

ASSESSING THE IMPACT OF YEARS OF WORK EXPERIENCE ON MANAGERS' JOB PERFORMANCE: HOSPITAL MANAGERS' PERSPECTIVES IN A DEVELOPING COUNTRY

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Abstract

Evidence suggests that managers' work experience do influence their job performance in the long run. How this happens in the hospital setting is still unknown and this work was undertaken to understand that relationship. Data for this study came from a cross-sectional survey using self-administered questionnaire distributed amongst one hundred and twenty five (125) management staff in twenty five (25) hospitals and the response rate was 83.2%. Statistical Package for Social Sciences (SPSS version 16) was use as the analysis tool. Though there were no significant relationships between length of managers' work experience and programme/strategic planning, however, we saw a significant relationship (21.159(0.002) between years of experience and vision creation. The logistic regression analysis showed that an increase in the number of years of work experience would increase the skill on preparation of strategic planning (95CI: p=0.018.). There were significant relationships between managing conflicts, motivating employees and years of experience as were shown in (18.106(P=0.001) and 18.106(P=0.001) respectively. The logistic regression on motivating employees increased as the number of years of experience increased (p-value) at 0.017. Designing appropriate work experiences to enhance managers' job performance like improving lengths of experience on certain skills and management functions in desired areas and departments would be a good step in the right direction.

Keywords: Work experience, job performance, hospitals, managers, planning skills, leadership management functions.

Background

In today's complex business life, employee performance is believed to be an important subject not only in achieving organizational objectives but also in maintaining competitive advantages over other enterprises (Yilmaz, (2015). To enhance employee job performance all organizations are required to encourage positive work attitudes like helping customers to resolve problems, cooperating with co-workers, trying to prevent unexpected incidents and sustaining quality standards of the organization in order to ensure customer satisfaction (Yilmaz, (2015). Appropriate experiences on the job also enhance job performance over time (Yilmaz, (2015). But to what extent is employees' performance influenced by experience on the job. It is assumed that work experience will enhance job performance over time. Operating on this premise may hold sway over sometimes only, for caution must be taken as over generalization may be defective in some situations as diminishing returns may set in later after work experience and age may have topped which may reflect a non-linear relationship or no relationship at all between job experience and employee's performance. Many occupations recognize employees' years of work experience as a relevant factor in human resource policies, including compensation systems, benefits packages, and promotion decisions. The idea is that work experience, gained over time, enhances the knowledge, skills, productivity, and performance of workers (Rice, 2010). This paper sets out to examine the impact of years of work experience on job performance of managers in hospital settings in Nigeria.

There is paucity of information on the topic; however a worker having good work experience in his job can become a leader due to his special gift of experience he acquired during the course of his work. This gives him an expert power as posited by Bhargava and Anbazhagan (2014); Andrew (2009) and hence dependable and he is more efficient too due to the tacit (Bhargava and Anbazhagan, 2014; Polanyi, 1966) knowledge he has. This is in accordance to the common adage 'practice makes a man perfect'.

Apart from the professional and academic knowledge, it is commonly believed that experience might play important roles on the performance of individuals. In many cultures, the myth is that people get wiser due to more exposure and experience. For example in African culture, experience is considered as a priority for leadership positions in different organizations (Bhargava and Anbazhagan, 2014; Ahiazu, 1989). Trompenaars (1993); Bhargava and Anbazhagan (2014) viewed that leadership styles and performance of individual differ from culture to culture and country to country depending upon life patterns, beliefs and value system or otherwise on the knowledge and experience of the people. Findings from a research by Bhargava and Anbazhagan (2014) on education and work-experience-influence on the performance of employees indicates that the performance of the employees gradually increases with their experience and after an experience of 20 years the performance is again getting lower.

Several theories lend understanding to the relationship between job experience and performance. Human Capital Theory suggests that employees make investments of experience in themselves, which enhance their ability, and thus influence job performance (Sturman, 2001; Ehrenberg & Smith, 2000). Learning theory also predicts that job experience enhances job ability (Weiss, 1990). Both perspectives suggest that job performance changes over time because individuals accumulate job experience. As job experience leads to the accumulation of relevant knowledge, skills, and abilities, performance should improve. From this basis, models of performance posit that job experience has a positive effect on job performance (Ehrenberg, 2000; Campbell, 1990; Hunter, 1983; Schmidt, Hunter, & Outerbridge, 1986). Providing a detailed treatment of this hypothesis, Schmidt, Hunter, & Outerbridge (1986) showed that job experience influences job knowledge and task proficiency, which in turn affect job performance. Their model also suggests that the effect of experience may not be linear. Schmidt and colleagues (1986) argued that the relative advantage of one year of job experience is significantly greater at lower levels of job experience than at higher levels (Schmidt, Hunter, & Outerbridge, 1986; McDaniel, Schmidt, & Hunter, 1988), a finding that has been replicated by Avolio, Waldman & McDaniel (1990). In this study, managers' performance was assessed based on the possible impact of their work experiences on strategic planning, programme planning, ability to create vision for their hospital, and management leadership functions. These items were looked at to find out how the managers performed on them over the years due to their continued experience on the job. Have the managers gotten better or otherwise due to their continued experience on them?

Strategic planning is the systematic and organized process whereby an organization creates a document indicating the way it plans to progress from its current situation to the desired future situation. It is the set of decision-making criteria and the decisions taken and implemented by an organization to definitively and permanently guide its activities and structure (Rodriguez, de Paula & Peiró, 2012). The process of strategic planning is programmable, systematic, rational, and holistic and integrates the short, medium and long term, allowing the healthcare organization to focus on relevant and lasting transformations for the future (Rodriguez, de Paula & Peiró, 2012).

As part of strategic planning process, programme planning is a process that is designed to address questions such as "What is needed?" and "How will the needs be addressed?" Through a systematic process the answers to these questions form the basis of an intervention approach in business management (www.oxfordbibliographies.com/view/document/obo.). The methods and approaches used in programme planning and evaluation occur throughout the lifecycle of a programme—from planning and implementing to assessing outcomes (www.oxfordbibliographies.com/view/document/obo.). Typically, the programme planning cycle begins with the needs assessment process, progresses to identifying strategies to address needs, and then moves into implementation and evaluation that occurs in a continuous cycle, which facilitates ongoing review of needs and programme improvement (www.oxfordbibliographies.com/view/document/obo.).

The first step in any strategic transformation is to clarify the institutional mission, visions, and goals. The 'mission' declares the organization's distinctive purpose or reason for being. The vision represents what its leaders want the organization to achieve when it is accomplishing the mission. Strategic goals are those overarching end results that the organization pursues to accomplish its mission (Speziale, 2015; Speziale, 2015; Cady, Wheeler, DeWolf, Brodke, 2011; David, David, 2013; Jones, 2007 & Bartkus, Glassman, 2008). The task of building a vision for an organization is frequently referred to as 'path-finding'. The goal of the pathfinder is to provide a vision, find the paths that the organization should propose in the long run and mark the trail for those who will follow (Speziale, 2015; Grayson, 2001; Kets de Vries, 1994; Reeves, Duncan, Ginter, 2000; Orlikoff, 2005 & Pusser, Slaughter, Thomas, 2006). To effectively outline the future and facilitate the pursuit of organizational excellence, visions need to be translated into 'action plans', considering: primary targets, external context analysis, internal context analysis and strategic targets (Speziale, 2015).

Academicians and practitioners see the term management as the achievement of organisational goals with and through people using available resources in the most efficient manner possible (Bahaudin, Mujtaba, and Nguyen, 2013; Mujtaba, 2007; Tajaddini, Mujtaba and Bandenezhad, 2009). Generally, according to Bahaudin, Mujtaba, and Nguyen (2013; Mujtaba (2007), people use the four functions of management which are planning, organizing, leading, and controlling (POLC) to achieve their organisational objective. *Planning* means clarifying an organisation's goals and specific strategies for achieving these stated objectives. *Organizing* includes determining what tasks must be done, who will do them, how the tasks will be grouped, who will report to whom, and where decisions will be made. *Leading* includes motivating and directing employees, and communicating and resolving conflicts. *Controlling*, on the other hand, means monitoring performance, comparing results and goals, and making corrections and adjustments as needed in a timely manner. Making these management functions work well for the organisation is a key function or responsibility of the managers (Bahaudin, Mujtaba, and Nguyen, 2013; Mujtaba, 2007).

In spite of hospital managers and chief executive officers being pivotal to achieving improved health service delivery in Nigeria and also the government identifying management and leadership development as likely strategies to upgrade healthcare delivery services in the hospitals, there has been little or no research that systematically analyses whether hospital managers' work experience could influence their job performance over time. This paper aims to evaluate managers' perceptions of how much their experience on the job could possibly influence their job performance over time. It is hoped that the information gathered will help in designing and delivery of appropriate work experience strategies aimed at enhancing management and leadership job performance among hospital managers in Nigeria.

Methods and Subjects

Data for this study came from a cross-sectional survey using self-administered questionnaire distributed amongst management staff in twenty five (25) hospitals that were purposively selected. The criteria for selection were that each of the hospitals must be at least twenty (20) bedded and employs at least twenty five [25] persons. A pre-tested structured self-administered questionnaire was used during the period March to April 2015 to collect the preliminary data from each respective respondent. A pre-testing of the instrument was done four months earlier before the commencement of this study to strengthen the validity and reliability of the questionnaire. The responses from the pre-testing contributed to the restructuring of the questions to measure exactly what was intended. More so, the questions were first translated into the local language (*Igbo*) and back to English language to strengthen their reliability. The questionnaire which was developed by the authors after careful observation of previous works on the subject was used by the managers in self-assessing their perceived influence of job experience on their present performance. Graduated lengths of years of experience (less than two years, 3-10 years and above 10 years) were used to enable comparison of the perceived impact of job experience on managers' performance. Did smaller years of job experience make greater impact on performance than lengthier number of years for example was among the questions to be answered.

Reliability results the instrument

The reliability test result indicates an understanding of the contents of the questions between the managers and the researchers as the responses to both the *Igbo (local language)* and English variance of the questions were the same from different sets of respondents. The responses to the questions from smaller groups produced same results over time. Questions that were confusing and did not make any sense to the respondents were either amended or discarded. This indicates that the study could be replicated with similar population groups and also likely to be producing similar results.

Questions assessing managers' biographic details

- 1 Biographic details
 - 1.1 Gender: Male () Female ()
 - 1.2 Age: 25-35 () 36-45 () 46-60 ()
 - 1.3 Type of hospital: private, government, Non-governmental, faith based
() () () ()
 - 1.4 Hospital beds 25-50 () 51-100 () above 100 ()
 - 1.5 Current designation
 - (a) Administrative officer ()
 - (b) Hospital administrator ()
 - (c) CEO/hospital director ()
 - (d) Medical director ()
 - (e) Others (please specify) -----

1.6 Experience in hospital management

- (a) Less than two years ()
- (b) 3-10 years ()
- (c) Above 10 years ()

Questions assessing managers’ planning skills and vision creation ability due to continued experience on the job were stated thus:

COMPETENCES IN MANAGERIAL SKILLS:

4.0 PLANNING SKILLS AND VISION CREATION

Please indicate your level of competence in the following skills

	Very poor	poor	good	excellent
(a) Programme planning	()	()	()	()
(b) Preparation of a strategic plan	()	()	()	()
(c) Creating a vision for your hospital	()	()	()	()

4.1 MANAGEMENT LEADERSHIP SKILLS:

(a) Team management	()	()	()	()
(b) Communicating organizational goals	()	()	()	()
(c) Managing conflicts	()	()	()	()
(d) Motivating employees	()	()	()	()
(e) Labour relations	()	()	()	()
(f) Setting organizational culture	()	()	()	()

Hospitals in the federal capital territory (FCT) Abuja, Nigeria with a minimum of 20 beds and 25 staff as employees were used in the study with the surveyed staff being designated as Hospital Director, Hospital Manager, Hospital Administrator, Hospital Chief Executive Officer or Chief Medical Director. Those provided with the questionnaire for answering were also heads of units responsible for the day to day administration and operation of hospital amenities with a minimum of diploma or bachelor’s degree (or equivalent) obtained in any academic discipline. Questionnaires were distributed directly to the respondents. One hundred and twenty (125) questionnaires were distributed, out of which one hundred and four (104) were answered and returned giving a response rate of 83.2%.

Ethics approval and consent to participate

Ethical approvals were obtained from the respective research ethical committees of the individual hospitals. While the data were being collected, verbal consent was obtained from each respective respondent. The respondents were assured of their confidentiality and were provided with the choice of not partaking in the study if they so wished. The research was conducted according to Helsinki declaration and local legislations.

Data Analysis:

The questionnaire was cross checked and validated for completeness. The data was entered and analyzed using the Statistical Package for Social Sciences (SPSS). Descriptive statistics like frequency, percentages and in place of mean, median was used to determine the averages since the data was on ordinal scale. Again inter-quartile range (in place of the standard deviation) was used to determine the consensus or polarity of opinion on each of the phenomenon examined. Cross tabulation was done for inferential aspect of the statistics and at this point, Pearson Chi-square was used to determine associations between some explanatory variables and dependents variables. Correlations were as well done where appropriate. The researchers also went further to carry out some Regression analysis and this helped to ascertain possible predictors on the dependent variables.

Results

Table 1: showing respondents' socio-demographics, hospital type, staff strength and years of experience

Variables	Frequency n=104	Percentages (100)
Gender		
Male	66	63.5
Female	38	36.5
Age		
25-35	14	13.5
36-45	55	52.9
45-60	35	33.7
Type of hospital		
Private	44	42.3
Government	41	39.4
Non government	5	4.8
Faith based	14	13.5
Number of staff		
Below 24	20	19.2
25-50	35	33.7
51-100	36	34.6
Above 100	13	12.5
Years of experience		
Less than two years	24	23.1
3-10 years	49	47.1
Above 10 years	31	29.8

The table 1 above shows that 63.5% (66) of the respondents were male while the rest were females. It as well showed that majority (52.9%) of the respondents were aged between 36-45 years. Again it reveals that the least age group was those between 25-35 years old. Also we saw from the table that (42.3%) of the 104 hospitals are private; this was followed by the government (public) owned 41(39.4%) while the least were nongovernment hospitals. Finally about 35% of the hospitals had more than 50 staff while only 12.5% had more than 100 staff.

Table 2: showing respondents' planning skills and years of experience

Planning skills	Years of experience			Chi-square(p-value)
	Less than two	3-10	Above 10	
Programme planning				
Very poor	4(16.7)	7(14.3)	5(16.1)	2.635(0.853)
Poor	6(25.0)	11(22.4)	6(19.4)	
Good	14(58.3)	29(59.2)	20(64.5)	
Excellent	0(0)	2(4.1)	0(0)	
Preparation of strategic plan				
Very poor	4(16.7)	5(10.2)	3(9.7)	4.540(0.604)
Poor	6(25.0)	17(34.7)	8(25.8)	
Good	12(50)	21(42.9)	19(61.3)	
Excellent	2(8.3)	6(12.2)	1(3.2)	
Creating a vision for your hospital				
Very poor	0(0)	6(12.2)	4(12.9)	21.159(0.002)
Poor	0(0)	4(8.2)	8(25.8)	
Good	18(75.0)	35(71.4)	19(61.3)	
Excellent	6(25.0)	4(8.2)	0(0)	

The cross tabulation table 2 above shows that there is no statistically significant relationship between the years of experience, programme planning skill 2.635(0.853) and preparation of strategic plan 4.540(0.604). However, we saw a significant relationship (21.159(0.002) between years of experience and vision creation as the lower the years of experience, the higher the skill on creation of vision for the hospital. This showed a non-linear relationship.

Table 3: showing a correlation between respondents' planning skills, vision creation and years of experience

Correlations		Experience_in_hosp#_mgt	Program_planning	Preparation_of_strategic_plan	Creating_a_vision_for_your_Hosp
Experience_in_hosp#_mgt	Pearson Correlation	1	.027	.035	-.367**
	Sig. (2-tailed)		.786	.728	.000
	N	104	104	104	104
Program_planning	Pearson Correlation	.027	1	.812**	.433**
	Sig. (2-tailed)	.786		.000	.000
	N	104	104	104	104
Preparation_of_strategic_plan	Pearson Correlation	.035	.812**	1	.550**
	Sig. (2-tailed)	.728	.000		.000
	N	104	104	104	104
Creating_a_vision_for_your_Hosp	Pearson Correlation	-.367**	.433**	.550**	1
	Sig. (2-tailed)	.000	.000	.000	
	N	104	104	104	104

A correlation shown in table 3 above was also done to establish a relationship between the variables and it was discovered that the number of years spent on the job had no influence on programme planning and preparation of strategic plan. However we discovered that a significant relationship exists between the number of years of experience and creating a vision for the hospital as reported by the respondents. It shows that those in the lower number of years of experience have better skill in creating a vision for the hospital. Again the individual variables were correlated and it shows a direct positive relationship between programme planning, preparation of strategic plan and creating a vision for the hospital. In other words, as the ability to do programme planning increases, the ability to prepare strategic plan and create a vision for the hospital also increases.

Table 4: showing a logistic regression analysis between respondents' planning skills and years of experience

Logistic Regression Analysis					
	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	T	Sig.
(Constant)	2.936	.309		9.504	.000
Programme_planning2	.050	.192	.034	.261	.794
Preparationofstartegicplan2	.499	.208	.340	2.401	.018
Creatingavision2	-.975	.192	-.550	-5.073	.000

The Logistic regression in table 4 above shows attempts to predict how years of experience affected planning skills. It shows that an increase in the number of years of experience would increase the skill on preparation of strategic plan. This was seen at 95CI: $p=0.018$. It as well confirmed the earlier result which showed that as the years of experience increases, the skill on creating a vision for the hospital decreases.

Table 5: showing the relationship between years of experience and respondents' leading skills

Leading skills	Years of experience			Chi-square(p-value)
	Less than two	3-10	Above 10	
Team management				
Very poor				6.332(0.387)
Poor	2(8.3)	2(4.1)	0(0)	
Good	2(8.3)	2(4.1)	2(6.5)	
Excellent	10(41.7)	32(65.3)	21(67.7)	
	10(41.7)	13(26.5)	8(25.8)	
Communicating organizational goals				
Very poor				2.393(0.664)
Poor	2(8.3)	4(8.2)	2(6.5)	
Good	16(66.7)	39(79.6)	22(71.0)	
Excellent	6(25.0)	6(12.2)	7(22.6)	
Managing conflicts				
Very poor	-	-	-	18.106(0.001)
Poor	4(16.7)	4(8.2)	0(0)	
Good	10(41.7)	41(83.7)	24(77.4)	
Excellent	10(41.7)	4(8.2)	7(22.6)	
Motivating employees				
Very Poor	-	-	-	18.122(0.001)
Poor	10(41.7)	5(10.2)	2(6.5)	
Good	8(33.3)	36(73.5)	24(77.4)	
Excellent	6(25.0)	8(16.3)	5(16.1)	
Labour Relation				
Very poor	2(8.3)	0(0)	0(0)	8.335(0.215)
Poor	6(25.0)	8(16.3)	5(16.1)	
Good	12(50.0)	33(67.3)	21(67.7)	
Excellent	4(16.7)	8(16.3)	5(16.1)	
Setting organization culture				
Very poor	2(8.3)	0(0)	1(3.2)	11.817(0.066)
Poor	2(8.3)	10(20.4)	2(6.5)	
Good	12(50.0)	33(67.3)	21(67.7)	
Excellent	8(33.3)	6(12.2)	7(22.6)	

The result in table 5 shows that years of experience does not have any relationship with team management, communicating organizational goals, labour relation skills and setting organizational culture which are all part of leadership management skills. However, a level of association exists between managing conflicts, motivating employees and years of experience as shown here respectively 18.106(P=0.001) and 18.106(P=0.001).

Table 6: showing a correlation between respondents' years of experience and management abilities

Correlations		Experience _in_hosp#_ mgt	Tea m_ mgt	Communi cating_org# _goals	Managi ng_Con flicts	Motivati ng_empl oyees	Labour _Relati ons	Setting_Or g#_Culture
Experience _in_hosp#_ mgt	Pearson Correla tion	1	.01 6	.007	.003	.155	.131	.018
	Sig. (2- tailed)		.86 9	.944	.974	.116	.184	.853
	N	104	104	104	104	104	104	104
Team_mgt	Pearson Correla tion	.016	1	.755**	.617**	.463**	.256**	.326**
	Sig. (2- tailed)	.869		.000	.000	.000	.009	.001
	N	104	104	104	104	104	104	104
Communi cating_org# _goals	Pearson Correla tion	.007	.75 5**	1	.663**	.551**	.555**	.571**
	Sig. (2- tailed)	.944	.00 0		.000	.000	.000	.000
	N	104	104	104	104	104	104	104
Managing_ Conflicts	Pearson Correla tion	.003	.61 7**	.663**	1	.534**	.485**	.443**
	Sig. (2- tailed)	.974	.00 0	.000		.000	.000	.000
	N	104	104	104	104	104	104	104
Motivating _employee s	Pearson Correla tion	.155	.46 3**	.551**	.534**	1	.684**	.462**
	Sig. (2- tailed)	.116	.00 0	.000	.000		.000	.000
	N	104	104	104	104	104	104	104

Labour_Relations	Pearson Correlation	.131	.256**	.555**	.485**	.684**	1	.553**
	Sig. (2-tailed)	.184	.009	.000	.000	.000		.000
	N	104	104	104	104	104	104	104
Setting_Org#_Culture	Pearson Correlation	.018	.326**	.571**	.443**	.462**	.553**	1
	Sig. (2-tailed)	.853	.001	.000	.000	.000	.000	
	N	104	104	104	104	104	104	104

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

The table 6 above shows that the number of years of work experience did not have any influence on any of the leadership management skills. However, we saw from the table that each of the leadership management skills had influence on each other. In other words, the knowledge of a particular skill increases as the others increase together.

Table 7: showing a logistic regression analysis on years of experience and managerial abilities

Logistic Regression Analysis					
	Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	T	Sig.
(Constant)	1.316	.643		2.048	.043
Teammgt2	.594	.610	.242	.973	.333
Communicate2	-.741	.606	-.273	-1.222	.225
Managingconflicts2	.024	.445	.009	.054	.957
Motivatingemployees2	.667	.275	.340	2.426	.017
Labourrelation2	-.132	.221	-.073	-.596	.553
Setorggoals2	.007	.227	.003	.029	.977

The logistic regression in table 7 above shows that it was only the skill on motivating employees that the number of years of experience predicted. It reveals that as the number of

years of experience increases, the skill on motivating employees also increases. Again the researchers made this assertion because of the significant value of (p-value) at 0.017.

Discussions

The result from the cross tabulation indicates that though there was no significant relationship between years of managers' work experience and performance in programme planning skill and preparation of strategic plan, we saw a significant relationship between managers' work experience and hospital vision creation. The logistic regression shows that an increase in the number of years of experience would increase skills on programme planning skill, employee motivation and preparation of strategic plan for the managers. It as well confirmed the earlier result which showed that as the years of managers' experience increases, the skill on creating a vision for the hospital would decrease indicating a non linear relationship. The result equally showed that a level of association exists between managing conflicts, motivating employees and years of managers' experience. We also saw from the correlation analysis that each of the leadership skills had an influence on each other. In other words, as the knowledge of a particular skill increases, the others increase together with it. The increase in team management, communicating organizational goals, managing conflict, motivating employees, labour relations, setting organizational culture and managerial experience equally influenced each other as they improved together with increase in managerial experience.

Virtually all management skills and functions were positively influenced but not necessarily statistically significant by managers' continued work experience in their positions. There were improvements in managers' programme planning skill, strategic planning and vision creation as they the managers gained more work experience in their respective positions. Managers' leading skills were equally positively influenced by their improved management work experiences. These results are encouraging as they form the bedrock of hospital management and in essence improve management functions in the facilities. Strategising on improving managers' experience and professionalism would be good steps in the right direction to improve and encourage managers' experience. Managers ought to be assessed by employees on how possibly they have improved due to continued experience on the job. Those that exhibit positive signs of improvement over years should be given greater opportunity to advance through the management cadre. This we believe will spur managers to action that positive exhibition of experience pays in whichever way it is measured. These results are supported by (Yilmaz, 2015; Rice, 2010; Bhargava and Anbazhagan, 2014; Andrew, 2009; Polanyi, 1966; Sturman, 2001; Ehrenberg & Smith, 2000; Weiss, 1990; Campbell, 1990; Hunter, 1983; Schmidt, Hunter, & Outerbridge, 1986; McDaniel, 1990) that simply posit that continued experience on the job enhances work performance.

The results also showed that as the years of managers' work experience increases, the skill on creating a vision for the hospital would decrease indicating a non linear relationship as managers with lesser years of experience were better in creating vision for their hospital. Possible explanation for this is that the younger managers in our healthcare system seem to be better qualified in hospital management as courses in healthcare administration have

recently been introduced in our universities which have closed the gap in knowledge experienced by older managers. This finding is supported by Schmidt, Hunter, & Outerbridge (1986); McDaniel, Schmidt, & Hunte (1988) & McDaniel (1990) that simply state that influence of job experience on performance may not necessarily be linear.

This work has proven beyond reasonable doubt that improved managers' work experience will better their performance in management functions and specialized skills required for managers to perform in the hospitals. So beyond advanced degrees in health management related areas, managers could perfect their knowledge to greater performance on the job with well designed and delivered work experience. The hospitals must opt for well designed strategies to deliver and improve managers' experience on the job as that would have a positive multiplier effect on managers' management functions and specialized skills required for their optimal performance on the job. Hospitals must find the right blend of years of experience that will maximize managers' learning and performance on the job. Lower and middle level managers in the hospitals would have to be given improved opportunities to upgrade their experience on the job, as they are most likely to occupy the high level management positions when they become vacant. These opportunities could come in the forms of greater assignments and decision making for lower and middle level managers blended with the appropriate lengths of experience to make the most impact on performance.

Conclusion

Clearly it has been shown from the results that differences in managers' length of work experience on the job will enhance their job performance though variably. Enhancing the influence of work experience on managers' performance will require deliberate efforts on the part of each hospital management to design and deliver appropriate lengths of work experience enhancing strategies that work and fit with their institution and the managers' positions. Appropriate lengths of experience on skills and management functions would have to be designed and delivered to maximize performance in accordance with our findings as some management functions and skills will require smaller lengths of experience compared with the others to maximize performance over period of time. Designing appropriate work experiences to enhance managers' job performance like improving lengths of experience on certain skills and management functions in desired areas and departments would be a step in the right direction.

References

1. Ahiazu, A. I. (1989). The "Theory A" system of work organization for the modern African workplace. *International Studies of Management and Organization*. 19(1), 6-27.
2. Andrew, J. D. (2009). *Leadership: Research Findings, Practice and Skills*, 5 Ed, Houghton Muffilin co., Boston, USA.
3. Avolio, B. J; Waldman, D. A. & McDaniel, M. A. (1990). Age and work performance in nonmanagerial jobs: The effects of experience and occupational type. *Academy of Management Journal*, 33: 407-422.
4. Bahaudin, G; Mujtaba, M.J and Nguyen, L.D. (2013). Management Skills of Pakistanis: a Comparison of Technical, Human and Conceptual Differences. *Advances in Management & Applied Economics*. vol. 3, no.3, 129-139.
5. Bartkus, B.R; Glassman M. (2008). *Do firms practice what they preach? The relationship between mission statements and stakeholder management*. *J Bus Ethics*. 83:207-2017. [CrossRefWeb of Science](#).
6. Bhargava, R. K. Anbazhagan, S. (2014). Education and Work-Experience - Influence on the Performance. *Journal of Business and Management*. Volume 16, Issue 5. 2319-7668.
7. Cady, S.H; Wheeler, J.V; DeWolf, J; Brodke, M.(2011). *Mission, vision and values: what do they say? Organ Dev J 2011; 29:63-79*.
8. Campbell, J. P. Modelling the performance prediction problem in industrial and Organizational psychology. In M. D. Dunnette & L. M. Hough (Eds.), *Handbook of industrial and organizational psychology*, Vol. 1: 687-732. Palo Alto, CA: Consulting Psychologists Press.1990
9. David, F.R; David, F.R. (2013). *It's time to redraft your mission statement*. *J Bus Strat*. 24:11-14.
10. Ehrenberg, R. G. & Smith, R. S. *Modern labour economics: Theory and public policy*, Reading, MA: Addison Wesley. 2000
11. Grayson, M.(2001). *Whose mission is it anyway? Hosp Health Netw*. 85:6.
12. Hunter, J. E. A causal analysis of cognitive ability, job knowledge, job performance and supervisory ratings. In F. Landy, S. Zedeck, & J. Cleveland (Eds.), *Performance measurement and theory*: 257-266. Hillsdale, NJ: Lawrence Erlbaum Associates.1983
13. Jones, M.B. (2007). *Multiple sources of mission drift*. *Nonprof Volunt Sec Q*. 36:229.
14. Kets de Vries M.F.R. (1994). *The leadership mystique*. *Acad Manag Exec*. 8:73-83.
15. McDaniel, M. A; Schmidt, F. L, & Hunter, J. E. (1988). Job experience correlates of job Performance. *Journal of Applied Psychology*, 73: 327-330.
16. Mujtaba, B. (2007). *The ethics of management and leadership in Afghanistan*, ILEAD Academy Publications.
17. Orlikoff, J.E.(2005). *Building better Board in the New Era of Accountability*. *Front Health Serv Manag*. 21:3-12.
18. Polanyi, M. *The Tacit Dimension*, University of Chicago Press: Chicago, p.4. 1966

19. Pusser, B; Slaughter, S; Thomas, S.L.(2006). *Playing the Board Game: An Empirical Analysis of University Trustee and Corporate Board Interlocks. J Higher Educ.* 77:747-775.[CrossRefWeb of Science](#).
20. Rice, J K. (2010). The Impact of Teacher Experience Examining the Evidence and Policy Implications. National data for analysis of longitudinal data in education research, brief 11, August.
21. Reeves, T.C; Duncan, W.J; Ginter, P.M.(2000). *Leading change by managing paradoxes. J Leadership Stud.* 7:13-30.[CrossRef](#)
22. Rodriguez, F. de Paula. & Peiró, P.M. (2012). Strategic Planning in Healthcare Organizations. *Rev Esp Cardiol.* 2012; 65:749-54 - Vol. 65 Num.08
23. Speziale G. (2015). Strategic management of a healthcare organization: engagement, behavioural indicators, and clinical performance. *European journal supplement.* Volume 17, issue suppl. A. Pp A3--A7.
24. Sturman, M. C. (2001). Time and performance: A three-part study examining the relationships of job experience, organizational tenure, and age with job performance (CAHRS Working Paper #01-05). Ithaca, NY: Cornell University, School of Industrial and Labour Relations, Center for Advanced Human Resource Studies. <http://digitalcommons.ilr.cornell.edu/cahrswp/68>. (2nd ed.), Vol. 1: 171-221. Palo Alto, CA: Consulting Psychologists Press.1990.
25. Schmidt, F. L; Hunter, J. E. & Outerbridge, A. N. (1986). The impact of job experience and ability on job knowledge work sample performance, and supervisory rating of performance. *Journal of Applied Psychology*, 71: 432-439.
26. Tajaddini, R; Mujtaba, B and Bandenezhad, M. (2009). Management skills of Iranians: A Comparison of technical, human and conceptual differences based on gender, age and longevity in management ranks, *Labour and Management in Development.* **10**(1), 1-18.
27. Trompenaars, F. *Riding the waves of culture: Understanding diversity in global business.* Chicago, IL: Irwin. 1993
28. Weiss, H. M. Learning theory and industrial and organizational psychology. In M. D. Dunnette & L. M. Hough (Eds.), *Handbook of industrial and organizational psychology*
29. www.oxfordbibliographies.com/view/document/obo.../obo-9780199756797-0027.x.
30. Yilmaz, O. D (2015). Revisiting the Impact of Perceived Empowerment on Job Performance: Results from Front-Line Employees. *Tourizam*; volume 19, issue 1 pp34-46