

**QUALITY MANAGEMENT PRACTICES AND PERFORMANCE OF PUBLIC
HEALTHCARE INSTITUTIONS IN THARAKA NITHI COUNTY, KENYA**

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**A RESEARCH PROJECT SUBMITTED TO THE SCHOOL OF BUSINESS,
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MAY, 2025

DECLARATION

This research project is my original work and has not been presented for a degree or any award in any other University. No part of this research project should be reproduced without authority of the author or/and of Kenyatta University

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DEDICATION

To my late child Jayson Jumapili, though you left me too soon, you motivated me to aspire for greatness and strive for excellence every day.

ACKNOWLEDGMENT

I am grateful to Prof. Stephen Muathe, my supervisor, whose guidance, expertise, and Support has been essential in the successful completion of this project. Prof. Muathe insightful feedback and invaluable mentorship, which have significantly enriched my understanding of the subject matter and enhanced the quality of my work. His patience, encouragement, and willingness to share his knowledge and expertise have empowered me.

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ABBREVIATIONS AND ACRONYMS

BSC	Balanced Scorecard Model
GDP	Gross Domestic Product
NACOSTI	National Commission for Science, Technology, and Innovation
NHIF	National Health Insurance Fund
RBV	Resource-Based View
SEM	Structural equation modeling
SMEs	Small and Medium sized enterprises
SPSS	Statistical Package for Social Sciences
USA	United states of America
WHO	World Health Organization

OPERATIONAL DEFINITION OF TERMS

Continuous Improvement	This is a quality management practice that include stakeholder involvement, on job training as well as regular reviews of outcomes
Top management commitment	It is a quality management practice that entails quality planning, resource allocation as well as staff training.
Customer Focus	It is a quality management practice that entails identification of patient needs and handling of customers from a public health institutional point of view in Tharaka Nithi County
Organization Performance	It reflects timeliness, operational efficiency as well as revenue generation of the public health institutions in Tharaka Nithi County
Quality Management Practices	It is broad construct that incorporates customer focus, continual improvement efforts and top management commitment

ABSTRACT

The developments in the global economy have compelled public healthcare institutions in Kenya to implement strategies aimed at market expansion, customer satisfaction enhancement, and operational efficiency improvement on a worldwide scale. The Tharaka Nithi county government and the Kenyan national government have instituted attempts to improve public healthcare facilities; nonetheless, their efficacy continues to fall short of the requisite requirements. The World Health Organization states that Kenya's public healthcare facilities delivered 75% unsatisfactory services to clients, with service quality remaining at 6.6% from 2017 to 2020. Consequently, the relationship between quality management techniques and the performance of public healthcare facilities was examined in this research. The research specific focus was on customer focus, continuous improvement and top management commitment and their effect on performance. The Balance Scorecard model, six sigma theories and the upper echelon theory anchored the study. The research employed descriptive research method. The target audience was eight hundred and eighty-three staff of public healthcare institutions in Tharaka Nithi County, Kenya. Stratified random sampling techniques were utilized to select 275 respondents, ascertained by a scientific methodology. Primary data was gathered through a structured questionnaire that was self-administered. A pilot test of twenty-eight respondents was done. The research tool's reliability and validity was evaluated utilizing Cronbach's alpha coefficient, with a threshold of 0.7 or higher. The results were that customer focus ($p < 0.05$), continual improvement ($p < 0.05$) and top management commitment ($p < 0.05$) all had significant effect on success of public healthcare institutions in Tharaka Nithi County, Kenya. The research concluded that customer focus, continuous improvement and top management commitment are significant total quality management practices that influence organizational performance. The research recommended that personnel in public healthcare institutions in Tharaka Nithi County should be incentivized to address consumer inquiries expeditiously to enhance efficiency. The operational managers and all other leaders of operational areas in the public healthcare institutions in Tharaka Nithi County formulate their processes efficiently to facilitate informed decision-making. Staff ought to be motivated to utilize reported errors as a foundation for enhancing operations. More should be done by the top management team working with public healthcare institutions in Tharaka Nithi County through provision of effective strategic leadership and articulation of quality vision and mission to employees.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

One of the most fundamental essences of the firm is to achieve the established goals and objective which is generally referred to as organizational performance. In specific sense, organizational performance plays an instrumental role in enhancing and allowing the firm to meet the established goals which in turn results into improved and positive outcomes (Al Aina&, 2020). Organizational performance is the only way which managers of an organization can provide assurance to owners that the firm is doing well in terms of realization of the stated objectives. Organizational performance ensures that the firm effectively leverage on the bundle of resources that are in place to ensure long success and realization of the goals (Muhammed&Zaim, 2020).

Quality is an important parameter that customers working and operating in the modern and contemporary world should always seek to achieve. One of the widely established and documented means for measuring quality from an organizational point of view is the service quality model (SERQUAL) (Ranjith-Kumar, Ganesh &Rajendran, 2022). In this model, it is listed that service quality has its key elements and constituents being reliability, tangibility, timeliness as well as responsiveness among other attributes. An organization seeking to improve on its overall performance should always Realization of superior quality is hinged on many issues, key one being the quality management practices that an organization may have in place (Abbas &Kumari, 2021).

Globally, in the event that the market's dynamism leads to steady fluctuations in customer expectations, it is imperative to implement a customer-centered business strategy, in which the value chain begins and ends with the customer, especially in developed countries like the United States (USA)(Guerola-Navarro et al., 2021).The advancements in the global economy have prompted various enterprises from both established and emerging nations to adopt strategies aimed at expanding their market, improving client satisfaction, and increasing operational efficiency globally, particularly in France(Ahammad, Basu, Munjal, Clegg & Shoham, 2021). Therefore, an organization incorporates quality management practices as capabilities that enable them increase their performance (Hameed *et al.*, 2018).

According to Siegel (2024), the global health care is experiencing significant transformation spearheaded by rapid advancement in technology and evolving patient needs which in turn are continually affecting quality management practices. The challenges affecting quality service delivery in the global health care sector according to Dawkins, Renwick, Ensor, Shinkins, Jayne and Meads (2021) include shortage of physicians and financial constraints. According to (2022), persistence of challenges like cyber security and healthcare inequalities has continued to negatively affect healthcare quality. According to Hu, Wang, Qin, Huang, Li, Chiu and Wang (2024), the role of quality management practices in healthcare is to enhance quality care while managing costs translating to better organizational performance.

Previous empirical studies like Jimoh, Oyewobi, Isa and Waziri (2019) as well as Al-Shraah et al (2022)documents that applying quality management practices has the potential to enhance business results, increase consumer satisfaction, foster teamwork and improve management of employees within organizations. Additionally,Carpinetti and Martins(2019)put greater emphasis on how businesses that adopt quality management practices focus on achieving and sustaining

superior outputs by utilizing management techniques as inputs and quality performance as outputs.

Lavoie-Tremblay, Aubry, Richer and Cyr (2018) emphasized that public health institutions have increasingly engaged stakeholders and on job training as strategies to enhance their performance and efficacy in Nigeria. Evidence in Ghana by Essel (2020) indeed point out that quality management principles like customer focus, continual improvement and top management commitment are foundational blocs of a well-functioning and performing system and organization.

Locally in Kenya, Vision 2030 includes the health care system of the country as one of its essential components. As per the Kenya Health Policy 2014-2030, the Ministry of Health of the Kenyan Government collaborates with public hospitals to enhance the delivery of services and operations to the public. Health care services in Kenya are primarily provided and funded by the Ministry of Health (MoH). The public sector comprises 51% of Kenya's network of more than 4700 health facilities, while the private and faith-based organizations account for 49%. The county hospitals serve larger populations within their respective regions. These hospitals offer a wider range of medical services, including surgery, emergency care, and specialist consultations. Health facilities must be equipped with utilities and designed to meet the needs of health care in order to guarantee universal health coverage(Kapologwe *et al.*, 2020).

1.1.1 Organization Performance

Organization performance is efficient usage of resources of the firm to come up with outputs that are well aligned with established objectives (Leitão, Pereira&Gonçalves, 2019).The measurement of organizational performance serves as a crucial metric for both small and

medium enterprises, as well as large organizations, in both developed and developing economies (Leitão *et al.*, 2019). It serves a critical function in the achievement of their respective objectives and goals. Leitão *et al.* (2019) asserted that the assessment of organizational performance is contingent upon a range of indicators, which are contingent upon factors such as the organization's industry, organizational structure, and the qualities of its products and services provided.

Majority of studies from strategic management relied on both financial/non-financial metrics, including profitability, customer satisfaction, as performance indicators (Javeed & Lefen, 2019; Arokodare & Asikhia, 2020). This agrees with Kori, Muathe and Maina (2020) who noted that adoption of balanced scorecard metrics that include financial as well as non-financial metrics perspectives is complementary when evaluating an organization's performance. Božić and Poola, (2023) classifies organizational performance indicators as effectiveness, which relates to an organization's potential to provide superior service or product within an efficient structure, and its efficiency and financial viability. Ali *et al.*, (2021) reported that indicators of customer satisfaction have consistently proven to be reliable predictors of long-term organizational performance and stable, long-term cash flows.

In addition, several empirical studies in the healthcare sector have classified organizational performance measures based on resource utilization, operational efficiency, visibility, trust, and customer satisfaction (Lavoie-Tremblay *et al.*, 2018; Moses, Korir, Zeng, Musiega, Oyasi, Lu, Chuma & Di-Giorgio, 2021). It is essential to consistently conduct a thorough evaluation of the performance indicators within an organization, as they are subject to dynamic shifts in response to changes within the competitive landscape (Moses *et al.*, 2021).

Nyambua (2018) classifies organizational performance indicators as effectiveness, which relates to an organization's potential to provide superior service or product within an efficient structure, as well as its efficiency and financial viability. Mehralian (2022) reports that indicators of customer satisfaction have consistently proven to be reliable predictors of long-term organizational performance and stable long-term cash flows.

Within the public health care context, timeliness in service delivery and conflict resolution, efficiency and the quality of services are important parameters that cannot be underscored as far as performance is concerned. Key customers in these institutions are patients who need adequate level of attention to effectively address their specific needs and preferences. Thus, the parameters for measuring performance from a healthcare point of view employ timeliness, operational efficiency and revenue generation (Muhammed&Zaim, 2020), which are the same indicators that shall be adopted in the present study.

1.1.2 Quality Management Practices

Quality management practices entail the systematic planning, implementation, and evaluation of quality initiatives within an organization to assure long-term success and sustainability (Abbas, 2020). Numerous authors have suggested frameworks and measures to effectively implement quality management practices, as indicated by recent literature (Ali, Hilman & Gorondutse, 2020; Ali & Johl, 2022). Liu *et al*, (2021) emphasize the incorporation of quality management practices with measures like customer involvement. According to Al-Saffar and Obeidat (2020), quality management practices aim to establish a unique culture to satisfy the requirements and desires of customers at the lowest possible cost, effort, and time.

Al-Shraah *et al* (2022) conceptualized quality management practices as employee precipitation, leadership and good vision, customer focus and continuous improvements. Negron underscores the significance of an effective leader's critical role in cultivating a culture of continuous improvement and quality within healthcare institutions. The success of quality management practices initiatives is significantly influenced by their active involvement in the establishment of quality objectives, the provision of resources, and the promotion of accountability among staff members. Furthermore, Mutingi and Chakraborty (2021) propose a framework that includes customer focus and continuous improvement that are aligned with strategic objectives to monitor progress and identify areas for improvement.

Three quality management practices being customer focus, continual improvement and top management commitment were central in the present study. The justification of selecting these three measures of quality management is because they are relevant in the health sector. In this study, customers are taken same as patients since the main focus will be on the health care sector. Customer focus is the only way through which an organization can gain and enhance its revenue and this is one of the basis goals that guide the operations of firms (Issau *et al*, 2023).

Continuous improvement calls for regular stakeholder involvement as well as training of employees. It also requires an organization to regularly review its outcomes to make certain that they are well aligned with the overall strategic goals and objectives (Carpinetti & Martins, 2019). All these can inform the long term competitive edge of the firm which then determines organizational performance (Jimoh *et al*. 2019).

Top management commitment is an important construct that cannot be underscored in an organization that seeks to provide quality services to customers. Top management can

demonstrate its commitment towards quality management of an organization through staff training, resource allocation and quality planning (Sirma, Misoi&Omillo, 2019). Training of staff in quality assurance issues in an organization coupled with adequate budgetary allocations towards quality issues of an organization can go a long way to improve customer experiences (Gachanja&Kinyua, 2021).

1.1.3 Public Healthcare Institutions in Tharaka Nithi County

Healthcare institutions in Kenya are essential for providing medical services. These healthcare institutions are clustered into various levels, starting with dispensaries and health centers, at the grassroots level and progressing to county hospitals, regional referral hospitals, and national referral hospitals in key cities (Masaba *et al.*, 2020).At the community level, dispensaries and health centers are the first point of contact for many Tharaka Nithi county residents, providing basic medical services such as immunizations health care for mothers and infants services, and treatment for prevalent illnesses. These facilities are critical in rural regions where access to more advanced healthcare is limited.

WHO supports universal healthcare which calls for the admission of all individuals to quality, inclusive, and operational healthcare services at reasonable charges free of financial hardship (WHO, 2023). Nonetheless, different nations with lower and average income levels heavily rely on out-of-pocket expenses to cover healthcare costs, resulting in detrimental effects on service utilization and the potential for severe financial hardships and impoverishment (Wu, Li &Ercia, 2020).In Kenya, Owoko (2023) reported that hospitals constantly experience a trend of holding patients due to unpaid bills. Lack of health insurance and failure to afford to pay monthly contributions are among the top reasons for growing out-of-pocket expenditures in Kenya.

Therefore, over the recent past all public healthcare providers in Tharaka Nithi County rely on NHIF as a Health insurance.

Tharaka Nithi County situated in Eastern Kenya, spans an approximate area of 2609 square kilometers. The region encompasses five sub-counties, namely Chuka, Tharaka North, Tharaka South, Maara and Igambang'ombe. According to the NHIF report of 2023, there are 28 public healthcare institutions in Tharaka Nithi county. As per a report by Tharaka Nithi County, (2021) approximately 52% of Kenyans have access to healthcare within a five-kilometer radius. This report further indicates that timely response to the specific needs of patients in Public healthcare institutions in Tharaka Nithi County has remained a challenge, a situation that has continued to devastate the state of access to quality health care services. Other serious challenges that have been noted by this report include poor service quality delivery landscapes that have continued to exert negative implication on the ability to realize the established goals and objectives (Makori & Muturi, 2018).

1.2 Statement of the problem

Vision 2030 includes Kenya's healthcare system as one of its essential components. The primary responsibility is to ensure that health services are both affordable and of high quality, as well as to preserve a competent workforce (Wanjiru *et al.*, 2019). Notwithstanding the efforts made by the Tharaka Nithi County Government and the national government of Kenya to enhance service delivery, their performance continues to fall short of the requisite threshold (Moses *et al.*, 2021; Rotich *et al.*, 2022). Although service delivery is one of the goals of most public health institutions in Tharaka Nithi, these institutions are also charged with an additional role of generating revenues to the government that is channeled directly to the exchequer. However, the Auditor Report (2023) points out that over 30% of the public health institutions in Tharaka Nithi

are not generating adequate revenues relative to their operating potential. This is a pointer that performance of these institutions has remained an unresolved challenge which creates the need for the present study.

According to a report by World Health Organization (2023), majority of public healthcare institutions in Kenya provided a 75% unsatisfactory services to their customers. In addition, the services provided by these institutions have remained at 6.6% from the year 2017 to 2020 (KAM, 2022). This contributed to an increase in death rates that were reported in 2023 in Kenya as 399,024 (WHO, 2024). The poor health care delivery especially in public hospitals has contributed to the loss of taxpayers income estimated at 400 Million dollars (World Bank, 2023). Further, according to Tharaka Nithi county integrated development plan (2022) reports that a 20% critical scarcity of human resources is undermining the operations of public health institutions in Tharaka Nithi County. Moreover, Moses *et al.*, (2021) undertook an investigation that indicated the Kenyan healthcare system is inefficient, with 20% to 50% of the resources allocated to health in Kenya being used inefficiently.

Empirical literature from prior study across many contexts demonstrates that the construct pertains to specific elements of quality management methods in Europe, Asia, the financial sector, manufacturing, and the hospitality industry (Lavoie-Tremblay *et al.*, 2018; Carpinetti & Martins 2019; Yuliansyah *et al.*, 2021; Issaue *et al.*, 2023). Moreover, empirical literature from numerous analyses demonstrates low methodological rigor due to the employment of non-probability sampling approaches, reliance solely on secondary sources, exploratory research design, and limited sample sizes for collecting data (Carpinetti & Martins 2019; Lo & Sugiarto, 2021)

In addition, most studies did not incorporate several indicators of quality management practices like customer focus, continuous improvement and top management commitment to clarify the combined effect of the quality management practices on success (Al-Saffar and Obeidat 2020; Mutingi and Chakraborty 2021; Al-Shraah *et al*, 2022). Other studies were conducted in different contexts like Europe that are more advanced and developed as compared to Kenya. Therefore, there is an absence of consistency in the studies hence the essence of conducting the present research.

1.3 Objectives of the Study

1.3.1 General Objective

The research was set out to ascertain the extent which quality management practices affected success of public healthcare facilities in Tharaka Nithi County, Kenya

1.3.2 Specific Objectives

The research was dictated by the subsequent specific objectives:

- i. To establish the effect of customer focus on performance of public healthcare institutions in Tharaka Nithi County, Kenya
- ii. To analyze the effect of continuous improvement on performance of public healthcare institutions in Tharaka Nithi County, Kenya
- iii. To ascertain the effect of top management commitment on performance of public healthcare institutions in Tharaka Nithi County, Kenya

1.4 Research Questions

The research sought for answers to the subsequent research questions:

- iv. How does customer focus affect performance of public healthcare institutions in Tharaka Nithi County, Kenya?
- v. How does continuous improvement affect performance of public healthcare institutions in Tharaka Nithi County, Kenya?
- vi. What is the effect of top management commitment on performance of public healthcare institutions in Tharaka Nithi County, Kenya?

1.5 Significance of the Study

The findings of the study would guide policy makers in the Ministry of Health in Kenya and Tharaka Nithi County to formulate and implement robust quality management policies to support effective health care service delivery. The study would provide new policy direction that would refine and inform realization of Universal Health care Coverage (UHC) in Tharaka Nithi County and Kenya in general. Manager running public health care institutions in Tharaka Nithi County would understand and appreciate the need for their commitment in allocation of resources to improve quality of service delivery. Health care professionals including doctors and nurses as well as community health care workers would benefit from this study by understanding various quality management dynamics and how the same can be implemented to their daily work activities.

The study would be important to the academicians in that it provides information on success of public healthcare institutions in Tharaka Nithi County and enhance quality management practices that are important in promoting operational efficiency, increase in customers and quality services being offered within the institutions. The findings of this investigation would additionally provide advantages to scholars as they serve as a foundation for scientific inquiries

into the literature, owing to their comprehension of the subject matter concerning the inter relationships among the variables under investigation. The study's results would inform policy formulation by providing information on the study variables of public healthcare institutions.

1.6 Scope of the Study

The connection between quality management practices and performance was explored. The guiding theories are the Scorecard, six sigma theories and the upper echelon theory. The population of interest composed of top management level in public healthcare facilities in Tharaka Nithi County, Kenya; where data was collected at one particular moment in time. Tharaka Nithi County was selected as the context of the present study because of its high crude death rates estimated at 10.6 per 1000 population. Therefore, a study focusing on quality management in the context of a health care setting especially in Tharaka Nithi County was of greater importance to the nation as a whole. Respondents were administered with questionnaires at a single point during the fieldwork period, which spans from September to October 2024. This timeframe ensured data collection during a representative period, capturing seasonal variations and potential fluctuations in business operations. The participants of the research were the personnel employed by the public health institutions in Tharaka Nithi County. Information in its primary form was collected in this study.

1.7 Limitations of the Study

There was the challenge of inadequate document on performance of the health institutions. This was countered through extensive review of the available literature. In addition, some the respondents in public healthcare institutions in Tharaka Nithi county exhibited suspicion and reluctance in divulging the necessary information about their performance. The constraint was successfully addressed by presenting substantiating evidence that the data in question was

intended for scholarly purposes, as demonstrated by the provision of a permit obtained from the NACOSTI.

1.8 Organization of the Study

There are five primary chapters in the investigation along with a preliminary section. The first Chapter presents introductory details along with the contextual background of the study's subject matter. It details quality management practices. Consequently, the problems, objectives, the limitations, and importance of the study will be addressed. Moving to chapter two, it delves into the empirical literature on measures of quality management practices. In addition, the foundational theories based on the study variables are discussed. A conceptual framework highlighting the study variables and how conceptualization is done is addressed. Methodologies are captured in the third chapter. The processed results are indicated in the fourth chapter while summary, conclusion and recommendations are in chapter five.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The theories reinforcing this research grounded the present investigation. Furthermore, past empirical studies and a conceptual structure that demonstrates the interconnectedness of the variables under investigation as they are conceptualized in the research are also covered in this chapter.

2.2 Theoretical Literature Review

Various theories may be used to anchor the study variable, but the most relevant theories that anchor the study are the balanced Scorecard, six sigma theory and the upper echelon theory a discussed below:

2.2.1 Balanced Scorecard Model

The model was postulated by Kaplan and Norto (1992) has gained widespread popularity as a model for strategic management and performance tracking. This model places significant emphasis on the necessity of taking into account various facets of organizational performance in addition to financial metrics. The model serves as a strategic tool for guiding and adjusting future planning, while also fostering the growth and advancement of an organization in the long term (Dudic *et al.*, 2020). Kaplan and Norton (1996) point that the BSC takes into account four perspectives: financial, internal company operations, customer, and learning and growth. Each viewpoint symbolizes a distinct facet of the performance of the organization and makes a contribution towards the main strategic goals. The financial perspective, for instance, is concerned with measurable financial outcomes such as profit margin expansion and revenue

growth; conversely, the customer perspective assesses customer retention, market share, and satisfaction (Sharaf-Addin & Fazel, 2021). The learning and growth perspective evaluates the organization's capability for innovation, employee development, and organizational learning, whereas the viewpoint of internal business processes analyzes the efficacy and effectiveness of critical operational processes (Bochenek, 2019).

This model operates under the assumption of balance, as it incorporates all financial and non-financial success metrics (Khomba, 2011). The BSC however encounter challenges when attempting to quantify and assess non-financial dimensions of performance, including employee morale and customer satisfaction (Bourne *et al.*, 2003). Additionally, smaller organizations with limited resources may perceive the Balanced Scorecard implementation process as excessively complicated and time-consuming (Neely, Adams & Kennerley, 2002). Despite these challenges, the Balanced Scorecard model is still evolving, with ongoing research focusing on improving its implementation processes, increasing its relevance in various organizational contexts, and incorporating emerging trends like sustainability and corporate social responsibility (Rafiq *et al.*, 2021; Tawse & Tabesh, 2023).

The model informed the measures of organization performance. It was utilized to underpin the broad dependent variable being organizational success. According to this model, organizational performance can be represented by four perspectives being internal business process, learning and growth, financial and customers who were patients in the present study.

2.2.2 Six Sigma Theory

Bill and Mikel (1986) came up with this theory and it was later on applied at General Electric by Welch (1995) to provide new strategic insights on continuous improvement and customer focus initiatives of the firm. This theory seeks to ensure that defects have been kept at a minimal level

as well as variations within the established processes. The theory adopts and applies two methodologies based on whether its essence for implementation is on achieving continuous improvement or customer services (Gupta, Digalwar, Gupta&Goyal, 2024).

In these two methodologies, various tools for ensuring quality are adopted including detailed cost benefit analysis of implementing continuous improvement initiatives in an organization. According to Yanamandra and Alzoubi (2022), the key essence of this theory in an organization is reducing defects while minimizing variations to attain highest level of quality. This according to Ekleş and Türkmen (2022) can be well achieved through strong commitment to a culture of continuous improvement and having in place customer focus initiatives. This theory is premised on a number of assumptions. It is assumed that services and products are important vehicle for value creation in an organization (Westgard, Bayat&Westgard, 2019). It is also assumed that an organization creates value by meeting specific needs of customers in the market. The theory further assumes that quality is not an ideal measure of perfection in an organization (Kane, 2020).

Continuous improvement is the main argument of this theory aimed at reducing variation in processes. The theory advocates for elimination of inefficiencies and defects in any process and hence continuous improvement which is an important quality management practice in an organization. Thus, this theory was found relevant in anchoring the variable continuous improvement and its effect on organizational performance.

2.2.3 Upper Echelon Theory

The proponent of this theory was Hambrick and Mason (1984) and it espouses the central role of top managers of an organization in achieving success of their organization. The theory argues

that top managers in an organization are provided with strategic choices that are complicated in nature and this complicate rational decision making. The theory regards senior managers of an organization among the most powerful forces especially through their commitment to quality issues in an organization. The key premise of this theory is that the idiosyncrasies of top managers of an organization inform the strategic choices they undertake in supporting performance of their organizations.

According to Memon, Rasli, Dahri and Hermilinda-Abas (2022), managers can demonstrate their commitment to the goals and objectives of an organization though effective and adequate allocation of resources and training of employees appropriately. At the same time, managers are highly involved in the decision-making processes and mechanisms in an entity. An underlying assumption of this theory is that the decision making process of senior managers in an organization determine competitive strategies of the firm that in turn influence performance (Hambrick and Mason, 1984).

The main focus of the present study is on top management commitment, which is one of the independent variables. Thus, it was expected that commitment of the top managers towards quality would enhance organizational performance and this assertion is going to be tested in this present study.

2.3 Empirical Literature Review

Past literature was reviewed based on individual metrics of quality management practices. The review of empirical studies revolves around customer focus, continuous improvement and top management commitment in relation to organizational performance:

2.3.1 Customer Focus and Performance

Moreover, Issau *et al*, (2023) conducted a study on the mediating function of customer focus in the link between firm performance and organizational learning in the hotel industry of Ghana. The data was collected from 118 hotel proprietors or administrators. Firm performance was positively correlated with customer focus. Furthermore, the organization's learning and firm performance were partially mediated by customer focus. The research was done in the hotel industry, which is conceptually and functionally distinct from public healthcare facilities in Tharaka Nithi County, Kenya.

Additionally, Abrokwah-Larbi (2024) investigated the influence of customer-focus on the performance of SMEs in eastern part of Ghana. The RBV was employed to anchor the investigation. 255 responders from the registered public traded of the Ghana Enterprise Agency were utilized for analysis. It was evident that enterprise performance is significantly shaped by customer focus attitude. The investigation was conducted on SMEs that exhibit structural and operational distinctions from public healthcare institutions.

While focusing on small enterprises in West Africa, Abrokwah-Larbi (2024) did an analysis of how customer focus affects performance. Survey design was adopted where 255 respondents aided in data collection. Existing studies determined operationalization of variables in this study and analysis was done through structural equation modeling (SEM). After analysis, it emerged that customer focus has a direct and substantial implication of success of small enterprises. However, the emphasis of this research was on Ghana in West Africa and the present study concentrated on Kenya.

Nyaga, Namusonge and Sasaka (2024) determined the effect of strategic customer focus on success of agriculture based cooperatives in Kenyan context. The research covered three counties being Meru, Tharaka Nithi and Embu and 240 respondents were targeted. Gathering of data was from primary sources. The findings were that performance was significantly predicted by strategic customer focus. This research covered financial institutions as the context unlike the present research whose focus was on public health institutions in Tharaka Nithi County.

In Nairobi County, Murichu (2023) determined the effect of customer focus as an element of TQM on performance of the Kenya Wildlife Service. The study targeted 271 staff of Kenya Wildlife Service and 81 were sampled. By leveraging primary data that was collected through questionnaire, it was shown that customer focus contributes towards superior organizational performance. The research however was done in Nairobi County while the present one was done in Tharaka Nithi County in Kenya.

2.3.2 Continuous Improvement and Performance

Carpinetti and Martins (2019) studied the correlation between production competitive criteria and continuous improvement strategies in Brazilian manufacturing firms. Middle managers of 15 firms were used for analysis using the convenience sampling technique. Qualitative data were implemented to analyze the data. Manufacturing firms' constant improvement strategies had a beneficial effect on their competitive production criteria. The study analyzed data using descriptive statistics which there is a need to be more comprehensive quantitative analysis. Furthermore, the research employed convenience sampling, which is easy to execute; yet, it often results in biased outcomes due to its reliance on the proximity and availability of participants, as opposed to the systematic selection of a varied and representative sample. Finally, the study was conducted in Brazil and economically developed country compared to Kenya.

Lavoie-Tremblay *et al*, (2018) study to enhance comprehension of the continuous improvement mechanisms employed by the Project Management Office's strategies in the field of health care in Canada. The descriptive case study design was implemented. The data was collected over a three-month period. A content analysis was done on the qualitative data. Strategies of project management agencies in the healthcare sector were positively influenced by continuous improvement mechanisms. The content analysis was analyzed using descriptive statistics, which do not include measures of statistical significance, such as p-values or confidence intervals, and therefore cannot be as conclusive. Additionally, the study was conducted within the healthcare sector in Canada a more developed economical market compared to healthcare institutions in Kenya.

Consequently, Jimoh *et al*.(2019) on the relationship and impact of TQM practices and continuous improvement on construction companies in Nigeria. a cross-sectional approach was implemented to gather data in the study. 155 construction firms in Nigeria were used for analysis. The research demonstrated that TQM practices were shaped by methods for ongoing enhancement. The research was performed in the construction sector, which is physically and functionally distinct from public healthcare in Tharaka Nithi County.

While focusing on savings and credit cooperatives in Nyeri County, Water and Waithaka (2023) determined the effect of continuous improvement on performance. Fifteen SACCOs were targeted and census was applicable. It was clear from analysis that continuous improvement and performance were significantly linked with each other. The study by Sahal and Bett (2023) determined the effect of continuous improvement on success of public secondary schools in Garissa County. In total, forty two schools were targeted and included in the study. The collected

and analyzed data indicated that continuous improvement significantly predicts organizational performance.

2.2.3 Top Management Commitment and Organizational Performance

Memon et al (2022) conducted an investigation into top management commitment and its implication as far as organizational citizenship behavior is concerned in industries within Pakistan context. More specifically, green training of staff was the main focus and a total of 222 respondents were involved. The analysis indicated existence of positive nexus between green training and top management commitment.

Gachanja and Kinyua (2021) determined how top management commitment affected performance of County Secondary schools within Nairobi County. While adopting descriptive design, a total of 30 schools were covered in this study. Sampling of the respondents was done utilizing random sampling method. Information was generated in its quantitative form and the analysis was by regression. It emerged that the level of commitment by the top management team exerts direct and significant implication on performance.

Sirma, Misoi and Omillo (2019) conducted a review of support from the top management and its implication on performance. It covered banks in Nandi County. The processed data was able to point out that top management commitment can be demonstrated through regular communication, review of the quality management systems at planned intervals.

Lowalan, Mutiiria and Gichunge (2023) determined how commitment by the top management affected performance. In total, 137 respondents were targeted and included in this study. Information collection was supported by questionnaire and the analysis was done through regression. After the gathering and processing of data, it was apparent that top management

commitment and performance of the supply chain function of an organization are positively and significantly connected with each other.

Among secondary schools in Nairobi County, Gachanja and Kinyua (2021) determined the effect of top management commitment on success. In total, 30 schools were targeted from which 270 respondents were drawn and 180 sampled. Leveraging primary data, it emerged that commitment level of top managers has positive and significant implication on organizational performance. Karanja, Kahuthia and Muraguri (2020) studied the effect of senior management commitment on performance of secondary schools owned by churches in Kiambu County. In total, 64 schools were targeted and 192 respondents covered. The analysis showed that senior management commitment has significant effect on organizational success.

2.4 Summary of the Literature Review

Moreover, Issau *et al*, (2023) conducted a study in the hotel industry of Ghana. Additionally, Abrokwah-Larbi (2024) covered SMEs in eastern part of Ghana. In the study by Abrokwah-Larbi (2024) the focus was on Ghana in West Africa and the present study concentrated on Kenya. Nyaga, Namusonge and Sasaka (2024) covered financial institutions as the context unlike the present study whose focus was on public health institutions in Tharaka Nithi County. The study by Murichu (2023) was done in Nairobi County while the present study was done in Tharaka Nithi County in Kenya.

An investigation by Carpinetti and Martins (2019) was conducted in Brazil and economically developed country compared to Kenya. The study by Lavoie-Tremblay *et al*, (2018) was conducted within the healthcare sector in Canada a more developed economical market compared to healthcare institutions in Kenya. Jimoh *et al*. (2019) was performed in the construction sector, which is physically and functionally distinct from public healthcare in Tharaka Nithi County. Sirma, Misoi and Omillo (2019) covered banks in Nandi County. Gachanja and Kinyua (2021) focused on secondary schools in Nairobi County. Karanja, Kahuthia and Muraguri (2020) covered secondary schools owned by churches in Kiambu County. Table 2.1 typically presents an overview of key findings, knowledge gaps, and trends extracted from the existing body of research relevant to the variable at study.

Table 2.1: Summary of the Literature Review

Author(s)	Objectives	Findings	Knowledge Gaps	Research gap filled by the current research
Abrokwah-Larbi (2024)	did an analysis of how customer focus affect performance	customer focus has a direct and significant implication of success of small enterprises	The study was done in Ghana among SMEs	The present study was done on public healthcare in Tharaka Nithi County.
Nyaga, Namusonge and Sasaka (2024)	determined the effect of strategic customer focus on success of agriculture based cooperatives in Kenyan context	performance was significantly predicted by strategic customer focus	It covered financial institutions as the context	The present study was done on public healthcare in Tharaka Nithi County.
Murichu (2023)	determined the effect of customer focus as an element of TQM on performance of the Kenya Wildlife Service	customer focus contributes towards superior organizational performance	This was a case study where Kenya Wildlife Service was covered	public healthcare in Tharaka Nithi County were covered
Sahal and Bett (2023)	determined the effect of continual improvement on success of public secondary schools in Garissa County	continuous improvement significantly predicts organizational success	The research was undertaken in Garissa County	The present study was done in Tharaka Nithi County

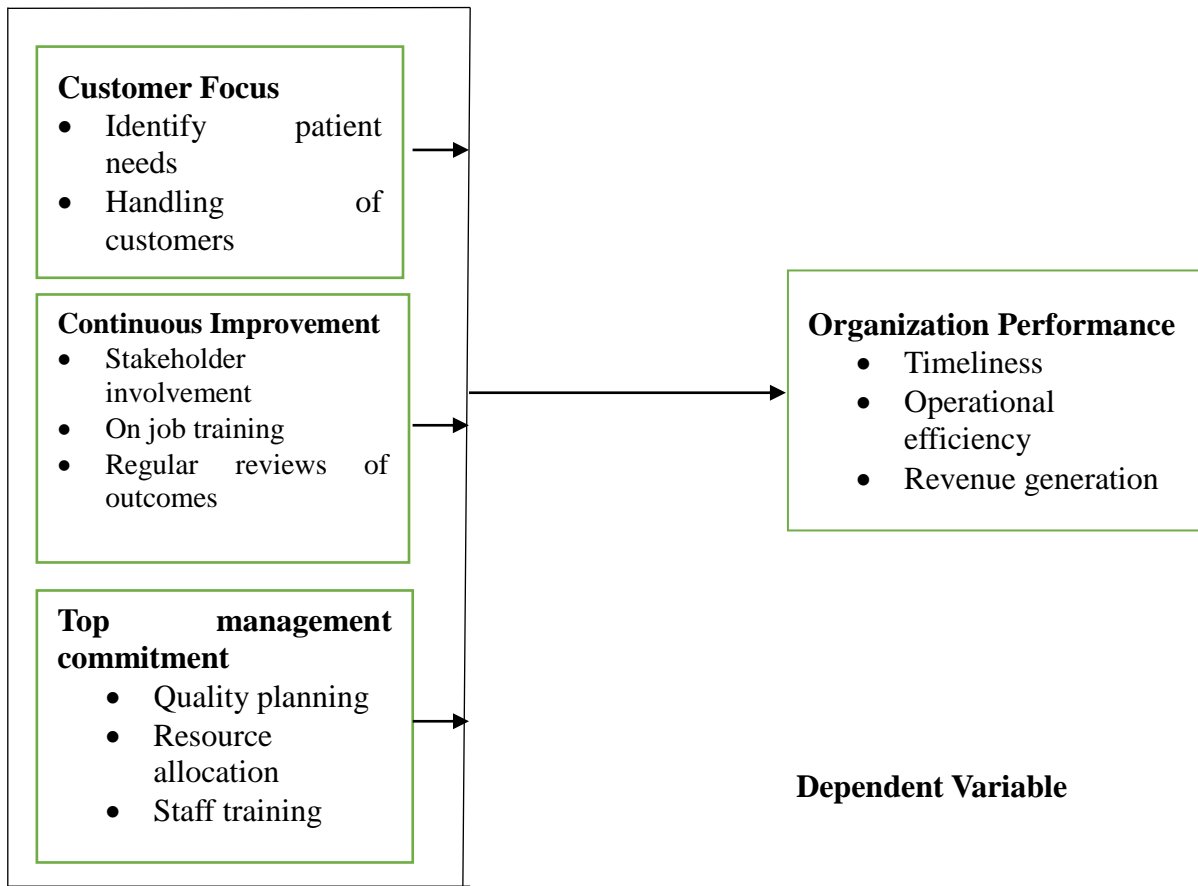
Waweru and Waithaka (2023)	determined the effect of continuous improvement on success	Continuous improvement and performance were significantly linked with each other.	It focused on savings and credit cooperatives in Nyeri County	public healthcare in Tharaka Nithi County were covered
Issauet al,(2023)	Mediating function of customer focus in the link between firm performance and organizational learning in the hotel industry of Ghana	Organization's learning and firm performance were partially mediated by customer focus	Performed in the hotel industry, this is conceptually and practically distinct from public healthcare.	The present study was done in public healthcare in Tharaka Nithi County
Gachanja and Kinyua (2021)	determined the effect of top management commitment on success	commitment level of top managers has positive and significant implication on organizational performance	It was done among secondary schools in Nairobi County	The present study covered public health institutions
Yuliansyah et al, (2021)	Mediating effect of customer focused strategy on link between organization learning and performance of Indonesian financial service firms	Customer-focused strategy mediates link between organization learning and performance of Indonesian financial service firms	Conducted within the financial sector, which is operationally and structurally distinct from public healthcare. Use convenience sampling. Indonesia is more economically developed compared to Kenya.	The present study was done on public healthcare in Tharaka Nithi County. It used stratified random sampling technique. It was done in Kenya, which is considered a developing market.

Carpinetti and Martins (2019)	Correlation between production competitive criteria and continuous improvement strategies in Brazilian manufacturing firms.	Manufacturing firms' constant improvement strategies had a beneficial effect on their competitive production criteria.	Conducted in the manufacturing sector in Brazil Used only quantitative data to analyze data. Convenient sampling technique was used which is less superior compared to non-probability sampling.	The present research centered on public healthcare facilities in Tharaka Nithi County. It used stratified random sampling technique, a probability sampling technique.
Jimoh <i>et al.</i> , (2019)	TQM practices and continuous improvement on construction companies in Nigeria.	TQM practices were influenced by continuous improvement.	Conducted among construction companies in Nigeria.	The emphasis of current research was on public healthcare institutions in Tharaka Nithi County.
Lavoie-Tremblay <i>et al.</i> , (2018)	Enhance comprehension of the continuous improvement mechanisms employed by the Project Management Office's strategies in the field of health care in Canada	Strategies of project management agencies in the healthcare sector were positively influenced by continuous improvement mechanisms.	Conducted in health care sector in Canada The content analysis was analyzed using qualitative data, which do not include measures of statistical significance, such as p-values or confidence intervals, and therefore cannot be as conclusive	The focus of the present study was on public healthcare institutions in Tharaka Nithi County. It employed both quantitative and qualitative data.

Source: Author (2024)

2.5 Conceptual Framework

Conceptual framework incorporates key premises, variables and concepts that determine a given study. It provides a theoretical underpinning giving lens through which data of the study can be gathered and analyzed (Luft, Jeong, Idsardi & Gardner, 2022). Figure 2.1 is the conceptual framework that underpinned the research's variables:



Independent Variable

Figure 2:1 Conceptual Framework

Source: Author (2024)

In Figure 2.1, the broad independent variable is quality management practices. These are represented by customer focus, continuous improvement and top management commitment. The dependent variable of the study is organizational performance.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

In the section, topics such the adopted design, targeted audience and sampling methods are discussed. Information on data gathering, processing and presentation are also provided.

3.2 Research Design

The current investigation utilized descriptive research design that is cross-sectional in nature. Bougie and Sekaran (2019) contend that descriptive research underpins qualitative research by providing an in-depth review and essential insights into the factors that require quantitative analysis. According to Takona (2024), descriptive design is ideal in answering questions on aspects like what and when to come up with responses as they are established. Huntington-Klein (2021) argues that descriptive design is suitable in studies that entail collection of large volume of information. According to Salter (2023), descriptive design supports quantitative description of opinions and trends and attitudes in a sample population.

3.3 Target Population

All the public healthcare institutions in Tharaka Nithi County as of 2024 were the study population. There are 28 public healthcare institutions in Tharaka Nithi County.

Table 3.1: Distribution of Target Population

Category per Sub-County	Total No. of health institutions	Population of health care staff	Sample proportion
Chuka	5	190	21.52%
Maara	6	193	21.85%
Tharaka North	10	210	23.78%
Tharaka South	4	150	16.99%
Igamba Ng'ombe	3	140	15.86%
Total	23	883	100

Source: (Tharaka Nithi County, 2023)

3.4 Sampling Size and Technique

The subsequent sections detail the sample size and sampling technique that were adopted to select elements for inclusion in the final study:

3.4.1 Sample Size

The sample size is a small, representative subset taken from a broader audience population, intended to facilitate the generalization of results (Liamputtong, 2019). In this study, the sample size was determined scientifically through Yamane (1967) formula using variables such as

$$n = \frac{N}{1 + N(e)^2}$$

n = Respondents

N = Entire population

e = Level of significance (0.05)

$$\frac{883}{1+883(0.05)^2} = 275$$

3.4.2 Sampling Technique

The study utilized stratified random sampling technique to select responders for the purpose of data collection. Stratified random sampling technique according to Casteel and Bridier (2021) provides an equal opportunity for each of the respondents of the study to be selected forming the sample. In this study, the use of stratified random sampling allowed for stratification of respondents based on their respective sub-counties and it also minimized biasness. In this regard, the health care workers from each of the hospitals were stratified at sub-county level and representative elements were drawn from each of the categories as summarized in Table 3.2.

Table 3.2: Distribution of Sample

Category per Sub-County	Total No. of health institutions	Population	Sample proportion	Sample size
Chuka	5	190	$190/883*100\%=21.52\%$	$21.52\%*275=59$
Maara	6	193	$193/883*100\%=21.85$	$21.85\%*275=60$
Tharaka North	10	210	$210/883*100\%=23.78\%$	$23.78\%*275=65$
Tharaka South	4	150	$150/883*100\%=16.99\%$	$16.99\%*275=47$
IgambaNg'ombe	3	140	$140/883*100\%=15.86\%$	$15.86\%*275=44$
Total	23	883	100.0	275

Source: (Tharaka Nithi County, 2023)

3.5 Data Collection Instrument

Questionnaires were disseminated to the personnel in public healthcare facilities in Tharaka Nithi County. According to Fellow and Liu(2021), a data gathering tool is an critical tool that requires the guidance of an expert while developing it. The first section A included four questions from questions 1-4 about the respondent's general information. These questions mainly sought to collect quantitative information from respondents. Section B, C, Included questions that delved into above the quality management practices including customer focus, continuous improvement and top management commitment respectively section E included information on organizational performance.

3.6 Validity and Reliability Research Instrument

A pilot study was undertaken using a sample size of 28 participants in public healthcare facilities in Tharaka Nithi County. This aligns with the recommendation put forth by Harris et al (2019) that pilot studies should ideally have a sample size ranging from 10% to 20% of the total sample size. In order to choose 28 participants for the pilot study, the researcher used 10% of the total sample size. Those involved in the pilot survey were eliminated from the ultimate research sample.

3.6.1 Validity Test

The extent to which a research tool assess what they purport to quantify is known as their validity. Content validity was obtained by defining the domains through literature reviews and developing indicators based on previous research (Fingland *et al.*, 2021). Respondents completed the questionnaire, and an analysis was conducted to ascertain whether the replies correspond to the measurable items. This makes it easier to make the necessary changes to improve the research instrument. Content validity determines how well a test item reflects all the required parts of the construct that it aims to determine. Construct validity is the collection of evidence in support of the interpretation of what a given measure indicates (Ahmed&Ishtiaq, 2021). Criterion validity determines the accuracy of a test item in measuring the outcome that it is designed to indicate (Coleman, 2022). In the present study, these validities were ensured through expert review and the supervisor. At the same time, the design of the questionnaire was done in line with existing scales in literature.

3.6.2 Reliability test

The concept of reliability pertains to the level to which a research tool yields similar outcomes across repeated trials (Strijker, Bosworth & Bouter, 2020). The researcher themselves carried out the data collection exercise, with the involvement of well-trained and motivated research assistants being limited to select instances. The participants received the initial questionnaires on two separate occasions, with a time gap of one week between each administration. This interval was necessary to facilitate the assessment of the questionnaires' reliability. Cronbach's Alpha evaluated the research instrument's reliability (Swami *et al.*, 2017). It was considered acceptable when the coefficient level reached or exceeded 0.7. Reliability results were determined through computation of values of Cronbach Alpha Coefficients and the outcomes are as summarized in Table 3.3.

Table 3.3: Reliability Results

Variable	Cronbach's Alpha	No. of Items	Inference
Customer Focus	.907	5	Accepted
Continuous Improvement	.721	5	Accepted

Top Management Commitment	.707	4	Accepted
Organization Performance	.819	4	Accepted

Source: Pilot Test Data (2024)

From Table 3.3, all the values of Cronbach Alpha exceeded 0.7, implying that they were all accepted for further analysis as they had been designed through a reliable scale.

3.7 Data Collection Procedure

The preliminary steps preceding fieldwork entail acquiring the requisite authorization from the NACOSTI, along with a letter of introduction. The questionnaire was accompanied by a cover letter that guided respondents on the purpose of the study. The research questionnaires were distributed top personnel in public healthcare institutions in Tharaka Nithi County. A research assistant was employed to aid in the collection of data for the study. The researcher intended to administer a one-day training session. The questionnaires were shared utilizing a drop-off and retrieval approach. The data was collected in 3 months in the year 2024. Before going for field work, the questionnaire was pilot tested through respondents that were purposively selected from health institutions in Tharaka Nithi County and the essence was to ascertain the accuracy and dependability of the questionnaire.

3.8 Empirical Model

According to Dźwigoł (2019), a multiple regression model is suggested as a means of predicting values of a dependent variable in the presence of multiple metrics of independent variables. Regression analysis is used to analyze continuous data (Kinyua, 2015;Gakii, 2023). The model for analysis is as presented below:

$$OP= \beta_0 + \beta_1CF + \beta_3CI+ \beta_3TMC+ \varepsilon$$

Where:

OP-organizational performance

CF-customer focus

CI-continuous improvement

TMC-top management commitment

$\beta_1 - \beta_3$ = Coefficients of the CF, CI and TMC respectively

β_0 = Constant

ε = the error term

The p-values from the above model were interpreted at 5% level of significance. The value of R-square was interpreted to imply model fitness. Adjusted R-square determined the proportionate change in performance that was attributed to quality management practices.

3.9 Data Analysis Techniques

This is the systematic examination and interpretation of unprocessed data, with the aim of arranging and structuring it in a manner that facilitates the extraction of valuable insights and meaningful information (Eden& Nielsen, 2020). Data editing, coding, classification, and tabulation are all part of the data processing stage(Kara, 2020). The analysis was achieved through SPSS version 27 in descriptive and inferential terms and presentation was by way of tables.

There were a number of potential biases that were likely to affect the analysis of findings in this study. Confirmation bias was the tendency to obtain information that supported the views of the study. This bias had potential to affect data analysis when results were to be interpreted in a way that is aligned with the original hypotheses. In limiting this bias, the goals and objectives of the study were clearly stated before the beginning of analysis. Overgeneralization bias is the

tendency to inappropriately extent findings of one data set to others. In limiting this bias, results were only extended to the proper population.

3.10 Ethical Considerations

Before beginning field work, the study was registered with the NACOSTI and was granted a research permit. During data collection, the researcher provided respondents with an overview of the study's objective and relevance, as well as reassurances of confidentiality. Prior to the data gathering process, informed consent from each participant was obtained. All the literature and information reviewed in this study was cited appropriately through an APA system as a way of avoiding possibility of plagiarism. The responses from participants were kept anonymous. The data collected would be kept for a period of 5 years before being destroyed.

CHAPTER FOUR

RESEARCH FINDINGS AND DISCUSSION

4.1 Introduction

The analyzed findings are discussed in this chapter covering response rate reliability and descriptive statistics. Regression results are also indicated that aimed to test the relationship in the variables.

4.2 Response Rate

Out of the 275 questionnaires that were administered to the public healthcare facilities in Tharaka Nithi County, 235 were filled completely hence a response rate of 86%. This aligned with Babbie (2010) who noted that an above 80% response rate is excellent for analysis. None response in this study was handled according to the protocol suggested by Gall, Borg, and Gall (1996) by contacting the random sample of non-response. Thereafter, responses were compared with each of the item on the instrument to determine whether non-response error was the problem.

4.4 General Information

Table 4.1 gives a breakdown of the general information of the respondents:

Table 4.1: General Information

Category	Classification	Frequency	Percentages	
Gender	Male	153	65.1%	
	Female	82	34.9%	
Age	18-25 years	35	14.9%	
	26-31 years	57	24.3%	
	32-40 years	124	52.8%	
	Over 41 years	19	8.1%	
	Years of experience	Less than 2 years	12	5.1%
	3-6 years	98	41.7%	
	7-10 years	73	31.1%	
	11-14 years	39	16.6%	
	Over 15 years	13	5.5%	

Table 4.1 shows that while 65.1% of the responders were male, while 34.9% were female. 52.8% were 32-40 years and 41.7% had worked for a span of 3-6 years. Nevertheless, these findings

contradict with the 2022 Kenya Demographic and Health Survey (KDHS) where it was established that 40% of the household population has the age of less than 15 years in Kenya.

4.5 Descriptive Statistics

Descriptive statistics are as summarized in subsequent sections:

4.5.1 Customer Focus

The first independent objective variable was customer focus and the findings were determined and exhibited in Table 4.2.

Table 4.2: Customer Focus

Statements	Mean	Std. Dev
My institution handles customers with respect and empathy when in person or over the call or online.	3.53	.667
Our institution listens to patients to discern their medical, emotional, and logistical needs.	3.45	.704
We address inquiries promptly, ensuring transparency about treatments and procedures.	3.41	.952
Our healthcare institution has built trust and enhances satisfaction to our customers over the years.	3.48	.960
We collect feedback from the customers to help them in service development.	3.45	.985
Overall score	3.46	.854

Source: Survey Data (2024)

The findings in Table 4.2 indicate the overall score as $M=3.46$, $SD=0.854$; this means that customer focus as a TQM practice in the studied hospitals was average. While most of the respondents agreed ($M=3.53$, $SD=0.667$) that their institution handled customers with respect and empathy when in person or over the call or online, majority were indifferent on their institution addressing inquiries promptly, ensuring transparency about treatments and procedures

(M=3.41, SD=0.952). These two are the statements that two extreme cases as far as customer focus as a TQM practice was concerned. The findings conform to Omore and Misuko (2023) who noted that there was a very rate of adoption of TQM practices like customer orientation among public hospitals in Kakamega County in line with the value M=3.46 obtained in the present study.

4.5.2 Continuous Improvement

Descriptive statistics on continuous improvement are shown in Table 4.3.

Table 4.3: Continuous Improvement

Statements	Mean	Std. Dev
My institution involves employees and major stakeholders while making quality management decision.	3.80	.725
Our healthcare facility prefers training and coaching on all quality management practices than supervising.	3.76	.939
Quality training is given to employees regular.	3.55	.857
Our institution conducts regular reviews of the production.	3.54	.787
Our processes are effectively designed to reduce employee error.	3.45	.980
Overall score	3.62	.858

Source: Survey Data (2024)

Table 4.3 indicate that on overall, the studied hospitals worked towards continuous improvement of their products and services (M=3.62, SD0.858). In particular, respondents agreed that their institution involved employees and major stakeholders while carrying out quality management decisions (M=3.80, SD=0.725) besides having preference of training and coaching on all quality management practices than supervising (M=3.76, SD=0.939). On the other hand, respondents were neutral on their processing being effectively designed to reduce employee error. (M=3.45, SD=0.980). Thus, more efforts should be concentrated towards effective design of the processes

among the studied hospitals. The average mean value of 3.62 agree with Odhiambo and Muthim (2024) who observed that most public hospitals in Machakos County were focused on the implementation of continuous improvement in order to enhance their service delivery.

4.5.3 Top Management Commitment

Table 4.4 gives the findings on top management commitment

Table 4.4: Top Management Commitment

Statements	Mean	Std. Dev
I am actively involved in quality planning	3.54	.920
The top management has allocated adequate budget to quality management	3.57	.890
The top management support quality training	3.75	.913
To management support of quality training has improved service delivery in this institution	3.82	.711
Overall Mean	3.67	.859

Source: Survey Data (2024)

The findings in Table 4.4 show that on overall, there was top management commitment in the studied hospitals (M=3.67, SD=0.859). Responders were in agreement that top management support of quality training had improved service delivery (M=3.82, SD=0.711) besides the fact that allocating adequate budget to quality management (M=3.57, SD=0.890). This means that top management support allowed and contributed towards effective service delivery in the studied hospitals. This finding concur with Hashim (2023) who ascertained that most of the public hospitals in Kilifi County have adopted top management commitment as evidenced by a mean value of 4.06.

4.5.4 Organizational Performance

Table 4.5 gives a summary of descriptive statistics on organizational performance:

Table 4.5: Organizational Performance

Statements	Mean	Std. Dev
I am responsive to patient needs	3.87	.876
I resolve patient complaints in time	3.76	.775
I operate efficiently	3.73	.873
The institution has increased its revenue generation	3.62	.757
Average	3.75	.820

Table 4.5 shows that responders were responsive to patient needs (M=3.87, SD=.876), they resolved patient complaints in time (M=3.76, SD=.775), operated efficiently (M=3.73, SD=0.873) and that the institution had increased revenue generation (M=3.62, SD=0.757).

4.6 Regression Analysis Result

The effect of study variables was determined through regression analysis and model summary is as exhibited in Table 4.6.

Table 4.6: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.946 ^a	.895	.893	.61124

Source: Survey Data (2024)

Adjusted R square in Table 4.6 was 0.893, this means that 89.3% change in organizational performance among the studied hospitals can be explained by the TQM practices. This implies that in addition to the TQM practices like customer focus, continuous improvement and top management support, there are still other additional variables that can influence performance of these hospitals. Hence, future inquiries should be on coming up with other additional factors. Table 4.7 gives ANOVA evidence.

Table 4.7: Analysis of Variance

	Sum of Squares	df	Mean Square	F	Sig.
Regression	731.805	3	243.935	652.903	.000 ^b
Residual	86.305	231	.374		
Total	818.111	234			

Source: Survey Data (2024)

On overall, Table 4.7 shows that the overall regression model was significant ($p < 0.05$). Table 4.8 is a view of significance.

Table 4.8: Coefficients and Significance

	Unstandardized Coefficients		Standardized Coefficients		t	Sig.
	B	Std. Error	Beta			
(Constant)	.989	.601			1.647	.101
Customer Focus	.277	.023	.490		12.186	.000
Continuous Improvement	.531	.042	.505		12.788	.000
Top Management Commitment	.145	.024	.040		6.042	.013

Source: Survey Data (2024)

From Table 4.8, the following is the predicted equation linking TQM practices and organizational performance:

$$OP = 0.989 + 0.277CF + 0.531CI + 0.145TMC + \epsilon$$

Where

OP=organizational performance

CF=customer focus

CI=continuous improvement

TMC=top management commitment

ϵ =the error term

Table 4.8 show that customer focus, $p < 0.05$ consequently, the variable was significant. The finding agree with Issau *et al*, (2023) who established that firm performance was positively correlated with customer focus. Additionally, Abrokwah-Larbi (2024) investigated the influence of customer-focus on the success of SMEs in eastern part of Ghana and concluded that the success of enterprises was significantly influenced by their customer-focus. The investigation was conducted on SMEs that exhibit structural and operational distinctions from public healthcare institutions.

This study was set out to analyze whether continuous improvement affects success of public healthcare facilities in Tharaka Nithi County, Kenya. From the findings, continuous improvement had $p < 0.05$. Thus, the study inferred that continuous improvement was a significant predictor of organizational performance of the studied hospitals. The finding with Carpinetti and Martins (2019) who established that the firms' constant improvement strategies had a beneficial effect on their competitive production criteria. Similarly, Jimoh *et al.* (2019) revealed that the TQM practices were influenced by strategies for continuous improvement.

Table 4.7 exhibits that top management commitment had p-value as $p = 0,013$. This means that top management support was significant. These findings agree with Memon *et al* (2022) who indicated existence of positive nexus between green training and top management commitment. Similarly, Lowalan, Mutiiria and Gichunge (2023) indicated that commitment from the top management team and performance of an organization were significantly linked with each other.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter covers a summary of the analyzed findings and conclusion in line with the objectives. Recommendations for policy and practice are also highlighted. Areas that require further research are also clearly pointed out in this chapter.

5.2 Summary

The global economy transformations have compelled public healthcare facilities in Kenya to implement strategies aimed at market expansion, customer satisfaction enhancement, and operational efficiency improvement on a worldwide scale. The Tharaka Nithi county government and the Kenyan national government have instituted attempts to improve public healthcare facilities; nonetheless, their efficacy continues to fall short of the requisite requirements. The WHO states that Kenya's public healthcare institutions delivered 75% unsatisfactory services to clients, with satisfactory services remaining at 6.6% from 2017 to 2020. The research aimed to determine the impact of quality management methods on the success of public healthcare institutions in Tharaka Nithi County, Kenya. More precisely, the research analyzed the effect of customer focus, continuous improvement and top management commitment on performance.

The findings indicate the customer focus as a TQM practice in the studied hospitals was average. Although the majority of the participants concurred that their institution handled customers with respect and empathy when in person or over the call or online, majority was indifferent on their institution addressing inquiries promptly, ensuring transparency about treatments and procedures. Regression analysis indicated that customer focus was significant in affecting organizational performance.

The study noted that the studied hospitals worked towards continuous improvement of their products and services. In particular, respondents agreed that their institution involved employees and major stakeholders while carrying out quality management decisions besides having preference of training and coaching on all quality management practices than supervising. On the other hand, respondents were neutral on their processing being effectively designed to reduce employee error. Regression analysis findings were that continuous improvement was a significant enabler of organizational performance.

The results show that on overall, there was top management commitment in the studied hospitals. Respondents were in agreement that top management support of quality training had improved service besides the fact that allocating adequate budget to quality management. On overall, regression analysis indicated that top management commitment had significant effect on organizational performance. .

5.3 Conclusion

Customer focus has significant effect on organizational performance of the studied hospitals. Therefore, investing resources in strengthening customer focus is the best way of improving performance of an organization. Most of studied hospitals handled customers with respect and empathy when in person or over the call or online. However, respondents were indifferent on their institution addressing inquiries promptly, ensuring transparency about treatments and procedures. On overall, it can be summed up that customer focus has been adopted by most public healthcare facilities in Tharaka Nithi County.

This study was set out to analyze whether continuous improvement affects success of public healthcare facilities in Tharaka Nithi County, Kenya. From the findings of regression analysis,

the study concludes that continuous improvement was a significant predictor of organizational success of the studied hospitals. This means that the adoption of continuous improvement contribute towards an improvement in performance. In particular, respondents agreed that their institution involved employees and major stakeholders while carrying out quality management decisions besides having preference of training and coaching on all quality management practices than supervising.

From results, top management commitment was a significant predictor variable. This therefore means that high top management commitment through allocation of resources leads an improvement in performance of an organization. Responders concurred that top management's endorsement of quality training enhanced service delivery. It also emerged that top management can demonstrate its commitment by allocating adequate budget to quality management. On overall, there was top management commitment in majority of the public healthcare facilities in Tharaka Nithi County.

5.4 Recommendations of the Study

Respondents moderately agreed on whether they addressed inquiries promptly or they collected feedback from customer for further auctioning. Thus, the findings of this study should inform the customer service standards and policies that are put in place among public healthcare institutions in Tharaka Nithi County. Staff at public healthcare facilities in Tharaka Nithi County should be incentivized to respond to client inquiries immediately to enhance efficiency and effectiveness. The heads of all functional units in the public healthcare institutions in Tharaka Nithi County ought to be encouraged to collect information on customer experience to guide further improvement and for decision making.

On the second objective, respondents were neutral on whether their processes were effectively designed to reduce employee error. This study thus recommended to policy makers working at the Ministry of Health Tharaka Nithi County should make continuous improvement an imperative and clear monitoring and evaluation interventions like audits should be conducted for validation purpose. Operational managers and other leaders of operational areas in public healthcare facilities in Tharaka Nithi County meticulously develop their processes to facilitate informed decision-making. Staff ought to be motivated to utilize reported errors as a foundation for enhancing processes.

The findings on the third objective indicated that on overall, there was top management commitment. Thus, clear policies should be formulated on expenditure by the top management team working with public hospitals in Tharaka Nithi County to ensure they remain commitment towards quality and workplace improvement. The top management team working with public healthcare facilities in Tharaka Nithi County should provide effective strategic leadership and articulate quality vision and mission to all the stakeholders.

5.5 Areas for Further Research

The value of adjusted R square was 0.893, this means that 89.3% change in organizational success among the studied hospitals can be explained by the quality management practices. This implies that in addition to the quality management practices like customer focus, continuous improvement and top management support, there are still other additional variables that can influence performance of these hospitals. Thus, more studies in future should seek to establish other key issues. Aside from performance, emphasis of future inquiries should be on other constructs like competitive advantage.

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APPENDICES

Appendix I: Research Questionnaire

Section: A: Bio Data

1. Name of the Healthcare

2. Kindly indicate your gender.

Male []

Female []

Prefer not to say []

3. Kindly specific your age

18-25 []

26-31 []

32-40 []

Over 41 []

4. Kindly indicate the number of years you have worked with this organization?

2 years and below []

3 -6 years []

7-10 years []

11-14 years []

15 years and above []

SECTION B: Customer Focus

5. Given below are a number of statements on customer focus, kindly indicate the extent of your agreement with each of them on a scale of 1-5, where (1=strongly disagree, 2= Disagree, 3= undecided, 4= Agree and 5= strongly Agree)

Statements	1	2	3	4	5
My institution handles customers with respect and empathy when in person or over the call or online.					
Our institution listens to patients to discern their medical, emotional, and logistical needs.					
We address inquiries promptly, ensuring transparency about treatments and procedures.					
Our healthcare institution has built trust and enhances satisfaction to our customers over the years.					
We collect feedback from the customers to help them in service development.					

SECTION C: Continuous Improvement

6. Given below are a number of statements on continuous improvement, kindly indicate the extent of your agreement with each of them on a scale of 1-5, where (1=strongly disagree, 2= Disagree, 3= undecided, 4= Agree and 5= strongly Agree)

Statements	1	2	3	4	5
My institution involves employees and major stakeholders while making quality management decision.					
Our healthcare facility prefers training and coaching on all quality management practices than supervising.					
Quality training is given to employees regularly.					
Our institution conducts regular reviews of the production.					
Our processes are effectively designed to reduce employee error.					

SECTION D: Top Management Commitment

7. Given below are a number of statements on organization performance, kindly indicate the extent of your agreement with each of them on a scale of 1-5, where (1=strongly disagree, 2= Disagree, 3= undecided, 4= Agree and 5= strongly Agree)

Statements	1	2	3	4	5
I am actively involved in quality planning					
The top management has allocated adequate budget to quality management					
The top management support quality training					
Top management support of quality training has improved service delivery in this institution					

SECTION E: Organization Performance

8. Given below are a number of statements on organization performance, kindly indicate the extent of your agreement with each of them on a scale of 1-5, where (1=strongly disagree, 2= Disagree, 3= undecided, 4= Agree and 5= strongly Agree)

Statements	1	2	3	4	5
I am responsive to patient needs					
I resolve patient complaints in time					
I operate efficiently					
The institution has increased its revenue generation					

END

THANK YOU

Appendix II: Letter of Authorization



KENYATTA UNIVERSITY
GRADUATE SCHOOL

E-mail: dean.gradschool@ku.ac.ke

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P.O. Box 43844, 00100
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Our Ref: D53/OL/EMB/26348/2019

DATE: 11th October, 2024

Director General,
National Commission for Science, Technology
and Innovation
P.O. Box 30523-00100
NAIROBI

Dear Sir/Madam,

RE: RESEARCH AUTHORIZATION FOR DORCAS NYANGULIKA JUMAPILI- REG. NO. D53/OL/EMB/26348/2019

I write to introduce Dorcas Nyangulika Jumapili who is a Postgraduate Student of this University. The student is registered for M.B.A degree programme in the Department of Business Administration.

Dorcas intends to conduct research for a M.B.A Project Proposal entitled, "Quality Management Practices and Performance of Public Healthcare Institution in Tharaka Nithi County, Kenya."

Any assistance given will be highly appreciated.

Yours faithfully,


PROF. ELIUD NJAGI
EXECUTIVE DEAN, GRADUATE SCHOOL

Appendix III: List of Public healthcare institutions in TharakaNithi County

1. Baragu Health Centre
2. Cheera Dispensary
3. Chiakariga Health Centre
4. Chuka District Hospital
5. Gaciongo Dispensary
6. Gatunga Health Centre
7. Kajuki Health Centre
8. Kamacabi Dispensary
9. Kamaguna Dispensary
10. Kamanyaki Health Centre
11. Kambandi Dispensary
12. Kamwathu Dispensary
13. Kanyuru Dispensary
14. Kariakomo Dispensary
15. Karuguaru Dispensary
16. Kathangacini Dispensary
17. Kibugua Health Centre
18. Kibung'a Sub District Hospital
19. Kieni Model Health Centre
20. Magutuni District Hospital
21. Mpukoni Health Centre
22. Mukui Health Centre
23. Muthambi Health Centre
24. Nkondi Health Centre
25. Rubate Health Centre
26. Tharaka District Hospital
27. Tunyai Health Centre
28. Weru Dispensary

Appendix IV: NACOSTI Permit



REPUBLIC OF KENYA

Ref No: K29011

RESEARCH LICENSE



This is to Certify that Mrs. DORCAS NYANGULIKA JUMAPILI of Kenyatta University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2012 (Rev.2014) in Tharaka-Nithi on the topic: **QUALITY MANAGEMENT PRACTICES AND PERFORMANCE OF PUBLIC HEALTHCARE INSTITUTIONS IN THARAKA NITHI COUNTY, KENYA for the period ending : 17/December/2024.**

License No: NACOSTI/24/014624

Applicant Identification Number: K29011



Director General
NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY & INNOVATION

Verification QR Code



NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.

See overleaf for conditions

Appendix V: Approval Letter



**KENYATTA UNIVERSITY
GRADUATE SCHOOL**

E-mail: dean.gradschool@ku.ac.ke

Website: www.ku.ac.ke

P.O. Box 43844, 00100
NAIROBI, KENYA
Tel. 819981 Ext. 4159

Internal Memo

FROM: Executive Dean, Graduate School

DATE: 11th October, 2024

TO: Dorcas Nyingulila Jusuipili
C/o Business Administration Dept.

REF: D63/OL/BMS/26548/2019

SUBJECT: APPROVAL OF RESEARCH PROJECT PROPOSAL

This is to inform you that Graduate School Board at its meeting of 19th September, 2024 approved your Research Project Proposal for the M.B.A Degree Entitled, "Quality Management Practices and Performance of Public Healthcare Institution in Tharaka Nithi County, Kenya."

You may now proceed with your Data Collection, Subject to Clearance with Director General, National Commission for Science, Technology and Innovation.

As you embark on your data collection, please note that you will be required to submit to Graduate School completed Supervision Tracking and program report Forms per semester. The Forms are available at the University's Website under Graduate School webpage downloads.

Also, please ensure that you publish article(s) from your project before submitting it to Graduate School for examination as per the Commission for University Education and Kenyatta University guidelines.

Thank you.


ANNBELL MWANIKI
FOR: EXECUTIVE DEAN, GRADUATE SCHOOL

c.c. Chairman, Business Administration.

Supervisors:

1. Dr. Stephen Mashe
C/o Department of Business Administration
Kenyatta University

Attachments