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

Janet Cheptaek Chemiat
Master of Business Administration in Strategic Management, Jomo Kenyatta University of Agriculture and Technology, Kenya

Dr. Kiptum Kimutai Geoffrey
Lecturer, Jomo Kenyatta University of Agriculture and Technology, Kenya

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ABSTRACT

The main goal of a public hospital is to provide affordable and accessible health care; thus the achievement of strategic implementation. To do so, the hospital must develop a good performance appraisal system. This study purposed to assess the relationship between employee performance appraisal initiative and strategy implementation and was guided by the following research objectives: to; establish the relationship that performance and development agreement, performance resourcing, and performance review have with strategy implementation at Moi Teaching and Referral Hospital. The project employed descriptive research design, a target population for 2657 research participants out of which a sample of 96 research participants were selected. Questionnaires and interview schedules were used in data collection. Data was then coded and entered into Statistical Package for Social Sciences (SPSS). Data analysis using descriptive statistics was done and information presented in frequency, percentage, mean and standard deviation. Inferential statistics was applied to analyze correlation and multiple regression models which resulted in failing to reject the null hypotheses of the study. The results of the study were as follows: In relation to performance and development agreement, the highest number of participants agreed that the hospital makes performance and development agreement by specifying staff quality management; Based on performance reviewing, departmental performance was reviewed internally; Concerning performance resourcing, the hospital’s staffing process focused on using quality staff in professional staffing. The study recommended: that the hospital needed to establish proper policies and agreements that focused on improving the performance of individuals within each department; that the hospital should use a professional staffing process to employ qualified staff as this was to improve the general performance of the hospital; that the hospital should increase the capacity to reviewing staff performance so as to increase the ability of the human resource to assess the performance of each entity of the hospital. The results of the study were deemed important to MTRH as they provided the management with information that was to enhance service delivery through creating proper strategy implementation; the managers of other hospitals were to use the provided information to emphasize on performance appraisal initiative, which contributes to strategy implementation; to other researchers, this study was to increase knowledge on the use of performance appraisal initiative to improve strategy implementation in the health sector.

Key Words: employee performance appraisal initiative, strategy implementation, performance and development agreement, performance resourcing, performance review
INTRODUCTION

Strategy implementation in any institution involves all key managerial functions i.e. planning, organizing, staffing, directing, and controlling of hospital’s decisions and actions (Wakiuru, 2011). Thus, resulting in the formulation and implementation of plans designed to achieve organizational objectives (Aosa, 2008). Strategy implementation initiative requires critical environmental and situational analysis to determine institution’s position and appropriate utilization of resources to achieve its major goals (Bracker, 1980).

A myriad of factors can potentially affect the process by which strategy is implemented (Noble, 2009). In many institutions, after a comprehensive strategy has been formulated, significant difficulties usually arise during the implementation phase. The best-formulated strategies may fail to produce superior performance for the institution if they are not successfully implemented (Noble, 2009). The ability of an organization to properly implement strategic management relies on its capacity to conduct a continuous performance appraisal initiative. Strategic implementation challenges are many; whereby public hospitals are less established in terms of making changes and improvements using human resource and policy reforms. Given that majority of public hospitals in Kenya and Africa are poorly performing in high quality of service. This was based on the high number of complaints from the patients and lack of proper reports from score cards.

The relationship between strategy implementation and performance appraisal initiative is that performance appraisal initiative 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 initiative is also necessary, to enable an organization 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 strategy implementation initiatives (Barney, 2009). The reason why an organization opts to conduct a performance appraisal initiative includes: technology upgrade, managerial changes and human resources related changes. The expected result of conducting performance appraisal initiative 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 quality of service offered by the institution (Chitoo, 2009). As outlined at the end of paragraph two, the increase in poor performance is because of bad strategy implementation. The problems that casus poor performance appraisal includes poor staffing, lack of adequate staffing by the human resource and lack of high skills in the decision making process.

Globally, performance appraisal initiative 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 initiative (Dooren, 2006). The Canadian and Australian model of performance appraisal initiative 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 initiative 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. Mock (2010) points out that performance appraisal initiative is a common phenomenon in public institutions such as hospitals. The ability of the public to adopt performance appraisal initiative enables it to exercise proper administration and the management of the institution. Performance appraisal initiative has been increasingly noticed as a tool for strategy implementation through which better human resource can be realized. Institutions in developed countries also provide a platform for their staff to exercise competency (Hamton, 2008).

Not all hospitals are perfectly adopting strategy implementation. The problem is that some hospitals have low quality of service provided. The use of strategy implementation has been less effective in small hospitals in the United States. These problems include lack of adequate staff and facility. In Africa, the prevalence of conducting performance appraisal initiative is not a necessary activity in most institutions. The fact that almost 50% of public institutions fail to employee performance appraisal initiative 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 initiative 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 (Orodho, 2007).

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 initiative 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 because of 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 initiative for their service delivery. Many hospitals are primarily government funded
and most people living in Kenya attend public hospitals. The application of performance appraisal initiative 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 initiative 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 because of lack of proper strategy implementation. The root of poor application on performance appraisal initiative was because of 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 initiatives. However, the inability of the management to apply performance appraisal initiative 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 (Mohammed, 2006). 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 (Orida, 2009).
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 (Kinanga, 2014). 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 because of the fact that the hospital doesn’t have additional options to gauge the products and services being supplied. Additionally, it takes long to value departmental performance and thus a gap exists in outlining the proper use of performance appraisal initiatives in hospital environment (Akinyi, 2016). 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. Establish the relationship between performance and development agreement and strategy implementation at Moi Teaching and Referral Hospital, Eldoret – Kenya
2. Determine the relationship between performance resourcing and strategy implementation at Moi Teaching and Referral Hospital, Eldoret – Kenya
3. 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 initiative 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, 2011). 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 because of 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 initiative requires prompt adoption because of the influence by the organization’s need to provide quality of service to its clients. The need to enforce performance appraisal initiative 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 (Kuhn, 1974).
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 range from number of customers attended to, number of staff, quality of service, urgency of service delivery and number 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 initiative 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 initiative. The independent variable in the study will be strategy implementation.

**CONCEPTUAL FRAMEWORK**

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 Framework**
RESEARCH METHODOLOGY

Descriptive research design was used. 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 senior and junior staff drawn from finance, human resource, nursing, pharmaceutical, procurement and record management departments. The sample size was determined from the formula proposed by Yamane cited by Israel (2009:32) which state that:

\[ n = \frac{N}{1 + Ne^2} \]

Whereby:

- \( N \) = target population size (2657)
- \( n \) = sample size (96)
- \( e \) = level of precision (sampling error) where \( e=10\%: \)
  - \( n = 2657 / (1 + 2657 (0.1)^2) \)
  - \( n = 2657 / 27.57 \)
  - \( n = 96 \)

The sample size was 96 research participants. Stratified sampling was also used to select the research participants from the different departments while simple random sampling was used to pick the respective research participants from inside the listed departments. Purposive sampling was used to pick the most senior staff and heads of department. Diverse methods of data collection were employed at various stages of the study. This was within the confines of appropriate sampling techniques. In some cases, a single method of data collection was used while in others a combination of two or more technique was necessary.

The main techniques of data collection used were interview and questionnaires. The study adopted the use of questionnaires of a semi structured nature. The questionnaire was used to obtain primary data from the sampled population. The questionnaires were then distributed to the employees of Moi Teaching and Referral Hospital. All the research participants were asked the same question in the same order. The questionnaires were standardized and completely predetermined. The questionnaires helped the study to understand the views, perception and experience of the staff in the hospital. The questionnaires gave the research participants freedom to express their opinions and understanding on the relationship between employee performance appraisal initiative and strategy implementation in the hospital. The study used an interview schedule when interviewing the senior employees and heads of departments.
After the collection of data, the researcher conducted data cleaning which involved the After coming from the data collection period, data was cleaned, coded and entered into Statistical Package for Social Sciences (SPSS) version 22. Both descriptive and inferential statistics were performed. Quantitative techniques were provided during inferential statistics. Inferential statistic involved multiple regression analysis which was used to answer the hypotheses of the study. The equation was drawn in relation to the regression model as follows:

\[ Y = b_0 + b_1X_1 + b_2X_2 + b_3X_3 + e. \]

Where:

- \( X = \) Independent variables, (i.e. \( X_1 \) – performance and development agreement, \( X_2 \) – performance Resourcing, \( X_3 \) – performance reviewing), \( Y = \) Dependent variable (strategic implementation), \( b = \) Independent variable coefficients and \( e = \) Error margin.

The assumptions of multiple regressions included that the variables were normally distributed, there was linear relationship between the independent and dependent variable(s), reliably (lack of measurements with error) and homoscedasticity (having equal statistical variances).

**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**

The study found that majority (40.9%) of the respondents agreed that the hospital has high level of staff quality management. The corresponding mean score was 3.75. In addition, 45.2% of the respondents agreed that the management maintains high level of staff control and monitoring by using balance score cards. The corresponding mean score was 3.61. Further, 49.5% of the respondents agreed that the hospital labor resources have been maximally utilized. The corresponding mean score was 4.05. 41.9% of the respondents agreed that the hospital performs tracking of staff performance and records results of each staff. The corresponding mean score was 3.82. From these results, the hospital has adopted relevant training to increase the level of competence of employed staff and thus increasing their ability to work on newly introduced facilities which include technologically installed facilities in the hospital. The departments in the hospital have recruited persons with specific experience to the task that the department is supposed to carry out in order to implement strategic plans within the hospital. A performance review system is a good instrument that can be used to improve the quality of an organization’s work force performance of which it is considered as an important aspect in human resources management and as part of the control process in administration.
Performance Resourcing

From the study, 61.1% of the respondents agreed that the hospital’s staffing process focuses on using quality staff in professional staffing. The accumulated mean score was 3.99. Another 46.2% of the respondents stated that they agreed on the statement that the hospital has improved its entire working environment as a performance resourcing strategy. The aggregate mean was 3.89. 45.2% of the respondents agreed that the hospital performs training of staff in the hospital as a performance resourcing strategy. The corresponding mean was 3.93. In addition, 34.4% of the respondents agreed that the both senior and junior staff have access to information technology for quality service delivery. The weighted average was 3.55. 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. If the hospital had not established an effective taskforce to conduct the hospital's recruitment process, there would have been fewer workforces to operate the day to day jobs in the hospital. This is not the case with MTRH as the recruitment process has been effective and thus the result of the results of the study is that the hospital's performance resourcing is able to achieve strategic implementation.

Performance Review

From the study, 44.1% of the respondents agreed that the departmental performance is reviewed internally, 35.5% of the respondents agreed that the entire hospital's performance is reviewed through a benchmarking committee, 33.3% of the respondents agreed that the individual performance is reviewed by the human resource department, 37.6% of them agreed that outsourcing services are reviewed through the procurement department, 37.6% of the respondents stated that they strongly agreed on the statement that the performance review depends upon the number of staff-patient engagement, 37.6% agreed that the ratio between staff and patients is used to review performance in the hospital, while another 37.6% of the respondents agreed that the patient complaints on staff is an indicator of low performance. The corresponding mean scores were 3.81, 3.31, 3.71, 3.57, 3.30, 3.44 and 3.47 respectively. Accordingly, 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 hospital's performance plan and thus, each and every department is weighed based on their performance and thus, this implies that all departments are held responsible for the actions they have towards the hospital's performance. The hospital has a significant high central management administrative center to make sure that all departments are monitored and their performance recorded. Performance appraisal initiative is the process through which organization takes stock of its manpower in terms of its present performance, the aptitude and interest of each person, his strengths and weaknesses and his potential for growth.
**Strategy Implementation**

From the study majority of the respondents 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 as shown by a mean score of 4.8. The respondents also agreed that a lot of services are now ICT integrated for transparency as shown by a mean score of 4.8 and the number of patients being discharged from hospital is high because of easy access to treatment and quick recovery as shown by a mean score of 4.8. In addition there was impartiality on that the hospital has minimized resources and financial wastage because of the use of ICT integrated services. According to these views, the hospital has increased employees' training on various departmental operations and thus they fit well during job placement done by the human resource department. The result of the study could also be explained to mean the institution has benefited from external expertise as many of its resources are acquired extensively from professionals in order to boost the hospitals prompt implementation of its strategic plan.

**Correlation Analysis**

**Table 1: Correlation Matrix**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Parameters</th>
<th>Performance &amp; Development Agreement</th>
<th>Resourcing &amp; Strategy Implementation</th>
<th>Review &amp; Strategy Implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance &amp; Development Agreement</td>
<td>Pearson Correlation</td>
<td>1</td>
<td>.451**</td>
<td>.275**</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>N 93</td>
<td>93</td>
<td>93</td>
</tr>
<tr>
<td>Resourcing &amp; Strategy Implementation</td>
<td>Pearson Correlation</td>
<td>.451**</td>
<td>1</td>
<td>.341**</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.000</td>
<td>93</td>
<td>.001</td>
</tr>
<tr>
<td></td>
<td>N 93</td>
<td>93</td>
<td>93</td>
<td>93</td>
</tr>
<tr>
<td>Review &amp; Strategy Implementation</td>
<td>Pearson Correlation</td>
<td>.275**</td>
<td>.341**</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.008</td>
<td>.001</td>
<td></td>
</tr>
<tr>
<td></td>
<td>N 93</td>
<td>93</td>
<td>93</td>
<td></td>
</tr>
</tbody>
</table>

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

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: Model Summary**

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.459</td>
<td>0.211</td>
<td>0.184</td>
<td>0.71453</td>
</tr>
</tbody>
</table>

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

**Table 3: ANOVA**

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Regression</td>
<td>3</td>
<td>4.044</td>
<td>7.920</td>
<td>.000b</td>
</tr>
<tr>
<td></td>
<td>Residual</td>
<td>89</td>
<td>0.511</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>93</td>
<td>57.570</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**Table 4: Coefficients**

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients B</th>
<th>Std. Error</th>
<th>Standardized Coefficients Beta</th>
<th>T</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>2.168</td>
<td>-.469</td>
<td>4.624</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Performance and development agreement</td>
<td>0.319</td>
<td>0.101</td>
<td>.337</td>
<td>3.164</td>
</tr>
<tr>
<td></td>
<td>Performance review</td>
<td>-0.141</td>
<td>0.121</td>
<td>-1.165</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Performance resourcing</td>
<td>0.159</td>
<td>0.053</td>
<td>2.961</td>
<td>.004</td>
</tr>
</tbody>
</table>

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).

$H_{01}$: Performance and development agreement has no significant effect the strategic implementation. Research results rejected the hypothesis. ($\beta = 0.002$, $p = 0.337$). Performance and development agreement has an effect on strategic implementation with a beta coefficient of 0.101, the effect is very significant at ($p=0.337$).

$H_{02}$: There exists no significant relationship between the strategic implementation and performance reviewing. Research results accepted the hypothesis. ($\beta = -0.127$, $p = 0.000$). Performance and development agreement has no significant effect on strategic implementation with a beta coefficient of -0.127.

$H_{03}$: Performance resourcing has no significant effect on strategic implementation. Research results rejected the hypothesis ($\beta = 0.300$, $p =0.004$). 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 results of the study was that the hospital makes agreements that aim at maximizing labor and human resource utilized and was expounded to mean: that; the hospital had qualified staff who had been recruited through a well-organized recruitment process; the number of staff in the hospital was efficient to enable the hospital manage a large number of patients and businesses; most staff had academic qualifications necessary to work within a department or several departments within the hospital and thus made the hospital increase its operations and thus a positive performance recorded by the hospital every time; the hospital had adopted relevant training to increase the level of competence of employed and thus increasing their ability to work on newly introduced facilities
which included technologically installed facilities in the hospital; most management staff had qualified and had a long working experience in health care management.

Based on performance reviewing, the main results showed that departmental performance was reviewed internally. The result was expounded to mean: departments in the hospital were organized and given specific tasks to perform; the hospital's departments were the core strategic implementers thus, each and every department was weighed based on their perform, this meant departments were held responsible for the actions they had towards the hospitals performance; the hospital had a significant high central management administrative center to make sure that all departments are monitored and their performance recorded.

Concerning performance resourcing, the main results showed that the hospital’s staffing process focuses on using quality staff in professional staffing. The main result was then expounded to mean: the hospital had established a 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 needed to establish proper policies and agreements that focused on improving the performance of individuals within each department. This was to enable the hospital to increase human resource departmental performance and improve performance generally.

That the hospital should use a professional staffing practice to employ qualified staff as this was to improve general performance. This was also to enable the human resource department increase quality labor for quality service.

**REFERENCES**


International Society for Performance Improvement (ISPI) (2006). *Handbook of Human Performance*, 1(3) 129-150,


Johnson, F. (2006). *Performance leadership: The next practices to motivate your people align stakeholders and lead your industry*. McGraw Hill Publications; Portland-USA, 3 (9) 553-562,


