

**Factors affecting the Implementation of Strategic plan in Health Care:**

**A casa Study of Machakos County Hospitals**

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**A research project submitted to the Department of Business Administration  
in the School of Business and Economics in Partial fulfilment of the requirement for the  
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## DECLARATION

This project is my original work and has not been presented for any other award in any university or institution of higher learning.

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## ABSTRACT

Strategic planning and its implementation in Kenya at the Ministry of Health is an element of the on-going public sector reforms designed to improve the delivery of health care services. However, this implementation has been facing different challenges. This study sought to investigate these challenges with specific reference to hospitals in Machakos County. The objectives include: To assess how strategic plan awareness affects strategic plan implementation at Machakos County public hospitals; to assess the effect of human resource staffing norms in strategic plan implementation at Machakos County public hospitals and to determine the extent to which organization structure affect strategic plan implementation at Machakos County public hospitals. The study employed a correlation research design in assessing the effect of various challenges on implementation of health sector strategic plans in Kenya. The target population comprised of officers at different management levels in Machakos County public hospitals. Stratified random sampling was adopted where all officers with personal identification number based on different strata had an equal opportunity of taking part in the study. Major strata which were considered included doctors, clinical officers, nurses and support staff. Data was collected using a semi-structured questionnaire that included open-ended questions as well as closed-ended questions. The collected data was analyzed using descriptive and inferential statistics. The study findings revealed that staff awareness; human resource staffing norms and organizational structure have a significant effect on the implementation of strategic plans of hospitals in Machakos County. For purpose of policy, the study recommends that, hospitals should be managed in such a way that there will be adequate advocacy in relation to strategic planning so as to meet their objectives. Such strategies will create awareness among staff members making them part of the process of implementing the strategic plan. All stakeholders should be engaged in the implementation of strategic plans aimed at reducing resistance from the stakeholders in the process of strategy implementation. The management should therefore ensure that employees with relevant specialties are employed to attend to patients and oversee strategy implementation to enable the hospitals attain their objectives. Hospital management should ensure that there is smooth flow of information pertaining strategy implementation. This will ensure that there is no communication breakdown which hinders implementation of strategic plans. Sufficient resources should be allocated to ensure set strategies and activities are implemented. This coupled with proper coordination and monitoring and evaluation will go a long way in implementing strategic plans in the health sector.

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## **DEDICATION**

I would like to dedicate this work to my husband Dr. Stewart S. Kabaka and our wonderful children, Lorna Khamsa and Michael Mujenje for the tolerance during the time I was committed to working on the project. You have been my best cheerleaders. Thank you.

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## **ABBREVIATION / ACRONYMS**

GOK	Government of Kenya
KERS	Kenya Economic Recovery Strategy
HR	Human Resources
MDGs	Millennium Development Goals
MOH	Ministry of Health
MOMS	Ministry of Medical Services
MOPHS	Ministry of Public Health and Sanitation
NHSSP	National Health Sector Strategic Plan
KHPF	Kenya Health Policy Framework
AOP	Annual Operational Plans
HMT	Hospital Management Team
HMC	Hospital Management Committee
ICT	Information Communication and Technology
IT	Information Technology
KEMSA	Kenya Medical Supplies Agency
MoMS	Ministry of Medical Services

## **DEFINITION OF TERMS**

### **Strategic Planning**

Strategic planning refers to the process of defining a clear road map that is aimed at leading an organization from its current position to the desired position in the future.

### **Strategic Implementation**

This is undertaking various interventions aimed at attaining the strategic plan of an organization.

### **Kenya Health Policy Framework (KHPF)**

Kenya Health Policy Framework (KHPF) is a blueprint that is meant to develop and manage health services in Kenya. It highlights the strategic imperatives in the long-run and health sector agenda in Kenya.

### **Kenya vision 2030**

Kenya vision 2030 is the development programme of the nation that is to be achieved before 2030.

## **CHAPTER ONE**

### **INTRODUCTION**

This chapter contains background to challenges affecting implementation of strategic plan in health sector. It also contains the problem statement, research objectives and research questions, purpose of the study, significance of the study, limitations and the scope of the study.

#### **1.1 Background**

##### **1.1.1 Importance of Strategic Planning**

There are endless definitions and applications the term strategy. Thompson (2015) defines strategy as the action plan of the management to grow the organization and satisfy customers, remain competitive in the market, engage in different organization related activities, and achieve the set goals of the organization. The same applies to the term strategic planning. However, regardless of the different definitions and applications, they are all in complementary ways. Steiner (2009) considers strategic planning to be systematic efforts by an organization to come up with the basic organization objectives, purposes, strategies, and policies. It entails having a detailed plan to implement strategies and policies aimed at achieving the organization's purposes and objectives. Bateman and Zeithml (2013) consider planning as being a systematic process in the process of making decisions with regards to the activities that a person, group or company intend to pursue in future. It offers guidelines that are based in relation to the future activities of the organization. Hax and Majluf (2006) support this position as they define strategic planning as an organization intended to meet the specification of the strategy of an organization and the assignment execution responsibilities.

Drucker (1954) believes that strategic planning involves management on the basis of plans, and that is it is an analytical process and mainly focuses on coming up with optimal

strategic decisions. Ansoff (2010) puts strategic planning into concept as being a process that seeks a better relation between the products or services of an organization and its increasingly dynamic markets. Strategic management can be looked at as both a science and art for coming up, evaluating, and implementing decisions in all areas of the organization to achieve its objectives. This means that it focuses on integrating marketing, management, operations, finance, research and development and information system to meet the goals of the organization (David, 2013).

Strategic management is used hand in hand with strategic planning. However, strategic management is applied more in strategic planning in academic circles. In some areas, strategic management means strategy development, implementation, and evaluation, while on the other hand; strategic planning entails strategic formulation only (David, 2013). Strategic management is seen as a set of actions and decisions that are based on the process of developing, implementing, and controlling plans that are meant to achieve the mission, vision, and strategic objectives within the organization environment. Strategic plan implementation forms part of the process of strategic management and is considered as the process that transforms the developed strategic plan into several actions and ensures that the mission, vision, and strategic objectives of the organization are achieved successfully as planned (Pearce and Robinson, 2011).

In the recent past, strategic planning and strategic implementation have been observed as to be a key requirement for superior business performance (Kaplan and Norton, 2000). McCarthy and Minichiello (2006) in their study noted that that the strategy of any organization offers a central direction and purpose to its operations and employees. The main goal of strategic planning is to offer guidance in setting priorities and strategic intent (Kotter, 2006). It allows manners to focus on the organization in general as well as how the departments

interrelate, instead of looking for each department separately. This way, strategic planning offers a framework that improves coordination and controls the operations of the organization. It also offers a basis for other management functions.

Steiner (2009) concluded that strategic planning is inseparably interlinked into the entire hierarchy of management. Kotter (2006) observed that the strategic planning could be applied as a way of repositioning and transforming the organization. Thompson, Strickland and Gamble (2007) suggested that the role of good strategy making is to create a market position that is strong enough. It also enables the organization to produce successful performance despite unforeseeable events, potent competition, and internal difficulties.

Quinn (2010) has it that, strategies that are well formulated helps organize and allocate resources of the organization into a unique and viable stance based on its relative internal competencies and shortcomings, anticipated changes in the environment, and contingent moves by intelligent opponents. Porter (2010), highlighted the proposition that strategy should better reflect the nature of competition and resources within a given business market or the environment. Porter's Five Forces model was created to assist organizations to achieve profitability objectives. Strategic planning originated in the 1950s and was very popular in mid-1960 to mid-1970, and it was widely believed to be the solution for all problems facing organization during this period (David R. 2003).

### **1.1.2 Challenges Facing Implementation of Strategic Planning**

Strategic decisions were observed to result in a restructuring of the firm that should yield superior competitive performance. Despite the importance of strategic planning in the organization, the process of formulating a strategy that is consistent as well as making the strategy work has proved to be challenging to the organization. There are several factors that



influence the success of strategy implementation, ranging from the people who execute the strategy to the systems or mechanisms in place for coordination, control and support (Li et al., 2008).

Kaplan and Norton (2001) in their study showed that the ability of an organization to execute the strategy is a bigger management issue than determining the right vision and quality of strategy itself. In another study by Cobbold and Lawrie, (2001) it was observed that eighty percent of directors responded that they had the right strategies, but only fourteen percent of them thought the strategies were implemented well. According to the White Paper of Strategy Implementation of Chinese Corporations in 2006, strategy implementation had the most significant management challenge which all kinds of corporations faced at that moment.

The study reported that eighty-three percent of the organization failed to implement their strategy smoothly, and only seventeen percent believed that they had a consistent strategy implementation process. In addition, there is increasing recognition that the most important challenges of strategic management are not related to strategy formulation, but to strategy implementation and that the high failure rate of organizational initiatives in a dynamic business environment is mainly as a result of poor implementation of new strategies (Hrebiniak, 2015).

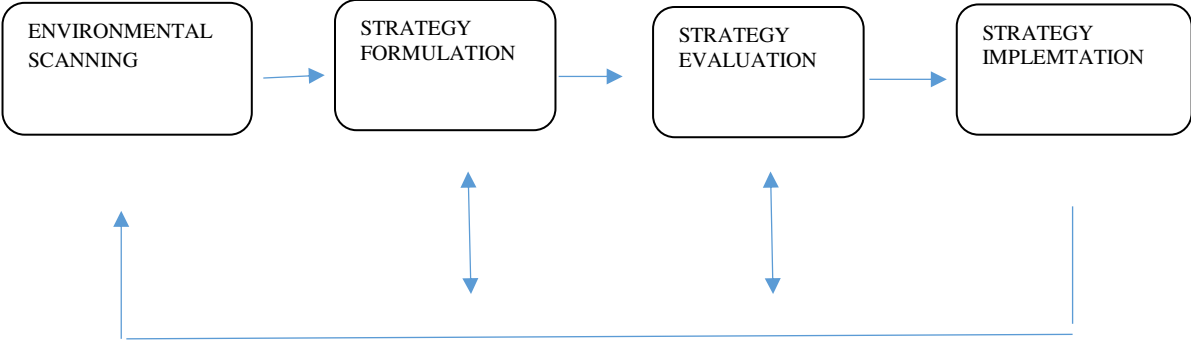
In another study by Cobbold and Lawrie, (2001) it was observed that 80% of directors indicated they had the right strategies but only 14% of them thought the strategies were implemented well. According to the White Paper of Strategy Implementation of Chinese Corporations in 2006, strategy implementation had the most significant management challenge which all kinds of corporations faced at that moment. The survey reported that 83 per cent of the surveyed companies failed to implement their strategy smoothly, and only 17 per cent felt that they had a consistent strategy implementation process. In addition, there is growing

recognition that the most important problems in the field of strategic management are not related to strategy formulation, but rather to strategy implementation, and that the high failure rate of organizational initiatives in a dynamic business environment is primarily due to poor implementation of new strategies (Hrebiniak, 2015).

Strategic management has three stages namely; formulation, implementation and evaluation. Strategic formulation includes developing a vision and mission with identifying the organizational external opportunities and threats as well as determining internal strengths and weakness. It also includes establishing long term objectives, generating alternative strategies and choosing a particular strategy to pursue. Strategies determine long term competitive advantage (David, 2013). Strategy implementation often includes developing a strategy, supportive culture creating an effective organization culture, redirecting marketing efforts, preparing budgets, developing and utilizing information systems and linking employee's compensation to organizational performance. Implanting strategy means mobilizing employees and managers to put formulated strategies into action. Successful strategic implementation hinges upon managers ability to motivate employees (David, 2013). Strategy evaluation is the final stage in strategic management. Managers desperately need to know when particular strategies are not working well. Strategy evaluation is the primary means for obtaining this information. There are three fundamental strategy evaluation activities that include reviewing external and internal factors that are the basis for current strategies, measuring performance and taking correction. Strategy evaluation is needed because success today is not a guarantee that there will be success tomorrow. Strategic management is based on the belief that an organization should continually monitor internal and external events and trends so that timely changes can be as needed (David 2003). He further argues that the strategic management

process does not end when the firm decides what strategy or strategies to pursue. There must be a translation of strategic thoughts into strategic action. Translation is easier if managers and employees understand the business, feel a part of the company and through investment in strategy formulation activities get committed. Even the most technically perfect strategic plan will serve no purpose if not implemented. Change comes through implementation and evaluation not through the plan. A technically imperfect plan that is implemented well will achieve more than the perfect plan that never gets off the paper on which it was typed, (David 2003).

According to Wheelen and Hunger (2002), firm strategy passes four stages namely environmental scanning, strategy formulation, strategy implementation and strategy evaluation as seen in the figure 1.1. Investigating why even the best designed strategies are questionable opens a doubt about inconsistencies between formulation and implementation at first and later inconsistencies between strategy implementation and performance measurement. Formulation phase includes mission, goals and business policy determination while implementation includes activities, budgeting and procedures.



**Figure1.1 Components of Strategic Management Process**

Source: Wheelen and Hunger, 2002

### **1.1.3 Strategic Planning in Health Sector**

The Kenya government is geared towards accelerated development and a more efficient of delivery of services to the public. With this stand, it focuses on women, youth, and marginalized regions and groups. The main initiative that the government has come up with to achieve this is the Kenya Vision 2030 Second Medium Term Plan. Under this vision, every ministry is expected to come up with a five-year strategic plan detailing the priority projects that need to be implemented within this period so as to enable the government to meet its general responsibilities to the public. The Kenya Vision 2030 is a strategic plan that was created to make Kenya a prosperous and competitive nation with high-quality living standards by 2030 (Hossain 2013).

In Kenya, the public hospitals have been the basis of the provision of healthcare in the country catering for more than 80% of the population (GOK, 2014). The first National Health Sector strategic plan (NHSSP I, 1999–2004) re-stated the Kenya Health Policy Framework (KHPF's) strategic imperatives and articulated a large number of strategies and activities to continue and strengthen the reform process. In 1994, the Government of Kenya (GOK) approved KHPF as a blueprint for developing and managing health services. This influenced the long-term strategic imperatives and the agenda for Kenya's health sector. To operationalize the document, the Ministry of Health (MOH) developed the Kenya Health Policy Framework Implementation Action Plan and established the Health Sector Reform Secretariat (HSRS) in 1996. In 1997 Ministerial Reform Committee (MRC) was established to spearhead and oversee the implementation process, rationalization program within the MOH was also initiated Muga, et al (2015).

The Health Sector Strategic focus in Kenya is guided by the overall Vision 2030 that

aims to transform Kenya into a globally competitive and prosperous country with a high quality of life by 2030 through transformation into an industrialized, middle income country. Following the launch of the Vision 2030 and the promulgation of the Kenya 2010 Constitution, the Health sector developed a health policy in line with the two key government policy and legal frameworks and also the recommendations arising from the end term review of the KHPF (1994-2010).The Ministry of Health adopts a top down approach in strategic planning and implementation. The plans are made at the Ministry of Health Headquarters through the National Health Sector Strategic Plan (NHSSP) and are devolved downwards to the counties and eventually to the hospitals. The first National Health strategic plan (NHSSP 1) was implemented between 1999-2004.This was followed by NHSSP II which was to be implemented from 2005-2010. However, this was reviewed in 2008 and the Ministry come up with a strategic plan that was to be implemented from 2008-2012, commonly known as “Reversing the trends”, the second NHSSP II, 2008-2012. The Second Health Sector Strategic Plan (NHSSP-II 2005 – 2010) was based on a renewed effort to improve health service delivery. The objective of the plan in the health sector was to provide an equitable and affordable Health care system of the highest possible quality. This second National Health Sector Strategic Plan (NHSSP II) was formulated with the aim of reversing the downward trends in health indicators observed during the implementation of the first strategic plan (NHSSP I, 1999–2004), applying the lessons learned and searching for innovative solutions. NHSSP II was to re-invigorate the Kenya Health Policy Framework (KHPF) elaborated in 1994 (Hossain, 2013).This study analyses the challenges of strategic plan implementation in Machakos County Public Hospitals. The study centers on three large Hospitals, Machakos Level 5 Hospital, Kangundo Level 4 Hospital and Kathiiani Level 4 Hospitals.

## **1.2 Statement of the Problem**

Strategic plan implementation in Health Sector in public hospitals in Machakos County remains a challenge. The Constitution of Kenya, 2010 demands that every Kenyan must attain the highest attainable standards of health care. As shown in the background strategic plans are important. However, there is evidence that they are not fully implemented. An empirical survey has confirmed that in the last three years, about fifty-seven percent of the firms did not manage to execute their respective strategic initiatives (Allio, 2005). At some point, the percentage of companies that have not accomplished their strategic goals reaches up to 90% (Pindelski and Mrówka, 2011).

Strategic implementation is important for administration and general performance of hospitals, but as seen in the background the implementation is never fully achieved. Several studies done to confirm that implementation phase is never done fully, (Allio, 2005; Pindelski and Mrówka, 2011). Past studies have looked at challenges affecting implementation of strategic plans in the health sector (Kalali 2011, Kamau 2011, Meyer 2012, Waithaka 2013 and Alali 2015). However, none of these studies has included key variables such as the role of staff awareness and the staffing norms in their analysis. This study brought these variables on board while investigating challenges that affect strategic plan implementation in health sector in public hospital in Machakos County.

## **1.3 General Objective**

**1.3.1** This study sought to analyze the challenges affecting the health sector strategic plan implementation in Machakos County Public Hospitals.

### **1.3.2 Specific Objectives**

1. To assess how strategic plan awareness affects strategic plan implementation at Machakos County Public Hospitals.
2. To assess the effect of human resource staffing norms in strategic plan implementation at Machakos County Public Hospitals.
3. To determine the extent to which organization structure affect strategic plan implementation at Machakos County Public Hospitals.

### **1.4 Research Questions**

1. Strategic plan awareness does not have a significant effect on strategic plan implementation at Machakos County Public Hospitals.
2. Human resource staffing norms do not have a significant effect on strategic plan implementation at Machakos County Public Hospitals.
3. Organization structure does not have a significant effect on strategic plan implementation at Machakos County Public Hospitals.

### **1.5 The Significance of the Study**

This study will be of value to various groups ranging from government policy makers, management of public hospitals and scholars.

The study will inform government policy makers on planning issues with a view of strengthening the monitoring and evaluation function of the public health sector. It will inform best practice to be replicated to other sectors of the economy and implementation of future

strategic plans.

The management of public hospitals stands to benefit from this study because it will shed more light on challenges facing implementation of the strategic plan in public hospitals. Such challenges if attended to by Government (both National and County) will facilitate implementation of strategic plan and hence realization of intended goals.

### **1.6 Justification of the Study**

Gross inequalities in health status are politically, socially, economically, and morally unacceptable. Health care strategic plan implementation should be done with support of the top management. This study is good in policy formulation in Machakos County. This can also be extrapolated to other counties in the country.

### **1.7 Assumptions of the Study**

The Health Sector Strategic Plan was implemented according to plan and there was no interruption in the devolved system. No political or natural causes interfered with the implementation.

### **1.8 Scope of the Study**

This study sought to investigate various challenges affecting health sector strategic plan implementation. The study was conducted at Machakos County Public Hospitals. The target group was health worker with personal numbers working in Machakos Level 5, Kangundo Level 4 and Kathiiani Level 4 hospitals. The study population was 647 health workers. Data was collected within one month. In terms of variables the study considered strategy implementation as the dependent variable while strategic plan awareness, human resource



staffing norms and organization structure were the independent variables.

### **1.9 Study Limitations and Delimitations**

Primary data collection was the main source of obtaining the relevant information. However, not all respondents were comfortable with providing information as they are unsure on the use of the information that they provide. However, the researcher assured the respondents that the information sought could be used for academic purposes and that utmost confidentiality would be guaranteed. Other respondents found it difficult to take time off their busy work schedules as they viewed the survey taking up too much of their valuable time. The researcher addressed this challenge by taking minimum time administering questionnaires.

This study was also limited to public hospitals in Machakos County and as such the study findings can not apply to other Counties in Kenya. There is therefore a need to conduct a similar study focusing on all public hospitals in Kenya.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This chapter discusses the literature related to strategy implementation. It reviews the critical points of current knowledge including substantive findings, as well as theoretical and empirical contributions to challenges of strategy implementation. The review is conceptualized under the objective of the study of assessing the challenges of strategy implementation. The chapter flows from the theoretical foundations of the study, through strategy implementation and challenges affecting strategy implementation. It will capture in challenges of strategy implementation and measures to deal with strategy implementation.

On the basis of the recommendations from several studies, it is evident that strategic planning has great implication to organizations. At the same time, the implementation of strategic planning has proved to be a challenging responsibility to the organization. There is the need for effective implementation of strategic plans so as to meet the desired benefits. Below are the theoretical and empirical aspects in support of the relationship between strategic planning and strategic implementation.

#### **2.2 Theoretical Literature**

This section looks at various theories related to the area of study. The theoretical framework of this study is based on systems, contingency and institutional theories.

##### **2.2.1 Systems Theory**

According to the system theory, organizations that produce an output are regarded as systems. They are not closed systems now that they are operated in open environments where there is a constant exchange of information and materials (Porter, 2003). In this context,

hospitals can be regarded as open systems which are mainly affected by their environment. They tend to interact with the environment around them in a move to secure the resources they need in order to adapt, grow and survive. The activities and policies of hospitals are often influenced by factors in the external environments.

Systems Theory is based upon the analytic division of the natural world into environment and systems. This division constitutes the major foundational, axiomatic philosophical assumption of Systems Theory. On the one hand there is an infinitely complex 'environment', and on the other hand there are self-replicating systems. Systems are engaged in processing information. Systems also model the environment, and can respond adaptively to environmental changes. Systems are actually defined in terms of processes, but sometimes processes coincide closely with physical structures so that a cell's environment might (approximately) consist of everything outside the cell, including other systems such as other cells, the whole organism and other organisms. For a human organization such as an autonomous hospital, the environment external to the system might include physical aspects such as climate and geography, but also other organizational systems such as politics, the law and the media. Management systems (where they occur) are a form of social organizational system which is engaged in modeling the organization it manages. For a system of management, everything other than itself is 'environment', but the organization that is being managed constitutes the most immediate environment Charlton and Adras (2013).

From the systems theory, every organization that produces output is a system of some sort. Organizations' are not closed systems, but operate in open environments with constant exchange of materials and information Porter, (2003). Hospitals are open systems strongly influenced by the environment in which they operate McKee and Healy, (2002). They interact

with the surrounding environment to secure the resources needed for survival, adaptation and growth. Their policies and activities are constantly influenced by external factors related to the population they serve, patterns of prevailing diseases, public expectations, changes in the hospital and healthcare systems, and the broader socio-economic and political environment. In the most basic definition a system is a group of interacting components that conserves some identifiable set of relations with the sum of the components plus their relations (i.e., the system itself) conserving some identifiable set of relations to other entities (including other systems). In the words of Macy (1991.), a system is less a thing than a pattern.

### **2.2.2 Contingency Theory**

According to contingency theory, organization needs are satisfied better when the organization in question is properly designed, and its style of management suits both its activities and the nature of its work. In most cases, the implementation process is considered as integration and interdisciplinary of management disciplines. As a practice, the implementation process focuses on the organization performances (Bourgeois and Brodwin, 2004). This means that for an organization to successfully implement its strategic plans, it needs an integrative vision of its activities and process in the structure and function of the organization. This means that the implementation process should not be narrowed to particular events and process.

A contingency theory is an organizational theory .That claims that there is no best way to organize a corporation, to lead a company, or to make decisions. Instead, the optimal course of action is contingent (dependent) upon the internal and external situation. The contingency theory holds that there is no one best way to manage an organization and that any way of organizing is not equally effective unless the design of an effective organization and its

subsystems fit with the environment and between its subsystems Galbraith and Nathanson, (1973). The three core elements of structural contingency theory are the environment, the organizational structure and organizational performance.

Contingency theory is guided by the general orienting hypothesis that organizations whose internal features best match the demands of their environments will achieve the best adaptation. The needs of an organization are better satisfied when it is properly designed and the management style is appropriate both to the tasks undertaken and the nature of the work group. Often implementation activity is seen as miscellaneous, interdisciplinary and integration of management disciplines, and as a practice, implementation focuses on the performance of organizations Bourgeois and Brodwin, (2004). Therefore, for a comprehensive inference of the total or final effects, a manager requires an integrative vision of the events in the function and structure of the organization if each event is implemented and takes place. Implementation process, therefore, should be conceptually broad and not narrowed to specific events.

### **2.2.3 Institutional Theory**

The institutional theory focuses on how current organizations depend on their environments in their process of making decisions (Lehner, 2004). What the formal structure of the organization tends to influence is decision-making process of the organization. This means that the organization structures can be invested with meanings that have been socially shared and hence to add on the objective functions of the organization, can be used to communicate information related to the organization to both internal and external stakeholders (1977). Looking at the formal structure from this perspective provided studies on organizations the chance to explore different insights related to the consequences and insights of organization

structure. For example, the process of production level supply chain metrics and measures impact the processes of the organization that includes the services offered by the organization (Mogikoyoa, Magutub, and Doloc, 2017).

Institutional thinking emphasizes the dependence of modern organizations on their environments Lehner, (2004). Rowan, (1977) offered a radical departure from conventional ways of thinking about formal structure and about the nature of organizational decision-making through which structure was produced. Their analysis was guided by a key insight, namely: formal structures have symbolic as well as action generating properties. In other words, structures can become invested with socially shared meanings, and thus, in addition to their 'objective' functions, can serve to communicate information about the organization to both internal and external audiences Kamens, (1977). Explaining formal structure from this vantage point offered organizational researchers the opportunity to explore an array of new insights into the causes and consequences of structure.

Strategy is fundamentally about choices. It reflects a preference for a future state or condition and determines how best to get there. In doing so, strategy confronts adversaries, allies, and other actors; and it addresses resource and organizational issues. Even then, some factors simply will remain beyond the control of the organization or maybe unforeseen as plan implementation progresses. Instructional thinking, therefore, makes organizations and their activities to evolve and adapt to confront emerging changes.

### **2.3 Empirical Literature**

Kalali, et al (2011), did a study on why strategic plans implementations fail in the health service sector in Iran. This research aimed at identifying effective factors on the failure of

strategic decisions implementation in the Iranian health service sector. The results were tested by Confirmatory factor analysis. To execute factor analysis, a questionnaire was designed. In order to identify the factors that impeded effective strategy implementation, analysis of relevant academic articles was done. The following selection criteria was used for inclusion in the analysis. Reviewing the literature and using experts' opinion, 16 variables were identified. Using exploratory and confirmatory factor analysis, variables were categorized in the form of 4 factors namely: context dimension, content dimension, operational dimension and structural dimension as effective factors on the failure of strategic decisions implementation in Iranian health service sector .The results showed that the most important reason for strategic decisions failure in Iranian health service sector was content dimension. In the research results, two types of strategy implementation studies were found: those highlighting the importance of individual factors for strategy implementation and those that emphasized how such factors interrelate and form a strategic implementation environment. In the first stream of research nine recurring, individual factors that influence strategy implementation were found. They were: the strategy formulation process, the strategy executors, the organizational structure, the communication activities, the level of commitment for the strategy, the consensus regarding the strategy, the relationships among different departments and different strategy levels, the employed implementation tactics, and the administrative system in place. The results of this research are in harmony with previous researches in the literature and confirm that the most important reason for strategic decisions failure in Iranian health service sector is content dimension. Such result is important since on the other extreme, contextual dimension has the lowest importance on describing the reasons of managerial decisions failure. Operational and structural dimensions are located between these extremes. However, the study did not look at the role of staff

awareness and staffing norms in strategic plan implementation.

Kamau, (2011) studied Institutional factors influence strategic planning implementation in government hospitals in Kitui County, Kenya. The study made use of a descriptive survey research design now that the study was intended to collect information in relation the attitudes and opinions of the respondents towards the topic of study. One of the main considerations was that the data collected was consistent and complete. Advanced techniques of data analysis such as hypothesis testing using chi-square were used. The study made several conclusions: that the organization structure, human resource, resource adequacy and, monitoring and evaluation (M&E) all influences implementation of strategic plans. However, the study did not look at the role of staff awareness and staffing norms in strategic plan implementation. From the findings, the study came up with a number of recommendations. First of all the officers in charge of Management of Government Health Facilities should be trained by the government on the organizational structures which favor successful implementation of strategic plan. The Government should allocate adequate funds for strategic plan implementation in health facilities. The Ministry of health should have frequently monitor and evaluate the process of strategic planning implementations in the government facilities. However, the study did not look at the role of staff awareness and staffing norms in strategic plan implementation.

Waithaka, (2013), carried out a study on challenges that are normally experienced during the process of strategic planning implementation in public and private hospitals in Nairobi County. The study reviewed the literature on what was considered to be challenges of implementation of formulated strategy by organizations. The study applied stratified random sampling method. The respondents included top management in public and private hospitals in Nairobi, and they were expected to give an insight into some of the strategy implementation



challenges. The study used descriptive cross-sectional survey. This study employed descriptive statistics to analyze the data obtained. Results showed that the main factors affecting strategy implementation in public and private hospitals included; organization structure, strategy formulation, communication, organizational changes, coordination of activities, resource insufficiency and organizational culture. Organizational structure affected the implantation of strategic planning to a great extent. The study showed that the majority of the hospitals have organization structures in place though the current structures may as well interfere with the intended strategy; even though structures are well coordinated, tasks are divided efficiently, and they are clear. Also the decisions on how to coordinate activities, relationships are clear. Most of the structures have not been matched to the strategy in place and size of the structure is not adequate to cover all strategies. Based on the research finding, the commitment of the top management to the strategic direction of the organization is one of the main factors. The management is expected to show how willing it is to support the implementation process for it to be successful. The board forms one of the main subjects when it comes to the implementation process. It is expected to discuss how to assess organization effectiveness in relation to guiding execution process. However, the study did not look at the role of staff awareness and staffing norms in strategic plan implementation

## **2.4 Knowledge Gap**

From the reviewed literature, it can be noted that a number of studies on strategy implementation focused mainly on organization structure, organization culture, resources, top - level management in communication and leadership and uncontrollable external factors as key variables ( Kalali at al 2011, Kamau 2011, Meyer et all 2012, Waithaka 2013 and Alali 2015) .

However, none of the reviewed studies captured key variables such as strategic plan awareness, and the effect of human resource staffing norms on strategic plan implementation. This study intends to bring these variables on board to assess their role on strategic plan implementation in public hospitals in Kenya.

### 2.5 Conceptual Frame Work

Mugenda and Mugenda, (2003) defined an independent variable as a variable that is manipulated to determine how it affects or influences another variable. The independent variables in this study are strategic plan awareness, staffing norms, top and mid-level managers and organization structure. The dependent variable is strategic plan implementation

Figure 2.1, shows how the variables are conceptualized to be related.

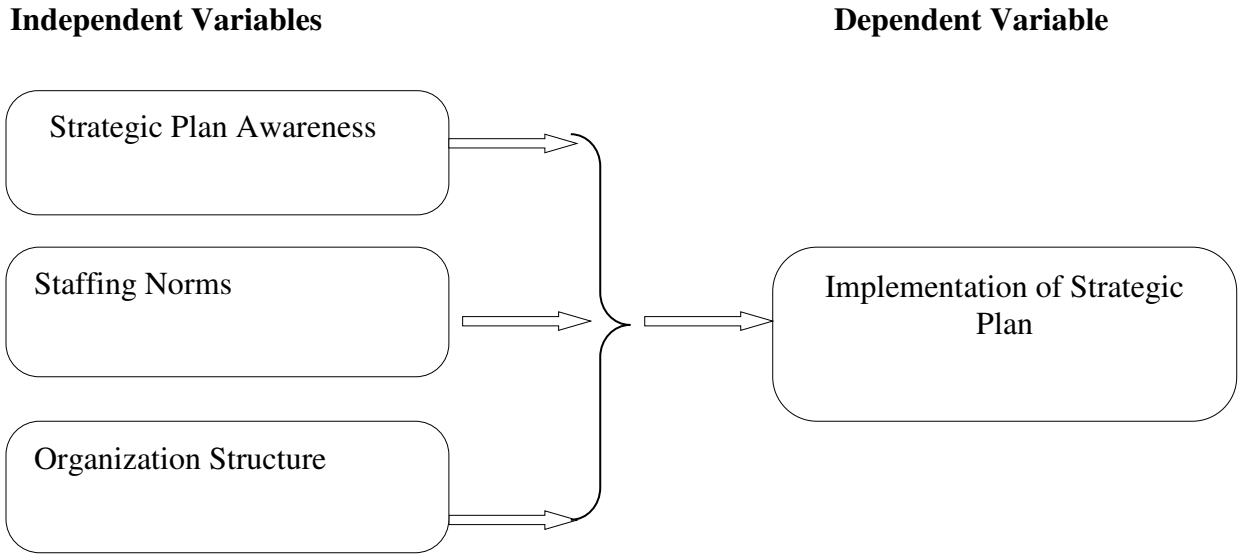


Figure 2.1 Determinants of strategic implementation

Source: Author, 2016

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.1 Introduction**

This chapter is a comprehensive description of the research methodology including a description of the research design, instrumentation as well as data processing and analysis techniques, the target population, sample frame and sample size . The main roles of research methodology are assisted in the identification and development of logical procedures and arrangements needed for the study and lays emphasis on objectivity, accuracy, and validity of the underlying procedures. This study adopted a correlation research design. The adopted research design allowed the researcher to test the hypotheses using quantitative data. The correlational research design was considered appropriate because of the relationships amongst the study variables, including strategic plan awareness, human resource staffing norms, and organization structure.

#### **3.2 Research Design**

This study adopted a correlation research design. This approach provided the researcher with an opportunity to develop a broad-based understanding of the effect of various challenges on implementation of health sector strategic plans in Kenya. The adopted research design allowed the researcher to test the hypotheses using quantitative data. The correlational research design was considered appropriate because of the relationships amongst the study variables, including strategic plan awareness, human resource staffing norms and organization structure. Further still data was collected at one point in time hence crosssectional in nature.

### 3.3 Target Population

According to Orodho (2004) a target population is the total individuals, elements or groups to be studied. The target population for this study was 647 health workers, essentially staff with personal identification numbers working in Machakos Level 5, Kangundo Level 4 and Kathiiani Level 4 Hospitals.

### 3.4 Sampling Frame

The distribution of the 647 staff with personal numbers across the three hospitals under study is as shown in the Table 3.1.

**Table 3.1: Categories of Staffing Levels at various Hospitals in Machakos County**

<b>Staff category</b>	<b>Machakos Level 5</b>	<b>Kangundo Level 4</b>	<b>Kathiiani Level 4</b>	<b>Total</b>
<b>Doctors</b>	89	20	10	119
<b>Clinical officers</b>	28	8	6	42
<b>Nurses</b>	257	69	30	356
<b>Support staff</b>	75	34	21	130
<b>Total</b>	449	131	67	647

Source: County Health Records Office.

Staff was stratified into various categories namely: Doctors, Clinical Officers, Nurses and Support Staff. The distribution of staff in each category in the three hospitals is as shown in Table 3.1. A list of staff in each category was obtained from County Health Records Office in each of the three hospitals. As shown in Table 3.1, the staff categories at various hospitals in

Machakos County indicate a total of 647. Machakos County has 119 doctors distributed as follows: 89 in Machakos Level 5 Hospital, 20 in Kangundo Level 4 Hospital and 10 in Kathiiani Level 4 Hospital. Table 3.1 also shows the distribution of the other carders.

### 3.5 Sample Size and Sampling Procedure

By adopting the existing staff stratification, the Fiser Formula was used to arrive at the sample size. As seen in Table 3.2, the sample size was selected from each stratification of the staff according to the staffing.

As per recommendations of several authors (Shenoy et al., 2002; Sakaran, 2006; Cooper & Schindler, 2006; Mugenda & Mugenda, 2003), the following formula was used to determine the sample size.

$$N = \frac{Z^2 pq}{d^2}$$

**Where:**

N = the desired sample size (if the target population is greater than 10,000)

p = the proportion in the target population estimated to have characteristics being measured. This is placed at 90% (0.9).

q = (1-p) i.e. the proportion in the target population estimated not to have characteristics being measured, (1-0.9) = 0.1.

d = the level of statistical significance set. For this study this was placed at 0.05

Z = the standard normal variant at the required confidence level. In this study, this was placed at 95% level of confidence.

In the current study, the proportion that is assumed to have the characteristics of the interest (population) was placed at 90% that is  $p = 0.9$  (Kothari, 1990; Shenoy, 2002; Nunally, 1978). In other words the researcher is confident that as high as 90% of all possible samples taken from the target population should embrace the characteristics of that population. The researcher was also conscious of the fact that lower proportions of  $p$  lead to a bigger sample, which might render the research cumbersome to conduct while higher proportions increase the risk of bias (Sakaran, 2006; Cooper & Schindler, 2006).

Using the formula specified above, the following sample size for populations with more than 10,000 units was obtained:

$$n = \frac{z^2 pq}{d^2}$$

$$n = \frac{(1.96)^2 (0.9)(0.1)}{(0.05)^2} = 138$$

$n = 138$  *sample size for target population greater than 10,000*

In the current study, the target population was less than 10,000 (i.e. 647); therefore, calculating the final sample estimate ( $n_f$ ) required the following formula:

$$n_f = \frac{n}{1 + \frac{n}{N}}$$

Where;

$n_f$  = The desired sample size (when the population is less than 10,000).

$n$  = The desired sample size (when the population is more than 10,000).

$N$  = The estimate of the population size (i.e. 647 in the case of the current study).

Applying the formula therefore yielded the following results:

$$n_f = \frac{138}{\left(1 + \frac{138}{647}\right)} = \frac{138}{1 + 0.2133} = 113$$

$$n_f = 108$$

**Table 3.2 Sample Size Selection**

	<b>Machakos Level 5</b>		<b>Kangundo Level 4</b>		<b>Kathiani Level 4</b>	
	<b>Hospital</b>		<b>Hospital</b>		<b>Hospital</b>	
	<b>Target</b>	<b>Sample</b>	<b>Target</b>	<b>Sample</b>	<b>Target</b>	<b>Sample</b>
Doctors	89	15	20	4	10	1
Clinical Officers	28	5	8	2	6	2
Nurses	257	44	69	12	30	5
Support Staff	75	13	34	6	21	4
<b>Total</b>	<b>449</b>	<b>77</b>	<b>131</b>	<b>24</b>	<b>67</b>	<b>12</b>

Source: County Health Records Office.

**Note:**

Target Population: 647

Sample: 113

As seen in Table 3.1, staff in public hospital was in various categories. This study adopted the stratification and selected a sample size of 113 from each stratum (Table 3.2) based on the target population of each category of staff. Simple random sampling technique was used within the stratum to eliminate bias as it accorded all the members of the population equal probability of being included in the sample (Mugenda, 2008).

### **3.6 Data Collection Instruments and Data Collection Procedure**

According to Kothari (2012), while deciding about the data to be used for a study, the researcher should keep in mind both primary and secondary sources of data. This research relied on primary data which was collected using a semi-structured questionnaire.

The responses to the questionnaire were designed on a 5- Point Likert scale of measurement of strongly agree, agree, neither agree nor disagree, disagree and strongly disagree. Questionnaires are useful and helpful in gathering information that is unique to individuals, such as attitudes or knowledge also in maintaining participants' privacy because participants' responses can be anonymous or confidential. The questionnaire was divided into five sections. Section I captured background information, Section II strategic plan awareness issues, Section III human resource staffing norms, Section IV organization structure issues and Section V strategy implementation measurement.

In order to enhance cooperation from the respondents, the researcher presented a letter of introduction to the respondents stipulating the intent of the study. After the initial contact was made, the questionnaires were self-administered. The researcher however explained the aim of the research and a copy of the questionnaire was left and picked after a while once the respondent filled it.



### **3.7 Pilot Test**

According to Kothari (2004), a pilot test refers to the model of the main study and it highlights possible weaknesses of the questionnaires and the sampling techniques. According to Gall and Borg, (1996) the number of respondents for the pilot study has to be between nine to ten percent of the sample population. The pilot study involved fourteen employees who were randomly selected. Data was then analyzed and results were based on to modify and improve the questionnaire used in the main study.

#### **3.7.1 Validity of the Study Instrument**

According to Mugenda and Mugenda (2003), validity refers to the level to which results of a study actually represent the phenomenon under study. To ascertain the content and criterion validity of the instrument used in the study, the study consulted with the supervisors and other professionals in the field. The instruments used in collecting data were tested to verify both internal and external validity.

#### **3.7.2 Reliability of the Study Instrument**

This study employed the Cronbach alpha coefficient which is the most widely used and recommended test of reliability. Using the Cronbach alpha coefficient, reliability ranges from 0 to 1 with higher values indicating greater reliability. The reliability threshold is alpha coefficient 0.7 for each study construct (Kimberlin & Winterstein, 2008).

### 3.8 Data Processing and Analysis

The data generated was checked, edited, organized and coded to reduce the mass of data into a form suitable for analysis. The coded data was then analyzed using (SPSS).

Both descriptive and inferential statistics were used in analyzing data. According to Krathwohl (2013), descriptive statistics refers to data analysis that is based on in describing and summarizing data for simpler interpretation. Inferential statistics results in study conclusions that are more precise and informed about a population. Descriptive statistics involve frequencies and percentages, means and standard deviations. The main inferential statistics used in this study was regression and the findings were presented in form of tables and graphs and formed the basis for the research findings, conclusion and recommendations.

The effect of each of the challenges on health sector strategy implementation was illustrated using the following linear equation:

$$Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \varepsilon$$

Where

Y = Implementation of Strategic Plan

X<sub>1</sub>=Awareness of Strategic Plan

X<sub>2</sub>=Staffing Norms

X<sub>3</sub>= Organization Structure

### 3.9 Measurement of Variables

From section 3.8,

$$Y = f(X_1, X_2, X_3)$$

Where:

Y= Implementation of Strategic Plan

This was measured by the respondent's perception with regard to the percentage of implementation of strategic plan by the relevant public hospital.

X<sub>1</sub>= Strategic Plan Awareness was measured by Likert Scale of 1-5 where 5= Strongly Agree, 4= Agree, 3= Undecided, 2= Disagree and 1=Strongly Disagree

X<sub>2</sub> = Staffing Norms

Was measured by Likert Scale of 1-5 where 5= Strongly Agree, 4= Agree, 3= Undecided, 2= Disagree and 1=Strongly Disagree

X<sub>3</sub> = Organizational Structure

Was measured by Likert Scale of 1-5 where 5= Strongly Agree, 4= Agree, 3= Undecided, 2= Disagree and 1=Strongly Disagree

## CHAPTER FOUR

### DATA ANALYSIS AND INTEPRETATION OF RESULTS

#### 4.1 Introduction

This chapter presents the analysis of data collected from the administered questionnaires.

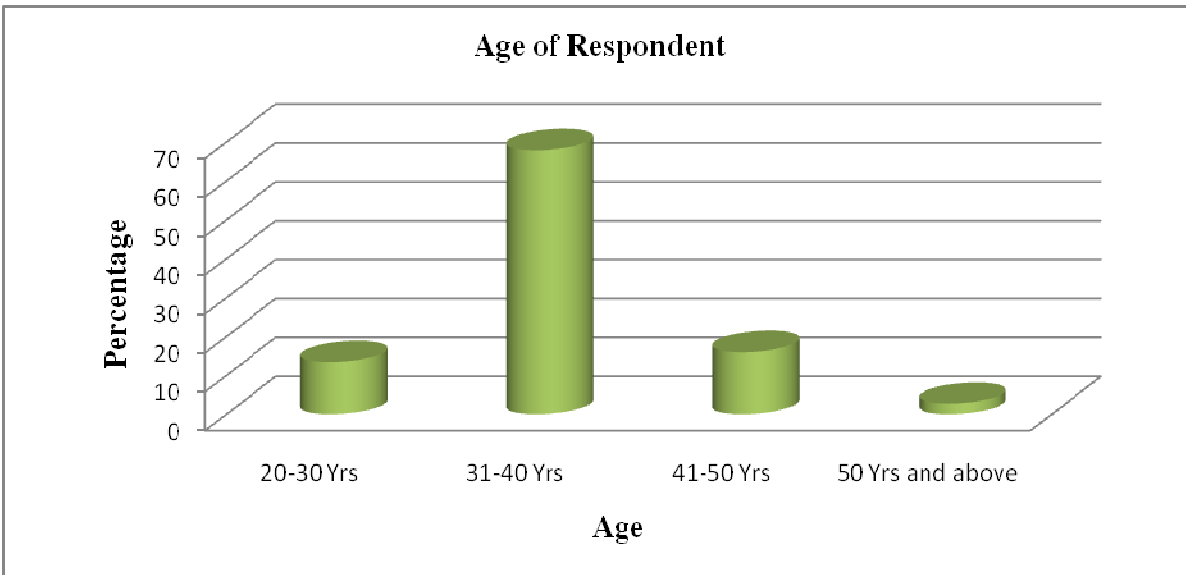
#### 4.2 Response Rate

113 questionnaires were administered but only 100 were completed and this represents an 88% response rate.

#### 4.3 Background Information

##### 4.3.1 Age of Respondents

The distribution of respondents in terms of age is as shown in Figure 4.1.



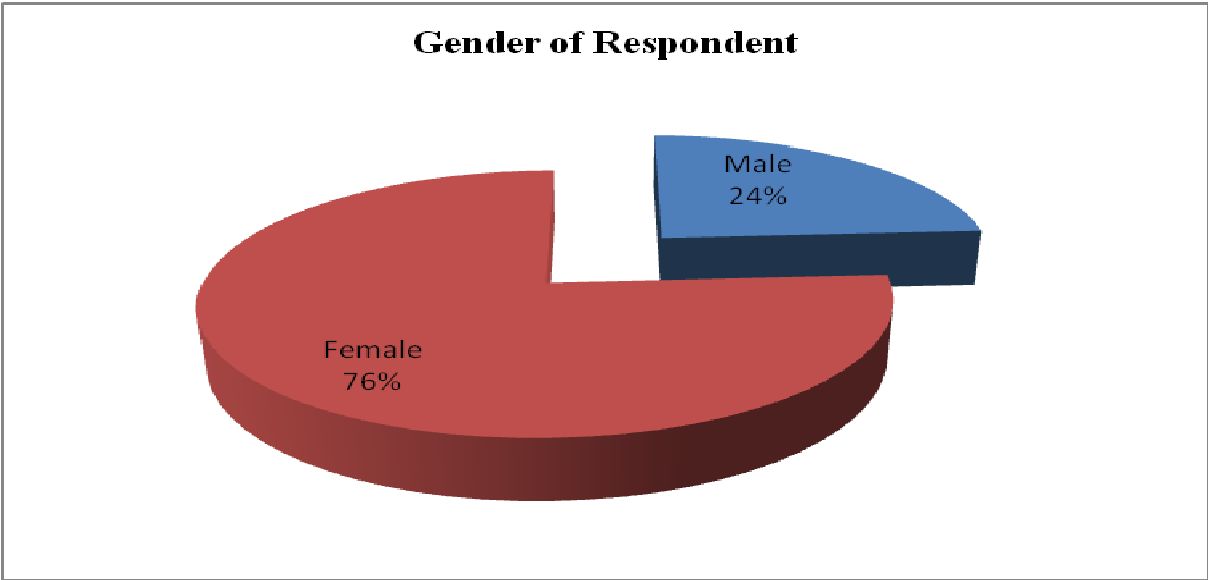
**Figure 4.1: Age of Respondents**

**Source: Survey Data, 2017**

Most of the respondents were between 31-40 years, which represented about 67.9% of the total population. The second highest age group was between 41-50 years as presented at 16%. Only 2.7% of the respondents were aged 50 years and above as shown in Figure 2 bellow. The findings, therefore, imply that most of the respondents were mature enough.

**4.3.2 Gender of Respondents**

Figure 4.2 shows the composition of the respondents in terms of gender.



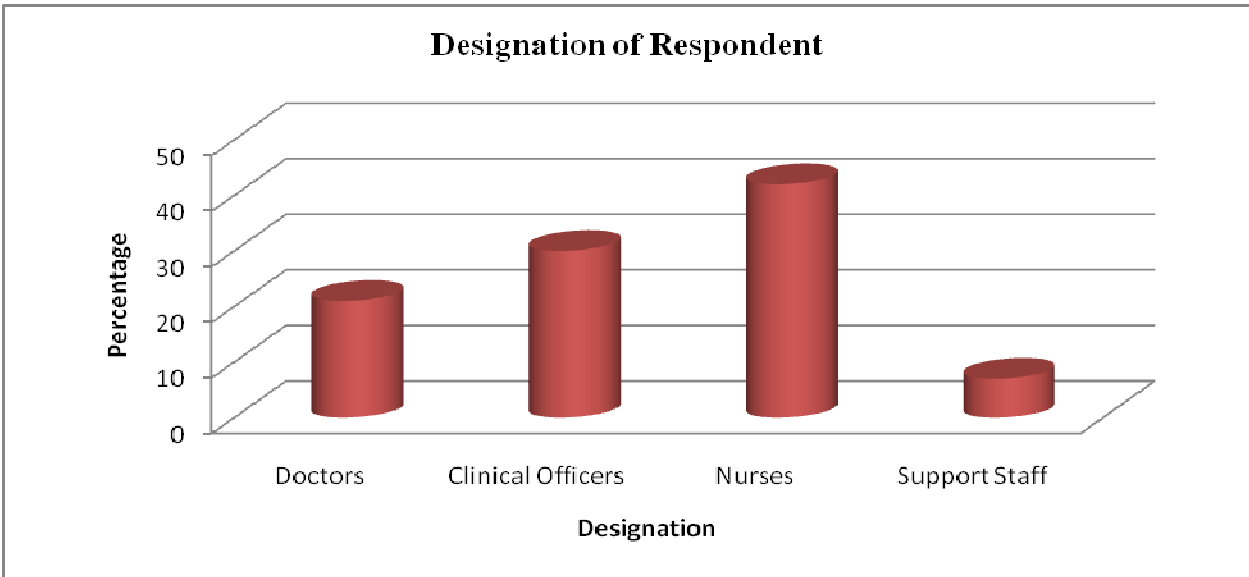
**Figure 4.2 Gender of Respondents**

**Source: Survey Data, 2017**

Figure 4.2 shows that majority (76%) of the participants were female while 24% were male. This was because generally, the population of females is higher than males in hospital.

### 4.3.3 Designation of Respondents

The distribution of respondents as per their designation in the hospitals is as shown in Figure 4.3.



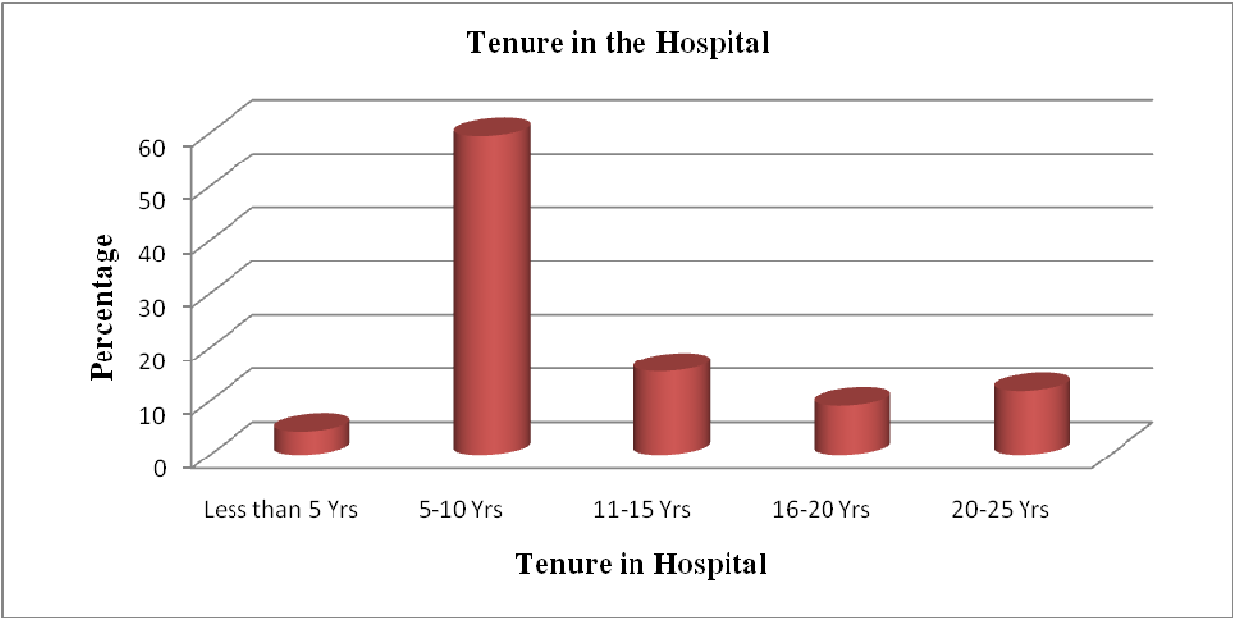
**Figure 4.3 Designation of Respondents**

**Source: Survey Data, 2017**

The findings clearly reveal that majority (42%) of the respondents in this study were nurses. Clinical officers and doctors were also represented at 30% and 21% respectively. Support staff were the least represented at 7%. This is attributable to the fact strategy implementation in a hospital set up should be spearheaded by senior members of staff.

**4.2.4 Tenure at the Hospital**

An analysis of how long a respondent has worked in the hospital is depicted by Figure 4.4.



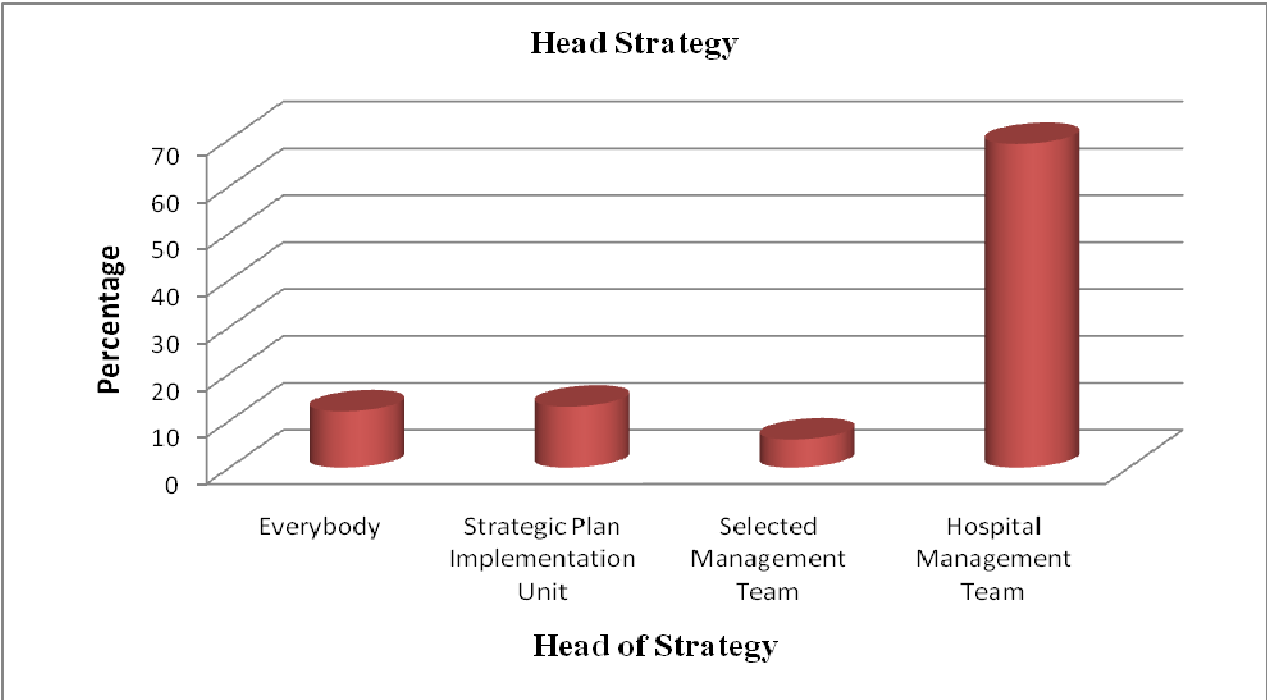
**Figure 4.4 Respondent’s tenure at the Hospital**

**Source: Survey Data, 2017**

59.4% of the respondents indicated that they had worked in their hospital for a period of between 5-10 years then followed by those who had worked for a period of between 11-15 years as presented at 15.5%. This therefore implies that majority of the respondents had worked for their hospitals for a period long enough to enable them comment on the issues under study.

**4.3.5 Head of Strategy at the Hospital**

A probe among respondents on who they thought was in charge of strategy implementation revealed the information shown in Figure 4.5.



**Figure 4.5 Head of Strategy at the Hospital**

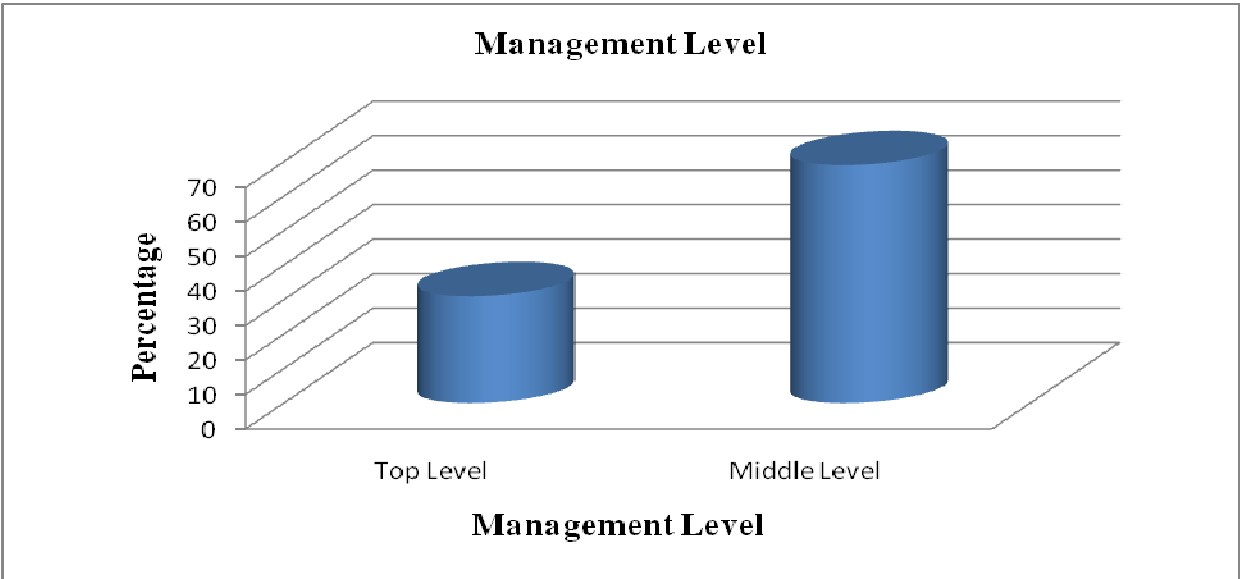
**Source: Survey Data, 2017**

Respondents were further required to indicate who was in charge of strategy implementation in their hospitals. It is evident that hospitals in Machakos County had hospital management teams (HMT) with a responsibility to oversee strategy implementation. However, a significant 12% of the respondents indicated that everybody was in charge of strategy implementation in hospitals.



**4.3.6 Management Level at the Hospital**

Respondents indicated that they worked at management levels as shown in Figure 4.6.



**Figure 4.6 Management Level at the Hospital.**

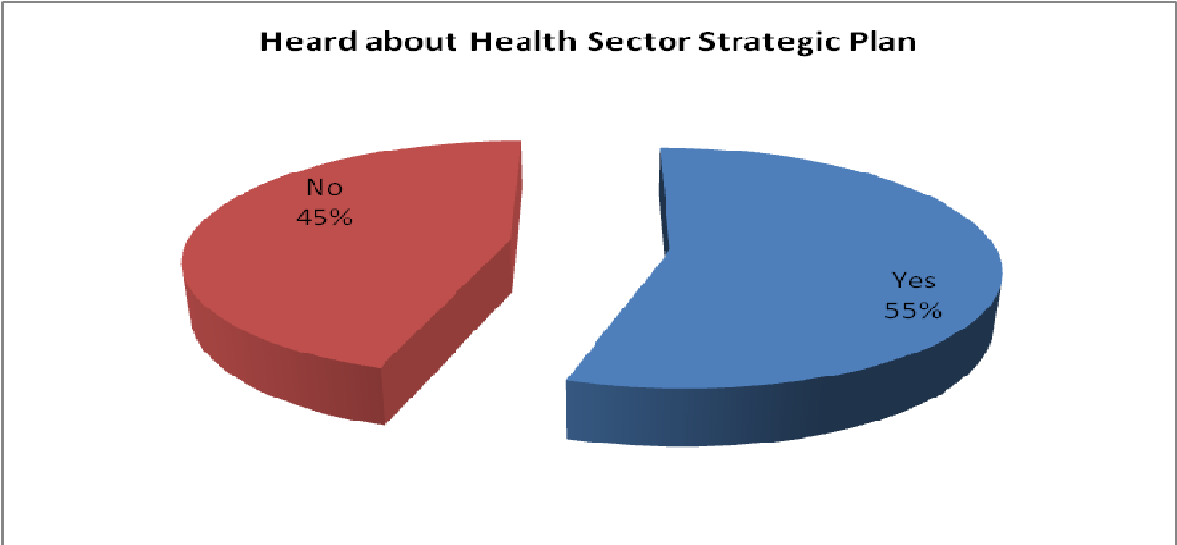
**Source: Survey Data, 2017**

Respondents were further required to indicate the level of management at which they worked. The findings revealed that majority (69%) of them worked at middle level management while the remaining 31% of them worked at top level management. This therefore implies that both levels of management were adequately represented because we have few employees at top management level.

**4.4 Strategic Plan Awareness**

**4.4.1 Heard about Health Sector Strategic Plan**

Respondents were required to indicate whether or not they had heard about strategic planning in the health sector in Kenya. The responses are summarized in Figure 4.7.



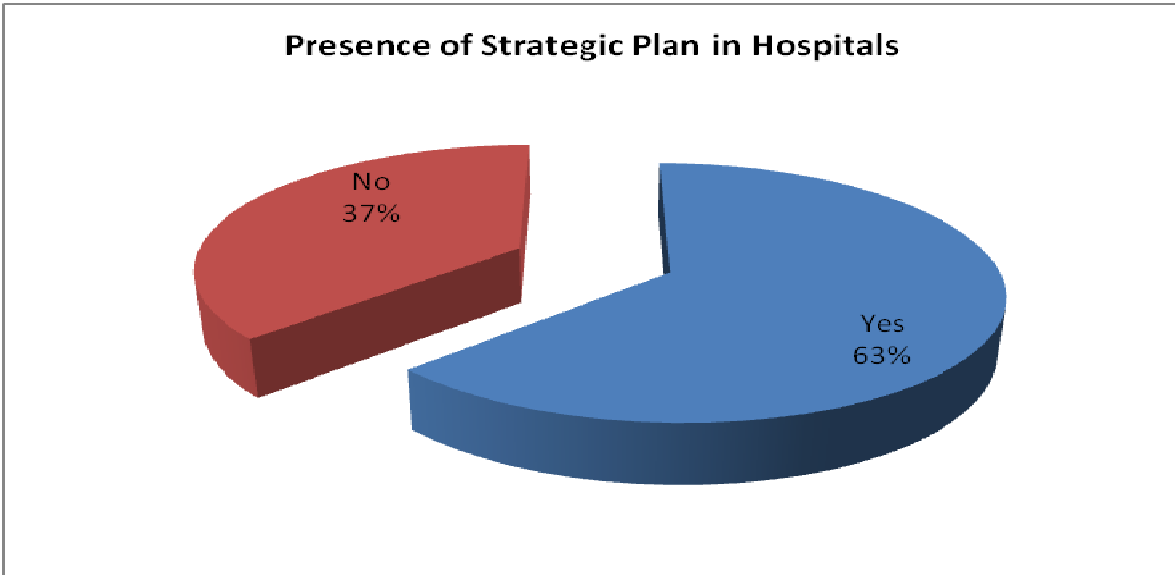
**Figure 4.7 Heard about Health Sector Strategic Plan**

**Source: Survey Data, 2017**

55% of the respondents were in agreement that they had heard about health sector strategic plans. The remaining 45% of them indicated otherwise.

**4.4.2 Presence of Strategic Plan in Hospitals**

Respondents were further required to indicate whether they had seen strategic plans in their hospitals. The responses are as shown in Figure 4.8.



**Figure 4.8 Presence of Strategic Plan in Hospitals**

**Source: Survey Data, 2017**

The research findings reveal that 63% of the respondents indicated that their hospitals had strategic plans while the remaining 37% of them indicated otherwise. The findings are as presented in Figure 4.8.

#### **4.4.3 Staff Awareness and Strategy Implementation**

Respondents were asked to share their agreement levels with various staff awareness levels and how it influence strategy implementation in their hospitals. Items were measured on a five point Likert-Type scale. The findings are as summarized in Table 4.1.

**Table 4.1 Descriptive Statistics on Staff Awareness**

<b>Item</b>	<b>Mean</b>	<b>Std. Deviation</b>
The hospital has a strategic plan	3.8152	.39647
All staff are aware of strategic plan for the hospital	2.1546	.86935
All staff are involved in the implementation of the strategic plan	2.1771	.81391
The health sector strategic plan is fully implemented in this hospital	2.7813	.80827
Advocacy could change the implementation of the strategic plans implementation in the Hospital	4.2083	.12312
Feedback loop can improve the implementation of strategic plan	4.3579	.17524
Orientation of staff on the health sector strategic plan will improve the implementation of the strategic plan in regular training on strategic plan implementation	4.4105	.23336
<b>Mean Score</b>	<b>3.4149</b>	

**Source: Survey Data, 2017**

Means of between 2.1546 - 4.4105 and standard deviations of between 0.12312 - 0.86935 were registered as shown in Table 4.1. It is clearly shown from the research findings that orientation of staff on health sector strategic plans will improve strategy implementation (4.4105). The

findings further reveal that establishment of a feedback loop (4.3579) and increase of advocacy (4.2083) also enhance strategy implementation in hospitals. It is however clear despite the presence of strategic plans in many of the hospitals in Machakos County, majority of the staff members are little informed about their presence and involved in their implementation to a very small extent. They are therefore a reserve for a few top level members of staff.

#### 4.4.4 Sharing of Progress on Strategy Implementation

Respondents were further required to indicate the frequency at which information on progress of strategic plan implementation was shared to them. Their responses are as shown in Figure 4.9.

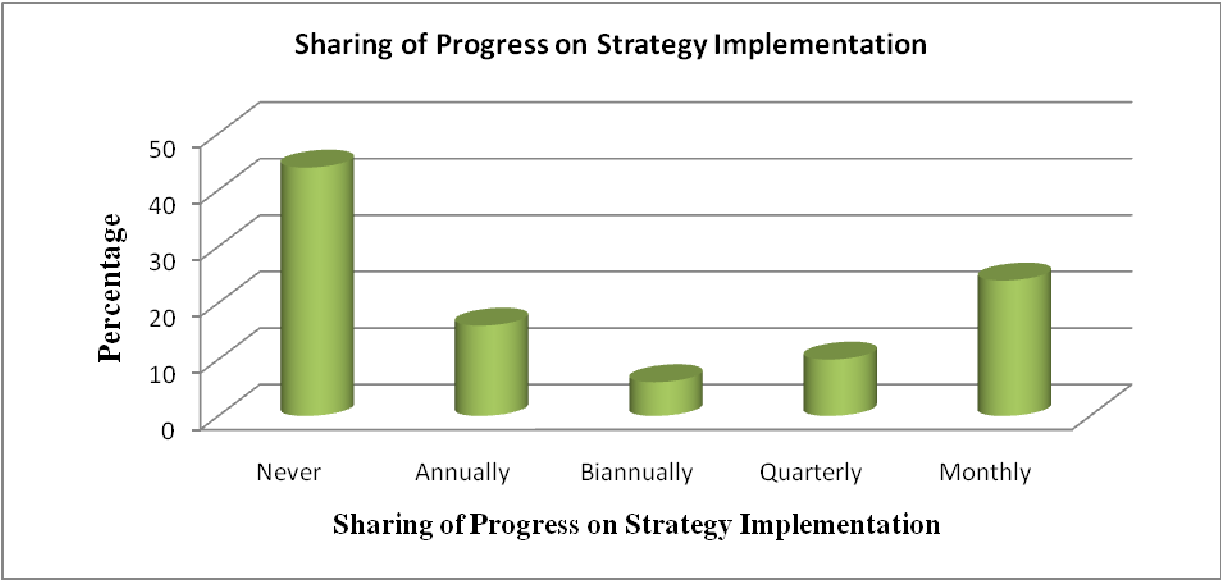


Figure 4.9 Frequency of sharing information on Strategic Plan Implementation

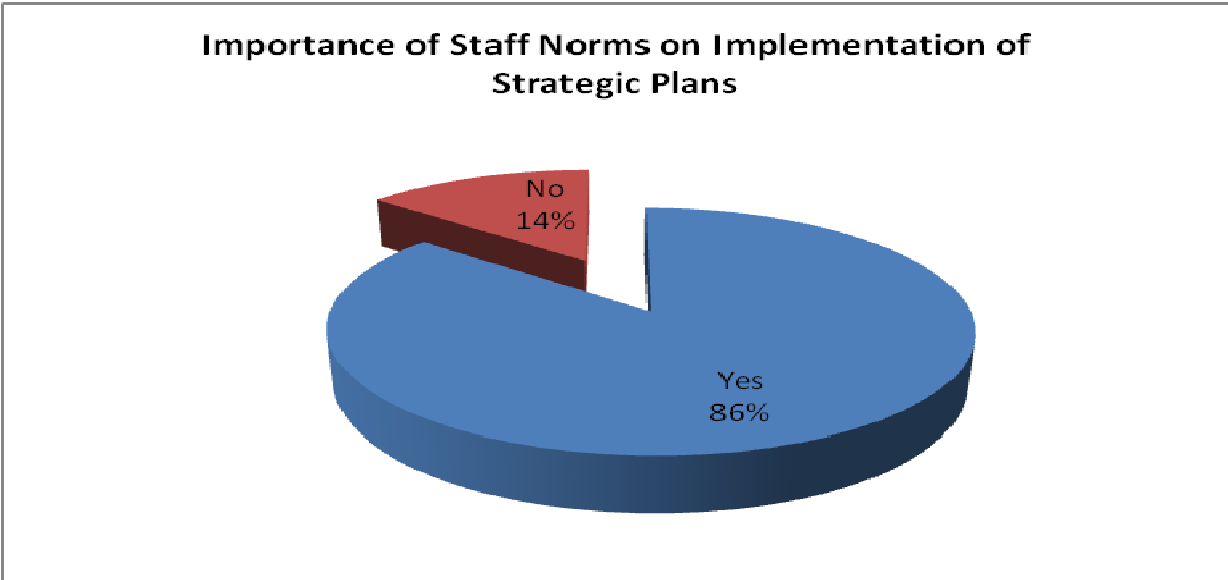
Source: Survey Data, 2017

Research findings in Figure 4.9 show that progress on strategic plan implementation in majority of the hospitals was never shared to them as represented at 44%. Only 16% of them agreed that information on progress of strategic plan implementation was shared annually.

**4.5 Staffing Norms**

**4.5.1 Importance of Staff Norms on Implementation of Strategic Plans**

Respondents were required to indicate whether staffing norms were important in implementation of strategic plans in their hospitals. Responses are summarised in Figure 4.10.



**Figure 4.10 Importance of Staff Norms on Implementation of Strategic Plans**

**Source: Survey Data, 2017**

The findings in Figure 4.10 show that 86% of the respondents were in agreement that the staffing norms were important in strategic plan implementation despite having inadequate staff working in hospitals. The remaining 14% of them indicated otherwise. Respondents were further required to highlight the cadre of staff lacking in their hospitals: Key cadres mentioned

include: Specialist doctors, consultants, dieticians, nurses, counsellors, medical laboratory technicians, medical officers psychologists among others.

#### 4.5.2 Staffing Norms and Implementation of Strategic Plans

Respondents indicated their agreement levels with various staffing norms aspects and how they influenced strategic plan implementation in their hospitals. Items were measured on a five point Likert-Type scale. Results are as shown in Table 4.2.

**Table 4.2 Descriptive Statistics on Staffing Norms and Strategy Implementation**

<b>Item</b>	<b>Mean</b>	<b>Std. Deviation</b>
Support from top management is necessary for successful implementation of strategic plan of the hospital	4.8737	.55048
For successful implementation of strategic plan adequacy staffing levels for all carders is necessary	4.7396	.68433
For successful implementation of strategic plan, staff training on the same is necessary from time to time	4.7895	.65061
Successful implementation of strategic plan requires the involvement of all hospital staff	4.6947	.77286
Institutional adherence to human resource practices and policies is key in successful implementation of strategic plan	4.7579	.57825
<b>Mean Score</b>	<b>4.7711</b>	

**Source: Survey Data, 2017**

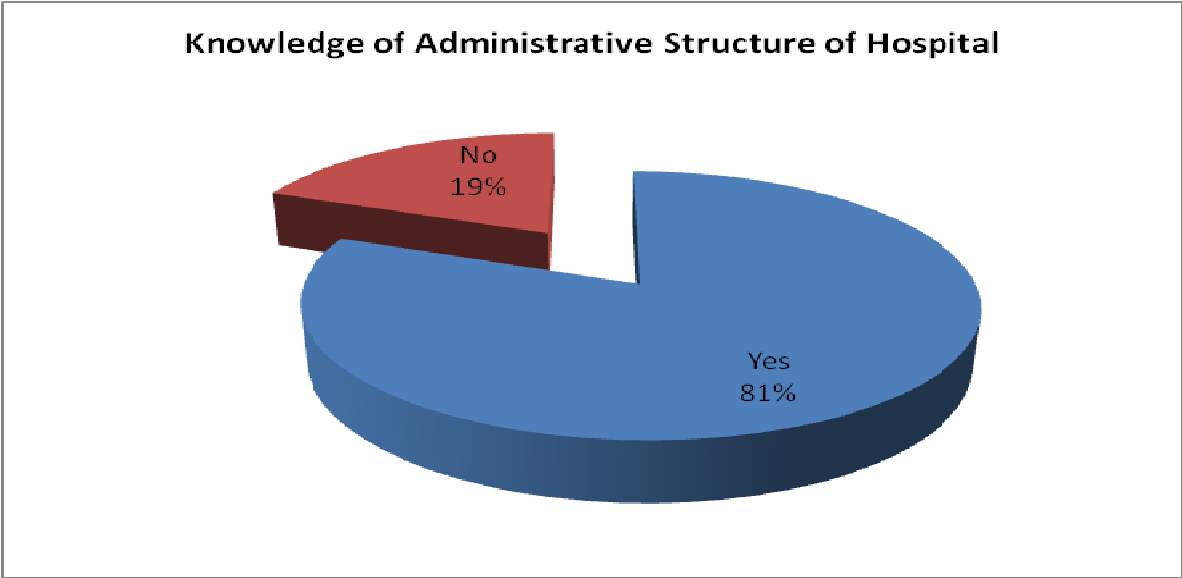
Means of between 4.6947- 4.8737 and standard deviations of between 0.55048 - 0.77286 were registered as shown in Table 4.2. The study findings show that majority of the respondents were categorical that support from top leadership is key for successful strategy implementation

in hospitals (4.8737). Respondents further indicated that training of staff strategic plan is paramount for successful implementation of the strategic plans (4.7895). Institutional adherence to human resource practices and policies is also key to successful implementation of strategic plans (4.7579).

**4.6 Organizational Structure**

**4.6.1 Knowledge of Administrative Structure of Hospital**

A probe among respondents as to whether they knew the administrative structure of their hospital yielded information as summarized in Figure 4.11.



**Figure 4.11 Knowledge of Organizational Structure**

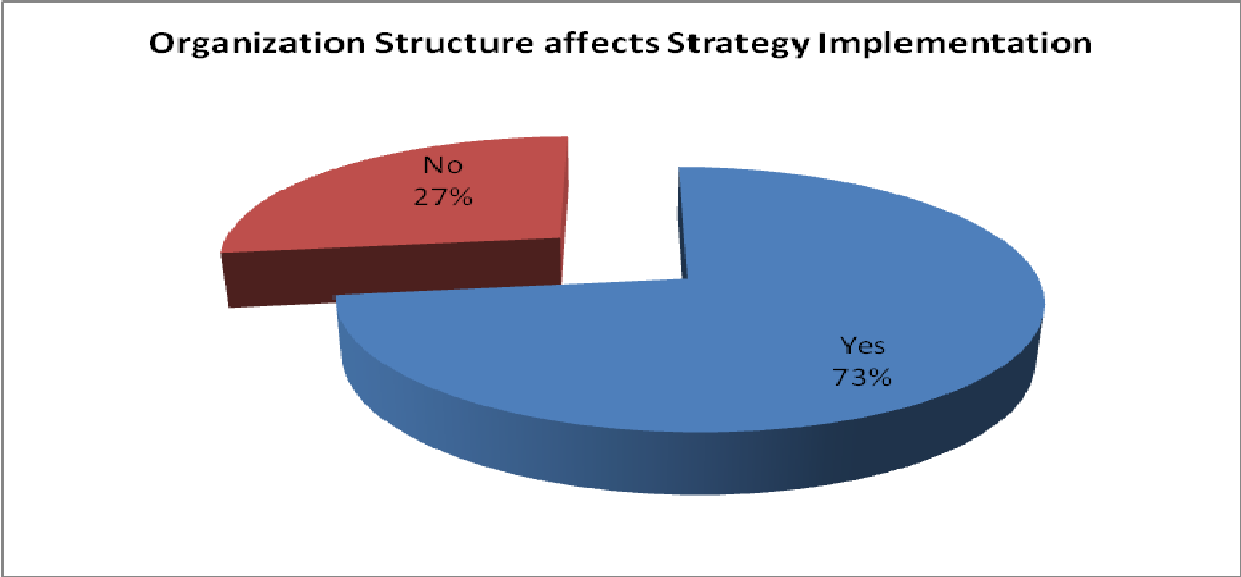
**Source: Survey Data, 2017**



Majority (81%) of the respondents indicated that they were well informed about the administrative structure of their hospitals. The remaining 19% of them indicated otherwise as shown in Figure 4.11.

**4.6.2 Organization Structure and its effect on Strategy Implementation**

An inquiry as to whether or not the current organizational structure of their hospitals affected the implementation of strategic plans in government hospitals yielded findings as summarized in Figure 4.12.



**Figure 4.12 Organization Structure and its effect on Strategy Implementation**

**Source: Survey Data, 2017**

Research findings presented in Figure 4.12 reveal that 73% of the respondents were in agreement that the current organizational structures as constituted affected the implementation of strategic plans in government hospitals. The remaining 27% of them were of a contrary opinion.

### 4.6.3 Organization Structure and Implementation of Strategic Plans

Respondents indicated their agreement levels with various aspects on organization structure and implementation of hospital strategic plans in Machakos County. Items were measured on a five point Likert-Type scale. Findings are as shown in Table 4.3.

**Table 4.3 Descriptive Statistics on Organization Structure**

<b>Item</b>	<b>Mean</b>	<b>Std. Deviation</b>
Delegation of authority from top management is important for successful implementation of strategic plan	4.6421	.78437
Span of control for every manager should be reasonable for successful implementation of strategic plan	4.6170	.65757
Effective flow of information on all matters is important for successful implementation of strategic plan	4.7368	.71772
Proper co-ordination of activities within the institution is important for successful implementation of strategic plan	4.7263	.62641
Specialization of tasks within the institution is important for successful implementation of strategic plan	4.6702	.70921
<b>Mean Score</b>	<b>4.6785</b>	

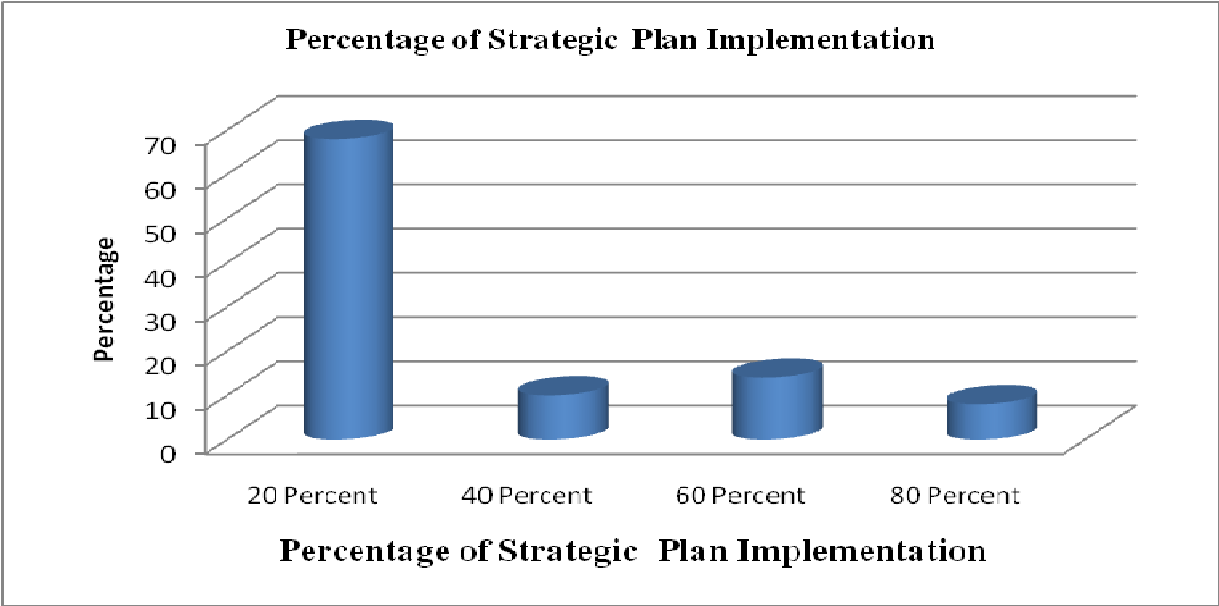
**Source: Survey Data, 2017**

Means of between 4.6170 - 4.7368 and standard deviations of between 0.65757-0.78437 were registered as shown in Table 4.3. It is clear from the research findings that effective flow of information on all matters is important for successful implementation of strategic plans (4.7368). Proper coordination of activities within the institution is also important for successful implementation of strategic plan (4.7263). Findings are as summarized in Figure 4.13

**4.7 Strategic Plan Implementation**

**4.7.1 Percentage of Strategic Plan Implementation**

Respondents were required to indicate the percentage of successful implementation of hospital strategic plans in Machakos County and responses are as shown in Figure 4.13.



**Figure 4.13 Percentage of Strategic Plan Implementation.**

**Source: Survey Data, 2017**

Respondents were required to indicate the percentage of successful implementation of hospital strategic plans in Machakos County. Research findings in Figure 4.13 revealed that majority of the hospitals in Machakos County had implemented their strategic plans to a tune of 20 percent. Only 8% of the respondents indicated that their hospitals had implemented their

strategic plans to a tune of 80 percent were required to indicate the percentage of successful implementation of hospital strategic

#### 4.7.2 Strategic Plan Implementation

Respondents were expected to share their agreement levels with several implementations of hospital strategic plans aspects in Machakos County. Items were measured on a five point Likert-Type scale. Findings are as summarized in Table 4.4.

**Table 4.4 Descriptive Statistics on Strategic Plan Implementation**

<b>Item</b>	<b>Mean</b>	<b>Std. Deviation</b>
My hospital has translated its strategic objectives to achieve set goals	2.9681	.89471
There is a designated unit to coordinate strategic implementation in my hospital	3.0000	.64463
Coordination of strategy implementation has been sufficiently effective	2.7234	.89850
Key implementation tasks have been achieved in my hospital	2.9674	.89839
Sufficient resources have been allocated for strategic implementation in my organization	2.8511	.86241
My hospital reviews monitoring data regularly and revises strategic decisions as appropriate	2.7742	.86945
<b>Mean Score</b>	<b>2.8807</b>	

**Source: Survey Data, 2017**

Means of between 2.7234 - 3.0000 and standard deviations of between 0.64463- 0.89471 were registered as shown in Table 4.4. It is generally clear from the research findings that strategic plans of hospitals in Machakos County has been done to a small extent attributable to the low means registered. Poor coordination of strategy implementation and monitoring and evaluation were cited as the major reasons for minimal implementation of strategic plans.

#### 4.8 Regression Analysis

The research study sought to evaluate factors influencing implementation of strategic plans of hospitals in Machakos County. The findings reveal that there was a moderately positive relationship ( $R= 0.365$ ) between the variables. The study also revealed that 13.3% of strategy implementation could be explained by the factors under study as shown in Table 4.5.

**Table 4.5 Model Summary**

<b>R</b>	<b>R Square</b>	<b>Adjusted R Square</b>	<b>Std. Error of the Estimate</b>
.365	.133	.104	1.28781

**Source: Survey Data, 2017**

The ANOVA findings (Table 4.6) reveal that at 95% confidence level, the variables produce statistically significant values and can be relied on to explain implementation of strategic plans of hospitals in Machakos County. The F-critical (3, 89) was 3.92 while the F-calculated was 4.561 as shown in Table 4.5. This shows that F-calculated was greater than the F-critical and hence there is a linear relationship between the independent variables and the dependent variable. In addition, the p-value was 0.005, which is equal to the significance level (0.05). Therefore, the model can be considered to be a good fit for the data and hence it is appropriate in predicting the influence of the factors under study on strategy implementation.

**Table 4.6 ANOVA**

Model		Sum of Squares	Df	Mean Square	F	Sig.
	Regression	22.692	3	7.564	4.561	.005
1	Residual	147.603	89	1.658		
	Total	170.295	92			

**Source: Survey Data, 2017**

Model regression results are as shown in Table 4.7.

**Table 4.7 Regression Coefficients**

Model	Unstandardized		Standardized		Sig.	
	Coefficients		Coefficients			
	B	Std. Error	Beta			
	(Constant)	3.793	1.492		2.541	.013
1	Awareness of strategic plan	.492	.138	.363	3.558	.001
	Staffing Norms	.585	.424	.189	1.381	.003
	Organizational Structure	.041	.360	.016	.114	.005

**Source: Survey Data, 2017**

From this study it was evident that at 95% confidence level, the variables produce statistically significant values for this study (high t-values,  $p < 0.05$ ). A positive effect is reported for all the factors under study hence influencing implementation of strategic plans of hospitals in Machakos County. The results of the regression equation shows that for a 1- point increase in the independent variables, implementation of strategic plans is predicted to increase

by 3.793, given that all the other factors are held constant. The equation for the regression model is expressed as:

$$Y = a + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \epsilon$$

$$Y = 3.793 + 0.492X_1 + 0.585X_2 + 0.041X_3$$

Where

$\beta$  is a regression coefficient

Y = Implementation of hospital strategic plans

$X_1$  = Staff Awareness

$X_2$  = Staffing Norms

$X_3$  = Organizational Structure

## CHAPTER FIVE

### SUMMARY, CONCLUSIONS & RECOMMENDATIONS

#### 5.1 Introduction

This chapter provides a summary of the findings of the research, the conclusions and the study recommendations on factors influencing implementation of strategic plans in Kenya.

#### 5.2 Summary of Findings

Three main factors influencing implementation of strategic plans in hospitals were considered ranging from staff awareness, human resource staffing norms and organizational structure. The research findings reveal that majority of the respondents had heard about strategic planning in the health sector. However, another significant percentage of respondents were not aware of strategic plans in the health sector in Kenya. Most of the participants responded that their hospitals had strategic plans with a few of them indicating that their hospitals did not have strategic plans. It is clearly shown from the research findings that orientation of staff on health sector strategic plans will improve strategy implementation. Establishment of feedback loops and increased advocacy will go a long way in ensuring strategic plans are successfully implemented in the health sector.

The research findings revealed that effective flow of information on all matters is important for successful implementation of strategic plans. Proper coordination of activities within the institution is also important for successful implementation of strategic plan. It is generally clear from the research findings that strategic plans of hospitals in Machakos County have been done to a small extent attributable to the low means registered. Poor coordination of strategy implementation and monitoring and evaluation were cited as the major reasons for



minimal implementation of strategic plans. The findings reveal that there was a moderately positive relationship ( $R= 0.365$ ) between the variables. The study also revealed that 13.3% of strategy implementation could be explained by the factors under study.

## **5.2 Conclusion**

From the study findings, it would be safe to conclude that the staff awareness, human resource staffing norms and organizational structure have a statistically significant effect on implementation of strategic plans of hospitals in Machakos County. The findings of the study support the conclusion that there was a positive relationship between the variables in the study with  $R=0.365$ . The findings also showed that about thirteen percent of the strategy implementation were able to be explained using the factors that were included in the study. From the study, it is evident that there is minimal application of strategic plans in hospitals around Machakos County following the means registered. Poor coordination of strategy implementation and monitoring and evaluation are cited as the major reasons for minimal implementation of strategic plans.

## **5.3 Recommendations for Policy and Practice**

With due regard to the ever increasing desire to have successful implementation of strategic plans in government institutions which leads to increased organizational performance, there is need to adopt good strategies. This should be implemented in ways that make stakeholders feel that they are being included in the decision making process of the organization. This can be achieved through employing strategies that are accessible, acceptable and ethically sound so as to have a positive impact on the organizations. Hospitals should be

managed in such a way that there will be adequate advocacy in relation to strategic planning so as to meet their objectives. Such strategies will create awareness among staff members making them part of the process of implementing the strategic plan.

All stakeholders should be engaged in the implementation of strategic plans aimed at reducing resistance from the stakeholders in the process of strategy implementation.

Staffing is a key issue in hospitals managed by County governments. The management should therefore ensure that employees with relevant specialties are employed to attend to patients and oversee strategy implementation to enable the hospitals attain their objectives. Hospital management should ensure that there is smooth flow of information pertaining strategy implementation. This will ensure that there is no communication breakdown which hinders implementation of strategic plans.

Sufficient resources should be allocated to ensure set strategies and activities are implemented. This coupled with proper coordination and monitoring and evaluation will go a long way in implementing strategic plans in the health sector.

#### **5.4 Suggestions for Further Studies**

Arising from this study, the following directions for future research in strategic management are as follows: This study focused on three main factors affecting implementation of strategic plans in Machakos County which included staff awareness, staffing norms and organizational structure. Therefore, generalizations cannot adequately extend to other Counties. A broad based study covering all Counties in Kenya should therefore be carried out. A study should also be done on the effect of monitoring and evaluation as moderated by resource allocation on strategy implementation both in the private and public sector.

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## APPENDICES

### Appendix I: Introduction Letter

Hellen Ngina Nzuki

P. O. Box 21198 – 00505

NAIROBI.

Dear Respondent,

I am a graduate MBA student at Machakos University College currently undertaking a research project on ‘Challenges affecting the Implementation of Strategic Plan in Health Care: A Case of Machakos County Hospitals.’ The purpose of developing this questionnaire is purely academic. I consequently humbly request you to assist by completing the enclosed questionnaire which shall provide data for analysis in order to accomplish the objectives of the research. Be assured that your responses shall be treated in strict confidence.

Your assistance in facilitating the same will be highly appreciated.

Thank you

Hellen Nzuki

**MUC - Student**



**APPENDIX 11: QUESTIONNAIRE**

Instructions: (Please read the instructions given and answer the questions as appropriately as possible). It is advisable you answer or fill in each section as provided. Make an attempt to answer every question fully and correctly.

**SECTION I: DEMOGRAPHIC INFORMATION**

1. Age.....

2. Sex M [ ] F [ ] (Please tick one)

3. Designation.....

- For how long have you worked in Machakos this Hospital
- -5 years [ ]
- 5-10 years [ ]
- 11-15 years [ ]
- 16-20 years [ ]
- 20-25 years [ ]
- 25-30 years [ ]
- More than 25 [ ]

4. Who is in charge of strategy implementation in this Hospital?

- Everybody [ ]
- Strategic Plan Implementation Unit [ ]
- External Experts [ ]
- Selected Management Team [ ]
- Hospital Management Team [ ]
- Any other (Specify) .....

5. How many employees report to you directly?

- Less than 10 [ ]
- 10 – 20 [ ]
- 21 – 30 [ ]
- 31 – 40 [ ]
- 41 – 50 [ ]
- More than 50 [ ]

6. Indicate the management level that you are working for in the hospital

- Top level Manager [ ]
- Middle level Manager [ ]

7. Indicate the carder that you are working in the hospital

- Doctor [ ]
- Clinical Officer [ ]
- Nurses [ ]
- Support staff [ ]

## **SECTION II: STRATEGIC PLAN AWARENESS**

1. Have you ever heard of health sector strategic plan in this hospital?

Yes [ ] No [ ]

2. Have you ever seen a strategic plan in this hospital

Yes [ ] No [ ]

3. Are you aware of any health strategic plans being implemented in this hospital?

Yes [ ] No [ ]

If yes, was it disseminated / introduced to the staff at this facility in this hospital?

Yes  No

If yes by who?

MOH  CHMT  HMT  CME  NGO  OTHERS

4. In your opinion rating from 1 to 5, 1 representing lowest score while 5 representing the highest score, Indicate the extent which you agree with the statement provided relating how staff awareness affects strategic plan implementation in this hospital

**Strongly Agree-5, Agree-4, Undecided-3, Disagree=2, Strongly Disagree=1**

*(Tick appropriately)*

<b>Questions to score</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
The hospital has a strategic plan					
All staff are aware of strategic plan for the hospital					
All staff are involved in the implementation of the strategic plan					
The health sector strategic plan is fully implemented in this hospital					
Do you think advocacy could change the implementation of the strategic plans implementation in the Hospital?					

Do you think the Feedback loop will improve the implementation of strategic plan?					
do you think the orientation of staff on the health sector strategic plan will improve the implementation of the strategic plan is regular training on strategic plans plan implementation					

5. How often do you share the progress on implementation in this hospital?

Monthly  Quarterly  Biannually  Annually  Never

6. What other factors could be considered to improve the implementation of strategic plan in hospitals

Specify.....

**SECTION III: HUMAN RESOURCE STAFFING NORMS**

1. Do you think the number of staff is important in implementation of strategic plans in this hospital?

Yes  No

2. If yes, is the staffing adequate?

Yes  No

3. If no, which cadre of staff is lacking?

.....

4. In your opinion rating from 1 to 5, 1 representing lowest score while 5 representing the highest score, Indicate the extent which you agree with the statement provided relating how staffing norms affects strategic plan implementation in this hospital.

On scale of 1-5, indicate the extent with which you agree /disagree with the statements provided relating how staffing norms affect strategic plan implementation.

For successful implementation of the hospital strategic plan staff training on the same is necessary from time to time.

Successful implementation of a strategic plan requires involvement of all hospital staff.

Effective flow of information on all matters is important,

**Strongly Agree=5, Agree=4, Undecided=3, Disagree=2, Strongly Disagree=1**

Questions to score	5	4	3	2	1
Support from top management is necessary for successful implementation of strategic plan of the hospital For successful implementation of strategic plan adequacy staffing levels for all carders is necessary					
For successful implementation of strategic plan, staff training on the same is necessary from time to time Successful implementation of strategic plan requires the involvement of all hospital staff Institutional adherence to human resource practices and policies is key in successful implementation of strategic plan					

**SECTION IV: STAFF ORGANIZATIONAL STRUCTURE**

1. Do you know how the administrative structure of this hospital?

Yes  No

2. Do you think current staff organizational structure affects the implementation of strategic plans in Government hospitals?

Yes  No

If yes, what factors affect the implementation?

Composition  motivation  feedback  coordination  finance

3. In your opinion rating from 1 to 5, 1 representing lowest score while 5 representing the highest score, Indicate the extent which you agree with the statement provided relating how organizational structure affects strategic plans implementation in this hospital

**Strongly Agree=5, Agree=4, Undecided=3, Disagree=2, Strongly Disagree=1**

<b>Questions to score</b>	5	4	3	2	1
Delegation of authority from top management is important for successful implementation of strategic plan					
Span of control for every manager should be reasonable for successful implementation of strategic plan					
Effective flow of information on all matters is important for successful implementation of strategic plan					
Proper co-ordination of activities within the institution is important for successful implementation of strategic plan					
Specialization of tasks within the institution is important for successful implementation of strategic plan					

**SECTION V: MEASURES OF DEPENDENT VARIABLE**

Y = Implementation of Strategic Plan

(i) Is there a strategic plan in this hospital

Yes [ ] No [ ]

(ii) If yes , what percentage of it in your hospital is successfully implemented

0% [ ] 20% [ ] 40% [ ] 60% [ ] 80% [ ] 100% [ ] other specify [ ]

The statements presented below describe aspects of strategy implementation in your hospital.

Please indicate the extent to which you agree or disagree that each of the statements describes your hospital by ticking appropriately.

**Strongly Agree=5, Agree=4, Undecided=3, Disagree=2, Strongly Disagree=1**

Item	5	4	3	2
My hospital has translated its strategic objectives to achieve set goals				
There is a designated unit to coordinate strategy implementation in my hospital				
Coordination of strategy implementation has been sufficiently effective				
Key implementation tasks have been achieved in my hospital				
Sufficient resources have been allocated for strategy implementation in my organization				
My hospital reviews monitoring data regularly and revise strategic decisions as appropriate				

**Appendix III: Work Plan**

<b>June</b>	<b>July</b>	<b>August</b>	<b>September</b>	<b>October</b>
Proposal development				
	Submission and Defense			
		Ethical consideration / Data collection		
			Data analysis / Thesis presentation	
				Submission



**APPENDIX IV: PROPOSED OPERATIONAL BUDGET**

<b>Number</b>	<b>Item</b>	<b>Unit cost</b>	<b>Total cost</b>	<b>Remarks</b>
<b>1</b>	Train 6 field assistants at Machakos Level 5 Hospital for one day	Ksh. 1000	Ksh. 6000	The assistants for Machakos level 5 hospital will receive Ksh. 200
<b>2</b>	Transport using hired vehicle	Ksh. 3,000	Ksh. 9000	Vehicle will be available
<b>3</b>	Printing of questionnaire, photocopying, lamination	Ksh. 3,000	Ksh. 1500	Printing will be on time
<b>4</b>	Data analysis/ report writing / binding	Ksh. 3,000	Ksh. 10,000	Collection of data will be on time
<b>5</b>	<b>Total</b>	<b>Ksh. 10,000</b>	<b>Ksh. 30,000</b>	