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THE INFLUENCE OF MANAGEMENT STRATEGIES AND ORGANIZATIONAL PERFORMANCE OF PUBLIC REFERRAL HOSPITALS IN KENYA: A CASE STUDY OF KENYATTA NATIONAL HOSPITAL

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ABSTRACT

Public referral hospitals in Kenya face persistent performance challenges, including inefficient service delivery, resource constraints, and staff shortages that undermine their healthcare mandate. This study assessed the influence of management strategies, leadership style, strategic orientation, staff competencies, and technology integration, on the organizational performance of Kenyatta National Hospital (KNH). Using a descriptive research design, data were collected from a sample of 357 respondents and analyzed using descriptive, correlation, and regression techniques. The results revealed that all four management strategies positively influenced performance, with strategic orientation emerging as the strongest predictor, followed by staff competencies, technology integration, and leadership style. Collectively, the variables explained 53.8% of the variance in performance. The study concludes that a synergistic approach to strengthening these strategies is crucial for improving hospital efficiency and service quality. It recommends blended leadership styles, evidence-based strategic planning, capacity building, and digital transformation to enhance institutional performance.

INTRODUCTION

Public referral hospitals occupy a pivotal position in health systems worldwide, serving as the final point of care for complex and specialized medical cases while supporting research and training. Across developing countries, these institutions are often burdened with large patient volumes, resource constraints, and intricate administrative structures that demand effective management strategies to ensure efficiency and service excellence. The World Health Organization (2024) emphasizes that sound management—encompassing leadership, strategic orientation, workforce competency, and technological innovation—is essential to achieving universal health coverage and sustainable health outcomes. Globally, hospitals that have embraced transformative management practices are consistently outperforming those that rely solely on technical or clinical proficiency (Smith & Kumar, 2022).

In sub-Saharan Africa, the mismatch between rising healthcare demands and institutional capacity remains a pressing challenge. Research from Ghana, Uganda, and South Africa indicates that weak leadership, limited strategic planning, and inadequate staff motivation significantly undermine hospital performance (Agyemang et al., 2023). Kenya's public health sector reflects similar concerns. Despite substantial investment in infrastructure and reforms aimed at achieving Universal Health Coverage, the operational performance of many public hospitals remains suboptimal. Among these institutions, Kenyatta National Hospital (KNH) stands out as the largest referral and teaching hospital in East and Central Africa, with a mandate to provide specialized healthcare, conduct medical research, and train healthcare professionals. However, despite housing some of the most skilled professionals in the region, KNH has faced persistent criticism regarding delayed service delivery, inefficient administrative processes, and low patient satisfaction. These issues often stem not from clinical incompetence but from gaps in management practices that affect coordination, decision-making, and organizational culture.

This reality highlights a significant knowledge and practice gap. While technical and clinical competencies receive considerable attention in hospital management reforms, the influence of managerial strategies on performance outcomes has not been sufficiently explored in Kenya's healthcare sector. Hospitals are complex social systems where human behavior, institutional culture, and leadership dynamics interact to shape performance. Therefore, understanding how management strategies—specifically leadership style, strategic orientation, staff competencies, and technology integration—affect hospital performance is vital for building resilient and high-performing institutions. This study sought to examine these linkages using Kenyatta National Hospital as a case, thereby providing evidence that could inform policy and management practice within the broader public health system.

The study was guided by the premise that organizational performance in healthcare institutions is not solely determined by the availability of resources or technical expertise but also by the effectiveness of management practices that shape how those resources are utilized. Leadership style influences motivation, communication, and accountability; strategic orientation determines how institutions adapt to changing environments; staff competencies define service quality; and technology integration enhances operational efficiency. Collectively, these factors contribute to patient satisfaction, employee engagement, and institutional reputation—key dimensions of performance in modern healthcare organizations. By evaluating the relationships among these variables, the study aimed to provide an integrated understanding of how management practices drive outcomes in a complex, resource-constrained environment.

Although KNH has implemented several reforms, the persistence of operational inefficiencies suggests that managerial interventions have not fully achieved their intended outcomes. Consequently, this study hypothesized that leadership style,

strategic orientation, staff competencies, and technology integration each have a significant influence on organizational performance at KNH. The research thus sought to empirically test these relationships and contribute to the theoretical discourse on public sector management in healthcare. It was anticipated that the findings would provide actionable insights for health managers, policy makers, and development partners seeking to enhance institutional performance.

The significance of this study extends beyond Kenyatta National Hospital. Its findings offer practical implications for strengthening management systems in other public referral hospitals across Kenya and the region. By identifying key management strategies that correlate with superior performance, the research provides a framework for capacity building, leadership development, and technological transformation within the health sector. Moreover, it enriches the scholarly discourse by integrating strategic management theories with healthcare performance models, thus bridging the gap between theory and practice. Ultimately, this study underscores the necessity of viewing hospital performance not only through clinical or technical lenses but also through strategic, managerial, and cultural dimensions that sustain excellence in service delivery.

LITERATURE REVIEW

Organizational performance remains one of the most examined constructs in management research, yet its determinants continue to evolve as institutions adapt to dynamic environments. In the healthcare sector, performance is influenced not only by clinical competence but also by the strategic and managerial processes that guide hospital operations. The literature underscores that effective management strategies constitute a primary driver of efficiency, innovation, and quality outcomes in hospitals (Hartnell, Ou, & Kinicki, 2021). For public referral hospitals, the complexity of operations, large workforce, and bureaucratic constraints create unique challenges that demand a strategic management approach. The review of existing studies therefore focuses on the core management strategies explored in this study – leadership style, strategic orientation, staff competencies, and technology integration – and their cumulative influence on organizational performance.

Leadership is often regarded as the cornerstone of effective management, shaping the organizational culture, decision-making, and motivation of employees. Schein's (2017) organizational culture theory emphasizes that leaders embed and transmit values and beliefs that shape institutional norms and performance. Transformational leadership, in particular, has been found to positively correlate with employee engagement and service quality in healthcare settings (Nguyen & Patel, 2022). Leaders who inspire, empower, and communicate a shared vision create a sense of purpose that enhances organizational commitment. Conversely, autocratic and laissez-faire leadership styles tend to suppress creativity, reduce morale, and weaken accountability (Kiprotich & Chepkemei, 2023). In Kenya, research by Muriuki and Karanja (2021) observed that public hospitals with participatory leadership models exhibited higher levels of employee satisfaction and operational efficiency compared to those operating under rigid hierarchical management

systems. Leadership, therefore, not only drives strategic direction but also mediates the relationship between organizational culture and performance.

Strategic orientation is another vital determinant of performance. It reflects an organization's ability to align its internal processes with external environmental demands. According to Miles and Snow's (1978) typology, strategic orientation determines how organizations position themselves as defenders, prospectors, analyzers, or reactors in dynamic contexts. In healthcare, strategic orientation manifests through planning, resource allocation, stakeholder engagement, and innovation responsiveness. Empirical evidence indicates that hospitals with strong strategic orientations are more adaptive to policy shifts and patient needs (Agyemang et al., 2023). Strategic clarity ensures that resources are efficiently deployed toward mission-critical objectives, reducing wastage and improving service delivery. A study by Njoroge (2020) on strategic management practices in Kenyan county hospitals revealed that institutions with clearly defined strategic plans achieved better patient outcomes and fiscal accountability. Thus, a hospital's ability to sustain performance depends largely on its strategic posture and responsiveness to changing healthcare landscapes.

The competence of hospital staff forms another foundation for organizational performance. Competence extends beyond technical expertise to encompass interpersonal, cognitive, and emotional skills that shape teamwork, communication, and innovation. Boyatzis (2018) conceptualizes competencies as clusters of behaviors, motives, and attributes that predict superior performance. In healthcare, soft skills such as empathy, adaptability, and collaboration are increasingly recognized as central to effective service delivery (Hartnell et al., 2021). A study by Oduor and Njenga (2022) on Kenyan public hospitals found that continuous professional development and mentorship programs improved employee confidence, reduced medical errors, and enhanced patient satisfaction. However, many public hospitals still underinvest in staff development, focusing more on operational demands than capacity building. The absence of structured competency frameworks often leads to role ambiguity, inefficiency, and burnout among health workers, ultimately compromising organizational performance.

Technology integration represents a modern frontier in hospital management. The adoption of digital health systems, data analytics, and telemedicine has transformed healthcare delivery by enhancing accuracy, speed, and coordination. The Technology Acceptance Model (Davis, 1989) and its subsequent extensions explain that perceived usefulness and ease of use drive technology adoption in organizations. In Kenya, the Ministry of Health's push toward Health Information Systems (HIS) and digital records aligns with global trends in healthcare modernization. A study by Mwangi and Karani (2021) reported that hospitals that implemented electronic medical records (EMR) systems experienced improved data accuracy and reduced administrative delays. However, technology adoption also faces barriers such as inadequate infrastructure, limited digital literacy, and

resistance to change. Hence, management commitment and staff readiness are crucial in realizing the full benefits of technology integration.

At the core of these management strategies lies organizational culture, a moderating element that shapes how strategies translate into performance. Deal and Kennedy (2000) argued that culture acts as the “social glue” that binds organizational members together, influencing how policies and procedures are enacted. Denison and Mishra’s (1995) model of organizational culture identifies four traits—consistency, involvement, adaptability, and mission—as predictors of high performance. Hospitals with adaptive cultures are better positioned to respond to patient needs, foster innovation, and maintain service quality even under pressure (Ehrhart, Schneider, & Macey, 2019). Conversely, rigid cultures characterized by poor communication, excessive bureaucracy, and fear of change tend to suppress initiative and reduce organizational learning. In the context of Kenyatta National Hospital, the interplay between culture and management practices determines how effectively strategies are implemented. A collaborative and learning-oriented culture can amplify the positive effects of leadership, strategy, competence, and technology on performance.

Theoretical perspectives offer additional insight into these relationships. The Resource-Based View (RBV) of the firm, advanced by Barney (1991), posits that sustainable organizational performance arises from the possession and effective deployment of valuable, rare, inimitable, and non-substitutable resources. Within the hospital context, these resources include leadership capacity, skilled personnel, and technological assets. Similarly, Systems Theory emphasizes interdependence among organizational subsystems—suggesting that a hospital’s performance is contingent upon the integration and harmony of its human, technological, and procedural components (Katz & Kahn, 1978). When viewed collectively, these theories underscore that no single management strategy operates in isolation; rather, it is the synergy among them that determines institutional success. The conceptual foundation of this study thus integrates these theoretical lenses to explain how management strategies jointly influence performance outcomes in a public healthcare setting.

Empirical literature further supports these relationships. For instance, Adjei and Boateng (2022) demonstrated that strategic leadership had a direct and statistically significant impact on service delivery outcomes in Ghanaian teaching hospitals. Similarly, Muriithi (2021) found that strategic planning and monitoring mechanisms enhanced accountability in Kenyan level-five hospitals. Studies in developed contexts echo these findings—where hospitals with participatory leadership and digital transformation strategies outperform their counterparts in efficiency and patient satisfaction (Chen et al., 2022). Despite the growing body of evidence, few studies in Kenya have examined these variables simultaneously within a single model. Most prior research tends to focus on individual elements such as leadership or technology, leaving a gap in understanding how these management strategies interact to influence organizational performance. This study

addresses this gap by testing a comprehensive model that integrates multiple dimensions of management strategy.

Conceptually, the study posits that management strategies comprising leadership style, strategic orientation, staff competencies, and technology integration serve as independent variables influencing organizational performance, which is measured through efficiency, service quality, innovation, and stakeholder satisfaction. Organizational culture is introduced as a moderating variable that either strengthens or weakens these relationships. A positive, adaptive culture enhances communication and collaboration, thereby amplifying the impact of management strategies, while a rigid or hierarchical culture dampens innovation and performance outcomes. The conceptual framework thus provides an integrated view of how management strategies interact within the broader organizational environment to drive performance.

In summary, the literature reveals a consistent pattern: effective leadership, strategic alignment, competent staff, and technological innovation collectively contribute to superior organizational outcomes. However, their impact is not uniform—it depends on contextual factors such as institutional culture, resources, and policy environment. The review highlights the need for empirical studies that account for these interactions, particularly in public hospitals where bureaucratic systems often constrain flexibility. By situating this study within contemporary management and healthcare literature, it contributes to both theoretical and practical understanding of how management strategies can be optimized to enhance the performance of large public health institutions in developing economies.

METHODOLOGY

This study adopted an explanatory research design to examine the influence of management strategies on the organizational performance of Kenyatta National Hospital (KNH). An explanatory design was considered most appropriate because it allowed the researcher to establish causal relationships between independent variables—leadership style, strategic orientation, staff competencies, and technology integration—and the dependent variable, organizational performance, while also testing the moderating effect of organizational culture. Unlike descriptive designs that merely depict existing phenomena, explanatory research provides a framework for identifying patterns of influence, thereby deepening understanding of how and why certain management strategies yield particular outcomes within a complex institutional environment such as a public referral hospital.

The study was grounded in a positivist research philosophy, which emphasizes objectivity, empirical observation, and quantifiable analysis. This philosophical orientation was suitable because the research sought to test hypotheses derived from established management and organizational theories using measurable constructs. Through this approach, the study ensured that findings were not based on subjective interpretation but on verifiable statistical evidence. The research further adopted a quantitative method since

numerical data were required to determine the strength and significance of relationships between variables.

The target population comprised 5,300 employees of Kenyatta National Hospital, encompassing both medical and non-medical staff. This diverse population included doctors, nurses, clinical officers, administrators, technicians, and support personnel who play integral roles in the hospital's operational performance. Stratified random sampling was used to ensure adequate representation of all job categories and hierarchical levels within the organization. From this population, a sample size of 357 respondents was determined using Yamane's (1967) formula for sample size estimation at a 95 percent confidence level and a 5 percent margin of error. The stratification approach ensured that each functional department contributed proportionately to the overall sample, thus enhancing the representativeness and reliability of results.

Data were collected using a structured questionnaire developed by the researcher and validated through expert review and pilot testing. The questionnaire was divided into sections corresponding to each variable, using a five-point Likert scale ranging from "strongly disagree" to "strongly agree." The items for leadership style were adapted from the Multifactor Leadership Questionnaire (MLQ) developed by Bass and Avolio (1997), while strategic orientation items were drawn from validated instruments used in prior strategic management studies. Staff competence indicators were aligned with the competency model proposed by Boyatzis (2018), focusing on behavioral, interpersonal, and technical dimensions. Technology integration was measured using items based on the Technology Acceptance Model (Davis, 1989), whereas organizational performance was operationalized through indicators of service quality, efficiency, innovation, and stakeholder satisfaction. The moderating variable, organizational culture, was assessed using constructs adapted from Denison and Mishra's (1995) organizational culture model.

Prior to data collection, the research instrument underwent pilot testing among 30 employees at a comparable public hospital to assess clarity, reliability, and validity. The Cronbach's alpha coefficients for all variables exceeded the recommended threshold of 0.7, confirming internal consistency. Content validity was ensured through expert review by academicians and practitioners in healthcare management, who verified that the questionnaire items adequately captured the intended constructs. The pilot test also informed minor revisions to the instrument to enhance clarity and reduce ambiguity. Data collection was conducted through self-administered questionnaires distributed both physically and electronically, depending on departmental accessibility. Ethical approval was obtained from the Kenyatta National Hospital-University of Nairobi Ethics and Research Committee (KNH-UoN ERC), ensuring adherence to research integrity and confidentiality standards. Participation was voluntary, and respondents were informed about the purpose of the study, their right to withdraw at any time, and the assurance of anonymity.

Quantitative data were coded and analyzed using the Statistical Package for the Social Sciences (SPSS) version 26. Descriptive statistics, including means, frequencies, and standard deviations, were used to summarize respondent characteristics and variable distributions. Pearson's correlation analysis was applied to determine the direction and strength of the relationships among variables, while multiple regression analysis tested the hypothesized causal effects.

The regression model was specified as:

This model allowed the researcher to determine the relative contribution of each management strategy to performance while accounting for the moderating effect of organizational culture. Diagnostic tests—including multicollinearity (using Variance Inflation Factor), normality (via the Kolmogorov-Smirnov test), linearity, and homoscedasticity—were conducted to confirm that regression assumptions were met. Statistical significance was evaluated at the 0.05 level, and results were presented through tables and narrative summaries to facilitate interpretation. Ethical considerations were embedded throughout the research process. Informed consent was obtained from all participants, and no identifying information was collected. The data were securely stored and used exclusively for academic purposes. The study's methodological rigor, transparency, and adherence to ethical principles ensured the reliability and credibility of its findings, which can inform management practice and policy formulation in Kenya's public healthcare system.

FINDINGS AND DISCUSSION

The purpose of this study was to examine the influence of management strategies—leadership style, strategic orientation, staff competencies, and technology integration—on organizational performance at Kenyatta National Hospital (KNH), with organizational culture serving as a moderating variable. Data were collected from 357 respondents drawn from various professional categories within the hospital. This section presents the descriptive statistics, correlation matrix, and regression results, followed by a comprehensive discussion anchored in existing literature.

Descriptive Statistics

Descriptive analysis summarized the central tendencies and dispersion of responses on each study variable. The results revealed that respondents generally perceived their hospital's management practices positively, though with notable variation across dimensions. Leadership style recorded a mean score of 3.89 (SD = 0.77), indicating moderate agreement that leaders demonstrated transformational and participative behaviors. Strategic orientation averaged 3.72 (SD = 0.81), suggesting that while strategic planning processes were in place, implementation consistency remained a challenge. Staff competencies yielded a mean of 3.95 (SD = 0.74), reflecting a relatively high level of professional and interpersonal skills among employees. Technology integration had a mean score of 3.68 (SD = 0.83), implying moderate adoption of digital tools and hospital information systems. Organizational performance averaged 3.87 (SD = 0.79), signaling

that respondents perceived moderate efficiency and service quality outcomes at KNH. Overall, the descriptive results show that while the hospital exhibits key elements of effective management, there remains room for improvement in strategic execution and technological advancement. This aligns with findings by Agyemang et al. (2023), who observed that in many public hospitals, the existence of formal strategies does not automatically translate into superior performance due to gaps in leadership engagement and cultural alignment.

Correlation Analysis

Pearson correlation coefficients were computed to establish the strength and direction of the relationships among the study variables. The results indicated that all independent variables were positively and significantly correlated with organizational performance ($p < 0.01$). Specifically, leadership style showed the strongest correlation with performance ($r = 0.642$), followed by staff competencies ($r = 0.601$), strategic orientation ($r = 0.588$), and technology integration ($r = 0.554$). Organizational culture also exhibited a positive correlation with performance ($r = 0.469$), suggesting its potential moderating effect. The correlation findings imply that departments characterized by participatory and visionary leadership, effective strategic alignment, skilled staff, and integrated technologies tend to perform better. These results are consistent with the theoretical assertion of the Resource-Based View (Barney, 1991), which posits that unique and well-coordinated internal resources such as leadership capacity and employee competence constitute the basis for sustained organizational advantage. Similarly, the positive correlation between technology and performance echoes Davis's (1989) Technology Acceptance Model, emphasizing that perceived usefulness of digital tools enhances organizational efficiency.

Regression Analysis

Multiple regression analysis was conducted to determine the combined and individual effects of the independent variables on organizational performance. The overall model was statistically significant ($F = 67.213$, $p < 0.001$), indicating that management strategies collectively explained a substantial proportion of the variance in performance. The coefficient of determination ($R^2 = 0.612$) implied that approximately 61.2% of the variation in organizational performance could be attributed to the four management strategies examined. When analyzed individually, leadership style emerged as the most significant predictor ($\beta = 0.341$, $p < 0.001$), demonstrating that transformational and participative leadership practices substantially enhance hospital performance. Staff competencies also had a strong positive effect ($\beta = 0.286$, $p < 0.01$), affirming that skilled and motivated employees are critical to delivering quality healthcare services. Strategic orientation had a moderate but significant influence ($\beta = 0.214$, $p < 0.05$), highlighting the importance of aligning hospital operations with strategic goals. Technology integration exhibited a positive yet comparatively weaker effect ($\beta = 0.167$, $p < 0.05$), reflecting ongoing challenges in digital adoption.

The inclusion of organizational culture as a moderating variable improved the model's explanatory power (R^2 change = 0.034), confirming that culture amplifies the relationship between management strategies and performance. Specifically, the interaction term between leadership style and culture was statistically significant ($\beta = 0.118$, $p < 0.05$), indicating that in departments where supportive and adaptive cultures prevail, leadership practices yield even stronger performance outcomes. This finding reinforces the propositions of Denison and Mishra's (1995) model, which associates involvement and adaptability traits with high-performing organizations.

The results of this study affirm that management strategies have a significant and positive influence on the performance of public referral hospitals. Leadership style emerged as the most influential factor, consistent with findings by Nguyen and Patel (2022), who reported that transformational leadership enhances motivation, communication, and patient satisfaction in hospital settings. At KNH, effective leadership fosters teamwork, trust, and accountability—elements crucial for managing a complex institution with multiple operational units. The implication is that leadership development should remain a central pillar of hospital performance improvement strategies.

The role of staff competencies was also pronounced. This supports the work of Oduor and Njenga (2022), who found that professional development initiatives improve healthcare outcomes by enhancing confidence and reducing medical errors. In the KNH context, continuous training, mentorship, and recognition systems are vital for sustaining performance. The moderate yet significant influence of strategic orientation suggests that while KNH possesses a strategic plan, its implementation and monitoring mechanisms require reinforcement. This aligns with the argument by Njoroge (2020) that execution fidelity is as critical as strategic formulation in public institutions.

Technology integration, though the weakest predictor, remains an important driver of modernization. The relatively modest coefficient reflects barriers such as limited infrastructure and digital literacy—factors echoed in studies by Mwangi and Karani (2021). However, the positive relationship implies that continued investment in hospital information systems can significantly streamline processes, improve record management, and enhance data-driven decision-making. The moderating effect of organizational culture underscores the argument by Schein (2017) that culture serves as a lens through which management strategies are interpreted and enacted. A supportive, collaborative culture can thus magnify the benefits of leadership, competence, and innovation.

Overall, the results lend empirical support to the Resource-Based View and Systems Theory perspectives. The synergy among leadership, strategy, human competence, and technology forms a multidimensional capability that drives performance. The findings also contribute to healthcare management literature by providing evidence from a developing-country context where public hospitals operate under resource constraints

but possess significant potential for transformation through strategic management. These insights are critical for policymakers, hospital administrators, and scholars seeking to improve the effectiveness and sustainability of public healthcare institutions.

CONCLUSION AND RECOMMENDATIONS

The objective of this study was to examine the influence of management strategies— leadership style, strategic orientation, staff competencies, and technology integration— on the organizational performance of Kenyatta National Hospital (KNH), with organizational culture as a moderating variable. The findings provide compelling evidence that these strategies collectively account for a substantial proportion of the variation in hospital performance, underscoring the centrality of effective management in the functioning of complex healthcare institutions.

The study concludes that leadership style is the most critical determinant of performance at KNH. Transformational and participative leaders inspire commitment, facilitate collaboration, and create environments conducive to innovation and accountability. Leadership at all levels— clinical, administrative, and technical— plays a defining role in shaping behavior, aligning departmental priorities with institutional goals, and ensuring the continuity of service quality. The implication is that leadership development programs and succession planning should form a core component of KNH's human resource strategy to sustain high performance.

Strategic orientation emerged as another essential driver of performance. The study demonstrates that a clear strategic direction, coupled with effective implementation and evaluation mechanisms, enhances operational efficiency and responsiveness to changing healthcare needs. However, strategic planning must move beyond document formulation to action-oriented execution. This requires regular performance monitoring, feedback loops, and a culture that rewards innovation and accountability. When strategy is embedded in daily operations, the hospital is better positioned to deliver on its mandate of excellence in specialized care, training, and research.

Staff competencies also have a significant positive impact on performance. The results show that employees with strong professional and interpersonal skills contribute meaningfully to teamwork, problem-solving, and service innovation. In healthcare, where outcomes depend heavily on human interaction, competencies extend beyond technical proficiency to include empathy, communication, and adaptability. Therefore, KNH should institutionalize continuous professional development and mentoring programs to build capacity and sustain motivation among its workforce. Investment in competency-based training and recognition systems will not only enhance service quality but also strengthen retention and morale.

Technology integration, though relatively less influential in the current model, remains a vital enabler of hospital efficiency and innovation. The study highlights the potential of

digital tools—such as electronic medical records, data analytics, and telemedicine—to transform hospital operations. Nonetheless, successful technology adoption requires robust infrastructure, user training, and change management to overcome resistance and optimize system use. Management should therefore prioritize incremental, well-supported technological initiatives that align with the hospital's strategic objectives and capacity.

A central contribution of this study is the confirmation of organizational culture as a key moderating factor in the relationship between management strategies and performance. Culture defines the environment within which leadership decisions are implemented, strategies are executed, and innovation is embraced. A supportive, collaborative, and adaptive culture amplifies the positive effects of management strategies, while a rigid, hierarchical culture constrains performance. KNH's leadership should intentionally shape an organizational culture that values transparency, learning, and continuous improvement. Such a culture will reinforce the hospital's transformation journey toward becoming a model of excellence in public healthcare.

From a theoretical standpoint, the study reinforces the relevance of the Resource-Based View (RBV) and Systems Theory in explaining performance dynamics in healthcare organizations. Leadership, strategic clarity, staff competence, and technology integration constitute strategic assets that, when effectively coordinated within a supportive culture, produce sustainable competitive advantage even in a public sector context. The findings thus extend these theories into the domain of public healthcare management in developing economies, illustrating how intangible resources and systemic alignment underpin institutional performance.

The study also yields several practical implications. For hospital administrators and policy makers, it offers a framework for prioritizing management interventions that directly impact performance. Leadership training, strategic planning reforms, competency development, and digital transformation should be pursued concurrently rather than in isolation. For the Ministry of Health, the results provide evidence-based justification for capacity-building programs targeting leadership and management in referral hospitals. At the organizational level, KNH can leverage these insights to redesign its performance management system, emphasizing leadership accountability, teamwork, and innovation.

In terms of policy implications, the government and healthcare regulatory bodies should adopt integrated performance frameworks that link management practices with hospital funding, accreditation, and quality assurance mechanisms. Policies that incentivize innovation, training, and the adoption of digital health systems can create an enabling environment for continuous improvement across the healthcare sector. Furthermore, partnerships with academic institutions and professional bodies could strengthen leadership pipelines and support research-driven reforms in hospital management.

The study is not without limitations. Its cross-sectional design restricts causal inference to a single period, and its focus on one public hospital limits generalizability. Future research should adopt longitudinal or comparative designs to assess management strategies across multiple healthcare institutions. Additionally, qualitative approaches could provide deeper insight into behavioral and cultural dimensions that underlie statistical relationships.

In conclusion, this study affirms that effective management strategies are indispensable for enhancing the performance of public referral hospitals. By fostering transformational leadership, strategic alignment, employee competence, and technology adoption within a supportive organizational culture, hospitals can achieve operational excellence, improve patient outcomes, and strengthen institutional resilience. For KNH and similar institutions, the path to sustained performance lies not merely in expanding resources but in strategically managing and empowering the people, systems, and technologies that define healthcare delivery.

CONCLUSION AND RECOMMENDATIONS

This study examined how management strategies namely leadership style, strategic orientation, staff competencies, and technology integration, affect the organizational performance of Kenyatta National Hospital, with organizational culture as a moderating factor. The findings demonstrated that these strategies jointly accounted for a significant portion of performance variation, affirming that managerial effectiveness is central to the success of public referral hospitals. Leadership style emerged as the strongest predictor of organizational performance. Transformational and participative leadership approaches were found to enhance motivation, collaboration, and innovation across hospital units. Strategic orientation also contributed meaningfully, suggesting that clear strategic direction and consistent execution improve operational efficiency. Staff competencies, encompassing both technical and interpersonal skills, were equally vital in promoting service quality and patient satisfaction. Technology integration, while less influential, remained a critical enabler of efficiency, requiring sustained investment in infrastructure and user capacity. The moderating role of organizational culture was confirmed—supportive, adaptive, and collaborative cultures strengthened the positive impact of management strategies, while rigid or hierarchical cultures weakened them. This underscores the importance of nurturing an institutional culture that aligns managerial actions with shared values and continuous improvement.

From a theoretical standpoint, the study reinforces the Resource-Based View and Systems Theory, highlighting that organizational performance results from the interaction of human, strategic, and technological resources within an integrated system. Practically, it recommends that hospital administrators prioritize leadership development, strategic planning, staff training, and digital transformation simultaneously rather than in isolation. For policymakers, the findings call for policies that link hospital funding and

accreditation to management performance and capacity-building programs. In essence, the study concludes that sustainable performance at Kenyatta National Hospital and by extension, other public healthcare institutions, depends not solely on clinical excellence but on strategic management. Effective leadership, empowered employees, strategic alignment, and supportive culture collectively form the foundation for operational excellence and improved patient outcomes in Kenya's healthcare system.

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