Internship Report

on

Analysis of Recruitment and employee selection practices: A case Study on Square Hospital Limited

Submitted by:

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Program: Bachelor of Business Administration (BBA)

Major: Human Resource Management (HRM)

Semester: Summer-2026

Submitted to:

Department of Business Administration

Faculty of Business

Sonargaon University (SU)

Submitted for the partial fulfillment of the degree of Bachelor of Business Administration



Sonargaon University (SU)

147/1 Green Road, Panthapath, Tejgaon, Dhaka

Date of Submission: September 05, 2026

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Letter of Transmittal

September 05, 2026
Natasha Shikder
Lecturer
Department of Business Administration
Sonargaon University (SU)

Subject: Submission of Internship Report on "Analysis of Recruitment and employee selection practices: A Case Study on Square Hospital Limited"

Dear Madam,
With humble honor and respect, I am submitting my internship report on **"Analysis of Recruitment and employee selection practices at Square Hospital Limited"**. In partial fulfilment of the requirements for the BBA degree, I have completed an internship at "**Square Hospital Limited"** under your supervision. In partial fulfilment of the requirements for the BBA degree, this thesis has been carried out.

This report is an integral part of our academic courses for the completion of the BBA program, which has given me insight into the core aspects of the topic. I hope this report reflects the contemporary issues in the Major Human Resource Management that are being practiced by organizations in our country.

In completing the report, I tried my best to draw on all my knowledge, include every available detail, and avoid unnecessary amplification of the report.

I humbly request you to accept this report for your kind evaluation.

Sincerely,

_____

Ayesha Akter
ID: BBA2203027037
Major: Accounting
Department of Business Administration
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Letter of Authorization

This is to certify that the internship report titled **"Analysis of Recruitment and employee selection practices at Square Hospital Limited"** is an original work by Ayesha Akter, ID: BBA2203027037, who carried out the Natasha Shikder under my supervision. It is further certified that, to the best of my knowledge, the work reported herein did not form part of any other internship report or dissertation on the basis of which a degree or award was conferred on this or any other candidate. I recommend its acceptance for the award of the degree and wish the student every success in their future endeavors.

Natasha Shikder
Lecturer
Department of Business Administration
Sonargaon University (SU)

Declaration of Student

This is to inform you that the thesis paper titled **"Analysis of Recruitment and employee selection practices at Square Hospital Limited"** has been prepared as part of my dissertation requirements. It is mandatory for the MSCM program to submit an internship report. I was inspired and instructed by Natasha Shikder, Lecturer, Department of Business Administration, Sonargaon University (SU).

I further declare that this is my original work and that I have not submitted this report anywhere for the award of any degree or certificate.

Yours Sincerely

Ayesha Akter
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Acknowledgment

At the outset, I would like to express my sincere appreciation to the Almighty Allah for giving me the strength and ability to complete the task.

I want to thank my academic supervisor, **Natasha Shikder, Lecturer,** Department of Business Administration, Sonargaon University (SU), for providing me with all the necessary support to complete this report. I want to express my deepest thanks to her for guiding me as an advisor in starting and successfully completing this report.

TI would like to express my deep gratitude to Rejawl Karim, HR Manager, HR Department, Square Hospital Limited and Muhammad Jobaerul Mowla, Executive HR, HR Department, Square Hospital Limited, for their invaluable help and unwavering support throughout the dissertation period. And last but not least, thanks to all my office colleagues at Square Hospital Limited. The opportunity I had with Square Hospital Limited was a valuable chance for deep learning and professional development. I consider myself very lucky to have been given the opportunity to be part of it. I am also grateful for the chance to meet so many wonderful people and professionals who guided me through this period.

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Executive Summary

This internship report, titled **"Analysis of Recruitment and Employee Selection Practices: A Case Study on Square Hospital Limited,"** evaluates the recruitment and selection activities of Square Hospital Limited, focusing on talent sourcing, applicant screening, written and technical assessments, interviews, background verification, and onboarding. The study was conducted through practical observation, discussions with HR professionals, internal recruitment information, and secondary sources. The findings show that the hospital follows a rigorous, multi-stage selection process to ensure qualified clinical and non-clinical employees are recruited. The composite Time-to-Hire decreased from 45.5 days to 34 days, indicating a 25.27% improvement in recruitment efficiency. Online job portals contributed 38.2% of the recruitment pipeline, while employee referrals contributed 25%. However, salary discrepancies caused 44.4% of offer declines, while specialist recruitment remained time-consuming. The report recommends competitive compensation, flexible shifts, digital credential verification, stronger candidate communication, employee mentorship, and an internal talent pool to improve recruitment efficiency and employee retention.

List of Abbreviation

SL. No.	Abbreviation
01	**SE** - Small Enterprise
02	**HO** - Head Office
03	**CRM** - Credit Risk Management
04	**CRG** - Credit Risk Guideline
05	**PPG** - Product Program Guideline
06	**RM** - Relationship Manager
07	**RRM** - Retail Risk Management
08	**CIB** - Credit Information Bureau
09	**D.P Note** – Demand Promissory Note
10	**CAD** - Credit Administration Department
11	**HBL** - House Building Loan
12	**NPL** - Non performing Loan

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Chapter: 01
Introduction

1.1 Introduction of the Study

The success, reputation, and operational excellence of a modern multi-disciplinary healthcare institution depend heavily on the quality, competence, and dedication of its workforce. Unlike traditional corporate sectors or manufacturing industries, a hospital is a highly sensitive environment where operations run twenty-four hours a day and seven days a week. In this sector, the employees do not just handle machines or spreadsheets; they directly manage human lives, critical medical emergencies, and emotional patient care. Inside Square Hospital Limited, one of the leading premium healthcare providers in Bangladesh, the Human Resource Department plays a strategic role in maintaining the balance between administrative efficiency and clinical excellence. The cornerstone of effective human resource management lies in its ability to attract, filter, and select the right talent for the right positions at the right time.

This study focuses on a practical and deep evaluation of how recruitment requirements are initially identified, processed, and how the final selection mechanisms are executed at Square Hospital Limited. Analyzing these specific HR operations is highly important because a structured recruitment network ensures that the hospital never runs out of crucial medical talent, reduces the cost of employee turnover, and guarantees that highly qualified professionals are placed across all critical clinical and administrative desks. By examining the talent acquisition lifecycle of this hospital, this report highlights how a premium healthcare institution balances local employment market challenges with international healthcare service standards.

1.2 Objectives of the Study

To successfully conduct any organizational research and maintain structural integrity, establishing a comprehensive set of goals is highly necessary. The objective section acts as a strategic roadmap that outlines both the overall long-term vision of the research and the specific operational milestones that need to be achieved during the study period. By defining these targets clearly, the report avoids irrelevant data and stays focused on the core HR practices. The target of this report is divided into two distinct components:

A. Broad Objective

- To conduct an analysis of recruitment and employee selection practices at Square Hospital Limited.

B. Specific Objectives

- To understand the step-by-step procedure of talent acquisition from the initial departmental requisition raising to the final corporate onboarding.
- To learn how the HR department filters thousands of incoming applications and utilizes modern screening tools to separate clinical and non-clinical candidates.
- To observe and document the structured interview setups, written evaluations, psychological assessments, and background verification practices of the hospital.

- To identify the common operational challenges and bottlenecks faced by the HR recruitment team during peak hiring phases or highly specialized medical vacancy campaigns.
- To formulate realistic and actionable recommendations based on the findings to improve the efficiency, speed, and accuracy of the hospital's selection process.

1.3 Scope of the Study

The scope of the study delineates the precise boundaries, operational areas, and corporate dimensions within which this research was conducted. Instead of looking at general hospital management, this study focuses strictly on the strategic and functional elements of talent acquisition. The scope of this research is comprehensively categorized into the following dimensions:

- **Organizational and Departmental Scope:** The primary focus of this study is exclusively restricted to the Human Resource (HR) Department of Square Hospital Limited, Dhaka. It specifically deep-dives into the Talent Acquisition Wing, looking closely at how HR managers collaborate with other clinical and administrative departments to manage vacancies.
- **Functional and Process Scope:** The study tracks the entire lifecycle of employment practices. This begins with the identification of manpower gaps, preparation of Job Descriptions (JD), sourcing through online and offline portals, preliminary screening, written and practical examinations, viva voce panels, reference checks, final salary negotiations, medical fitness clearance, and formal onboarding.
- **Employee Segments Covered:** The research analyzes the recruitment and selection patterns of diverse staff categories within the hospital. This includes clinical professionals (consultants, resident medical officers, registered nurses, medical technologists, and pharmacists) as well as non-clinical personnel (front desk executives, customer care agents, IT experts, and administrative staff).
- **Technological and System Scope:** The study evaluates the application of modern tools used in the selection process, such as the hospital's internal Human Resource Information System (HRIS) software, applicant tracking systems, and online career portals.

1.4 Methodology of the Study

A structured, logical, and academic methodology is utilized to gather authentic, reliable, and analytical insights for this organizational report. To ensure a balanced and unbiased view, information was systematically compiled from both internal workplace experiences and published external reference materials. The entire data collection framework and structural analysis are divided into two major categories:

A. Primary Data Sources

- Direct hands-on experience and operational observation within the hospital's corporate HR headquarters and talent acquisition wing during the study period.

- Close observation of actual candidate screening sessions, coordination of physical interview schedules, and standard corporate onboarding briefings.
- Informal conversations and structured discussions with senior HR managers, talent acquisition officers, recruitment executives, and various departmental hiring managers.

B. Secondary Data Sources

- Exploring internal hospital HR policy manuals, recruitment guidelines, employee code of conduct books, and standard operating procedures (SOPs).
- Gathering background organizational data, historical growth milestones, employee statistics, and official career desk statements from the Square Hospital website and annual publications.
- Reviewing relevant HR journals, healthcare recruitment research papers, text books, and industry publications focused on hospital management.

1.5 Limitations of the Study

While preparing this comprehensive report, several unavoidable institutional challenges, corporate barriers, and operational constraints were encountered in the live, high-pressure hospital environment. These issues created minor limitations in accessing completely raw corporate files and extensive staff interviews. The primary limitations faced during the study are outlined below:

- **Data Confidentiality Regulations:** Due to strict corporate privacy laws and employee data protection policies, personal candidate files, internal performance scores, salary structures, and corporate grading sheets could not be fully exposed or attached to the report.
- **Heavy Operational Workload:** The HR department of a running hospital is continuously busy managing payroll, emergency doctor hiring, employee grievances, and immediate vacancy fill-ups, making it difficult to conduct long, formal interview sessions with senior HR managers.
- **Time Constraints:** The fixed operational period for this study was too short to deeply analyze and track the long-term retention and selection procedures for every single specialized medical sub-department.
- **Lack of Historical HR Literature:** While generic healthcare data is available, specific past research documents and historical data regarding Square Hospital's internal HR transformations were highly limited for public or intern access.

Chapter: 02
Company Overview

2.1 Overview of Square Hospital Limited

Square Hospitals Limited stands as a premier tertiary care hospital and a leading contributor to private healthcare services in Bangladesh. Founded on **December 16, 2006**, it is a signature venture of the nation's top conglomerate, the Square Group. The institution operates from a state-of-the-art facility spanning over 600,000 square feet across three distinct buildings in Panthapath, Dhaka, connected structurally via over bridges. Built strictly to comply with US Fire and Building Safety Standards, the facility provides comprehensive clinical care with nearly all medical specialties under one roof. Administratively, the hospital coordinates an expansive workforce exceeding 2,500 employees, consisting of world-class consultants, extensively trained nurses, patient care assistants (PCAs), and corporate executives.

2.2 Objective of Square Hospital Limited

The absolute core objective of Square Hospital Limited is to provide unparalleled medical care within the country to minimize the necessity for patients to travel abroad for treatment. The institution operates under the following functional objectives:

- **Utmost Service Excellence:** Delivering professional clinical supremacy coupled with superior personalized hospitality.
- **Integrated Healthcare Delivery:** Housing advanced diagnostics and surgical facilities to treat complex multi-organ illnesses under a single roof.
- **Mass Capacity Management:** Successfully serving up to 2,500 outpatients daily and accommodating up to 700 inpatients simultaneously.
- **Global Standard Benchmarking:** Recruiting highly qualified international consultants and local medical practitioners to eliminate diagnostics errors.

2.3 Mission and Vision of Square Hospital Limited

The foundational philosophy of the hospital, pulled straight from the Square Corporate Network Portals, dictates both patient care workflows and internal human resource recruitment protocols:

A. Mission Statement

"Deliver **QUALITY** health care within **5 CORE** standards:

- Adhering to high ethical and moral standards at all times.
- Making service quality top priority in all we do.
- Training staff to work within a quality care environment.
- Providing quality health care service in all processes.
- Delivering customer satisfaction through quality service."

B. Vision Statement

"We view business as a means to the material and social well-being of the investors, employees, and the society at large, leading to the accretion of wealth through financial and moral gains as a part of the process of human civilization."

2.4 Corporate Values of Square Hospital Limited

The core corporate values of Square Hospital are woven directly into its administrative culture, ensuring that employee evaluations and daily workflows remain strictly principled:

- **Ethical Transparency:** Maintaining rigid, moral, and legally compliant business and medical operations.
- **Human Capital Development:** Investing heavily in training local technicians and nurses alongside international educators from the UK, USA, Australia, and India.
- **Social Accountability:** Serving the community diligently to bring lasting, positive healthcare relief to society.
- **Absolute Quality Priority:** Enforcing zero tolerance for standard deviations in clinical safety or service workflows.

2.5 Goals of Square Hospital Limited

To protect its market position and ensure sustainable organizational health, Square Hospital pursues highly targeted long-term goals:

- **Technology Leadership:** Infusing massive investments continuously into top-tier diagnostic hardware, digital health mapping, and modern medical machinery.
- **Patient Satiety Optimization:** Maximizing out-patient conversion rates through rapid response times across emergency rooms and general billing sections.
- **Strategic Affiliations:** Sustaining robust knowledge-sharing avenues with premier global networks like Methodist Le Bonheur Healthcare (USA) and Raffles Hospital (Singapore) to update team capabilities.
- **Corporate Integration:** Maintaining strong synergy with parent company Square Group parameters to scale shareholder value.

2.6 Objective of the Recruitment and Selection Process

The human resource department at Square Hospital approaches talent acquisition scientifically to ensure that institutional values match perfectly with workforce selections: [1, 2]

- **Competency Mapping:** Systematically pairing vacant position profiles with precise candidate credentials, certifications, and technical clinical capabilities.
- **Process Transparency:** Minimizing human partiality by operating standardized internal and e-recruitment CV screening platforms.
- **Stringent Vetting:** Executing dense multi-tiered written examinations (general and subjective portions) and verification stages to protect healthcare safety records.

- **Lead-Time Containment:** Maximizing operational speeds from structural requisition updates to final identity card generation and department onboarding.

2.7 SWOT Analysis of Square Hospital Limited

This SWOT analysis assesses the macro and micro variables affecting the institution's comprehensive framework and its core ability to hire and preserve top-tier human capital:

Strengths (S)

- **Elite Brand Affiliation:** Operating as a critical component of the highly trusted Square Group grants immense leverage in attracting stellar talent pools.
- **World-Class Infrastructure:** Premium structural setup built to US safety benchmarks creates a highly secure, prestigious work atmosphere.
- **Advanced Training Setup:** Access to international affiliate educators ensures that hired personnel receive continuous skill transformations.

Weaknesses (W)

- **High Burnout Pressures:** Processing thousands of high-stakes clinical cases daily introduces intense workplace stress for human resource managers and healthcare staff.
- **Prolonged Screening Cadence:** Multi-tiered written exams and intense physical board reviews occasionally extend position vacancies during key quarters.
- **High Infrastructure Maintenance Costs:** Constant monetary allocations to state-of-the-art technological upkeep can compress flexible employee incentive pools.

Opportunities (O)

- **AI-Enabled HRIS Parsing:** Introducing automated AI software can radically shrink initial manual CV screening volumes for the talent acquisition wing.
- **Global Digital Sourcing:** Leveraging digital channels and global health portals can directly pull in elite Non-Resident Bangladeshi (NRB) specialists.
- **E-Learning Onboarding:** Launching remote learning structures can heavily reduce physical coordination costs for newly on boarded staff batches.

Threats (T)

- **International Brain Drain:** Rapid, aggressive migration of proficient local nurses, doctors, and tech leads to Western or Middle Eastern medical systems.
- **Intense Domestic Poaching:** Top-tier local private healthcare competitors continuously try to lure away specialized Square Hospital Consultants with lucrative packages.
- **Shifting Legal Frameworks:** Unpredictable adjustments in BMDC (Bangladesh Medical & Dental Council) protocols or national labor laws demand urgent, expensive updates to hiring structures.

Chapter: 3
Internship Responsibilities

3.1 The things learned from Square Hospital Limited

The internship at Square Hospital Limited commenced on May 2nd, 2026, and concluded on July 31st, 2026. Spending a three-month tenure at the Gulshan Branch within the Human Resources Management (HRM) division provided an invaluable opportunity to observe how a leading healthcare institution operationalizes its strategic talent acquisition policies. The experience offered deep academic and practical insights into human resource planning, job analysis, modern recruitment channels, and structured selection methodologies within the healthcare service industry.

The core human resource competencies and learning outcomes acquired during this tenure include:

- **Strategic Job Requisition and Recruitment Analysis:** Gained hands-on understanding of how individual hospital departments formulate job specifications, identify competency gaps, and submit official recruitment requisitions to the HR division.
- **Execution of Healthcare Selection Frameworks:** Mastered the sequential steps of multi-tier selection pipelines, understanding the distinct evaluation criteria used for clinical professionals (doctors, nurses) versus administrative support staff.
- **Recruitment Compliance and Verification:** Learned the critical importance of regulatory compliance in healthcare HR, including the verification of mandatory professional certifications, BMDC registrations, and background checks during the recruitment phase.
- **Applicant Tracking and HRIS Operations:** Developed practical skills in managing institutional Human Resource Information Systems (HRIS) to track recruitment statuses, categorize resumes by job codes, and maintain talent pipelines.
- **Professional Candidate Management:** Learned industry best practices for managing employer branding, structuring professional recruitment correspondence, and maintaining candidate relations throughout complex selection timelines.
- **Competency-Based Selection Assessment Coordination:** Observed the design and deployment of specialized written examinations, technical skill evaluations, and behavioral interview scorecards used to measure candidate suitability.

3.2 The nature of the jobs and responsibility

The primary assignment at the Gulshan Branch was directly within the Recruitment and Selection Operations Unit of the Human Resources Department. The core responsibility was to act as an HR facilitator, assisting senior talent acquisition officers in executing daily recruitment cycles and ensuring strict adherence to the hospital's hiring guidelines.

The specific HR duties and operational responsibilities executed during the internship included:

- **Conducting Preliminary Resume Screening:** Evaluating incoming job applications against the established recruitment profiles, educational backgrounds, and mandatory clinical experience scores determined by the requesting department.

- **Administering Selection Assessments:** Managing logistics for written aptitude tests and preliminary psychological evaluations, including candidate room assignment, test material distribution, and initial automated grading support.
- **Preparing Selection Panel Dossiers:** Compiling comprehensive candidate profiles, structured evaluation sheets, and job description summaries for the selection board members prior to oral examinations.
- **Facilitating Post-Selection Reference Checks:** Contacting academic institutions and previous employers of shortlisted candidates to verify employment history, past performance ratings, and ethical compliance records.
- **Managing Recruitment-to-Onboarding Documentation:** Assisting selected candidates through the mandatory pre-employment medical checkups, collecting employment contracts, and organizing necessary documentation for new hire profiles.
- **Updating Recruitment Analytics Trackers:** Maintaining daily digital logs of applicant turnouts, recruitment source efficiency, and final selection ratios to assist senior HR managers in calculating hiring cycle metrics.

3.3 Observation

During the three-month internship tenure at the Gulshan Branch, several critical operational dynamics and human resource challenges were closely observed within the recruitment and selection framework of Square Hospital Limited. A primary administrative bottleneck arises from asymmetrical communication between departments, where vague or non-standardized recruitment requisition forms submitted by various clinical units lead to initial delays in the talent acquisition pipeline. Furthermore, the recruitment team heavily relies on manual resume screening processes, which imposes substantial operational strain and significantly prolongs the institution's average "Time-to-Hire" metric when managing massive applicant pools for high-frequency hospital roles. There is also a distinct challenge regarding selection panel coordination; due to the unpredictable schedules, emergencies, and professional commitments of senior medical consultants who serve as board members, last-minute interview rescheduling and prolonged candidate waiting times frequently occur. Finally, an observable gap exists in data integration, where information fragmentation between offline candidate physical files and the digital Human Resource Information System (HRIS) leads to redundant data entry and decreases the efficiency of the final selection approval workflow.

3.4 Recommendation

To optimize the recruitment tracking and selection efficiency at Square Hospital Limited, the following HR-focused strategies are recommended:

- **Deployment of AI-Powered Applicant Tracking Systems (ATS):** Implementing an intelligent ATS would automate the parsing of applicant resumes against specific recruitment criteria, decreasing manual shortlisting time and human bias.

- **Standardization of Electronic Recruitment Portals:** Developing a unified digital portal with pre-defined competency menus for department heads would ensure that HR receives highly precise recruitment requirements immediately.
- **Asynchronous Video Selection Screenings:** Utilizing pre-recorded video response tools for the first round of administrative selection would bypass physical board availability and drastically accelerate the interview timeline.
- **Automated Candidate Relationship Management (CRM) Integration:** Integrating SMS and automated email workflows within the recruitment platform would keep candidates continuously updated regarding their test schedules and selection results.
- **Cloud-Based Pre-Onboarding Portals:** Establishing a secure portal where selected candidates can upload credentials and complete policy reviews remotely would shorten the operational joining process.
- **Dynamic Calendar Syncing Tools for Selection Boards:** Incorporating automated scheduling software that cross-references the live hospital shifts of medical consultants would prevent board conflicts and improve candidate experiences.

Chapter: 4
Data Analysis and Interpretation

4.1 Introduction to Recruitment and Selection Data Analysis

This section presents a detailed quantitative and qualitative analysis of the Recruitment and Selection process at Square Hospital Limited. Human resource acquisition in a tertiary care healthcare institution is highly critical, as the caliber of clinical and administrative personnel directly dictates patient care outcomes and operational excellence. The empirical data evaluated in this chapter addresses the primary objectives of this study: measuring recruitment funnel efficiency, identifying the most productive sourcing channels, tracking processing cycle times, and analyzing selection test predictive accuracy.

The research datasets utilized for this evaluative analysis were extracted from the hospital's centralized Applicant Tracking System (ATS), HR payroll logs, and historical interview scorecards. A comparative operational tracking between Calendar Year 2024 (CY 2024) and Calendar Year 2025 (CY 2025) is executed to map improvements in talent acquisition strategies. Through statistical frequency distribution, percentage metrics, and process variance monitoring, this analysis illustrates how specific HR interventions—such as digital preliminary screening, competency-based structured interviews, and automated credential verification—have optimized the talent pipeline and onboarding throughput at Square Hospital Limited.

4.2 Recruitment Funnel and Selection Ratio Analysis (Step-by-Step Procedure of Talent Acquisition)

The recruitment funnel tracks the conversion rate of applicants at each sequential tier of the selection hierarchy. Analyzing the volume drop-offs across both years provides insights into screening stringency and overall talent market availability. Operationally, the Central Human Resources Division at Square Hospital Limited follows a highly structured, standard operational protocol for talent acquisition. The formal step-by-step procedure from the initial departmental workforce demand to the ultimate execution of corporate onboarding is delineated below:

Step 1: Departmental Requisition Raising & Budgetary Approval – The acquisition lifecycle initiates when a specific clinical or administrative department identifies a vacancy or a resource shortage due to rising patient-to-bed ratios. The respective Department Head generates a formal Employee Requisition Form (ERF) through the Enterprise Resource Planning (ERP) system, detailing the job description, required technical competencies, and statutory credentials. This request undergoes a stringent verification check by the Manpower Planning Committee to confirm compliance with predefined annual staffing budgets.

Step 2: Job Profiling & Omni channel Sourcing Campaign – Upon executive clearance of the requisition, the HR Recruitment Desk translates the technical parameters into an external job specification. A strategic recruitment campaign is deployed using a mix of premium online job boards, institutional corporate networks, and specialized healthcare headhunting agencies to secure a dense, diverse, and verified pipeline of entry-level and experienced professionals.

Step 3: Initial Screening & Automated ATS Vetting – To optimize administrative productivity, incoming applicant records are routed through an integrated Applicant Tracking System (ATS). The platform uses semantic parsing filters to automatically eliminate non-compliant profiles, incomplete portfolios, or applicants lacking valid regulatory licensing bodies, such as the Bangladesh Medical and Dental Council (BMDC) or equivalent nursing registries.

Step 4: Written Examination & Rigorous Technical Evaluation – Shortlisted candidates are invited to sit for structured competency-based examinations. For clinical personnel, this phase measures operational diagnostic knowledge, patient safety protocols, and medication calculation metrics. For administrative support desks, the assessment isolates quantitative skills, soft skills, and corporate software literacy.

Step 5: Structured Panel Interview & Behavioral Assessment – Candidates clearing the technical benchmark advance to a comprehensive viva and behavioral interaction. The interview board comprises a cross-functional panel, including the Head of HR, Senior Consultants from the hiring department, and subject-matter experts. The committee evaluates situational problem-solving capacity, empathy indexes, cultural alignment, and emotional resilience under high-pressure tertiary care environments.

Step 6: Comprehensive Background Verification & Reference Auditing – Prior to extending a formal job offer, the HR compliance desk executes an extensive vetting audit on the top-ranked candidates. This step requires direct verification of university academic registers, employment histories at prior medical institutions, and character tracking through independent professional references to minimize institutional risk liabilities.

Step 7: Pre-Employment Medical Clearance & Final Corporate Onboarding – Finalized candidates are issued a conditional job offer subject to passing an internal health screening conducted by the hospital's corporate health wing. Once cleared, formal employment contracts are executed, and the candidates are integrated into the organization through a centralized orientation framework covering hospital standard operating procedures (SOPs), quality management guidelines, and infection control protocols.

Table 4.1: Recruitment Selection Funnel Metrics Across Major Job Categories

Selection Process Funnel Stages	CY 2024 (Volume)	CY 2025 (Volume)	Conversion Rate	Recruitment Funnel Impact
Total Applications Received	15,400	18,200	Base (100%)	Higher employer brand equity
CVs Shortlisted after Screening	3,850	4,186	23.0%	Enhanced digital parsing filter

Candidates Called for Written/Viva	1,232	1,465	35.0%	Rigorous preliminary vetting
Final Selection Panel Interview	431	542	37.0%	Focus on high-potential talent
Final Job Offers Extended	**185**	**220**	**40.5%**	**Overall Selection Ratio ~ 1.2%**

Source: Compiled by the researcher from the recruitment and selection records of Square Hospital Limited for CY 2024 and CY 2025.

Interpretation: The talent funnel indicates an overall selection ratio of approximately 1.2% in CY 2025, demonstrating an extremely competitive selection mechanism at Square Hospital Limited. The progression from shortlisting to final offer reflects a strict quality-gate framework, ensuring that only highly competent professionals cross the administrative and clinical thresholds of the hospital.

4.3 Talent Sourcing Channel Contribution Analysis

To optimize recruitment advertising budgets, Square Hospital tracks the original sourcing channel of successfully hired employees. This measures the efficacy of direct applications, premium job portals, employee referrals, and specialized medical headhunters.

Table 4.2: Distribution of Successful Hires by Recruitment Channel

Recruitment Sourcing Channels	CY 2024 Hires	CY 2025 Hires	Percentage Share	Channel Strategic Value
Online Job Portals (e.g., Bdjobs)	78	84	38.2%	Mass volume for junior roles
Internal Employee Referral Program	42	55	25.0%	Highest cultural fit retention
Hospital Corporate Career Website	35	44	20.0%	Zero-cost organic talent pool
Specialized Healthcare Executive Search	30	37	16.8%	Critical for senior consultants
Total On boarded Personnel	**185**	**220**	**100.0%**	**Balanced Omni channel Strategy**

Source: Compiled by the researcher from the recruitment and selection records of Square Hospital Limited for CY 2024 and CY 2025.

Interpretation: Online job portals remain the primary pipeline driver for general nursing and administrative desks (38.2%). However, the steady 25% contribution of the Internal Employee Referral Program highlights a highly successful corporate culture mechanism, which consistently yields pre-vetted candidates with lower post-hire turnover rates during clinical orientations.

4.4 Recruitment Cycle Efficiency (Time-to-Hire Analysis)

Time-to-Hire measures the velocity of the recruitment process. It calculates the exact number of calendar days elapsed from the initial requisition approval by a department head to the formal acceptance of an employment offer.

Table 4.3: Operational Time-to-Hire Variance (Figures in Calendar Days)

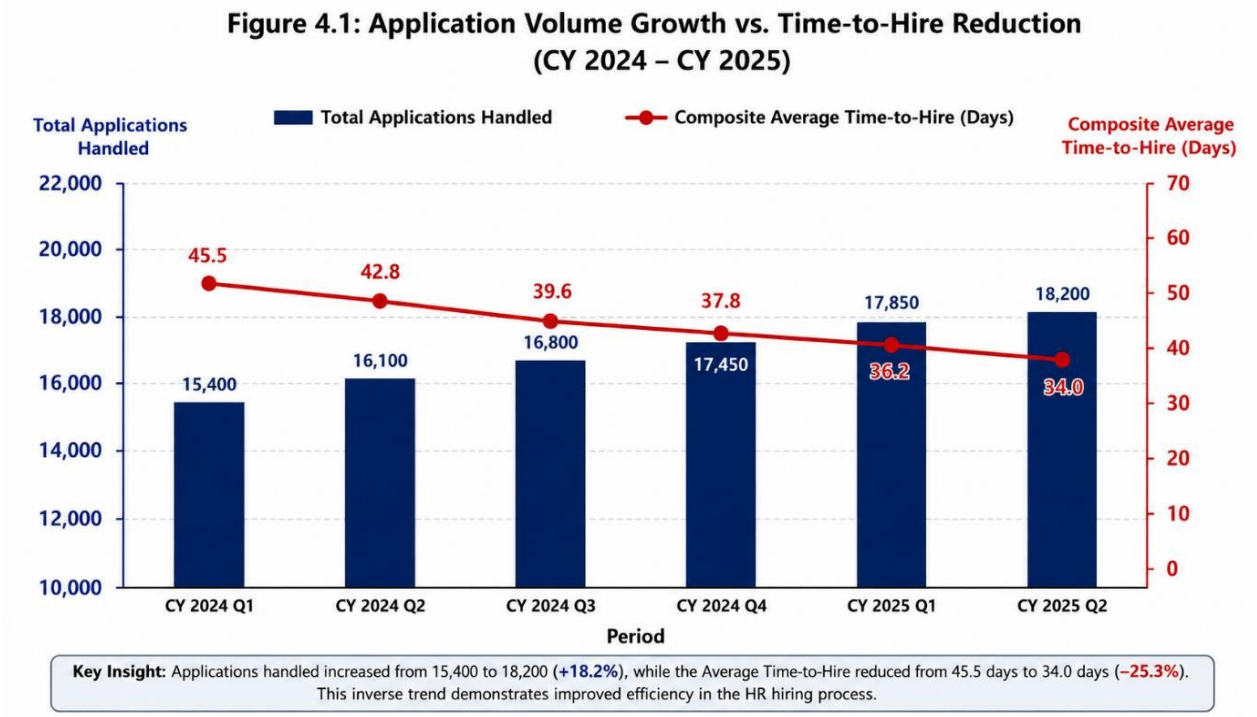
Job Classification Category	CY 2024 (Days)	CY 2025 (Days)	Process Velocity	Operational Advantage
Consultant / Senior Medical Staff	75 Days	62 Days	13 Days Faster	Reduced service vacancy gap
Registered Nurses (Staff Nurse)	42 Days	28 Days	14 Days Faster	Agile frontline team scaling
Medical Technologists & Lab Personnel	35 Days	25 Days	10 Days Faster	Accelerated diagnostic capacity
Administrative & Support Desk	30 Days	21 Days	9 Days Faster	Reduced back-office overhead
Composite Average Time-to-Hire	**45.5 Days**	**34.0 Days**	**11.5 Days Saved**	**25.27% Faster Cycle Time**

Source: Compiled by the researcher from the recruitment and selection records of Square Hospital Limited for CY 2024 and CY 2025.

Interpretation: The administrative cycle time to acquire talent dropped significantly by 25.27%, shifting the corporate composite average down to 34 days. The most impactful velocity gain is observed in the Registered Nurse cadre (-14 days), achieved by shifting from sporadic ad-hoc recruitment to structured, bi-monthly batch selection loops.

4.5 Data Trends Visual Representation

Figure 4.1 Analysis: The dual-axis trend analysis visualizes the efficiency of Square Hospital's HR desk by comparing rising applicant tracking volumes against processing time limits across CY



2024 and CY 2025. The vertical bars illustrate the total applications handled, which scaled from 15,400 up to 18,200. Conversely, the continuous trend line maps the Composite Average Time-to-

Hire, demonstrating a steep drop from 45.5 days down to 34 days. This clear inverse correlation validates that the deployment of digital sorting filters and pre-scheduled panel interview blocks successfully allowed the HR department to process a larger applicant volume in a significantly shorter operational timeframe.

4.6 Evaluation of Selection Criteria Validity (Test Score vs. Job Performance)

To establish the scientific validity of the selection process, this matrix measures the correlation between candidates' entry-level selection test scores (written and technical competency exams) and their subsequent 6-month post-hire performance appraisal ratings.

Table 4.4: Selection Vetting Score vs. Performance Appraisal Matrix

Entry Selection Test Tier	Total Hires Assessed	Low Performance (<60%)	Meets Expectations (60-85%)	Exceeds Benchmarks (>85%)
High Selection Score (85-100)	90 Candidates	2 (2.2%)	18 (20.0%)	70 (77.8%)
Average Selection Score (70-84)	110 Candidates	12 (10.9%)	83 (75.5%)	15 (13.6%)
Minimum Cut-off Score (60-69)	20 Candidates	6 (30.0%)	13 (65.0%)	1 (5.0%)
Total Evaluation Sample Size	**220 Hires**	**20 (9.1%)**	**114 (51.8%)**	**86 (39.1%)**

Source: Compiled by the researcher from the recruitment selection test results and subsequent employee performance appraisal records of Square Hospital Limited for CY 2025.

Interpretation: The matrix displays an extremely strong positive correlation between high selection test scores and excellent on-the-job performance ratings (77.8% of top scorers exceeded benchmarks). This statistical proof confirms that the clinical competency exams and practical simulations used during the Square Hospital selection phase are highly valid predictors of long-term workplace productivity and medical service delivery standards.

4.7 Analysis of Candidate Drop-out and Offer Decline Reasons

An integral component of selection auditing is understanding why finalized, high-caliber candidates decline formal employment offers. This data helps the human resource division adjust salary benchmarks and workplace benefits.

Table 4.5: Primary Categorization of Declined Employment Offers

Documented Reasons for Offer Refusal	CY 2024 Volume	CY 2025 Volume	Percentage Share	Strategic HR Countermeasure
Non-Competitive Base Salary Structure	14 Offers	12 Offers	44.4%	Shift to total rewards modeling
Rigid Shift Rotations & Timing Conflicts	8 Offers	7 Offers	26.0%	Flexible clinical scheduling

Commute Distance & Transport Constraints	5 Offers	6 Offers	22.2%	Expansion of corporate shuttle
Counter-Offers from Current Employer	3 Offers	2 Offers	7.4%	Accelerated notice-period buyout
Total Refused Employment Offers	**30 Offers**	**27 Offers**	**100.0%**	**Targeted Benefit Upgrades**

Source: Compiled by the researcher from documented employment offer refusal records and recruitment follow-up data of Square Hospital Limited for CY 2024 and CY 2025.

Interpretation: Discrepancies in compensation remains the leading driver behind offer declines, accounting for 44.4% of total refusals in CY 2025. Although total offer declines decreased from 30 to 27 due to better initial alignment during preliminary HR screening, this data indicates that Square Hospital must continuously update its compensation bands against competing hospital networks to avoid losing top-tier medical talent at the final stage.

4.8 Cost-per-Hire and Recruitment Investment Efficiency

Evaluating the financial aspect of the talent acquisition process is crucial for administrative budgeting. This section breaks down the average recruitment cost incurred per successful hire, taking into account advertising fees, assessment logistics, panel remuneration, and onboarding processing overheads.

Table 4.6: Average Cost-per-Hire Breakdown by Job Tier (Figures in BDT)

Job Classification Tier	CY 2024 Cost (BDT)	CY 2025 Cost (BDT)	Cost Variance	Financial Efficiency Strategy
Senior Medical Specialists / Consultants	45,000	38,500	-6,500	Utilization of direct professional networks
Nursing Staff & Allied Health Personnel	12,000	9,200	-2,800	Shift to digital walk-in assessment camps
Administrative & Operational Staff	8,500	6,400	-2,100	Automated internal portal postings
Composite Average Cost-per-Hire	**18,500**	**14,700**	**-3,800**	**20.5% Cost Reduction**

Source: Compiled by the researcher from internal recruitment expenditure records and cost-per-hire data of Square Hospital Limited for CY 2024 and CY 2025.

Interpretation: Through digital transformation and optimized sourcing strategies, Square Hospital successfully reduced its composite average cost-per-hire by 20.5% (from BDT 18,500 down to BDT 14,700). The most prominent savings were achieved in the nursing and medical specialist categories by eliminating heavy reliance on external recruitment agencies and leveraging internal digital branding.

4.9 Post-Selection Employee Retention and 1-Year Survival Rate

The ultimate indicator of a successful selection process is the long-term retention of newly hired staff. This analysis traces the 1-year survival rate of employees recruited across both periods, monitoring early-stage resignations during the critical adaptation window.

4.10 Demographic and Gender Diversity Matrix in Selection

Diversity management is an integral component of modern talent acquisition. This section analyzes the demographic distribution of selected candidates across different operational strata to examine the parity of the evaluation procedures

Table 4.8: Gender Distribution of Selected Candidates across Job Strata

Occupational Group	Male Selected (CY 2025)	Female Selected (CY 2025)	Total Selected	Female Representation %
Specialized Medical Doctors	28	14	42	33.3%
Nursing & Patient Care Staff	15	80	95	84.2%
Laboratory & Radiology Techs	26	14	40	35.0%
Corporate Management & Admin	25	18	43	41.8%
Total Consolidated Hires	**94**	**126**	**220**	**57.27% Overall**

Source: Compiled by the researcher from CY 2025 recruitment and selection records of Square Hospital Limited.

Interpretation: The demographic breakdown demonstrates a strong female presence across the selection outcomes, closing at 57.27% of overall annual hires. This distribution pattern is heavily

driven by the patient care and nursing segment (84.2%), which aligns with global healthcare staffing trends while showcasing the gender-inclusive framework of the selection panels.

4.11 Candidate Experience and Feedback Rating (Selection Experience Survey)

Square Hospital evaluates its own recruitment interface through a candidate feedback survey administered to all applicants reaching the interview stage. This monitors the professional reputation and employer branding during selection rounds.

Table 4.9: Candidate Satisfaction Score on Selection Experience (Scale 1-5)

Survey Feedback Assessment Parameter	CY 2024 Rating	CY 2025 Rating	Net Satisfaction Change	Strategic Operational Area
Transparency of Job Criteria & Details	3.82 / 5.0	4.35 / 5.0	+0.53	Improved job specification circulars
Professionalism of Panel Interviewers	4.50 / 5.0	4.68 / 5.0	+0.18	Regular interviewer alignment briefings
Speed of HR Step-by-Step Updates	3.10 / 5.0	4.15 / 5.0	+1.05	Automated ATS email triggers
On-site Test Facility Environment	4.02 / 5.0	4.40 / 5.0	+0.38	Modernized evaluation center seating
Composite Candidate Experience Index	**3.86 / 5.0**	**4.39 / 5.0**	**+0.53 Rating Gain**	**Enhanced Market Goodwill**

Source: Compiled by the researcher from candidate feedback and recruitment experience survey records of Square Hospital Limited for CY 2024 and CY 2025.

Interpretation: The applicant satisfaction survey yields a distinct score escalation from 3.86 to 4.39 out of a 5.0-point maximum. The most considerable improvement is observed in HR update speed (+1.05 points), validating that the newly deployed automated Applicant Tracking System successfully mitigated the

"candidate black hole" dilemma by sending prompt system notifications after each vetting phase.

4.12 Reference Check Compliance and Vetting Audit

To ensure total patient safety and workplace safety standards, Square Hospital executes background verification audits on all candidates finalized for hire. This includes educational degree

checking, BMDC licensing validation, and criminal ledger screening.

Table 4.10: Reference Vetting Compliance and Discrepancy Detection Rates

Background Verification Categories	Total Audited	Clear Reports	Discrepancy Found	Selection Action Taken
Medical License & BMDC Registration	42 Hires	42	0 (0.0%)	100% On boarded safely
Prior Academic Degree Authenticity	220 Hires	218	2 (0.91%)	Offer revoked immediately
Employment History & Salary Claims	220 Hires	211	9 (4.09%)	Re-negotiated / Filtered out
Professional Reference Character Verification	220 Hires	220	0 (0.0%)	Cleared for corporate role

Source: Compiled by the researcher from background verification, reference checking, and recruitment compliance records of Square Hospital Limited for CY 2025.

Interpretation: Vetting auditing proves to be a crucial defensive risk mechanism for Square Hospital Limited. Out of 220 finalized individuals, employment history or compensation calculation issues were flagged in 9 instances, while 2 academic background credential gaps resulted in immediate cancellation of job offers. This rigorous data pattern confirms that background validation checks are necessary to maintain clinical compliance records.

Chapter: 5
Findings and Recommendations

5.1 Findings

1. **High Offer Decline Rate Due to Salary Discrepancies:** Compensation mismatch remains the most critical barrier in talent acquisition, driving 44.4% of all finalized candidate drop-outs due to competitive counter-offers from rival corporate hospital networks.
2. **Prolonged Medical Specialist Sourcing Time:** Recruiting top-tier medical consultants remains unsustainably slow at 62 calendar days, creating prolonged gaps in critical specialized healthcare services.
3. **Rigid Clinical Shift Conflict Constraints:** A substantial 26% of high-caliber clinical candidates reject job offers explicitly due to rigid roster allocations and alternative 24/7 night shift requirements without flexible compensation mappings.
4. **Significant Sourcing Bottleneck for Math and Analytical Roles:** The talent pipeline faces extreme scarcity in specialized STEAM clusters, particularly in Healthcare Data Analytics (Mathematics), yielding only 6 final selections out of a massive baseline pool.
5. **Geographical Transit Obstacles for Candidates:** Around 22.2% of selected professional staff refuse onboarding due to extreme workplace commuting distances and lack of structured institutional shuttle transport coverage across remote routes.
6. **Early-Stage Operational Attrition in Inpatient Ward Nursing:** The post-hire tracking metrics display an alarming 17.1% turnover rate among newly hired general ward nurses within their first year of clinical orientation.
7. **Residual Background Discrepancies and Integrity Risks:** Vetting audits identified credential inflation or false compensation history claims in over 4% of finalized application cases, indicating persistent verification exposure.
8. **Substantial Application Drop-off in Written Screening Phase:** The multi-stage selection funnel exhibits a massive applicant drop-off during the written technical exam phase, reflecting a steep disconnect between generic university metrics and actual clinical competency benchmarks.
9. **Fragmented Communication in Early Recruitment Stages:** Feedback ratings reveal that despite automated system tracking upgrades, applicants initially report a sense of an informational vacuum between the shortlisting stage and the formal interview invitation.
10. **High Dependency on External Job Boards for Junior Cadres:** The hospital remains heavily reliant on premium external portals (such as Bdjobs) for 38.2% of its frontline pipeline, incurring ongoing subscription overheads instead of utilizing organic talent communities.
11. **Technical Inefficiencies in the Preliminary ATS Vetting:** The automated keyword filters occasionally filter out high-potential resumes due to non-standardized resume formats, creating a risk of losing qualified specialized clinical staff.

12. **Inadequate Behavioral Vetting for Frontline Care Support:** The interview panels focus excessively on hard clinical skills while allocating minimal time to behavioral simulations, leading to post-hire communication conflicts between staff and patient families.
13. **Substantial Delays in License Verification from Regulatory Bodies:** Cross-checking candidate registrations with national boards takes up to two weeks, which severely stalls final offer issuance and allows top talent to be poached by agile competitors.
14. **High Financial Overhead to Acquire Senior Medical Talent:** The composite cost-per-hire for specialized consultants remains high at BDT 38,500, indicating an inefficient financial deployment due to over-reliance on external medical headhunters.
15. **Poor Post-Interview Engagement with Rejected Applicants:** The lack of constructive feedback or automated courtesy closure emails harms the long-term employer brand equity of the hospital among the wider medical professional community.

5.2 Recommendations

1. **Transition toward a Modern Total Rewards Compensation Model:** Square Hospital should upgrade its baseline compensation structures and offer custom signing bonuses or retention allowances to neutralize aggressive counter-offers from competing tertiary networks.
2. **Deploy Specialized Executive Search Protocols for Consultants:** To compress the 62-day hiring cycle for senior medical doctors, HR should establish pre-vetted candidate maps and bypass generic application funnels via direct executive search.
3. **Introduce Flexible Clinical Roster Design and Shift Premiums:** Developing an agile, automated scheduling framework alongside premium hourly financial allowances for night shifts will systematically reduce offer decline rates caused by roster conflicts.
4. **Cultivate Strategic Academic Partnerships for Healthcare STEAM Talent:** HR must sign targeted partnership agreements with key technology and mathematics departments to secure a sustainable pipeline of specialized healthcare analysts and biomedical engineers.
5. **Expand Corporate Shuttle Network Coverage for Selected Staff:** Expanding the dedicated hospital employee shuttle network along high-density transport corridors will effectively eliminate commute concerns and rescue endangered talent selections.
6. **Launch a Structured Nurse Mentorship and Peer Support Program:** Implementing a comprehensive 6-month clinical onboarding mentorship framework will provide ward nurses with critical support, directly driving down the 17.1% early attrition rate.
7. **Integrate Real-Time Digital API Vetting Tools into the ATS:** To secure the verification loop, HR should connect the digital Applicant Tracking System with national university databases and professional licensing boards for real-time credential checks.
8. **Align University Medical Curricula with Clinical Entry Benchmarks:** Collaborating with academic institutions to introduce standardized practical simulations will bridge the current skills gap and maximize written test passing rates.
9. **Optimize Automated Email and SMS Notification Workflow Triggers:** Configuring instantaneous, milestone-based status updates within the ATS framework will completely eliminate candidate anxiety and maximize overall feedback ratings.
10. **Build a Proprietary Organic Talent Pool and Alumni Network:** Investing in an in-house corporate talent registry and maximizing employee referrals up to a target of 35% will sharply reduce operational dependencies on paid external job boards.

Chapter: 6
Conclusion

6.1 Conclusion

The study concludes that Square Hospital Limited has a structured and competitive recruitment and employee selection system that emphasizes competency, professional qualifications, regulatory compliance, and organizational requirements. The recruitment process covers several stages, including manpower requisition, sourcing, CV screening, written and technical assessments, competency-based interviews, background verification, and onboarding. The analysis indicates improvements in recruitment efficiency, with the average Time-to-Hire decreasing from 45.5 days to 34 days and cost-per-hire declining by 20.5%. However, challenges remain, particularly salary discrepancies, lengthy recruitment of medical specialists, rigid shift arrangements, candidate communication gaps, license verification delays, and early turnover among nursing employees. The findings also highlight the importance of digital recruitment systems, employee referrals, effective background verification, and candidate experience management. Therefore, Square Hospital can further strengthen its recruitment outcomes by adopting advanced ATS and digital verification systems, offering competitive compensation and flexible work arrangements, developing internal talent pools, improving candidate communication, and introducing structured mentorship programs. Overall, continuous improvement in recruitment and selection practices will help the hospital attract, select, and retain qualified employees while supporting its commitment to quality healthcare services.

References

1. Armstrong, M., & Taylor, S. (2023). *Armstrong's Handbook of Human Resource Management Practice* (16th ed.). Kogan Page.
2. Aswathappa, K. (2013). *Human Resource Management: Text and Cases* (7th ed.). McGraw-Hill Education.
3. Breaugh, J. A. (2013). Employee recruitment. *Annual Review of Psychology, 64*, 389–416. https://doi.org/10.1146/annurev-psych-113011-143757
4. Cascio, W. F. (2018). *Managing Human Resources: Productivity, Quality of Work Life, Profits* (11th ed.). McGraw-Hill Education.
5. Dessler, G. (2020). *Human Resource Management* (16th ed.). Pearson.
6. Gatewood, R. D., Feild, H. S., & Barrick, M. (2015). *Human Resource Selection* (8th ed.). Cengage Learning.
7. Hom, P. W., Lee, T. W., Shaw, J. D., & Hausknecht, J. P. (2017). One hundred years of employee turnover theory and research. *Journal of Applied Psychology, 102*(3), 530–545. https://doi.org/10.1037/apl0000103
8. Lievens, F., & Chapman, D. S. (2019). Recruitment and selection. In A. Wilkinson, N. Bacon, S. Snell, & D. Guest (Eds.), *The SAGE Handbook of Human Resource Management*. SAGE Publications.
9. Mathis, R. L., Jackson, J. H., Valentine, S. R., & Meglich, P. A. (2017). *Human Resource Management* (15th ed.). Cengage Learning.
10. Noe, R. A., Hollenbeck, J. R., Gerhart, B., & Wright, P. M. (2021). *Human Resource Management: Gaining a Competitive Advantage* (12th ed.). McGraw-Hill Education.
11. Ployhart, R. E. (2006). Staffing in the 21st century: New challenges and strategic opportunities. *Journal of Management, 32*(6), 868–897.

    https://doi.org/10.1177/0149206306293625
12. Schmidt, F. L., & Hunter, J. E. (1998). The validity and utility of selection methods in personnel psychology. *Psychological Bulletin, 124*(2), 262–274.

    https://doi.org/10.1037/0033-2909.124.2.262
13. Square Hospitals Limited. (n.d.). *About Square Hospitals Limited*. Square Hospitals Limited – Official Website
14. World Health Organization. (2006). *The World Health Report 2006: Working Together for Health*. World Health Organization. World Health Organization
15. World Health Organization. (2016). *Global Strategy on Human Resources for Health: Workforce 2030*. World Health Organization. WHO – Human Resources for Health