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Organizational Leadership and Quality Service Delivery in Faith Based Hospitals in Kiambu County, Kenya

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Abstract:

Organizations operate in a fairly dynamic macro and micro business environment having a lot of unpredictability and in many ways marred with pressure for competition making them adopt and institute changes to gain competitive advantage. Quality service delivery is a vital element and a crucial objective and goal for every organization. The reason is that, it is solely through quality service delivery that a firm has the ability to tell whether there is any progress and growth. This study sought to assess the relationship between organizational leadership and quality service delivery in Faith-Based Hospitals in Kiambu County. The study was anchored on three-step change theory and employed descriptive research design. The researcher targeted senior, middle and lower-level managers at the Faith-Based Hospitals and the respondents filled the questionnaire as the research instrument. The collected data was entered into SPSS version 25.0 where descriptive analysis and regression analysis was conducted. The study established that organizational leadership had moderate effect to quality of service delivery basing it on the R values. The adjusted coefficient of determination was at 0.628, meaning that 62.8% of quality service delivery was as a result of organizational leadership. The study concluded that organizational leadership with elements such as voting on areas of disagreements, getting input and suggestions from staff, leadership style and leaders that nurture and mentor juniors led to improvement in the quality of services delivery. Thus, the study recommends that for organizations to improve quality of service delivery they should look towards the leadership of the firm

Keywords: Organizational leadership, Inspirational leadership, Transformational leadership, Transactional leadership, Quality service delivery

1. Introduction

Quality service delivery is imperative in the continuous growth and survival of every organization. Service delivery is composed of real outcome of a firm which is measured using the projected aims and objectives (Ebongkeng, 2018). Service delivery refers to rendering of services as effectively and as quickly as possible to the intended recipient. It implies to the extent of excellence on the part of the organization in which it is interchangeably applied to measure firm performance. Managers therefore ought to comprehend the activities they assume the lead to creating value and which ones do not create value. Organizations have achieved and maintained competitive advantage through delivering service to clients, (Kariuki, 2015).

Service delivery is composed of measurable results which is a measure of the extent to which firms deviate from its intended objectives and set strategies (Juel, 2019). Service delivery can be understood by knowing the extent to which a firm realizes its goals. Measuring the level of service delivery is a crucial part for the leadership of the firm as it rates the extent to which the management plays its stewardship role and in absence of status of service delivery in the organization, it makes it tedious for the top management to know the direction the organization is heading to and the changes to be introduced into the organization, (Manzooret *al.*, 2019). Service delivery is a complex thing as it encompasses many measures which are inside it such as being long term or short term and/or being financial or non-financial, (Ebongkeng, 2018).

A research was performed by Manzooret *al.* (2019) and discovered that transformational leadership fully predicted improved firm performance. Principally, the research found out that there is a considerable mediating effect of three elements that is social responsibility, transformative leadership and organizational performance. It can be explained that this type of leadership, work outputs, and corporate social responsibility plays significant role in the organization as they directly reflect the firm's output in financial and non-financial metrics. Kashyap (2016) investigated the factors influencing the performance of primary health centers and discovered systemic and contextual challenges affecting service delivery in the primary health care which included the inadequate training of personnel, infrastructural shortages, and high number of patients. Chatterjee, *et al.* (2019) did an investigation on the elderly population and their choice of

healthcare sources as either the private or public services. Bamfo and Dogbe (2017) established that choosing between public or private hospital was significantly affected by the quality of services offered by the hospital, information sharing, the category of ailment and National Health Insurance Scheme (NHIS). Muhammed, *et al.* (2017) noted an increasing trend of the utilization of private health facilities in Nigeria.

Kenya (2016) revealed that management of public hospitals in Nairobi County has a bigger influence on the extent of service delivery which manifest through decision making. The inadequacy of drug supply was also established as the major source of low level of service delivery. Githiri (2015) argues that employee motivation and the level of technology that a firm adopts are significant factor determining the extent of customer quality service delivery. Leadership plays a key role in ensuring that successful change management is achieved in any organization. Faith based hospital have put in place leadership structure in an attempt to lead the implementation of change management. Hao and Yazdanifard (2015) discovered that leadership is among the key factors which facilitate positive change to any organization. In the absence of leadership in an organization, change will not be instituted and desired direction will not be achieved and may otherwise lead to negative change. Leadership style does not influence organizational employee performance, but also helps in giving clear direction to them in line with vision and mission.

Wandera (2016) on the perception of clients on healthcare quality for in-patients in public but faith-based hospitals, revealing that these patients in faith based hospitals had a positive perception on service quality whereas those in public hospitals had negative perception. Faith based hospitals have continuously face challenges which have hampered the provision of quality service delivery. For instance Nyongesa, Ombaka and Onyango (2015) evaluated the health care quality service provision and found out that customer level of satisfaction is determined by a number of factors such as drug availability, cost of treatment, the in fractural issues, adequacy of qualified staff, reliability and reduced morbidity and mortality. The changing market dynamics, consumerism, government policies, trade unions and changing approaches o missions have exposed these hospitals to alternative realities. The Faith-based hospitals have faced challenges that seen them struggle to match their past success rates and in the recent past some have facilities have bowed to the trade union pressure leading to nurses going to strike, This has led to poor service delivery to the patients who rely on Faith Based hospitals (MOH, 2018). It is therefore prudent to consider organizational leadership as a way to ensure high quality service delivery in these Faith-Based Hospitals.

2. Literature Review

2.1. Three-Step Change Theory

The three-step change theory was advance by Kurt Lewin (1951). Lewin viewed the employee individual behavior being the equilibrium of forces pushing to different and opposite sides. The theory argues that, the compelling energies are responsible for change in the organization as they compel employees to required direction. Restrictive forces impede change since they compel the workers to the opposing side. Lewin discussed these forces therefore in three step model in which it facilitates forces shifting into a planned change. Lewin's first step is to remove the existing status quo which is considered to be at balance in the process he referred to as unfreezing. This step is important as it overcomes the anxieties of individual worker. This step may be achieved by the application of a number of methods. Reducing the restrictive forces, the adversely influence the motion from the current status into the planned and required state and lastly, having an adequate amalgamation of the two above discussed methods. Among the activities involved in unfreezing step are; participant motivation by making them ready for change, making them see the need for changing from the current state to a better by creating a sense of urgency and actively involving employees to brainstorming the possible problems and providing alternative ways of getting change implemented, (Lewin, 1951).

According to Levin (1951), the next step in change process is molding the individual employee behavior. Here, it is important to transit the target system to a new status. A number of activities which help in moving from one state to the other are involved here; urging individuals to accept that the current situation does not benefit anyone and more benefits would be realized if a different state was in place and therefore there is need to move to a better one, working as a team for a quest for new situation and providing necessary information to employee to make them accept and become soldiers of change. The last step of change according Lewin is refreezing. This last step occurs once the change has been instituted and implemented so as to be sustainable over time. It this step is not implemented; Lewin argues that there are high chances the individual will go back to the old status quo rendering changes steps so far undertaken useless. The reason for refreezing is the stabilization of the new instituted change through the equilibrium of the moving and the stopping forces. Reinforcing new pattern is the action applied to implement this step, (Lewin, 1951).

This proposed study's independent variable of leadership is anchored on this theory. Throughout the Lewin's change step, strong leadership is needed to make sure that employees are not left behind and role modeling is played. Through to the process, the steps of change require that employees are shown that the current status of service delivery in the organization is not beneficial to either the organization or the employees themselves and therefore there is need to have a better state of performance.

2.2. Empirical Literature

Miloloza (2018) conducted a research to evaluate the effect of leadership styles on the financial performance of Croatian enterprises. The study concluded that, democratic kind of leadership was the most applicable in majority of Croatian enterprises, succeeded by the authoritarian. A number of small enterprises are effective financially when democratic style is present. Any business in the phase of stagnation is more prosperous in the presence of all the styles of leadership are amalgamated in exercise. Hurduzeu (2015) and Rashidi (2018) researched on the effect of organizational

change on organizational performance. The study had used leadership as one of the variables and found a positive and valid linkage between the two aspects.

Mwangangi (2017) performed a research to assess how corporate governance affected by leadership practices and the organizational performance that was in financial terms. It specifically attempted to assess the impact of leadership structures, leadership composition, leadership independence and stakeholders' ownership and ownership concentration on financial performance of the listed firms. Sixty two listed firms in national securities exchange were used and applied stratified sampling according to the sector to which a firm belongs. The study used primary data. The study concluded that corporate leadership composition and ownership concentration had the highest and positive contribution, among the other variables assessed. Leadership has a significant role that plays in firms' performance and therefore considered critical if one want to succeed.

Datche (2015) while determining the association that exists between transformational leadership and firms' financial performance. The study took ninety government agencies in Kenya. Descriptive design was employed and adopted primary data which was collected using open and closed ended questionnaires and subsequently analyzed. The study findings were that transformational leadership has a significantly effect on firm's performance. An idealized influence of leader however was found to be having a negative effect. Employee engagement had a partial mediating effect on the relationship of and transformational leadership and firms' performance.

Mwithi (2016) did a study to discover the correlation that exists amid leadership competencies and firm's performance in state corporations in Kenya. The cross-sectional research design was adopted and data collection period spanned for a period of five years from 2011 to 2015. The population of the study was the state corporations in Kenya which the targeted to respond to questionnaire. Primary data sources were utilized through the use of questionnaires that had open and closed-end questionnaires which were distributed on drop and pick basis and where respondent delayed, a reminder text was sent. It was discovered that competencies of leaders are positively related with firm performance. Additionally, self-awareness leadership and social skills leadership competencies were significantly and positively correlated to non-financial performance.

Hao and Yazdanifard (2015) on the relationship between effective leadership styles may facilitate positive change in the organization. The study discovered that leadership is among the key factors while positive change to any organization. In the absence of leadership in an organization, change will not be instituted and desired direction will not be achieved and may otherwise lead to negative change. Leadership style do not influence organizational employee performance, but also helps in giving clear direction to them in line with vision and mission.

2.3. Conceptual Framework

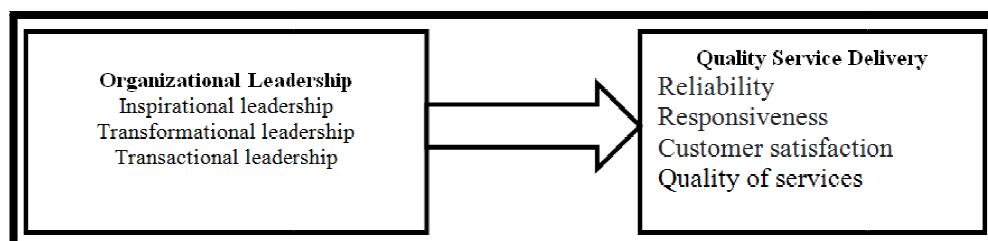


Figure 1: Conceptual Framework

3. Research Methodology

This study adopted descriptive research design. This design is preferred when describing the characteristics of a given population or situation that is being examined, it enables the researcher to get a comprehensive investigation and understanding of given phenomenon the way they are in the current condition (Avella, 2016). The target respondents for this study were employees working in senior, middle level management and lower-level management positions in faith-based hospitals in Kiambu County. The respondents filled the questionnaire that had open-ended and closed ended questions on the subject matter. A pilot study was done at St. Mary's Mission Hospital in Nakuru County to ensure that the instrument is valid and reliable. The researcher conducted descriptive analysis by obtaining means and standard deviations and regression analysis to show how the study variables were related and the strength of the relationship.

4. Data Analysis Results

The descriptive analysis and inferential statistics were conducted by the researcher and the findings are shown in the subsequent sections.

The team members voted on the sections that there were disagreements to give direction on the way forward, it had the highest variation with a standard deviation of 1.44 and a mean score of 3.10. From the respondents 29% of them agreed and another 16.1% strong agreed to the truthfulness of the statement. The results also show that 58.1% of the respondents strongly agreed and 36.6% agreed that the leadership style is strongly related to service delivery as such, the respondents adopted the positive leadership style as a way to improve their performance. On the statement on organizational leadership that exemplified nurturing and mentorship, the mean score was 3.78 and standard deviation 0.89 and 16.1% strongly agreed and 59.1% agreed with the statement.

On the concept of asking for ideas and inputs on decisions that look at the project and its plans, none of the respondents disagreed with the statement and 48.4% agreed to it and 31.2% had a strong agreement it. The mean was

4.11 and standard deviation obtained was 0.71. Majority of the respondents strongly disagreed at 75.3% and another 12.9% of the respondents disagreed on the statement on considering the suggestions of team members since the person was in a position of authority. The statement had a mean of 1.45 and variation of 0.93.

On retaining the authority to make the final decision, the variation was 1.21 for the standard deviation and its mean score was 3.56. There were 36.6% of the respondents who agreed and 23.7% strongly agreed to the statement, while 20.4% were neutral and another combined respondents of 19.4% disagreed with the statement. On seeking of approval from all members when making a major decision, the agreement or disagreement levels were spread out. 12.9% strongly disagreed, 20.4% disagreed, 21.5% were neutral neither leaning to either side, 29.0% agreed and 16.1% strongly agreed with that statement. Its variance was at 1.28 with means of 3.15.

On passing information to the team such that they team can act as per the communication received had a high variation with the standard deviation at 1.29 and mean score of 3.69. The respondents agreed at 30.1% and those who strongly agreed were 34.4%, 12.9% were neutral while 15.1% disagreed to the statement and 7.5% strongly disagreed that they passed on information.

The findings showed that 36.6% strongly agreed and 30.1% agreed that input from employees helps in improving departmental performance. Another 3.2% of the respondents strongly disagreed and 9.7% did not agree that employee inputs led to high performance of the department. Its mean was 3.87 and standard deviation was 1.11. The respondents also agreed to different extents on the statement on incorporating the ideas of other workers on what and how to do things, but the final decision was there to make. The variation was high at 1.02 and mean was 3.58; almost 66% had a positive response with 11.2% strongly agreeing and 55.9% agreeing to the statement. A merger 7.5% disagreed to a strong extent, 15.1% disagreed and 12.9% were neutral.

The overall mean score showed that organizational leadership and the effect on quality service delivery was 3.47 and there was a high variation in the responses such that the standard deviation was 1.07. In general, many respondents agreed with the statements on organizational leadership at 35.58% and strongly agreeing at 25.11% that organizational leadership affected the quality of service delivery in the faith based hospitals. These findings are similar to what Hurduzeu (2015) and Rashidi (2018) revealed that leadership led to improved organizational performance. At the same time, Datche (2015) found out that engaging employees in the decision making led to improved firm performance. While Mwithi (2016) shared that decisive and competent leaders positively related to firm performance. Furthermore, Yazdanifard (2015) share that leadership is associated with the main factors leading to positive changes in the firm and the absence of leadership is likely to cause changes not to be effected, the changes going in undesired directions and failure to achieve the organizational aims. The leadership style gives clear direction that aligns to the vision and mission, and its attained is based on leaders communicating the plan and strategy for effective implementation that will improve firm performance with elements like high service quality is delivered to the customers and the markets.

4.1. Regression Results

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.793 ^a	.628	.611	3.41461
a. Predictors: (Constant), Organizational Leadership				

Table 1: Model Summary

The coefficient of correlation is at 0.793 such that there is positive and strong correlation between the variables. The adjusted coefficient of determination is at 0.628 (62.8%) which is translated to mean that variations in quality service delivery can be traced back to independent variable of organizational leadership.

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	1734.434	1	433.608	37.189	.000 ^b
	Residual	1026.039	91	11.660		
	Total	2760.473	92			
a. Dependent Variable: Quality Service Delivery						
b. Predictors: (Constant) Organizational Leadership						

Table 2: ANOVA

The findings indicate that the model is fit for use in the study is the F calculated is greater than the F critical (37.189 > 3.496). The p-values are 0.000 and it is less than the set standard of 0.05 and show that organizational leadership has a significant effect on quality of service delivery at the Faith Based Hospitals in Kiambu County.

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		
(Constant)	4.516	2.635		1.714	.090
Organizational Leadership	.060	.094	.059	.636	.526

a. Dependent Variable: Quality Service Delivery

Table 3: Coefficients and Significance

$$Y = 4.516 + .060 X \text{Organizational Leadership} \dots\dots\dots(i)$$

The findings indicate that holding all variables constant mean that the quality of service delivery will be at 4.516. A unit increase of organizational leadership such that all other practices are held constant, the quality of service delivery in the faith-based hospitals will be at 0.060.

5. Conclusions

The study concluded that organizational leadership positively affected the quality of service delivery in the faith-based hospitals in Kiambu County. The respondents agreed that voting on areas of disagreements, getting suggestions and inputs from employees at the hospital led to improved service quality delivery. The respondents also mentioned that leadership style geared towards service delivery and a leader that exemplifies nurturing and mentoring improved the quality of services delivery. Thus, the study recommends that for organizations to improve quality of service delivery they should look towards the leadership of the firm

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