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Forecasting Management of Jobs and Competencies as a Strategic Approach to Enhancing the Quality of Healthcare Services in Hospital Institutions

— A Case Study of the Bachir Ben Nacer Public Hospital, Biskra (Algeria) —

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Abstract
Improving organizational outputs and performance now requires institutions to secure human resources that are adequate in both number and quality. One of the mechanisms designed to achieve this is the forward planning of jobs and competencies — known in the French-language literature as "Gestion Prévisionnelle des Emplois et des Compétences (GPEC)". This study set out to assess the current state of this practice in Algerian public hospitals, taking the Bachir Ben Nacer Public Hospital in the wilaya of Biskra as a case study. A questionnaire was employed as the instrument for data collection and analysis.
The study reached several findings, chief among them that the concept of forward planning of jobs and competencies is genuinely and firmly embedded in the studied hospital, within the framework of the financial policies pursued by Algeria, although its various dimensions are adopted to uneven degrees. The findings further indicate that forward planning of jobs and competencies exerts a substantial influence on the quality of the healthcare services delivered by the hospital's administration.
Keywords: forward planning of jobs and competencies; healthcare service quality; recruitment; trust and credibility; public hospital.

Introduction

Human resources are the most critical element in economic and social development and a central preoccupation of every modern society. Managing them successfully is therefore the first step towards organizational success: an institution's medium- and long-term performance hinges on its ability to secure, at the right time, the competencies required to fill clearly defined positions. Forward planning of workforce and competencies— one of the core activities of human resource management — exists precisely to guarantee that staffing keeps pace with the organization's strategic objectives, though the extent to which it is actually practised varies considerably from one institution to another.

This paper accordingly seeks to examine how this form of planning is practised in hospital institutions.

Research Problem

The choice of forward planning as a research topic is motivated largely by its role in achieving an organization's strategic goals and, by extension, in guaranteeing the delivery of the best possible healthcare services.

The research problem was therefore formulated as follows: **What is the effect of forward planning of jobs and competencies on healthcare service quality in the hospital under study?** This central question gives rise to the following sub-questions:

- What is the current state of forward planning of jobs and competencies in the hospital under study?
- What is the level of healthcare service quality in the hospital under study?
- To what extent does forward planning of positions and competencies affect the level of healthcare service quality in the hospital under study?

Objectives of the Study

- To diagnose the actual implementation of forward planning of jobs and competencies in the case study hospital;
- To determine the level of quality of the healthcare services it provides;
- To establish how far forward-planning practices contribute to improving the quality of those services.

Methodology

The study adopts a descriptive approach, in which the phenomena under investigation are described and explained, combined with a hypothetico-deductive procedure: the research moves through a sequence of steps, beginning with a theoretical framework for the study's dimensions, followed by an account of the relationships between them drawn from the existing literature, so as to construct a set of hypotheses to be tested empirically.

A questionnaire was used to collect primary data from the study sample, and the data were then analysed statistically — placing the research within a quantitative approach to data analysis in order to answer the research questions.

Hypotheses

- Forward planning of jobs and competencies has a statistically significant effect on the level of healthcare service quality in the hospital under study.

- Recruitment has a statistically significant effect on healthcare service quality within the case study hospital at the 0.05 significance level.
- Training has a statistically significant effect on healthcare service quality in the hospital under study at the 0.05 significance level.
- Promotion has a statistically significant effect on healthcare service quality in the studied hospital at the 0.05 significance level.
- Transfer and job rotation have a statistically significant effect on healthcare service quality in the case hospitalat the 0.05 significance level.
- Subcontracting has a statistically significant effect on healthcare service quality in the hospital under study at the 0.05 significance level.
- Early retirement has a statistically significant effect on healthcare service quality in the hospital targeted in this study at the 0.05 significance level.

I. The Nature of Forward Planning of Jobs and Competencies

Workforce Planning of jobs and competencies expresses the anticipatory dimension of human resource management: it works to reconcile the organization's quantitative staffing needs with the competencies actually at its disposal, so as to avoid falling into situations of either surplus or shortage.

1. Definition

The idea of forward planning of jobs and competencies dates back to the 1960s, although the concept only reached its current form and theoretical foundations after undergoing several stages of transformation. These developments are commonly grouped into four phases: personnel planning, followed by career planning, then job planning, and finally the stage known today as forward planning of jobs and competencies. In its current form, this approach consists of a set of mechanisms and practices aimed at balancing the quantity and quality of available human resources with the organization’s projected needs, while eliminating any resulting gaps (Khelifi & Kouadria, 2019, p. 3). It has also been defined as a human resource engineering approach involving the implementation and monitoring of policies designed to reduce the gap between organizational requirements and available human resources, both quantitatively and qualitatively—an orientation embedded within overall organizational strategy (Keddache & Dadene, 2016, p. 95).

This approach can therefore be described as a continuous process of anticipation that seeks to align the competencies available within the organization with its projected staffing requirements, thereby closing the gap between the two.

2. Importance

The importance of forward planning of jobs and competencies is felt in many areas of organizational life, and can be summarized as follows:

- It improves the quality of decision-making by supplying accurate information on the gap between the organization's human resource needs and what it actually has available;
- It plays a major role in delivering the organization's overall strategy, through the measures it takes to provide the competencies that strategy requires;

- It allows the organization to make optimal use of its available human resources and to enhance its standing and reputation as an employer — through the quality of its recruitment and training and by reducing turnover and lay-offs;
- It serves as a strategic tool for achieving the objectives of human resource management, namely acquiring competencies, retaining them, and developing them.

3. Dimensions

- **Recruitment:** recruitment responds to quantitative and qualitative shortfalls in the organization's human resources. It is also an instrument for selecting among candidates against pre-defined criteria and for verifying that applicants possess the qualifications required for specific positions. The recruitment process comprises three core elements: attraction, selection and appointment.
- **Training:** training is very often the natural outcome of the forward-planning process. Organizations generally prefer to adopt a training strategy aligned with the demands of the job and with changes in the environment, rather than turning to external recruitment, which can entail burdens and costs the organization may struggle to bear (Saket & Kadri, 2016, p. 10).
- **Promotion:** promotion serves to fill positions that require professional experience or seniority when the organization faces a shortage; in situations of surplus, it replaces departing or retiring staff. It can also be used as a means of satisfying and retaining high-performing employees.
- **Transfer and job rotation:** transfer refers to moving an employee from a post in one department to the same post in another department or unit, in response to a surplus in the first and a shortage in the second. Job rotation, for its part, aims primarily to equip employees with a range of specializations and skills that qualify them to occupy key positions within the organization.
- **Subcontracting:** subcontracting can be viewed as a special form of staffing, since the work performed by the subcontractor is carried out for the benefit of, and in the service of, the contracting organization. Organizations resort to it when they are unable to obtain or attract the required competencies, or when they consider their need for those competencies to be temporary.
- **Early retirement:** organizations use early retirement as a means of absorbing staff surpluses: by offering a package of incentives, they encourage employees to apply for early retirement, thereby avoiding lay-offs and the consequences these entail (Tahi & Khebiza, 2013, pp. 10–11).

II. Healthcare Service Quality

Of the many services governments provide to their citizens, healthcare is arguably the most prominent and the most vital. Health institutions therefore mobilize every mechanism and means at their disposal to improve and upgrade their services, in pursuit of the satisfaction of patients and users who have become increasingly aware of, and demanding about, quality.

1. Definition of Healthcare Service Quality

It is useful to begin with the notion of service quality itself. Service quality is difficult to define in a single, unified way, owing to the distinctive characteristics of services compared with goods. Among the most influential definitions, Zeithaml and Berry describe service quality as the degree of discrepancy, or gap, between customers' expectations and desires on the one hand, and their perception of the service actually delivered on the other (Merazga & Makhlouf, 2017, p. 388).

It has also been defined as the services provided — whether expected or perceived, that is, those customers anticipate or those they actually experience in practice — constituting the principal determinant of customer satisfaction or dissatisfaction, and at the same time a top priority for any organization seeking to raise the quality of its offering (Khither & Mraimi, 2017, p. 32).

From these definitions, it follows that service quality is a matter of the customer comparing what they expect of a service with the performance actually delivered.

As for healthcare service quality, some researchers define it as the adoption of efficient procedures in operational processes and close attention to the concepts and components of quality in pursuit of strategic objectives. Since hospitals operate in a dynamic environment and strive to meet planned objectives in order to survive and endure, the nature and manner of their dealings with the surrounding community network inevitably colour the quality of the healthcare they deliver — all the more so in today's service-dominated world (Saadoun, 2017, p. 134).

Quality in healthcare can also be understood differently by the various groups working in and interacting with a health organization, each of which evaluates it through its own lens. For the patient, quality means being treated with respect, attention, compassion and understanding by every member of staff with whom they come into direct or indirect contact during their stay in hospital. For physicians, it means the availability of the highest level of medical knowledge and skill, together with the equipment and devices needed for patient care. For management, it means providing the best human and material resources for service delivery, ensuring that physicians and other providers continuously evaluate their services, and training and educating the organization's staff to guarantee continuous improvement (Lotfi & Mansour, 2016, p. 270).

Healthcare service quality may therefore be defined as the capacity of health organizations to meet patients' expectations and desires by providing the conditions and equipment required for the delivery of healthcare services.

2. Characteristics of Healthcare Service Quality

Healthcare service quality displays a number of distinctive features, including the following:

- Hospital services are public in nature and are delivered in pursuit of the general benefit of all stakeholders and beneficiaries;
- They must, by definition, be of a very high standard, since they concern human life and recovery — not something that can be replaced or repurchased;

- Hospitals, whether public or private, are particularly exposed to government laws and regulations;
- Whereas in business organizations decision-making power rests with a single individual or a management team, in hospitals it is shared between the administration and the medical staff;
- Because demand for medical services fluctuates across the hours of the day, the week and the season, and because rapid response and patient assistance are paramount, hospitals must prepare early and mobilize their medical and administrative staff and available resources to deliver the required care (Darwish, 2013, p. 84).

3. Importance of Quality in Healthcare Services

The importance of quality lies in its capacity to achieve the following (Saadoun, 2017, p. 134):

- Widening the options available to patients and increasing staff satisfaction;
- Satisfying the needs of patients and other users of health organizations;
- Exerting a clear influence on staff expertise;
- Minimizing medical errors as far as possible;
- Reducing the time required to complete tasks and duties;
- Making optimal use of available resources.

4. Dimensions of Healthcare Service Quality

Previous studies have proposed numerous dimensions of healthcare service quality, but the most widely used are the following (Ben Terbah & Maazouzi, 2018, p. 79):

- **Tangibles:** the appearance of the service organization's physical facilities and equipment, the presentation of its staff and of those dealing with service providers, and the tools and channels of communication with them. Customers frequently judge a service on the basis of the formal or physical attributes that accompany it, such as material facilities (devices, equipment, and so on).
- **Reliability:** the organization's ability to perform the promised service dependably and with a high degree of accuracy. Customers expect a service that is precise in its timing and performance — exactly as promised.
- **Responsiveness:** the capacity, willingness and readiness of service providers to be permanently at customers' disposal and to deliver the service whenever it is needed.
- **Trust and credibility (assurance):** the degree of confidence the provider inspires. Is the provider trustworthy? How credible are they? Do they honour their promises and stand by what they say?
- **Empathy:** the provider's ability to identify and understand customers' needs and to give them care and attention — for instance, how much time and effort the provider devotes to recognizing and grasping the customer's needs, and how far they understand the customer's feelings and sympathize with their problem.

5. Forward Planning of Jobs and Competencies as a Mechanism for Improving Healthcare Service Quality in Hospital Institutions

Hospitals are exceptionally complex and sensitive environments, requiring a finely balanced equation that guarantees both the quality of healthcare services and the sustainability of high-calibre human resources. Their structural configuration sets them fundamentally apart from the models applied in economic enterprises, creating substantial challenges for forward planning of jobs and competencies. The purpose of such planning is to anticipate future needs in terms of jobs, skills and competencies, and then to align existing human resources with them effectively, so as to achieve health objectives and avert competency shortfalls (Djani &Boufsiou, 2025, p. 228). By ensuring that the right competencies are available in the right place at the right time, and that hospital staff keep pace with scientific and technical developments, this form of planning helps reduce errors and improve performance. Moreover, strengthening motivation and job stability, and distributing tasks rationally so as to prevent occupational burnout, has a positive effect on the continuity of high-quality healthcare delivery.

III. Analysis and Discussion of the Field Study Results

1. Validity and Reliability of the Research Instrument

The research instrument was assessed using the statistical package by computing the reliability coefficient, in order to verify that no error would arise in the data if the same study were repeated with the same instrument under the same conditions as its first administration. A reliability coefficient of 0.60 or above is considered acceptable.

Table 1. Validity and reliability of the questionnaire

Questionnaire dimension	No. of items	Cronbach's alpha	Validity coefficient
Forward planning of jobs and competencies	29	0.917	0.957
Healthcare service quality	32	0.951	0.975
Overall questionnaire	61	0.965	0.982

Source: SPSS (v. 22) output.

Table 1 shows that Cronbach's alpha for the forward-planning dimension reached 0.917 — a high value — and 0.951 for the items measuring healthcare service quality, with an overall reliability of 0.965. These results attest to the reliability and soundness of the research instrument (the questionnaire): it would yield the same results if re-administered under the same study conditions.

2. Description of the Study Sample

Table 2. Demographic and occupational characteristics of the sample

Variable	Category	Frequency	Percentage (%)
Gender	Male	29	67.4
	Female	14	32.6

Age	Under 30	34	79.1
	30 to under 40	8	18.6
	40 to under 50	1	2.3
	50 and over	—	—
Educational level	Secondary or below	5	11.6
	Senior technician	18	41.9
	Licence (Bachelor's)	19	44.2
	Master's or engineering degree	—	—
	Specialized postgraduate studies	1	2.3
Years of experience	Under 5 years	19	44.2
	5 to 9 years	18	41.9
	10 to 14 years	3	7.0
	15 to 19 years	1	2.3
	20 years and over	2	4.7

Source: SPSS (v. 22) output.

Table 2 indicates that men make up the majority of respondents, at 67.4% of the total sample. In terms of age, the least represented group is that aged 40 to under 50 (2.3%), while respondents under 30 are by far the most numerous (79.1%). As regards educational attainment, holders of a licence (Bachelor's degree) form the largest group (44.2%), followed by senior technicians (41.9%). Finally, with respect to professional experience, employees with fewer than five years of service predominate, at 44.2%.

3. Analysis of the Study Variables

The following table presents the results of the analysis of the study variables, using the mean and standard deviation for each dimension.

Table 3. Means and standard deviations of the study variables

Dimension	Mean	Std. deviation	Rank	Level
Training	4.1256	0.60792	1	High
Promotion	3.5395	0.71118	3	High
Transfer and job rotation	3.2171	0.83058	6	Moderate
Recruitment	3.6791	0.60654	2	High
Subcontracting	3.5302	0.58860	4	High
Early retirement	3.2636	0.82153	5	Moderate

Forward planning of jobs and competencies (overall)	3.5678	0.48634	—	High
Reliability	3.4961	0.71222	3	High
Responsiveness	3.4884	0.65505	4	High
Assurance	3.7442	0.62610	1	High
Tangibles	3.4352	0.68295	5	High
Empathy	3.7309	0.71782	2	High
Healthcare service quality (overall)	3.5792	0.57243	—	High

Source: SPSS (v. 22) output.

The table above shows that the overall mean for forward planning of jobs and competencies stands at 3.5678, with a standard deviation of 0.486, indicating a high level of implementation of forward-planning practices in the institution under study. The training dimension ranks first, with the highest mean (4.126), reflecting an institutional awareness of the importance of investing in the development of human competencies. Transfer and job rotation, by contrast, comes last, at a moderate level (3.217), pointing to insufficient use of internal mobility mechanisms to develop the competencies already present within the institution.

The overall mean for healthcare service quality reached 3.579, with a standard deviation of 0.572, and all five dimensions registered high levels. Assurance ranks first (3.744), followed by empathy (3.731), suggesting that staff display notable professional and human competence, while tangibles come last (3.435) — still high, but hinting at a relative need to improve the institution's physical infrastructure and equipment.

4. Hypothesis Testing

Before applying multiple regression analysis to test the study's hypotheses, skewness and kurtosis coefficients were computed to verify that the data follow a normal distribution — a necessary precondition for testing the present hypotheses.

Table 4. Test of normality

Variable	Skewness	Kurtosis
Forward planning of jobs and competencies	1.065	1.338
Healthcare service quality	0.983	1.442

Source: SPSS (v. 22) output.

Table 4 shows that the skewness coefficient stands at 1.065 for forward planning and 0.983 for healthcare service quality — both within the accepted range of −2 to +2. The kurtosis values, at 1.338 and 1.442 respectively, likewise fall within the recommended range of −7 to +7.

The test therefore confirms that the study data are normally distributed, which is the basic condition for the use of parametric statistical tests — in particular the multiple linear regression analysis adopted here to test the study's hypotheses.

Table 5. Multiple regression analysis of the study's hypotheses

Model	B	Std. error	Beta	t	Sig.
(Constant)	−0.197	0.389	—	−0.507	0.615
Training	0.133	0.087	0.142	1.531	0.135
Promotion	−0.041	0.084	−0.051	−0.496	0.623
Transfer and job rotation	0.238	0.087	0.345	2.737	0.010
Recruitment	0.233	0.105	0.246	2.222	0.033
Subcontracting	0.457	0.096	0.469	4.745	0.000
Early retirement	0.043	0.043	0.062	0.601	0.552

Source: SPSS (v. 22) output.

The results in the table above reveal three three out of six predictors were statistically significant, as follows:

Subcontracting. This dimension emerges as the strongest predictor in the model, with t = 4.745 at a significance level of 0.000 — well below the adopted threshold of 0.05 — indicating that each one-unit increase in subcontracting raises healthcare service quality by 0.457 units, all other variables held constant. Academically intriguing as it may be, this result reflects the fact that calling on specialized external competencies helps fill specialization gaps that in-house staff cannot cover, in line with the dynamic-resources perspective. Subcontracting therefore has a significant effect on healthcare service quality at the 0.05 level in the Bachir Ben Nacer Hospital of Biskra.

Transfer and job rotation. This dimension ranks second, with t = 2.737 at a significance level of 0.010, below the 0.05 threshold. The result may appear paradoxical, since this dimension recorded the lowest mean (3.217) in Table 3 — suggesting that its effect on healthcare service quality is strong even though its current implementation remains insufficient. The explanation is that diversifying tasks enriches staff experience and lifts service quality. Transfer and job rotation therefore have a significant effect on healthcare service quality at the 0.05 level in the Bachir Ben Nacer Hospital of Biskra.

Recruitment. Recruitment contributes significantly to improving healthcare service quality, with t = 2.222 at a significance level of 0.033, below the 0.05 threshold. Recruitment therefore has a significant effect on healthcare service quality at the 0.05 level in the Bachir Ben Nacer Hospital of Biskra — confirming the importance of selecting the right competencies and placing the right person in the right position, and underscoring the strong bearing this has on service quality in the institution under study.

Training, promotion and early retirement. Although training recorded the highest mean (4.126), it enters the multiple regression model with a significance level of 0.315, above the 0.05 threshold. We therefore conclude that training, promotion and early retirement have no significant effect on healthcare service quality in the Bachir Ben Nacer Hospital of Biskra. This may suggest that training programs are not sufficiently aligned staff members' actual needs, or that its effects require more time to feed through into service quality. Promotion, for its part, returned a negative coefficient ($t = -0.041$) at a significance level of 0.623 — statistically non-significant — which invites a theoretical discussion of how the promotion system operates, in the hospital under study in particular and in the Algerian public health sector in general, and of how closely it is tied to actual competence.

Conclusion

Forward planning of jobs and competencies stands out as a modern strategic mechanism enabling health institutions to align their human resources with the performance requirements of the health sector. By planning ahead for future competency needs, identifying gaps, and putting in place effective recruitment, education and training programmes, this approach helps guarantee that qualified human resources are available at the right time and in the right place. This, in turn, improves staff efficiency, sharpens the institution's responsiveness to patients' needs, and rationalizes the use of available resources — with positive repercussions for performance effectiveness and beneficiary satisfaction.

The study reached a number of findings, including the following:

- Forward planning of jobs and competencies aims to anticipate future human resource needs and to ensure alignment between the competencies available and the organization's strategy;
- It helps reduce the gaps created by shortages or surpluses of human resources;
- Improvement in healthcare service quality is bound up with the organization's ability to attract suitable competencies, retain them, and develop them in line with its strategic vision;
- Forward planning of jobs and competencies is one of the mechanisms that underpin health governance, by strengthening efficiency, effectiveness and transparency in human resource management;
- The dimensions of subcontracting, transfer and job rotation, and recruitment have a significant effect on healthcare service quality in the Bachir Ben Nacer Hospital of Biskra;
- The dimensions of training, promotion and early retirement have no significant effect on healthcare service quality — a result attributable to weak training programmes and to the lack of clarity of the promotion and early-retirement systems.

References

Ben Terbah, B. T., & Maazouzi, A. (2018). Dimensions of healthcare service quality and their role in achieving excellence: A case study of the Ahmida Ben Adjila Public Hospital, Laghouat [In Arabic]. Journal of Administrative and Financial Sciences, 2(1), 79.

Bouhdid, L. (2015). The role of training in improving human resource performance in the knowledge economy: A case study of the Batna cement company, 2011–2013 [In Arabic]. Revue du Chercheur Économique, (3), 45–59.

Darwish, A. (2013). The role of human resource planning in improving the quality of healthcare services [In Arabic] (Master's thesis in Business Administration, p. 83). Tishreen University, Faculty of Economics, Syria.

Djani, M., & Boufsiou, S. (2025). Forward planning as an approach to improving human resource performance in the Algerian health sector [In Arabic]. Journal of Economic Sciences, Management and Commercial Sciences, 18(2), 228.

Duroni, A. (2011, May 2). De la marque employeur aux nouveaux enjeux RH [Professional thesis]. Paris: École des Hautes Études Commerciales.

Keddache, S., & Dadene, A. (2016). The state of forward planning of jobs and competencies in the Algerian economic enterprise: A case study of Algérie Télécom Mobilis [In Arabic]. Algerian Journal of Accounting and Financial Studies, (3), 95.

Khelifi, A., & Kouadria, R. (2019). The role of forward planning of employment and competencies (GPEC) in skills development [In Arabic]. Journal of Academic Studies, (3), 3.

Khither, M., & Mraimi, A. (2017). The interactive relationship between service quality dimensions and customer satisfaction in the enterprise [In Arabic]. Journal of Business Leadership and Economics, 3(1), 32.

Legrab, R., & Berrouba, F. (2019). Adopting human resource marketing applications as an approach to e-recruitment: A response to the evolution of web tools, or a reality imposed by the war for talent? The cases of L'Oréal and Condor Electronics [In Arabic]. MENA Journal of Economic Studies, 2(4), 193–208.

Lotfi, N., & Mansour, H. (2016). Evaluating healthcare service quality using the 5Qs model: An applied study at Baghdad Teaching Hospital [In Arabic]. Journal of Economic and Administrative Sciences, 22(92), 270.

Merazga, A., & Makhlouf, S. (2017). The importance of service quality in achieving customer satisfaction [In Arabic]. Journal of Industrial Economics, (12), 388.

Redjem, K., Ben Ayad, M. S., & Mansouri, H. (2019). An analytical study of the efficiency of training strategy: A case study of a sample of petroleum companies in Hassi Messaoud [In Arabic]. Les Cahiers du MECAS, 15(1), 147–187.

Saadoun, H. (2017). The relationship between medical and nursing staffing levels and their impact on healthcare service quality: An applied study [In Arabic]. Journal of Economic and Administrative Sciences, 23(99), 134.

Saket, F. Z., & Kadri, N. (2016). Training and recruitment as principal aims of forward planning of jobs and competencies: A case study of Algérienne des Eaux, Mascara unit [In Arabic]. Journal of Organization and Work, 6(1), 10.

Tahi, F. Z., & Khebiza, A. (2013). The importance of forward planning of jobs and competencies in decision-making and organizational effectiveness [In Arabic].

Journal of Financial and Banking Economics and Business Administration, 3(2), 10–11.

Youndt, M. A., & Snell, S. A. (1996). Human resource management, manufacturing strategy, and firm performance. The Academy of Management Journal.

Zarour, N., & Hamdaoui, W. (2018). Conditions and success factors for adopting human resource marketing [In Arabic]. Cahiers Économiques, 139–148.