

EFFECTS OF ORGANIZATIONAL LEADERSHIP ON HEALTH SYSTEM MANAGEMENT IN PRIVATE HOSPITALS: A CASE STUDY OF BRISTOL PARK HOSPITAL

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ABSTRACT

The Kenyan constitution provides a legal framework for a widespread rights based approach in healthcare service delivery, it provides that every person has the right to be provided with the highest achievable standard of health that include right to reproductive health, right to reasonable sanitation standards, right to safe and clean drinking water and adequate quality food. The government health policy 2012-2030 gives guidance for the achievement of the highest standard of health through provision of equitable, quality and affordable services at attainable standard for all Kenyans with inclusion of monitoring and evaluation that aligns county and national levels objectives. The procedure gives an institutional framework that specifies the new management and institutional arrangements required under the devolved system which is aligned to Kenyan vision 2030. The aim of the study was to examine the effects of organizational leadership on health system management in private hospitals using Bristol park hospital as a case study. The study used descriptive research design. The study target population was 150 employees at Bristol park hospital. The population was divided into three strata; senior level Managers, Middle level Managers and non-management staff. Simple random sampling technique was used to obtain sample size from the different strata. Data was collected using questionnaires. Descriptive data was analysed using frequencies and percentages and presented through tables and figures. The findings revealed that staff competence, organization resources, organizational leadership and patient illness affect health system management utilization at Bristol park hospital. Recommendations included: improvement of the management strategies at Bristol park hospital, investment in human capital to improve staff competence through training for staff development, and senior management to provide adequate resources that are required in the organization. Suggestions for further research were that another study be carried out study on the factors affecting health system management in public hospitals to validate the finding of the current study.

Key words: Factors affecting, Health system, Leadership, Management, Organization, Strategies

Introduction

All private healthcare organizations engage in some activities designed to create services for sale, delivery to their clients, patients and beneficiaries. According to Goodman (2009) healthcare organizations adopt strategic approaches to achieve their objectives by investing in aligning all functions to support organization vision and then reap substantial rewards such as happy patients and clients willing to pay premium prices as well as patronize the hospital and boost brand loyalty, lower employee turnover as a result of a sense of mission, belonging, excellence, teamwork and job satisfaction. Ginter (2013) emphasize that everyone in the organization should be working for the strategy and understand how their work contributes to the accomplishment of the strategic goals. Healthcare management which simply implies the adoption of a strategic approach to the management of a healthcare facility is gaining increasing currency in modern healthcare practices (Goodman, 2009). Ginter (2013) makes the observation that healthcare leaders have found that strategic thinking, planning and managing strategic momentum are essential for coping with the dynamics of the healthcare industry and strategic management has become the single clearest manifestation of effective leadership in healthcare organizations (Ginter, 2013).

Organizations are made up of employees who determine the performance in two ways either positively or negatively this means that performance of organization is affected by both internal and external forces that include skills, knowledge, motivation levels, competition, working environment and technology. Therefore, organizational leadership needs to comprehend mutually exterior forces at the same time the interior forces greatly affected organization performance in general (Awan, Qureshi, & Arif, 2012).

Studies on organizational leadership of hospitals have been carried out globally, U.S.A, Canada among other countries. Abor (2013) examined managing healthcare staff in Ghana a study that was comparative of both private and public hospitals in Ghana. The study established that both public and private hospitals had staff management policy and private hospitals generated staff management plans as compared to public hospitals. Davis, Menser, Cerda, Tomaszewski, and Kash (2019) examined healthcare system with reference to market analysis for Kenya. The study established that one outstanding factor that affects healthcare management system is inadequate resource allocation. The significance of this study to the current research is that it has compiled data on Kenya healthcare services and the health status that focused on providing quality and length of life. According to Cook (2010) the success of healthcare facilities constantly strives for higher levels of customer service. This is due to the fact that today's consumers are increasingly sophisticated, educated, informed and confident. Customers have higher expectations of the services they want to receive and cannot be manipulated. In healthcare facilities patients now have more access to information regarding diseases as well as treatment options through technology.

Profile of Bristol park hospital

Bristol park hospital is private organization that delivers quality healthcare solutions, while upholding sound practice of evidence-based medicine, and embracing new skills and scientifically proven technology for better delivery of medical services to their clients. It has implemented and maintained rapid response initiative strategies with an aim of reducing the patients' waiting time without compromising the quality of care. They help patients to identify their healthcare needs and provide care that meets their needs and expectations; assist them to maintain their health, partner with other healthcare providers and specialists to embrace healthcare delivery and partner with the community in designing healthcare management systems that address the areas of infection prevention strategies through health education, infection management and continuous disease surveillance (Annual Report, 2018). The leadership of Bristol park hospital has not equipped its employees with required skills to enhance job satisfaction, employee retention, and staff motivation hence the basis for this study to examine the effects of organizational leadership on health system management in private hospitals.

Statement of the problem

Hospitals in Kenya have gone through rapid and profound changes since the introduction of result based management system by the government of Kenya in 2013. Private hospitals are required to operate based on the system of performance contracts. Private hospitals in Kenya in which Bristol park hospital is one of them; are used to traditional approach of managing health system facilities and more emphasis are placed on administrative procedure that are associated with hierarchical model where administrative rules are determined by Management Board. This approach undermines both individual and health system management utilization. In most of the private hospitals the employees are never motivated either through salary increment or trainings for improvement of their skills and knowledge. The working environment is not favourable since there is no career progression, no employee recognition and no employee

reward. This has led to lack of job satisfaction, no employee retention and lack of motivation (Medical Annual report, 2018).

Studies have been conducted in relations to health system facilities in developed countries and few have been carried out from a Kenyan perspective however none has been carried out at Bristol park hospital on effects of organizational leadership on health system management in private hospitals hence the basis for the current study.

Research Objective

The study general objective was to examine how organizational leadership affect health system management at Bristol park hospital.

Significance of the Study

The study may help to ascertain the need to re-orient the organizational leadership choices in relation to motivation process within private hospitals in Kenya.

The study may guide policy makers in the Ministry of Health in Kenya in the process of establishing organizations' strategic management plans to improve performance in Kenyan hospitals. For researchers, the study may help refine existing knowledge on organizational leadership on health system management.

Literature Review

Introduction

In the chapter the study has reviewed literature that explores what has been done on organization leadership and health management system with the aim of exposing existing gaps. The chapter further presents clarification of the existing theories besides analysis of the past established knowledge which will outline the organized understanding of the major issues and past studies. The chapter also includes theoretical literature review and empirical literature review, research gaps, conceptual framework and chapter summary.

Theoretical Literature Review

The study was anchored on the following theoretical foundations; goal setting theory and theory of planned behaviour.

Goal Setting Theory

Goal setting theory was developed by Kurt Lewin in 1960. Studies by Locker (2002) have established that there is an inductive relationship between goal setting and improved performance and utilization of office equipment and facilities. Goal setting theory has two major assumptions; individuals have a perception about the concerns that result from their interactive engagements and casual relations among the outcomes while the second assumption is individual have effective reactions to certain outcomes , positive and negative value. When goal setting is applied to work stations this implies that managers have a responsibility to ensure that deficiency needs like proper wages, safe environment, creating proper climate in which staff can develop their full capabilities are met. The postulation of goal setting theory is that their aim is to supervise human action.

According to Locke and Latham (2010) goal setting has four motivational mechanisms: goals have an energizing function, they emphasize on distinct consideration on what is important and relevant, are affect persistence and they serve as reference opinion. Individual in pursuit of certain goals don't seem satisfied until the goals are achieved. Goals that distinguish satisfaction and dissatisfaction and employee that produces the toughest goal line are hard to fulfil. Human beings are unendingly wanting group and to satisfy their needs is not altogether mutually exclusive but only tend to be. Goal setting theory relies upon motivators to clarify the causes of behaviour at a work station, external rewards are viewed as motivators that fuel behaviour as opposed to intrinsic motivators when behaviour are driven from internal forces. Therefore individual employees are able to attain both individual goals and organization target (Locker & Latham, 2010).

According to this theory individual are motivated to perform by two expectations. Goal setting is the probability that the effort will always lead to desired performance and second goal setting is that particular performance will lead to

preferred outcomes. The study will adopt this theory because health system management is based on organizational goals.

Theory of Planned Behaviour

Theory of planned behaviour was developed and adopted in 1984 by Ajzen. This theory is designed to explain and predict human behaviour within a given specific context, the behavioral theory suggest that verdict is not in any way made impulsively ,but it is as a result of assertiveness or subjective norms and perceived behavioral control which primarily affect behaviour through the impact on intention. The theory is the successor of the similar theory of reasoned action of Fishbein and Ajzen (2011). According to theory of planned behaviour there are three kinds of consideration that guide human behaviour which include behavioral beliefs that are about consequences of the behavior; normative beliefs that are about the normative expectations of others and finally control beliefs that deal with factors that determine a specific kind of behaviour. These three considerations are crucial circumstances, programs and projects when changing people's behavior as explained.

According to Ajzen (2011), behavioural beliefs produces favorable and unfavourable attitudes toward the behavior, normative beliefs result in perceived social pressure and subjective norm and the greater the perceived control beliefs the greater the perceived behavioral control. The formation of behavioral intention is determined by perception of behavioral control that is a combination of attitude toward behaviour, subjective norm and behavioral control. According to Folan and Browne (2015) human behaviour is assumed to follow a consistent, reasonable and often automatic path which may be biased, irrational and inaccurate. Human behaviour is based on various behavioral criteria such as occurrence, extent and contradiction. According to this theory it indicates that when someone intends to engage in a particular behaviour, they are more likely to engage in it. The theory of planned behaviour explains how health system management can change the behavior of people; the theory of planned behaviour predicts the deliberate behaviour because behaviour can be planned and deliberate.

Organization Leadership and Health System Facilities

Bezboruah, Paulson, and Smith (2014) examined the attitudes of nursing homes administrators and key managerial staff towards health information technology. The study was exploratory in nature that adopted qualitative case study methodology to understand health ICT adoption by nursing homes through multi indepth semi structured interview of management and direct observation of staff behaviour at the participating facilities, the study also adopted a modified technology acceptance model to examine perceptions and attitudes of supervisors. The study established that there were different levels of ICT adopted by participating institutions and some managers were aware of health ICT and kept updating their ICT system while others exhibited a lack of intrest in implementing ICT change. The study also established that there was lack of systematic planning and decision making towards ICT adoption. The study was limited to 6 in depth case studies and the study sample was small to generalize the findings moreover, the findings provide guidelines for future studies that it why this study adopted it as study variable.

Maria da Costa, Sousa and Moreira (2018) investigated the relationship between leadership style and the success of project management implementation. The authors main intention was to have a better understanding of the role that leadership plays in success of project management implementation by indentifying the role of transformation, directive and empowering leadership styles on the success of implementation in organization and what were the most important leadership attributes. The study distributed online questionnaires to sixty five manufacturing and services in Portuguese firms that had implemented project management. The study established that empowering leadership style had a positive impact on the success of project management implementation. The study concluded that the impact of the other styles; several leader's attributes were identified as having influence on skill development, assigned goals, individualised consideration information sharing and self directed decision making. The study had positive contributions in the study because it addressed the role of leadership in the success of adoption of project management (Maria da Costa, Sousa, & Moreira, 2018).

METHODOLOGY

Research Design

The study adopted a descriptive research design. The study target population was 150 employees at Bristol park hospital.

Target Population

The study targeted senior managers, middle level managers and non-management employees as the study target population as shown in Table 1.

Table 1: Target population

Category	Target population	Percentage
Senior Level Managers	10	7%
Middle Level Managers	40	27%
Non-Management Staff	100	66%
Total	150	100

Sample and Sampling Technique

The population was divided into three strata; senior level Managers, Middle level Managers and non-management staff. Simple random sampling technique was used to obtain sample size from the different strata. Kombo and Tromp (2009) indicated that a sample size of 10% to 30% of the target population is adequate to provide valid results on any research study therefore this study was sample 30% of the target population since it was a case study.

Table 2: Sample Size

Category	Target Population	Sample Size	Percentage
Senior Level Managers	10	3	7%
Middle Level Managers	40	12	27%
Non-Management Staff	100	30	66%
Total	150	43	100

Instruments

The study used Questionnaires as the main data collection tool. The questionnaires had closed-ended questions. The questionnaire was preferred because it was more efficient and economical tool for descriptive research for the sample size that was selected.

Data Collection Procedure

The study used questionnaires to collect primary data. This way was easier to identify the level by which the respondent agreed or disagreed (Kothari, 2009). Secondary data was collected from documented sources such as library books, magazines and newspapers and internet literature. The researcher informed the respondents that the instruments being administered was for research purposes only and the response from the respondents were kept confidential. The researcher obtained an introduction letter from the Management University of Africa in order to collect data from the field and then personally delivered the questionnaires to the respondents. The researcher then collected the questionnaires later.

Data Analysis and Presentation

The data collected was examined through a series of operations that included editing to eliminating inconsistency and classification on the basis of similarity and subsequent tabulation to relate the variable under study. Data was analysed using frequencies and percentages and presented through tables and figures.

4.0 FINDINGS

Table 3: The extent to which organizational leadership affect health system management at Bristol Park hospital

Category	Frequency	Percentage
Very Great Extent	18	56%
Great Extent	12	38%
Moderate Extent	0	0%
Little Extent	2	6%
No Extent	0	0%
Total	32	100

As tabulated in table 3 the study inquired to what extent organization leadership affect health system management at Bristol park hospital and the responses were as follows; majority of the respondents at 56% indicated a very great extent, 38% indicated great extent while none indicated moderate extent while 6% indicated little extent and none indicated no extent. This shows that organizational leadership affect health system management to a very great extent.

Table 4: Respondents view on how organizational leadership affect health system management

	Strongly agree		Agree		Neutral		Disagree		Strongly Disagree	
	F	%	F	%	F	%	F	%	F	%
At Bristol park hospital administrative competencies are used to determine organizational leadership	18	56%	14	44%	0	0%	0	0%	0	0%
Comprehensive decision making is highly influenced by the leadership style at Bristol park hospital?	17	53%	15	47%	0	0%	0	0%	0	0%
Supervisory competencies are more effective at Bristol park hospital and this has influenced utilization of healthcare system management?	20	62%	12	38%	0	0%	0	0%	0	0%
Administrative competencies at Bristol park hospital is one of the best?	0	0%	0	0%	1	3%	14	44%	17	53%
Training programmes adopted by my organization has improved employees performance	0	0%	0	0%	0	0%	12	38%	20	62%

As tabulated in table 4 respondents were asked to give their views to respond to the following questions to establish how organization leadership affect health system management utilization and the respondents were guided by Likert scale that had five options (Stronly Agee, Agree, Neutral, Disagree and Strongly Disagree) and their responses were as follows the first statement asked was if at Bristol park hospital administrative competencies were used to determine organizational leadership and the responses were as follows 56% of the respondents strongly agreed and 44% agreed while none of the respondents indicated neutral, strongly disagreed or disagreed. The second inquiry was if Comprehensive decision making was highly influenced by the leadership style at Bristol park hospital and 53% of the respondents strongly agreed and 47% agreed while none of the respondents indicated neutral, strongly disagreed or disagreed. The third question the study inquired was if Supervisory competencies were more effective at Bristol park

hospital and this has influenced utilization of healthcare system management and the responses were as follows 62% of the responses strongly agreed and 38% agreed while none of the respondents indicated neutral, strongly disagreed or disagreed. The study also inquired whether Administrative competencies at Bristol park hospital were one of the best and the responses were as follows; none of the respondents strongly agreed, none of the respondents agreed while 3% were neutral while 44% disagreed and 53% strongly disagreed. And finally respondents were asked if training programmes adopted by their organization had improved employees performance at Bristol park hospital and 62% of the respondents strongly disagreed and 38% disagreed while none of the respondents agreed or strongly agreed.

This shows organization leadership has an influence on health system management. Other studies have established similar findings such as Bezboruah, Paulson, and Smith (2014) examined the attitudes of nursing homes administrators and key managerial staff towards health information technology. The study established that there is different level of ICT adopted by participating institutions and some managers were aware of health ICT and kept on updating their ICT system while others exhibited a lack of interest in implementing ICT change. The study also established that there was lack of systematic planning and decision making in the management system. Maria da Costa, Sousa and Moreira (2018) investigated the relationship between leadership style and the success of project management implementation in hospitals. The study established that the empowering leadership style has a positive impact on the success of project management implementation.

Conclusion and Recommendations

The study concluded that organizational leadership affect health system management at Bristol park hospital and that administrative competence affect health system management to a great extent. The findings revealed that staff competence, organization resources, organizational leadership and patient illness affect health system management at Bristol park hospital.

The study recommendations were; improvement of the management strategies at Bristol park hospital, investment in human capital to improve staff competence through training for staff development, and senior management to provide adequate resources that are required in the organization, Healthcare organizations in Kenya should adopt strategic approaches to achieve their objectives by investing in aligning all functions to support organizations' vision and then reap substantial rewards such as happy patients and clients willing to pay premium prices as well as patronize the hospital and boost employee loyalty, lower employee turnover as well as having a sense of belonging, excellence, teamwork and job satisfaction and lastly employees in healthcare organizations should be motivated to contribute to the accomplishment of the strategic goals of the organization.

A suggestion for further research was that another study be carried out study on the factors affecting health system management in public hospitals to validate the finding of the current study.

References

- Abor, A. P. (2013). Managing healthcare waste in Ghana: a comparative study of public and private hospitals. *International Journal of Health Care Quality Assurance*, Vol. 26(4), 375-386.
- Abur-Razzaq, M. (2011). Illness episode vs treatment outcome: questions regarding safety. *Mental Health Review Journal*, Vol. 16 (4), 197-204.
- Almeida, S., Fernando, M., Munoz, A., & Cartwright, S. (2019). Retaining health carers: the role of personal and organisation job resources. *Journal of Organizational Effectiveness: People and Performance*, Vol. 6 (2), 98-113.
- Amin, A. (2013). The Impact of Employees Training on the job performance in education sector. *Journal of scientific research* volume 17 issue 9, 1273- 1278.
- Annual Report. (2018). *Bristol Annual Report, 2018*. Nairobi: Bristol hospital Kenya.
- Bezboruah, C., Paulson, D., & Smith, J. (2014). Management attitudes and technology adoption in long-term care facilities. *Journal of Health Organization and Management*, Vol. 28 (3), 344-365.
- Bickman, L., & Rog, D. (2009). *Applied research design: A practical approach*. Thousand Oaks: Sage Publishers .
- Bloodgood, J. M., Hornsby, J. S., & Hayton, J. C. (2014). Organizational Resourcefulness: The Role of Purposeful Resource Focus Vacillation in Implementing Corporate Entrepreneurship. *Advances in Entrepreneurship, Firm Emergence and Growth*, Volume 15, 125 - 147.

- Chen, L., Zheng, J., Yang, P., & Bai, R. (2016). The relationship between personal traits, leadership styles and operation. *International Journal of business management volume 6, Personal Traits, Leadership Styles and Innovative Operation.*
- Cooper, D., & Schindler, P. S. (2016). *Business research methods*. New Delhi: McGraw Hill.
- Davis, E., Menser, T., Cerda, A., Tomaszewski, L., & Kash, B. (2019). Examining healthcare systems: a market analysis for Kenya. *European Journal of Training and Development*, Vol. 43 (1/2), 2-20.
- Dougall, C. B., Parkes, L. P., & Langford, P. H. (2017). Measuring leader behaviour evidence for a big five model of leadership. *Journal of Leadership and organizational development vol. 38 issue 1*, 126 - 144.
- Dutton, K. (2018). Professional development: investigating the relationships between employee motives, learning opportunities, and activities. *Development and Learning in Organizations: An International Journal*, Vol. 32 Issue 5, 32-35.
- Elikplim, P., & Adomah-Afari, A. (2016). Health providers' perception of quality of care for neonates in health facilities in a municipality in Southern Ghana", . *International Journal of Health Care Quality Assurance*, Vol. 29 (8), 907-920.
- Kombo, D. K., & Tromp, D. L. (2009). *Project and Thesis Writing: An introduction* . Nairobi: Pauline Publications Africa.
- Kothari, C. R. (2009). *Research Methodology: Methods and Techniques*. New Delhi: Wiley Eastern.
- Locke, E. A., & Latham, G. P. (2010). New Directions in the Goal setting theory. . *Current Directions in Psychological Science vol 15 issue 5*, 265-268., 265 - 268.
- Mugenda, O., & Mugenda, A. G. (2003). *Research Methods, Quantitative & Qualitative Approaches.*, Nairobi: Acts Press.
- Muhammad, F., & Ullah, K. (2013). Role of Performance Appraisal System on Employees Motivation. *Journal of Business and Management .Volume 8, Issue 4* .
- Orodho, A. J. (2009). *Techniques of Writing Research Projects and Reports: In Education and Social Sciences*. Department of Educational Management, Policy and Curriculum Studies. Maseno, Kenya: Kenzia Publishers.
- Orodho, J. (2009). *Techniques of writing research project and reports in Education and Social Science*. Nairobi: Molases.
- Ramiller, N. C. (2003). Information systems and global diversity. *Information Technology & People*, 16(2), 235-249.
- Robbins, S. P., & Judge, T. A. (2012). *Organizational Behavior 15th Edition*. New Jersey: Prentice Hall.
- Saunders, M., Lewis, P., & Thornhill, A. (2016). *Research Methods for business students*. London: Financial Times.
- Schein, E., & Schein, P. (2016). *Organizational Culture and Leadership*. New Jersey : John Wiley & Sons.
- Sekaran, U. (2009). *Research Methods for Business: A Skill Building Approach, 4th Ed.* . London: John Wiley & Sons.
- Wammy, T. S., & Swamy, R. D. (2014). Leadership styles. *Advances In Management Vol. 7(2) February*, 58 -68.
- Zakkar, M. (2019). Patient experience: determinants and manifestations. *International Journal of Health Governance*, Vol. 24 (2), 143-154.
- Zaramdini, Y. (2008). Role of quality systems(ISO certification) in affect health system facilities utilization . San Paulo.: OLT.
- Zeithaml, V., Parasuraman, A., & Berry, L. (2007). *Delivering Quality Service*. New York: Free Press.
- Zhou, K. Z., & Wu, F. (2010). Technological capabilities, strategic flexibility and product innovation. *Journal of strategic management volume 31 issue 5*, 547-461.
- Zhu, J., Wang, Y., & Wang, C. (2018). A comparative study of the effects of dirreferent factors on firm technology innovation performance in different high-tech organizations. *Chinese Management Studies vol. 9 (2)*, 235-251.
- Zikmund, W. (2011). *Business Research Methods*. New York: McGraw-Hill Publishers.