low) standard deviations for these items (SD = 0.490 and 0.425, respectively) indicate slightly more variability in employee perceptions, possibly reflecting differences in experiences across departments or managerial approaches.

The average mean (M = 4.65) and overall standard deviation (SD = 0.403) reported in Table 8 provide a concise summary of employees' perceptions of career development within the organization. Interpreting these values precisely:

The mean of 4.65, on a likely 5-point Likert scale, indicates a very high level of agreement among employees that the organization provides effective career development opportunities. This suggests that, on average, employees perceive the organization as having transparent, structured, and supportive processes for career advancement. The mean close to the maximum value demonstrates that career development practices are generally viewed as a significant organisational strength.

The overall SD of 0.403 is low, indicating minimal variation in responses among the 284 participants. This implies a high degree of consensus across the workforce regarding the positive nature of the organization's career development practices. Low standard deviation also reflects that these perceptions are not limited to a specific group but are widespread across different employee segments.

Implications of these findings are multifaceted. The organization is likely succeeding in establishing clear career pathways and providing resources for professional growth, which can enhance employee motivation, engagement, and retention. The particularly high mean scores for clear advancement guidelines (M = 4.92, SD = 0.279) and access to development resources (M = 4.86, SD = 0.348) reinforce the organization's effectiveness in communicating expectations and supporting employees' progression.

Slightly lower means for fairness of promotion criteria (M = 4.40) and alignment of performance evaluations with promotion criteria (M = 4.24) indicate areas requiring targeted improvement. Although these values are still high, the marginally higher SDs (0.490 and 0.425) suggest some variability in employee experiences, potentially pointing to inconsistencies in managerial application of promotion policies or perceptions of fairness. Addressing these gaps could further strengthen trust in career development processes and enhance employee satisfaction.

The average mean (M = 4.65) and overall standard deviation (SD = 0.403) reported in Table 3 provide a concise summary of employees' perceptions of career development within the organization. Interpreting these values precisely:

The mean of 4.65, on a likely 5-point Likert scale, indicates a very high level of agreement among employees that the organization provides effective career development opportunities. This suggests that, on average, employees perceive the organization as having transparent, structured, and supportive processes for career advancement. The mean close to the maximum value demonstrates that career development practices are generally viewed as a significant organisational strength.

The overall SD of 0.403 is low, indicating minimal variation in responses among the 284 participants. This implies a high degree of consensus across the workforce regarding the positive nature of the organization's career development practices. Low standard deviation also reflects that these perceptions are not limited to a specific group but are widespread across different employee segments.

Implications of these findings are multifaceted. The organization is likely succeeding in establishing clear career pathways and providing resources for professional growth, which can enhance employee motivation, engagement, and retention. The particularly high mean scores for clear advancement guidelines (M = 4.92, SD = 0.279) and access to development resources (M = 4.86, SD = 0.348) reinforce the organization's effectiveness in communicating expectations and supporting employees' progression.

Slightly lower means for fairness of promotion criteria (M = 4.40) and alignment of performance evaluations with promotion criteria (M = 4.24) indicate areas requiring targeted improvement. Although these values are still high, the marginally higher SDs (0.490 and 0.425) suggest some variability in employee experiences, potentially pointing to inconsistencies in managerial application of promotion policies or perceptions of fairness. Addressing these gaps could further strengthen trust in career development processes and enhance employee satisfaction.

In summary, the high average mean combined with low overall SD signals that career development within the organization is a clear strength, with employees largely sharing positive perceptions, while minor attention to fairness and evaluation alignment could further enhance effectiveness.

In summary, the high average mean combined with low overall SD signals that career development within the organization is a clear strength, with employees largely

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

sharing positive perceptions, while minor attention to fairness and evaluation alignment could further enhance effectiveness.

Descriptive Statistics on service delivery

The study sought to establish respondents' opinions on public service delivery at the hospital.

Table 4: Descriptive Statistics on service delivery in Mbarara regional referral hospital

	N	Mean	Std. Deviation
I rarely experience long delays when waiting for diagnostic tests or procedures within the hospital.	284	4.52	.648
The hospital has efficient systems in place to manage patient queues and reduce waiting times.	284	4.47	.500
I am satisfied with the amount of time I typically wait before being seen by a healthcare provider.	284	4.31	.462
Our hospital responds to emergency cases within the recommended time frame.	284	4.05	1.122
The healthcare providers at this hospital treat me with respect and address my concerns thoroughly.	284	4.03	1.333
The hospital's facilities and equipment meet my expectations for cleanliness and modernity.	284	3.96	1.350
Our staff is well-prepared to handle a sudden influx of emergency cases.	284	3.93	.991
I am satisfied with the quality of medical care and treatment I receive at this hospital.	284	3.93	1.368
The emergency department efficiently triages patients based on the severity of their condition.	284	3.91	.987
Overall	**284**	**4.12**	**.973**

Source: Primary data, 2025

The descriptive statistics from Table 4 above reveal generally positive perceptions of service delivery at Mbarara Regional Referral Hospital, with an overall mean score of 4.12 (SD = 0.973) across nine key service dimensions. The data suggests that while the hospital performs well in appointment efficiency and queue management, there are notable variations in satisfaction levels concerning emergency responsiveness, staff preparedness, and facility conditions. The highest-rated aspects of service delivery relate to waiting times and operational efficiency. Patients report minimal delays for diagnostic tests (M = 4.52, SD = 0.648) and express satisfaction with queue management systems (M = 4.47, SD = 0.500). The relatively low standard deviations for these items indicate consistent patient experiences in these areas. Additionally, satisfaction with waiting times before consultations (M = 4.31, SD = 0.462) reinforces the hospital's success in optimizing patient flow a critical factor in healthcare service quality. These results suggest that administrative and logistical processes are functioning effectively, contributing to a smoother patient experience. While still above the midpoint, emergency service metrics show greater variability and lower satisfaction. Emergency response times (M = 4.05, SD = 1.122) and staff preparedness for surges (M = 3.93, SD = 0.991) indicate room for improvement, particularly given the higher standard deviations, which suggest inconsistencies in emergency care delivery. Furthermore, perceptions of facility cleanliness and modernity (M = 3.96, SD = 1.350) and quality of medical treatment (M = 3.93, SD = 1.368) are the lowest-rated aspects, with the highest variability. This could reflect disparities in resource allocation or maintenance across different hospital departments.

The overall mean (M = 4.12) and standard deviation (SD = 0.973) in Table 4 provide a summary assessment of service delivery at Mbarara Regional Referral Hospital.

The mean of 4.12, on a 5-point Likert scale, indicates generally positive patient perceptions of service delivery. This suggests that, on average, patients are satisfied with the hospital's performance across the measured service dimensions. However, the mean being lower than the career development scores from Table 8 signals that while service delivery is favourable, it may not be perceived as uniformly excellent.

The relatively high overall SD of 0.973 indicates substantial variability in patient responses, reflecting differences in individual experiences across services or departments. This contrasts with the low SD in career development, highlighting that patients' perceptions of service delivery are less consistent.

High mean scores and relatively low SDs for waiting times and queue management—such as minimal delays for diagnostic tests (M = 4.52, SD = 0.648) and efficient queue systems (M = 4.47, SD = 0.500)—suggest these operational aspects are strong and consistently experienced by patients. This reflects effective administrative processes and good patient flow management, contributing to satisfaction in routine service areas.

Lower mean scores with higher variability are evident for emergency responsiveness (M = 4.05, SD = 1.122), staff preparedness for surges (M = 3.93, SD = 0.991), facility conditions (M = 3.96, SD = 1.350), and perceived quality of medical care (M = 3.93, SD = 1.368). These findings imply that patient experiences are less consistent and highlight potential areas requiring attention. Higher standard deviations indicate that while some patients report satisfactory experiences, others encounter delays, inadequate preparedness, or substandard facilities, pointing to disparities in service provision across units.

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

The implications are that the hospital demonstrates operational efficiency in routine patient management, but variability in emergency responsiveness, staff readiness, and facility standards may undermine overall patient satisfaction. Targeted improvements in resource allocation, staff training, and emergency protocols could enhance consistency and raise overall service quality.

Linear Regression Analysis on Career Development and Service Delivery

This was performed to determine relationship between career development strategies as and service delivery in Mbarara Regional Referral hospital in Uganda.

Table 5: Model Summary[a]

Model	R	R Square	Adjusted RStd. Square	Error of the Estimate
1	.491[a]	.241	.238	.68921

a. Dependent variable: SD- Service Delivery in Public Hospitals
b. Predictor (Constant), CD- Career Development

Source: Field Data, 2025

The linear regression analysis examining the relationship between career development and service delivery at Mbarara Regional Referral Hospital indicates a meaningful and positive association. The correlation coefficient (R = 0.491) demonstrates a moderate-to-strong positive relationship, suggesting that higher levels of career development within the hospital are associated with better service delivery outcomes. This indicates that as employees perceive greater clarity, support, and fairness in career advancement, their contribution to efficient and effective service delivery improves.

The coefficient of determination (R^2 = 0.241) shows that career development initiatives account for approximately 24.1% of the variance in service delivery. While this leaves 75.9% of the variance unexplained, the result highlights career development as a substantial factor influencing service quality, though other organizational, infrastructural, and individual factors also contribute. The adjusted R^2 value (0.238) confirms that the model remains robust after accounting for the number of predictors, reinforcing confidence in the reliability of these findings.

The standard error of the estimate (0.68921) indicates that the model predicts service delivery outcomes with reasonable precision, as most observed values deviate by less than 0.69 units from the predicted values on the service delivery scale. This level of accuracy supports the practical relevance of the regression model in informing management strategies.

These findings imply that investment in structured career development programs—such as clear advancement pathways, access to training resources, and transparent promotion criteria—can significantly enhance service delivery performance. By fostering staff competence, motivation, and retention, career development acts as a key organizational lever for improving healthcare quality. These results suggest that hospital administrators should prioritise career development as part of broader strategies aimed at elevating service efficiency, patient satisfaction, and overall healthcare outcomes.

Table 6: ANOVA[a]

Model		Sumof Squares	Df	Mean Square	F	Sig.
1	Regression	42.533	1	42.533	89.542	.000[b]
	Residual	133.953	282	.475		
	Total	176.487	283			

a. Dependent Variable: SD-service delivery
b. Predictor: (Constant), CD-career development

Source: Field Data, 2025

The ANOVA results for the regression model assessing career development as a predictor of service delivery indicate a highly statistically significant relationship. The F value of 89.542 (DF = 1) with a significance level of p = .000 confirms that career development initiatives have a meaningful impact on service delivery outcomes.

The regression sum of squares (42.533) relative to the residual sum of squares (133.953) shows that a considerable portion of the variability in service delivery is explained by career development. The model's R^2 of 0.241 indicates that 24.1 percent of the variance in service delivery can be attributed to career development, while the remaining 75.9 percent is influenced by other organizational, structural, or individual factors.

These findings imply that structured career development programs, such as clear advancement pathways, accessible training resources, and transparent promotion criteria, can significantly enhance healthcare service performance. By improving staff competence, motivation, and engagement, career development acts as a strategic factor for improving patient care quality. However, to achieve comprehensive improvements in service delivery, other factors such as infrastructure, resource allocation, and emergency preparedness also need to be addressed.

Table 7: Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	T	Sig.
1	(Constant)	12.639	.901		14.033	.000
	CD	-1.832	.194	-.491	-9.463	.000

a. Dependent Variable: SD-Service Delivery
b. Predictor: CD-Career Development

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

Source: Field Data, 2025

The regression coefficients indicate a statistically significant relationship between career development and service delivery, but the direction of the effect is unexpected. The constant term (12.639, $p < 0.05$) represents the predicted service delivery score when career development measures are not present.

The coefficient for career development (B = -1.832, t = -9.463, p = .000 $p<0.05$) shows that each unit increase in career development is associated with a decrease of 1.832 units in service delivery, with a moderately strong standardized effect (β = -0.491). This negative relationship is counterintuitive because theory and prior research typically suggest that career development should improve performance outcomes rather than reduce them.

Several factors could explain this inverse relationship. Reverse causality may be present, where poorer service delivery prompts the implementation of career development initiatives rather than career development causing lower service delivery. Measurement issues could also contribute if the operational definitions of career development and service delivery do not fully capture the intended constructs. Additionally, unaccounted moderating or intervening variables, such as management practices, resource constraints, or staff workload, may influence the observed relationship.

The findings underscore the need for further investigation to clarify the dynamics between career development initiatives and service delivery outcomes in healthcare settings, ensuring that interventions are effectively designed and implemented to support both staff development and patient care quality.

The null hypothesis wasrejected.

This is because the regression results showed a statistically significant relationship between career development and service delivery (t = -9.463, p = .000), indicating that career development has a measurable effect on service delivery. Although the effect was negative and counterintuitive, the statistical significance means there is sufficient evidence to reject the null hypothesis that career development has no impact on service delivery

Discussion of Findings

The findings indicating a negative relationship between career development and service delivery are unexpected, especially when compared with existing empirical evidence. Most prior studies in the health and public sector have shown that career development positively affects employee performance, engagement, and service delivery outcomes. Nyongesa and Onyango (2022) found that career development management significantly improves service delivery in devolved healthcare units, emphasising structured promotions, training opportunities, and succession planning in aligning employee productivity with organisational goals. Muchibi et al. (2022) similarly established that career development increases employee engagement in Kenya's public health sector, with equitable career policies and institutional support mechanisms enhancing motivation, competence, and service delivery.

The negative coefficient in the current study (B = -1.832, β = -0.491) may reflect operational or contextual challenges at Mbarara Regional Referral Hospital that limit the positive effects of career development. Issues such as understaffing, low pay, poor administrative coordination, and stressful work environments could prevent career development initiatives from translating into improved service delivery. Career development efforts may even increase employee frustration when advancement opportunities are limited, promotions are delayed, or training does not address practical service delivery needs. Ituma et al. (2024) and Mark and Nzulwa (2018) observed that insufficient funding, poor remuneration, and misalignment of career development programmes with organisational realities can hinder their effectiveness despite theoretical benefits.

The negative association could also indicate a time lag in the impact of career development programmes. These initiatives often require sustained investment and time to produce observable improvements in performance. Short-term implementation without support structures such as mentoring, job guidance, or performance-linked rewards may temporarily reduce service delivery scores if employees experience increased workloads or dissatisfaction. Karaferis et al. (2022) highlighted that employee motivation and engagement depend on both intrinsic and extrinsic factors, and career development initiatives that fail to address key extrinsic needs such as salary, job security, and working conditions may not improve service delivery.

Conclusion

Based on the results of the study, it can be concluded that career development initiatives at Mbarara Regional Referral Hospital are significantly associated with service delivery outcomes, although the relationship was not as expected. Descriptive findings show that employees view career development positively, particularly regarding clear guidelines, accessible resources, and well-communicated promotion criteria. These consistent perceptions indicate that the hospital effectively structures career pathways and supports professional growth.

However, the analysis revealed an unexpected negative relationship between career development and service delivery. This suggests that while career development is generally perceived positively, its direct impact on service delivery may not always be straightforward. The findings point to possible complexities such as reverse causality, measurement limitations, or unaccounted factors within the hospital environment that may influence how career development affects service outcomes.

The implications of these findings are multifaceted. On one hand, the hospital demonstrates effective career development structures that likely enhance staff motivation, competence, and engagement. On the other hand, the unexpected negative association signals a need to carefully examine how career

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

development programs are implemented and aligned with organizational performance goals. Addressing potential gaps, such as management practices, resource allocation, and workload distribution, could help ensure that career development translates into tangible improvements in service quality.

Recommendations

Based on the study findings, several key actions and strategies can be implemented to ensure that career development initiatives effectively enhance service delivery, with each action involving specific stakeholders. To begin with, aligning career development programs with service delivery objectives is essential. This requires hospital management, the Human Resource department, department heads, and training coordinators to work together to design and implement training, mentorship, and advancement opportunities that directly improve staff competencies relevant to patient care. Ensuring that career growth initiatives are closely linked to practical skills and operational performance will help translate employee development into improved service outcomes.

Strengthening monitoring and evaluation systems is another critical strategy. The quality assurance team, hospital management, HR department, and data analysts should regularly assess the effectiveness of career development programs and their impact on service delivery. This can be achieved through staff and patient feedback mechanisms, performance audits, and periodic program reviews to identify gaps or unintended effects, ensuring initiatives remain relevant and effective.

Addressing resource allocation and workload management is also vital. Hospital administration, the finance department, department managers, and procurement teams need to ensure equitable distribution of tasks, provide adequate staffing, and maintain sufficient medical equipment and support systems. These measures allow employees to apply their skills effectively and prevent overburdening, which can undermine the potential benefits of career development programs.

Improving management and leadership practices is another important step. Department heads, supervisors, hospital management, and leadership development facilitators should be actively involved in training leaders to implement career development initiatives consistently and fairly. Fostering a culture of accountability, collaboration, and professional growth ensures that career development positively influences service delivery.

Finally, integrating staff feedback into program design is crucial. The HR department, hospital management, employee representatives, and staff committees should engage employees in identifying their development needs and contributing to program design. This participatory approach increases staff engagement, ensures initiatives are contextually relevant, and enhances the likelihood that career development efforts will translate into tangible improvements in patient care and overall hospital performance.

Limitations of the study

The major limitation of this study lies in its cross-sectional design and reliance on self-reported data. Because data were collected at a single point in time, the study cannot establish causality between career development initiatives and service delivery outcomes. While statistical associations were identified, it remains unclear whether career development directly influences service delivery or whether other factors, such as management practices, resource availability, or staff workload, are contributing to the observed effects.

Additionally, the reliance on self-reported perceptions from employees introduces the possibility of response bias, where participants may overstate positive experiences or underreport negative ones due to social desirability or fear of repercussions. This may partly explain the counterintuitive negative relationship observed between career development and service delivery.

Finally, the study focuses on a single hospital, which limits the generalizability of the findings. The results may not reflect conditions in other public hospitals with different organizational structures, resources, or patient populations. Future studies should consider longitudinal designs, include objective performance metrics, and involve multiple healthcare facilities to strengthen the validity and applicability of the findings.

Suggestions for future research

Based on the limitations and findings of this study, several suggestions for future research can be made. Future studies should consider adopting a longitudinal research design to track changes in career development initiatives and service delivery over time. This approach would help establish causality and clarify the direction of the relationship between career development and service delivery outcomes.

In addition, future research should incorporate objective measures of service delivery, such as patient outcomes, wait times, and treatment quality, alongside employee perceptions. This would reduce reliance on self-reported data and provide a more accurate assessment of the impact of career development programs.

Expanding the scope to include multiple hospitals or healthcare facilities across different regions would improve the generalizability of findings and allow for comparisons across diverse organizational and operational contexts. This could help identify factors that strengthen or weaken the link between career development and service delivery.

Future studies could also explore the role of moderating or mediating variables, such as management practices, staff workload, resource availability, or organizational culture. Understanding how these factors influence the relationship between career development and service delivery can provide deeper insights and inform the design of more effective interventions.

Finally, qualitative research methods, such as interviews and focus groups with staff and management, could complement quantitative analyses by providing contextual understanding

*Corresponding Author: **Tom OngesaNyamboga (PhD).**
This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

of the mechanisms through which career development affects service delivery. This would allow researchers to capture nuanced experiences and identify practical strategies to enhance both staff growth and patient care outcomes.

References

1. Aljuaid, T. H., Alqahtani, K. M., Altwaijri, S. A., Bokhamsin, T. H., Alshaghroud, S. M., Alrashed, M. A., &Alshammari, B. G. (2021). The role of public hospitals in providing free healthcare services: enhancing accessibility and promoting positive health outcomes for communities. *International journal of health sciences*, *5*(S1), 1545-1565.
2. Alshmemri, M., Shahwan-Akl, L., & Maude, P. (2017). Herzberg's two-factor theory. *Life Science Journal*, *14*(5), 12-16.
3. Bludau, H. (2021). Global healthcare worker migration. In *Oxford research encyclopedia of anthropology*.
4. Bolatito, A. O. S. (2023). Corruption: An impediment to public service delivery in Africa. *TWIST*, *18*(4), 104-110.
5. Butt, S., Raza, A., Siddiqui, R., Saleem, Y., Cook, B., & Khan, H. (2024). Healthcare employment landscape: comparing job markets for professionals in developed and developing countries. *Journal of Work-Applied Management*, *16*(1), 84-96.
6. Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). SAGE Publications.
7. Endalamaw, A., Khatri, R. B., Erku, D., Nigatu, F., Zewdie, A., Wolka, E., &Assefa, Y. (2023). Successes and challenges towards improving quality of primary health care services: a scoping review. *BMC Health Services Research*, *23*(1), 893.
8. Ghazi, S. R., Shahzada, G., & Khan, M. S. (2013). Resurrecting Herzberg's two factor theory: An implication to the university teachers. *Journal of Educational and Social Research*, *3*(2), 445.
9. Ituma, O. A., Agu, S. U., Ozo, F. K., Chinweike, O. A., &Onwe, J. C. (2024). The impact of career development on employee performance in the civil service sector: A Nigerian context. *Journal of Chinese Human Resources Management*, *15*(1), 42-63.
10. Jones, C., REDDY, P., &Zondi, S. (2023). POVERTY AND CORRUPTION IN AFRICA: IMPLICATIONS AND CONSEQUENCES ON GOVERNANCE AND DEVELOPMENT. *The Nexus between Poverty and Corruption: Quo Vadis?*, 1.
11. Kakui, I.M. (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 and change management, vol 3, issue 3(19), p.307-324
12. Karaferis, D., Aletras, V., Raikou, M., &Niakas, D. (2022). Factors influencing motivation and work engagement of healthcare professionals. *Materia socio-medica*, *34*(3), 216.
13. Kessler, I., Steils, N., Esser, A., & Grant, D. (2021). Understanding career development and progression from a healthcare support worker perspective. Part 1/2. *British Journal of Healthcare Assistants*, *15*(11), 526-531.
14. Kurtović, B., Gulić, P., Čukljek, S., Sedić, B., Smrekar, M., &LedinskiFičko, S. (2024, February). The commitment to excellence: Understanding nurses' perspectives on continuous professional development. In *Healthcare* (Vol. 12, No. 3, p. 379). MDPI.
15. Mark, L. &Nzulwa, J. (2018) EFFECT OF CAREER DEVELOPMENT PROGRAMS ON EMPLOYEE PERFORMANCE IN KENYA. A CASE OF NATIONAL HOSPITAL INSURANCE FUND, *International Journal of Social Sciences and Information Technology* ISSN 2412-0294 Vol IV Issue V, May 2018
16. Monaco, S. (2024). SDG 3. Ensure healthy lives and promote well-being for all at all ages. In *Identity, territories, and sustainability: Challenges and opportunities for achieving the UN Sustainable Development Goals* (pp. 33-41). Emerald Publishing Limited.
17. Muchibi, W. M., Mutua, S. M., &Juma, D. (2022). Influence of career development on employee engagement in the public health sector in Kenya. *International Academic Journal of Human Resource and Business Administration*, *4*(1), 297-327.
18. Mulegi, T. (2022). An overview of performance of health workers in Uganda. *IDOSR Journal of Humanities and Social Sciences*, *7*(1), 113-124.
19. Napitupulu, S., Haryono, T., LaksmiRiani, A., Sawitri, H. S. R., &Harsono, M. (2017). The impact of career development on employee performance: an empirical study of the public sector in Indonesia. *International Review of Public Administration*, *22*(3), 276-299.
20. Nolte, E., Karanikolos, M., &Rechel, B. (2022). Service delivery. *Health system performance assessment*, 160.
21. Nyongesa, P. N., Onyango, M., &Museve, E. (2022).The Role of Career Development Management on Health Sector Service Delivery in Devolved Units in the Western Kenya Region, *International Journal of Innovative Research and Development*
22. Nyongesa,P.N., &Onyango, M. (2022). The Role of Career Development Management on Health Sector Service Delivery in Devolved Units in the Western

*Corresponding Author: **Tom OngesaNyamboga (PhD).**

This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

Kenya Region; *international journal of innovative research and development*, vol 11, issue 9

23. Okunade, B. A., Adediran, F. E., Balogun, O. D., Maduka, C. P., &Adegoke, A. A. (2023). Capacity building in Nigeria's healthcare sector: A review of skill development and mentorship initiatives. *World Journal of Advanced Research and Reviews*, *20*(3), 906-923.
24. Reyes, A. G. (2024). An Analysis of Herzberg's Two-Factor Theory of Motivation and Employee Turnover in The BPO Industry. *International Journal of Management and Education in Human Development*, *4*(04), 1446-1452.
25. Sekaran, U., &Bougie, R. (2016). *Research methods for business: A skill building approach*. johnwiley& sons.
26. Taylor, K. J., Ford, L. D., Allen, E. H., Mitchell, F., Eldridge, M., &Caraveo, C. A. (2022). *Improving and expanding programs to support a diverse health care workforce: recommendations for policy and practice*. Urban Institute.
27. Yenet, A., Nibret, G., &Tegegne, B. A. (2023). Challenges to the availability and affordability of essential medicines in African countries: a scoping review. *ClinicoEconomics and Outcomes Research*, 443-458.

*Corresponding Author: **Tom OngesaNyamboga (PhD).**

This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.