

RELATIONSHIP BETWEEN EMPLOYEE PERFORMANCE APPRAISAL INITIATIVE AND STRATEGY IMPLEMENTATION AT MOI TEACHING AND REFERRAL HOSPITAL IN ELDORET, KENYA

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ABSTRACT

The ability of any institution to provide service to the public depends on its capacity to clearly state its target. The main target of a public hospital includes the ability to provide accessible health service at an affordable price. In order to achieve the strategic implementation, it is necessary for the hospital to develop a good performance appraisal system. The purpose of the study was to assess the relationship between employee performance appraisal initiative and strategy implementation and was guided by the following research objectives: to; identify the types of performance appraisal process and their effect on strategy implementation, assess the relationship between human resource competence on strategy implementation, determine the relationship between organizational structure on strategy implementation in Moi Teaching and Referral Hospital. The research employed descriptive research design. The target population for this study was 2657 respondents whereby a sample size of 96 respondents was selected. The study used questionnaires and interview schedules in data collection. The data collected was then coded and entered into computers for analysis using Statistical Package for Social Sciences (SPSS) version 20. Qualitative data was analyzed using descriptive analysis. On the other hand, quantitative data was analyzed using descriptive statistics including frequency and percentage tables which were used to interpret the respondents' perception of issues raised in the questionnaires so as to answer the research questions. Inferential statistics was applied to draw conclusions

and in some cases make predictions about the properties of a population based on multiple regression analysis technique to prove the hypotheses of the study. The findings of this study were deemed to be important to MTRH as it was to provide the management with information that was to enhance service delivery through creating proper strategy implementation; eliminate poor performance through quick identification of problem areas given that quality of delivery of its health services and accountability and transparency of its functions constitute important performance components of the Hospital's mandate; the managers of other hospitals will use the provided information regarding performance appraisal process to emphasize on performance appraisal process contributing to an excellence strategy implementation; to other researchers, this study was to be able to increase knowledge on the use of performance appraisal process to improve strategy implementation in the health sector. The findings of the study were as follows: In relation to performance and development agreement, the main findings of the study were that majority of the respondents strongly agreed that the hospital makes performance and development agreement specifying staff quality management; Based on performance reviewing, the study found that the departmental performance is reviewed internally; concerning performance resourcing, the study found that the hospital's staffing process focuses on using quality staff in professional staffing. The study recommended: that the hospital needs to establish proper policies and

agreements that focus on improving the performance of individuals within each department; that the hospital should use a professional staffing process to employ qualified staff as this will improve the general performance of the hospital; that the hospital should increase the capacity to review staff performance so as to increase the ability of the human resource to assess

the performance of each entity of the hospital.

Key Words: *employee performance appraisal initiative, performance and development agreement, performance resourcing, performance reviewing, strategy implementation*

INTRODUCTION

Strategy implementation in any institution involves all key managerial functions i.e. planning, organizing, staffing, directing, and controlling of hospital's strategy related decisions and actions (Wakiuru, 2011). Thus, it involves a set of decisions and actions that result in the formulation and implementation of plans designed to achieve organizational objectives and corporate success (Aosa, 2008). This process requires critical environmental and situational analysis to determine institution's position in their related industry, and appropriate utilization of the institution's resources to achieve its major goals (Bracker, 1980). Although formulating a consistent strategy is a difficult task for any management team, making that strategy work, that is, implementing it throughout the organization is even more difficult (Hrebiniak, 2006).

The relationship between strategy implementation and Performance Appraisal process is that performance appraisal process enables the institution to assess its records in terms of the cost of operation, the number of sales or service offered and any other form of output (Aosa, 2008). Performance appraisal process is also necessary for the organization involved to be able to gauge its weakness and strength. After a careful consideration of what is the weakness and strength of an organization, the institution in question creates room for improvement by applying necessary strategic implementation and target achievement (Barney, 2009). The reason why an organization opts to conduct performance appraisal process includes the urge to change based on technology upgrade, managerial changes and human resources related changes. The expected result of conducting performance appraisal process is to come up with a better plan that an institution sees fit. These changes include, cost control, increase in profit margins and an increase in the quality of service offered by the institution (Chitoo, 2009).

Globally, performance appraisal process has been an area that implementers of management systems across the world have focused on particularly since the 1980s. A lot of institutions have shown interest in performance appraisal (Ayee, 2008). There have been annual assessments of public sector performance through the implementation of performance appraisal process (Dooren, 2006). The Canadian and Australian model of performance appraisal process has won a lot of admiration in many countries especially in Africa as a mechanism for building a culture of

more effective strategy implementation and improvement of productivity in the public service (Dierickx, 2002).

Performance appraisal process serves as an instrument for monitoring, reviewing and assessing performance and a means of promoting and encouraging a sense of responsibility amongst staff and a way of addressing the need for increase strategy implementation. In strategy implementation, studies conducted on institutions in high income countries like Australia and Canada have undoubtedly addressed one area of how to improve service delivery through proper strategy implementation that results from institution's Performance appraisal process (Dooren & Thijs, 2010).

In Africa, the prevalence of conducting performance appraisal process is not a necessary activity in most institutions. The fact that almost 50% of public institutions fail to employee performance appraisal process has led to the lack of strategy implementation (Gatere *et al.*, 2009). The lack of strategy implementation in turn has led to poor results and low returns on investment. On the other hand, about 30% of institutions employ the use of performance appraisal. According to Gruening (2011), the use of performance appraisal process in such institutions has been brought about by the need to improve the institutions profitability. The lack of achieving targets by most public institutions such as hospitals and counties is caused by several challenges. The most common challenges involved in many studies include the type of leadership, the amount of capital investment and the level of staff competency (Salome *et al.*, 2009).

Owing to the poor process of performance appraisal, different institutions have recorded different results (ECA, 2010). The lack of benchmarking results between different institutions has created a huge gap in knowledge and information about the aspect of performance appraisal process in major public sectors. There is little that has been done with regard to studies on the relationship between employee performance appraisal initiative and strategy implementation. The result of low competency in most organizations has led to lack of proper strategy implementation. For example, public institutions in developing countries have been listed to be underperforming in terms of public service delivery (Maceio, 2006). Kamrkar District hospital in Morocco was closed due to lack of proper practices.

In Kenya, public sector reforms have led to corporatization of many government-owned entities, including public hospitals, which now have the autonomy to decide their own strategy implementation (Kariuki, 2011). Nevertheless, public hospitals' have been using performance appraisal process for their service delivery. Many hospitals are primarily government funded and a majority of people living in Kenya attend public hospitals. The application of performance appraisal process and strategy implementation has enabled such public institutions to cope with tightening funding arrangements and increasing costs. Multi-dimensional performance appraisal also provides the opportunity to capture both financial and non-financial performance measurement essential to the organization's existence (Kihara, 2006). Other forms of improving strategy implementation in several institutions involve the use of Balance Score Cards (BSC) on

employee appraisal (Mohammed, 2006). According to Mohammed, the BSC has been considered the appropriate tool to provide the information needs of hospitals' diverse sets of stakeholders. However, the application of performance appraisal process has not provided a lasting solution in major public institutions, with public hospitals being rated as the most affected in terms of poor strategy implementation (Kariuki, 2011).

In UasinGishu County, the problem of low service delivery is due to lack of proper strategy implementation. The root of poor application on performance appraisal process was due to lack of proper leadership style and the increase in lack of transparency and employee motivation. The number of challenges, the Moi Teaching and Referral Hospital (MTRH) in Eldoret has produced poor results in terms of low quality service delivery, lack of adequate staff competency, technological issues such as poor file and record management and high cost of operations (Kinanga, 2014). Moreover, there is little that has been done to addressing the gap between employee performance appraisal initiative and strategy implementation in the health sector. The existence of such issues as poor quality delivery of services and lack of proper management of health facilities has caused an increase in the number of complaints from the public and has never stopped increasing. Thus, more research needs to be conducted based on the relationship between employee performance appraisal initiative and strategy implementation.

STATEMENT OF THE PROBLEM

The responsibility of the hospital's management is to add value to health service delivered to the public. The best way to do this is by exercising proper strategy implementation through continuous performance appraisal processes. However, the inability of the management to apply performance appraisal process in conducting strategy implementation has made it impossible for the institution to achieve expected results. The challenges facing the health facilities revolve around hospital management and human resource related challenges (Mohammed, 2006). In Kenya, strategy implementation in the hospital environment has been facing challenges. The indicators of strategy implementation in most hospitals are below standard. There are complaints regarding the quality of staff in most public hospitals. With regard to low performance in hospital, several approaches have been recommended towards strategy implementation. Poor service delivery in hospitals has been as a result of lack of adequate experience by the procurement department to come up with policies relating to performance and development agreement. In Moi Teaching and Referral Hospital, the minimum level of resource utilization and slow performance tracking has contributed to challenges facing staff performance. The increase in complaints on service delivery has been caused by the fact that the outsourced services are delayed and that there is no proper method to control and monitor outsourced services. In addition, labor as a resource in the hospital is not tracked and thus causing a challenge. This means that performance resourcing in the hospital environment has not been effective. Thus, the quality of staff could be below standard. In addition to this, the level of training staff on other resources such as technological applications and its accessibility is still not providing solutions to the increase in performance.

Finally, much has not been done relating to performance reviewing. Given that MTRH only performs organizational reviews, there is no evidence on individual staff review with minimal use of the balance scorecard to gauge staff performance. The repeated employment of outsourced services from previous suppliers has brought about low standards of goods and services. This is due to the fact that the hospital doesn't have additional options to gauge the products and services being supplied. Additionally, it takes long to valuate departmental performance and thus a gap exists in outlining the proper use of performance appraisal processes in hospital environment. This study therefore sought to investigate the relationship between employee performance appraisal initiative and strategy implementation in Moi Teaching and Referral Hospital in Kenya.

GENERAL OBJECTIVE

The broad objective of the study was to assess the relationship between employee performance appraisal initiative and strategy implementation in Moi Teaching and Referral Hospital, Eldoret - Kenya.

SPECIFIC OBJECTIVES

1. To establish the relationship between performance and development agreement and strategy implementation at Moi Teaching and Referral Hospital, Eldoret – Kenya.
2. To determine the relationship between performance resourcing and strategy implementation at Moi Teaching and Referral Hospital, Eldoret – Kenya.
3. To assess the relationship between performance review and strategy implementation at Moi Teaching and Referral Hospital, Eldoret – Kenya.

THEORETICAL REVIEW

New Public Management (NPM)

Performance appraisal process in the public service emerged with adoption of what scholars have come to refer to as New Public Management (NPM) theory which originated from the Public Choice theory (Gruening, 2009). Three sets of pressures precipitated the emergence of NPM. The first was the global economic crises of the 1970s and 1980s that resulted from the unprecedented surge in oil prices. This eroded the ability of state to provide goods and services which had been extended to citizenry during times of abundance (Mutahaba, 2011). The second set of pressure arose due to the collapse of the centrally planned economic systems of what was then referred as the eastern bloc. This led to most government reassessing the role of state in provision of public goods and services. There was broad consensus on the need to reduce the role of the state and allowing the private sector to take over the role of provision of services to the public (Mutahaba, 2011).

Ayee (2008) argues that the emergence of neo-liberals in the United States and the West in general advocating for 'rolling back of state' had a big influence in the reforms that were

initiated in public service from the 1980s to date. The ultimate goal of these reforms was raising the quality of service to citizens and promotion of social-economic growth (ECA, 2010). In relation to this study, the New Public Management could be applied in that performance appraisal process requires prompt adoption due to the influence by the organization's need to provide quality of service to its clients. The need to enforce performance appraisal process leads to strategic implementation and thus improved services in the organization.

Systems Theory

The systems theory was published by Kuhn, (1974) and states that a system is characterized by the interactions of its components and the nonlinearity of those interactions. According to Kuhn, Systems theory is the interdisciplinary study of systems in general, with the goal of elucidating principles that can be applied to all types of systems at all nesting of an organization. This means that in a given organization, there exist models, principles, and laws that apply to generalized systems or their subclasses, irrespective of their particular kind, the nature of their component elements, and the relationships between themselves (Kuhn, 1974).

A system is a set of two or more elements where: the behavior of each element has an effect on the behavior of the whole; the behavior of the elements and their effects on the whole are interdependent; and while subgroups of the elements all have an effect on the behavior of the whole, none has an independent effect on it. In other words, a system comprises of subsystems whose inter relationships and interdependence move toward equilibrium within the larger system. ST is primarily concerned with how systems operate, and integrates a broad range of systems by naming and identifying patterns and processes common to all of them. By use of such an overarching terminology, ST tries to explain the origin, stability, and evolution of all systems. An important aspect of ST is the distinction between open and closed systems. All conventional models and theories of organizations typically embraced the closed systems approach to the study of organizations by assuming that the main features of an organization are its internal elements. While closed systems approach consider the external environment and the organization's interaction with it, to be for the most part inconsequential, open systems approach views the organizations' interaction with the external environment as vital for organizational survival and success.

In relation to the study, the systems concept views hospital as constantly interacts with their environment. The hospital environment is comprised of a set of relationships between expected goals to be achieved as indicated in the dependent variables and they ranging from No. of customers attended to, No. of staff, Quality of service, Urgency of service delivery and No. of complaints. The hospital system and operations relies on its staff. To have an excellent staff, one requires performance appraisal. In relation to the study, the appraisal process involves performance and development agreement, performance resourcing and performance review. The desire to achieve the goals of the hospital makes up the aim of adopting a performance appraisal process. The independent variable in the study will be strategy implementation.

CONCEPTUAL FRAMEWORK

To guide the study, the interrelationship between variables discussed in the literature review is presented in the conceptual framework model shown in Figure 1. A conceptual framework is a basic structure that consists of certain abstract blocks which represent the observational, the experiential and the analytical/ synthetical aspects of a process or system being conceived. It is a set of broad ideas and principles taken from relevant fields of enquiry and used to structure a subsequent presentation. As such the independent variables in this study are performance and development agreement, performance resourcing and performance reviewing while the dependent variable was strategy implementation.

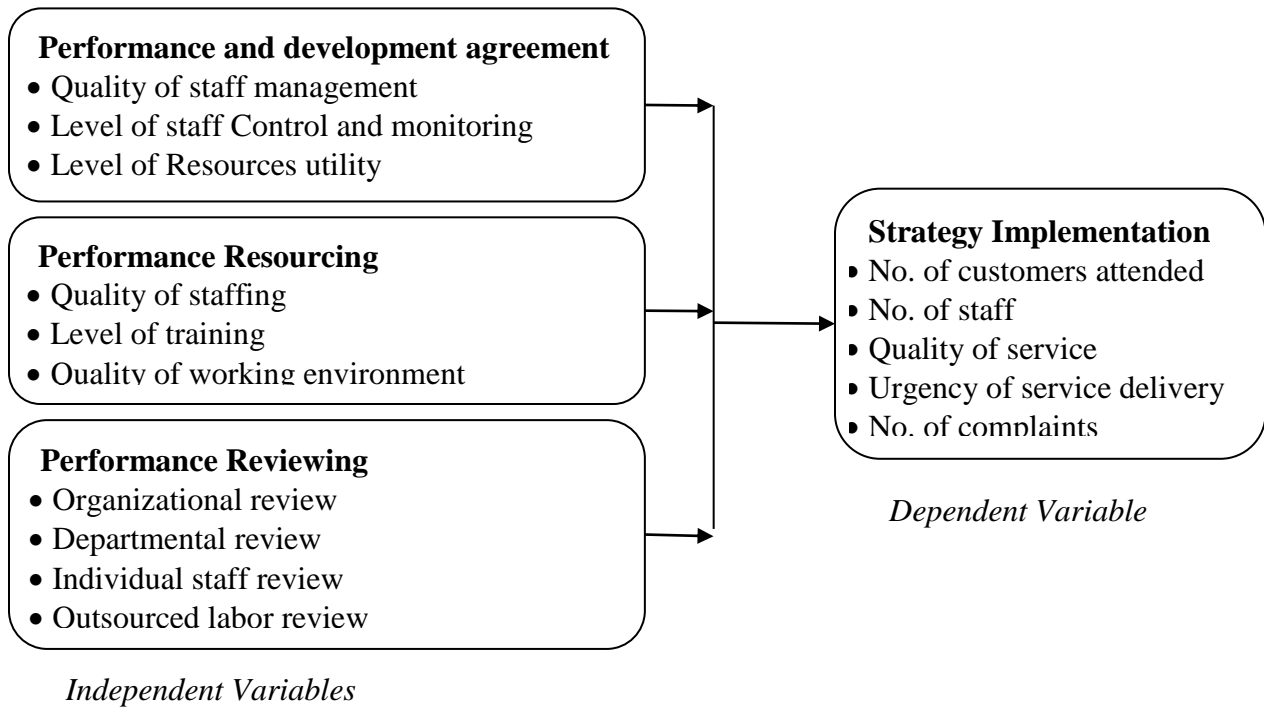


Figure 1: Conceptual Frramework

RESEARCH METHODOLOGY

The study adopted the use of descriptive research design. Descriptive research is a type of research design that is used to explain the happenings within a certain area and it concerns the conducting of studies to collect data that describe the real phenomena of an applied system, an activity or changes affecting an organization. The study was conducted in Moi Teaching and Referral Hospital. Moi Teaching and Referral Hospital is located in Eldoret Town. The target population for the study consisted of employees of the Hospital across the various cadres and departments. The target population for this study was 2657 respondents. The sample size was determined from the formula proposed by Yamane cited by Israel (2009:32) which state that:

$$n = N / (1 + N(e)^2)$$

Whereby: N = target population size; n = sample size; e=level of precision (sampling error); N= 2657; e=10%

$$\begin{aligned} \text{Thus: } n &= 2657 / (1 + 2657 (0.1)^2) \\ &= 2657 / 27.57 = 96 \end{aligned}$$

Stratified sampling was also used to select the respondents from the different departments while simple random sampling was used to pick the respective respondents from the departments. Purposive sampling was also used to pick the most senior staff and heads of department. Thus, the sample size was 96 respondents. The main techniques of data collection used were interview and questionnaires. The questionnaire was used in gathered information based on the objectives of the study. The study adopted the use of questionnaires of a semi structured nature. Further, the study collected information from key informants by use of interview schedule. The interview mode of data collection according to Kothari is very useful in extensive inquiries and can lead to fairly reliable results. The study used an interview schedule when interviewing the senior employees and heads of departments. The study ensured validity of the research instrument by discussing the data collecting instruments with the supervisors and experts in research at the department. The respondents were expected to indicate their responses by a tick or a cross for every item in the questionnaire if it measures what it is supposed to measure or not. The questionnaire was also tested for reliability by using Cronbach Alpha Coefficient to determine the internal consistency of the items. This was a method of estimating reliability of test scores by the use of a single administration of a test. In this study, the items were considered reliable if they yielded a reliability coefficient of 0.70 and above. This figure was usually considered respectable and desirable for consistency levels (Cooper, 2006).

After the collection of data, the researcher conduct data cleaning which involved the identification of incomplete or inaccurate responses which will then be corrected to improve the quality of the responses. For quantitative techniques, inferential statistics was applied, in drawing conclusions and in some cases, making predictions about the properties of a population based on information obtained from a sample. Multiple regression analysis technique was used to determine the relationship between independent variables on the dependent variable, it was used to measures the relative influence of each independent variable based on its covariance dependent variable and made useful in forecasting.

Like correlation, regression analysis assumed that the relationship between variables was linear. Multiple regression analysis involved finding the best straight-line relationship to explain how the variation in an outcome (or dependent) variable, Y, depends on the variation in a predictor (or independent or explanatory) variable, X. Once the relationship was estimated, it was possible to use the equation:

$$Y = b_0 + b_1X_1 + b_2X_2 + b_3X_3 + e$$

Where: X = The independent variables - X_1 – Performance and Development Agreement; X_2 – Performance Resourcing; and X_3 – Performance Reviewing. Y = The dependent variable (Strategic Implementation); b = Independent Variable Coefficients; and e = Error margin.

RESEARCH RESULTS

The study issued a total of 96 questionnaires. Out of the 96 questionnaires, the study received 93 questionnaires which accounted to 96.88% response rate.

Performance and Development Agreement

With regard to the statement that the hospital has high level of staff quality management, the main finding of the study was that majority of the respondents 49.5% (Mean = 4.05) of the respondents agreed that the hospital makes agreements that aim at maximizing labor and human resource utilized, 23.7% of the respondents strongly agreed, 23.7% of the respondents strongly agreed, another 10.8% (10/93) of the respondents were undecided, another 10.8% (10/93) of the respondents disagreed, and finally another 5.4% (5/93) of the respondents strongly disagreed. Another 40.9% (Mean = 3.75) agreed that the hospital makes performance and development agreement specifying staff quality management. Other responses were that 37.6% (35/93) of the respondents agreed, 15.1% (14/93) of the respondents were undecided, 2.2% (2/93) of the respondents disagreed and another 4.3% (4/93) of the respondents strongly disagreed.

Another finding of the study based on the statement that the management maintains agreements based on control and monitoring of staff using balance score cards, 45.2% (42/93) of the respondents agreed, 21.5% of the respondents strongly agreed, another 14% (13/93) of the respondents were undecided, another 11.8% (11/93) of the respondents disagreed and finally, 7.5% (7/93) of the respondents strongly disagreed. In relation to the statement that the hospital performs tracking of staff performance and records results of each staff, 41.9% (39/93) of the respondents agreed, 25.8% (24/93) of the respondents strongly agreed, another, another 21.5% (20/93) of the respondents were undecided, another 9.7% (9/93) of the respondents disagreed and finally another 1.1% (1/93) of the respondents strongly disagreed.

Performance Resourcing

The main finding of the study was that 61.1% (Mean = 3.99) of the respondents agreed that the hospital's staffing process focuses on using quality staff in professional staffing, 21.5% (20/93) of the respondents strongly agreed, another 4.3% (4/93) of the respondents disagreed and finally, 6.5% (6/93) of the respondents strongly disagreed, another 6.4% (5/93) of the respondents were undecided, another finding of the study based on the statement. Another 46.2% (Mean = 3.89) of the respondents stated that they agreed on the statement that the hospital has improved its entire working environment as a performance resourcing strategy. Other responses were that 33.3% (31/93) of the respondents strongly agreed, 8.6% (8/93) of the respondents were undecided, 9.7% (9/93) of the respondents disagreed and another 2.2 (2/93) of the respondents strongly disagreed.

Another finding of the study concerning the statement that the hospital performs training of staff in the hospital as a performance resourcing strategy, 45.2% (Mean = 3.94) of the respondents agreed, another 45.2% (42/93) of the respondents strongly agreed, another 21.5% (20/93) of the respondents were undecided, another 3.2% (3/93) of the respondents disagreed, and finally another 2.2% (2/93) of the respondents strongly disagreed. In relation to the statement that the both senior and junior staff have access to information technology for quality service delivery, 34.4% (Mean = 3.55) of the respondents agreed, another 34.4% (32/93) of the respondents strongly agreed, another 26.9% (25/93) of the respondents were undecided, another 11.8% (11/93) of the respondents disagreed and finally another 5.4% (5/93) of the respondents strongly disagreed.

Performance Review

The main finding of the study was that 44.1% (Mean = 3.81) of the respondents agreed that the departmental performance is reviewed internally. Other responses were that, 28% of the respondents strongly disagreed, 15.1% (14/93) of the respondents were undecided, 6.5% (6/93) of the respondents disagreed and another 6.5% (6/93) of the respondents were strongly disagreed. Another finding of the study based on the statement that the entire hospital's performance is reviewed through a bench marking committee, 35.5% of the respondents agreed, another 16.1% (15/93) of the respondents strongly agreed, another 16.1% (15/93) of the respondents were undecided, another 28% (26/93) of the respondents disagreed and finally, 4.3% (4/93) of the respondents strongly disagreed.

Another finding of the study concerning the statement that the Individual performance is reviewed by the human resource department, 33.3% of the respondents agreed, another 32.3% (30/93) of the respondents strongly agreed, another 12.9% (12/93) of the respondents were undecided, another 16.1% (15/93) of the respondents disagreed, and finally another 5.4% (5/93) of the respondents strongly disagreed. In relation to the statement that outsourcing services are reviewed through the procurement department, 37.6% (Mean =3.57) of the respondents agreed, another 22.6% (35/93) of the respondents strongly agreed, another 19.4% (18/93) of the respondents were undecided, another 15.1% (14/93) of the respondents disagreed and finally another 5.4 % (5/93) of the respondents strongly disagreed.

The main finding of the study was that 37.6% (Mean = 3.30) of the respondents stated that they strongly agreed on the statement that the performance review depends upon the number of staff - patient engagement. Other responses were that 14% (35/93) of the respondents strongly agreed, 25.80% (24/93) of the respondents were undecided, 9.7% (9/93) of the respondents disagreed and another 12.9% (12/93) of the respondents were strongly disagreed to the statement. Another finding of the study based on the statement that the ratio between staff and patients is used to review performance in the hospital, 24.7% (Mean = 3.44) of the respondents disagreed, another 22.6% (21/93) of the respondents agreed, another 21.5% (21/93) of the respondents were undecided, another 24.7% (23/93) of the respondents disagreed and finally, 11.8% (11/93) of the

respondents strongly disagreed. Another finding of the study concerning the statement that the Patient complaints on staff is an indicator of low performance, 37.6% of the respondents agreed, another 21.5% (35/93) of the respondents agreed, another 12.9% (12/93) of the respondents were undecided, another 22.6% (21/93) of the respondents disagreed, and finally another 5.4% (5/93) of the respondents strongly disagreed.

Strategy Implementation

The main finding of the study was that 100% (5/5) of the respondents stated that they strongly agreed on the statement that the hospital's employees are hardworking and thus provide high quality of service as a result of appropriate training and job placement. Another finding of the study based on the statement that the number of patients being discharged from hospital is high due to easy access to treatment and quick recovery, 80% (4/5) of the respondents strongly agreed another 20% (1/5) of the respondents agreed. Another finding of the study concerning the statement that the hospital has minimized resources and financial wastage due to the use of ICT integrated services, 40% of the respondents strongly agreed another 60% (3/5) of the respondents agreed. Another finding of the study concerning the statement that a lot of services are now ICT integrated for transparency 80% (4/5) of the respondents strongly agreed, another 20% (1/5) of the respondents agreed.

Correlation Analysis

Table 1: Correlation Matrix

Variables	Correlation Parameters	Performance & Development Agreement	Resourcing & Strategy Implementation	Review & Strategy Implementation
Performance & Development Agreement	Pearson Correlation Sig. (2-tailed)	1	.451**	.275**
	N	93	93	93
Resourcing & Strategy Implementation	Pearson Correlation Sig. (2-tailed)	.451**	1	.341**
	N	93	93	93
Review & Strategy Implementation	Pearson Correlation Sig. (2-tailed)	.275**	.341**	1
	N	93	93	93

** . Correlation is Significant At 0.01 Level (2-Tailed).

N=93

The correlation coefficient test of performance & development agreement and resourcing & strategy implementation was 0.451. This implies that there was no positive association at 45.1 percent. The correlation coefficient test between performance & development agreement and review & strategy implementation was 0.275. This implies to mean that there was no positive association at 27.5%. The correlation coefficient test of review & strategy implementation and resourcing & strategy implementation was 0.341. This implied to mean that there was no positive relationship at 31.1% The Collinearity was observed in all the variables tested in the study. Given that the study was unable to provide positive relationships using the correlation coefficient test, the study went further and conducted a multiple regression analysis.

Multiple Regression Analysis

Table 2: Multivariate Regression Analysis

Model	R	R Square	Adjusted Square	R	Std. Error of the Estimate
1	.459 ^a	0.211	0.184		0.71453

a. Predictors: (Constant), Performance review, Performance and development agreement, Performance resourcing

ANOVA^s

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	12.131	3	4.044	7.920	.000 ^b
	Residual	45.439	89	0.511		
	Total	57.570	93			

a. Dependent Variable: Strategy implementation.
 b. Predictors: (Constant), Performance review, Performance and development agreement, Performance resourcing

b. Dependent Variable: strategic implementation

Coefficients^a

Model		Unstandardized Coefficients B	Std. Error	Standardized Coefficients Beta	T	Sig.
1	(Constant)	2.168	-.469		4.624	.000
	Performance and development agreement	0.319	0.101	.337	3.164	.002
	Performance review	-0.141	0.121	-0.127	-1.165	.000
	Performance resourcing	0.159	0.053	0.300	2.961	.004

a. Dependent Variable: Strategy implementation

N=93

The value of R which is the considered to be one measure of the quality of the prediction of the dependent variable was found to be 0.459 and this was considered to mean that there is a good level of prediction. The *F*-ratio in the ANOVA table tested whether the overall regression model was good and fit for the data. $F(3, 89) = 7.920, p < .000$ (i.e., the regression model is a good fit of the data). Thus, the estimated model coefficients were:

Strategic implementation $F(3, 89) = 2.168 + 0.337$ (Performance and development agreement) $+ -0.127$ (Performance reviewing) $+ 0.300$ (Performance resourcing) $- 0.469$ error Margin).

H₀₁: Performance and development agreement has no significant effect the strategic implementation. Research results rejected the hypothesis. ($\beta = 0.002, p = 0.337$). The regression results in Table 4.17 shows that performance and development agreement has an effect on strategic implementation with a beta coefficient of 0.101, the effect is very significant at ($p=0.337$).

H₀₂: There exists no significant relationship between the strategic implementation and performance reviewing. Research results accepted the hypothesis. ($\beta = -0.127, p = 0.000$). The regression results in Table 4.17 show that performance and development agreement has no significant effect on strategic implementation with a beta coefficient of -0.127 .

H₀₃: Performance resourcing has no significant effect on strategic implementation. Research results rejected the hypothesis ($\beta = 0.300, p = 0.004$). The regression results in Table 4.17 shows that performance resourcing has a significant effect on strategic implementation with a beta coefficient of 0.300, the effect is very significant at ($p=0.004$).

The study regression results showed that there was a linear relationship between the independent and dependent variable(s) whereby the standard multiple regressions accurately estimate the relationship between dependent and independent variables if the relationships are linear in nature. At least two variables performance and development agreement and performance resourcing had a linear relationship, thus forcing performance reviewing to diverge in the linearity.

CONCLUSIONS

In relation to performance and development agreement, the main findings of the study was that majority of the respondents agreed that the hospital makes agreements that aim at maximizing labor and human resource utilized and was interpreted to mean: that; the hospital has qualified staff who have been recruited through a well-organized recruitment process; the number of staff in the hospital is efficient to enable the hospital manage a large number of patients and businesses; majority of the respondents have academic qualifications necessary to work within a department or several departments within the hospital and thus making the hospital increase its operations and thus a positive performance recorded by the hospital over time; the hospital has adopted relevant training to increase the level of competence of employed and thus increasing their ability to work on newly introduced facilities which include technologically installed

facilities in the hospital; majority of the management staff are qualified and have long experience in health care management.

Based on performance reviewing, the main finding of the study was that majority of the respondents stated that the departmental performance is reviewed internally. The main finding of the study was interpreted to mean: that; departments in the hospital are organized and given specific tasks to perform according to agreements strategic implementation plans made by the hospital; the hospital's departments are the core strategic implementers of the hospitals performance plan and thus, each and every department is weighed based on their perform an and thus, this implied to mean that all departments are held responsible for the actions they have towards the hospitals performance; the hospital has a significant high central management administrative center to make sure that all departments are monitored and their performance recorded.

Concerning performance resourcing, the main finding of the study was that majority of the respondents were of the opinion that the hospital's staffing process focuses on using quality staff in professional staffing. The main finding of the study was then interpreted to mean: that; the hospital has an established panel made up of highly trained human resource managers and other experts to conduct recruitment process for any staff or profession to work within the hospital; the hospital has made significant efforts in reducing the number of cases involving wrong job placements and thus making the recruitment process increase its efficiency in the establishment of more professional persons to work with the hospital.

RECOMMENDATIONS

The study recommends that the hospital needs to establish proper policies and agreements that focus on improving the performance of individuals within each department. This will enable the hospital to increase the elements within the hospitals human resource department and also improve the performance of the hospital in general. That the hospital should use a professional staffing practice to employ qualified staff as this will improve the general performance of the hospital. This will enable the Human resource department to increase quality labor for quality service. There is need to conduct more studies on the hospital's capacity to review staff performance so as to increase the ability of the human resource to assess the performance of each entity of the hospital.

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