

TALENT MANAGEMENT STRATEGIES AND THEIR PERCEIVED EFFECTIVENESS: A COMPARATIVE STUDY ON PARAMEDICAL EMPLOYEE RETENTION IN PUBLIC AND PRIVATE HOSPITALS IN OMAN'S HEALTHCARE SECTOR

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ABSTRACT

The success of the paramedical sector relies on the recruitment, retention, and growth of professionals like healthcare practitioners, nurses, laboratory technicians, and radiographers. In this context, it is obvious that the hospital's performance is dependent on managing these talents (paramedical employees), which requires further investigation. The main objective of the study is to perform a comparative analysis of talent management strategies implemented in Oman's healthcare sector, with an emphasis on paramedical employees from public and private hospitals, and assess their impact on employee retention.

The study employs a primary research design, gathering data from 200 paramedical staff in 10 public and 21 private hospitals in Muscat through quota sampling. The study found that significant differences were observed in areas like career growth and skill development, promoting diversity and inclusion, employee engagement, and meeting the needs of paramedical employees between public and private hospitals. Public hospitals also face challenges in fair evaluation and talent demonstration, whereas private hospitals face skills shortages, financial pressures, and communication issues. Also, the correlation analysis indicates that recognition of work (0.78) is highly significant for employee retention, followed by work-life balance (0.69), employee engagement (0.61), and leadership development (0.60) compared to other talent management strategies.

The study reveals that talent management practices highly influence employee retention, and the level of perceived effectiveness and their opinion on talent management is different among public and private hospitals, which also partially mediates the association between talent management strategies and employee retention.

KEYWORDS

talent management strategies, paramedical employee, employee retention, Oman healthcare sector, perceived effectiveness, public and private hospitals.

INTRODUCTION

The healthcare industry plays a critical role in society, focusing on preserving and promoting human life. However, a significant challenge lies in balancing the demands of healthcare delivery with the needs and aspirations of healthcare professionals [1]. Achieving excellence in patient care requires acknowledging that healthcare professionals are diverse individuals with unique skills and ambitions [2, 3]. Thus, talent management (TM) emerges as a strategic and systematic approach to identifying, developing, and maximising employees' potential within healthcare organisations. By aligning professional development with organisational goals, TM not only fosters employee welfare but also enhances the quality of patient care [4].

In Oman, the healthcare sector faces a significant issue in retaining paramedical staff, a challenge echoed globally across various organisations [5]. Paramedical professionals, including nurses, laboratory technicians, pharmacists, and medical assistants, are vital to the effective functioning of healthcare systems [6]. Therefore, understanding the effectiveness of TM strategies specifically designed for paramedical staff in both public and private hospitals is crucial for ensuring workforce stability and improving healthcare outcomes.

Moreover, the National Center for Statistics Information (NCSI) report shows that Omani staff outnumber foreign staff in public hospitals, while foreign staff outnumber Omani employees in private hospitals [7]. This demographic difference impacts TM strategies, as the ratio of Omani to foreign staff affects the effectiveness of these practices. This understanding is significant for evaluating TM practices, employees' level of perceived effectiveness, and their impact on employee retention in both public and private hospitals. Moreover, high employee turnover in healthcare organisations is a global issue influenced by factors such as work-related stress, burnout, long hours, and limited career advancement opportunities.

Prior research and dissertations on the healthcare system in Oman have identified areas for improvement in personnel levels, transitions, and responses to errors [8]. The existing body of literature reports that TM highly enhances employee engagement and job satisfaction [9], leadership skills, and performance [10]. Most of these studies focused primarily on hospital performance [1]. Robust TM practices in hospitals lead to higher employee retention and satisfaction [11]. Moreover, TM has often been studied with other significant factors, such as leadership, that often affect employee engagement and hospital performance [6].

Thus, implementing comprehensive TM strategies can lead to increased employee job satisfaction and reduced turnover rates in public hospitals [8]. Moreover, there exists a positive correlation between TM practices and improved patient outcomes [12]. Al-Jabri (2015) has identified a positive association between effective TM and improved financial performance in private hospitals [13]. Workforce dynamics within any organisation are greatly influenced by TM, which includes recruitment, development, and retention programs. Thus, a customised approach to TM is required due to the distinctive characteristics of the healthcare industry, including its demanding roles and specialised skill sets.

RESEARCH GAP

Previous studies have provided varying levels of information. However, there is a lack of investigation into the impact on employee retention, and no study has carried out a comparative analysis between public and private hospitals. Additionally, studies focusing on paramedical staff in the Sultanate of Oman are very limited. A notable research gap persists in the literature, with inadequate emphasis on intermediate and lower-tier paramedical personnel and their perceived effectiveness of TM as the primary subject of research. Furthermore, some studies have reported findings with only a small sample size and potential bias in participant selection.

RESEARCH OBJECTIVES

To advance TM strategies and optimise the paramedical workforce, thereby improving healthcare services in Oman, this study intends to address the following specific objectives:

- To assess the level of perceived effectiveness of TM practices among paramedical employees in both public and private hospitals within Oman's healthcare sector.
- To compare TM strategies for paramedical employees in public and private hospitals in Oman's healthcare sector.
- To evaluate the impact of TM strategies on the retention of paramedical employees in Oman's healthcare sector, considering the mediating effect of employees' level of perceived effectiveness.
- To gather insights into the opinions of paramedical employees regarding TM strategies that are particularly effective in public and private hospitals in Oman.

METHODS

RESEARCH TYPE

This study used a mixed methodology, employing a cross-sectional design to collect data directly from employees and combining quantitative and qualitative methodologies for empirical research. Here, quantitative data provides broad analysis, while qualitative data provides in-depth insights.

POPULATION AND SAMPLE

The research targeted 46,557 paramedical employees working in 10 public hospitals and 21 private hospitals in Muscat, regardless of their age, gender, etc. Eligible participants were invited to participate through an online survey using a structured questionnaire distributed via Google Forms to paramedical employees in both public and private hospitals. The survey link was disseminated using a snowball recruitment approach, whereby initial participants were asked to share the questionnaire with their colleagues. To establish a sample that fairly represents the whole population of paramedical professionals working in Oman's healthcare sector, the non-probability sampling approach of quota sampling was employed [14]. Thus, a sample of 200 paramedical staff, covering 100 from public and 100 from private hospitals, was carefully selected for a comprehensive representation of the study population. This exceeds the minimum sample size of 138 estimated participants based on a population of 47,000 paramedical employees, a 5% margin of error, and a 95% confidence interval.

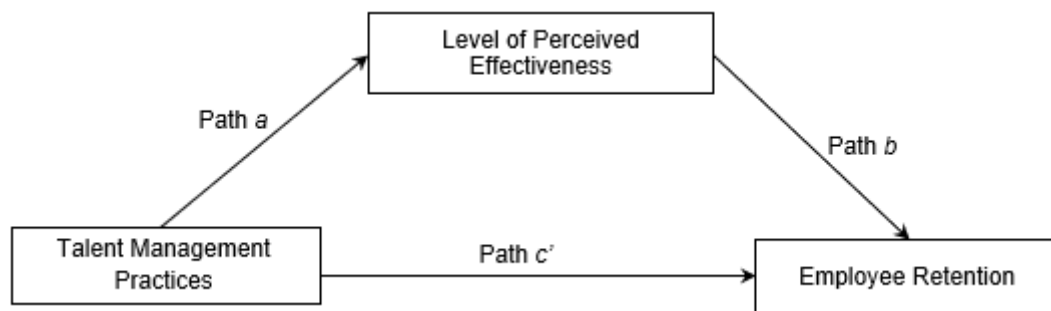
CONCEPTUAL FRAMEWORK

The proposed conceptual framework analyses the relationship between TM strategies implemented and employee retention in public and private hospitals within the healthcare sector. In this framework, TM serves as the independent variable, while the level of perceived effectiveness of TM strategies among paramedical employees acts as the mediating variable. The impact of these factors on employee retention, the dependent variable, is assessed to understand how effective TM practices contribute to retaining paramedical staff.

Furthermore, the study includes a comparative analysis of paramedical employees' experiences in public versus private hospitals, recognising that different organisational contexts may influence the effectiveness of TM strategies. This comparative analysis aims to uncover distinct patterns and outcomes related to employee retention in both public and private hospital settings.

Figure 1 illustrates the conceptual framework and provides a visual representation of the interrelationships between these variables. This visualisation helps in understanding how effective TM strategies can lead to improved employee retention by considering the mediating role of employees' level of perceived effectiveness.

FIGURE 1. PROPOSED CONCEPTUAL FRAMEWORK



RESEARCH HYPOTHESIS

The following hypotheses are developed and tested:

H1: There is a significant difference in the level of perceived effectiveness of TM practices among paramedical employees in public and private hospitals in Oman.

H2: There is a significant difference in the implementation of various TM strategies between public and private hospitals in Oman's healthcare sector.

H3: The implementation of TM strategies has a significant impact on the retention of paramedical employees in Oman's healthcare sector, with the level of perceived effectiveness serving as a mediating factor in this relationship.

H4: There is a significant difference in the opinions of paramedical employees regarding the effectiveness of TM practices between public and private hospitals in Oman.

RESEARCH INSTRUMENT

The study employed a structured questionnaire as the primary data collection tool to systematically explore and evaluate the TM processes for paramedical staff in the healthcare industry. Data were collected using a 5-point Likert scale, enabling nuanced insights into participants' perceptions and experiences.

Questionnaire Structure: The questionnaire comprises 33 questions, including 30 closed-ended questions for quantitative analysis and 3 open-ended questions for qualitative analysis. The closed-ended questions are categorised as follows: 10 on talent management practices, 10 on the employees' level of perceived effectiveness, and 10 on employee retention. Additionally, the open-ended questions focus on specific TM strategies or programs that are effective for paramedical employees, challenges faced regarding TM in the healthcare sector, and specific suggestions on TM strategies that should be emphasised or valued in hospitals. Appendix 1 presents the final survey questionnaire.

The questionnaire was developed by integrating components from relevant studies identified through a comprehensive literature review. Instruments were drawn from previous works on TM strategies by Dzimbiri and Molefi (2021) [15] and Obeidat et al. (2018) [16], employee retention by Phan et al. (2022) [10], and the perceived effectiveness of TM strategies by Yassin and Obeidat (2020) [17], Al Aina and Atan (2020) [18], and El Dahshan et al. (2018) [19] to ensure validity and reliability.

Ten TM strategies identified from existing literature are included in the analysis: talent acquisition, development and career growth, onboarding process, rewarding employees, skill development, promoting diversity and inclusion, employee engagement, employee retention, adapting strategies based on trends, and meeting the needs of paramedical employees. These strategies provide a framework for understanding effective TM practices within the context of the research model.

Expert Evaluation: Two experts extensively evaluated the survey questions to enhance their effectiveness. This process involved gathering expert feedback, conducting pilot testing with paramedical employees, and revising questions based on both expert and participant feedback. The experts made sure that the questionnaire fit with the study's main ideas and accurately measured aspects of TM practices, level of perceived effectiveness, and employee retention to produce accurate data for the study.

Ethical Considerations: The online survey targeted paramedical employees in Oman's healthcare sector, collecting data from both public and private hospitals via Google Forms. Participation was voluntary, and informed consent was obtained electronically from all participants on the first page of the survey prior to data collection. Formal approval from an institutional research ethics committee was not required for this study, as it involved anonymous survey data and did not collect any personally identifiable information, in accordance with applicable national research ethics guidelines, including the National Health and Medical Research Council (NHMRC) ethical standards. Participant anonymity and confidentiality were preserved throughout the study, and participants were informed of their right to withdraw at any stage without penalty.

This structured approach ensures that the collected data directly addresses the research model's objectives: assessing the level of perceived effectiveness of TM practices, comparing strategies in different hospital types, and evaluating the impact of TM on employee retention while considering employees' perceptions.

DATA ANALYSIS

To achieve the study objectives, various data analysis approaches - including quartiles, correlation, mediation analysis, independent t-tests, and sentiment analysis - were employed, with results presented in tables and graphs for clarity and interpretation. Specifically, the empirical analysis was conducted using SPSS, a statistical software package for data analysis. Various methods were applied to address each research objective: 1) The level of perceived effectiveness of TM practices among paramedical employees was assessed using the quartile method; 2) TM strategies in public and private hospitals were compared through an independent t-test; and 3) the impact of TM and level of perceived effectiveness on employee retention was evaluated using correlation and mediation analyses. Additionally, Orange software facilitated a comprehensive analysis of paramedical employees' perceptions of effective TM strategies through sentiment analysis.

RESULTS

RELIABILITY STATISTICS

To begin with, the analysis involves conducting a reliability test using SPSS, which assesses the internal consistency and reliability of a measurement instrument. Each study variable, including TM practices (10 items), level of perceived effectiveness (10 items), and employee retention (10 items), undergoes analysis. Table 1 presents the results of the reliability statistics. The results indicate that all variables demonstrate a high value of Cronbach's alpha and an overall reliability statistic of 0.932, suggesting strong reliability on the measurement scale.

TABLE 1. RELIABILITY TEST

Study Variables	Cronbach's Alpha	No. of Items
Talent Management Practices	0.834	10
Level of Perceived Effectiveness	0.847	10
Employee Retention	0.823	10
Overall	0.932	30

Moreover, the reliability and validity of qualitative data for the 3 open-ended questions were also assessed through expert reviews of the responses to open-ended questions. Internal consistency was evaluated by categorising the responses into themes and assessing the degree of agreement among the experts. Furthermore, it also confirmed that the responses are representative of the constructs being measured, enhancing the trustworthiness of the findings.

Further, Table 2 provides the distribution of respondents who participated in the study. Most of the respondents are full-time employees (66.5%) with middle-level job positions (54%), aged between 25-44 (67.5%), holding bachelor's degrees (70%), and possessing 5-20 years of experience (60%). They are highly involved in direct patient care (86.5%), with a majority being female (56.5%). Furthermore, the analysis reveals that 62.5% of employees report satisfaction with their jobs, while 66% are likely to recommend their workplace. These findings underscore the level of job satisfaction and validate the respondents' perspectives in the study.

TABLE 2. DEMOGRAPHIC CHARACTERISTICS OF OMAN PARAMEDICAL EMPLOYEES IN THE STUDY

Demographic Factors	Values	Frequency	Percentage
Gender	Male	87	43.5%
	Female	113	56.5%
Age	18-24 years	44	22%
	25-34 years	69	34.5%
	35-44 years	66	33%
	45-54 years	19	9.5%
	55 years or above	2	1%
Education Level	High school degree or equivalent	6	3%
	Diploma degree	24	12%
	Bachelor's degree	140	70%
	Graduate degree	19	9.5%
	Ph.D. or higher	11	5.5%
Job Title or Position	Senior Level	36	18%
	Middle level	108	54%
	Entry level	56	28%
Working Experience	Less than 5 years	54	27%
	5-10 years	62	31%
	11-20 years	58	29%
	21-30 years	23	11.5%
	More than 30 years	3	1.5%
Employment type	Full-time	133	66.5%
	Part-time	29	14.5%
	Contract	29	14.5%
	Temporary	9	4.5%
Involvement in Patient Care	Yes	173	86.5%
	No	27	13.5%
Job Satisfaction Level	Very Satisfied	56	28.0%
	Satisfied	69	34.5%
	Neutral	65	32.5%
	Dissatisfied	1	0.5%
	Very Dissatisfied	9	4.5%

QUARTILE ANALYSIS ON THE LEVEL OF PERCEIVED EFFECTIVENESS OF TM PRACTICES

To address the first objective, the responses to the 10 items measuring the level of perceived effectiveness are categorised into three levels: low, medium, and high, as detailed in Table 3. The study evaluates the level of perceived effectiveness of TM practices in Oman's healthcare sector, finding a medium level of effectiveness overall. However, there are significant variations in the level of perceived effectiveness of TM practices between public and private hospitals.

Paramedical employees in public hospitals perceive TM practices as having medium to low effectiveness, while those in private hospitals perceive them as medium to high effectiveness. These findings support the acceptance of H1.

TABLE 3. LEVEL OF PERCEIVED EFFECTIVENESS OF TM PRACTICES

Level	Level of Perceived Effectiveness in %		
	Public Hospitals	Private Hospitals	Overall
Low Level	38	14	26
Medium Level	39	47	43
High Level	23	39	31

INDEPENDENT T-TEST FOR THE COMPARISON OF TM STRATEGIES

To achieve the second objective, the study employed an independent sample t-test to compare the means of two distinct groups for ten items related to TM strategies. Table 4 presents the results of the interdependent sample t-test.

TABLE 4. RESULTS FOR INDEPENDENT T-TEST

Items	Equal Variances	Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval	
									Lower	Upper
TM1	Assumed	0.014	0.907	-0.657	198	0.512	-0.070	0.107	-0.280	0.140
	Not Assumed			-0.657	197.682	0.512	-0.070	0.107	-0.280	0.140
TM2	Assumed	18.029	0.000	-1.040	198	0.300	-0.110	0.106	-0.319	0.099
	Not Assumed			-1.04	175.122	0.300	-0.110	0.106	-0.319	0.099
TM3	Assumed	2.672	0.104	-1.469	198	0.143	-0.150	0.102	-0.351	0.051
	Not Assumed			-1.469	184.023	0.144	-0.150	0.102	-0.351	0.051
TM4	Assumed	3.023	0.084	-2.935	198	0.004	-0.330	0.112	-0.552	-0.108
	Not Assumed			-2.935	188.542	0.004	-0.330	0.112	-0.552	-0.108
TM5	Assumed	11.731	0.001	-1.261	198	0.209	-0.110	0.087	-0.282	0.062
	Not Assumed			-1.261	185.715	0.209	-0.110	0.087	-0.282	0.062
TM6	Assumed	9.204	0.003	-4.103	198	0.000	-0.450	0.110	-0.666	-0.234
	Not Assumed			-4.103	181.035	0.000	-0.450	0.110	-0.666	-0.234
TM7	Assumed	4.450	0.036	-1.963	198	0.051	-0.230	0.117	-0.461	0.001
	Not Assumed			-1.963	185.739	0.051	-0.230	0.117	-0.461	0.001
TM8	Assumed	2.162	0.143	-1.917	198	0.057	-0.210	0.110	-0.426	0.006
	Not Assumed			-1.917	190.719	0.057	-0.210	0.110	-0.426	0.006
TM9	Assumed	0.127	0.722	-1.356	198	0.177	-0.130	0.096	-0.319	0.059
	Not Assumed			-1.356	197.792	0.177	-0.130	0.096	-0.319	0.059
TM10	Assumed	11.765	0.001	-3.189	198	0.002	-0.370	0.116	-0.599	-0.141
	Not Assumed			-3.189	175.117	0.002	-0.370	0.116	-0.599	-0.141

Note: TM1: Talent Acquisition; TM2: Development and Career Growth; TM3: Onboarding Process; TM4: Rewarding Employees; TM5: Skill Development; TM6: Promoting Diversity and Inclusion; TM7: Employee Engagement; TM8: Employee Retention; TM9: Adapts Strategies based on Trends; TM10: Needs of Paramedical Employees

The t-test analysis indicates no significant difference in TM strategies between public and private hospitals in areas such as talent acquisition, onboarding, employee rewards, retention, and adapting strategies, leading to the rejection of H2 for these items. However, significant differences are observed between public and private hospitals in TM strategies

related to career growth, skill development, diversity promotion, employee engagement, and meeting paramedical employee needs, thereby supporting accepting H2 for these TM strategies.

CORRELATION & MEDIATION ANALYSIS ON EMPLOYEE RETENTION

To address the third objective, the collected responses for the ten items related to employee retention with TM were analysed statistically using correlation analysis. Pearson correlation was employed to evaluate the relationship between various TM elements related to employee retention, including workforce planning (WP), employee engagement (EE), performance management (PM), career development (CD), recognition and rewards (RR), work-life balance (WLB), leadership development (LD), training and development (TD), diversity and inclusion (DI), and employee well-being (EW) as presented in Table 5.

TABLE 5. CORRELATION BETWEEN TM STRATEGIES RELATED TO EMPLOYEE RETENTION

TM Variables	Details	TM Variables										
		WP	EE	PM	CD	RR	WLB	LD	TD	DI	EW	ER_AVG
WP	Correlation	1	.250**	.238**	.352**	.434**	.442**	.245**	.309**	.349**	.243**	0.577**
	Sig. (2-tailed)		<.000	<.001	<.000	<.000	<.000	<.000	<.000	<.000	<.001	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
EE	Correlation	.250**	1	.409**	.322**	.469**	.387**	.288**	.260**	.287**	.266**	0.608**
	Sig. (2-tailed)	<.000		<.000	<.000	<.000	<.000	<.000	<.000	<.000	<.000	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
PD	Correlation	.238**	.409**	1	.292**	.481**	.381**	.316**	.248**	.197**	.260**	0.568**
	Sig. (2-tailed)	<.001	<.000		<.000	<.000	<.000	<.000	<.000	<.005	<.000	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
CD	Correlation	.352**	.322**	.292**	1	.459**	.425**	.369**	.255**	.271**	.269**	0.599**
	Sig. (2-tailed)	<.000	<.000	<.000		<.000	<.000	<.000	<.000	<.000	<.000	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
RR	Correlation	.434**	.469**	.481**	.459**	1	.486**	.494**	.503**	.513**	.443**	0.780**
	Sig. (2-tailed)	<.000	<.000	<.000	<.000		<.000	<.000	<.000	<.000	<.000	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
WLB	Correlation	.442**	.387**	.381**	.425**	.486**	1	.375**	.249**	.215**	.296**	0.688**
	Sig. (2-tailed)	<.000	<.000	<.000	<.000	<.000		<.000	<.000	<.002	<.000	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
LD	Correlation	.245**	.288**	.316**	.369**	.494**	.375**	1	.456**	.298**	.240**	.604**
	Sig. (2-tailed)	<.000	<.000	<.000	<.000	<.000	<.000		<.000	<.000	<.001	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
TD	Correlation	.309**	.260**	.248**	.255**	.503**	.249**	.456**	1	.492**	.239**	.554**
	Sig. (2-tailed)	<.000	<.000	<.000	<.000	<.000	<.000	<.000		<.000	<.001	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
DI	Correlation	.349**	.287**	.197**	.271**	.513**	.215**	.298**	.492**	1	.388**	.535**
	Sig. (2-tailed)	<.000	<.000	<.005	<.000	<.000	<.002	<.000	<.000		<.000	<.000
	N	200	200	200	200	200	200	200	200	200	200	200
EW	Correlation	.243**	.266**	.260**	.269**	.443**	.296**	.240**	.239**	.388**	1	.470**
	Sig. (2-tailed)	<.001	<.000	<.000	<.000	<.000	<.000	<.001	<.001	<.000		<.000
	N	200	200	200	200	200	200	200	200	200	200	200

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

Table 5 demonstrates a strong correlation between TM strategies, with recognition and rewards (0.78) being the most effective strategies for retention. Work-life balance (0.69), employee engagement (0.61), leadership development (0.60), career development (0.60), and workforce planning (0.58) exhibit moderate correlations with employee retention. The

study reveals that all TM elements significantly impact employee retention, with p-values of <0.000, <0.001, <0.002, and <0.005, indicating strong associations between these variables.

Furthermore, the mediating effect of the level of perceived effectiveness between TM practices and employee retention was assessed using SPSS Macro Model 4. The study evaluated the mediating role of perceived TM effectiveness in the relationship between TM practices and employee retention. Results revealed that TM practices have a significant effect on the level of perceived effectiveness (path a) ($b = 0.582, t = 9.971, p < 0.001$), employee retention (path c') ($b = 0.434, t = 6.050, p < 0.001$), and level of perceived effectiveness on employee retention (path b) ($b = 0.247, t = 3.374, p < 0.001$). Moreover, the results demonstrated a significant indirect effect of TM practices on employee retention ($b = 0.148, t = 6.050$), supporting H3. Additionally, TM practices and employee retention in the presence of the mediator were also found to be significant ($b = 0.43, p < 0.001$). Therefore, the level of perceived effectiveness partially mediated the relationship between TM practices and employee retention, supporting H3. Table 6 presents a summary of the mediation analysis.

TABLE 6. SUMMARY OF MEDIATION ANALYSIS

Relationship	Total Effect	Direct Effect	Indirect Effect	Confidence Interval		t-Statistics
				Lower Bound	Upper Bound	
TM Practices → Employees' Level of Perceived Effectiveness → Employee Retention	0.582	0.43	0.148	0.293	0.575	6.050

QUALITATIVE ANALYSIS OF EMPLOYEES' SENTIMENTS

The study gathered paramedical employees' opinions on effective TM strategies in both sectors, analyzing responses to three open-ended questions using Orange software.

A total of 60 responses regarding specific TM strategies implemented in the workplaces of paramedical employees from public and private hospitals were analysed using *word cloud analysis* in Figure 2. The individual evaluations revealed that both public and private sector employees receive regular training on new medical techniques, equipment, development programs, employee recognition, rewards, and talent pool building. However, strategies for success differ between the two sectors. Public hospitals emphasise team building, leadership courses, time management, performance reviews, and employer branding, while private hospitals focus on employee encouragement, goal alignment, feedback, competition, and reputation.

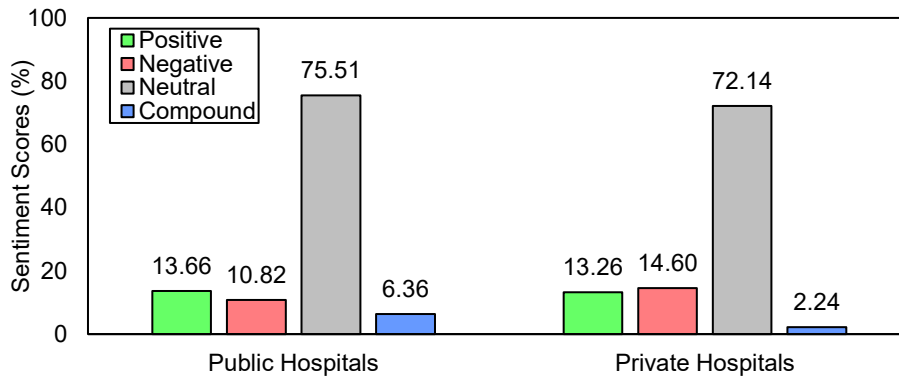
FIGURE 2. WORD CLOUD FOR EFFECTIVE TM STRATEGIES



The study employed sentiment analysis to examine 46 responses regarding the challenges faced by paramedical employees in Oman's healthcare sector related to TM, categorising them as positive, negative, or neutral. Sentiment analysis was performed using various methods, including multilingual sentiment analysis, SentiArt, and a custom dictionary.

The average scores indicated that paramedical employees in the Omani healthcare sector encounter challenges in TM practices, with private hospital employees expressing more negative sentiments compared to public hospital employees, as illustrated in Figure 3.

FIGURE 3. SENTIMENT ANALYSIS FOR CHALLENGES IN TM

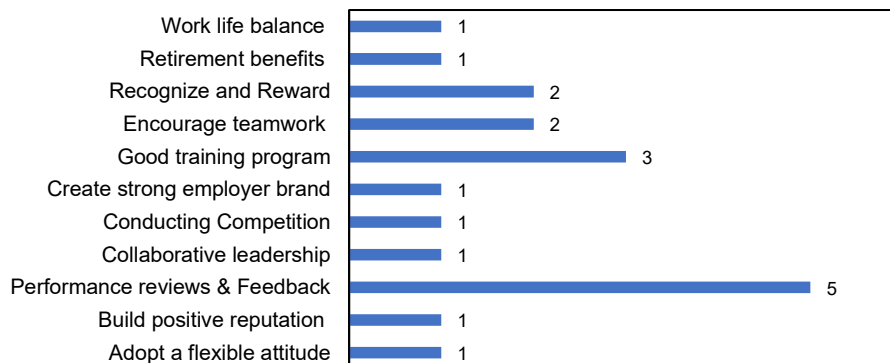


Furthermore, the 108 responses from paramedical employees regarding their suggestions for TM strategies in the healthcare sector were assessed separately for public and private hospitals using *keyword analysis*. Here, the word cloud is applied to preprocessed data to visualise frequently occurring terms and their associations, identify bigrams using N-gram rag rage, and store the output for keyword analysis. Thus, the most notable suggestions identified for both types of hospitals are presented in Figures 4 and 5, respectively. The results indicate a significant difference in opinions among paramedical employees regarding the effectiveness of TM strategies between public and private hospitals in Oman, thereby supporting H4.

FIGURE 4. SUGGESTIONS FOR PUBLIC HOSPITAL EMPLOYEES



FIGURE 5. SUGGESTIONS FOR PRIVATE HOSPITAL EMPLOYEES



DISCUSSION

This research examines the importance of TM strategies for paramedical employees in Oman's healthcare sector through a comparative analysis of public and private hospitals. The study indicates that paramedical employees in Oman perceive TM practices as low to moderately effective in public hospitals and medium to high in private hospitals, highlighting the difference in the perception between employees in public and private hospitals regarding TM practices (see Table 3; H1). This finding is unique, as previous researchers have not assessed the perceptions of paramedical employees in both types of hospitals. Furthermore, the t-test results show no significant difference in TM strategies such as talent acquisition, onboarding, employee rewards, and retention between public and private hospitals (see Table 4, H2). This result aligns with Bibi's (2019) finding, which suggests that strategies like recruiting, selection, coaching, mentoring, and pay significantly enhance employee performance [20]. However, significant differences exist between public and private hospital TM strategies in areas such as career growth, skill development, diversity promotion, employee engagement, and meeting employee needs (see Table 4).

Moreover, the study reveals a strong correlation between TM strategies and employee retention, with work recognition being the most significant factor, followed by work-life balance, employee engagement, leadership development, career development, and workforce planning (see Table 5, H3). These findings are supported by Madurani and Pasaribu (2022) [21] and Bhuvanewari and Kavitha (2024) [22]. However, Saxena and Rai (2016) [23] contradict these findings, suggesting that private hospital employees are generally more satisfied with their compensation and benefits compared to public hospital employees. Furthermore, research indicates that employee engagement in healthcare institutions significantly impacts job satisfaction and retention [24, 25], with career development and rewards affecting professional satisfaction [26] and hospital performance [1, 6]. Additionally, the study found that employees' level of perceived effectiveness partially mediated the relationship between TM practices and employee retention (see Table 6, H3).

The qualitative analysis provides various implications to the policymakers. The results indicate that positive perceptions of effective TM practices can enhance employees' attitudes towards their organisation, ultimately leading to higher satisfaction and retention rates (see Figure 2, H4). Furthermore, the study highlights specific challenges faced by public hospital employees, including issues related to fair evaluations, operating margins, talent recognition, safety, long working hours, and time management (see Figure 3, H4). Understanding these challenges is crucial for evaluating the effectiveness of TM strategies and their impact on retention, particularly in the context of public versus private healthcare settings in Oman. Conversely, private hospital employees face challenges like skill shortages, financial pressure, communication issues, high turnover rates, long work hours, and handling new technologies, which pose significant challenges in TM.

Furthermore, public hospitals should implement talent identification measures and include yearly competitions, knowledge development through seminars and conferences, skill enhancement programs for new and experienced employees, investment in performance assessment tools, and inclusive training opportunities as TM strategies for retaining talent (see Figure 4). Conversely, private hospitals should focus on improving performance reviews, providing performance-based feedback, conducting monthly training programs, recognizing and rewarding talent through incentives and promotions, and fostering teamwork (see Figure 5). Moreover, ensuring work-life balance, offering retirement benefits, conducting talent identification competitions, promoting collaborative leadership, and maintaining flexible attitudes towards paramedical employees are also crucial in the healthcare sector.

However, this study contains several limitations. The study has a narrow scope, focusing on a specific number of public and private hospitals, making it challenging to generalize the findings to all hospitals in the Sultanate of Oman. Additionally, the lack of prior research on the topic makes it difficult to obtain reliable information. The nature of the paramedical staff's work also poses challenges in obtaining responses to the questionnaire, potentially affecting the accuracy of the data and study outcomes.

CONCLUSIONS

The study analyses various elements of TM strategies in the healthcare sector, including workforce planning, employee engagement, performance management, career development, recognition and rewards, work-life balance, leadership development, training and development, diversity and inclusion, and employee well-being. It reveals that TM strategies significantly impact the retention of paramedical staff in both private and public hospitals; however, with differences in the level of perceived effectiveness among paramedical employees working in public and private hospitals. Moreover, the study finds that TM strategies have a significant effect on employee retention, partially mediated by employees' perceptions of the effectiveness of TM strategies implemented in hospitals. These findings can help hospitals to recruit and retain qualified workers, benefiting the healthcare sector.

However, future studies could expand the scope by involving a larger number of hospitals both within and outside the Sultanate of Oman, with a large number of samples. Additionally, other factors such as organisational performance and patient care, which were not covered in this study, could be included in future research. Furthermore, conducting semi-structured interviews with paramedical employees could provide more accurate results. Additionally, exploring various other mediation and moderation variables could further assess the impact of TM in the hospital sector.

DECLARATION OF CONFLICTING INTERESTS:

The Authors declare that there is no conflict of interest

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APPENDIX 1: SURVEY QUESTIONNAIRE

TM Strategies
The talent acquisition processes of the hospital effectively attract qualified professionals.
Hospitals provide opportunities for professional development and career growth.
The hospital's onboarding process, in terms of integrating new employees into the organizational culture, is satisfactory.
The hospital follows a strategy for recognizing and rewarding its employees.
The hospital encourages and supports continuous learning and skill development.
The hospital is committed to promoting diversity and inclusion in its talent management practices.
The hospital's efforts to address employee engagement and job satisfaction are satisfactory.
The hospital's retention strategies, especially in critical areas such as nursing and specialized medical roles, are adequate.
The hospital adapts talent management strategies to address changing healthcare trends, technological advancements, and evolving patient needs.
The talent management strategies in hospitals adequately address the needs of paramedical employees.
Level of Perceived Effectiveness of TM Practices
I believe talent management practices in my workplace effectively support the professional growth of paramedical employees.
I believe that talent management initiatives positively contribute to my job satisfaction as a paramedical professional.
I believe that talent management plays a crucial role in retaining skilled paramedical professionals in the healthcare sector.
I believe talent management programs in my workplace effectively identify and foster leadership potential among paramedical staff.
Opportunities for skill development and training provided through talent management are relevant to my role as a paramedical employee.
I receive adequate recognition and rewards through talent management for my contributions as a paramedical professional.
I believe talent management practices in my workplace are responsive to the changing needs of the healthcare sector.
The talent acquisition process effectively matches paramedical professionals with suitable roles in my workplace.
Talent management practices in my organization are aligned with the specific needs and challenges of paramedical roles.
Overall, I perceive the talent management practices in my workplace to be effective in supporting the success and well-being of paramedical professionals.
Employee Retention

The well-informed career advancement opportunities within the hospital influence my decision to stay.
The motivation provided by the hospital to excel in both my work and patient care is satisfactory for my continued employment at this hospital.
The great sense of fulfilment and satisfaction in the hospital motivates me to work in this organization.
The hospital's support for my professional development and growth positively influences my commitment to remain with the organization.
The hospital's acknowledgement and value placed on my contributions to patient care positively influence my decision to stay.
The hospital provides a good balance between work and personal life, which makes it a comfortable place for me to work.
The constructive feedback I receive from my supervisors' support in my professional development and influences my decision to stay.
I see opportunities to continually improve my skills in areas that are relevant and important for me to work here.
The hospital's promotion of an inclusive and optimistic work culture motivates me to work here.
I am satisfied with the organization's ability to support and retain its employees in the long run.
Open-Ended Questions
Can you describe any specific talent management strategies or programs in your workplace that you believe have been particularly effective for paramedical employees?
In your opinion, what challenges do you face in terms of talent management in the healthcare sector, and how can these challenges be addressed?
Is there any specific suggestion on talent management strategies that you believe should be emphasized or valued in hospitals?