

**INFLUENCE OF PERFORMACE MANAGEMENT SYSTEMS ON
THE PERFORMANCE OF PUBLIC HEALTH INSTITUTIONS:
A CASE STUDY OF COAST PROVINCIAL GENERAL HOSPITAL**

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**A RESEARCH PROJECT REPORT SUBMITTED TO THE SCHOOL
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DECLARATION

This research project is my original work and has not been presented for award of a degree in any other University.

Signature

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This research has been submitted for examination with my approval as the University supervisor

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DEDICATION

This research project is dedicated to my family, for the continued support throughout my work.

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I am grateful to all everyone who contributed in any way towards the eventual completion of this research work.

I appreciate my supervisors' (Dr. W. Kingi and Dr. M. Idua) role in conscientiously guiding me through the research, for without their caring guidance, I could not have successfully accomplished this milestone.

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ABBREVIATIONS AND ACRONYMS

ANOVA	Analysis of Variance
CPGH	Coast Provincial General Hospital
GOK	Government of Kenya
HR	Human Resource
KACC	Kenya Anti-Corruption Commission
KPMG	Klynveld Peat Marwick Goerdder
PMS	Performance Management System
SPSS	Statistical Package for Social Sciences
WHO	World Health Organization

DEFINITION OF TERMS

Acceptance: Employee notion or perception of a human resource practise or policy within an organisation as being suitable and adequate to meet its purpose (Torrington, 2009).

Organizational effectiveness: How successful an organisation is in meeting its set objectives (Moore, 2007).

Organisation performance: Comparison between the actual output obtained by an organisation, against the set targets or objectives (Torrington, 2009).

Performance appraisal: Defined as a process of evaluating or reviewing of an employee's output, contribution and shortcomings, against the set targets or objectives within a set period of time (Waal, 2005).

Performance management system: Planned and systemic structure that guides the performance management aspect of an organisation (Pfeifer, 2009).

Reliability: The measure of consistency in performance measurement within an organisation (Dessler, 2009).

Strategic congruence: Means the scope to which a PMS prompts job performance that is consistent with the outputs, goals or objectives that are required by an organization (Armstrong, 2009).

Specificity: The magnitude of guidance a performance management system provides to employees, on what is expected of them at the work place, in order for them to meet the set objectives (Armstrong, 2005).

Validity: The extent to which the performance measure is logical, and corresponds to the actual employee performance (Armstrong, 2005).

ABSTRACT

The need for enhanced performance standards in healthcare institutions in Kenya has necessitated implementation of performance management systems that serve as a guide to and check for performance. This has been instigated by the shortfalls in performance reported and cases of poor service delivery in healthcare institutions in Kenya. This study, therefore, aimed at establishing the influence of performance management systems on performance of public health institutions, with Coast Provincial General Hospital (CPGH), being the case study. Specifically, the research focused on strategic congruence, validity, reliability, acceptance and specificity of the performance management system and their influence on performance of public health institutions in Kenya. Descriptive survey research design was used to obtain the respondents' views on the influence of the performance management system on the hospital's performance. The study was a census comprising of 45 Heads of Departments at CPGH. Primary data was used in this study. Structured questionnaires were used to collect views on the performance management system from the respondents. The questionnaire was subjected to pre-test to ensure both validity and reliability. The data collected was edited, coded and analysed using SPSS. Descriptive and inferential statistics were used for data analysis. The relationship between the research variables was tested by use of correlation and regression analysis. From the results obtained, it was established that performance management systems have a significant influence on the performance of public health institutions. It was also established that a significant positive relationship existed between specificity and performance of CPGH. The study however found no significant relationship between strategic congruence, viability, reliability and acceptability on the performance of CPGH. Since overall, the study established a significant positive relationship between performance management systems and performance of CPGH, it was, therefore, concluded that establishing performance management systems in the public health institutions is crucial, as it helps continuously monitor employees' performance, identify skill gaps and develop required competencies. The research recommends that CPGH implement performance management systems with emphasis on specificity. Further research focusing on other sectors needs to be carried out since this study was limited to only healthcare institutions.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

This study focused on the influence of performance management systems on the performance of public health institutions. Chapter one provides the background information on the topic under study. The statement of the problem, general and specific objectives of the study are also covered in this chapter. The Study hypotheses, justification and scope of the study will also be covered in this chapter.

The rapid and massive changes in the global economy has necessitated a more structured method of managing employee performance (Pareek *et al.*, 2006). For organizations to survive in this competitive economy, need competent employees (Prasad, 2007). There has been a global shift from the predictable method of managing employee performance by conducting periodical performance appraisal, which only highlighted to employees what they need to do, to the now formal performance management system (Waal, 2005).

The shift was as a result of the shortcomings of the conventional performance appraisals, as the performance appraisals did not improve employee performance largely, and thus the need for a more structured and efficient method of not only managing employee performance but improving their performance as well (Baron, 2005). It is even predicted that in future, performance measurement will

not focus on measuring an individual employee output at work, but will mainly focus on the overall output of the organisation (Claydon, 2010). Performance management systems have been implemented worldwide, so as to improve performance, more so in the governments' health sector, where proper performance management mechanisms have been lacking (WHO, 2007). In Africa, some countries such as Mali, Uganda and Kenya, have established performance management systems in their public health institutions geared towards improving their overall performance (Obongo, 2009).

The performance management systems that have been put in place in most African countries have mostly been emulated the western countries. This has been done without prior evaluation to establish their applicability in the developing African nations. African countries suffer from challenges such as lack of proper infrastructure and therefore not well placed or developed as the western counterparts (Mohammed, Jamil, & Ahamadi, 2011). This implies the need for research to establish the influence of performance management system used at public health institutions in Africa on the institutions' performance, as well as investigate if they have the same positive effect on employee and organisational performance as it is in the western countries.

Health system decisions in Kenya have traditionally been made at the national level (GOK, 2009). However, in 2010, a new constitution was promulgated in Kenya, where key government services such as healthcare were devolved to the county level (Rono, 2014). This meant that each of the 47 county governments were individually responsible for managing efficiency and accountability in their

delivery of health care, thus promoting higher performance standards of employees in healthcare institutions in the county governments (Ministry of Health, 2014). Coast provincial General Hospital in an effort to comply with this regulation put in place a performance management system. This was done in order to guide and check performance with the eventual result of improving service delivery at the healthcare institution. CPGH was the pioneer public health institution in Coast province to introduce a performance management system that has been emulated from the west, but no research has been made to establish its influence on the hospital's performance.

1.1.1 Performance Management System

A performance management system is an organised framework that facilitate the attainment of individual and corporate goals (Pfeifer, 2009). A performance management system is crucial in gauging the performance of employees against the set organisation's performance standards (Armstrong, 2005). Performance management system also establishes the employees training and development needs as well as is quite useful in developing an organisation's pay structure (Dessler, 2009). A performance management system is a three-phase process first, a performance management system communicates what areas of an employee performance are crucial for the success of an organisation; secondly, it then measures this performance; thirdly, through performance feedback, employees are advised on how they can adjust their performance goals to match the requirements of the organisation (Pfeifer , 2009).

It is crucial for managers to create awareness and promote employee acceptance of performance management system, for it to be effective (Mullis, 2007). According to Wesonga, Tabitha and Muya (2012), in a study, where they sought to evaluate the implementation of performance contracting in state corporations in Kenya, found out that employees dislike performance management systems. They noted that if employees' acceptance of the performance management system is established at the onset of the introduction of a new PMS, the system would be effective in improving organisation's performance. In a research on the determinants of an effective performance management system in South East Asia, Also Nur (2011) established that the success of a performance management system is gauged against five-set criteria namely: strategic congruence of the system, validity of the system, reliability of the system, acceptability of the system, and finally specificity.

1.2 Statement of the Problem

Very few African countries have introduced a performance management system for their public health care sector, which has contributed to the non-performance of these public hospitals in giving its citizens the much-needed service delivery, yet these countries are more prone to diseases and infections that lead high mortality rates (WHO, 2007). This is apparent in Sub-Saharan Africa where the initiative for improving the service delivery in the public health care has not brought about the desired effects (Obongo, 2009). Moreover, in the few cases where performance management system in public health care has been implemented like in the case of Mali and Uganda the systems have not been

successful in enhancing performance in the public health care sector (Mohammed & Jamil, 2011). This has been attributed to developing countries embracing PMS models from developed countries and implementing them wholly, most of these (PMS) models are not applicable in the developing countries scenario as the two contexts are not similar (Kato, 2006).

The shortfalls of the performance management system in the African countries is one of the factors contributing to the worsening of the standards of service delivery of the public health sector of developing countries (WHO, 2007). In Mali, for instance, the performance management of health care workers has several inadequacies, yet they have put in place a performance management system. This is evidenced by healthcare workers working without job descriptions, lack of objectivity during performance appraisals, and even the training needs analysis are not conducted appropriately. (Mohammed, Jamil, & Ahamadi, 2011). The same case applies to Uganda, where it has been established that in Uganda, despite the rollover of PMS to the municipal health sector, the public health service delivery has not improved to desirable standards.

Since the decentralisation of government functions in 2010, Kenya has struggled to build an effective performance management system for the public health institutions that can assure effective delivery of quality healthcare to their people (KACC, 2010). A study carried out by Gichovi (2013), which focused on how performance contracting affected service delivery of state corporations in Kenya, established that Kenya has emulated the PMS of developed countries without conducting prior research to identify the suitability of the PMS in the Kenyan

context, which has led to the poor performance in the public sector. This is evidenced by the fact that even after the implementation of the PMS, the service delivery of health care has not improved (WHO, 2007). Coast Provincial General Hospital, a public hospital in Kenya initiated a performance management system in 2013, which has been emulated from the developed countries. However, no research has been conducted to establish if the PMS is effective or has led to a positive change in performance of the hospital. The impact of the performance management system on the performance of health care organisations in Kenya has not been given much focus (Nzuve, 2013).

Since most studies reviewed have delved on the effective implementation of performance management systems in Kenya, there is need to conduct research focusing on how performance management systems influence performance of public health institutions in Kenya. This study, therefore, sought to evaluate the influence of the PMS on the performance of public health institutions in Kenya, with a specific focus on Coast Provincial General Hospital.

1.2 Objectives of the Study

The study was guided by two objectives namely general and specific.

1.3.1 General Objective

The general objective of the study was to investigate the influence of performance management system on the performance of Coast provincial General Hospital.

1.3.2 Specific Objectives

The specific objectives of the research were to:

- i) Determine the effect of strategic congruence on the performance of Coast Provincial General Hospital.
- ii) Establish the effect of validity on the performance of Coast Provincial General Hospital.
- iii) Examine how reliability affects the performance of Coast Provincial General Hospital
- iv) Determine how acceptance affects the performance of Coast Provincial General Hospital.
- v) Evaluate how specificity affects the performance of Coast Provincial General Hospital.

1.4 Research Hypothesis

Ho1: There is no significant effect of strategic congruence on the performance of the Coast Provincial General Hospital.

Ho2: There is no significant effect of validity on the performance of Coast Provincial General Hospital.

Ho3: There is no significant effect of reliability on the performance of Coast Provincial General Hospital.

Ho4: There is no significant effect of acceptance on the performance of Coast Provincial General Hospital.

Ho5: There is no significant effect of specificity of on the performance of Coast Provincial General Hospital.

1.5 Justification of the Study

This study is expected to provide more insight to public health institutions on how they can utilise performance management systems improve their performance. This should eventually lead to improvement in performance of both the employees and the hospital as well if suggestions for improvement of the performance management systems recommended by this study are put into place.

The study findings will also provide a link between performance management system and performance of public healthcare institutions, thus policy makers and the relevant stakeholders in the public health sector will obtain insight on the areas of improvement on the management of performance in public healthcare institutions. This may lead to improved delivery of services by public hospitals in Kenya.

Key stakeholders and players in other public sectors will also benefit from the study if they put into place the recommendations put in place by this study, to improve their performance management systems, which will consequently lead to improved performance. The study should benefit private sector organizations as well in coming up with a result bearing PMS.

Anyone who may be interested in the area of performance management system could also benefit from the study findings, as the study is expected to contribute to added knowledge in the domain of performance management systems and service delivery.

The study would also be valuable to HR practitioners as they implement their performance management policies and practices in their places of work. Finally, the study would help other researchers who may be interested in undertaking research in the area related to performance management systems and performance.

1.6 Scope of the Study

The study focused on the influence of performance management system on the performance of public health institutions, a case study of Coast Provincial General Hospital, which is in the county government of Mombasa. The study sought to establish the influence of performance management system on the performance of public health institutions. Specifically the study focused on finding out how strategic congruence, validity, reliability, acceptance and specificity affect performance at the. The study focused on the institution heads of department and their sectional heads, as they were well versed on the topic under investigation and they are supervisors of the department. Data collected from the sample was used to make conclusions and recommendations for performance improvement on all public health institutions in Kenya.

1.7 Limitations of the Study

Firstly, the research took longer than was anticipated, due to the non-availability of key respondents more so the doctors who were always busy attending to the patients, thus the data collection process took more than a month.

Secondly, out of the targeted respondents who were forty five in number, not all were able to fill and return the questionnaires. Thirty six respondents dully filled and returned questionnaires with the rest not responding.

Lastly due to delays in filing and getting the questionnaires in time, many follow ups had to be made which proved to be costly to the researcher both in time and money.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter covers previous writings related to the study. It includes the theoretical foundations, conceptual framework, related to this study, a critique of existing literature relevant to the study, summary of the literature reviewed and identification of research gaps in the field of theoretical framework

The principal theory of this research is Goal Setting theory, with Expectancy theory, Social Cognitive theory and Role theory also providing support for this study.

2.2.1 Goal Setting Theory

The proponents of the goal setting theory were Edwin Locke and Gary Latham in 1960. A goal is an accomplishment or duty that an individual determinedly wants to achieve or obtain.) . A goal as an achievement or mission that an individual strives to attain, and the motivation to achieve that goal, is what propels behaviour towards the attainment of the set goal (Locke & Latham, 2006). According to the theory, difficult goals often motivate an individual to perform better than goals that are easier to attain. This is because the harder the task, the more it motivates an individual to accomplish it (De Dreu, 2007).

Goal-setting theory states that people work toward accomplishing their goals (Meece, Anderman & Anderman (2006). Locke and Latham (2002) established that hard tasks or goals are a great motivator leading to higher performance. Additionally, this theory states that for an employee to attain a set goal, the employee must be committed to attain the set goal, as well as receive the necessary feedback and direction required for them to do so (Latham, 2006). Based on the knowledge of the goal setting theory, the setting of goals in the development of performance management system is of paramount importance. It defines the standards at which performance will be determined, and leads to higher performance (De Dreu, 2007).

As established by Prasad in (2009), a performance management system is a three-phase process whereby at the onset, a PMS communicates what areas of an employee performance are crucial for the success of an organisation; secondly, it then measures this output. Thirdly, through performance feedback, employees are communicated to and informed of how they can modify their work behaviour and performance to be in line with what the organisation requires. Goal setting is paramount in performance management systems, as established by Ordonez (2009).

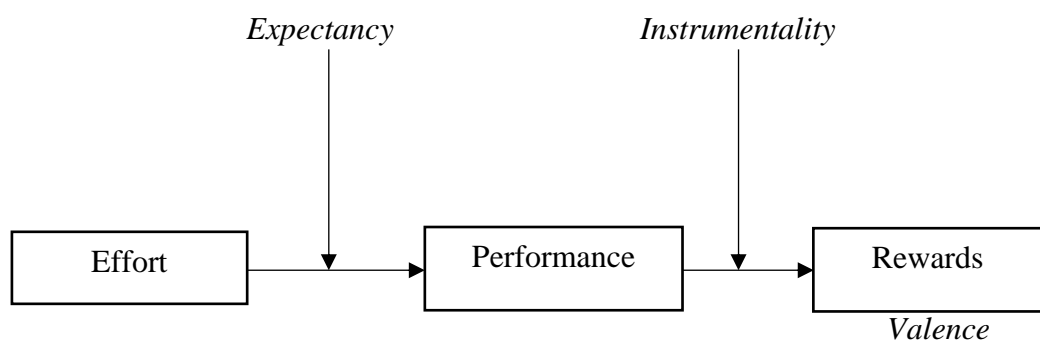
Schweitzer, and Bazerman, (2009), in their research found that over prescribing goal setting has systematic side effects. Goal setting is an essential attribute in performance management systems in two ways, first, during the initial stages of the implementation of the performance management systems as to have strategic congruence, by linking individual goals with the organisation's goals. Second, it

is helps in promoting the level of specificity in performance management systems by providing guidance to employees on how it is expected of them, thus helping the performance management system become more effective.

2.2.2 Expectancy Theory

The Expectancy theory postulates that an employee's performance is greatly reliant on the rewards they expect to receive from their performance (Torrington, 2009). Employees perform well if they have confidence that their efforts are rewarded fairly (Dessler, 2009).

The theory proposes that motivation consist of three key elements: expectancy, instrumentality, and valence (Vroom, 1964). The greater the expectancy that their effort will be fairly compensated, the greater their effort (Torrington, 2009).



Torrington (2009)

Figure 2.1: Relationship between effort, performance and rewards.

It, therefore, follows that in order to establish effectiveness in a performance management system, as stipulated by the expectancy theory. The rewards expected by the employees must be commensurate to their efforts. This has

actually been the basis of performance-based pay, which has actually been effective in motivating employees to perform better, as established by Ansari *et al.* (2007), in their research on leader-member exchange and attitudinal outcomes.

2.2.3 Role Theory

According to role theory, employee performance is as a result of the combination of individual contributions and organizational direction, and thus establishes that employees must be made aware of what is required for the particular role in order to perform well (Dessler, 2009).

This theory also establishes role multiplicity- a scenario, where an employee has more than one role organisation in an organisation, for instance a Sales Supervisor, who is not only a sales person but is a manager. This theory thus proposes that during performance appraisal, employees must be appraised on these two roles, which are different. As a result, performance management system that measure only one role for an individual irrespective of an employee holding many roles related to the job and this leads to validity error. To eliminate this fault, It is suggested that PMS need to account for various roles that are given to an employee during performance appraisal, as postulated by Ilgen & Hollenbeck (1999), cited by Dessler (2009), thus providing a different standpoint of viewing work performance.

2.2.4 Social Cognitive Theory

The Social Cognitive Theory is a learning theory posed by Bandura in. It is based on the idea that people acquire behaviour by observing how other people behave (Gould, 2007). For a performance management system to be effective, managers must act as role models, for employees to emulate from, more so when the performance management system is being introduced in the organisation, as established by Chau *et al.* (2008), on their research on managing performance in an era of global crisis, a case study of the Republic of China. They further stated that for performance management system to be accepted by employees, the employees must learn from their managers on how the system works, and how it can be of benefit to them.

Constructive as well as undesirable experiences in a great way influence one's ability in performing a given task. People are more likely to consider themselves competent if they have previously performed well in a task and are most likely to perform well in related tasks in future (Bandura, 2002). For example, if one performed well in a previous job assignment they are more likely to feel assured and perform better when given a similar role to perform (William, 2010). Additionally, Redmond (2010), states that if an employee is rewarded for performing well, the employee will perform even better as they expect to receive greater recognition for their good output. Managers should thus strive to create more positive experiences for employees so as to improve employee performance, which will lead to more effective performance management.

2.3 Conceptual framework

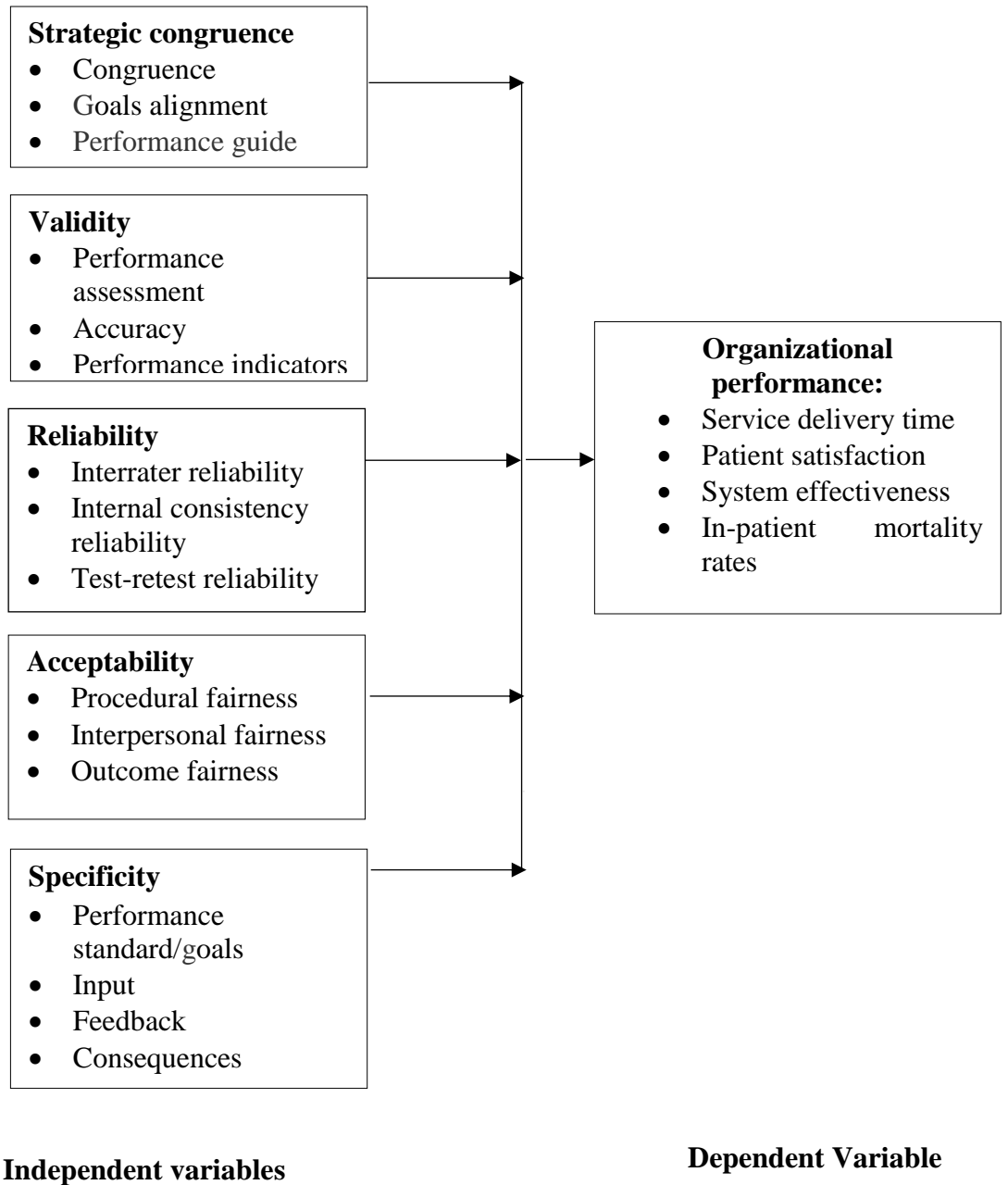


Figure 2.1: Conceptual framework

2.3.1 Strategic Congruence

The degree to which a PMS is able to yield job performance that is in line or matches the organisations objectives is strategic congruence (Armstrong, 2009). It is important for a performance management system to provide direction to employees so that their output is as expected. The term strategic congruence implies that the individual employee's goal, the department goal and overall organisation goal are amalgamated (McClelland, 2000). It also refers to the integration of multiple goals, either within an organization or between multiple groups (Armstrong, 2007).

Congruence is a result of the alignment of goals to achieve a united mission, and the first proponent of strategic congruence was Skinner in 1964, who highlighted the importance of linking individual employee's goals with business and organisational goals, to achieve competitive advantage (Dessler, 2009). Strategic congruence should also be applied in the performance management system, as highlighted by the works of Claydon (2009), who postulates that organisations need performance management systems, and they should define goals that from the worker and eventually tickle to the entire organisation. Strategic congruence focus should therefore be wholesome and covering the individual employee, group as well as organisational level.

Strategic congruence focus helps in ensuring that performance inadequacies at all levels are traced to ensure alignment of performance at all parts. This serves as information that the organisation can use in making decisions to help it

improve performance (Kazim, 2006). The need for strategic congruence in performance management is pegged on the goal setting theory propagated by Locke in 1960 (Latham, 2006). He further states that employees perform better when their goals are matched and blended with other employees' goals, as opposed to if they were only focused on attaining their individual goals. Therefore, employees need to work as teams with specific unified goals, to increase productivity.

Through strategic congruence, employee performance is measured based on goals set that match the organisation's needs. This ensures that organisations needs are met (Kazim, 2006). It is also measured by the level of employee's commitment towards enhanced organisational performance after alignment of individual goals with the organization goals during performance management (Kuvaas, 2007)

2.3.2 Acceptability

Acceptability in performance management system refers to how employees perceive the suitability, adequacy or appropriateness of the performance management systems, which lead to negative or positive behavioural tendencies towards it (Mujtaba, 2006). The perceived value of a performance management system within an organisation is the acceptance of the system by employees and managers.

In a research where they focused on the factors that affect the performance of local authorities in Kenya, Nzuve and Kaimuri (2013) established that both

performance management systems are usually disliked or received with much cynicism by employees. Employees express their dislike for the current performance management system by expressing constant grievances about their performance management system, dreading performance appraisals as well as having increased disciplinary issues (Dessler, 2009). In some cases, employees intentionally lower their productivity and even quit employment if they perceive the performance management system to be unfair and unacceptable to them (Acas, 2005).

For instance, many organisations and their senior managers still view performance management as a human resource practise, which must be conducted, periodically, which does not necessarily translate to improved performance. This view is also backed by Chau (2008), who states that senior management are often far removed from daily operations of other subordinates, thus, creating a disconnect between them and other employees, yet they are required to provide leadership and guidance to other employees in promoting an effective PMS. The lack of acceptability of performance management in organizations is due to lack of openness, poor feedback mechanism, bias assessment, poor reward structure, and defective rating criterion by the management in the performance management system (Nzuve, 2013).

Employees' acceptance of the PMS, which is determined by how reasonable the system is (Fajana, 2006). In addition, there is widespread agreement that the effectiveness of a PMS depends on the attitudes of those responsible for its design and implementation, Teachout (2004). The effect of employee acceptance

on the success of a PMS is based on Vrooms expectancy model of motivation that states that an employee's performance depends on the magnitude of motivation and employee has to perform their duties at work (Armstrong, 2008). The impact of acceptance of PMS on employee performance is shown by the deviations from the normal employee performance after introduction of a new performance management system or after introducing new amendments to the existing performance management system in the organisation (Armstrong, 2008).

2.3.3 Validity

Validity is the level to which a performance measurement instrument evaluates whatever it is intended to assess (Saal, 2005). Validity in performance management system is also concerned with whether the performance appraisal tool evaluates the employee behaviour and output that is relevant to their performance. A performance measurement instrument is said to be valid if it assesses all the crucial behaviours and outcomes that are required from an employee who is performing a given role in an organisation (Armstrong, 2005).

As stipulated by Role theory, in order for a PMS not to have validity issues, in cases where multiple roles are assigned to employees, then it becomes necessary that the PMS account for all the roles an employee may have during performance appraisal (Dessler, 2009). The effect of validity of the performance measure in an organisation's performance management system on the employees' performance is measured by qualitative and quantitative deviations from the

normal employee performance after an employee notices changes in the way performance measurement instrument measures most of the important job behaviours and/or results of the job during performance management (Armstrong, 2005).

2.3.4 Reliability

Reliability concerns how dependable or consistently a performance measure evaluates a characteristic (Kaplan, 2006). Reliability also measures the uniformity in performance evaluations outcome by different raters when they appraise the same employee, or when the same employee is evaluated in different times by the same rater(Roberts, 2003). Ideally, when two different raters appraise an employee at a given period, the performance ratings should be the same or be close to being similar (Torrington, 2009). In addition, when the same employee is evaluated over different times, the appraisal results should not be far apart (Dessler, 2009).

Inconsistent reliability can bring about issues such as lack of trust, poor performance and high turnover rates in employees, especially when the employees feel that their good performance is unobservable by the rater, or that the rater is prejudiced against them (Roberts, 2003). This is based on equity theory of motivation that asserts that employee motivation is influenced by their own opinion of being treated fairly and equally as their fellow employees in the same organisation, which consequently affects their performance (Redmond, 2010). In a research on entrepreneurial succession problems in Nigeria,

Ogudwale (2008), established that most performance appraisals are not reliable, and thus suggests that to prevent this, performance measurement standards should be objective and quantifiable.

2.3.5 Specificity

Specificity is the degree to which a performance management system provides information, guidance and direction on what output is expected from employees and how they can attain their goals (Armstrong, 2005). If an organisation does not provide guidance and direction to its employees on how to attain objectives, the organisation will not accomplish its set objectives. In addition, if the performance management system does not identify areas where the employees perform below the set standards, and inform the employees in time, it is difficult for an employee to amend their performance Waal (2003).

A study done by Kihara (2013) where he evaluated the factors affecting the implementation of strategic PMS of state corporations in Kenya. It was established that line managers need to provide guidance to their employees on how to attain their performance expectations. This they can do by acting as models as stipulated by the social cognitive theory of learning propagated by Piaget, which postulates that people can learn by seeing what others do, therefore, employees can acquire new mannerism by simply looking a model at the workplace and thus, acquire expected behaviour (Pfeffer, 2009).

The effect of specificity of performance management system on employee performance is measured by qualitative and quantitative deviations from the

expected employee performance even after providing employees with guidance on what is expected of them (expected performance) and how to attain expected performance (Waal, 2007).

2.3.6 Organization Performance

Organizational performance comprises the actual productivity or results obtained by an organization (Dessler, 2009). According to Torrington (2009), this relates to how successfully employees within a given firm accomplish their duties in entirety. He further adds that high organisational performance is achieved when there is synergy and unity of purpose within an organisation to attain a set objective.

Performance indicators in the health sector are measured using different matrixes, for example Mujataba (2006), in his study of performance management in public hospitals in India, established that a hospital is regarded to be powerful when they have ability to prevent disease and predictable death cases. Additionally, Torrington (2009), points out that data about death cases are the initial indicators, which are used by almost all hospitals to evaluate and assess the performance of their own healthcare system.

The level of patients' satisfaction at a hospital is another key performance indicator of quality-effectiveness area, as established by Ahmadi *et al.* (2013). He further indicated that evaluation of customer's opinions is fundamentally important in an era of serious competition between hospitals in terms of accepting patients, decrease of medical costs and making more money.

Time to healthcare service is another indicator of a hospital's performance (Skau, 2008). When the patients' stay in hospital is shorter, it leads to an increase in efficiency as other patients can also be treated or decrease of occupied beds (Ansari, 2007). Cutting down the unnecessary lingering of patients waiting for health services leads to better services for more individuals, since the medical personnel can give better attention to the patients when the number of patients waiting to receive medical attention is lesser (WHO, 2010).

2.4 Empirical Review

In a research done in by Lutwama, Roos and Dolamo in 2013, which focused on implementation of PMS in Uganda, reported that performance management is implemented in public health. They however, noted some deficiencies in implementation have reduced the efficiency of these PMS.

This view is backed by findings of Mohamed (2011), who in his evaluation, of the effectiveness of PMS in healthcare institutions in Mali established that PMS are implemented haphazardly, by replicating those that have worked for western countries. This has also been done without further conducting a pilot study to ensure that it is applicable, which has consequently led to the dismal performance of the PMS in these countries, just after implementation. Sven Model in his research article on the performance management system in Public healthcare institutions.

In a review of the U.K and Swedish PMS practice in 1998, established that PMS are now being implemented in public health care hospitals, what has not been

done is an analysis of the effects of this PMS, to establish the deficiencies in these System, in order to improve on them. (Model, 1998, cited by Dessler, 2009). According to Yadar (2010), in his research article on performance management system in Maharatana Hospital, in India, in 2011, established that in order to run the PMS proficiently and to raise the output of the workers, supervisors should be properly enlightened on the PMS. This is because they are the key propellers of the PMS, and thus they must be skilled on the use of the PMS.

Training on how to increase employee acceptance or buy in of the PMS is also paramount as employee acceptance of the PMS is crucial for the effective outcome of the organisation's PMS. According to Martineau *et al.* (2000), in their research article on introducing performance management system in National Hospitals in 2001, established that an effective performance management system leads to job satisfaction, which consequently lead to higher employee performance.

However, employees need must be met, and this needs vary from one geographical region to another, as employees in different geographical regions have different needs. Thus, performance management system need to be developed locally, based on what the PMS is expected to achieve, and thus should not be developed in any country until and unless they have been confirmed to be effective after being tested in a trial scheme locally (Martineau *et al.* 2000).

2.5 Critique of Literature Relevant to the Study

Typical concerns expressed about performance management system is that it is difficult to measure performance (Acas, 2005). This is because the workplace requirements keep on changing, and thus even the performance required (output) for this roles change as well, making performance measurement, an obsolete exercise due to rapid changes taking place that also makes performance measurement difficult.

This view is backed by McNamara (2001), who states that goal setting in performance management system can potentially my not be beneficial to the organisation. This means that in applying goal setting careful consideration should be taken to minimise the negative consequences. Ordonez, Schweitzer, Galinsky, & Bazerman (2009), in their review stated that employees can turn to unscrupulous behaviour in order to achieve certain targets, for example one wanting to achieve their target in sales can lie about numbers of fail to be genuine with customers. This makes employees to focus more on goal attainment as opposed to business ethic in attaining the goals (Ordonez et al. 2009).

Despite the popularity of goal setting, during the performance management system-planning phase as well as in establishing strategic congruence in performance management system, there more often than not people and organizations do not meet their set targets (Daniels, 2014). Often, the goal setter is blamed for this, which instils fear to the goal setter and employees as well, and if the goal setter instils fear during goal setting process to the employees,

the goals will automatically be resisted (Latham, 2005). Additionally, Galinsky (2002), argues that goal setting in performance management systems can make employees focus so much on reaching the set goal that they fail to realize how this distresses other workers as well, through creation of unhealthy competition (Max, 2008).

The use of reinforcement to attain or encourage desired performance, as well as acceptance of the performance management system have been faulted as being ineffective (Dessler, 2009). Positive enforcement that is administered haphazardly can also cause problems, where it loses meaning or its reinforcement value, as employees are so used to it, that its worth diminishes. He further states that if employees receive the same reward if they perform well, it reduces the power of the reward, as employees already know the outcome of their performance, thus the motivating effect of the reinforcement diminishes, and consequently no change in performance is noted.

PMS is a modern development that was first used in the United States, using western practices. These systems have been copied by organizations of varying cultures without amendments, despite the fact that cultural variations significantly performance management (Prasad, 2007). However, it is unclear whether the performance management system will be any less productive in different cultures, as it has been developed in the western countries given that purpose, practices and values may differ between different regions in the world.

2.6 Summary

The determinants that influence effective performance management system and its subsequent effect on employee performance is grounded on four theories namely; Goal Setting theory, Expectancy theory, Role theory, and Social Learning theory (Dessler, 2009).

As pointed out by Torrington (2009), there are five main determinants of an effective performance management system namely: strategic congruence (the alignment of individual, business unit and departmental goal, with the overall organisation goals to achieve a shared goal), acceptance (employees' reaction and behaviour in regards to the performance management system). Validity (how well a performance measure takes is able to consider the relevant aspects of a job, when measuring job performance) and specificity (extent as to which the performance management system gives direction to employees, as to what is expected of them, and how to attain the set performance).

As stated by Waal (2009), all these factors are interlinked to establish an effective performance management system, which consequently leads to high organisation performance. For instance, when the employees' goals are linked with the organization goals (strategic congruence), employees need direction and guidance how to meet organisation goals (specificity), and employees need to like the performance management system (acceptance), before they link their own objectives with the overall organization objectives. Employee acceptance of the performance management system cannot be attained if they perceive the

performance management system not to be valid (Waal, 2009). Despite the overwhelming evidence for the need for effective performance management system, debate is still rife as to whether they are only applicable in developed countries, where they were formulated, as they have been emulated in developing countries and they have failed miserably (Mohammed, 2011).

The relationship between PMS and employee and organization performance is not theoretically established. He further asserts that the association between the use of performance management system and higher organization output has been widely recognized but that explanations for this relationship is not backed by any given theory. This signifies the need to carry out more research on performance management system more so in developing countries, where they have performed dismally, yet the same performance management system has been used in developed countries and yielded positive effect on employee performance (Mohamed, 2011)

2.7 Research Gaps

Given all that has been written and researched on the subject of determinants of an effective performance management system, it may be tempting to think that there is nothing left to learn or discover. However, the opposite is in fact the case. The journey of discovering how best to optimise the performance management system has not yet run its full course, and there is much still to examine and reflect upon, as highlighted by the following gaps;

Based on the evidence and experience of the last 30 years, the question which organisations are still asking is how they make performance management system an instrument of motivation rather than of control, thereby creating acceptance leading to more efficient performance management system (Dessler, 2009), thus the need for further study on the same.

The effect of a Performance management system on employee and organization performance is not theoretically established. Dessler (2009) established that there is a purported connection between the use of performance management system and improvement in organisation output but there is no valid theoretical foundation to explain this. This opinion is backed by Pavlov and Bourne (2011), view that current works on this topic thus far has not demonstrated how a performance management system impacts an organization's performance. Moreover, according to Taticchi (2012), achieving this may be difficult because of the limited study on the association between performance management system and organizational results, and thus, the need to research and validate the link between performance management system and organization performance.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter outlines the methodology, which was used in the study. The following topics will be discussed; Research design, Population, Sampling frame, Sample and sampling technique, Data collecting instruments, Data collection procedure, Pilot test, Data Processing and analysis. Kothari (2004) states that research methodology provides a detailed process to be followed during research. According to Yin (2013), a research methodology is the procedure that is followed in conducting a study.

3.2 Research design

The research adopted in this study is a mixed research design that was both qualitative, and quantitative in nature. This would best provide the picture of the situation as it naturally happens, and as is captured by the employees' perceptions on the area under study. It was also suitable since it justified the current practice and helped make judgment for this study. The major advantage with such a design is that it captures the situation in its full setting by describing a particular scenario, as it is (Kothari, 2004).

3.3 Target Population

Forty nine heads of departments of the CPGH formed the target population taken for this study. The target population is the total of items about which information

is desired (Kothari, 2004). The unit of analysis was taken to be the hospital while the unit of observation were the Heads of Departments. The Heads of Departments were considered to be better placed in giving accurate responses for the research since they are the ones responsible for the management of employee performance.

Table 3.1 Target population

Department	Number in each department
Clinical	22
Nursing	14
Support	13
Total	49

3.4 Sample and Sampling Technique

This study applied the census method and therefore all the heads of department were considered respondents for the study. According to Mugenda and Mugenda (2003), when the people to be used as respondents during research are not many, it is advisable to use whole population.

Four randomly selected heads of departments were taken to participate in the pilot study from each department therefore reducing the sample size to 45 heads of departments. Careful consideration not to include respondents from the pilot study in the final sample was made. Sample size is presented on Table 3.2.

Table 3.2 Sample Size

Department	Target Population	Sample Size
Clinical	22	20
Nursing	14	13
Support	13	12
Total	49	45

3.5 Data Collection Methods

Structured questionnaire was used in collecting views from the respondents/ A 5- Point likert scale was used in measuring the variables with a core of 1 representing (Strongly disagree) and a score of 5 representing (strongly agree). Filled questionnaires were collected by the researcher after a period of one month from the day of distribution in order for the respondents to have ample time to fill them. The researcher guaranteed confidentiality for the participants in the research; hence, no names were disclosed without the express authority of a respondent.

3.6 Data Collection Procedure

The researcher recruited and trained two research assistants on how to administer the questionnaire. Permission was obtained from the management of the hospital before data collection was done.

The researcher made effort to personally distribute the questionnaires to the sampled respondents. Follow ups were made through calls and visits and the questionnaires were collected upon completion. An officer from the human department was taken as a contact person to facilitate data collection.

3.7 Pilot Test

A preliminary study to check for validity and reliability of the research instrument was done. The aim of the trial survey was to get views from the respondents on the suitability and flow of the questions posed for the study. The pre-test also allowed the researcher to establish whether the elements under study could easily be analysed (Saunders, Lewis & Thornhill, 2007).

Four respondents were chosen from among the heads of departments at CPGH selected to take part in the preliminary study. After collecting the respondents view after the preliminary study, necessary amendments were made on the questionnaire. Pre-testing data was not included in the final analysis

3.8. Reliability of the Questionnaire

Cronbach alpha was used to determine the internal uniformity or average connection of items in the survey instrument to gauge its reliability and improve upon the reliability of variables derived from summated scales (Cronbach, 1951). The selected sample for pretesting were selected from 49 respondents from CPGH. Measures were taken to ensure that took part in the pilot study did not happen to be in the final sample. Data reliability was measured using

Cronbach's alpha coefficient with values ranging between 0 and 1 (Sekaran, 2003). The values obtained from the results of the pilot study for all the variables in this study were higher than 0.7 for all the constructs which was above the acceptable threshold level. Zikmund (2003) stated that a Cronbach alpha of 0.60 as a minimum is acceptable.

It is recommended for an average value of 0.7 and above of the coefficient alpha to confirm the internal consistency of the items (Nunnally & Bernstein (1994). According to Klein & Ford (2003), if the Cronbach alpha coefficient value realized is higher than 0.5, it means that the scales are reliable. The Cronbach's alpha takes the form of Kuder-Richardson (K-R) 20 Formula as follows:

$$KR_{20} = \frac{(K)(S^2 - \sum s^2)}{(S^2)(K-1)}$$

KR_{20} =Reliability coefficient of internal consistency

K =Number of items used to measure the concept

S^2 =Variance of all scores

s^2 =Variance of individual items

A commonly accepted rule of the thumb for describing internal consistency using Cronbach alpha is as shown in Table 3.3.

Table 3. 3: Internal consistency- Cronbach's alpha

Cronbach's alpha	Internal consistency
$\alpha \geq 0.9$	Excellent(high stakes testing)
$0.7 \leq \alpha < 0.9$	Good (low stake testing)
$0.6 \leq \alpha < 0.7$	Acceptable
$0.5 \leq \alpha < 0.6$	Poor
$\alpha < 0.5$	Unacceptable

3.9 Data Processing and Analysis

After the data was collected, it was checked to ensure that the respondents accurately filled the questionnaires. The data was then prearranged and coded in the statistical software (SPSS), which enabled the researcher to enter, store and analyse the data. Data was analysed by use of descriptive and inferential statistics, where frequencies and percentages were expressed as tables for ease of presentation. Regression analysis was done to determine the relationship between the performance management systems and organisation performance. The following regression model was used to determine the regression coefficients, regression constant and standardized regression coefficients.

A multiple linear regression Analysis model:

$$Y = \beta_0 + \beta_1x_1 + \beta_2x_2 + \beta_3x_3 + \beta_4x_4 + \beta_5x_5 + \varepsilon_i$$

Where:

Y = Organizational performance

x_1 = Strategic Congruence

x_2 = Validity

x_3 = Reliability

x_4 = Acceptability

x_5 = Specificity

In the model, β_0 was the constant term while the co-efficient β_i , $i = 1, 2, \dots, 5$ were used to measure the sensitivity of the dependent variable (Y) to unit change in the predictor variables x_1, x_2, \dots, x_5 . The term ε is the error term, which captured the unexplained variations in the model.

CHAPTER FOUR

RESEARCH FINDINGS AND DISCUSSIONS

4.1 Introduction

This chapter presents the findings of the study, followed by discussions of the results. The chapter is divided into six main segments. The first section describes the response rate. The second section gives findings from the reliability and validity tests conducted on the elements under study. Section 3 describes the demographic characteristics of the respondents. Section 4 provides an in-depth analysis on the responses for each variable under study. The next section presents the finding of the hypotheses test. Section 6 provides a discussion of the findings.

4.2 Response Rate

The researcher delivered forty-five (45) questionnaires to respondents but only thirty-six (36) questionnaires were completely filled, returned and used in this study. All the departments in the sample were well represented. This, therefore, translated to a response rate of 80%. This is considered representative by survey research standards (Baruch, 1999; Roth & BeVier, 1998), cited by Mugenda (2008). He further suggested that an average response rate of 55.6% with a standard deviation of 19.7 be used as a norm for future studies; Roth and BeVier (1998), cited by Kothari (2008) suggested 50% response rate was usually considered adequate.

4.3 Reliability and Validity Tests

Reliability of the questionnaire was done using Cronbach's Alpha coefficient. This helped to determine the level of accuracy and consistency of the obtained data from the pilot study. Cronbach's Alpha was considered appropriate since according to Zinbar *et al.* (2005), it gives an accurate estimation of data generalization.

Responses for each of the propositions for Organizational performance, Strategic Congruence, Validity, Reliability, Acceptability and Specificity were correlated with one another using Cronbach's Coefficient Alpha in order to indicate the level of convergence, which according to Nunnally (1978), cited by Mugenda (2008), should be above 0.70 for exploratory research. The reliability (or consistency) of each proposition (to the overall measure of each variable) was then tested by conducting a Cronbach's Coefficient Alpha test. The results are shown on Table 4.1.

Table 4.1 Reliability Results

Variable	Cronbach alpha values
strategic congruence	0.795
Validity	0.761
Reliability	0.886
Acceptability	0.765
Specificity	0.731
Organizational Performance	0.738

This study tested the convergent validity, which is the degree of agreement between the five different elements under study namely: Organizational performance, Strategic Congruence, Validity, Reliability, Acceptability and Specificity. Spearman's Rho Correlation analysis was used to analyze the relationship between these individual elements. From the results, as indicated in Table 4.2, correlations among the five elements of PMS were fairly high, with strategic congruence being significantly correlated to viability ($r_s=0.568$, $p\text{-value}=0.000<0.05$), to reliability ($r_s=0.622$, $p\text{-value}=0.000<0.05$), to acceptability ($r_s=0.434$, $p\text{-value}=0.008<0.05$), and to specificity ($r_s=0.482$, $p\text{-value}=0.003<0.05$) respectively. The other significant correlation was between validity and reliability ($r_s=0.499$, $p\text{-value}=0.002<0.05$), acceptability ($r_s=0.509$, $p\text{-value}=0.002<0.05$), specificity ($r_s=0.689$, $p\text{-value}=0.000<0.05$) respectively. In addition, Reliability was significantly correlated to acceptability ($r_s=0.357$, $p\text{-value}=0.035<0.05$) and specificity ($r_s=0.613$, $p\text{-value}=0.000<0.05$) respectively. Finally, acceptability was significantly correlated to specificity ($r_s=0.803$, $p\text{-value}=0.000<0.05$).

Table 4.2 Spearman's rho Correlation Results

		Strategic Congruence	Validity	Reliability	Acceptability	Specificity
Strategic Congruence	Correlation	1.000				
	Coefficient Sig. (2- tailed)	.				
Validity	Correlation	0.568**	1.000			
	Coefficient Sig. (2- tailed)	0.000	.			
Reliability	Correlation	0.622**	0.499**	1.000		
	Coefficient Sig. (2- tailed)	0.000	0.002	.		
Acceptability	Correlation	0.434**	0.509**	0.357*	1.000	
	Coefficient Sig. (2- tailed)	0.008	0.002	0.035	.	
Specificity	Correlation	0.482**	0.687**	0.613**	0.803**	1.000
	Coefficient Sig. (2- tailed)	0.003	0.000	0.000	0.000	.

Key * Correlation is significant at the 0.05 level (2-tailed).

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

The findings from the validity test indicated that the pattern of correlations indicated that the five components were convergent, thereby confirming the convergent validity of PMS. This meant that strategic congruence, validity,

reliability, acceptability, and specificity strongly converge to make up PMS and hence they can be used in this study to represent PMS.

4.4 General Information on Respondents

The study examined some general information relating to the respondents. This included gender, age, education level, length of service and terms of employment. Results obtained are presented on tables and figures.

4.4.1 Gender of Respondents

The study undertook to determine the composition of population under study, and the results were presented in the Table 4.3.

Table 4.3: Gender of Respondents

Range	Frequency	Percentage
Male	17	47
Female	19	53
Total	36	100

Table 4.3 shows that 17 (47%) of the 36 respondents that participated in the study were male while 19 (43%) were female. This signifies that there was gender parity in the respondents.

4.4.2 Age of respondents

The study undertook to establish the age of the respondents and the outcome is presented in the Table 4.4.

Table 4.4: Age of respondents

Range	Frequency	Percentage (%)
Below 35 years	11	31
35 - 45 years	10	28
45 - 55 years	7	19
Over 55 years	8	22
Total	36	100

Table 4.4 indicates that 11 (31%) of the respondents were aged below 35 years while 10 (28%) were aged between 35 and 45 years, 7 (19%) aged between 45 and 55 years while 8 (22%) are aged above 55 years. The results indicate that most of the respondents were aged below 35 years. It also shows that a good number of those in management are within the Generation Y age bracket. This age group is innovative, and adapt to change easily, thus signifies that the employees of CPGH might be more receptive to change after the introduction of the PMS, which consequently affects the effectiveness of the PMS as this age group adapts to change quite fast.

4.4.3 Education Level of Respondents

The study undertook to determine the education level of respondents under study, and the results are presented in the Table 4.5.

Table 4.5: Education Level of Respondents

Range	Frequency	Percentage (%)
Post Graduate Level	11	31
Undergraduate	9	25
Diploma	15	42
Missing	1	2
Total	36	100

Table 4.5 shows that 15 (41.7%) of the respondents had attained diploma level, 9 (25%) had attained a first-degree level while 11 (30.7%) had attained postgraduate level certification. 1 (2.8%) respondent did not respond to this question. This implies that all the respondents have post-secondary school work-related certification. This signifies that the respondents were well educated and thus could understand the topic of study and thus could provide valuable insight on the subject matter of the research, as they were educated, and therefore were quite knowledgeable.

4.4.4 Length of Service

The study undertook to determine the duration the employees have been working at Coast Provincial General Hospital and the results have been presented in the Table 4.6.

Table 4.6: Length of Service

Range	Frequency	Percentage (%)
1-5 Years	6	17
Over 5 Years	30	83
Total	36	100

Table 4.6 above indicates that six (17%) of the 36 respondents have been in the current employment for between 1 to 5 years while 30 (83%) for more than 5 years. From the figures, majority of the respondents have worked in the organisation for more than five years, thus they are well aware of the effects of the PMS on employee performance at the hospital, as they have stayed in the organisation long enough to observe this. This also signifies that the employees at Coast Provincial General Hospital have employment stability at the organisation

4.4.5 Terms of Employment

The study undertook to determine the terms of employment of population under study, and the results are presented in the Table 4.7.

Table 4.7: Terms of Employment

Range	Frequency	Percentage (%)
Permanent and pensionable	32	89
Permanent without pension	1	3
Temporary(Casuals)	3	8
Total	36	100

Table 4.7 indicates that the majority of the respondents 32 (89%), were permanent and pensionable, 1 (3%) was permanent without pension, while 3 (8%) were casuals. This signifies that almost all employees of the hospital are permanent and pensionable. This indicates that the formal performance management procedures applied in the PMS are applicable to the respondents as they are permanent staff, and eligible to formal performance management procedures.

4.5 Descriptive Statistics

The variables, Strategic Congruence, Validity, Reliability, Acceptability and Specificity were effectively used in this study as independent variables whilst the variable organizational performance was effectively used in this study as dependent variables. The respondents were asked to indicate the extent to which they agreed or disagreed with specific statements on each aspect of Performance Management System. The data obtained was analysed using mean scores and standard deviations. A mean score of less than 1.5 implies that the respondents strongly disagree with the statement, 1.5 to 2.5 implies respondents disagree

while 2.5 to 3.5 not sure. A mean score of 3.5 to 4.5 implies respondents agree while a score of more than 4.5 implies strongly agree. A standard deviation of less than 1 means that there were no significant variations in responses while greater than 1 implies that there were significant variations in the responses.

4.5.1 Strategic Congruence

The respondents were asked to indicate the extent to which they agreed or disagreed with some statements to establish whether there was Strategic congruence at CPGH. The findings are presented in Table 4.8.

Table 4.8: Strategic congruence

Statement	Mean	Stdev
CPGH has in place a formal Performance management system	3.86	1.0
The PMS brings out job performance that is in harmony with the organization's strategy, goals and culture	3.97	0.89
The goals of the employees are aligned to the organization's goals	4.14	0.9
The system guides employees in attaining their set goals effectively & efficiently	3.97	0.94
Overall	4.0	0.77

The results on Table 4.8 showed that the respondents agreed that CPGH had in place a formal performance management system with a mean of 3.86. They agreed that the PMS brought out job performance that was in harmony with the organization's strategy, goals and culture at a mean of 3.97. It was also agreed that the system guided employees in attaining their set goals effectively & efficiently with a mean of 3.97 and strongly agreed to the fact that the goals of the employees were aligned to the organization's goals had a mean of 4.14. The overall mean of 4.0 implied that in general the respondents strongly agreed with the statements, which determined there was Strategic Congruence at CPGH. The overall standard deviation of 0.77 indicated that there were no significant variations in the responses.

4.5.2 Validity

The respondents were asked to indicate the extent to which they agreed or disagreed with some statements to establish whether there was system validity at CPGH. The results were given in Table 4.9.

Table 4.9: Validity

Statement	Mean	Stdev
The Performance management system assesses all relevant aspects of job performance (performance assessment)	3.61	1.15
The tool measures what it is supposed to measure (accuracy)	3.3	1.15
Key skills and responsibilities of a job are reviewed often to make sure they still are applicable to the job description (review of performance indicators)	3.28	1.2
Overall	3.4	1.16

The results on Table 4.9 showed that the respondents agreed that the Performance Management System assessed all relevant aspects of job performance (performance assessment) (3.61), were not sure whether the tool measured what it was supposed to measure (accuracy) (3.3). There were also not sure whether key skills and responsibilities of a job are reviewed often to make sure they still were applicable to the job description (review of performance indicators) (3.28)

The overall mean of 3.4 implied that in general the respondents were not sure (could neither agree nor disagree) with the statements, which determined there was system validity at CGPH. The overall standard deviation of 0.96 indicated

that there were no significant variations in the responses. Under validity performance, assessment had a highest mean followed by accuracy while review of performance indicators had lowest mean of 3.28.

4.5.3 Reliability

The respondents were asked to indicate the extent to which they agreed or disagreed with some statements to establish whether there was system reliability at CGPH. The results were given in Table 4.10.

Table 4.10: Reliability

Statement	Mean	Stdev
There is uniformity in performance ratings among the individuals who evaluate the employees' performance	3.2	1.09
All the items on the PMS, which are proposed to measure particular job performance, produce consistent results	2.91	1.10
The results of a test are consistent over time (Test-retest reliability)	2.77	1.06
Overall	2.98	0.92

The results on Table 4.10 showed that the respondents were not sure (could neither agree nor disagree) that there was uniformity in performance ratings among the individuals who evaluate the employees' performance (3.2). They disagreed that, all the items on the PMS, which were proposed to measure

particular job performance, produce consistent results (2.91). They also disagreed that, the results of a test were consistent over time (2.77).

The overall mean of 2.98 implied that in general the respondents disagreed with the statements, which determined there was system reliability at CGPH. The overall standard deviation of 0.92 indicated that there were no significant variations in the response

4.5.4 Acceptability

The respondents were asked to state the degree to which they agreed or disagreed with some statements to establish whether there was system acceptability at CPGH. The results are given in Table 4.11.

Table 4.11: Acceptability

Statement	Mean	Stdev
Managers and employees participate in development of system (procedural fairness)	3.89	0.92
There are consistent standards when evaluating different employees (procedural fairness)	3.61	1.08
There is minimized rating errors and biases in the PMS (procedural fairness)	3	1.01
Employees are given timely and complete feedback (interpersonal fairness)	3.17	1.28
Employees are allowed to challenge the evaluation (interpersonal fairness)	3.11	1.39
Feedback is provided in an atmosphere of respect and courtesy (interpersonal fairness)	3.56	1.32
Raters communicate expectations regarding performance evaluations and standards to ratees (outcome fairness)	3.28	1.43
Raters Communicate expectations regarding rewards to ratees (outcome fairness)	2.86	1.44
Overall	3.11	0.93

The results on Table 4.11 showed that the respondents agreed that Managers and employees participate in development of system (procedural fairness) (3.89), they also agreed that, there were consistent standards when evaluating different employees (procedural fairness) (3.61), they further agreed that feedback was provided in a courteous and open manner (interpersonal fairness) (3.56). They were however not sure that there was minimized rating errors and biases in the PMS (procedural fairness) (3), that employees were given timely and complete feedback (interpersonal fairness) (3.17) and that employees were allowed to challenge the evaluation (interpersonal fairness) (3.11). They were also not sure that raters communicated expectations regarding performance evaluations and standards to ratees (outcome fairness) (3.28), and that Raters communicated expectations regarding rewards to ratees (outcome fairness) (2.86).

The overall mean of 3.11 implied that in general the respondents were not sure (could neither agree nor disagree) with the statements, which determined there was system acceptability at CPGH. The overall standard deviation of 0.93 indicated that there were no significant variations in the responses. The responses obtained did not show great variation.

4.5.5 Specificity

The respondents were asked to indicate the extent to which they agreed or disagreed with some statements to establish whether there was system specificity at CPGH. The results are given in Table 4.12

Table 4.12: Specificity

Statement	Mean	Stdev
Performance standards exist within the system (Performance standards/goals)	3.70	1.00
Employees know the desired level of expected performance (Performance standards/goals)	3.64	1.07
Employees have the necessary skills and knowledge needed to perform to required standards (input)	4.28	0.66
Employees are given information about their performance that is relevant, timely, accurate, specific and understandable (feedback)	3.36	1.33
Rewards/incentives are aligned with good performance (consequences)	2.39	1.23
Performance consequences are given in a timely manner (consequences)	2.69	1.31
Consequences of performance are valuable to employees (consequences)	3.47	1.24
Overall	3.36	0.68

The results on Table 4.12 showed that the respondents agreed that Performance standards exist within the system (Performance standards/goals) (3.70), they also agreed that, employees knew the desired level of expected performance (Performance standards/goals) (3.64). They strongly agreed that, employees had the necessary skills and knowledge needed to perform to required standards (input), (4.28). The respondents were however not sure (could neither agree nor

disagree) that, employees were given information about their performance that was relevant, timely, accurate, specific and understandable (feedback) (3.36), they were were not sure (could neither agree nor disagree) that, consequences of performance were valuable to employees (consequences) (3.47). They disagreed that, performance consequences were given in a timely manner (consequences) (2.69) and strongly disagrees that, rewards/incentives were aligned with good performance (consequences) (2.39). An average of 3.36 implied that in general the respondents were not sure (could neither agree nor disagree) with the statements, which determined there was system specificity at CPGH. The overall standard deviation of 0.68 indicated that there were no significant variations in the responses. The findings on specificity indicate that the respondents did not show any significant variation.

4.5.6 Organizational Performance

The respondents were asked to indicate the extent to which they agreed or disagreed with some statements to establish whether there was system related organizational performance at CPGH.

Table 4.13 shows the results on the extent to which respondents agree on various elements of organisational performance.

Table 4.13: Performance (Dependent variable)

Statement	Mean	Stdev
There is timely delivery of healthcare services to patients i.e. the time for a patient waiting for healthcare services has been cut down	3.47	1.18
There is high patient satisfaction with the quality of service delivery	3.64	1.99
The hospital healthcare and medical system has the ability to prevent disease and predictable death cases	3.78	1.93
The mortality rate is within national acceptable levels	3.51	1.10
There is operational efficiency i.e. maximum utilization of resource and minimum wastage	3.50	1.13
Overall	3.58	0.85

The results on Table 4.13 showed that the respondents agreed to the fact that there was high patient satisfaction. The mean for quality of service delivery (3.64), that the hospital healthcare and medical system had the ability to prevent disease and predictable death cases (3.78), that the mortality rate was within national acceptable levels (3.51), and that there was operational efficiency i.e. maximum utilization of resource and minimum wastage (3.50). They however were not sure that, there was timely delivery of healthcare services to patients i.e. the time for a patient waiting for healthcare services had been cut down (3.47). The overall mean of 3.58 implied that in general the respondents agreed with the statements, which determined there was performance at CGPH. The overall standard deviation of 0.85 indicated that there were no significant variations in the responses. On performance, there was no significant performance on responses as indicated by overall results.

4.6 Regression Analysis

In order to assess the influence performance management system on organizational performance the study conducted a multivariate regression analysis. The dependent variable was organizational performance while the independent variables were strategic congruence, validity, reliability, acceptability and specificity. Table 4.14 shows the coefficient of correlation (R) and the coefficient of determination (R^2).

Table 4.14: Regression Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.768 ^a	0.590	0.520	0.59527

a. Predictors: (Constant), Specificity, strategic congruence, Reliability, Validity, Acceptability

The Adjusted R Square value of 0.520 (Model summary table) implies that 52% of the variations in organizational performance are influenced by the factors that influence performance management system on organizational performance, leaving 48% to be predicted by other factors.

Table 4.15: ANOVA

	Sum of Squares	Df	Mean Square	F	Sig.
Regression	14.811	5	2.962	8.360	.000 ^b
Residual	10.276	29	.354		
Total	25.087	34			

a. Dependent Variable: Performance

b. Predictors: (Constant), Specificity, strategic congruence, Reliability, Validity, Acceptability

Table 4.15 shows the outcome of the Analysis of Variance (ANOVA), which indicates that, the F static, was 8.360 with a significant change of 0.01%. This implies that the impact of determinants that influence performance management system on organizational performance is significant at 5% level of significance.

Table 4.16: Model Coefficients

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	T	Sig.
(Constant)	0.479	0.693		0.691	0.495
Strategic	0.035	0.235	0.032	0.150	0.882
Congruence					
Validity	0.219	0.189	0.249	1.157	0.257
Reliability	-0.177	0.183	-0.190	-0.968	0.341
Acceptability	0.062	0.215	0.067	0.289	0.775
Specificity	0.763	0.377	0.603	2.021	0.000

a. Dependent Variable: Organisational performance

From the Model Coefficients Table the regression model can be derived as follows: Y (organizational Performance) = 0.763 X₅ (Specificity)

$$Y = 0.479 + 0.763 \text{Specificity} \dots\dots\dots (4.1)$$

The results in Table 4.16 indicate only Specificity has a significant influence on organizational Performance. It has positive effect on organisational performance. The data findings analysed also show that holding all other independent variables constant, a unit increase in specificity will lead to a 0.763 increase in performance at CPGH.

4.7 Tests for Hypothesis

H₀₁: There is no significant effect of strategic congruence on the performance of Coast Provincial General Hospital

The results obtained as shown on Table 4.16 indicate that the regression coefficient for strategic congruence was 0.035 and a P-value of 0.882. Since P-value was, > 0.05 it meant that strategic congruence has no significant influence in the performance of the Coast Provincial General Hospital. This implies that a significant proportion of the variance of the performance of the Coast Provincial General Hospital was not explained by strategic congruence. Thus, the null hypothesis that strategic congruence has no significant influence on the performance of the Coast Provincial General Hospital was not rejected.

H₀₂: There is no significant effect of validity on the performance of Coast Provincial General Hospital

The results obtained indicate that the regression coefficient for validity was 0.219 and a P-value of 0.257. Since P-value was > 0.05 , it meant that the validity has no significant effect on the performance of the Coast Provincial General Hospital. This implied that a significant proportion of the variance of the performance of the Coast Provincial General Hospital was not explained by validity (Table 4.16). Thus, the null hypothesis that there was validity has no significant influence on the performance of the Coast Provincial General Hospital was not rejected.

H₀₃: There is no significant effect of reliability on the performance of Coast Provincial General Hospital

The results obtained indicate that the regression coefficient for reliability was -.177 and a P-value of 0.341. Since P-value was > 0.05 , it meant that the reliability has no significant influence on the performance of the Coast Provincial General Hospital. This implied that a significant proportion of the variance of the performance of the Coast Provincial General Hospital was not explained by reliability (Table 4.16). Thus, the null hypothesis that reliability has no significant influence on the performance of the Coast Provincial General Hospital was not rejected.

H₀₄: There is no significant effect of acceptability on the performance of Coast Provincial General Hospital

The results obtained indicate that the regression coefficient for acceptability was 0.062 and a P-value of 0.775. Since P-value was, > 0.05 it meant that acceptability has no significant influence in the performance of the Coast Provincial General Hospital. This implied that a significant proportion of the variance of the performance of the Coast Provincial General Hospital was not explained by acceptability (Table 4.16). Thus, the null hypothesis that there was no significant influence of acceptability on the performance of the Coast Provincial General Hospital was not rejected.

H₀₅: There is no significant effect of specificity on the performance of Coast Provincial General Hospital

The results obtained indicate that the regression coefficient for specificity was 0.763 and a P-value of .000. Since P-value was, < 0.05 it meant that specificity has significant influence on the performance of the Coast Provincial General Hospital. This implied that a significant proportion of the variance of the performance of the Coast Provincial General Hospital was explained by specificity (Table 4.16). Thus, the null hypothesis that there was no significant influence of specificity on the performance of the Coast Provincial General Hospital was rejected.

4.8 Discussion of Findings

The overall objective of the study was to establish the influence of performance management system on the performance of public health institutions. Specifically, the study sought to examine the effect of the five independent variables (strategic congruence, validity, reliability, acceptability and specificity on the performance of Coast Provincial General Hospital, Mombasa (the dependent variable). On the findings in this study, four variables of PMS (strategic congruence, validity, reliability, acceptability) were found not to be significant significantly correlated to performance of Coast Provincial General Hospital. However, one (specificity) was found to be significant significantly correlated to performance of Coast Provincial General Hospital.

The correlation between strategic congruence and performance of Coast Provincial General Hospital was not significant ($r_s=0.035$ and $p\text{-value}=0.882>0.05$). Studies have provided a basis for this, for example Claydon (2009), postulates that organisations need performance management systems, and goals should systemically evolve starting from the worker, and ultimately to the overall organisation. Benefits of using this model include the ability to pinpoint where performance is not adequate and to trace the reason back to a lack of congruence in the model's parts.

The correlation between validity and performance of Coast Provincial General Hospital was not statistically significant either ($r_s= 0.219$ and $P\text{-value}= 0.257>0.05$). Studies have provided some rationale for the absence of significant relationship between validity and performance. For instance, Dessler (2009) established that in order for a PMS not to have validity issues, when an employee has multiple roles at work, the performance management system need to account for the several roles at work, a given employee might have during performance appraisal.

The correlation between reliability and performance of Coast Provincial General Hospital was not statistically significant either ($r_s= -0.177$ and $P\text{-value}= 0.341>0.05$). Studies have provided some rationale to the findings. For example, Roberts (2003) stated that, inconsistent reliability of the PMS could lead to mistrust, lower productivity and higher attrition in employees, especially when the employees feel that their good performance is unobservable by the rater, or that the rater is prejudiced against them, this leads to low motivation, which

consequently leads to a decline in performance. The correlation between acceptability and performance of Coast Provincial General Hospital was not statistically significant either ($r_s = 0.062$ and $P\text{-value} = 0.775 > 0.05$). Studies have provided some rationale to the findings. For instance, Acas, (2005), established that in some cases, employees intentionally lower their productivity and even quit employment if they perceive the performance management system to be unfair and unacceptable to them.

According to Ogundele (2008), lack of acceptability of performance management in organizations was due to lack of openness, poor feedback mechanism, bias assessment, poor reward structure, and defective rating criterion by the management in the performance management system. Fajana, (2006) noted that employees' acceptance of the performance management system which was influenced by the element of fairness and justice of the system, determined the performance management system's outcome. Teachout, (2004) stated that, there was widespread agreement that the efficacy of a performance management system depended on the disposition of those responsible for its development and implementation.

The only factor of PMS that was found to have a significant correlation with performance of the Coast Provincial General Hospital was specificity ($r_s = 0.763$ 0.367 , $p\text{-value} = 0.000 < 0.05$). Studies have provided some rationale to the findings, for example, Waweru (2015) in his research on effects of specificity on employee performance, a case study of Water and Sanitation Companies in Nyeri County, Kenya, established that specificity of work was crucial, and that

managers should improve mechanisms on specificity as it is directly linked to employees' performance. Further, Griggs (2009) revealed that specificity of work is paramount and has a positive and significant effect on employees' performance. In addition, Waal (2003), states that if the performance management system does not identify areas where the employees perform below the set standards, and inform the employees in time, it is difficult for an employee to amend their performance. Pfeifer (2009) further supports this view and highlights that; managers must provide guidance to their employees on how to attain their performance expectations by acting as models. Performance contracting is a system that has been adopted by most parastatals and public sector organizations in general as a best practice method. It guides and directs employees to set targets to which they are bound by. The positive significant correlation in this case could be attributed to the presents of performance contracting practiced at Coast Provincial General Hospital and it being accepted as an organizational culture.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter is divided into four sections. The first section summarizes the results of the study. The second section presents conclusions drawn from the results. The third section addresses the recommendations of the study. The final section concludes with suggested recommendations for future further studies.

5.2 Summary of the Results

5.2.1 Effect of strategic congruence on the performance of Coast

Provincial General Hospital.

The study sought to establish whether the performance management system used at CGPH influenced the hospital's performance and began with investigating the effect of several factors that affect the influence of the performance management system, at CGPH and it was established that 0.763 increase in organisational performance at CPGH was brought about by the specificity of the system.

A regression summary between the independent variable and dependent variable established an Adjusted R Square value of 0.520, implying that fifty two percent of change in organizational performance at the hospital are influenced by the factors that influence the effect of the PMS on organizational performance. It therefore follows from the results realised that the performance management system used at CPGH does influence the performance of the hospital, and the

magnitude of the influence of the PMS on the hospital performance is dependent on the several factors that affect the influence of the performance management system on organizational performance.

5.2.2 Effect of validity on the performance of Coast Provincial General Hospital.

The study established that indeed the PMS used at the hospital enabled effective performance that matches the organisations strategic needs, goals as well as culture. It was also established that the system guided employees in attaining their set goals effectively.

However, the study stablished that strategic congruence has no significant effect on the influence of the PMS on the performance of the hospital, as evidenced by the P-value was > 0.05 , which meant that strategic congruence has no significant influence in the performance of the Coast Provincial General Hospital.

The findings of this study contradict previous assertions that strategic congruence largely affect the magnitude of influence of the PMS on organisation performance. However, this does not negate the fact that there is a small positive impact of strategic congruence of the PMS on the hospital's performance, as evidenced by the positive P value.

5.2.3 Effect of reliability on the performance of Coast Provincial General Hospital.

The study proved that even though the performance management system assessed all relevant aspects of job performance, the employees were not confident that the performance management tools used measures what it is supposed to measure. They were also not confident of the fact that key skills and responsibilities of a job are reviewed often to make sure they were applicable to the job description (review of performance indicators). The study further established reliability of the performance measurement tool not to have a significant effect on the hospital's performance.

The study established that reliability of the performance measurement tool used at the hospital, as evidenced by a P-value of 0.341, and since P-value was > 0.05 was not significant and therefore it did not have a significant influence on performance of the Coast Provincial General Hospital.

The study further established that the employees at the hospital were not confident of the consistency of performance ratings between different raters, as well as over time, thus indicating that there was some bias in performance ratings, and thus the performance appraisals in the hospital were rather subjective and not consistent over time. This indicates that the employees are not confident of the performance appraisal system used at the hospital.

5.2.4 Effect of acceptance on the performance of Coast Provincial General Hospital.

In establishing the level of employee acceptance of the performance management system used at the hospital, it was discovered that even though employees and managers participated in the development of the PMS, which is quite crucial to develop employee acceptance, the employees stated that the raters did not communicate expectations regarding performance evaluations, standards and rewards to them. This implied that adequate feedback was not being given to employees at CPGH after a performance appraisal, yet this is crucial for employees, as employees need to perceive a PMS to be fair and just in order to increase their level of acceptance of the system.

The study also established that contrary to the common assumption that acceptance significantly affects the level of influence of the performance management system on the hospital's performance; employee acceptability of the PMS at CPGH did not significantly affect the performance of the hospital, as evidenced by the P Value, which was 0.775. However, even if the effect was not that significant, because the results of the findings indicate a positive P value, it can be stated that to a small extent, employee acceptance of the PMS used at CGPH has a rather marginal effect on the hospital's performance.

5.2.5 Effect of specificity on the performance of Coast Provincial General Hospital

The study established that indeed performance standards exist within the PMS, which employees are well aware informed about. It was also discovered that majority of the employees had received necessary skills and knowledge to perform as per the set standards set out in the PMS. However, rewards were not aligned with performance, and performance feedback was not provided in a timely manner.

In establishing how the degree of specificity of the PMS used at CGPH, influences the hospital's performance, the result yielded a significant effect, evidenced by a P-value of 0.000, and since the P-value was < 0.05 it meant that specificity has significant influence on the performance of the Coast General Hospital. This implies that a significant proportion of change in performance at CPGH is explained by specificity, and that of all other variables that affect the magnitude of influence of the PMS on the hospital performance, specificity had the greatest effect.

5.3 Conclusion

From the research findings, it is concluded that performance management system affects performance of public health institutions in Kenya. PMS is an important tool that can be utilised to continuously monitor employees' performance, identify skill gaps and develop required competencies. The study established that even though the influence of a performance management system

on organisation performance is solely dependent on five factors, namely; that is, strategic congruence, validity, reliability, acceptance and specificity of the PMS. It was concluded that specificity largely affects the influence of the performance management system on an organisations performance, and thus more emphasis should be placed on this variable by managers when putting in place a performance management system.

The study also concluded that performance contracting, which is a practise that has been adopted by Coast Provincial General Hospital, has done much to improve the employees' awareness of the organisations expectations, what is required of them and how they can achieve their goals. However, performance feedback must be provided to the employees in time, so that they can make the necessary adjustments on their performance and behaviour in case they regress. It is thus valid to encourage other organisations to put in place performance contracting, based on its positive effect on the performance of Coast General Provincial Hospital.

Additionally, it was concluded that employees perceived the level of reliability of the performance tool used in the PMS at CPGH to be low(as depicted by a mean of 2.98) which can be attributed to lack of consistency in performance rating between different raters indicating there exists bias or subjectivity in performance appraisals at the Hospital. There was also inconsistencies in performance rating over time, indicating that the raters were not adequately trained on how to conduct performance appraisals on time, or that the performance appraisal system at the hospital was not effective. Based on the

outcome of the study, there is enough proof to state that the organization needs to take note of various factors that may pose a challenge to the successful implementation of PMS in an organisation.

5.4 Recommendations

Firstly, it is recommended that public institutions in Kenya, should strive establishes performance management systems that are geared towards improving organisation performance. These performance management systems should be qualified in achieving strategic congruence, should be valid, reliable, acceptable and specific. It is further recommended that organisation conduct an initial analysis to establish suitable performance management systems before implementation. Additionally, for a PMS to effectively and positively improve the hospital's performance, organisations must ensure that the level of strategic congruence, validity, reliability, acceptance and specificity of the performance management system is high.

Secondly, as indicated from the study findings that CPGH had put in place a performance management system, much could still be done to make the performance management system more effective in improving performance of the hospital. Therefore, it is recommended that the hospital improves on its performance review feedback, and ensure that performance feedback is given to employees on time. This is in order to raise awareness of the organisations requirements to employees and ensure employee performance is well aligned to the needs of the organisation.

Additionally, the reward structure at the hospital should be reviewed to be in line with employee performance to motivate employees towards performance. The hospital should also strive to reduce inconsistency in performance ratings between different raters, and inconsistencies in performance ratings over time. This can be done by training the raters on how to conduct performance appraisals accurately without bias or subjectivity.

Finally, as established by the outcome of the study, specificity largely influences the effect of the PMS on the hospital performance; therefore, it is recommended that the hospital strive to give accurate and timely performance feedback to their employees and to improve the level of specificity in the PMS. This therefore means that managers should provide guidance to employees in setting specific goals. The performance standards dictated should also be well related to the goals set and performance feedback should focus on the specific areas of performance required of employees.

5.5 Suggestions for Further Research

The study only focused on one sector, the public health institutions. Further research is recommended focusing on other sectors, for example academic institutions, Agricultural institutions, manufacturing agencies etc. to establish if performance management systems influence their performance in the same manner. This will also enable a comparison among the various categories to establish the differences on the influence of performance management systems among these sectors in Kenya.

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APPENDICES

Appendix I: Letter Seeking Authority

05/10/2016.

**The Chief Executive Officer
Coast Provincial General Hospital
P.O.Box 90231-80100**

Mombasa.

Dear Sir/Madam,

REF: REQUEST FOR AUTHORITY TO CARRY OUT ACADEMIC RESEARCH

I am a graduate student of Technical University of Mombasa pursuing Master of Science in Human Resource Management. As part of the requirements for the award of this degree, I am expected to carry out a research and present a report to the university. My research interest is on the influence of performance management system on the performance public health institutions.

I am kindly requesting for your support to enable me achieve this endeavour by allowing all the departmental heads to participate in answering the questionnaires. The information provided shall be analysed to determine the influence of selected factors of the performance management system on the performance of Coast Provincial General Hospital.

You are assured of absolute confidentiality, as the information collected will be strictly for academic purposes only.

Thank you.

Yours faithfully,

PANUEL NYAGA

Reg.No. MHRM/5999/2014

Appendix II: Letter to Respondents

Dr/Mr/Mrs/Miss....

Coast Provincial General Hospital

P.O.Box 90231-80100

Mombasa.

Dear Respondent,

RE: RESEARCH SURVEY QUESTIONNAIRE

I am a graduate student of Technical University of Mombasa pursuing Master of Science in Human Resource Management. As part of the requirements for the award of this degree, I am expected to carry out a research and present a report to the university. My research interest is on the influence of performance management system on the performance public health institutions.

I kindly request for your support to enable me achieve this endeavour. A questionnaire shall be given to you to fill and the information provided shall be analysed to determine the influence of selected factors of the Performance management system on the performance of Coast Provincial General Hospital

Please note that, any information provided will be handled with confidentiality and will only be used for academic purposes only.

Thank you.

Yours faithfully,

PANUEL NYAGA

REG.NO. MHRM/5999/2014

Appendix III: Questionnaire

Thank you for taking time to fill this questionnaire. The aim is to assess the influence of an effective performance management system on the performance of Coast Provincial General Hospital. The exercise is purely academic and data will be handled with utmost confidentiality. Kindly indicate by ticking or crossing the answer that corresponds to your response in the appropriate box provided.

SECTION A: Background Information.

1. What is your gender?

- i) Male ii) Female

2. What is your level of education?

- i) Post graduate ii) Under graduate ii) Diploma
- iv) Secondary level v) others (specify).....

3. How long have you been in service?

- Below 1 year 1-5 years over 5 years

4. Please indicate your age bracket.

- i) Below 35 ii) 35-45

iii) 45-55 iv) over 55

5. What are your terms of employment?

- i) Permanent & Pensionable ii) Permanent without Pension ii)
Temporary

SECTION B: Performance management system

This section aims on finding out the extent the factors affecting the impact of performance management system used at Coast Provincial General Hospital, on the hospital’s performance.

Please indicate to what extent you agree or disagree with the statements using the following scale:

5=strongly agree (SA) 4= Agree (A) 3=Not Sure (NS) 2=Disagree (D)
1=Strongly Disagree (SD).

Strategic congruence	1	2	3	4	5
Coast Provincial General Hospital has in place a formal Performance management system					
The PMS elicits (brings out) job performance that is congruent (in harmony) with the organization’s strategy, goals and culture					
The goals of the employees are aligned to the organization’s goals					
The system guides employees in attaining their set goals effectively and efficiently					

Validity	1	2	3	4	5
The Performance management system assesses all relevant aspects of job performance (performance assessment)					
The tool measures what it is supposed to measure (accuracy)					
Key skills and responsibilities of a job are reviewed often to make sure they still are applicable to the job description (review of performance indicators)					

Reliability	1	2	3	4	5
There is constancy among the individuals who evaluate the employees' performance i.e. in instances where there is more than one person scoring (evaluator), the degree to which they are consistent in their observations and scoring, is high (interrater reliability).					
All the items on the PMS, which are proposed to measure particular job performance, produce consistent results					
The results of a test are consistent over time (Test-retest reliability)					

Acceptability	1	2	3	4	5
Managers and employees participate in development of system (procedural fairness)					
There are consistent standards when evaluating different employees (procedural fairness)					
There is minimized rating errors and biases in the PMS (procedural fairness)					
Employees are given comprehensive feedback on time (interpersonal fairness)					
Employees are allowed to challenge the evaluation (interpersonal fairness)					
Feedback is provided in an atmosphere of respect and courtesy (interpersonal fairness)					
Raters communicate expectations regarding performance evaluations and standards to ratees (outcome fairness)					
Raters Communicate expectations regarding rewards to ratees (outcome fairness)					

Specificity	1	2	3	4	5
Performance standards exist within the system (Performance standards/goals)					
Employees know the desired level of expected performance (Performance standards/goals)					
Employees have the necessary skills and knowledge needed to perform to required standards (input)					

Employees are given information about their performance that is relevant, timely, accurate, specific and understandable (feedback)					
Rewards/incentives are aligned with good performance (consequences)					
Performance consequences are given in a timely manner (consequences)					
Consequences of performance are valuable to employees (consequences)					

SECTION C: Organizational Performance

This section aims on finding out whether the mentioned independent variables has any effect on the performance of CPGH. Please indicate to what extent you agree or disagree with the statements using the following scale:

5=Strongly agree (SA) 4= Agree (A) 3=Not sure (NS) 2=Disagree(D) 1=Strongly Disagree (SD).

Employee Performance	1	2	3	4	5
There is timely delivery of healthcare services to patients i.e. the time for a patient waiting for healthcare services has been cut down					
There is high patient satisfaction with the quality of service delivery					
The hospital healthcare and medical system has the ability to prevent disease and predictable death cases					
The mortality rate is within national acceptable levels					
There is operational efficiency i.e. maximum utilization of resource and minimum wastage					

Extent to which determinants that influence an performance management system influence the performance of Coast Province General Hospital.

5=Very Great Extent (VGE) 4= Great Extent(GE) 3=Not Sure (NS) 2=Small Extent (SE) 1=No Extent (NE)

Determinant	1	2	3	4	5
Strategic congruence					
Validity of the performance measurement tool					
Reliability of the performance measurement tool					
Acceptability					
Specificity					