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ABSTRACT

Prevailing trends of turnover in hospitals in Kenya shows a need for hospital managements to look for effective ways of retaining its most valued employees. The purpose of this research was to determine the effect of organizational support initiatives on retention of millennial employees in private hospitals in Bomet and Kericho Counties. Specifically, the study sought to determine the influence of employer value proposition, welfare options, flexible work schedules, reward system and career development support on retention of millennial employees. This study adopted mixed methods research design. Organizational support, Maslow's Hierarchy of Needs and Vogt, Thames, Velthouse and Cox's Cork-Top Theory of Nurse Retention theories, The Rethinking Retention Model and Workforce Optimization Model were used. The target population comprised of 1437 employees in private hospitals in Bomet and Kericho Counties. Stratified random sampling and purposive techniques were applied due to heterogeneity of the population. Stratified random sampling was used to select a sample of 5 hospitals and 359 respondents to questionnaires from the strata. Purposive sampling was used to select 16 administrators, 16 doctors and 40 supervisors interviewees. Questionnaires, interview guides and document analysis were the main data collection tools. Reliability and validity tests were conducted to determine the strength of the instrument used. Data was analyzed qualitatively and quantitatively. Cumulative frequency and percentages tables, pie charts were used to present the findings of the study. Karl Pearson Product Moment correlation was carried out to test hypotheses. Various frequencies and percentages of the findings were computed with the aim to determine most significant aspects of independent variable that determine retention of millennial employees in private hospitals studied. Karl Pearson Product Moment correlation coefficient was computed to establish the level of significance of relationships between the study variables. The overall implication was that there exists a positive correlation of r = 0.777 between Organizational support initiatives and retention of millennial employees in private hospitals under study. Specifically career development support with R^2 value of 0.817 plays a more significant role in determining retention of millennial employees by 81.7%. Employer value preposition with R^2 value of 0.791 explained retention of millennial employees in the hospitals studied by 79.1%. The study strongly recommends that hospital managements should develop innovative and competitive intervention strategies which use organizational support initiatives studied to build sustainable retention of millennial employees.

Keywords: Employer Value Proposition, Welfare Options, Flexible Work Schedules, Reward System and Career Development Support

INTRODUCTION

Hospital employees include health care providers such as doctors, administrators, registered nurses, mid-level providers such as advanced practice nurses and physician assistants, technicians, patient care assistants, social workers, to health care volunteers (Taderera, Hendricks, & Pillay, 2016). Taderera et al. (2016) noted health care workers' factors that lead to employee retention involve salary adjustments to market, post-hire training

and development, proper staffing ratios, non-monetary rewards and recognition, and safety.

Human Resource Managers play a key role in developing key strategies for human capital retention. Moreover, Tourangeau, Thomson, Cummings, and Cranley (2013) indicated a statistical significance for specific incentives and disincentives that affected nurses' decision to stay or leave the hospital. The workplace contribute to hospitals' staff retention.

Twigg and McCullough (2014) investigated retention factors on the micro nursing unit level and macro greater department of nursing and administrative levels of healthcare organizations. Older nurses and millennial generational nurses groups placed equal value on self-scheduling work hours and desired additional vacation time in both studies (Tourangeau et al., 2013; Twigg & McCullough, 2014).

Retaining hospital professionals was vital because of the aging workforce and shortage of talent (Armstrong-Stassen, Freeman, Cameron, & Rajacic, 2015). Nurses, physicians, and hospital professionals continue to become critical to retain in a multi-generational workforce. Increase in hospital employee turnover and the looming shortage of nurses was prompting leaders to focus on staff retention (Koppel, Deline, & Virkstis, 2017; Sherrod, 2007). Turnover negatively affected the quality of care, staff morale, and pressure on hospital budgets (Park & Boyle, 2015). The Advisory Board estimated that one registered nurse departure costs organizations up to $90,000, excluding expenses for replacement labor, separation, recruitment, on boarding, and lost revenues (Koppel et al., 2017).

Dasgupta (2015) researched employee advisory factors of organizational support, and the role stress played in retention. The study showed a relationship between nursing stress levels as turnover factors, using 175 nurses as a survey sample from five private hospitals in India. Furthermore, researchers from the U.S. mid-Atlantic region posited the importance of a positive work environment combined with organization support mediated hospital employee retention (Madden, Mathias, & Madden, 2015). The evidence from these studies stressed the importance of organizational support for hospital employees, especially the younger workers when addressing retention strategies.

Retention of Millennial Employees

Hospitals should value the importance of organizational support initiatives in retention of millennials for organizational success. Several job retention strategies were important to millennials, including work-life-balance, organizational fit and meaning, desirable perks and benefits, competitive pay and career advancement, mentoring and coaching, new skill development opportunities, and encouragement with recognition (Bihani & Dalal, 2014; Kroth & Young, 2014; Nolan, 2015).

Hospital millennials desired to be engaged in their job. However, Ulep's (2018) research indicated 71% of millennials are actively disengaged at work, and over 21% report changing jobs in the last year. Ulep (2018) specified that 30% of millennial nurses are leaving their positions in the first year and as much as 57% in the second year. Hospital HRMs who instilled the desired purpose to millennials through mentorship programs' development improve retention (Koppel et al., 2017; Ulep, 2018).

Millenials love learning and self-improvement and was the first generation to value the individual more than the group (Fishman, 2016). Millennials' characteristics of being unique, confident, sheltered, team-oriented, pressured, achievers, and conventionalists make the cohort different from Gen Xers and baby boomers (Keeling, 2003).

Furthermore, millennials could expect recognition and reward in the workplace due to being the product of their parents' enrichment, sports trophies, and participant ribbons for achievement earlier in their lives. Fishman (2016) posited that in the workplace, millennials want frequent praise and feedback and do not stay in organizations that only provide annual review recognition. Millennial employees desired higher rewards, flexible work schedules, meaningful positions, as well as balance with their personal lives (Bihani & Dalal, 2014).

Deery & Jago, (2015) study findings indicated that managers who monitored work-life- balance in their millennial employees and encouraged positive relationships, influenced family, and social relationships, which, in turn, provided personal positive social change for employees' work and lifestyle. The literature supported a relationship that an employee's perceived organizational support positively reduces an intention to leave a job. Furthermore, in employee engagement and training, millennials appreciated training opportunities and new skills.

Statement of the Problem

The loss of retiring baby boomers at a rate of 10,000 per day in the workforce requires the recruitment of highly skilled millennials (Riley, 2015; Reichenberg, 2015). In 2015, the millennials surpassed the baby boomers to become the most significant generation in the workforce (DeFrank-Cole & Tan, 2017; Gordon, 2017). Additionally, as millennials move into leadership positions with the retirement of baby boomers, they change the views of leadership because they are more people-oriented and gender-neutral in how they view diversity in leadership (DeFrank-Cole & Tan, 2017). The different values and beliefs of the millennial generation may affect how organizations address a productive workplace (Solaja & Ogunola, 2016). Retaining millennials who replace retiring older generational workers is necessary for the financial sustainability of hospitals and managers must understand these generational differences to motivate and lead the new majority workforce (Sims et al., 2015).

Despite the positive opportunities with a younger generation moving into new positions, hospitals experience new recruitment, retention, and training costs for filling the positions of retiring baby boomers (Mensik & Kennedy, 2016). For example, there is a high turnover rate for millennial hospital workers (U.S. Bureau of Labor Statistics, 2018; Yarbrough, Martin, Alfred, & McNeill, 2016). Some hiring managers in health care experience the negative effects to replace open positions from retiring baby boomers, which results in loss of profitability for hospitals. The costs associated with hiring millennial employees to replace those retiring such as recruitment, retention, and training costs (Mensik & Kennedy, 2016) is high. Socio-technical factors affect retention of millennial employees in private hospitals (Ngeno, 2015). The 3-year median employment turnover rate for millennial workers is over 3 times higher than for older workers in hospitals (U.S. Bureau of Labor Statistics, 2018; Yarbrough et al., 2016). Some hospital Human Resource Mangers lack strategies to retain employment of millennials beyond 3 years, (Thomas F. T. 2020).The specific problem was that some private hospitals lack appropriate organizational support initiatives to retain millennial employees (Ngeno, 2015)

Objective of the Study

The general objective of the study was to determine the effect of organizational support initiatives on retention of millennial employees in private hospitals in Bomet and Kericho Counties. Specifically the study established the effect of employer value proposition, welfare services, work schedule flexibility, reward system and career development support on retention of millennial employees in private hospitals in Bomet and Kericho Counties in Kenya.

LITERATURE REVIEW

Organizational Support Initiatives and Retention of Millenial Employees

Sujansky and Ferri- Reed, (2009) reported in their research of Keeping the millennials: Why companies are losing billions in turnover to this generation and what to do about it that the Baby Boomers are leaving the workplace in increasing numbers. As the Boomers leave a workplace that was designed around them, organizations are finding that the current workplace is at odds with the work expectations of Generation Y(mellenials) who are in line to replace the retiring. With their exit the millennial employees have to be retained. This supports Tulgan (2009) view of "Grab a hold of Generation Y the moment theyaccept a job offer through mentoring programmes by supervisors". A well prepared employer will assign the new hire to experienced employees from day one to work with and mentor the Generation Y employees. Organizational support initiatives were therefore studied and their effect on retention of millennial employees in the hospitals studied determined. Riegel (2013) study on Orienting a new generation of nurses: Expectations of millennial new graduate reported the importance of the manager in perceived success of this generation transition and a need to

be assimilated into the professional role of Registered nurses (RN). It recognized that there was need for the hospital managers to promote a more individualized orientation which improved mentoring for novice nurses. The findings challenged nursing leaders and educators to re- think of the current practices to retain new nurses (generation Y) who were joining the hospitals. The study created a study gap because the change in the demographics of nursing with millennial employees replacing the Baby Boomers, impacts all aspects of recruitment and retention as graduate nurses have become a considerate part of acute care hospitals strategy to fill workplace shortages. A high turnover rate and influx of new graduate nurses into the hospital setting leads to a higher proportion of inexperienced nurses, which may not only be traumatic for new professional nurses, but also may impact patient safety, (Park & Jones, 2010). These claims created the need for this study to determine the influence of supervisor- employee relationship on retention of millennial employees.

In Kenya, a research by Ndetei et al. (2008) on incentive for health worker retention pointed out that internal migration of health workers in Kenya from rural to urban areas is as serious a problem as international migration. This necessitated incentives to recruit and retain personnel in hospitals. National Human Resource for Health Annual Report - Kenya (2010) indicated that critical shortage of key health staff across regions, cadres and sub-sectors madetheir retention necessary. In the report the health policy makers and managers frequently highlighted retention as a major human resource challenge in Kenya with little empirical evidence to support their concerns.

Tenwek Hospital Annual Report (2010) reported that they lost 40 nurses and some clinicians to the government under Structural Economic Stimulus Program (SESP). This created shortages in many departments causing increased workload, shortages of staff, inadequate counselling time, reduced efficiency and effectiveness and frequent staff redeployments.

There were no researches available for the researcher which had studied the same set of organizational support initiatives which influence retention of millennial employees in private hospitals in Bomet and Kericho Counties. Further, many of the available studies on retention of employees in Kenya were done on the general population in the hospitals in Kenya not on millennial employees in private hospitals studied. This research therefore studied the organizational support initiatives which determine retention of millennial employees in private hospital in Bomet and Kericho Counties because the available hospital records and reports indicated high turnover rates of millennial employees. The foregoing background information shows that there is need to retain millennial health workers in Kenyan private hospitals which currently are affected by high turnover. In order to achieve this, the study assessed the organizational support initiatives determinants of retention of millennial employees in private hospitals in Bomet and Kericho Counties. Ghosh and Sahaney (2010) noted that in any organizational retention problem, socio-technical factors are at play. This research therefore sought to establish with empirical evidence the extent to which organizational support initiatives factors influenced retention of millennial employees in private hospitals in Bomet and Kericho Counties.

According to organizational support theory (Eisenberger et al., 1986), employees form general beliefs concerning how much the organization values their contributions and cares about their well-being. This perceived organizational support leads to employees' felt obligation to help the organization reach its goals. Eisenberger et al. (1986) reported that employees perceive an organization as an important source of socio-emotional resources, such as respect, caring and tangible benefits, such as wages and medical benefits. When employees are highly regarded by the organization, employees' needs for approval, esteem and affiliation are met. This shows why employees take an active interest in the regard with which they are held by their employer. Perceived organizational support (POS) would increase employees' felt obligation to help the organization reach its objectives, their affective commitment to the organization, and their expectation that improved performance would be rewarded. Behavioural outcomes of POS would include increases in role and extra-role performance and decreases in stress and withdrawal behaviours such as absenteeism and turnover, Rhoades & Eisenberger, (2002)

Ndetei et al (2008) study reported that the reasons why health workers resign or leave initiatives should be routinely documented to assist policy makers to address the causes of internal and external migration. They also recommended that government put in place national-level policies to retain health workers in rural areas,

in lower-income districts and at lower levels of the health system to ensure that all areas reach minimum standards with regard to numbers of personnel per population (such as the WHO recommended minimum standard of 20 doctors per 100,000 patients). From their findings a number of non- financial incentives were highly valued such as improved working conditions; training and supervision; and good living conditions, communications, healthcare and educational opportunities for themselves and their families. This formed the basis for this research which determined the effect of organizationalsupport initiatives on retention of millennial employees in private hospitals in Bomet and Kericho Counties.

Job dissatisfaction could lead to health workers quitting hospitals that are not highly supportive in its reward systems. Sometimes, health workers migrate from public to private hospitals or to foreign hospitals, where such hospitals provide greater incentives (Adzei & Atinga, 2012). Possible actions to deal with employee turnover rates problems could be addressed by dealing with uncompetitive, inequitable or unfair pay systems. But as Cappelli (2000) points out, there is a limit to the extent to which people can be bribed to stay. When organizations do this, employees' positive attitudes towards their organizations develop. This shows that organizational support initiatives influence retention ofmillennial employees who value organizational support.

Employees are likely to be committed to organizations that they perceive are committed to them, and are more likely to act accordingly. In his survey of nurses, Burke (2001) found out that as the hospital grew, the nurses felt they had less organizational support. As the organizations grew employees' perception of organizational support declined. In Kenya, Daily Nation (2012, September 10), it was reported that doctors in public hospitals threatened to boycott work because they wanted the government to rescind a decision to suspend 393 trainee doctors at two Kenya referral hospitals. This was an indication that the doctors did not enjoy organizational support (government) in allowing them to develop their careers. Most of those doctors (trainees) were millennial workers who were furthering their studies (Masters Degree) and were undertaking interns (practicals) in the hospitals. Their employer was not supporting their career development financially.

Espinoza et al, (2011) research on core competencies for leading today's workforce reported that millennials grew up with parents who committed themselves fully to their occupations, only to fall victim to downsizing, layoffs,and strained relationships. This first-hand experience with the cruelty of the corporate world almost surely impacted these impressionable youths, and could certainly drive them to ensure that they never made the same sacrifices uponrealizing the role of luck in securing long-term employment. Even now, manyof them are entering the workforce amidst economic uncertainty, so they haveseen another cycle of talented employees losing their jobs, (Kowske et al,2010). These layoff cycles pose tremendous obstacles to the former conception of the psychological contract; millennials feel that if employers are not going todemonstrate loyalty to their employees, then employees have no reason to make this obligation to their employers, (Hauw and Vos, 2010). However,millennials aversion to an unqualified commitment to their careers should not be misconstrued as an unwillingness to work. Rather, they simply want to avoid being so fully committed to their jobs that their personal lives suffer as aresult; Millennials simply want independence and responsibility. They cite"autonomy over when and how to work" as the most important work-lifebalance element, (London Business School, 2010). While millennials may be reluctant to work the long hours that Baby Boomers did, the message here is that they will often compromise to working more hours as long as they are afforded more flexibility in when to complete those hours. Millennial employees therefore need organizational support to remain working.Organizational support initiatives were therefore studied and their influence on retention of millennial employees established. Hence it was hypothesized that: Ha_1 - Organizational support initiatives determine retention of millennialemployees in private hospitals in Bomet and Kericho Counties.It also hypothesized that; Valuing employees, several welfare options, flexible workschedules, good reward system and career development support determinedretention of millennial employees in private hospitals in Bomet and KerichoCounties.

Theoretical Framework

Organizational support theory, Theory X and theory Y, Maslow's Hierarchy of Needs Theory, Vogt, Thames, Velthouse and Cox's Cork-Top Theory of NurseRetention. Organizational Support Theory

Organizational support theory

Eisenberger, Huntington, Huntington and Sowa (1986) Organizational Support Theory (OS) supposes that to meet socio-emotional needs and to determine the organization's readiness to reward increased work effort, employees develop global beliefs concerning the extent to which the organization values their contributions and cares about their well-being.

Maslow Hierarchy of needs theory

Maslow (1943) identified hierarchy of needs theory which he proposed as the basis of motivation for individuals. These needs are divided into five categories in a hierarchy, physiological, safety,social, esteem needs and self actualization. This theory was relevant to the study in that all the five needs categories can be met by organizational support initiatives. The organizational support initiatives such as employer value proposition, welfare options, flexible work schedules, reward system and career development support when offered by hospitals employees feel they receive organizational support and this leads to satisfied and motivated employees who decide to remain working in their organizations thus enhancing retention.

Vogt, Thames, Velthouse and Cox's Cork-Top Theory of NurseRetention

Cork-Top theory of nurse retention of Vogt, Thames, Velthouse and Cox's (as cited in Mokaka, Oosthuizen, & Ehlers, 2012) was built using Maslow's constructs regarding human needs to explain factors that affect nurse retention. The figure of a champagne bottle cork is used to depict the different levels or categories of needs. These needs are in hierarchy; but unlike Maslow's theory, is a theory of nurse retention and not motivation. The shape of the champagne bottle cork signifies the levels and how they vary and differ in size, severity or complexity. Where the cork is narrow, it signifies areas of constrictions or limitations in fulfilling those needs, while wider areas indicate expanded opportunities. According to this theory, retention of nurses is affected by the availability or unavailability of means to meet needs. Implementation of organizational support initiatives such as employer value proposition, welfare options, flexible work schedules, reward system and career development support to employees were found out to affect retention of millennial employees of private hospitals in Bomet and Kericho Counties.

Models Framework

The Rethinking Retention and Workforce Optimization Models were used.

The Rethinking Retention Model

Employee retention expert Finnegan (2011) crafted The Rethinking Retention Model, a research based, process-driven approach to improving employee retention. Process-driven means business-driven— applying the same methods to retention as companies do to sales, service, quality, and safety. The model shows that employees quit because they can and stay for the things they get uniquely from their employer. The model's effective retention strategies of implementing organizational support initiatives valued by employees drive their retention and turnover. These claims therefore made employer value proposition, welfare options, flexible work schedules, reward system and career development support constitute independent variables and dependent variable retention of millennial employees which studied.

Workforce Optimization Model

Goren (2009) established workforce optimization model which aims at maximizing retention of critical workers. It utilizes data mining and seeks to identify those who are most likely to resign and prevent loss of valuable and expensive employees. The consolidated employee data is analyzed to help predict and identify key employees who are likely to leave and why. This can reduce costs and turnover rates through better employee retention initiatives and faster reporting. Based on this model the research sought to establish the influence of organizational support initiatives studied on retention of millennial employees in private hospitals in Bomet and Kericho Counties.

Conceptual Framework

The conceptual Framework with operationalized Variables is shown in Fig 1

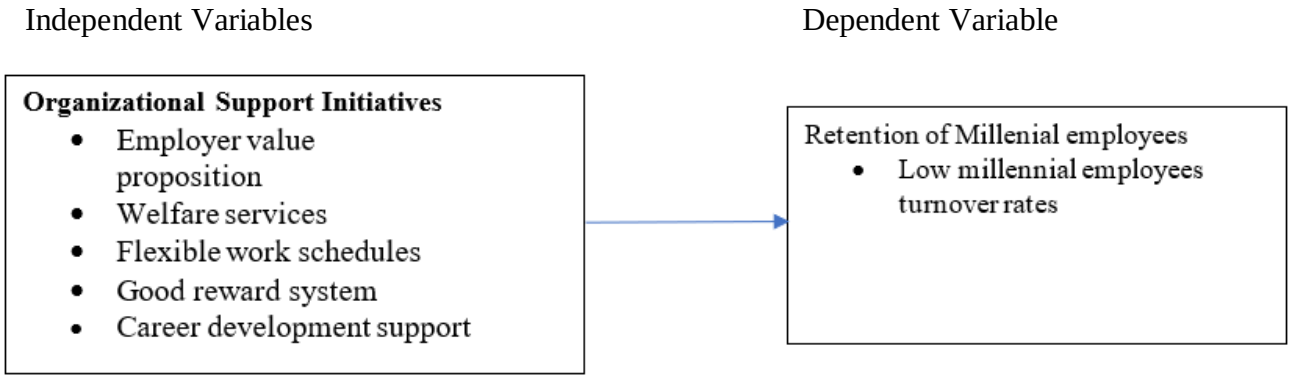

Fig 1.1: Conceptual Framework

RESEARCH METHODOLOGY

This study adopted a mixed methods designapproach. This is because this research is not only quantitative but qualitative. Mixed methods approach was found to be appropriate because it combines or associates both qualitative and quantitative approach to inquiry in a single study (Creswell, 2011, Caracelli & Greene, 1997. Jayaratne (1993) asserts that quantitative data supports explicitly the meaning of qualitative research. The qualitative and quantitative data are turning ideas around by providing fresh insights; (Rossman & Wilson, 1991). This is possiblebecause the mixed methods use questionnaires, interviews and document analysis in data collection, which were used in this study.

Target Population and sample size

The private hospitals in Bomet and Kericho Counties formed the target population. These counties had 10 private hospitals with a total population of 1,196 employees, thus 30% (359) respondents were selected for the study from the sampled hospitals. The hospitals had a total of54 administrators, 53 doctors and 134 supervisors. The interviewees were 30% (72); 16 doctors, 16 administrators and 40 supervisors who were chosen to respond to the questions in the interview guide.

Stratified, simple random and purposive sampling procedures were used. There were ten (10) private hospitals in Bomet and Kericho Counties where five (5) were randomly selected for study. Two (2) hospitals from Bomet and three (3) from Kericho were selected for study. The population was stratified into a number of non-overlapping strata which included administrators, supervisors, doctors and other millennial employees in the hospitals. The stratification was done in the selected hospitals into four categories consisting of 1,196 employees,134 supervisors, 54 administrators and 53 doctors who were distributed in 19 departments. Stratification was appropriate because employees in the hospitals were of different categories with specific roles and professions. Simple random techniques were used to select 359 respondents which formed 30% of the 1,196 hospital employees. Purposive sampling procedures were used in the selection of 16 administrators, 16 doctors and 40 supervisors to answer the questions in the interview guide who had the required information on organizational support initiatives which influence retention of millennial employees in the hospitals studied.

Sample Size

A comprehensive list of all hospital employees, administrators, supervisors and doctors in the hospitals was prepared and used to select a sample of respondents because direct access tothe entire population of interest in social science research is rare. It was also used to determine the appropriate sample size which fulfilled the requirements of efficiency, representativeness, reliability and flexibility. A sample of 30% (359) of questionnaire respondents and 30% (72) interviewees was selected for the study as suggested by (Kerlinger, 1983). This is shown in Tables 3.1, 3.2a and 3.2b respectively. Pilot study was done and validity and reliability of the

instruments was ascertained through expert opinion and Cronch bach Apha with reliability coefficient of the items in the questionnaire which ranged from 0.8459 to 0.9663 for the organizational support initiatives studied. This was greater than 0.700 and so the instrument was reliable.

Table 3.1: Employees Sample Size

Hospital	Population(N)	Sample Size (n)
A	500	150
B	250	75
C	206	62
D	140	42
E	100	30
TOTAL	**1,196**	**359**

Table 3.2a: Interviewees population

Hospitals	Administrators(N)	Doctors(N)	Supervisors(N)	Total
A	20	33	67	120
B	10	7	30	47
C	10	7	20	37
D	7	3	10	20
E	7	3	7	17
TOTAL	54	53	134	241

Table 3.2b: Sampled Interviewees

Hospitals	Administrators	Doctors	Supervisors	Total
A	6	10	20	36
B	3	2	9	14
C	3	2	6	11
D	2	1	3	6
E	2	1	2	5
Total	**16**	**16**	**40**	**72**

RESULTS AND DISCUSSION

Quantitative Analysis of the Effect of Organizational Support Initiatives on Retention of Millennial Employees

Factor Analysis for Independent Variable on Organizational Support Initiatives

Factor Analysis was carried out to describe variability among the observed variables and check for any correlated variables with the aim of reducing redundancy. Conventionally, statements scoring more than 30%, which is the minimum requirement for inclusion of variables into the final model (Hair, Black & Babin, 2010) were included in the study. Table 4.1 shows the loadings of the five variables. The higher the absolute value of the loading, the more the factor contributes to the variable. From the analysis in Table 4.1, most respondents indicated that their flexible work schedules made them reduce absenteeism at their work places with a factor component of 89.5%. The statement that followed closely was the one that indicated that employees' work schedules were flexible and made them reduce their desire to leave with a factor component of 87.3%.

The statement on the hospital having a good reward system for employees who work hard scored a factor component of 85.6%. The statement on the hospital valued the millennial employee when one recorded improved job performance scored a factor component of 81.6%. Finally the statement on the hospital had several options of showing that it cared for millennial employees' welfare scored a factor component of 73.7%. None of the statements required to be dropped since their factor components were above 30%, which is recommended threshold for inclusion of variables into the final model (Hair, Black & Babin, 2010). The effect of career

development support with R^2 value of 0.817 means that it plays a more significant role in determining retention of millennial employees by 81.7%.

Table 4.1: Component Matrix on Organizational Support Initiatives

Statements	Factor Component
Effect of employer value proposition on employee retention	0.816
Effect of employee welfare on employee retention	0.737
Effect of work schedule flexibility on employeeretention	0.895
Effect of good employee reward system on employee retention	0.873
Effect of employee support for career development on employee retention	0.856

Extraction Method: Principal Component Analysis. 3 components extracted.

Kaiser-Meyer-Olkin (KMO) Measure of Sampling Adequacy and Bartlett's Test of Sphericity on Organizational Support Initiatives

Prior to the extraction of the factors, several tests should be used to assess the suitability of the respondent data for factor analysis. These tests include Kaiser-Meyer-Olkin (KMO) Measure of Sampling Adequacy and Bartlett's Test of Sphericity. The KMO index ranges from 0 to 1, with 0.50 considered suitable for factor analysis. The Bartlett's Test of Sphericity should be significant ($p<.05$) for factor analysis to be suitable (William et al., 2010).

Table 4.2 is the result of KMO and Spherical Bartlett test. KMO is indicator for comparing correlation coefficient of observation and partial correlationcoefficient, its value ranges from 0 to 1. When its value gets closer to 1, the explanatory effect of factor analysis is stronger and when its value gets closer to 0, the model may not work well. Spherical Bartlett test can be used to judge whether correlation matrix is a unit matrix. When the KMO value is below 0.5 it is not suitable to use factor analysis (William et al., 2010). From the result of Spherical Bartlett test we should fail to reject the alternate hypothesis which means the variables have a strong association. In Table 4.2 the KMO value is 0.898 which is above the 0.5 level, so it is reasonable to use the factor analysis.

Table 4.2: KMO and Bartlett's Test Results

Kaiser-Meyer-Olkin Measure of Sampling Adequacy	.898
Batlett's Test of Sphericity	133.727
Approx. Chi- Square	8
df Sig.	0.012

Total Variance Explained

From the Total variance explained in Table 4.3, we get 4 common factors from the five indicators. The eigenvalues of the first 4 component accumulative rate is 70.35%, that's to say if we only use four factors we still get 70.35% information of the sample covariance matrix. The result meets the demand of factor analysis.

Table 4.3: Total Variance

Component		Initial Eigenvalues		Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative%	Total	% of Variance	Cumulative%	Total	% of Variance	Cumulative%
1	1.248	24.958	24.958	1.248	24.367	24.367	2.501	31.260	24.367
2	1.109	22.183	47.142	1.109	21.471	21.471	2.045	25.566	21.471
3	.977	19.50	66.712	1.654	17.013	62.851	2.002	25.024	62.851
4	.844	16.888	83.600	.611	7.499	70.350	2.036	24.021	70.350
5	.820	16.400	100.00						

Extraction Method: Principal Component Analysis.

The amount of information loss is relatively small when the number of indicators was reduced. So we can use fewer indicators to analyze the data. All the factors are significant (William, et al., 2010).

Scree Plot

The scree plot (Fig 4.1) is a graph of the eigenvalues against all the factors. The graph is useful for determining how many factors to retain. The point of interest is where the curve starts to flatten. It can be seen that the curve begins to flatten between factors 1 and 4.

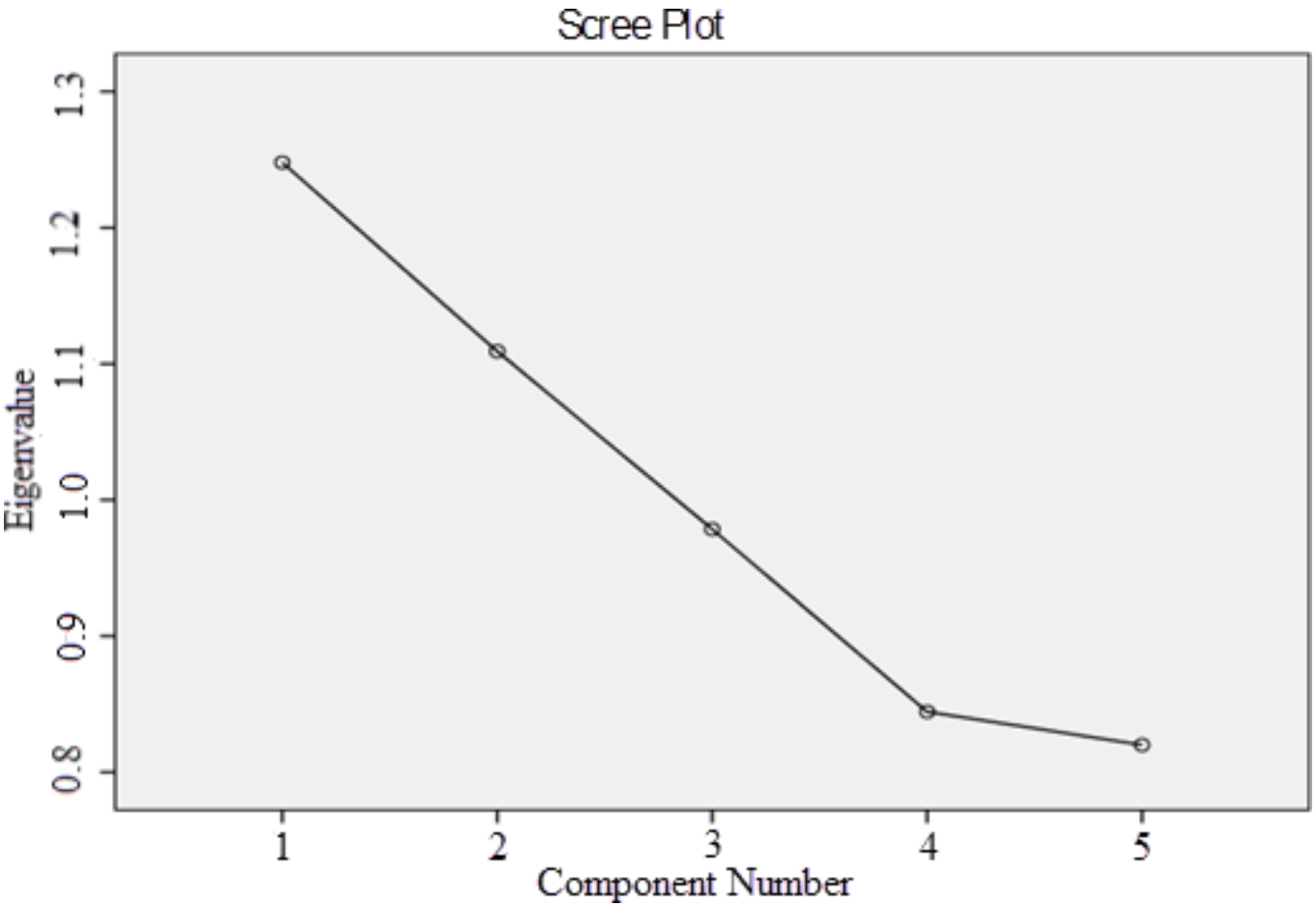

Fig 4.1: Scree plot of Organizational support initiatives

Note also that factors 3 and 4 have an eigenvalue of less than 1, so only two factors have been retained. Eigenvalue: The standardized variance associate with a particular factor. The sum of the eigenvalues cannot exceed the number of items in the analysis, since each item contributes one to the sum of variances.

From the forgoing Scree plot results it can therefore be concluded that there isa need to show a patterned matrix where organizational support initiatives items are loading. The two factors retained in the Scree plot (Fig 4.1) were subjected to regression analysis (R^2) as shown in Table 4.4.

Table 4.4: Commonalities on specific organizational support initiatives indicators

Organizational Support Initiatives indicators	Extraction (R^2)
Effect of career development support on employee retention	.817
Effect of employer value preposition on employee retention	.791

From Table 4.4, it shows that in organizational support initiatives, the effect of career development support with R^2 value of 0.817 means that it plays a more significant role in determining retention of millennial employees by 81.7%. On the other hand, hospitals with employer value preposition values its millennial employees with R^2 value of 0.791 explained retention of millennial employees in the hospitals studied by 79.1%.

Influence of Organizational Support Initiatives

The findings are shown in Table 4.5.

Table 4.5: Influence of Organizational support initiatives

	Statement	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
1	The hospital values me when I record improved performance in my job	0.7% (2)	5.3% (17)	0.9% (3)	30.6% (98)	62.5% (200)
2	The hospital has several options of showing that it cares for my welfare	0.0% (0)	0.0% (0)	2.8% (9)	36.6% (117)	60.6% (194)
3	My work schedules are flexible and make me reduce my desire to leave	9.1% (29)	3.1% (10)	0.0% (0)	27.5% (88)	60.3% (193)
4	The hospital has a good reward system for employees who work hard	0.0% (0)	0.0% (0)	0.0% (0)	36.6% (117)	63.4% (203)
5	Support from the hospital for my career development makes me continue working with this hospital	0.0% (0)	0.0% (0)	0.0% (0)	38.4% (123)	61.6% (197)

The opinion of respondents on the effect of organizational support initiatives on employee retention were again measured using a descending five point Likert scale where five (5) and one (1) represented 'strongly agree' and 'strongly disagree' opinions, respectively. A high percentage of the respondents 62.5% (200) strongly disagreed with the fact the hospitals they were working for valued them whenever they recorded exemplary performance in their duties. Similarly, 30.6% (98) disagreed with the same assertion, 5.3% (17) agreed, 0.7% (2) strongly agreed while 0.9% (3) were undecided.

The study also sought to establish by asking the respondents whether the hospitals in which the respondents were working had several options of showing that they cared for their employees. A high proportion 60.6% (194) strongly disagreed, 36.6 % (117) disagreed while 2.8% (9) were undecided on this statement. None of the respondents strongly agreed or agreed to this assertion.

Overall these findings are in line with Eisenberger et al. (1986) OS theory and report that employees perceive an organization as an important source of socio-emotional resources, such as respect, caring and tangible benefits, such as wages and medical benefits. When employees are highly regarded by the organization employees' needs for approval, esteem and affiliation are met. This shows why employees take an active interest in the regard with which they are held by their employer. This builds organizational loyalty which enhances retention of employees. The respondents' opinions were also sought to establish whether work schedules at their respective work places were flexible as to reduce their desire to leave. The results show that 9.1% (29) and 3.1% (10) respondents strongly agreed and agreed with this statement, respectively. Majority of the respondents (60.3% (193) strongly disagreed with this statement while 27.5% (88) of the respondents disagreed. None of the respondents was undecided. A high proportion of the respondents 63.4% (203) strongly disagreed with the fact that their respective work places had good reward systems for employees who work hard. The remaining proportion of 36.6%) (117) disagreed as well with this statement. These findings are in line with Adzei and Atinga (2012) who reported that dissatisfaction can lead to health workers quitting hospitals that are not highly supportive in its reward systems. Finally, the study sought to establish whether the hospitals where respondents worked encouraged their employees to continue working with them by supporting their employees in career development. All the respondents negated this statement. It was found that 61.6 % (197) strongly disagreed while 38.4% (123) disagreed.

Thematic Analysis of Organizational Support Initiatives' Influence on Retention of Millennial Employees

Millennial Employees' Responses on the Effect of Organizational Support Initiatives on Retention of Millennial Employees

Responses of millennial employees as to whether and how organizational support initiatives in their hospitals contributed to their decision to continue working in their hospitals were captured. Majority of the respondents,

60% (192) held a contrary opinion, while some 40% (128) said it does so in a positive way. Millennial employees' views on how organizational support initiatives influenced their retention are shown in Table 4.6.

Table 4.6: Millennial employees' views of organizational support initiatives' positive effect on retention of millennial employees.

Independent Variable	Supportive emergent views
Organizational support initiatives	Good reward system
	Training support for career development
	Several options of employer value proposition

Most respondents claimed that the hospitals had a fair reward system. There were rewards for the hardworking employees and provisions for salary increments at some stipulatedtimes. This made them decide to continue working in the hospitals studied. The hospitals also had ways of showing it cares for its employees. Some received desirable Christmas gifts and those who had served for at least 5 years receivedrecognition rewards for the longest serving staff in the hospitals. The hospitals also organized and paid for their retreats. This gave them opportunities to socialize and interact with their colleagues. Millennial employees also benefited from free out-patient services for themselves and family. The hospitals staffs enjoyed free tea every day and lunches on busy days.

All these support from their organizations made them desire to remain working in the hospitals studied. Hospitals' reward systems and unclear career advancement systems made them desire to leave. Long-term rewards for the longest serving employees, provision of housing, house allowance and spiritual growth contributed to some of the millennial employees' decision to stay in thehospitals. Very few respondents held the view that organizational career advancement programmes, sufficient salary for their needs and supportive supervisory culture influenced their decision to remain working for the hospital.

Interviewees' Responses on the Positive Effect of OrganizationalSupport Initiatives on Retention of Millennial Employees

The research also captured views of the administrators, supervisors and doctors(interviewees) in an interview on whether and how organizational supportinitiatives determined retention of millennial employees in private hospitals in Bomet and Kericho Counties. Their responses showed it does. Some of the themes which supported that organizational support initiatives determined retention of millennial employees were captured. These are shown in Table 4.7.

Table 4.7: Interviewees' views on organizational support initiatives positive influence on retention of millennial employees

Interviewees	Emergent supportive themes
Administrators	Hospitals contribute to their career development
	Appreciation for services rendered Being given support services when one needs them
Supervisors	Hospitals contribute to their career development
	Appreciation for services rendered
	Being given support services when one needs them
	Adequate salary
Doctors	Hospitals contribute to their career development
	Recognition of staff

Their responses showed that the hospitals contributed to millennial employees' career development. The hospitals organized seminars, trainings and gave them opportunities to attend. The hospitals also had institutionalized mentorshipprogrammes. The hospitals encouraged them to further their studies and some were even sponsored. Career development support made many of them to feel wanted and valued and therefore contributed to their decisions to continue working in the hospitals. The hospitals appreciated the work done by millennialemployees and this encouraged them to stay in order to continue rendering valued services to the patients.

Millennial employees enjoyed support services given to them by the hospitals studied. Some were given time offs (off duty) to rest after tedious hospital work. Some enjoyed free days off to attend to their urgent issues as expressed by some views, "Being given day offs to attend to urgent issues and leaves to prevent burn out". They enjoyed free tea daily, soft loans and salary advances. The hospitals also provided housing to the employees and those who needed could use them. Millennial employees also enjoyed free internet service as saidby some interviewees "Internet is free but for the responsible employees" Theywere also sponsored for trips and tours. All these support services made millennials to desire to continue working in the hospitals, hence determined their retention. Some claimed that the hospitals paid them adequate salaries sufficient for their personal needs. This impacted on their decision to continue working in the hospital.

Common Themes of the Effect of Organizational Support Initiatives on Retention of Millennial Employees

Some common themes emerged from the responses of millennial employees and interviewees on how organizational support initiatives affected retention of millennial employees in Bomet and Kericho Counties. The common themes areshown in Figure 4.2.

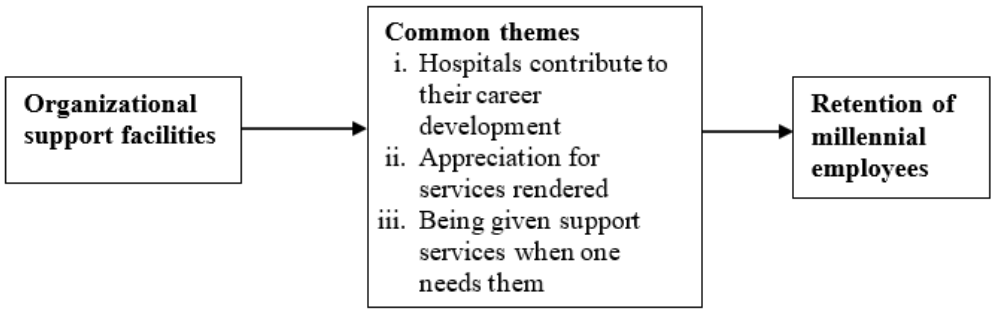

Figure 4.2: Common themes of the effect of organizational support initiatives on retention of millennial employees.

Interviewees' responses were corroborated with those of millennial employees. They all agreed that organizational support initiatives affected retention of millennial employees in the hospitals studied. Majority of them were of the idea that hospital career support programmes, appreciation of millennial employees for the services rendered and the support services given to millennials affected their retention positively. Many of them choose to continue working in the hospital because of these services. It was therefore concluded that organizational support initiatives affected retention of millennial employees in private hospitals in Bomet and Kericho Counties.

Hypothesis Testing

H01: There is no statistical significant relationship between Organizational support initiatives and retention of millennial employees in private hospitals in Bomet and Kericho Counties.

A Karl Pearson Product Moment Correlation Coefficient was computed using a two tailed test at 0.01 significance level to determine the level of correlation between organizational support initiatives and retention of millennial employees in Bomet and Kericho Counties (Table 4.8).

Table 4.8: Correlation analysis results between organizational support initiatives and employee retention

Variable	Coefficient type	Organizational support initiatives	Employeeretention
Organizational support initiatives	Pearson Correlation	1	
	Sig. (2-tailed)		
Employee retention	Pearson Correlation	0.777	1
	Sig. (2-tailed)		

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

The results indicate that the calculated p-value was less than the significance level of 0.01. Therefore, there exists a significant relationship between organizational support initiatives and retention of millennial employees at their work places. The r-value of 0.777 indicates that there is a strong correlation between organizational support initiatives and retention of millennial employees in private hospitals in Bomet and Kericho Counties. The alternate hypothesis therefore failed to be rejected which states that organizational support initiatives determine retention of millennial employees in private hospitals in Bomet and Kericho Counties. Organizational support initiatives are therefore an important attribute that significantly affects retention of millennial employees at their work places. Just like Eisenberger et al., (1986) reported in OS theory that employees perceive an organization as an important source of socio-emotional resources, such as respect, caring and tangible benefits, such as wages and medical benefits. The study findings are in agreement with Adzei and Atinga (2012) report that dissatisfaction can lead to health workers quitting hospitals that are not highly supportive in its reward systems. Results of this research showed that unsupportive career advancement programmes and inflexible work schedules contributed to millennial employees' decision to quit the hospitals. A unit increase of Organizational support initiative s contributed to 42% increase in retention of millennial employees when all the other factors studied were kept constant. The findings further indicated that there existed a strong correlation of 0.777 between Organizational support initiatives and retention of millennial employees in private hospitals studied. Organizations should therefore strive to meet these demands in order to ensure employee retention. When employees are highly regarded by the organization employees' needs for approval, esteem and affiliation are met and these reduce turnover rates.

CONCLUSION AND RECOMMENDATIONS

Descriptive and inferential statistics results established that Organizational support initiative s; positively influences retention of millennial employees in private hospitals in Bomet and Kericho Counties thus increasing the chances of retention. It explains 42% of the variability in retention of millennial employees in private hospitals in Bomet and Kericho Counties. The studyfurther indicates that the hospitals that are able to retain their millennial employees are as a result of organizational career advancement programmes, sufficient salaries for employees to meet their needs and supportive supervisoryculture. Long-term rewards for the longest serving employees, provision of housing, house allowance and spiritual growth also influenced their decision to continue working in the hospitals positively.

On the contrary those hospitals which were not able to retain millennial employees was due to the hospitals' poor reward and unclear career advancement systems, which made millennial employees to desire to leave. Failure of hospitals to value millennial employees whenever they recorded exemplary performance in their duties, not showing that it cared for them and inflexible work schedules increased their absenteeism and ultimately turnover. The regression model fitted, statistically predicts the dependent variable significantly well. The finding therefore rejected the null hypothesis and therefore the alternate hypothesis **Ha_4;** which states that Organizational support initiative s determine retention of millennial employees in private hospitals in Bomet and Kericho Counties at 95% Confidence interval adopted. This meant that there was a significant relationship between Organizational support initiative s and retention of millennial employees in private hospitals studied. The overall implication was that there exists a positive correlation of 0.777 between Organizational support initiatives and retention of millennial employees in private hospitals under study.

The hospital management should advocate for improvements of Organizational support initiative s so as to enhance retention of millennial employees in their hospitals. Hospitals need to enhance the use of long-term rewards for thelongest serving employees, provision of housing, house allowance and spiritualgrowth which contributed to some of the millennial employees' decision to stayin the hospital. Based on the findings of the current study, retention of millennial employees was linked to Organizational support initiative s in three ways. First, hospitals which did not value employees for recording exemplary performance in their duties experienced labour turnover of millennialemployees. Second, turnover of millennial employees was associated with lack of several appealing options of showing that the current hospitals valued their employees which led to them desiring to leave the hospitals. Thirdly, lack of career development support made millennial employees leave the hospitals.

RECOMMENDATIONS

The study concluded that the private hospitals in Bomet and Kericho Counties in Kenya face retention of millennial employees' problem. The study strongly recommends that:

The hospital management should develop innovative and competitive intervention strategies which use organizational support initiatives studied to build sustainable retention of millennial employees.

The hospitals should develop appropriate reward systems which value high performance, utilize flexible work schedules and have severalappealing options of showing it cares for their millennial employees.

Develop organizational support policies which enhance and facilitate retention of millennial employees.

REFERENCES

1. Adzei, F.A., & Atinga, R. A. (2012). Motivation and retention of Health workers in Ghana's district hospitals: addressing the critical issues.Journal of Health Organization Management, 26 (4) (date online 3/7/2012).
2. Burke, R.J. (2001). Restructuring stressors and perceived hospitaleffectiveness. Nursing Leadership, 14(1), 21-26.
3. Cappelli, P. (2000). A Market Driven Approach to Retaining Talent. HarvardBusiness Review, January- February, 103-111.
4. Creswell, J. W. (2011). Research design: Qualitative, quantitative, and mixed Method approaches (3rd Ed.) SAGE Publications. India Pvt Ltd.
5. Daily Nation (2012, September 10). Doctors to strike as wage unrest widens.Daily Nation. Nairobi: Nation Media Group.
6. Eisenberger, R., Huntington, R., Hutchison, S. & Sowal (1986). Perceived organizational support.Journal of Applied Psychology, 71 (7), 500-507.
7. Espinoza, C., Ukleja, M., & Rusch, C. (2011). Core competencies for leadingtoday's workforce.Leader to Leader, 18-23.
8. Finnegan, D. (2011). Management predictive human capital information drives strategic decisions. Retrieved October 17, 2012, from http://www.dashboardinsight.com/articles/business-performance-aspx.
9. Ghosh, K. & Sahney, S. (2010). Impact of socio-technical system on managerial retention. Journal of Modeling in Management, l 6 (1),2011.
10. Goren, B. (2009). Retention models. Retrieved October 17, 2012 from http: // www.sas.com.
11. Hair, J. F. Jr., Black, W. C., Babin, B. J., & Anderson, R. E. (2010).Multivariate DataAnalysis. Upper Saddle River, NJ: Pearson Prentic Hall.
12. Hauw, S. D., & Vos, A. D. (2010). Millennials' career perspective and psychological contract expectations: Does the recession lead to loweredexpectations? HRM Centre, 294-302.
13. Kerlinger, F. N. (1983). Foundation of Behavioural Research. Delhi: Holt, Rinehart and Winston.
14. Kowske, B., Rasch, R., & Wiley, J. (2010). Millennials' (lack of) attitude problem: An empirical examination of generational effects on work attitudes. Kenexa Research Institute, 1, 265-279. Retrieved July 28,2011.
15. London Business School. (2010). The reflexive generation: Youngprofessionals' perspectives on work, career, and gender. London Business School, 1-50.
16. Maslow, A.H. (1943). A theory of human motivation. Psychological Review,50, 370-396.
17. Mokaka, E., Oosthuizen, M., M. J., & Ehlers, V.J. (2012). Retaining Professional nurses in South Africa; nurse manager's perspectives.Retrieved October 17, 2012, from http:/hdl.handle.net/105000/6848.
18. National Human Resource for Health, (2010). Annual Report. Nairobi: Government Printing Office.
19. Ndetei, D.M. Khasakhala, L. & Omollo, J.O. (2008). Incentives for health worker retention: An assessment of current practice. Africa MentalHealth Foundation (AMHF), Kenya: Institute of Policy Analysis & Research (IPAR).
20. Rhoades, L., & Eisenberger, R. (2002). Perceived organizational support: A review of the literature. Journal of Applied Psychology, 87(4), 698-714.

21. Riegel, E. M.(2013).Orienting a new generation of nurses: Expectations of the Millennial new graduate. Open Journal of Nursing, 2013, 3, 461-466. (http://www.scirp.org/journal/ojn/).
22. Rossman, G., & Wilson, B. (1991). Numbers and Words Revisited: Being "Shamelessly Eclectic.". Evaluation Review, 9(5), 627–664.
23. Sujansky, J. & Ferri-Reed, J. (2009). Keeping the millennials: Why companies are losing billions in turnover to this generation and what to do about it.New Jersy, John Wiley & Sons, Inc.
24. Tenwek Hospital Annual Report (2010). Message from the Chief Executive Officer.Tenwek Hospital.
25. Williams, B., Brown, T., & Onsman, A. (2010). Exploratory factor analysis: A five-step guide for novices. Australasian Journal of Paramedicine, 8(3).
26. Bihani, A., & Dalal, K. (2014). A review into talent management, talent retention and its scope for learning organizations. International Journal of Knowledge Management and Practices, 2(1), 1-11. Retrieved from http://www.publishingindia.com.
27. Dasgupta, M. (2015). Exploring the relevance of case study research. Vision, 19(2), 147-160. doi:10.1177/0972262915575661.
28. Deery, M., & Jago, L. (2015). Revisiting talent management, work-life balance and retention strategies. International Journal of Contemporary Hospitality Management, 27(3), 453–472. doi:10.1108/IJCHM-12-2013-0538.
29. DeFrank-Cole, L., & Tan, S. J. (2017). Reimagining leadership for millennial women: Perspectives across generations. Journal of Leadership Studies, 10(4), 43-46. doi:10.1002/jls.21502.
30. Fishman, A. A. (2016). How generational differences will impact America's aging workforce: strategies for dealing with aging Millennials, Generation X, and Baby Boomers. Strategic HR Review, 15(6), 250–257. doi:10.1108/SHR-08-2016-0068.
31. Gordon, P. A. (2017). Exploring generational cohort work satisfaction in hospital nurses.Leadership in Health Services, 30(3), 233-248. doi:10.1108/LHS-02-2016-0008.
32. Keeling, S. (2003). Advising the Millennial Generation. National Academic Advising
33. Association Journal, 23(1 & 2), 30-36. Retrieved from https://www.nacada.ksu.edu
34. Koppel, J., Deline, M., & Virkstis, K. (2017). The Case for Focusing on Millennial Retention. Journal of Nursing Administration, 47(7-8), 361-363. doi:10.1097/NNA.0000000000000495
35. Kroth, A., & Young, S. J. (2014). New professionals, new desires: What Millennials want in their work. Recreational Sports Journal, 38(1), 23-32. doi:10.1123/rsj.2013- 0013
36. Madden, L., Mathias, B. D., & Madden, T. M. (2015). In good company. Management Research Review, 38, 242-263. doi:10.1108/MRR-09-2013-0228
37. Mensik, J., & Kennedy, J. (2016). Strategic design: Filling future nursing leadership gaps. Nurse Leader, 14, 130-133. doi:10.1016/j.mnl.2015.12.007
38. Nolan, L. S. (2015). The Roar of Millennials: Retaining Top Talent in the Workplace. Journal of Leadership, Accountability & Ethics, 12(5), 69-75. Retrieved from https://search.ebscohost.com
39. Park, S. H., & Boyle, D. K. (2015). How Hospitals View Unit-Level Nurse Turnover Data Collection. JONA: The Journal of Nursing Administration, 45(2), 100–106. doi:10.1097/NNA.0000000000000163.
40. Rhoades, L., & Eisenberger, R. (2002). Perceived organizational support: A review of the literature. Journal of Applied Psychology, 87(4), 698–14. https://doi.org/10.1037/0021-9010.87.4.698.
41. Riegel, E. M. (2013). Orienting a new generation of nurses: Expectations of the millennial new graduate. Open Journal of Nursing, 3, 461–466. doi:10.4236/ojn.2013.37062
42. Sherrod, B. (2007). Using technology to attract the next generation. Nursing Management, 38(12), 8. doi:10.1097/01.NUMA.0000303863.65396.7b.
43. Sims, S., Hewitt, G., & Harris, R. (2015). Evidence of a shared purpose, critical reflection, innovation and leadership in interprofessional healthcare teams: A realist synthesis. Journal of Interprofessional Care, 29(3), 209-215. doi:10.3109/13561820.2014.941459
44. Solaja, O. M., & Ogunola, A. A. (2016). Leadership style and multigenerational workforce: A call for workplace agility in Nigerian public organizations. Leadership, 21, 46-56. Retrieved from https://www.researchgate.net/profile/
45. Taderera, B. H., Hendricks, S., & Pillay, Y. (2016). Health personnel retention strategies In a peri-urban community: An exploratory study on Epworth, Zimbabwe. Human Resources for Health, 14(1), 1-14. doi:10.1186/s12960-016-0113-z
46. Tourangeau, A., Thomson, H., Cummings, G., & Cranley, L. (2013). Generation-specific incentives and

disincentives for nurses to remain employed in acute care hospitals. Journal of Nursing Management, 21(3), 473-482. doi:10.1111j.1365- 2834.2012.01424.x

47. Twigg, D., & McCullough, K. (2014). Nurse retention: A review of strategies to create and enhance positive practice environments in clinical settings. International Journal of Nursing Studies, 51(1), 85-92. doi:10.1016/j.ijnurstu.2013.05.015
48. Ulep, K. (2018). The nurse leader's pivotal role in retaining millennial nurses. Journal of Nursing Administration, 48(12), 604-608. doi:10.1097/NNA.0000000000000689
49. U.S. Bureau of Labor Statistics (2018). Employee tenure in 2018. Retrieved from https://www.bls.gov/news.release/pdf/tenure.pdf
50. Yarbrough, S., Martin, P., Alfred, D., & McNeill, C. (2016). Professional values, job satisfaction, career development, and intent to stay. Nursing Ethics, 24, 1-11. doi:10.1177/0969733015623098.