

**INFLUENCE OF PERFORMANCE MANAGEMENT SYSTEMS ON EMPLOYEE
PRODUCTIVITY IN COUNTY REFERRAL HOSPITALS IN KIAMBU COUNTY,
KENYA**

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DECLARATION

“This research thesis is my original work and has not been presented for a degree in any other University.”

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DEDICATION

To my lovely children; Henry Jr., Catherine and Lloyd; You've brought creativity to my life.

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The researcher wants to give gratitude to Jesus Christ, I drew strength from the living word through the tough times when all seemed impossible during the studies.

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ABSTRACT

Human resource for health is one of the core pillars of health systems and performance management is one of its subcomponents. A performance management system in public health facilities is one of the tools for reforms which have been introduced in Kenya so as to improve employee productivity. Since its introduction in Kenya most health care workers assume performance management system is setting only performance targets; the whole cycle is not addressed. In addition, the performance management systems are not used as a basis of promotions and rewards. The research was an investigation on the influence of performance management system on employee productivity in the county referral hospitals in Kiambu County. Aspects that were investigated included; performance planning, continuous feedback, appraisal and reward. In order to accomplish these research objectives, a descriptive cross-sectional study was used. Quantitative and qualitative data was gathered through literature review, key informant interview guide, and closed and open-ended questionnaires. The study targeted all the employees of the three county referral hospitals of Kiambu County and proportionate stratified sampling was used to get three hundred and ten employees to participate in the study. Purposive sampling was used to select county management heads. A pretest was done to improve reliability and validity of the research instruments. Cronbach's alpha co-efficient was applied to ensure reliability and internal consistency of the instrument for data collection. Statistical Package for Social Sciences (SPSS) version 22 is a descriptive statistical package that was used by the researcher to provide detailed information concerning the data and draw out forms of relationships. Descriptive methods and inferential statistics were used to analyze data. Bivariate correlations and regression results were also used to test hypotheses. The results were presented in tables, charts and histogram and using frequencies, percentages, standard deviations and means. The results of correlation provided strong statistical evidence that a positive and significant influence exists between performance management systems components and employee productivity. All the four variables (planning, appraisal, feedback and reward) were found to have a significant and positive influence on employee productivity in the county referral hospitals in Kiambu County. From the key informant interviews, planning, appraisal, feedback and reward had an influence in employee productivity. In conclusion, regression analysis was done with the aim of determining which of the four components of performance management systems were most predictive of employee productivity when combined. The results were that performance planning and performance appraisal were found to be statistically insignificant in predicting employee productivity in county referral facilities of Kiambu County. However, feedback and reward of performance were the strongest predictors of employee productivity in county referral facilities of Kiambu County when all the four variables are combined. Recommendations of the study were that managers should set clear, realistic goals as a team, they should have regular performance reviews with their employees with discussions so as to review past performance, provide regular feedback as it is desired by employees and reward system should be linked to the results of the appraisal which is just and fair. Future studies may replicate this study to lower tiers of the health care system.

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LIST OF ABBREVIATIONS AND ACRONYMS

AHWO	Africa Health Workforce Observatory
ESCNE	Executive Service Corps of New England
GoK	Government of Kenya
HRDI	Human Resource Development international
HCW	Health Care Workers
HRH	Human Resources for Health
KeMU	Kenya Methodist University
MDGs	Millennium Development Goals
MoH	Ministry of Health
MoMs	Ministry of Medical Services
NEDARC	National Emergency Data Analysis Resource Center
OPM	Office of the Prime Minister
PIP	Performance Improvement Plan
PSTD	Public Sector Transformation Department
PCs	Performance Contracts
PMS	Performance Management Systems
SDGs	Sustainable Development Goals
SPSS	Statistical Package for Social Sciences
SSA	Sub Saharan Africa
WHO	World Health Organization

OPERATIONAL DEFINITION OF TERMS

County Referral Facility	These consist of the county public referral facilities which include the former level five hospitals. They are staffed with among others doctors, clinical officers, nurses and laboratory staff who provide both outpatient and inpatient services.
Employee productivity	The measure that shows how efficiently the required resources are utilized, with reference to a point of time to achieve the set objectives in terms of quantity and quality (Armstrong , 2005)
Performance management	Has the following set of elements: setting performance goals at the organizational, departmental, team, and individual level, conducting performance appraisals, developing systems to provide feedback and rewards.
Performance management system	This is a tool that is used to communicate to employees individually about the organizational goals, ensure individual accountability towards that goal and track the progress in the achievement of the assigned tasks and finally evaluating their individual performance. A Performance management systems consists of several elements that work together to achieve the common goal of improving organizational effectiveness and performance.

CHAPTER ONE

1.1 Background of the Study

A health care system, according to (World Health Organization [WHO], 2007) comprises of all, people, organizations and actions whose primary interest is to promote, maintain or restore health. This has been conceptualized by six building blocks, that is, service delivery, Human Resources for Health (HRH), leadership and governance, Health Care Financing (HCF), medical products and technologies, and finally information and resources. Of these six building blocks, the World 'Health Report (2000) identifies human resources for health as very important component of the health systems.

HRH as defined by WHO (2006) is comprised of all persons engaged in endeavors whose main focus is to enhance health. The health care sector is highly dependent on its human resource due to its labor intensive nature, for execution of knowledge and technical skills to deliver health care services effectively. Health care workers are identified as the nucleus of the health care system (WHO, 2000). Health Care Workers (HCW) provide services, choose the treatment and medical technologies (e.g. drugs, surgical procedures) and are involved in several ways directly and indirectly in health care spending decisions. They are responsible for steering the entire health sector. The health care workers are the personification of health care system as rightly stated by in the World Health Report (WHO, 2006). The report by (Joint Learning Initiative [JLI], 2004) identifies health care workers as the ultimate resources in health because they manage all the other health resources, including infrastructure, information, technology, and financing. The health care worker synchronizes all the inputs together into a functioning health system.

Sub Saharan Africa (SSA) consists of 11% of the world's population, accounts for 24 % of the global disease burden and accounts for less than one 1% of the global health expenditure (WHO, 2006). The Health Care Workers (HCW) in SSA lack incentives leading to brain drain with only 3% of health care professionals deployed in rural areas (WHO, 2006).

The Kenya Vision 2030 is the country's national blue print that devotes to provide an efficient and high-quality health care system so as to reduce health inequalities and improve the general well-being of its citizens (Government of Kenya [GoK], 2007). Despite this, Kenya is faced by several HRH challenges that affect their performance and lower their motivation including unequal pay and unevenness in terms of engagement among the same cadres of staff in the public sector (MoH, 2016). The global strategy on HRH workforce 2030 which was validated at the 69th World Health Assembly in 2016 leveraged the health workforce as an engine for universal health care.

This study is anchored on the Human Resources for Health pillar of the health system and the focus would be on performance management systems. According to Bailey and Seifman (2013), there are six major components of HRH framework i.e. leadership, partnerships, policy, finance, education and HRH management systems. The subcomponent the researcher is particularly interested in is performance management. Performance management is a concept which can be traced back from 1960's in France. It was used as a way to justify income and this turned out satisfactorily for those workers who were purely motivated by monetary rewards. However, this was unsuccessful especially for those workers who were motivated by continuous learning and self-betterment of their skills. This then became a huge problem and in the late 1980's a more

exhaustive approach to govern and reward and recognize performance was then developed in the United Kingdom, United States and the Australia. Performance management system then has continued to be adopted worldwide and its development has further gained momentum by the fact that human resource management is integrated in management and is now viewed as a deliberate driver to the development of employees (Huprich, 2008).

Kenya like other African countries experienced the era of structural adjustment programs (SAPS) of the 1980s where they were required to run public enterprises like private sector businesses (Rono, 2015). In 1992, the Civil Service Reform Program was formally initiated by GoK for purposes of reducing the challenges of improving service delivery to Kenyans. However, there were no promising results following implementation of reforms for five years. The GoK sought sponsorship from World Bank to hire a team of ‘experts’ from the private sector. Their main aim was to improve service delivery, by injecting a sense of urgency in the public sector, something that was thought to be lacking amongst civil servants, They were famously known as the ‘dream team’ or the ‘technocrats’ and they were hired to inject a sense of urgency in improving service delivery which was thought to be lacking among the civil servants. The governments mission was to increase efficiency and effectiveness in public service delivery (Were, 2005).

The ushering in of a new political regime in 2002 and the subsequent launch of a wealth and employment program in 2004 meant that the government had ushered in new reforms. One of the ways the strategy was to be implemented was by ensuring public-sector performance and delivery was effective and efficient. So, in the same year, GoK introduced Result Based Management (RBM) purposefully to improve service delivery, governance and performance. The essentials of

RBM included; setting performance targets, performance planning and appraisal, continuous monitoring of performance and finally reporting (Kobia, & Mohammed 2006).

In its endeavor to improve productivity in order to transform service delivery, systems and processes, the GoK introduced employee performance management system in 2004. It was meant to satisfy both internal and external customers and also achieve the National Vision ('Kenya Vision 2030'). It was believed that with the introduction of performance management in Kenya service delivery would improve (GOK, 2003). Performance contracts were introduced as a management tool for measuring performance against negotiated performance targets as public service was laying more emphasis on performance management (Kobia & Mohammed, 2006).

Performance contracting was initiated in Kenya and ministries were tasked to set achievable and challenging targets. Once they had set targets, then they were able to formulate service charters with their respective clients. The ministries would then benchmark how their performance compared with other best institutions in the world. Their efforts were impressive that they were recognized internationally and African countries came to benchmark in Kenya (GoK, 2010). From these valuable lessons learned in the pilot state corporations, performance contracts was rolled out in the entire public sector for the period starting 1st July 2005 and ending 30th June 2006.

Performance contracts became a useful managerial tool for measuring performance against agreed performance targets. The government or organization freely negotiates with an individual in performance agreements and clearly specifies on the mutual performance obligations. In the Kenyan scenario, a contract will be written document between government and a ministry, state

corporation of county government (local authority, state corporation or central government ministry) that delivers services to the public and quantifiable targets are distinctly specified from July 1st to June 30th, that is, one financial year and performance evaluated against agreed targets (Mutinda, 2017).

Performance contracting in Kenya has not been without its own challenges and some of them include: shortage of skilled personnel in performance contracting (Mbua & Sarisar, 2013). Transfer or removal of staff in middle of contract, uncompetitive benchmarks, fluctuations in committed funding, poor grasp of strategic management process, poor linkage between planning, budgeting and target setting (Ndubai, 2011). Gaps between performance contracts and national priorities despite domestication of performance contracts are also a concern. There is also a lag in achievement of some international goals such as maternal mortality rates at 362 deaths per 100 000 live births (Millennium Development Goals (MDG) target was 150), Infant mortality rates at 39 deaths per 1000 live births (MDG target was 21) and under five mortality rates at 52 per 1,000 live births (MDG target was 33) in 2014 (MOH, 2016).

1.2 Statement of the Problem

The health sector relies heavily on the human resource to achieve its goals. Performance management is one of the key managerial strategies used in human resource for health management. According to Armstrong (2006) performance management system serves to improve performance as well as organizational performance. In Korea, Kim and Kong (2015) report that there are few researches on influence of PMS in health care sector. A study by Randall (2012) in Limpopo show that performance management cycle has been reduced to a transient activity at the

end of the financial year and this fails to give a true reflection on how employees have performed over a period of one year. Since the introduction of PMS by GoK in 2004 no research has been conducted to determine its influence on employee productivity in public health care facilities.

A study done by Marakaru, Musa and Eunice (2014) at the Thika county referral facility, found out that that some of them assumed that performance management involved only target setting and performance appraisals and the whole cycle was not addressed. In addition, the planned calendar of events for performance appraisal were not adhered to and some of them viewed it as a bureaucratic activity that was a waste of their time. This raises the question on the influence of performance management systems on employee productivity. It is against this background that the researcher wants to determine the influence of performance management system on employee productivity in the county referral facilities of Kiambu.

1.3 Research Objectives

The **broad objective** of the study was to assess the influence of performance management systems on employee productivity in county referral facilities of Kiambu County.

The **specific objectives** were;

- i. To establish the influence of performance planning on employee productivity in county referral facilities of Kiambu County.
- ii. To determine the influence of performance appraisal reports given to an employee on his or her overall performance in county referral facilities of Kiambu County.
- iii. To examine the influence of feedback given to an employee on his or her productivity in county referral facilities of Kiambu County.

- iv. To establish the influence of rewards given to an employee on his or her overall productivity in county referral facilities of Kiambu County.

1.4 Research Questions

- i. Does performance planning influence employee productivity in county referral facilities of Kiambu County?
- ii. Does performance appraisal report influence employee productivity in county referral facilities of Kiambu County?
- iii. Does feedback given to employees influence their productivity in county referral facilities of Kiambu County?
- iv. Is the employee productivity influenced by the reward given to an employee in county referral facilities of Kiambu County?

1.5 Research Hypotheses

H₁: Performance planning significantly influence employee productivity in county referral facilities of Kiambu County.

H₂: Performance appraisal significantly influence employee productivity in county referral facilities of Kiambu County

H₃: Feedback on performance significantly influences employee productivity in county referral facilities of Kiambu County.

H₄: Reward given to an employee significantly influences employee productivity in county referral facilities of Kiambu County.

1.6 Justification of the Study

Health sector reforms in Kenya have been ongoing from 1994. One of them is employee performance management systems which was introduced in 2004. It was one of the public reform policies that was meant to satisfy both internal and external customers and also achieve the national vision (Kenya Vision 2030). Since the introduction of PMS in 2004 the researcher is not aware of any research studies that has been done to establish the influence of performance management system on employee productivity in public hospitals. Previous researches concerning PMS have been on state corporations (Kobia & Mohammed, 2006).

The few researches on health sector have focused mainly on appraisals and rewards and not the whole PMS cycle. In addition, most health care workers equate performance management system with performance appraisal or performance review (Nayak, 2014). PMS however involves planning, feedback, and rewards in addition to appraisals (Krishnan, 2017). Focusing only on performance appraisal leads to misrepresentation and under-valuing the benefits of performance management systems. According to Oluwabusola, Maycook and Akinwale (2015), performance management is not used as a basis for promotional schemes rather, length of service in many public sectors. Seniority based pay has allowed unequal pay due to the fact that it fails to reward individual employees who contribute more than their colleagues in an organisation.

The Human Resources for Health challenges in Kenya have contributed immensely for lack of achievement of national health targets and certain reforms meant to improve efficiency in service delivery (Health sector human resources strategy, 2014). In the Kenya Human Resources Strategy 2014-2018 document, one of the strategic objectives is to improve health workforce Performance

Management (MOH, 2014). A set of seventeen Sustainable Development Goals for 2016-2030 were adopted by the United Nations General Assembly and the human resources for health is underpinned in target 3c which states in part "... substantially increase health financing, and the recruitment, development and training and retention of the health workforce in developing countries"

This underpins that healthcare workforce is an important part of the proposed health goal. The World Health Assembly in 2014, acknowledged that calculated and strategic investment in human resources for health is necessary if they are to achieve equity and universal health care.

1.7 Limitations of the Study

The researcher limited her study to Kiambu County referral hospitals only and may not reflect the situation in other counties or other tiers of the Kenyan health care system. She would have desired to study other tiers of health care in Kiambu County, but due limited time and resources, it were not possible.

The researcher also experienced challenges in accessing respondents due to high volume of patients being attended to by few staffs on a daily basis. The researcher eventually interviewed the respondents who were unoccupied at the time of collecting data.

1.8 Delimitations of the study

Delimitations set the demarcations of what the researcher will be studying, and the procedures being utilized (Mugenda, 2003). The researcher focused only on county referral facilities of Kiambu County.

1.9 Significance of the Study

This study will reveal the impact of performance management systems on employee productivity. It will be particularly beneficial to the county government and the country by providing the first empirical evidence on whether performance management systems for public health facilities is a feasible process for improving employee productivity and hence quality of care, thereby improving health outcomes.

This was a timely research considering the achievement of SDGs and the GoK quest to improve service delivery in public health facilities in the country which have been devolved. The information gathered will help to inform policies at county and national levels.

The findings will also benefit Gatundu, Thika and Kiambu county referral facility employees and other stakeholders to understand the gaps in PMS and strengths. Recommendations will lead to better understanding and appreciation of PMS and its contribution to employee productivity.

These findings will also enrich immensely the body of knowledge in HRH considering that the health worker is responsible for steering the entire health sector. The researcher hopes that the information gathered in this paper will stir more curiosity for academicians to delve deeper on this increasingly popular health care reform, which will grow to the body of knowledge concerning its influence.

1.10 Assumptions of the study

According to Wargo (2015) study assumptions are the conditions under which statistical techniques used in a study will yield valid results. The researcher assumed that the participants were honest while responding to the questionnaires. In addition, the sample was a true

representation of the study population with the assumption that they had had a similar phenomenon.

CHAPTER TWO

2.1 Introduction

The public service delivers its objectives through human resources and therefore it's paramount that proper mechanisms are available so that human resources can be accountable for their actions and also supported to maximize their potentials. Performance management is often taken to be crucial in improved service delivery. It was assumed for a while that it was impossible to measure performance in the public sector (Lewis, 2015). Currently PMS has become perhaps the most widely pursued public sector reform of recent decades.

There is a general agreement that there are numerous benefits of performance management but there's scanty literature to guide practice in health care (Health policy, 2006). According to Smith, Peter, Mossialos, Elias, Papanicolas, Irene , Leatherman and Sheila, (2009) the main function of performance management is monitoring, evaluation and communicating the extent to which health systems and its aspects meet key objectives.

Performance management is able to bring all employees to work towards a common goal. This ensures delivery of results because all efforts are geared towards achieving a common objective (Balogun, 2003).

Employee performances management is an exercise where all employees have a shared understanding concerning the vision and aims of the organization and exactly how to accomplish those objectives (Korir, Rotich, & Bengat, 2015). Organizational objectives are well aligned with the employees agreed targets, skills and the achievement of goals. PMS has its emphasis on continual improvement of the employee, learning and self-development so as to create a high-performance workforce while achieving the overall organization strategy. When PMS is

implemented accurately, linking specific objectives to the strategic and operational plans, institutional performance outcomes will more likely increase very steadily.

Performance management system helps to breakdown extensive departmental strategic plans into clear achievable performance milestones for each individual. This easily provides a basis for continual monitoring of individual performance, the giving of feedback and the execution of measures to improve performance (Armstrong, 2009).

Armstrong (2004) suggests the following action plan for an effectual performance management: there should an establishment of a strategic plan which is aligns to an annual work plan, ensuring all employees are involved in the whole process to increase buy-in, and regular on job training. The organization must plan for a training program that ensures employees are involved in decision making. In addition, managers must acknowledge that effective communication between them and staff is an effective tool for performance. Non-monetary incentive system may also be introduced along monetary incentives to encourage improved employee productivity. The aim of performance management is to boost job satisfaction for employees which in turn, should hopefully, lead to improved work productivity.

Performance management as a process defined by Latham, Sulskly and Macdonald (2007) as cited by Armstrong (2009) is said to consist of four steps, that is, the organization defines their desired job performance, and then they set specific challenging goals. An employee's performance is observed while providing feedback, and finally, a decision is made based on the outcome whether to promote, demote, train, transfer, or terminate the employee's contract.

2.2 Global scenario of influence of PMS on employee productivity

The National Health Services in England, made up of over 8,300 separate organizations and a staffing of over 1.3 million uses Public Service Agreements which are incorporated into performance based agreements. It has been rated as the fairest and most patient centered health system in the world with the highest customer satisfaction levels in the world Department of Health UK (2016). A survey was conducted by the Performance Management Institute of Australia of Australian employees' concerning their attitudes towards PMS for approximately 450 employees. The research found out that slightly above half of them received performance reviews once a year and the other half were not reviewed. The employees were also not involved in target setting and therefore leading to dissatisfaction during reviews (Nankervis & Compton 2006).

In SSA, Uganda for example, has experiences in weak PMS of the health worker. Lutwama, Janetta, and Bethabile (2013) in his study unearthed several gaps in the implementation of PMS in the Ugandan health sector. They included absence of setting targets and planning, unclear indicators for measuring performance, irregular performance appraisal and limited staff training and development. A study done by Dieleman, Toonen , Toure and Martineau ((2006) indicated that PMS had not been ideally been put in practice in Mali, as jobs or tasks lacked proper descriptions or some were improper, a very low percentage (13%) were appraised and training needs were not analyzed. Employees at Father Smangaliso Mkhatswa center in South Africa of different hierarchy view PMS differently. Those of lower hierarchy view PMS as means of increasing their income and those of the higher hierarchy view PMS as an instrument of supremacy and discipline to subordinates. Halo effect was dominant where superiors show preferential treatment to certain subordinates. They are, however, aware that PMS is a tool to improve service

delivery by addressing poor performance through human resource development programmes and rewarding good performance (Paile, 2012).

According to GoK (2007), the public sector had invariably fallen below expectations due to several factors that include frequent political interferences, poor leadership and management and non-performing employees leading to poor employee productivity. Following the adoption of a new constitution in August 2010 in Kenya, a devolved way of governance was introduced and 47 counties were formed. The highly centralized former way of governance resulted in resources being unequally distributed (World Bank, 2012). In 2015 annual conference report for health care services devolution in Kenya, there were several challenges identified in HRH such as salary disparities, uncoordinated training, delay of promotions and limited career progression. The delegates suggested whether PMS could be mitigate these challenges (MOH, 2016).

2.3 Performance planning

In performance management process, planning is the most important initial aspect, since it forms the basis of performance appraisals. During this initial stage of planning, employees in a department make a decision on the targets and as a team, they also identify key performance areas that can be achieved over a period of one year. (Markus, 2004). The performance agreements puts in perspective expectations while at the same time creates a common point of reference for senior management, staff and their supervisors in the entire PMS process. The performance agreements articulates clearly the performance standards for which a government requires a public servant or state owned agencies to meet over a financial year Hope (2011). Olusanya and Suleiman (2012)

agrees that effective planning in PMS positively contributes to improved employee productivity in an institution.

In Kenya, institutions are required to set targets in which fall into the four categories in the following descending order; financial, non-financial, and operational and finally dynamics indicators. Most performance targets in public institutions are usually the same in most categories for operational indicators which are specific in accordance to the mandate of the institutions. Using a departmental plan, institutions should develop a work plan, which indicates primary activities to be accomplished by the end of the financial year. The work plans are used as the basis for evaluation at the end of every quarter (Performance Contracts Steering Committee, 2004). Existing policy documents, that is, NHSSPs, Medium Term Plan 2013-2017, Vision 2030 and institutions' strategic plan are used to prepare work plans. The performance contracts are then signed as a sign of accountability and to show a buy-in by the appropriate senior management authority and the institutions accounting officers (Ndubai, 2011).

The performance contracts are signed at two levels, that is, by the public service head and secretary to the cabinet, who stands in as the government and the permanent secretary of a ministry. The cabinet secretary has the responsibility of cascading performance contracts to all departments, sections and units. The GoK developed a policy guideline for effective implementation of performance contract. The policy states that when the financial year begins, individual employees, jointly with their supervisors shall set performance targets for the year (GoK, 2013).

Employees need resources during their planning stage. Nielsen and Miraglia (2017) states that resources are those that an individual views as things that will help him or her achieve his or her goals. Resources are categorized into four levels in the work place, and they help employees achieve their work task goals in four areas. These areas included personal characteristics such as self-efficacy which enable an individual to perform well (Xanthopoulou, Demerouti, and Schaufeli, 2007), social context associated with interpersonal relationships, leadership characteristics and organizational resources. Planning was associated with increased performance in companies according to a study by Gibson and Cassar (2005). Draft (1998) cited by Nassazi (2013) says that performance management process provides a great platform for employees to get actively involved in planning for the organization. This allows them to participate actively in achievement of organizational goals and this consequently translates to increased productivity.

2.4 Performance feedback

Mathauer and Imhoff (2006) in their study found that health workers rarely received any personal feedback from their supervisors. When they received the little feedback it concentrated only on their limitations or processes involved during service provision. It failed to at the perspective of the health worker as a person.

They also cited that personal feedback is more common in faith based organizations and private facilities than in public facilities. Performance management promotes employee's identity and a sense of belonging delegating responsibility providing feedback recognizing and valuing employee success.

For a performance management process to be considered successfully then the feedback has to prompt and constructive and this should be in line with the set targets. When prompt and constructive feedback is shared to employees on concerning their progress towards the set goals, then employee productivity will surely improve. Employees need to be informed promptly if they are achieving their targets. Davis (2011) states that any performance feedback system must furnish employees promptly to ensure they are satisfied with their process.

According to Obwaya (2010) feedback corrects repetition of mistakes and keeps staff focused on what is required of them. She also noted that public service culture inhibited free interaction between senior management and employees, and the bureaucratic processes were a barrier to flow of information, making it difficult to give feedback to staff promptly as required.

2.5 Performance Appraisal System

Performance appraisal system as stated by Armstrong (2009) is another component of Performance Management System in the public service. Individual employee work plans are integrated into all the other components of the performance management systems, that is, planning, execution of set targets, performance feedback and evaluation (Public Service Commission of Kenya, 2015).

The GoK sets the appraisal period for one year, beginning from 1st July to 30th June of the following year and it reflects an employee's overall year's performance. There are two reviews in that financial year, that is, on-going and semi-annual performance review. For the on-going performance appraisal it takes place throughout the performance period and achievements are recorded and tracked in the personal file of the person being appraised. During the semi-annual

performance review the supervisor sets a meeting with the individual being appraised to review the progress made and the initial goals that were set at the beginning are used to measure how far the appraisee has reached in terms of meeting the targets (GoK, 2008). This mandatory mid-year performance review discussions focus on the achievements, constraints and how to overcome them even if it means reviewing the initial set targets which may not be achievable due to some constraints which had not been anticipated (GoK, 2008).

For the Public Service Commission of Kenya (PSC) to reinforce support supervision in its' institutions' and improve service delivery, then the use of performance appraisal is paramount.

Performance appraisal functions to motivate, audit, evaluate, identify training needs, and develop an individual and plan for future. Due to its perceived usefulness, performance appraisal is currently seen as an open process where teams set and discuss openly objectives and targets for the purposes of aligning individuals' goals and organizational goals (Kobia & Mohammed 2006). Armstrong (2006) in his view, looked in depth at the role of performance appraisal in any organization as a very useful tool for describing what needs to be done by employees to meet targets and to have challenging work. This ensures that the supervisors are able to maximize the employees' skill, talents and ensure better use of other resources in the organization.

2.6 Linking reward to measurable performance

Armstrong (2009) states that the role reward system in PMS cannot be underestimated. Rewards contribute to improving performance and productivity through means such as recognition, personal development of employees, informing pay decisions and job designs. In the Kenyan public sector scenario, PMS uses rewards and sanctions to encourage employees to provide quality services (GoK, 2010). Performance managers may reward an individual or a team either in cash or in kind.

PMS is one major way to ensure that good performance rewarded since it ensures that competent staffs are motivated in their jobs (Maycook, 2015).

According to Oluwabusola (2015), performance management is not used as a basis for promotional schemes rather, length of service in many public sectors. Seniority based pay leads to unequal pay since it does not recognize employees who contribute more than others and should be compensated accordingly. Health care managers are under pressure to reduce operating costs, improve employee productivity, increase patient safety, outcome and experiences. In order to achieve these outcomes, they have turned to performance management so as to stimulate innovation in employees as a way to survive and succeed in this new healthcare space. A major goal of PMS is to ensure that as employees are achieving organizational goals, they are also achieving their individual goals and motivated employees are key performance management. In Kenya, one of the ways used by the GoK to motivate and recognize outstanding public servants was the use of performance management. Flynn (1988) as quoted by Danish (2010) recognizes that rewards and recognition boosts employees' morale, keeps them in high spirits and they showed that there was a direct link between performance and motivation of employees.

2.7 Performance Improvement Plans

In the current health care set up, we cannot talk about performance measurement without talking about performance improvement. Performance improvement is when there is betterment of the processes that seek to improve health care services to meet the needs of patients and others (Coutts and Herzeberger, 2005). PIP's are tools used to resolve medical and administrative issues. Once a performance issue has occurred, there needs to be an established plan for improvement. According to Armstrong and Baron (2004), the plan should have clear expectations and repercussions for not

meeting the expectations. The PIP indicates what resources will be provided to help employees meet these goals. The supervisors must clearly define what needs to be improved with the employee and get feedback from the employee about the plan. If need be, adjustments can be made, and a final agreement is signed by the supervisor and employee. A timeline must then be established for regular follow-up meetings to discuss how improvements are being made towards the goals.

2.8 Employee productivity

Armstrong (2006) describes productivity in terms of outputs relatively to inputs either per person or per system with reference to a specific point of time, that is, the amount of goods and services produced relative to the resources used as described in a work description. Productivity is considered based on the interrelationship with performance and profitability.

Human resources for Health is a major resource that influence productivity in any organization. A motivated, dedicated and committed employee will perform better and institutions are encouraged to value their human resource since it is only manpower that makes the difference in the performance. Any organization should strive to maintain their human resources by ensuring factors that affect productivity are constantly monitored. These factors may include, technology, training, policies, opportunities for upward career development and the attitude of management. These factors of productivity, if well harnessed, create interest in employees to work and give their best. They cause them to be innovative and lets the employees take responsibility for their performance. This in turn reduces time wasted on reworks, accidents and wastes. Consequently, there is improved quality and more output and more productivity.

Koretz (1995) stated that there are four productivity factors that once addressed, can lead to improvement of human resource. They include lack of supportive supervision, failure to involve employees in decision-making, setting of unrealistic goals and employees perceive it as too much work, and finally inability to rewards employees coupled with minimal chances to advance.

In Ghana, Boateng and Owusu (2014) found that conducting performance appraisals have positive effects on employee efficiency, effectiveness, motivation and overall performance. A study published in international journal of research in 2013 study proved that training for both new and existing employees actually improves performance and overall efficiency (Uma 2013). Berg, Dutton, and Wrzesniewski (2013) further indicates that to foster a healthy communicative culture in an organization, there must be clear parameters for success, constructive feedback and giving employees challenging, meaningful work. McLeod & Clarke (2010).

Employee creativity greatly influences employee productivity since they are able to come up with novel ideas that are beneficial to the organization. As stated by Shalley, Zhou and Oldham (2004), these innovative ideas are in many forms such as coming up with new procedures or processes for accomplishing duties, or identifying certain goods, products or services that boost client satisfaction. Employees may also come up with innovative ideas to include revising certain existing procedures or processes for purposes of improving institutional effectiveness and efficiency. When employees use creative ideas to improve their work processes, it results in the improvement of the whole institution (Shalley et al., 2004).

One of the ways to look at employee productivity is by looking at it in terms of measurable outcomes or behavior (Armstrong, 2000) and this is possible by comparing against key performance standards as outlined by the organization. These standards include, profitability, effectiveness, productivity efficiency and quality (Ahuja, 2006). Efficiency can be described as producing the desired outcomes by utilizing minimal resources while effectiveness is the ability of an employee to meet the set targets (Stoner, Freeman & Gilbert, 1995).

According to Armstrong (2012), employee performance is a participatory activity in an institution. The employee is usually involved and valued in the organizations vision and mission. The employee is very clear on what the organization seeks to achieve and is allowed to voice his/her ideas on the day to day business and these ideas are taken into consideration. The employee keeps their focus on what is to be achieved, is able to be empowered with resources and skill, receives adequate, prompt and constructive feedback. In addition, whenever they surpass their targets or improve processes, they are appreciated, recognized and possibly rewarded.

Locke (1976) defined job satisfaction as when an individual experiences that delightful or gratifying emotional state that results when one's job is appraised and from job experience. Armstrong and Taylor (2017) states that one of the antecedents for to employee performance is job satisfaction and it is intertwined with job involvement and organizational commitment.

Armstrong (2009) noted that when an employee find tasks are interesting and challenging and they are given responsibility and control over resources then it influences job performance. For work to be challenging, the scope has to be broad, the responsibility high and the work load high. This

will more likely increase performance since it creates room for personal growth and accomplishment

When employees exercise autonomy in scheduling their work and determining procedures, they get a sense of belonging and ownership over their outcomes. This means that as employees exercise authority in decision making, it makes their work enjoyable and it gives them job satisfaction. For the employees to be able to exercise autonomy, they must have clear set goals, constant, prompt and constructive feedback for improvement so that they know what they are doing wrong and how might they improve and areas in which they are excelling. Hughes (2013) emphasizes the significance of conducting mandatory midyear and year-end appraisals to provide feedback and recognition to employees

Hughes (2013), states that employees must be given an opportunity to grow and progress in their careers. An employee who sees an opportunity for growth, career development through acquiring new skills and knowledge and promotion works harder and in turn this increases productivity. These are viewed by employees as a personal investment in their time while in the organization. Smith et al. (2009) as quoted by Armstrong and Taylor (2017) illuminates that organizational leaders who set clear goals and regularly recognize employees who are highly productive, will contribute positively on employee productivity since they inculcate a deep sense of attachment to the job.

2.9 Theoretical framework

According to Vinz (2017) a theoretical framework provides a scientific justification to one's research: it justifies that the research is not "out of the blue," but that it is based on a scientific theory. It narrows the scope of information by concentrating on distinct variables and viewpoints [framework] that a researcher will utilize to analyze and interpret collected data.

The researcher anchors the study in the theory of goal setting developed by Smith et al (2009) looks at employee productivity and job performance through setting of goals. Latham and Locke (2002) indicated that very specific goals that are deemed challenging coupled with immediate constructive feedback contribute highly to improved performance.

The said that employees who are assigned specific, challenging but achievable goals are more likely to be productive compared to those whose goals are not specific and easy to achieve. According to this theory, if a set goal is challenging, the employee is more spirited and it will lead to more and increase persistency. These clear goals make employees to be more creative in trying to meet the set targets. When an employee meets the set targets, they will be satisfied and this satisfaction makes the employee more motivated and in turn improves productivity. However, if an employee fails to meet their goals, it can lead to frustration and may lead to demotivation. In addition, Latham and Locke (2002) state that employees must participate in setting goals to increase acceptance and must also be able to measure their own progress. This greatly increases ownership and therefore increases productivity. When employees are allowed to participation in setting goals it enhances commitment by ensuring ownership and setting realistic and achievable goals.

This must be followed by adequate, prompt and constructive feedback on the employees' performance concerning goal attainment (Latham, 2003). This informs employees' if they are on track and if there are any adjustments to be made while trying to meet the targets. One of the limitations of this theory is that the goal focuses on measurable indicators while ignoring those that are difficult to measure. Another limitation is that the theory does not look at new employees who are still being orientated into the complex processes.

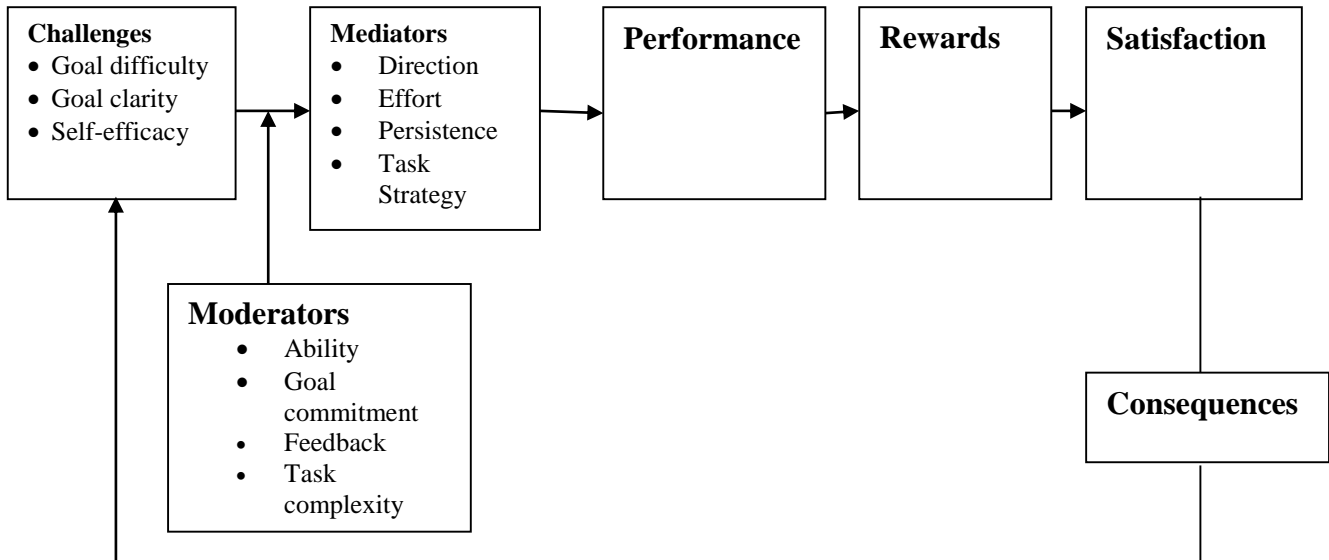


Figure 2.1 Goal Setting Theory (Locke & Latham 2002).

2.10 Conceptual framework

Regoniel 2015 defines it as a visual depiction or image, one that clarifies, either using a graph or in prose form, the key things to be studied, ideas, or variables—and the deduced interactions among them.”

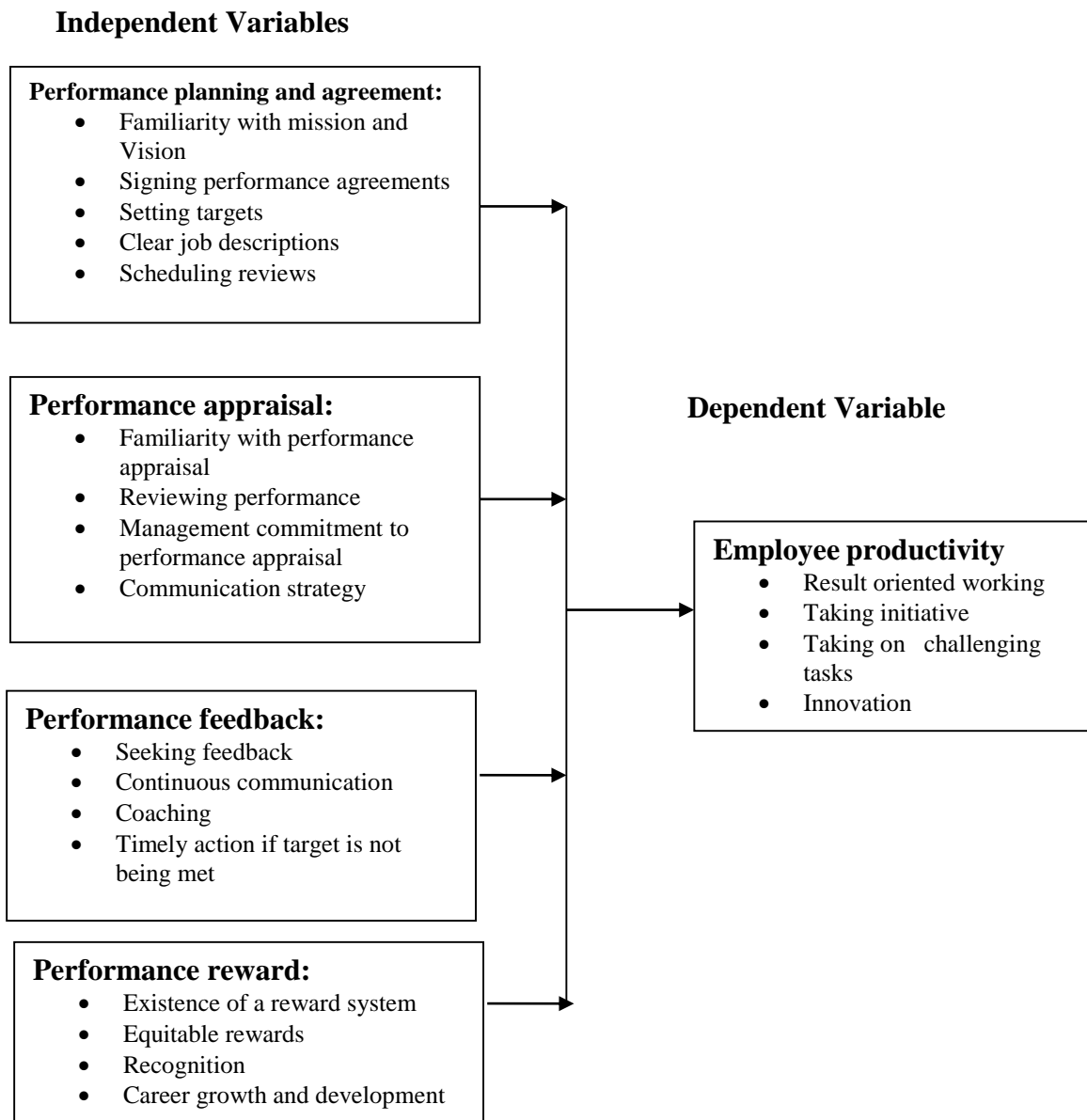


Figure 2.2 Conceptual framework

Source: Author 2018

CHAPTER THREE: METHODOLOGY

3.1 Introduction

The aim of this study was to determine the influence of performance management system on employee productivity in county referral hospitals of Kiambu County. The influence of performance management system was measured through four variables: performance planning, performance feedback, performance appraisal, and performance reward. This chapter describes the research design, population, sample size and sampling procedures, data collection and analysis to be used in this research study.

3.2 Research Design

The research espoused a descriptive cross-sectional study design to study the influence of performance management system on employee productivity in county referral hospitals of Kiambu County. Descriptive research design is a where the researcher uses scientific method to observe and describe the behavior of a subject in a study without influencing at all. Cooper and Schindler (2003) indicated that a descriptive paper has the ability to collect people's opinions and attitudes since it explores events in different aspects by asking how, why, what and where. Cross sectional studies can be stated as a "snapshot" of the characteristics and frequency of a condition in a study population at a specified point in time (The National Data Analysis Resource Center, 2010). This study design assisted the researcher to get data on all variables at once and it was quick and easy to conduct since there were no long periods of follow up.

3.3 Location of study

The research study was carried out in Kiambu County, one of the forty-seven counties under the constitution of Kenya. Among the public facilities, there are three county referral facilities in Kiambu County namely Gatundu, Kiambu and Thika County referral hospitals. These county referral facilities are the former level five and four facilities which have now been classified as tier three facilities (County government of Kiambu, 2017).

3.4 Target Population

Target population is one to which the result of the investigation can be applied (Mugenda and Mugenda, 2003). For this study, the target population was one thousand and forty eight employees who were employed by the Public Service Commission of Kenya or Kiambu County Public Service Boards and had signed the performance contract in the financial year 2016/2017 from the three county referral facilities namely Gatundu, Kiambu and Thika.

3.5 Sampling Techniques and Sample Size

i. Health Facilities

Based on the range and intricacy of the services offered, the Kenyan health system is organized around six levels of care that fit into four tiers of care. Former level five facilities fit into the third tier and these are part of the county referral facilities. They are staffed with different cadres of staff including doctors, clinical officers, imaging, laboratory staff nurses and many others who provide inpatient and outpatient services.. There are three county referral facilities within Kiambu County that is, Gatundu, Kiambu and Thika. Respondents were drawn from these facilities.

ii. Respondents

The respondents included all those who were employed by the Public Service Commission or County Public Service Boards and had signed the performance contract in the financial year 2016/2017 in the three facilities. To get a representative sample, proportionate stratified sampling was used to get the number of respondents within the different strata to reduce risk of sampling bias and sampling error. It also ensured adequate representation of different groups in the population. The information that was collected included: performance planning, performance appraisal, feedback and reward systems. Purposive sampling was used to select key informant from county management team.

Sample size determination

Fishers, Laing, Stoeckel and Townsend (1991) was used to compute the minimum required sample size.

Sample Size Calculation

Sample size $n = [DEFF * Np(1-p)] / [(d^2 / Z^2_{1-\alpha/2} * (N-1) + p*(1-p)]$

Population size (for finite population correction factor or fpc) (N):	1048
Hypothesized % frequency of outcome factor in the population (p):	50% +/- 5
Confidence limits as % of 100 (absolute +/- %) (d):	5%
Design effect (for cluster surveys-DEFF):	1

Calculated Sample Size (n) at 95% Confidence level with finite population correction=**282**

Adjusting for 10% non-response rate, the required minimum samples size becomes=**310**

Table 3.1: Proportionate Distribution of the total Sample among the 3 county hospitals and within the various Cadres

Cadre	Gatundu Population	Gatundu sample	Kiambu Population	Kiambu sample	Thika Population	Thika sample
Administrative						
officer/Office assistants	6	2	8	2	13	4
Doctors	36	11	38	11	38	11
Nurses	100	30	184	54	240	71
Clinical officers	17	5	23	7	30	9
Laboratory						
Technologists	8	2	17	5	22	7
Imaging Technologists	8	2	11	3	12	4
Physiotherapists	11	3	14	4	17	5
Pharmacists	10	3	17	5	18	5
Health records						
Information Officers	9	3	17	5	22	7
Counsellors/Social						
workers	5	1	8	2	9	3
Nutritionists	4	1	7	2	14	4
Procurement/Supply						
chain Officer	2	1	2	1	3	1
Drivers/Cooks/tailors	11	3	16	5	21	6
Sub Totals	227	67	362	107	459	136

3.6 Data Collection Tools

This study managed to collect quantitative data using a self-administered employee questionnaire and key informant interview guide. The employee questionnaire was constructed according on the

objectives of the study to ensure internal validity. To establish the internal consistency of the questionnaire, Cronbach's alpha method was used. The questionnaire had two main sections, that is, Section A: which consisted of the respondent's demographics which included age bracket, marital status, cadre, level of education years in service. Section B had statements that had a focus on the study variables, that is, performance planning, and appraisal, feedback, reward and employee productivity. The statements were rated on a five-point Likert scale and the responses arranged from 5: strongly agree, 4: agree, 3: Not sure, 2: disagree, 1: strongly disagree.

The key informant interviews were also conducted with the county managers and hospital managers to collect qualitative data. The researcher was able to get input on the aspects of performance management on employee productivity.

3.7 Pretest Study

A pretest exercise involving 30 respondents from Murang'a County referral hospital was conducted to ensure the clarity, suitability and flow of the questions before questionnaires were finally administered to participants.

The pretest study aims at determining if the questionnaire is reliable in terms of words, sequence and structure of the questions (Kothari, 2004). The researcher was then able refined the tool to improve the validity and internal consistency.

3.8 Validity and Reliability

i. Validity

When a research instrument possesses the ability to measure what it is supposed to measure then it's deemed as valid (Kothari, 2004). Mugenda and Mugenda, (2003) states that content validity is

the ability of an instrument to represent a specific domain of indicators or content of a particular concept during data collection. Mbwesa (2006) describes construct validity as the ability to which the indicators adhere to a network of related hypotheses generated from a theory based on a concern.”

Validity in this study was ensured by means of restricting the statements in the questionnaire to the concepts of the key variables and all the identifiable indicators of a specified variable was within the same conceptual elements. The researcher accomplished this through pretesting of the questionnaire.

In addition, the comprehensive literature review and the nature of participation which was purely voluntary, of the health care workers also ensured internal validity. External validity was ensured through random sampling to reduce selection bias.

ii. Reliability

One of the methods of obtaining reliability co-efficient is by use of the internal consistency method (Mbwesa, 2006). Mugenda and Mugenda (2003), states that the reliability coefficient can be computed in a study to show reliability by use of Cronbach’s alpha which a reliability coefficient is. It clearly tells us when items in a questionnaire set are correlating conclusively to one another. A coefficient of 0.70 or more suggests a high degree of data reliability (Mbwesa, 2006). Cronbach’s alpha co-efficient was applied to ensure reliability and internal consistency of the instrument for data collection.

Reliability Statistics

Cronbach's Alpha	No. of Items
.861	7

For each of the five variables, the Cronbach's Alpha was as shown in Table 3.1:

Table 3.2: Reliability Statistics: Variables

<u>Variable</u>	<u>Cronbach's Alpha</u>	<u>No. of Items</u>
Performance planning	0.861	7
Performance appraisal	0.924	7
Performance feedback	0.913	7
Reward	0.936	7
Employee productivity	0.728	7

From the values in Table 3.1, there were internal consistencies for each variable since the Cronbach's Alpha values for each were all above 0.7. This implies that the instrument had a high reliability co-efficient.

3.9 Data Collection Methods

In this particular study, the researcher collected primary data for in order to make conclusions and recommendations. A structured questionnaire was used in this study to collect primary data because it provides direct response and feedback in an easy manner and consumes less time. The structured questionnaire eased data analysis the process due to increased speed and accuracy of recording the information. A key informant interview guide was used to collect data from health care managers and this data was qualitative in nature. For purposes of maximizing the response rate, the researcher employed the drop-off and pick up method to administer the questionnaires. The respondents were briefed verbally about the study and consent obtained and then they were given ample time to answer the questionnaires. This was to ensure a high response rate.

Performance management text books available in the library, Government reports which were accessible, journal and periodicals relevant to performance management end employee productivity were used to get secondary data.

3.10 Data Analysis

This was a rigorous process that started with collected data being pre-processed by editing to detect any errors or omissions and making of corrections where applicable. There was detailed analysis of the all the filled questionnaires to ensure accuracy and consistent with all the gathered information. Data coding was done in order to group the responses for ease of analysis.

The coded data was then classified into categories using common features and classes. Raw data was then organized inform of statistical tables to detect errors and omissions. The rigor of data was

enhanced by involving a statistician to verify the coding to ascertain consistency between the themes, sub-themes and categories.

Statistical Package for Social Sciences (SPSS) version 22 is a descriptive statistical software package that was used to analyze quantitative data in this research. Descriptive statistics (mean, frequency, standard deviation and percentages) and inferential statistics (multi-linear regression model and Pearson Correlation coefficient) were used by researcher to provide detailed information concerning the data and draw out forms of relationships. All data that was qualitative in nature was thoroughly checked for completeness and cleaned for content analysis.

This study used the correlational coefficient to establish how each of the independent variable influence the dependent variable using the following linear function model;

$$Y = f (X_1, X_2, X_3, X_4) \dots \dots \dots (1)$$

Where Y = Employee productivity

X₁ = performance planning

X₂ = performance appraisal

X₃ = performance feedback

X₄ = performance reward

The Pearson's Rho (r) was applied to show the strength of relationship between independent variables and the dependent variable under investigation in this research study. The value of Rho ranges between 0.00 and 1.00. The closer the value of Rho is to 1.00, the stronger is the relationship. The bivariate linear correlation analysis also gives a p-value corresponding to each Rho in order to determine if the relationship is significant or not. The p-values below 0.05 indicate

that the relationship is significant while the p-values above 0.05 indicate insignificant relationships. The Pearson's Rho (r) was also used to provide insights to the research questions in this research study.

The linear functional relationship between the independent variables ($X_i, i = (1, 2, 3, 4)$) was the basis upon which a combined model used for the purpose of this study was developed. This study utilized the mathematical model of multiple linear regression to establish the influence of performance management on employee productivity in county referral hospitals of Kiambu;

$$Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \varepsilon \dots \dots \dots (2)$$

Where $\beta_0 =$ Constant

$\beta_i, (i = 1, 2, 3, 4) =$ Slope coefficients representing the regression weights of X_i variables where ($i = 1, 2, 3, 4$)

$\varepsilon =$ Stochastic disturbance error term

One of the outputs of this model was the F-statistics and its corresponding p-value in the ANOVA table which was a key test of the validity of the regression model. When the p-value corresponding to the F-statistic is below 0.05, then the regression model is valid and the opposite is true for p-values above 0.05.

The regression analysis also gave the coefficient of determination (R^2) which indicated the total variations accounted by the variables under investigation. The coefficient of multiple determination (Adjusted R^2) indicated the total variations explained by the independent variables under investigation in the absence of the constant.

The error term in the model summary accounted for the total deviations for the model under investigation from the line of the best fit. Finally, the model also gave the beta weights and their corresponding p-values which are the final regression weights of the variables under investigation. Bivariate linear correlation analysis and multiple regression analysis was performed on these specific determinants of each of the predictor variables (X_i) and the results discussed in terms of P-values, F-statistic, R^2 , Beta values and Pearson's Rho values.

3.11 Data Presentation

Quantitative data was presented in tables, charts and histogram in terms of frequencies, percentages, means and standard deviations. Qualitative data in this study was presented in prose form according to themes.

3.12 Ethical considerations

The research permit and approval to conduct the study was sought and obtained from the following institutions; Scientific and Ethical Review Committee (SERC) (KeMU), the ethics and research committee of Kiambu County Hospital Research Committee and National Commission for Science and Technology and Innovation (NACOSTI).

Moreover, the Health Care Workers were given information pertaining to the study before the study began. The information included the objectives of the study and that participation was purely voluntary and they had a right to decline to participate in the study. They could also withdraw at any time in the course of the study. The respondents were assured of anonymity and informed that the intention of the research study was meant for academic purposes. The respondents were also assured that any information they provided, either in written or spoken would be accorded with

total confidentiality and anonymity. Informed consent was obtained from each participant before they started to respond to the questionnaires. The final research report is available to Gatundu, Kiambu and Thika, past or current staff member who expresses an interest in reading it, and is also be available from the KeMU library.

CHAPTER FOUR

4.1 Introduction

This chapter covers presentation and interpretation of findings based on the data collected and analyzed. The study describes actual findings derived from questionnaires which are linked to the specific objectives of the study. The section, therefore, covers the demographic characteristics of the respondents; the descriptive statistics of both the dependent variable and independent variables, correlation and regression analysis of all the four variables

4.2 Response Rate

The study targeted those who were employed by the Public Service Commission of Kenya or County Public Service Board of Kiambu and had signed the performance contract in the financial year 2016/2017 from the three county referral facilities namely Gatundu, Kiambu and Thika. Various respondents were requested to fill the questionnaires for purposes of collecting data. Out of 310 targeted questionnaires, 224 were returned but only 222 were good for analysis because the researcher experienced challenges in accessing respondents due to high volume of patients being attended to by few staffs on a daily basis. The response rate was then $(224/310) * 100 = 72\%$. According to Mugenda and Mugenda (2003), if there is a 50% response rate then it's adequate, but anything above 70% very good.

4.3 Demographic Characteristics of the Respondents

Descriptive statistics are able to provide basic summaries concerning the study sample by describing quantitatively the main features. For this study the researcher used measures of central tendency which included the mean, mode, median and standard deviations. These were useful as they defined the location of the distributions center.

The investigated the demographic features of the respondents in terms of their gender, age, job cadre, education level and years of service. The demographic results of this study are discussed in below. Percentages and frequencies were used; this was useful in determining the magnitude of a phenomenon.

4.3.1 Gender of the Respondents

The demographic characteristics of the respondents as shown in Figure 4.1 reveal that there were more male respondents than their female counterparts. Female respondents accounted for 59.5% of the sample while male respondents accounted for 40.5%. This implies that the county referral facilities of Kiambu are largely dominated by females in terms of gender. According to WHO (2006) there are more female employees in health facilities compared to male employees.

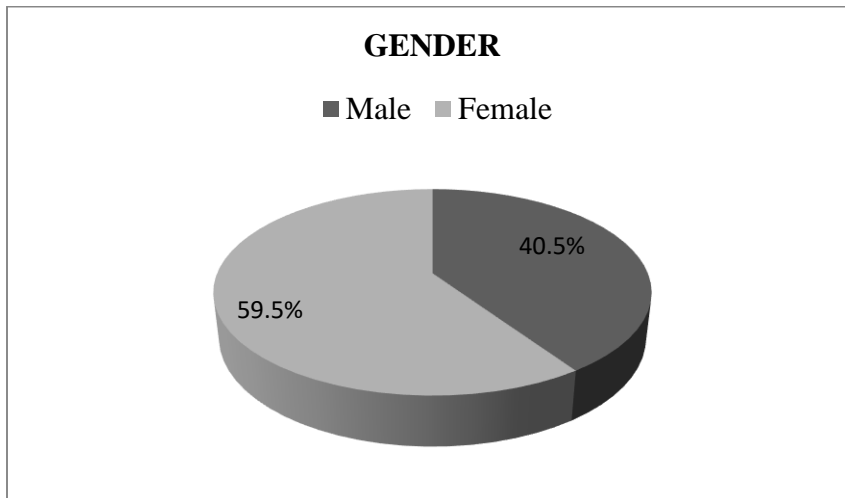


Figure 4.3: Gender of the respondents

4.3.2 Age Category of Respondents in Years

This research study also intended to find out the age of the respondents and the findings are presented in Figure 4.2. The respondents were aged between 31-40years at 41%, followed by those aged between 21-30 years at 28%, then at 22% were the respondents aged 41-50 years. Only 9% of the respondents

were aged above 50 %. The study findings indicate that majority of the employees in the country referral facilities are in their middle ages and there is a low proportion of staffs below the age of 30 years. This could be due to the employment freeze by the public service commission to curb the wage bill in 2016.

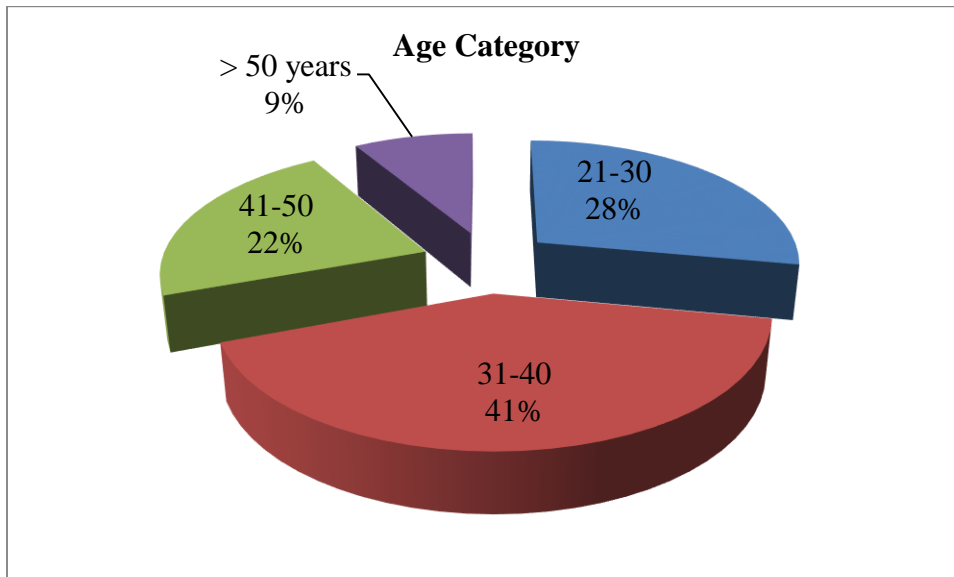


Figure 4.4: Age Category of Respondents in Years

4.3.3 Education Levels of the Respondents

The study sought the highest level of education attained by the respondents and the findings are presented in Figure 4.3. The respondents who were diploma holders were 110 (49.5%), followed by degree holders at 65 (29.3%). 26 (11.7%) were holders of higher national diploma, 3 (1.4%) were master's holders and only 1 (0.5%) were PhD. Holders. This suggests that the facilities have a heterogeneous work force with various expertise and skills. This agrees with a study done by Kamau (2016) where majority of the respondents 68% of the respondents in health facilities of Kiambu County were diploma holders. Feldman et al (2009) in their research concluded that there

was a positive relationship between higher levels of education and increased employee productivity.

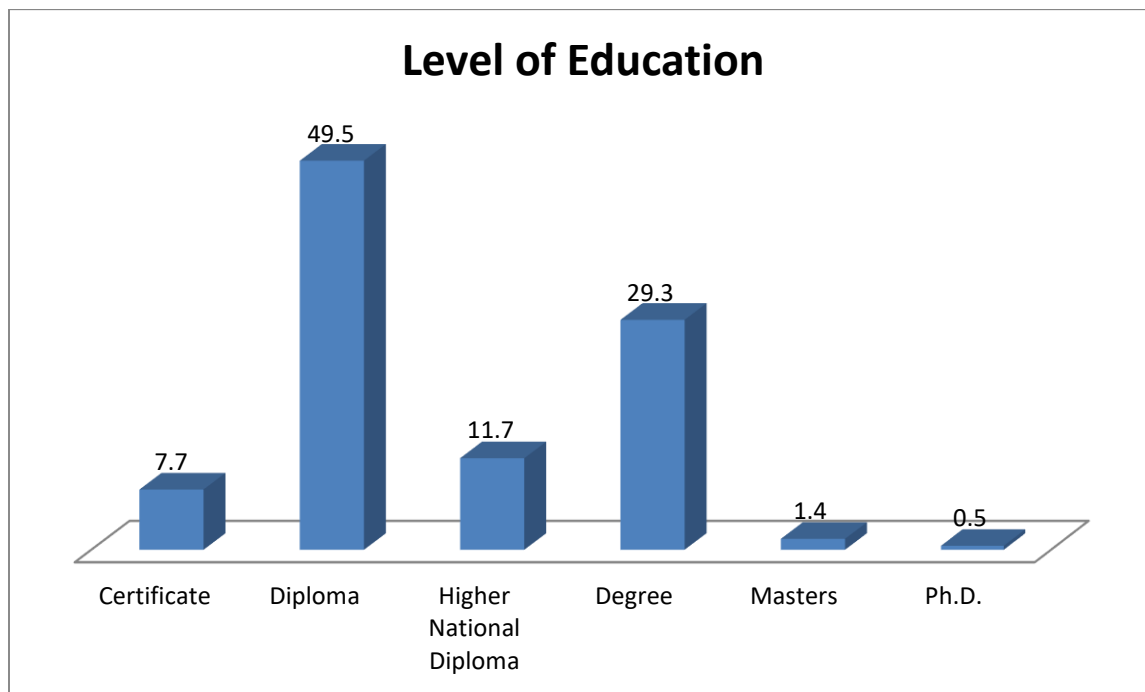


Figure 4.4: Highest level of education

4.3.4 Cadre of the Respondents

The cadres of the respondents are shown in Table 4.1. The respondents who were nurses were (106) 47.4 %, followed by doctors (23) 10.4%, clinical officers at (21) 9.5%, laboratory technologists/ technicians (13) 5.9%, and imaging technologists (10) 4.5%. Physiotherapists and supply chain officers and drivers, cooks, tailors and telephone operators were (3) 4.1% each. Pharmacists represented 3.6% administrative officers 2.3% Followed by nutritionists at 1.8 % and the least were counselors and social workers at 1.4. This agrees with WHO (2006) that nurses make the majority of the workers in the hospital in African countries. These cadres indicate critical shortages of staffs in county referral facilities of Kiambu. In making a comparison to the recommended

staffing guidelines by MOH (2014), the numbers of staffs in each cadre is less than fifty percent of these facilities. This is a clear indication of work overload for the staffs.

Table 4.1

Cadre of the Respondents

<u>Cadre</u>	<u>Frequency</u>	<u>Percent (%)</u>
Administration officer/office assistant	5	2.3
Clinical Officers	21	9.5
Counselors/Social Workers	3	1.4
Doctors	23	10.4
Drivers/Cooks/tailors/telephone operators	9	4.1
Health records information officers.	8	3.6
Imaging technologists/technicians	10	4.5
Laboratory technologists/technicians	13	5.9
Nurses	106	47.4
Nutritionists	4	1.8
Pharmacists	8	3.6
Physiotherapists	9	4.1
Procurement/Supply chain officer	3	4.1
Total	222	100.0

4.3.5 Duration Worked in the Hospital

The study also sought to seek the years the respondents had worked in that facility and the findings were presented in Figure 4.4. The table shows that slightly more than half, that is, (112) 50.4% had been there for less than five years. Those who had worked for 5-10 years were (59) 26.6%, 11-15 years represented (26) 11.7% while 16-20 years were at (11) 5.0% and over 20 years were (14) 6.3%. At the time of data collection there had been a major reshuffle of all staffs within Kiambu County in a bid to increase efficiency. This could explain why about half of the staffs had worked in the particular facility for less than five years. From this analysis it can also be concluded that the respondents were able to clearly understand the reason of the study and respond to the study questionnaire as expected based on the duration worked in hospital.

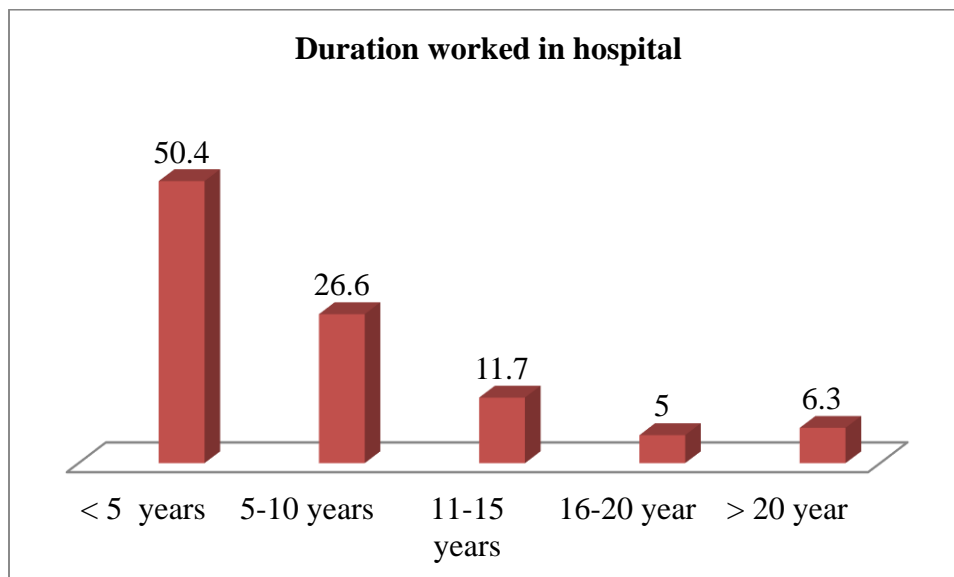


Figure 4.5: Duration worked in the Hospital

4.4 Descriptive Findings: Variables

The study sought to determine the levels of agreement by employees' on components of Performance Management Systems in county referral facilities of Kiambu County. A five point Likert scale was used where 1= strongly disagree, 2= disagree, 3= neutral, 4= agree and 5= strongly agree. Averages of the components of performance management systems were established in order to provide generalized perceptions of the respondents. In this study means values less than 3.3 implied that respondents disagreed that the component of performance management systems influenced employee productivity. Means greater than 3.4 implied that respondents agreed that the component of performance management systems influenced employee productivity. The purpose of standard deviation was to describe the distribution of the responses in relation to the mean, that is, how far the individual responses to each factor vary from the mean. The results of this analysis are presented in tables and subsequently discussed.

4.4.1 Performance planning

One of the specific objectives of this study was to establish the influence of performance planning on employee productivity in county referral facilities of Kiambu County. There were seven statements under the independent variable of planning in a five point Likert scale. The descriptive statistics on performance planning are shown below in Table 4.2.

Table 4.2: Descriptive Statistics: Performance Planning variable

	<u>N</u>	<u>Mean</u>	<u>Std. Deviation</u>
I'm familiar with the mission and vision of this facility.	222	3.8063	1.18624
I have a clear job description.	222	4.3059	0.79121
Clear and realistic targets and goals are set as a team.	222	3.6991	1.24534
I understand the purpose of setting targets in performance management system.	222	4.0225	0.98754
I'm empowered with adequate resources to implement the set plans.	222	2.9455	1.39691
Performance reviews are scheduled at the beginning of the financial year.	222	3.4194	1.33132
I have a clear work plan that specifies success criteria.	222	3.5727	1.23835
Valid N (listwise)	222		

According to the study findings in Table 4.2, the respondents agreed with the statements that they were familiar with the mission and vision of their facility (mean score 3.80), they had a clear job description with a mean score of 4.31, clear and realistic targets and goals were set as a team (mean score, 3.70), they understood the purpose of setting targets (mean score, 4.02), performance reviews were scheduled at the beginning of the financial year (mean score of 3.42) and they have a clear work plan that specifies success criteria with a mean score of 3.57.

These findings reveal that most of the staffs are familiar with the component of planning in terms of what they need to know or do to achieve their targets. It can be deduced that since targets must

be aligned with the overall goals of the country's vision 2030, the staffs are well supported by the management team and therefore the familiarity with this component.

These results are consistent with the findings of employees of Kenyan telecommunications centers by Rono (2015) where 68% of the respondents agreed that performance planning was undertaken in the organization, data gathering (54%) and annual reviews (72%). These findings are also consistent with the Locke (1968) in his goal setting theory that he described that when specific goals are set, it results in greater effort. Employers who set specific and challenging goals (when accepted) result in more effort from employees than do easier or low target goals. The goal setting theory also stated that participation enhances goal commitment by helping organization members to have a buy-in into the vision of the organization. The participation helps to ensure the goals are not unreasonable.

The respondents, however, disagreed that they were empowered with adequate resources to implement their set plans with a mean score of 2.95. Resources are defined as “anything perceived by the individual to help attain his or her goals” (Nielesen, 2017). From the descriptive statistics of cadre in comparison to the recommended staffing guidelines by MOH (2014), there is critical shortage of staffs in these county referral hospitals. One of the resources they could be limited with is human resource. This is also reflected in the statement below by one of the key informants from the county management team;

“One of the key challenges during the planning stage is lack of enough staffs. You find that there are a lot of patients to be attended let's say in outpatient but there's only one clinician”

The interpretation of these findings is that planning is critical component of performance management system. Part of the planning includes clear mission and vision which then employees are able to set goals as a team. Draft (1998) cited by Nassazi (2013) says that performance management process ensures all employees are involved in planning for the institution, and this goes a long way in motivating them as they feel motivated to improve productivity. It is easier to monitor work deficiencies during planning and more so when there is total employees involved and these are easily addressed.

4.4.2 Performance Appraisal

The researchers' second objective was to establish the influence of performance appraisal on employee productivity in county referral facilities of Kiambu County. There were seven statements under the independent variable of appraisal in a five point Likert scale. The descriptive statistics on performance appraisal are shown below in Table 4.3

Table 4.3: Descriptive Statistics: Performance Appraisal Variable

	<u>N</u>	<u>Mean</u>	<u>Std. Deviation</u>
I'm familiar with the performance appraisal guidelines	222	3.8198	1.19507
My performance is evaluated based on my job description	222	3.8100	1.19940
I'm satisfied with the performance appraisal process	222	3.4128	1.31430
There is regular performance review	222	3.2706	1.32511
My supervisor takes my performance appraisal discussion seriously	222	3.4661	1.38989

Performance appraisal process helps me to find out about my level of performance	222	3.6364	1.30840
I get a chance to discuss my aspirations and work challenges during the performance appraisal discussion	222	3.2890	1.36242
Valid N (listwise)	222		

According to the study findings in Table 4.3 concerning performance appraisal, the respondents agreed with the statements that they were familiar with the performance appraisal guidelines (mean score 3.82), their performance was evaluated based on their job description (mean score 3.81) and the process of performance appraisal helps them to find out about their level of performance (mean score 3.63). The respondents also agreed that their supervisors take the performance appraisal discussion seriously mean score (3.47) and they were satisfied with the performance appraisal process (mean score 3.41). All civil servants must fill the GP 247 PAS forms every financial year as a requirement by the Public Service Commission of Kenya. The mandatory discussions, as Mid-year performance review sessions are centered on achievements, constraints experienced and possibility of modifying the initial targets (GoK, 2008). This could explain why the respondents were familiar with the appraisal guidelines and that they were evaluated based on their job descriptions.

The respondents, however, disagreed on the statement that there were regular performance reviews (mean score 3.27). This is consistent with a study done by Farrel (2013) in Ireland in which performance review schedules were irregular. Mumbi (2013) in a study of a government telecommunications organization in Kenya found that there were no periodical reviews on performance. From the discussion with one of the key informants it emerged that the reviews are

done sometimes once or twice a year depending on availability of time and the situation at hand.

The key informant noted that;

“If there are cases of mishandling of patients then we make sure there’s a review of performance. Otherwise we know that staffs are doing their best to achieve their targets”

The respondents also disagreed with the statement that they got a chance to discuss their aspirations and work challenges during the appraisal discussion (mean score 3.29). These study findings are in line with a study done by Njeru (2013) in Kenya Kirinyaga County of civil servants where 75.7% of the respondents filled the appraisal forms without any discussion or deliberations with their supervisor taking place. These findings are also consistent with what was said by one of the key informants.

“These appraisals are done as a formality because we’re told we can miss our salaries if they are not documented in our files. Besides we have never seen their impact.”

A Key aspect of performance appraisal is to review how an employee has accomplished tasks in the past. Depending on the outcome of the review, the supervisor together with the employee, can assess if the employee needs further training in certain aspects of a job. Then they are able to set targets for future performance. Depending on the outcomes of the review the supervisor may also initiate disciplinary measures or make some other administrative decisions. According to the goal setting theory by Locke and Lotham (2002), organizational members should be able to measure their own progress. This leads to persistence in achievement of goals and hence improved performance.

4.4.3 Feedback on performance

The third intention of this research study was to establish the influence of feedback on employee productivity in county referral facilities of Kiambu County. There were seven statements under the independent variable of feedback in a five point Likert scale. The descriptive statistics on performance appraisal are shown below in Table 4.4

Table 4.4

Descriptive Statistics: Feedback on Productivity Variable

	<u>N</u>	<u>Mean</u>	<u>Std. Deviation</u>
I receive regular feedback from my supervisor concerning my performance	222	3.1570	1.34148
Improvement plans are integrated during the feedback	222	3.2342	1.37169
The performance feedback data is used to set priorities in the next working phase	222	3.2818	1.35237
The feedback I receive helps me to understand my strengths and weaknesses	222	3.4866	1.36576
My feedback is based on actual results or observed behavior	222	3.3982	1.29853
I perceive my career growing in this institution	222	3.5207	1.28408
There is a policy on training that is followed	222	3.1005	1.38105
Valid N (listwise)	222		

According to the study findings in Table 4.4 concerning performance feedback, the respondents concurred with the statement that feedback assisted them to understand their strengths and

weakness (mean score 3.49). The respondents also perceived career growth in their respective institution (mean score 3.52).

The respondents, however, failed to agree on the statement that they receive regular feedback from their supervisors (mean score 3.16). These findings were congruent with a study done by Njeru (2013) in Kenya Kirinyaga County of civil servants where 83.2% of the respondents were never supplied with any feedback on their performance. According to a Gallup study (2015) study in America 37% of managers stated that they felt uncomfortable to give feedback to their employees, and 69% of the managers stated they were generally uncomfortable in communicating with their employees. A statement from one of the key informants confirms that staffs are not given feedback regularly.

“We don’t have any formal ways of giving feedback. Although we want to create a system so that we can give feedback regularly. We also know most supervisors are not trained to give feedback and sometimes this has worked to demotivate staffs. So sometimes some supervisors avoid it (giving feedback) all together.”

The respondents also disagreed on the statement that performance feedback data is used to set priorities in the next working phase (mean score 3.28) and they also disagreed that improvement plans are integrated during the feedback (mean score 3.23). This is consistent with Obwaya (2010) who says feedback corrects repetition of mistakes and keeps staff focused on what is required of them. In Locke’s (1968) theory of goal setting, it says that giving feedback results in higher effort than does the lack of feedback.

The respondents also disagreed on the statement that the feedback is based on actual results or observed behavior (mean score 3.39). This is consistent with Rono (2015) who found in her study that 68% of the respondents felt that performance appraisals had a low accuracy in representing employee performance. It is also consistent with Kibe, Abel and Kilika (2013), in his study of performance appraisal of public schools in Nakuru County, in which he found that 49 % disagreed that the feedback they received was not in relation to their performance appraisal.

The respondents also disagreed on the statement that there is a policy on training that is followed (mean score 3.10). This agreed with the findings of Barmao and Nzuve (2009), where 46% of the respondents were not aware of a training policy in a research to study the impact of training on employee performance. Meenakshi (2012) describes how organizations carry out performance appraisal as a support system to anchors certain administrative decisions. These may include a decision to promotion an individual, reward an employee in monetary terms, fund an employees' work development needs and or train an employee. A statement from one of the key informants stated that they provide trainings for staffs.

“We usually conduct a training needs assessment at the beginning of every financial year and we try to follow it depending on the availability of finances. We also try to identify staffs that will transfer the knowledge they have learnt to enhance performance.”

Lotham and Locke (2002) stated that adequate and constructive feedback must be given if challenging goals are to improve employee productivity. They also observed that employees who were given specific feedback concerning their performance improved only on the specific areas that were mentioned but not on other aspects.

4.4.4 Reward of Productivity

The fourth intention of this research study was to establish the influence of reward on employee productivity in county referral facilities of Kiambu County. There were seven statements under the independent variable of reward in a five point Likert scale. The descriptive statistics on performance reward are shown below in Table 4.5.

Table 4.5

Descriptive Statistics: Reward of Productivity Variable

	<u>N</u>	<u>Mean</u>	<u>Std. Deviation</u>
There is a formal reward system in line with the performance appraisal policy in our hospital	222	2.5747	1.36851
I have been rewarded for surpassing my targets	222	2.0829	1.21050
Promotions and salary increments are based on performance appraisal	222	2.3543	1.41900
The process of rewarding performance in our hospital is fair and objective	222	2.4227	1.39419
My job group is fair based on the performance appraisal	222	2.5318	1.44421
The reward system in our hospital is linked to the results of performance appraisal	222	2.4685	1.38394
Employees who work hard are recognized and rewarded in our hospital	222	2.5225	1.44802
Valid N (listwise)	222		

According to the study findings in Table 4.5 concerning reward of productivity, the respondents disagreed with the statement that there is a formal reward system in line with the appraisal (mean score 2.57) . In a study of public school teachers in Ghana by Yamoah (2014), the majority of the respondents (70%) agreed that study leave with pay and pension benefit were an acceptable reward system for them but housing, transportation, free lunch and sick pay were not a reward program but an entitlement to them as employees. In the case of Kiambu County referral facilities, benefits like housing and transportation allowance are available to workers but in the opinion of the researcher, the respondents could have felt that this was available to them as workers. Therefore, they felt it is not part of a formal reward system.

This is congruent with a study by Moriones, Jose and Maia (2004) that established that organizations that use seniority based pay rarely offer explicit incentives to their employees as compared to those with no wage scheme. He also states that they are usually state owned, older or larger. As earlier stated in the above literature the County Referral facilities of Kiambu County are public hospitals owned by the government and they have a wage scheme in place.

The respondents also disagreed concerning being rewarded for surpassing their target (mean score 2.08). Seniority Based Pay in public sector in African countries is deeply rooted because of the perception of assured job security (Freibert, 1997 as quoted by Oluwabusola (2015). Seniority based pay is therefore viewed as an entitlement where employees are paid based on age regardless of performance (Armstrong & Baron 2004).

The respondents also disagreed that promotions and salary increments are based on performance appraisal (mean score 2.35). The respondents also disagreed that the process of rewarding performance was fair and objective (mean score 2.42). This agrees with a study by Abedi (2004) which showed that 95% of the respondents felt that appraisal had very minimal impact on their perks and promotion. In another study by Najafi, Yadollah, Sudabeh and Abdolhosein (2010), the researcher indicates that performance appraisal methods in health care system are not effective and have little influence on job improvement. The respondents, however, said that when justice and fairness are observed in appraisal then it would work to improve employee productivity.

It is imperative that employees are not just recognized or paid simply because they have been in an institution longer, but they must to perform and show a willingness to innovate and improve processes of products, for growth of the institution.

The respondents disagreed that their job groups was fair based on the performance appraisal (mean score 2.53). In another study consisting of nursing employees in the public sector in Macao Chinese society showed that salary did not reflect educational qualifications (Leong, 2014). When a policy was modified, where the basic salary excluded employee benefits such as on shift allowance, there was an increase in salary as compared to the previous wage scheme. This increased employee productivity since most of the nurses felt their workload was commensurate with the pay. Ismail, Hasan and Norashikin (2011) in a study in Malaysia found that pay for performance and adequacy of pay was positively and statistically significant to job performance.

The respondents in this study disagreed that the reward system is linked to the results of the appraisal (mean score 2.47). They disagreed that employees who work hard are rewarded (mean score 2.52). This agrees with a study done by Oluwabusola (2015), performance management is not used as a basis for promotional schemes rather, length of service in many public sectors. Seniority based pay fails to recognize employees who contribute more than others and this has led to unequal remuneration based on performance especially in the public sector.

4.4.5 Employee productivity

The dependent variable of this study was employee productivity. There were seven statements under the dependent variable in a five point Likert scale. The descriptive statistics on employee productivity are shown below in Table 4.6.

Table 4.6

Descriptive Statistics: Employee Productivity Variable

	<u>N</u>	<u>Mean</u>	<u>Std. Deviation</u>
I have presented a "new" idea to improve patient outcomes, work processes, etc.	222	3.3408	1.38541
My supervisor recognizes staffs who take on challenging tasks	222	3.0807	1.47127
I'm able to achieve the targets that we set	222	3.9324	3.65106
There is formal process for submitting new ideas in this institution	222	2.9954	1.40607
There is room for being creative in this institution	222	3.2785	1.30632

I have been rewarded/recognized for being presenting a new idea	222	2.4036	1.40411
My suggestion to resolve problems or issues concerning work processes or patient related issues et cetera are taken into consideration	222	3.0955	1.42546
Valid N (listwise)	222		

On employee productivity the respondents agreed that they are able to achieve set goals (mean score 3.93).

The respondents disagreed on the statement that they had presented a “new” idea to improve patient outcomes, or work processes (mean score 3.34). This is consistent with the findings of Shikanda and Bichanga (2011) where 74 % of the respondents disagreed on being involved in creating new ideas and procedures at work. Kim, Tae-Yeol, Alice and Michael (2009), noted that with employee creativity, novel ideas greatly contribute to the achievement the set goals. This gives an organization competitive advantage leading to increased productivity.

Respondents also disagreed on the statement that their supervisors recognize staffs who take on challenging tasks (mean score 3.08). This is inconsistent with the findings of Gichohi (2014) in his study where the respondents said they were recognized when given challenging tasks (mean score 4.26). In the goal setting theory, employees who are given specific and challenging tasks enhance their job performance when they are recognized.

Concerning the statement that there’s a formal process for submitting new ideas in their institution, the respondents disagreed (mean score 2.99). They also disagreed on the statement that there was room for being creative in their institution (mean score 3.28). This is contrary to the findings of

Gichohi (2014) where the respondents in his study said they had an opportunity to showcase their creativity and innovation. In addition, their ideas were considered and an enabling environment was provided for implementation of new ideas (means score of 4.39).

The respondents also disagreed that they have been rewarded or recognized for being presenting a new idea (mean score 2.40). This is contrary to a study done by Gichohi (2014) where the respondents stated that employees who exhibited creativity and innovation were duly recognized and rewarded for their effort (mean score 3.42). The recognition of managers for the creative ideas without the use of scores or awards demonstrates the appreciation of the contributions of employees, by enhancing their intrinsic motivation, according to the studies of Anitha (2014), as cited by Pereira (2016).

A statement from the key informant contradicts. It states;

“Innovations and “new” ideas to improve processes are encouraged. These staffs are rewarded by being added responsibilities like being made in charges of units or departments. They are also sponsored for further trainings and conferences to improve their skills.”

They disagreed on the statement that their suggestion to resolve problems or issues concerning work processes or patient related issues are taken into consideration (mean score 3.10). This is contrary to Gichohi (2014) where the respondents stated that staffs were viewed as an excellent source of creativity and innovation (mean score 4.52). A statement from a key informant also contradicts this.

“We introduced a “gift mother-baby pack” to increase the number of hospital deliveries. This was after it was suggested by staffs working with expectant mothers suggested it. The number of women delivering in the hospital has since increased thanks to that suggestion”

The goal setting theory by Lock and Latham (2002) explains that innovative ideas may be changing or modifying certain processes and procedures improve institutions' efficiency and as a consequence, the organizations entire performance improves.

4.5 Tests for Normality: All Variables

Parametric tests are more accurate in detecting real differences or variability in data and this increases chances of finding significant data. In the world of statistics, there are two familiar tests of normality, namely the Kolmogorov-Smirnov Test and the Shapiro-Wilk Test. Shapiro-Wilk's normality testing was used for all variables in this study since it is more reliable than Kolmogorov-Smirnov test. This test for normality, developed by Shapiro and Wilk (1965), rejects the hypothesis of normality when the p-value is less than or equal to 0.05. If the significant value of the Shapiro-Wilk test is greater than 0.05, the data is normal. If it is below 0.05, the data significantly deviate from a normal distribution.

Table 4.7: Test for Normality: All Variables

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Performance	.063	222	.032	.901	222	.089
Planning	.060	222	.027	.924	222	.212
Appraisal	.056	222	.114	.939	222	.376
Feedback	.188	222	.033	.899	222	.382
Reward	.087	222	.022	.946	222	.305

a. Lilliefors Significance Correction

Table 4.7 displays the tests results for all variables using Shapiro-Wilk tests of normality. In these results, the null hypothesis states that the data follow a normal distribution. Therefore the researcher will use Pearson's correlation coefficient and analysis of variance for further analysis.

4.6 Bivariate Analysis:

4.6.1: Linear Correlation: All Variables

This analysis aimed at determining whether each of the predictor variables in this study, that is, performance planning, performance appraisal, feedback and reward influence employee productivity.

The findings for each variable in this study are given by the Pearson's Rho (r) and its corresponding p-value. If the p-value corresponding to a given Rho is less than 0.05, then the relationship or influence of the independent variable on the dependent variable is statistically significant and vice versa is also true for p-values greater than 0.05.

Table 4.8
Bivariate Linear Correlation Analysis: All Variables

		Productivity	Planning	Appraisal	Feedback	Reward				
Productivity	Pearson	1								
	Correlation									
	Sig. (2-tailed)									
	N		222							
Planning	Pearson	.544**	1							
	Correlation									
	Sig. (2-tailed)			0.000						
	N			222	222					
Appraisal	Pearson	.641**	.773**	1						
	Correlation									
	Sig. (2-tailed)				0.000	0.000				
	N				222	222	222			
Feedback	Pearson	.700**	.699**	.838**	1					
	Correlation									
	Sig. (2-tailed)					0.000	0.000	0.000		
	N					222	222	222	222	
Reward	Pearson	.673**	.416**	.547**	.658**	1				
	Correlation									
	Sig. (2-tailed)						0.000	0.000	0.000	0.000
	N						222	222	222	222

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

The study findings in Table 4.8 show the correlation analysis among the key variables that influence employee productivity in Referral Hospitals of Kiambu County. As seen in Table 4.8, all the four performance management systems components had significant and positive relationship with employee productivity. Pearson correlation tests were used to determine the extent to which performance management components within each category were related to employee productivity.

The study revealed that performance planning influences employee productivity positively and significantly ($r = .544^{**}$, $P = .000$). This leads to the rejection of the null hypothesis (H_{01}) and the acceptance of the alternative hypothesis (H_1). The study, therefore, concludes that performance planning has a significant positive influence on employee productivity in referral hospitals of Kiambu County. Performance planning has been identified by the literature as one of the key variables influencing employee productivity positively. A study by Poku (2013) in Ghana indicated that inclusion of all employees in planning influences employee productivity positively.

The results from this study also indicated that performance appraisal influences employee productivity and this influence is statistically significant ($r = .641^{**}$, $P = .000$). This leads to the rejection of the null hypothesis (H_{02}) and the acceptance of the alternative hypothesis (H_2). This is interpreted as that performance appraisal influences employee productivity positively in county referral facilities of Kiambu County. The findings in this study compare to another study done by Chaponda (2014) on survey of slum based non-governmental organizations in Nairobi that performance appraisal had helped to improve job performance.

The correlations analysis results of this study revealed that there is a positive and significant influence of giving feedback to employee productivity in County Referral Hospitals of Kiambu

County ($r = .700^{**}$, $P=0.000$). This leads to the rejection of the null hypothesis (H_{03}) and the acceptance of the alternative hypothesis (H_3). The study then concludes that giving feedback influences employee productivity significantly. The findings in this study are similar in a study done by Kaymaz (2011) where it supported that individual constructive feedback is important in influencing employee productivity.

Finally the study also revealed that rewarding performance influences employee productivity positively and significantly ($r = .673^{**}$, $P = .000$). This leads to the rejection of the null hypothesis (H_{04}) and the acceptance of the alternative hypothesis (H_4). The implication here is that rewarding performance enhances employee productivity. The findings of this study are similar to the one done by Ibrar (2015) where they concluded that there was a positive relationship between reward (extrinsic and intrinsic) and employees' job performance. In a study by Ricci (2016), she found a strong correlation between rewards and employee productivity ($r = .64$, $p < .001$), such that the more aligned the rewards system were, the more likely the employees productivity increased.

In conclusion, the bivariate linear correlation analysis found out that giving feedback ($r = .700^{**}$, $P=0.000$) has the strongest correlation with employee productivity compared to the other three variables rewarding performance ($r = .673^{**}$, $P = .000$) appraisal ($r = .641^{**}$, $P = .000$) and finally planning ($r = .544^{**}$, $P = .000$).

4.6.2: Analysis of Variance

The Analysis of Variance table is also known as the ANOVA table (for ANalysis Of VAriance) tells us how the regression equation accounts for variability in the response variable.

A standard multiple regression analysis was conducted with all the four components (Planning, Appraisal, Feedback and Reward) entered into the analysis simultaneously. As seen in Table 4.9, the set of four components had a significant relationship with employee productivity ($F(4, 222) = 74.140, P = .000$). The study further revealed that the four components explained 57.7% of the total variations in employees' performance ($R^2 = .577, R^2 \text{ adjusted} = .570$). The R^2 reveals the proportion to which the dependent variable varies that is explained by the independent variables in the model. The coefficients in the regression model as shown in Table 4.10

Table 4.9 ANOVA^a

Multiple Regression: Model Validity

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	176.526	4	44.132	74.140	.000 ^b
Residual	129.168	218	.595		
Total	305.694	222			

a. Dependent Variable: Y(Productivity)

b. Predictors: (Constant), X₄(Reward), X₁(Planning), X₃(Feedback), X₂(Appraisal)

Table 4.10: The Multiple Regression: Model Summary^b

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.760 ^a	.577	.570	.77152

a. Predictors: (Constant), Reward, Planning, Feedback, Appraisal

b. Dependent Variable: Productivity

The results of regression analysis in Table 4.10, indicates that 76.0% of the total variations in influence of performance management systems on employee productivity can be explained by the four factors under investigation in this study as represented by R-squared (.577). The remaining 24.0% of the variations can be explained by factors not included in this study. This means, therefore, other academicians and researchers can explore the other factors that contribute to employee productivity in county referral facilities of Kiambu County. The standard error of estimate .77152 shows the average deviation of the independent variables from the line of best fit.

The value of significance is .000 which is way less than .05 and thus we can confidently state that the model is statistically significant in predicting how performance planning, performance appraisal, feedback on performance and reward are contributing to employee productivity. The regression output in Table 4.9, containing all the four variables in this study was found to be valid ($F_{(4,221)} = 74.140, P < .001$). This means that the four predictor variables in this study are strong in explaining influence of performance management systems on employee productivity in referral hospitals of Kiambu County.

4.6.3: Multiple Regression Analysis:

The researcher also examined the strength of the linear relationship between the four predictors and the dependent variable using the multiple regression analysis. The researcher used SPSS version 22 to assign codes to the responses, enter them on soft copy and finally statistically compute the measurements of the multiple regression for study. The main model under investigation in this study intended to establish the combined influences of the four key variables (performance planning, performance appraisal, performance feedback, and reward) on employee productivity.

The purpose of the multiple regression analysis was to determine whether the performance management components (planning, appraisal, feedback and reward) were predictive of employee productivity. First, this analysis aimed to determine which of the four performance management system components was most predictive of employee productivity. Second, this analysis aimed to uncover which component most uniquely related to employee productivity.

This model is expressed as:

$$Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \varepsilon$$

Where: Y = Employee productivity, β_0 = Intercept (constant), $\beta_1, \beta_2, \beta_3, \beta_4$ = slope coefficients representing the influence of the associated independent variables with the dependent variable, X_1 = performance planning, X_2 = performance appraisal, X_3 = feedback, X_4 = reward, ε = Stochastic error term (extraneous), was the basis under which the four specific objectives outlined in Chapter One were set. Each of these objectives and the hypotheses were tested and analyzed to find out whether they conformed to what the study had proposed to achieve.

Table 4.11: Multiple Regression: Weights of variables

Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	.282	.218		1.294	.197
	Planning	.130	.092	.100	1.415	.159
	Appraisal	.129	.101	.117	1.277	.203
	Feedback	.302	.099	.278	3.060	.002
	Reward	.387	.059	.382	6.529	.000

a. Dependent Variable: Employee productivity

Simultaneous multiple regression was conducted to investigate the best predictors of employee productivity. The study results of the multiple regressions in Table 4.11 indicate that all four components of performance management systems i.e. planning, appraisal, feedback on performance and reward of performance were good in predicting employee productivity.

As per the SPSS version 22 generated table 4.11 the equation $Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \varepsilon$ becomes

$$Y = 0.282 + 0.130X_1 + 0.129X_2 + 0.302X_3 + 0.387X_4.$$

This means that taking all the other independent variables at zero, a unit increase in performance planning variable will lead to a 0.130 increase in employee productivity in county referral hospitals in Kiambu County. Planning was associated with increased productivity in companies according to a study by Gibson and Cassar (2005). This also agrees with Olusanya et. al. (2012) in their research studies that effective planning led to improved employee productivity.

Moreover, when all the other independent variables at zero, a unit increase in performance appraisal variable will lead to a 0.129 increase in employee productivity in county referral hospitals in Kiambu County. A well thought out performance appraisal process can act as great motivation for an employee to improve his productivity. When an employee's goals are clearly defined, his performance challenges well-articulated and career development plans are part of the plans, the employee is usually motivated to improve his productivity. Uzodike & Chitakunye (2014).

According to Chaponda (2014) performance appraisal system improves job performance at work by identifying bottlenecks in performance to enhance employee performance and productivity. Table 4.11 further reveals that, when all the other independent variables are at zero, a unit increase

in feedback variable will lead to 0.302 increase in employee productivity in county referral hospitals in Kiambu County. Effective feedback causes employees to improve their job productivity by acknowledging results and enhancing abilities. In strategic management effective feedback reduces reworks, corrects mistakes, and enhances productivity within the workplace. Obwaya (2010) states “feedback corrects repetition of mistakes and keeps staff focused on what is required of them.” In Locke’s (1968) theory of goal setting, it says that giving constructive immediate feedback results in higher effort from employees than when feedback is given.

Finally a unit increase in reward of performance will lead to 0.387 increase in employee productivity in county referral hospitals in Kiambu County. According to Armstrong (2007), when an organization develops a reward systems and promptly recognizes employees who are exceptional, then they have developed a powerful motivation tool to their employees.

Stochastic error term (ϵ) (extraneous) is a random variable that picks up all the variations in the independent variable (X) that is not explained by dependent variable (Y). The standardized coefficients (Beta) are used to compare the strength of the effect of each independent variable on the dependent variable. The independent variable with the largest standard Beta has the strongest effect. In the Table 4.11 reward of productivity ($\beta_4 = .387, P = .000$) had the largest beta and the therefore had the strongest influence on employee productivity. This infers that reward of performance variable has more influence on employee productivity followed by feedback on performance.

In this simultaneous regression, the researcher wanted to test the combined effect of the four variables (planning, appraisal, feedback and reward) on employee productivity. This study revealed that as shown in the Table 4.11; performance planning ($\beta_1 = .130, P = .159$) and performance appraisal ($\beta_2 = .129, P = .203$), was found to be statistically insignificant in predicting employee productivity in county referral facilities of Kiambu County. The constant (β_0) is statistically insignificant ($\beta_0 = .282, P = .197$). However, feedback on performance ($\beta_3 = .302, P = .002$), and reward of performance ($\beta_4 = .387, P = .000$) were the strongest predictors of employee productivity in county referral facilities of Kiambu County when all the four variables are combined. Therefore, the more feedback and rewards the employees are given, the more the employees increased their productivity. The research suggests that it's imperative that any organizations should integrate these components into their performance management systems to enhance employee productivity.

CHAPTER FIVE: SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

The chapter provides a highlight of summary of the study findings, conclusion and the recommendations based on the research objectives.

5.2 Summary of main findings

The purpose of the study was to determine the influence of performance management systems on employee productivity in county referral hospitals in Kiambu County.

The specific objectives included, to establish how performance planning, performance appraisal, feedback on performance and reward of performance influenced employee productivity. Based on the four objectives of the study, the summary of the findings is as discussed below.

5.2.1 Influence of performance planning on employee productivity

The first specific intention of this study was to determine the influence of performance planning on employee productivity in county referral facilities of Kiambu County. To analyze this objective respondents were asked about their level of agreement with the statements that they were familiar with the mission and vision of their facility and it was revealed that 76% agreed with the statement. In addition, 76 % of the respondents also agreed that they had a clear job description with 74% agreeing that clear and realistic targets and goals were set as a team. The majority of the respondents (80%) also agreed that they had clarity on why they were setting targets. Furthermore, 68% of the respondents agreed that performance reviews were scheduled at the beginning of the financial year and 71% agreed that they have a clear work plan that specifies success criteria. On correlation analysis, the study also revealed that performance planning influences employee productivity positively by 54.4% and significantly. The researcher also examined the strength of

the linear relationship using regression analysis when all the variables are combined and found that planning was statistically insignificant ($\beta_1 = .130$, $P = .159$) in predicting employee productivity in county referral facilities of Kiambu County.

5.2.2 Influence of performance appraisal on employee productivity

The second objective was to determine the influence of performance appraisal reports given to an employee on his or her overall productivity in county referral facilities of Kiambu County. The respondents were asked if they were familiar with the performance appraisal guidelines and 76% agreed. In addition, 76% agreed that their performance was evaluated based on their job description. 68% agreed that the process of performance appraisal guides them to find out about their level of performance. Furthermore, 69% the respondents also agreed that their supervisors take the performance appraisal discussion seriously and 68% also agreed that they were satisfied with the performance appraisal process. However, 65% of the respondents disagreed that there were regular performance reviews. In addition, 66% also disagreed that they got a chance to discuss their aspirations and work challenges during the appraisal discussion. The results from this study also indicated that performance appraisal influences employee productivity by 64.1% and this influence is statistically significant. On regression analysis, performance appraisal was found to be statistically insignificant ($\beta_2 = .129$, $P = .203$), in predicting employee productivity when all the variables were combined.

5.2.3 Influence of feedback on employee productivity

The third intention of this study was to determine the influence of feedback on employee productivity in county referral facilities of Kiambu County. The researcher asked the respondents if they agreed with the statement that feedback assisted them to understand their strengths and

weakness and 68 % agreed. 71% of the respondents also agreed that they perceived career growth in their respective institution.

The respondents, 67% disagreed on the statement that they receive regular feedback from their supervisors. 65% respondents also disagreed on the statement that performance feedback data is used to put in place future priorities in the next working phase and 64% also disagreed that improvement plans are integrated during the feedback. When asked whether feedback is based on actual results or observed behavior the 66% of respondents disagreed. 60% of the respondents also disagreed on the statement that there is a policy on training that is followed. The results from this study also indicated that feedback on performance influences employee productivity by 70% and this influence is statistically significant. On regression analysis, when all the variables were combined, feedback on performance was found to be positively and statistically significant ($\beta_3 = .302, P = .002$), in predicting employee productivity in county referral facilities of Kiambu County.

5.2.4 Influence of reward on employee productivity

The fourth objective of this study was to establish the influence of reward on employee productivity in county referral facilities of Kiambu County. The analysis of this objective indicates that 51% of the respondents disagreed with the statement that there is a formal reward system in line with the appraisal. 60% of the respondents also disagreed concerning being rewarded for surpassing their target while 66% of the respondents disagreed that promotions and salary increments are based on performance appraisal. Furthermore, 52% of the respondents disagreed that the process of rewarding performance was fair and objective and another 53% of the respondents disagreed that their job groups was fair based on the performance appraisal. Moreover, 52% of the respondents in this study disagreed that the reward system is linked to the results of the appraisal and another 52% disagreed that employees who work hard are rewarded. Correlation

analysis revealed that rewarding performance influences employee productivity positively and significantly ($r = .673^{**}$, $P = .000$). The regression analysis of all the variables combined revealed that reward of performance ($\beta_4 = .387$, $P = .000$) positively and significantly predicts employee productivity in county referral facilities of Kiambu County.

5.3 Conclusion

Based on the four objectives of the study, the researcher concludes as discussed below.

5.3.1 Influence of performance planning on employee productivity

The study concludes that the employees of county referral facilities of Kiambu were involved in planning since as they participate in the process and this motivated to improve their performance.

The study concludes that planning enhances employee productivity.

5.3.2 Influence of performance appraisal on employee productivity

In relation to this objective, the study concluded that employees of county referral facilities of Kiambu are appraised on their performance based on their job description. Appraisal discussions are not taken seriously.

5.3.3 Influence of feedback on employee productivity

This study also concludes that between managers and employees, there is minimal communication on how employees perform. Feedback is not regular, constructive and objective.

5.3.4 Influence of reward on employee productivity

Finally the study concludes that rewards and recognition policy is not available to employees of county referral facilities of Kiambu.

5.4 Recommendations

This study recommends the following for each objective:

- a. Managers should try to supply employees with adequate resources if they have to meet their targets. Clear, realistic goals that are set as a team enhance employee productivity.
- b. Managers should have regular performance reviews with their employees with discussions so as to review past performance, and set targets for future performance.
- c. Managers should try to provide regular feedback as it is desired by employees. Regular feedback corrects repetition of mistakes and keeps staff focused on what is required of them.
- d. Reward system should be linked to the results of the appraisal which is just and fair. Therefore rewards should be an integral part of their system.

5.5 Suggestions for further research:

- i) This study was conducted in county referrals hospitals and may not be generalize to other tiers of the health facilities. Future studies may replicate this study to other lower tiers of health care system
- ii) The study also revealed that planning, appraisal, feedback and reward are not the only factors that contribute to employee productivity. Future studies can look at other factors.

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APPENDIX 1: Informed Consent

Kenya Methodist University

P. O Box 267-60200
MERU, Kenya.

SUBJECT: INFORMED CONSENT

Dear Respondent,

My name is Carolyn Owino. I am a MSc. HSM student from Kenya Methodist University. I am conducting a study titled: **Influence of performance management systems on employee productivity in county referral facilities in Kiambu County**. The findings will be utilized to strengthen the health systems in Kenya and other Low-income countries in Africa. As a result, countries, communities and individuals will benefit from improved quality of healthcare services. This research proposal is critical to strengthening health systems as it will generate new knowledge in this area that will inform decision makers to make decisions that are research based.

Procedure to be followed

Participation in this study will require that I ask you some questions and also access all the hospital's department to address the six pillars of the health system. I will record the information from you in a questionnaire check list.

You have the right to refuse participation in this study. You will not be penalized nor victimized for not joining the study and your decision will not be used against you nor affect you at your place of employment.

Please remember that participation in the study is voluntary. You may ask questions related to the study at any time. You may refuse to respond to any questions and you may stop an interview at any time. You may also stop being in the study at any time without any consequences to the services you are rendering.

Discomforts and risks

Some of the questions you will be asked are on intimate subject and may be embarrassing or make you uncomfortable. If this happens; you may refuse to answer if you choose. You may also stop the interview at any time. The interview may take about 40 minutes to complete.

Benefits

If you participate in this study, you will help us to strengthen the health systems in Kenya and other Low-income countries in Africa. As a result, countries, communities and individuals will benefit from improved quality of healthcare services. This field attachment is critical to strengthening the health systems as it will generate new knowledge in this area that will inform decision makers to make decisions that are research based.

Rewards

There is no reward for anyone who chooses to participate in the study.

Confidentiality

The interviews will be conducted in a private setting within the hospital. Your name will not be recorded on the questionnaire and the questionnaires will be kept in a safe place at the University.

Contact Information

If you have any questions you may contact the following supervisors:

1. Mr. Musa Oluoch - musadot123@gmail.com,
2. Mr. Francis Kimemia – kimemiafred@yahoo.com
3. Dr. Wanja Mwaura - [wanjamwaura@gmail.com](mailto:wanjemwaura@gmail.com)

Head of Department of Health Systems Management of
Kenya Methodist University, Nairobi campus.

Participant’s Statement

The above statement regarding my participation in the study is clear to me. I have been given a chance to ask questions and my questions have been answered to my satisfaction. My participation in this study is entirely voluntary. I understand that my records will be kept private and that I can leave the study at any time. I understand that I will not be victimized at my place of work whether I decide to leave the study or not and my decision will not affect the way I am treated at my work place.

Name of Participant..... Date.....

Signature.....

Investigator’s Statement

I, the undersigned, have explained to the volunteer in a language s/he understands the procedures to be followed in the study and the risks and the benefits involved.

Name of Interviewer..... Date.....

Interviewer Signature.....

SECTION C: PERFORMANCE APPRAISAL COMPONENT OF THE PERFORMANCE MANAGEMENT SYSTEM IN PUBLIC HOSPITALS

Please indicate your level of agreement concerning the performance appraisal component.

Use the scale 1-5 with 5-Strongly Agree, 4-Agree, 3-Undecided,2-Disagree, 1-Strongly disagree

Statement	1	2	3	4	5
I'm familiar with the performance appraisal guidelines					
My performance is evaluated based on my job description					
I'm satisfied with the performance appraisal process					
There is regular performance review					
My supervisor takes my performance appraisal discussion seriously					
Performance appraisal process helps me to find out about my level of performance					
I get a chance to discuss my aspirations and work challenges during the performance appraisal discussion					

SECTION D: FEEDBACK ON PERFORMANCE

Please indicate your level of agreement concerning the feedback component. Use the scale 1-

5 with 5-Strongly Agree, 4-Agree, 3-Undecided,2-Disagree, 1-Strongly disagree

Statement	1	2	3	4	5
I receive regular feedback from my supervisor concerning my feedback					
Improvement plans are integrated during the feedback					
The performance feedback data is used to set priorities in the next working phase					
The feedback I receive helps me to understand my strengths and weaknesses					
My feedback is based on actual results or observed behavior					
I perceive my career growing in this institution					
There is a policy on training that is followed					

SECTION E: REWARDING PERFORMANCE

Please indicate your level of agreement concerning the reward component. Use the scale 1-5 with 5-Strongly Agree, 4-Agree, 3-Undecided, 2-Disagree, 1-Strongly disagree

Statement	1	2	3	4	5
There is a formal reward system in line with the performance appraisal policy in our hospital					
I have been rewarded for surpassing my targets					
Promotions and salary increments are based on performance appraisal					
The process of rewarding performance in our hospital is fair and objective					
My job group is fair based on the performance appraisal					
The reward system in our hospital is linked to the results of performance appraisal					
Employees who work hard are recognized and rewarded in our hospital					

SECTION F: EMPLOYEE PRODUCTIVITY

Please indicate your level of agreement concerning the employee productivity component. Use the scale 1-5 with 5-Strongly Agree, 4-Agree, 3-Undecided, 2-Disagree, 1-Strongly disagree

Statement	1	2	3	4	5
I have presented a “new” idea to improve patient outcomes, work processes etc.					
My supervisor recognizes staffs who take on challenging tasks					
I’m able to achieve the targets that we set					
There is a formal process for submitting new ideas in this institution					
There is room for being creative in this institution					
I have been awarded/recognized for being presenting a “new” idea					
My suggestions to resolve problems or issues concerning work processes or patient related issues et cetera are taken into consideration					

APPENDIX 3: Key Informant Interview Guide

1. Have you received any training on Performance Management Systems?
2. What other courses have you attended in the past five years? Please indicate the course, when it was taken and the duration.
3. How many employees are trained on performance management?
4. What challenges have you experienced in the implementation of performance management?
5. Are your staffs committed to performance management?
6. Do you have a formal process for reviewing performance?
7. Do you have a regular feedback system for your staff?
8. Do you act in a timely manner when performance falls below acceptable levels? Briefly explain.
9. How has performance management influenced employee productivity? Explain briefly
10. Does the hospital have a system for reporting performance of health care workers?
11. Is there a formal reward/sanction process?
12. Do you have a professional development plan?
13. Is there a mechanism in place to allow staffs to present “new” ideas?
14. Do you recognize individuals who come up with “new” ideas to improve processes?
15. Have you established major milestones in certain projects where you would like feedback from employees?
16. Do your employees have the needed and appropriate people to accomplish their set goals?
17. Do your employees appreciate the value of their work in relation to the hospital’s overall success?
18. Do your employees feel fairly compensated for their contributions? Does she feel valued and recognized for the work she is contributing?
19. Are your employees clear on what constitutes success in the hospital?

APPENDIX 4: Map of Kiambu County



APPENDIX 5: KEMU Ethical Clearance



KENYA METHODIST UNIVERSITY

P. O. BOX 267 MERU - 60200, KENYA
TEL: 254-064-30301/31229/30367/31171

FAX: 254-64-30162
EMAIL: info@kemu.ac.ke

2ND MAY 2018

Carolyn Akinyi Owino
HSM-3-1490-1/2009

Dear Carolyn,

RE: ETHICAL CLEARANCE OF A MASTERS' RESEARCH THESIS

Your request for ethical clearance for your Masters' Research Thesis titled "Effectiveness of Performance Management Systems on Employee Performance among Public County Referral Hospitals in Kiambu County" has been provisionally granted to you in accordance with the content of your project proposal subject to tabling it in the full Board of Scientific and Ethics Review Committee (SERC) for ratification.


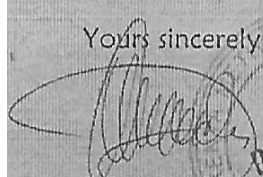
As Principal Investigator, you are responsible for fulfilling the following requirements of approval:

1. All co-investigators must be kept informed of the status of the project.
2. Changes, amendments, and addenda to the protocol or the consent form must be submitted to the SERC for re-review and approval prior to the activation of the changes. The Proposal number assigned to the project should be cited in any correspondence.
3. Adverse events should be reported to the SERC. New information that becomes available which could change the risk: benefit ratio must be submitted promptly for SERC review. The SERC and outside agencies must review the information to determine if the protocol should be modified, discontinued, or continued as originally approved.
4. Only approved consent forms are to be used in the enrollment of participants. All consent forms signed by subjects and/or witnesses should be retained on file. The SERC may conduct audits of all study records, and consent documentation may be part of such audits.

5. SERC regulations require review of an approved study not less than once per 12-month period. Therefore, a continuing review application must be submitted to the SERC in order to continue the study beyond the approved period. Failure to submit a continuing review application in a timely fashion will result in termination of the study, at which point new participants may not be enrolled and currently enrolled participants must be taken off the study.

Please note that any substantial changes on the scope of your research will require an approval.

Yours sincerely,



DR. WAMACHI
Chair, SERC

cc: Director, RI & PGS

APPENDIX 6: NACOSTI Research Authorization Letter



NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2213471,
2241349, 3310571, 2219420
Fax: +254-20-318245, 318249
Email: dg@nacosti.go.ke
Website: www.nacosti.go.ke
When replying please quote

NACOSTI, Upper Kabete
Off Waiyaki Way
P.O. Box 30623-00100
NAIROBI-KENYA

Ref. No. **NACOSTI/P/18/65898/24724**

Date: **6th September, 2018**

Carolyn Akinyi Owino
Kenya Methodist University
P.O. Box 267 – 60200
MERU

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on *“Effectiveness of performance management systems on employee performance among Public County Referral Hospitals of Kiambu County”* I am pleased to inform you that you have been authorized to undertake research in **Kiambu County** for the period ending **5th September, 2019**.

You are advised to report to **the County Commissioner and the County Director of Education, Kiambu County** before embarking on the research project.

Kindly note that, as an applicant who has been licensed under the Science, Technology and Innovation Act, 2013 to conduct research in Kenya, you shall deposit **a copy** of the final research report to the Commission within **one year** of completion. The soft copy of the same should be submitted through the Online Research Information System.

A handwritten signature in dark ink, appearing to read 'G. Kalerwa', is positioned above the typed name of the Director-General/CEO.

**GODFREY P. KALERWA MSc., MBA, MKIM
FOR: DIRECTOR-GENERAL/CEO**

Copy to:

The County Commissioner
Kiambu County.

The County Director of Education
Kiambu County.

APPENDIX 8: Thika Approval to Collect Data

APPENDIX 7: Kiambu Approval to Collect Data

**COUNTY GOVERNMENT OF KIAMBU
DEPARTMENT OF HEALTH**



Telegrams: "MEDICAL", Kiambu
Telephone: Kiambu (office) 2022191
When replying please quote
Email address:
kiambudistricthospital@yahoo.com

KIAMBU COUNTY REFERRAL LEVEL 5 HOSPITAL,
P. O. Box 39,
KIAMBU.

Ref No: KBU/STAFF 7/VOL XXXIV/56

Dates: 12th July 2018

Carolyn A Awori Owind

P O Box 729

THIKA

0727516300

RE: PERMISSION TO COLLECT DATA ON PERFORMANCE CONTRACTING

Reference is made to your letter dated 10th July 2018.

The Hospital has no objection to your request and approval is given to collect data on performance contracting.

SUSAN M GATEI (MRS)

FOR: MEDICAL SUPERINTENDENT

KIAMBU COUNTY REFERRAL LEVEL 5 HOSPITAL

COUNTY GOVERNMENT OF KIAMBU
DEPARTMENT OF HEALTH

Tel.Thika 067 21621/2 fax 21778
All correspondence should be addressed to
MED.SUPT.
When replying please quote



THIKA LEVEL 5 HOSPITAL
P.O. BOX 227
THIKA

Ref: NO. MOMSTKA VOL III (438)

Date: 7th August, 2018

APPROVAL TO CARRY OF RESEARCH

Principle investigator: CAROLYN AKINYI OWINO

RE: EFFECTIVENESS OF PERFORMANCE MANAGEMENT SYSTEMS ON EMPLOYEE PERFORMANCE AMONG PUBLIC COUNTY REFERRAL HOSPITALS IN KIAMBU COUNTY

Following deliberations by Thika Level 5 hospital research committee, your proposal to carry out the above research at this facility has been approved. However, you will need to provide us with licence from NACOSTI before you can commence the data collection.

Take note that you are required to submit a copy of your research findings upon completion of the study to the hospital. It is also expected that the Ethical consideration and the research subjects confidentiality will be maintained as you have outlined in your proposal.

Any patient confidential information that you may access during your research should not be used without consent.

This letter is valid up to 31st January, 2019.

For any queries feel free to contact the committee chair through the Medical Superintendent's office. Thank you and all the best


DR. J. WANGECHI
CHAIR TREC
THIKA LEVEL 5 HOSPITAL



APPENDIX 9: Gatundu Approval to Collect Data

COUNTY GOVERNMENT OF KIAMBU
DEPARTMENT OF HEALTH SERVICES
GATUNDU LEVEL 5 HOSPITAL

Telegram: "MEDICAL" Gatundu
Telephone: 0786 916 894
When replying please quote
Email Address:



GATUNDU LEVEL 5 HOSPITAL
P.O BOX 84 - 01030
GATUNDU
gatundul4h@gmail.com

Ref:GTD/GEN/37/VOL.1/73

21ST JUNE 2018

KENYA METHODIST UNIVERSITY
SCHOOL OF MEDICINE AND HEALTH SCIENCES
P O BOX 45240-00100
NAIROBI

RE: COLLECTION OF DATA – CAROLINE AKINYI- HSM-3-1490-1/2009.


Your application to conduct research on "*Effectiveness of performance management systems on employee performance among public county referral hospitals in Kiambu County*" in this institution has been granted.

During the entire period of your research, you will be reporting to the Student Preceptor, who will be the key hospital coordinator during the data collection. He will support you access any information that may be relevant for the successful undertaking of the research.

Finally, you are expected to adhere to all the regulations relating to confidentiality of patient information, ethics in research as well as all norms regarding conduct in a Public Health Institution.

Wishing you a successful research.




KARIUKI J.G.
HEALTH ADMINISTRATIVE OFFICER
GATUNDU LEVEL 5 HOSPITAL