EVALUATING THE EFFECTS OF SERVICE CHARTERS ON EMPLOYEE PERFORMANCE AT WEBUYE SUB-COUNTY HOSPITAL

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DECLARATION AND RECOMMENDATION

Declaration by the Candidate

This research Project is my original w	vork and has not been presented for a degree in
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DEDICATION

This research project is dedicated to my family for the support and encouragement they gave me throughout the period of undertaking the project.

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First, I wish to thank the Almighty God for granting me the gift of life and offering me the spiritual guidance in all I do in life. Secondly my sincere thanks go to all my lectures especially my supervisors Dr. Kimutai and Dr. Ayuma, for the support accorded and guidance during the Project writing. Am also indebted to my classmates for the positive critique and comments they made on how best this research could be done. I would also like to acknowledge to my family and friends for their support both financially and morally during the entire research period

ABSTRACT

The ever increasing expectations by clients seeking services at public institutions has driven institutions to embrace a Results Based Management System which has great emphasis on Employee Performance. Service Charters create awareness of the services offered and inform the clients of what to expect and what is expected of them in order to be served effectively. The main objective of this study was to evaluate the effects of Service Charters on employee performance amongst staff at Webuye Subcounty Hospital. The specific objectives of the study were to determine client feedback influence on employee performance, to determine how client service standards affect employee performance, to investigate the extent to which the timelines stated in service charters influence employee performance and to explore how observing clients rights influence employee performance at the Webuye Sub-County Hospital. The target population were be midlevel staff at Webuye Sub-County Hospital, where the midlevel staff gave the best point to evaluate efficiency as they serve as the link between the Management and functional levels of the hospital staff. The study employed a census approach since the entire target population is 160 middle level staff that comprises the hospital's Administrators, Doctors, Clinical Officers, Nurses, Laboratory Technologists and Pharmaceutical Technologists. The study used a three point Likert scaling questionnaire to measure levels of agreements towards the statements while secondary data was obtained from previous scholar literature within and without the hospital and hospital records. Data was be coded and analyzed by use of Statistical Package for Social Sciences (SPSS) Programme to generate descriptive statistics presented in form of percentages, frequencies and means. For inferential statistics, the study employed regression analysis method to analyze and test the hypothesis. One hundred and sixty questionnaires were issued to respondents and 144 questionnaires were returned thereby representing a 90% response rate. The findings of correlation at 99% level of confidence indicate that a unit change in client feedback leads to 70.5% change in employee performance, also a unit change in client service standards leads to 75.6% change in employee performance, a unit change in service charter timelines leads to 73.2% change in employee performance lastly a unit change in clients rights leads to 77.21% change in employee performance. The researcher therefore concludes that the null hypothesis be rejected. The study recommends that organizations should adopt service charters so as to improve employee performance.

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ABBREVIATIONS AND ACRONYMS

CSC	Client Service Charter
MDAs	Ministries, Departments and Agencies
RBM	Results Based Management
SOP	Standard Operating Procedure
SPSS	Statistical Package for Social Sciences
URT	United Republic of Tanzania
WSCH	Webuye Sub County Hospital

CHAPTER ONE

1.1 Background of the Study

Service Delivery Charters are a major component of Result Based Management (RBM). The basic practice of RBM revolve around the principles of action, structure and practice (Feldman & Khademian, 2000). In 2002, the Kenya government formulated the strategy for performance improvement which focused on improving service delivery in the Civil Service which was implemented through A strategic Plan for Public Sector Reform which emphasized the basic objective of restoring efficiency and effectiveness in the delivery of public services calls for implementation of a comprehensive Public Service Reform Programme that provides unity of purpose and synergy in the reform process (Ngowi, 2013).

The concept of Service Charters in Kenya was introduced as a wider part of Result Based Management (RBM) programme to implement the Strategic Plans alongside with performance contracting. Client Service Charters are developed by every institution which constituted commitments of the institution to its clients (Wairiuko, 2013). Most Ministries and public service delivering departments in Kenya have implemented their charters. As the public sector implements their charters, the requirement is to resolve the charters into formats which can be easily and quickly assimilated by customers, and to cascade the charters to functional departments and sections (Wairiuko, 2013).

The principle in practice has elements of inclusion and dominance of process which attributes to the conceptual and practical tools that enable leadership action and structural arrangements. This results in an enhanced interaction between the structures of governance and the actions of governance. A performance-based organization capture these principles that give respective operational unit full responsibility of the specified task and area. The evaluation of performance and the provision of rewards especially to top executives depend on the generation of specified outputs (Feldman & Khademian, 2000).

Review and research work of previous scholars has indicated that Service Charters have had a positive impact in Kenya, what is in doubt though is whether such gains have been sustained or are sustainable by public service stakeholders in the medium to long-term stretch, given the ad hoc nature of Service Charter conception, design and implementation in the public sector (MOPHS, 2008-2012).

The UK Government established a new unit to oversee the implementation of Service Charters, supervised by a cabinet minister. Under the direction of this Unit, and backed by the strong and decisive support of the then Prime Minister Major, all public services were encouraged to create and sign Charters. When Tony Blair became prime-minister of the country in 1994, there were about 200 Charters at a national level, and approximately 10,000 Charters at a local level. Many ideas behind the Charters had obtained a wider approval, even from various political quarters within the country. The resultant effect was that Charters survived the transition of government, and also acquired momentum under Blair, which led to the Britons adopting the slogan, "Service First," which is still in use to date. The Prime Minister passionately supported the system of awards granted to the Charters, known as "Charter Mark". In the same way since June 1998, the Briton's Charter Office has been renamed as "People First Unit", signifying precedence of people over the other things (Tamrakar, 2010).

In summary, the initial experience was that Charters became an essential part of Britain's public sector service delivery and part of the management practice in most public sector departments. Charters were appreciates and implemented across a great proportion of not only national governments, but also local systems since they were institutionalized in the system of government of the country. A self evaluation tool called the Charter-Mark was used to evaluate of the changes in the Charters. Studies conducted previously in Britain indicated that the implementation of Client Service Charters has raised the awareness amongst users on their rights in relation to services provided by government departments and in turn has had a positive impact on culture change among service providers. Significant improvements have been registered relating to the implementation of Service Charter in the following service sectors: health sector, social security, court system, housing services, utilities and Inland Revenue (Tamrakar, 2010).

In Tanzania, there is a common agreement across the top leadership in Government at Political and Administrative Levels that Client Service Charters are important tools for transforming the culture of Public Servants toward results orientation. A total of 26 Ministries, 9 Independent Departments, 29 Executive Agencies and 21 Regional Secretariats have been facilitated by the Tanzanian President's Office – Public Service Management to prepare and review Client Service Charters. The Office of the Tanzanian President continues to facilitate MDAs on preparation of Client Service Charters on a demand basis. A Guide on Preparation and Implementation of Clients Service Charter was issued in 2006 in Kiswahili and English. An assessment conducted in 2004/2005 revealed that MDAs were meeting 60% of their charter commitments. Most Client Service Charters are available online (Ngowi, 2013).

Tanzanian Public Service experienced several challenges while implementing customer service charters. Some of the challenges include charters not being operational in several Public agencies. The charters have remained to be internal shelved documents and are therefore not used to influence service quality. Some Agencies have not made their charters public therefore the citizens are not aware of services standards to be provided. In some occasions, the service standards set in the charters were not implemented as documented during business process reviews or improvements. Some of these standards are seen as being overambitious and unrealistic. Some agencies have stated standards which were already being met prior to their inclusion in the charter. Significant proportions of Agencies do not monitor and evaluate implementation and impacts of their charters. A large proportion of citizens are not using charters to demand better services (Ngowi, 2013).

In Kenya, like many other medium/low income countries, data on the use and utilization of service charters are limited. A survey conducted to evaluate corruption within the Kenyan public sector showed that a larger proportion (over 90%) of respondents had never seen a service charter in the public health facility visited. However, of the 7% who had seen a service charter, less than 1% had read the charter, and those who had read it indicated that the health service providers did not endorse the charter provisions (Atela, 2009).

According to a study by Obegi and Okibo (2013), findings indicate that a significant proportion of the clients seeking healthcare services in Kenya, agreed that the charter implementation was greatly influenced by employee attitudes, competence and management structure. However, clients were of the opinion that minimal efforts were being made to make the charter popular among the beneficiaries. As a result of numerous challenges that hinder the implementation of the Customer Service Charters, the study established that a lot was required. The implementers needed a thorough training on the strategies to implement the charter. Many players were conversant with the existence and importance of the charter. However, what was on the ground did not portray the same. This was evident from the findings that established that patients could stay in ques for long hours more than stipulated in the Customer Service Charters and they only complained to hospital management when there was a problem but kept quiet when not aggrieved. It was found that some rules and regulations in the hospital hindered Customer Service Charters implementation also communication among staff was inadequate. Many employees were undecided whether standards and time frames in Customer Service Charters were realistic.

The study will be conducted at Webuye Sub County Hospital the second largest referral facility in Bungoma County and has a bed capacity of 272 beds with 95% bed occupancy. The facility receives an average of 600 out patients per day. Service Charters at Webuye Sub County Hospital are used as a frame of reference. Hence the hospital requires systems to be put in place to ensure efficiency of service by the employees. This paper seeks to explore whether and/or how the current Service Charter methodology inculcates a culture of continuous improvement and sustainability of positive gains made. Where the findings of the study will scrutinize the Charters to adduce evidence and provide a case for suggestions of modifications to the existing framework.

1.2 Statement of the Problem

According to MOPHS (2008-2012) the ministry of health introduced the Service Charter initiative in 2006 with an objective of improving the service delivery mechanisms in the hospitals through enhanced transparency, accountability and improved responsiveness to the citizens by hospital staff. However several years down the line these challenges can still be observed since the introduction of citizen charter in the country. Studies conducted by Obegi and Okibo (2013) show some of the various challenges facing the implementation of service charter at Kisii level 5 hospital. The study established that a greater proportion of the respondents felt that the charter implementation benefitted both the implementer's character, staff competence and a conducive work environment that includes supportive management structure. However, a significant proportion of respondents felt that little input was being taken to make the charter popular among the various stakeholders. The study established that implementation of the service charter at the health facility was facing numerous challenges and that a lot was required. Hospitals adopted the Service Charters as a tool to improved service delivery and for good governance yet clients still complain that the quality of services they receive does not meeting the standards specified in the charter (Obegi and Okibo, 2013).

A study by Muhumed (2012) on the Teacher Service Commission noted that the organization failed to effectively and efficiently handle respondents' complaints. Both commission staff and teachers respondents agree that promotion takes longer period than that stated in the charter regardless of one's duration of service and academic qualifications. Tjirorua, (2010) establised that there is a gap in terms of monitoring and evaluation of the impact of Service Charter implementation. Therefore, the impact of the implementation of service delivery remains such an intractable challenge.

In light of these observations that the study, desires to evaluate employee involvement in charter implementation and hence explore the extent to which implementation of Service Charters affects employee performance at the Webuye Sub County Hospital. Therefore this study intends to answer the question; to what extent does implementation of Service Charters affect employee performance at Webuye Sub County Hospital.

1.3 Justification of the Study

Members of the public seeking health care services at Webuye Sub-County Hospital stand to benefit from the evaluation of the service delivery system. Customer satisfaction forms the centre of the excellence of any organization. This research project assessed the basic attributes of Customer Service Charters that leads to improved service delivery systems. In the long run the hospital clientele have the benefit of enjoying improved services and at their convenient timing as stipulated in the Service Charters. The research study will contribute in the academic exploration on the possibility of successful implementation of the Customer Service Delivery Charters in public institutions. The study aids our understanding in regard to integrating the various components of Client Feedback, Client Service Standards, timelines stated in Service Charters and observing Clients rights. Reviews of scholarly literature (Obegi & Okibo, 2013) and Government sponsored reviews (MOPHS, 2008-2012) on charter implementation indicate that there are numerous challenges in the implementation process.

1.4 Purpose of the Study

The main purpose of the study was to evaluate the effects of Service Charters on employee performance amongst staff at Webuye Sub-County Hospital.

1.5 Objectives of the Study

- To determine the influence of client feedback on employee performance in Webuye Sub-County Hospital.
- To determine the effect of client service standards on employee performance in Webuye Sub-County Hospital.
- iii. To investigate the influence of timelines stated in service charters on employee performance in Webuye Sub-County Hospital.
- To explore the influence of observing clients rights employee on performance in Webuye Sub-County Hospital.

1.6 Research Hypothesis

- **Ho 1:** Client Feedback does not have a significant effect on employee performance at Webuye Sub County Hospital.
- **Ho 2:** Client Service Standards do not have a significant effect on employee performance at Webuye Sub County Hospital.
- **Ho 3:** Timelines stated in Service Charters have no significant influence on employee performance at Webuye Sub County Hospital.
- **Ho 4:** Observing Clients rights has no significant influence on employee performance at Webuye Sub County Hospital.

1.7 Assumptions of the Study

Employees at the hospital were given assurance of confidentiality on the information given and reasons of the study were clearly stipulated to be for academic research purposes only. The perspective of Webuye Sub-County Hospital might suffer setbacks because there are several issues that might hamper effective implementation both foreseeable and intangible. This study was conducted in the second largest health facility in Bungoma County. The population was drawn from the middle level managers and other middle level employees of the Hospital and the presumption was that the respondents' answered the questions accurately, truthfully and provide all the required information.

1.8 Scope of the Study

The study was done in Western Kenya, specifically at the Webuye Sub-County Hospital within Bungoma County. The study revolved around Client Feedback, Client Service Standards, timelines stated in Service Charters and observing Clients rights and their respective influence on Employee Performance at the at the hospital. The target populations were be middle level employees at different hierarchical levels in the chain of command who have varied influences on the implementation of the Service Charters. The mid-level staff consists of Administrators, Doctors, clinical officers, Laboratory Technologists, Pharmaceutical Technologists and Nurses leaving out the top level who are the medical superintendent, departmental heads and nurse managers while the lower level staff consist of the support staff.

The study's literature review covered the period from the advent of Performance Contracting which came with the Service Charter Concept, from 2005 even before the hospital transformed from a Sub-District to a Sub-County Hospital.

1.9 Limitations of the Study

Some respondents declined to answer the questionnaire due to fear of hospital secrets leaking while some senior management officers also declined to share certain information, which they considered confidential to the hospital. This prompted some parts of the study to rely on secondary data which was found in various resource documents within the hospital library. To avoid any doubts about the research, the researcher assured the employees of confidentiality on any information given and reasons of the study was clearly stipulated to be wholly for academic research purposes only.

1.10 Definition of Terms

Services: Services are specific intangible activities that when marketed to consumer/users, provide the wanted satisfaction and may not necessarily be tied to the sale of a product or other service. (Kotler, 2008)

Customer service: The ability by an organization to consistently meet the needs and expectations of customers. (Kotler, 2003)

- **Service Quality:** Service Quality the measure of how well a delivered service conforms to the client's expectations. Service Quality is often assess to provide a mechanism through which service to their customers can be improved through quickly identify problems and to better assess client satisfaction. (Online business dictionary, 2015).
- Service Charter: A charter is a statement published by an organization that contains a list of customer entitlements, details regarding a licensee's services and information relevant to the relationship between the organization and its customer. (Economic Regulation Authority, 2006).

Public Service Delivery: Public service delivery is a set of institutional arrangements adopted by the government to provide public goods and services to its citizens. Public services delivery has been one of the key functions of the public sector which uses civil service bureaucracies as the instrument for the delivery of services (World Development Report, 2004).

CHAPTER TWO

LITERATURE REVIEW

2.1 Theoretical Framework

2.1.1 Max Weber Theory of Management

This research employed the Max Weber theory of management, otherwise known as the bureaucratic management theory. According to Weber, authority in organizations that operate on bureaucratic systems are 'rational' and employees recognize and obey their leaders for ascribing to values of efficiency, logic and reason. These organizations function on laws, rules and regulations established 'legitimately' from the consistent, disciplined, rationalized and methodical means of attaining the organization's objectives (Aby, 2004).

The elements that are key in Max Weber's management theory include: Clearly defined job roles, Hierarchy of authority, Standard Operating procedures, Proper record-keeping and Hiring staff only if they meet the specific qualifications for the specified job (Lea, 2011). From the above evaluation of Max Weber's model of management, it is clear that Weber prescribed a design for organizational structures with standardized relationships by providing a plan for every feature of the workers task, and hence the bureaucratic management framework approach.

According to Walonick (2008), Weber highlighted the need for a hierarchical structure of power. It appreciated the importance of specialization and division of labor. A formal set of rules was incorporated into the hierarchy structure to ensure stability and consistency. Weber also indicated that organizational behavior is a web of human interactions, where all behavior could be interpreted by looking at cause and effect. Service charters provide a means for interactions between staff members and between the other stakeholders. With clear communication channels this will in turn increase the efficiency of service delivery where staff will understand the rights of the clients and develop structures that would work towards meeting client's needs whilst

observing their rights. Client feedback will be handy in communicating the satisfaction levels of clients hence improving employee performance.

Here the Charter is seen as a tool that is meant to ensure that activities that an employee does in order to deliver a service to a client should follow a certain sequence so as to produce the desired results. These orders of activities may be seen as bureaucratic.

2.1.2 Fredrick Taylor's Scientific Theory of management

The research also observed in part Fredrick Taylor's scientific management. Taylor developed the theory of scientific management to respond to rapid industrialization of firms of in the western Countries where organizations desired to base decisions and job designs on scientific principle (Cropf, 2015). The scientific principles created exact measures of work processes of tasks within the respective jobs.

Management functions of organizations need to develop a science for every job which would replace the old rule of the thumb method. In light of this, the management should use a scientific mechanism to select, train and placed their staff in jobs within which they are mentally and physically merited; the job to be done should be analyzed scientifically and a determination made on the one best way to do that job and standard times for jobs and work processes to be established. Management functions should also develop a system that would offer reward its staff in line with the established principles of the scientific management. Carefully planning and assist the staff whilst implement their work is an important function of management as indicated by the scientific principles. (Cropf, 2015).

Increased productivity and profit can be accredited to implementation scientific management in the design of work. Development of modern system of job classifications were influenced by Taylor. His work also helps in characterizing various vital concepts in the management process such as organizational objectives, standards or measures of performance that if met should accomplish those objectives. Frederick Taylor's ideas focused on the efficiency of processes and outcomes (O'Flynn, 2005)

The main purpose of having a charter is to describe the service experience the client will have with that organization and the responsibilities of both the organization and the client. This experience is described through the basic standards of service (Chris Ellison, 2000). From the above evaluation of scientific management, it is clear that Taylor prescribed a design for organizational relationships by providing a plan for every feature of the workers task, and hence he gave management a framework for approaching work in a standardized manner. According to Walonick (2008), Taylor's method involved getting the best equipment and people, and then carefully evaluating each component of the production process. By analyzing the tasks individually, Taylor was able to find the ideal combination of factors that yield great increases in production. Similarly service charters are tools used by management functions to ensure that clients, stakeholders and staff have a common understanding and recognition of the organization, and its interaction with its associated department with an aim of improving employee performance and hence increase productivity.

Here the charter would develop standards of operation based on baseline information that most likely may have been developed from some scientific methods or facts so as to produce similar results within the specified period and hence this is observed as a science

2.2 Empirical Review

2.2.1 Service Charter

A Service Charter is a tool that organizations use to empower its customer who may be citizens, taxpayers or ordinary service users by promoting and protecting their rights in the market of public service delivery and provision. It is a set of promises made to customers that must be measurable, clear, meaningful and auditable by all means (Ayeni, 2001). Service charter should ensure that highest level of customer satisfaction and service is delivered to the clientele by employees. A service charter should contain statements that guide on how customers go about registering complaints otherwise known as customer charter complaints procedure. This should include the means on how to obtain redress if the service given falls below the set and published standards (Dransfield and Needham, 2005).

A service charter is a written expression of the understanding between provider of a public service and citizens on quantity and quality of services. If the uses of the charter information do not have access to the charter, then the charter fails to be effective unless users are aware of its existence. Communications of the existence of the charter can be done through the following mechanisms: Hold a public function to launch the customer service charter where a wide range of stakeholders including users, the media and employees will be invited, hanging the customer service charter in prominent places at service delivery points and in offices. Charters may also be posted online, use the radio, newspaper, other media, members of the local government and community members to increase awareness about the customer service charter (Post and Agarwa, 2008).

A well-developed charter must convey its message in simple, easy to read language and preferably in the style of a brochure publication (Mukesh, 2001). The standards stipulated in the charter should relate to outcomes and processes and further provide a measure of appropriateness, timeliness, consistency, accessibility, accuracy and courtesy as well as sensitivity of service delivery among other things. Service charters have potential impact on public service delivery which includes the establishment of new service cultures in government and its agencies (Ayeni, 2001). Service Charters focus on current expectations and future service needs as well as ensuring that management and employees focus on people not just systems and hence can serve as a planning tool.

Charters encourages the use of performance and customer satisfaction information to guide organizations and improvement, provide a practical way of managing performance in an era of fiscal restraint, provides a reliable means to measure service performance and cost as well as a benchmark for performance evaluation and promotes partnerships between service providers and clients (Muthaura, 2007).

A Citizen's Charter is a publicised document that defines the type, quality, and magnitude of service that the citizenry can expect from his government (Mang'era and Bichanga 2013). It describes services offered consisting of employees with their responsibility to carry out a specific service, clients with actions expected from them to do to avail the service, requirements that the client needs to provide to employees, procedures of the service, and fees to be paid if applicable. Any issue that these factors will encounter delays the expected duration of a service, weakens the quality of the service, and eventually creates an overall adverse impression to the public. As the Citizen's Charter summarizes the overall goal of a government organization as well as describe how specific business unit's service goals are attained, it can serve as basis in understanding and capturing how people, with varying intentionality, are dependent on business processes. Log sheets and automated systems placed in the service areas are used to monitor compliance of employees to the charters.

According to Hickman (2006), a service charter is sets of standards that an organization sets out regarding the service offered to their customers. Sharing of the charter amongst all the employees will ensure that they work under the customer charter to ensure the best quality service possible. The charter should explain different areas that customers can expect service. Customer service extends beyond listening to and helping customers. The Charter may be developed by a number of employees within the organization. Members of staff at the management level have greater responsibility of writing a charter. These include manager, human resource director or director. It is written by an officer at management level who has knowledge of how to build and maintain a client base. All customers of the organization should have access

to the customer charter. Clients may have access to the charter as a physical copy or online. The customers expect that it's the company's responsibility to comply the information stipulated in the customer charter.

2.2.2 Client Service Standards and Employee Performance

Charters are developed for the main purpose of defining the service experience clientele will have with the organization and the responsibilities of both the organization and the client. This experience is described through the principal standards of service. Where service delivery is provided by an external source, the organization is required to comply with the service standards set by the said department. The charter should make clear whether the service standards are: Aims (ambitious but generally achievable standards that a client can expect to have met on the majority of occasions); or Service guarantees (standards that will always be met on all occasions). The service charter is not intended to grant legally enforceable rights on clients of the organization, unless otherwise determined by legislation. Organizations might consider having their charter reviewed by a legal expert to ensure that the wordings used do not inadvertently give rise to legal liability (Ellison, 2000).

2.2.3 Client Rights and Employee Performance

Service charters set out the rights of the firm's clients and what they can expect from the firm. The Charter should also spell out the responsibilities of clients to observe certain codes of behavior, to help the organization provide quality service to them and to ensure a customer satisfaction and create a healthy working relationship between both parties. Client rights include: the right to access services, the right to lodge a complaint, the right to privacy and confidentiality, the right to review and appeal, the right to see information, facilities and information in a manner which meets the client's needs (Ellison, 2000).

Legislative structures that are meant to promote patients' rights are available in Africa and the rest of the developing world. Examples of such legislation are the South African Patients' Rights Charter 9 which was launched in the year 1997 and in Nigeria the Ministry of Health's Service Charter. An analysis of patients' rights across a sample of five African countries, it has been established that irrespective of how comprehensive a country's statement of rights is, patients' familiarity and awareness with the rights is crucial to quality and effectiveness of the healthcare structures and functions (Rider and Makela, 2003). Patients should to know their rights and responsibilities to enable them to take actions and ask questions relevant to the care they receive at the facilities. However, other studies have revealed that half of the respondents had never heard of patients' rights. These findings indicate how the healthcare systems have neglected such important justice issues. The same study indicated that no single poster on patients' rights had been displayed on the walls of the unit and no form of communication was given to patients concerning their rights (Changole, Bandawe, Makanani , et al., 2010).

According to Büken and Büken (2004) establishing patients' rights is a step towards protecting patients' rights. However he goes on to say that violation of patients' rights is common in healthcare institutions he attributes this to systemic and institutional obstacles, such as insufficient healthcare staff and inadequate acquisition and maintenance of technological equipment. Meeting and maintaining patients' needs should be the core principal behind patients' rights, however, ignorance about rights, lack of standards of practice among healthcare providers and the impact of service pressure and subsequent lack of holistic care are among of the factors that are believed to slow down the implementation of patients' rights (Albishi, 2004).

2.2.4 Client Feedback and Employee Performance

Organizations must have channels through which clients may provide feedback and make complaints and have mechanisms to report on that data. Service charters should contain information on how feedback and complaints are processed. Aspects to consider include: that the agency welcomes feedback (suggestions, compliments and complaints); the procedure of making a complaint, an indication of relevant contact details for instance postal and email addresses, and phone and fax numbers. Options of the feedback mechanism may include a procedure of giving feedback specifically about the Charter itself; an affirmation that the feedback and complaints handling process is accessible, easy to use and free; that the organization records data on complaints, compliments and suggestions and this is used to help improve client service; that using the organization's complaint handling system does not prevent the client from using external dispute handling and appeal mechanisms at any time and should list contact details for these services; the organization should however complying with the Complaints Handling standard (Ellison, 2000).

The way a service provider has to handle complaints may be regulated by legal provisions (Elke et al., 2007). It may be helpful to provide staff with a list of 'Dos' and 'Don'ts' how to behave properly when customers make complain. Service charters will only drive improvements and produce benefits for service users if: managers and staff look at services from the point of view of service users. If a service charter is to bring about quality improvements in service quality, it needs to be embedded in a proper quality management system. A service organization should have in place a clearly defined vision of quality, a sound set of strategic objectives and a well-developed performance measurement system. It is essential to have one definition of quality in the organization. By doing so, all staff in will talk the same language, helping to avoid confusion. Service quality is difficult to define but easy to recognize by its absence

According to URT (2006: 12), CSCs should encourage clients to provide feedback. These can be in the form of complements, suggestions and complaints. These should be seen as a means of improving public service delivery. CSCs should also state how and to whom clients including those with special disabilities can provide feedback either in person, by post, e-mail, telephone, facsimile and any other appropriate means.

Studies done by Johnson, (1996) and Schneider et al., (1998) demonstrate that there is a positive relationship between employee perceptions that the organization solicits and values customer input and customer ratings of service effectiveness. The implication is that organizations that collect customer information on an organizational level are perceived as providing better service than those who do not collect customer information provide. Using customer feedback allows organizations to monitor and regulate their service offerings and delivery.

Client service charters perceived as tools for improving service delivery in a number of ways. Undertaking business process improvements in order to deliver the services in accordance with the standards are some of the ways included in service delivery commitments. The feedback mechanism provides an on-going opportunity for improving services Feedback is in the form of suggestions, compliments and complaints. Service Charters provide an avenue for culture change from focusing on red-tapism to customer focus and creating awareness and provides channels for the public to demand for quality in public goods and services delivery.

2.2.5 Service Charter Timelines and Employee Performance

Service Charters are tools for enhancing accountability. This is because, among other accountability structures, they set standards of services that govern Public Servants in their respective institutions to ensure they deliver expected public goods and services as promised. The service charter specifies the timelines within which client are expected to be served from the time of arrival to the time he/she receives the service or product. Public servants are expected to be disciplined, responsive and responsible towards their clients. Service Charters provide a mechanism for customers to monitor the time frames within which services are to be offered and complain if the services delivered are below standard. The mechanism for complaints handling provides room for adjustment in form of service recovery. The need for public institutions to report on implementation of their charters provides a basis for the public to hold the institution's image and reputation. This will compel them to improve on their quality and work performance (Ngowi, 2013).

2.3 Conceptual Framework

Figure 1.depicts the conceptual framework outlines the relationship among the elements that are considered as the independent variables (i.e. Client Feedback, Client Service Standards, timelines stated in Service Charters and Observing Clients rights) and their contribution to the dependent variable (i.e. Employee Performance).

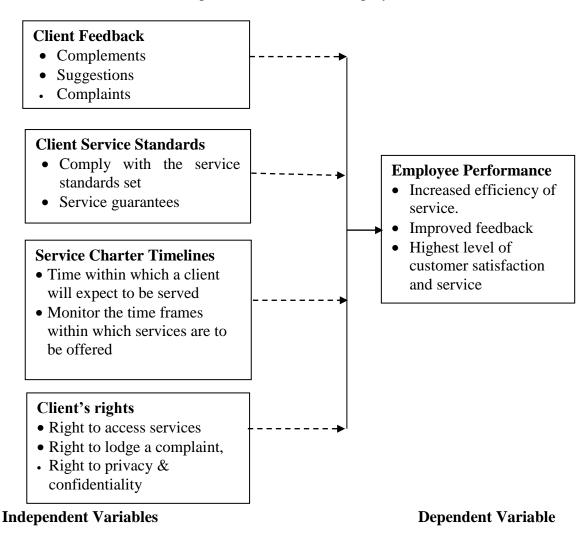


Figure 1: Conceptual Framework

2.4 Research Gap

Obegi and Okibo (2013) conducted a study on challenges facing the implementation of citizen's charter a case study of Kisii level 5 hospital. This study reviled that majority of the respondents agreed, that the charter implementation benefitted from both the implementer's disposition, competence of the staff and a conducive management structure. However, some respondents felt that little input was being taken to make the charter popular among the beneficiaries. The study established that implementation of the service charter was facing numerous challenges and that a lot was required. The implementers needed training on the strategies to implement the charter. A significant proportion of respondents were thought to be conversant with the existence and importance of the charter. However, contrary to this thought what was on the ground did not portray the same. Findings of the study further established that patients could stay in gues for extended periods beyond those stipulated in the service charters and they only complained to hospital management when there was a problem but kept quiet when not distressed. It was found that Service Charter implementation was hindered by some rules and regulations in the hospital, also communication among staff was inadequate. A significant proportion of employees were uncertain on whether standards and time frames in the charter were realistic. This study established a gap in the employee involvement in the implementation of the charter hence the need for the study on service charters as an employee performance improvement strategy.

Ngowi, (2013) conducted a study on the situation of client service charters in Tanzania, an assessment of implementation of client Service Charters in Public Sector. Among other findings he observed that despite service charters being displayed conspicuously at service points, the client feedback mechanism are not fully exploited by both clients and service providers. In his study he indicated that Charters should encourage clients to provide feedback. Client feedback can be in the form of complaints, complements or suggestions. Feedback should be seen as a means of informing improvement of public service delivery. Service Charters state how and to whom clients can provide feedback including those with special disabilities, either in person, mail, phone or any other appropriate means. Hence the need for a study on client feedback on employee performance.

Wairiuko, (2013) conducted a study on performance contracting in service delivery at city council of Nairobi where service charters were identified as an integral tool towards the performance contracting process. In her study Wairiuko (2013) established that service charters are important information tools for the public to be guided on the costs and the variety of services that are provided by the organizations in this case City Council of Nairobi. The effectiveness of the service charter was examined to understand its support in service delivery. The clear and effective display of service charter was supported by 68.3%. Those who agree to proper feedback on service delivery through comment cards on notice boards were supported by 41% of the respondents. The City Council of Nairobi had appointed Customer Care officers to coordinate quality service initiatives and the contribution of these care officers was rated 65.57%. The customers feel that their relationship between them and the council has improved and this was supported by 61.3%. The service charter was ranked as being informative was 46%. However, the proportion of those who felt that level of information on the service charter is required with regards to Client rights was quit significant.

2.5 Critique of Existing Literature

Reviewed studies established that service Charters provide a mechanism for customers to monitor the time frames within which services are to be offered and complain if the services delivered are below standard. The mechanism for complaints handling provides room for adjustment in form of service recovery (Ngowi, 2013). Review of previous scholars has indicated that Service Charters have had a positive impact in Kenya, what is in doubt though is whether such gains have been sustained or are sustainable by public service stakeholders in the medium to long-term stretch, given the ad hoc nature of Service Charter conception, design and implementation in the public sector (MOPHS, 2008-2012).

Some reviewed studies done by Muhumed (2012) revealed that the generally, service delivery at the TSC had improved to a small extent and its needs more to be done. Failures by the organization to handle respondents' complaints effectively and efficiently were noted. According to Büken and Büken (2004) establishing patients' rights is a step towards protecting patients' rights, but violation of patients' rights is common in healthcare institutions, and this is attributed to systemic and institutional obstacles, such as insufficient healthcare staff and inadequate acquisition and maintenance of technological equipment.

2.6 Summary of Literature Review

The literature review comprises of the introduction, which explains the structure of the chapter. It then presents the theoretical framework of this study as articulated by authorities. Lastly, it draws the conceptual framework for this study. Empirical review presents literature on service charter, client service standards, client rights, client feedback, service charter timelines all on employee performance finally the research gap and critique of existing literature.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Research Design

The study employed cross sectional descriptive design of the perception of customers and employees. According to Mugenda & Mugenda (2003), descriptive research attempts to provide a description of variables from members of the population. Descriptive research study first determines and describes the way things are, attitudes, challenges and successes. It portrays the facts as it really is; if another researcher goes to the field now, he or she will find the situation as described (Mugenda & Mugenda, 2003). Descriptive research is the predominant method in the behavioral sciences like this one undertaken.

3.2 Target population

This study was conducted at Webuye Sub County Hospital. The target population was all the 160 midlevel staff of the hospital, one (2) administrator, ten (10) doctors, twenty four (24) clinical officers and one hundred and fifteen(114) nurses, five (5) Laboratory Technologists and five (5) Pharmaceutical Technologists who were, employed permanent as contained in the staff register. This population was chosen because they were the most, immediate implementers of the Citizen's Charter. Also, the hospital is the largest health provider in the region and is the second Referral hospital in Bungoma County.

3.3 Census Inquiry

The study used census where the entire target population was be used in the study since the target population is 160 middle level staff who are the main implementers of the service charters. Employees were clustered based on their cadre - Administrators, Doctors, clinical officers, Laboratory Technologists, Pharmaceutical Technologists and Nurses.

No	Cadre	Population	
1.	Administrators	2	
3.	Clinical Officers	24	
2.	Doctors	10	
5.	Laboratory Technologists	5	
4.	Nurses	114	
6.	Pharmaceutical Technologists	5	

 Table 3.1: Sample and Sampling Technique

3.4 Data Collection Instruments

The researcher used questionnaires, and document analysis as the main tool for collecting data. The selection of these tools was guided by the nature of data to be collected, the time available as well as the objectives of the study, which was to identify factors that contribute to the efficiency of service delivery amongst staff. Document analysis was used to obtain data on the Employee Performance indicators at the Hospital. Questionnaire will be used since the study is concerned mainly with variables that cannot be directly observed such as views of the respondents. Owing to the nature of work of the respondents 160, questionnaire was the ideal tool for collecting data. The target population is also literate and didn't have difficulties responding to questionnaire items. The questionnaire will be in likert-type scales.

3.5 Data Collection Procedure

Quantitative data was collected from the sample population of 160 middle level staff at Webuye Sub County Hospital as from July 2016 to September 2016 using questionnaire and document analysis. The questionnaire used likert-type items to make it easier for the respondent to fill. The data was collected by the researcher so that to avoid distortion of information.

3.6 Validity of the Instruments

McMillan and Schumacher (2001) defines validity is the extent to which the interferences made on the basis of scores from an instrument are appropriate, meaningful and useful. It is the judgment of the appropriateness of a measure for specific interference or decision that results from the scores generated. The researcher piloted the questionnaire for reliability before administering to ensure that the wording, format and sequencing of questions are appropriate to yield the expected response from the respondents. Running a pilot test on questionnaires it is desirable to enable revision based on the results of the test. Piloting was meant to establish whether the instruments were relevant for data collection, identify any problems likely to occur during the actual data collection and check if the instructions in the questionnaire were clear to the respondents (Cresswell, 2000).

3.7 Reliability of the Instruments

Reliability according to Mugenda and Mugenda (2003) refers to the degree of constancy of an instrument or whether it can be relied upon to produce the same result each time it is applied. Reliability will be determined by Crobanch test where alpha value of more than 0.7 proved the reliability of the data collected. The researcher 1 administered questionnaires to middle level staff from different departments within the hospital

3.8.1 Data Analysis Procedure

The researcher used both descriptive analysis and inferential analysis to analyze the data collected. In descriptive analysis the researcher used mode, mean, median and standard deviations to get the average. The study used quantitative method to analyze data. The information was codified and entered into a spread sheet and analyzed using SPSS (statistical package for social sciences). Both dependent and independent variables are based on multiple-item constructs, and were measured through likert-type scales. The mean and standard deviation was used to determine the levels of agreement within variables. SPSS computer package was used to present the analyzed data into tables. In inferential statistics the researcher used simple linear regression models because the researcher wanted to predict the influence of the independent

variables Client Feedback, Client Service standards, Service Charter timelines and Client's Rights on employee performance

The simple linear regression equations used in this study were:

$$Y = \alpha + \beta_1 X_1$$
$$Y = \alpha + \beta_2 X_2$$
$$Y = \alpha + \beta_3 X_3$$
$$Y = \alpha + \beta_4 X_4 + \varepsilon$$

The simple regression models would then be combined to a multiple model so as to get the averages and this will be expressed as follows

 $Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \epsilon$

Where, Y = Employee performance

 α = Constant (Employee performance without effects of variables).

- $\beta_1...$ β_4 = Slope which represents the degree with which employee performance changes as the independent variable change by one unit variables.
- X_1 = Client Feedback.
- $X_2 =$ Client Service standards
- $X_3 =$ Service Charter timelines.
- $X_4 =$ Client's Rights.
- $\varepsilon = \text{Error term.}$

3.8.2 Assumptions of Multivariate Analysis

Variables are normally distributed: Regression assumes that variables have normal distributions. Non-normally distributed variables (highly skewed or kurtotic variables, or variables with substantial outliers) can distort relationships and significance tests. Multivariate Analysis assumes that variables are measured without error where simple correlation and regression, unreliable measurement causes relationships to be underestimated increasing the risk of Type II errors. In the case of multiple regression or partial correlation, effect sizes of other variables can be over-estimated if the covariate is not reliably measured, as the full effect of the covariate(s) would not be removed.

Assumption of homoscedasticity means that the variance of errors is the same across all levels of the IV. When the variance of errors differs at different values of the independent variable, heteroscedasticity is indicated.

3.9 Ethical Considerations

The study acknowledges the importance of ethical issues in a research study and therefore there was need to observe the ethical issues of confidentiality by not disclosing the identity of the respondent; integrity by using the data collected for academic purposes only; honesty by not altering the data collected and respondent's rights while dealing and getting information from them. The researcher ensured tolerance and patience throughout the research period. A letter was attached to the questionnaire explaining the purpose of the study and how the researcher will maintain privacy, confidentiality and anonymity during the study.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION, INTERPRETATION AND DISCUSSION

4.1 Response Rate

The data analyzed was obtained through questionnaires. One hundred and sixty questionnaires were issued to respondents and 144 questionnaires were returned thereby representing a 90% response rate.

4.2.1 Socio-Demographic Factors

The researcher sought to find out from the respondents the department which they worked. The responses in figure 4.1 show that most of the respondents 73.6% (106) were from nursing department, 13.9% (20) were clinical officers, 4.9% (7) Doctors, 3.5% (5) Pharmaceutical technologists, 2.8% (4) Laboratory technologists while 1.4% (2) were from administration department. This indicates that most of the respondents were from the nursing department.

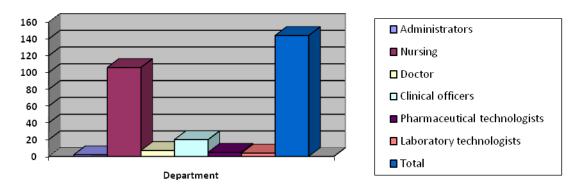


Figure 1: Department of Respondent

4.2.2 Gender of Respondents

The researcher sought to find out gender distribution among the respondents. They were requested to indicate their gender. This was to establish whether there was gender parity in Webuye sub-county hospital. The results recorded in Figure 4.2 below depicts that from the most respondents 55.6% (80) were male while 44.4% (64) female. The study findings show that there were more male respondents than female

respondents. These findings show that gender disparity existed in Webuye sub-county hospital.

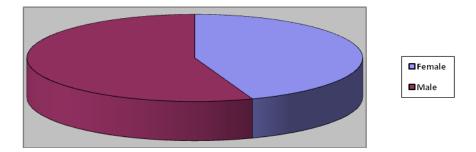


Figure 4.2: Gender of Respondents

4.2.3 Age of Respondents

The study sought to determine the age of the respondents to find out whether the maturity affected implementation of service charters and in turn influencing employee performance at Webuye Sub-County Hospital. To determine mental maturity of the respondents the researcher sought to examine their age bracket and presented the findings in Figure 4.3. The age of respondents were recorded in Figure 3 below. None was between the age of 18-21 years, 49.3% (71) were between 22-30 years while 29.9% (43) and 20.8% (30) were between 30-40 years and above 40 years respectively. The results show that majority 49.3% (71) were between 22-30 years. This implies that the respondents were mature enough to respond to the items in the questionnaire. The study findings mean that while the age of the respondents was distributed in all the age categories with concentration at 22-30 years.

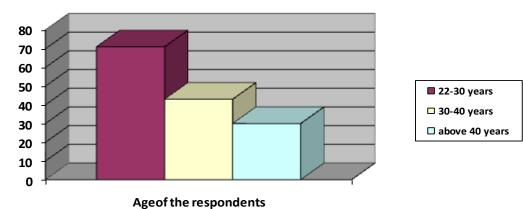


Figure 4.3 Age of Respondents

4.2.4 Highest Level of Education

For effective employees performance at Webuye Sub-County Hospital it requires effective implementation of service charters. Hospital administrators and employees should have skills in order to cope with the demands of their management and tasks. The researcher sought to find out the respondents academic qualification as presented in Figure 4.4. Results indiacte that majority 39.6% (57) of the total respondents had attained diploma in various courses, 29.9% (43) had Degrees, 20.1% (29) had Masters, 9.7% (14) had Postgraduate diploma, while only 0.7% (1) had a PhD. The study findings revealed that majority of the respondents had the relevant qualifications to work in their respective work stations. It implied that most of the respondents were qualified to understand the nature of the problem of the study. Robbins (2003) laments that the skills needed for management can be grouped into three broad categories namely technical skills, human skills and conceptual skills.

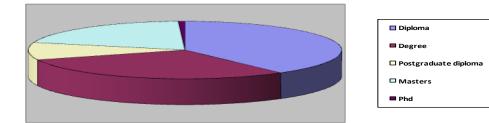


Figure 4.4 Highest Level of Education

4.2.5 Years of Service

The study sought to determine how long the respondents had worked in their respective areas to ascertain the extent to which their responses could be relied upon to make conclusions on the study problems using the experience in the organization. To determine whether respondents had been in the health care profession to gain expertise in handling of issues, the researcher sought their years of experience and presented the findings in Table 4.1. which depicts that 29.9% (43) had served up to 2 years with a majority 41.0% (59) having served between 2-6 years, 19.4% (28) had served between 6-10 years while 9.7% (14) had served for 10 years and above. The findings revealed that 41% of the respondents had been in organizations for up to two years. These findings conquer with assertion by Braxton (2008) that respondents with a higher working experience assist in providing reliable data on the study problem since they had technical experience on the problem being investigated.

Frequency	Percent
43	29.9
59	41.0
28	19.4
14	9.7
	43 59 28

Table 4.1: Years of Service

4.3. Organizational Service Charter and Employee Performance at Webuye Sub County Hospital

Service charters are important information tools for the public to be guided on the costs and the variety of services that are provided by the organizations in this case Webuye Sub County Hospital. The effectiveness of the service charter was examined to understand its support for organizational structures and therefore the influence on employee performance at Webuye Sub County Hospital. The findings of the study reveals that, 90.3% (130) of the total respondents agreed that customer comment cards are displayed in all notice boards or respective offices of the Hospital while 9.7% (14) disagreed. This shows that the customer comments are displayed in all the notice board in the organizations. On the part of customer care officers being appointed to coordinate quality services initiatives, 59.7% (86) agreed, 5.6% (8) were undecided while 34.7% (50) disagreed implying that customer care officers have been appointed to coordinate quality services initiatives at Webuye Sub County Hospital. This findings implies that organizational service charter improves employee performance through displaying the customers comments cards on the notice boards and appointing customers care officers to coordinate quality services in the at Webuye Sub County Hospital.

According to the findings in Table 4.2, majority of the respondents agreed on the aspects of the effect of Organizational Service Charter on Employee Performance, on the statement that Customer comment cards are displayed at all notice boards or respective offices ,the respondents agreed with a mean score of 1.8611 and a standard deviation of 0.82455, on customer care officers have been appointed to coordinate quality services initiatives, they agreed with a mean score of 1.6806 and a standard deviation of 0.70614

The finding agrees with a study done by Wairiuko (2013) who established that service charters are important information tools for the public to be guided on the costs and the variety of services that are provided by the organizations. The effectiveness of the service charter was examined to understand its support in service delivery.

Table 4.2 Organizational Service Charter and Employee Performance atWebuye Sub County Hospital

Statement	Mean	Std. Deviation
Customer comment cards are displayed at		
all notice boards or respective offices of at	1.8611	.82455
Webuye Sub County Hospital.		
Customer care officers have been		
appointed to coordinate quality services	1 6906	70614
initiatives at Webuye Sub County	1.6806	.70614
Hospital.		

4.4 Client Feedback and Employee Performance at Webuye Sub County Hospital

Research objective one sought to determine the influence of client feedback on employee performance at Webuye Sub County Hospital. Respondents were asked to indicate the extent to which they agreed or disagreed with items selected to reflect influence of client feedback on employee performance. The findings of the study shows that, majority 70.2% (101) of the respondents agreed that client feedback at WSCH helps to foster cooperation and team work between staff at different levels, 4.2% (6) were undecided while 25.6% (37) disagreed. Looking at client feedback at WSCH has greatly improved decision making capacity of the hospital that are result oriented system, 93.7% (116) agreed, 15.9% (23) disagreed while 3.5% (5) were undecided. Response on client feedback system to ensures availability of a veritable feedback mechanism for WSCH management and thus information for future improvement were that, 70.1% (101) agreed, 2.1% (3) were undecided while 27.7% (40) disagreed. Basing on client feedback assistance in achieving goals and objectives of the Webuye Sub County Hospital within the expected time frame, 79.8% (115) agreed, none were undecided but 20.1%(29) disagreed. This shows that client feedback improves employee performance in Webuye Sub-County hospital through fostering cooperation and team work, improving decision making and assisting in achieving goals and objectives.

According to the findings on Table 4.3, majority of the respondents agreed on the aspects of Client Feedback on Employee Performance, on the statement that Client feedback at helps to foster cooperation and team work between staff at different levels, the respondents agreed with a mean score of 1.8681 and a standard deviation of 0.9451, on Client feedback at greatly improving decision making capacity of the hospital that is a result oriented system, they agreed with a mean score of 1.9028 and a standard deviation of 0.91849, further on the issue that Client Feedback system ensures availability of a veritable feedback mechanism for Webuye Sub County Hospital management and thus information for future improvement they agreed with a mean score of 1.8056 at a standard deviation of 0.90281 .Lastly on the statement that client feedback assist in achieving goals and objectives of the Webuye Sub County Hospital within the expected time frame the respondents agreed with a mean of 1.8681 and a standard deviation of 0.94051, this implies that client feedback is a significant factor in employee performance.

This conquers with findings of Ngowi, (2013) who conducted a study on the situation of client service charters in Tanzania, he indicated that Charters should encourage clients to provide feedback. Client feedback can be in the form of complaints, complements or suggestions. Feedback should be seen as a means of informing improvement of public service delivery. Service Charters state how and to whom clients can provide feedback including those with special disabilities, either in person, mail, phone or any other appropriate means.

Table 4.3 Client Feedback and Employee Performance at Webuye Sub County Hospital

Statement	Mean	Std. Deviation
Client feedback at Webuye Sub County		
Hospital helps to foster cooperation and	1.8681	.94051
team work between staff at different	1.0001	.94031
levels.		
Client feedback at Webuye Sub County		
Hospital has greatly improved decision	1.9028	.91849
making capacity of the hospital that is a	1.9028	.91049
result oriented system.		
Client Feedback system ensures		
availability of a veritable feedback		
mechanism for Webuye Sub County	1.8056	.90281
Hospital management and thus		
information for future improvement.		
Client feedback assist in achieving goals		
and objectives of the Webuye Sub County	1.8681	.94051
Hospital within the expected time frame		

4.5 Client Service Standards and Employee Performance at Webuye Sub County Hospital

The researcher's second objective sought to find out the effects of client service standards on employee performance at Webuye Sub County Hospital. Respondents were asked to indicate the extent to which they agreed or disagreed with items selected to reflect influence of client service standards on employee performance. The findings indicates that most 89.6% (129) of respondents agreed that the client service standards procedures helps to define Webuye Sub County Hospital operational priorities and clarify workloads while 10.4% (15) disagreed. Looking at client service standards promoting people oriented customer-service governance, 79.8% (115) agreed, none was undecided while 20.1% (29) disagreed. Basing on the statement that client service standards have made it clear to know the activities, outputs and outcomes of the service delivery framework at Webuye Sub County Hospital, 79.8%

(101) agreed while 29.9% (43) disagreed. This findings clearly shows that the client service standards improve employees performance at Webuye Sub County Hospital because most of the respondents agreed that client service standard procedures helps define operational priorities and clarifies workloads, promotes people oriented customer service governance and makes clear the activities, outputs and outcomes of service delivery framework at Webuye Sub County Hospital.

Findings from the responses on the item of observing customer service standards at Webuye Sub County Hospital have a better approach for enforcing public accountability, 59.8% (86) agreed, none was undecided while 40.3% (58) disagreed.

From the descriptive statistics on the Influence of Client Service Standards on Employee Performance at Webuye Sub County Hospital as shown in table 4.4 below, majority of the respondents agreed that, Client service standards procedures help to define operational priorities and clarify workloads with a mean of 1.6458 and a standard deviation of 0.85664. The respondents also agreed that Client service standards promoted people oriented customer-service governance at Webuye Sub County Hospital with a mean of 1.7500 and standard deviation of 0.85689 on their responses on the issue Client service standards have made it clear to know the activities, outputs and outcomes with the service delivery framework at Webuye Sub County Hospital the respondents agreed with a mean of 1.6111 and a standard deviation of 0.80306. Lastly the respondents agreed that Observing customer service standards at Webuye Sub County Hospital have a better approach for enforcing public accountability with a mean of 1.7153 and a standard deviation of 0.88233.

This corroborates Fredrick Taylor's scientific management, where the charter would develop standards of operation otherwise seen as client service standards, based on baseline information that most likely may have been developed from some scientific methods or facts so as to produce similar results within the specified period and hence this is observed as a science

Table 4.4 Client Service Standards and Employee Performance at Webuye SubCounty Hospital

Statements	Mean	Std. Deviation
Client service standards procedures help		
to define Webuye Sub County Hospital operational priorities and clarify workloads.	1.6458	.85664
Client service standards promoted people oriented customer-service governance at Webuye Sub County Hospital.	1.7500	.85689
Client service standards have made it clear to know the activities, outputs and outcomes with the service delivery framework at Webuye Sub County Hospital.	1.6111	.80306
Observing customer service standards at Webuye Sub County Hospital have a better approach for enforcing public accountability.	1.7153	.88233

4.6 Observing Client Rights and Employee Performance at Webuye Sub County Hospital.

To determine the effect of observing client rights on employee performance at Webuye Sub County Hospital, a 3-point likert scale was developed, where A=Agree U=Undecided D=Disagree. To this effect, respondents were asked to affirm to their opinion, on a range of issues used as parameters for observing client rights on employee performance, as indicated below. Results reveal that most of the respondents 57% (82) agreed that observing client rights has promoted partnerships between service providers and clients, 1.4% (2) were undecided and 41.7% (60) disagreed. Focusing on the aspect of observing clients rights to encourage WSCH to have clear objectives and staff get a better understanding of what they are expected to achieve, 75.7% (109) agreed while 24.3% (35) disagreed. Basing on the statement that

client rights are circulated to all departments and are available to the various implementing committees, 70.1% (101) agreed while 29.8% (43) disagreed. Responses on staff are made aware of the client rights and their role in ensuring customer satisfaction, 75.7% (109) agreed while 24.3% (35) disagreed. From the above findings, it is evident that the observing client right has improved overall performance in general, with most respondents affirming to agree when asked on effects of observing clients rights questions. It can therefore be concluded from the findings above that observing client right increases employee performance in Webuye Sub County Hospital, as overwhelmingly attested to by the findings going by the respondents' high levels of agreement.

From the descriptive statistics table 4.5 below most of the respondents strongly agreed that Observing client rights at Webuye Sub County Hospital has promoted partnerships between service providers and clients with a mean of 1.6458 and a standard deviation of 0.85664. The respondents also agreed that observing clients rights encourages Webuye Sub County Hospital to have clear objectives and staff get a better understanding of what they are expected to achieve with a mean of 1.7500 and standard deviation of 0.85689, on their responses that Client rights are circulated to all departments and are available to the various implementing committees the respondents were in agreement with a mean of 1.6111 and a standard deviation of 0.80306 , Lastly the respondents agreed that Staff of Webuye Sub County Hospital are made aware of the client rights and their role in ensuring customer satisfaction with a mean of 1.7153and a standard deviation of 0.88233. This implied that most of the respondents agreed that observing client rights has an influence on employee performance since their responses were between mean scores of 1 and 1.8 on the continuous Likert scale

Table 4.5 Client Rights and Employee Performance at Webuye Sub CountyHospital

Statements	Mean	Std. Deviation
Observing client rights at Webuye Sub		
County Hospital has promoted	1.6458	.85664
partnerships between service providers	1.0430	.83004
and clients.		
Observing clients rights encourages		
Webuye Sub County Hospital to have		
clear objectives and staff get a better	1.7500	.85689
understanding of what they are expected		
to achieve.		
Client rights are circulated to all		
departments and are available to the	1.6111	.80306
various implementing committees.		
Staff of Webuye Sub County Hospital are		
made aware of the client rights and their	1.7153	.88233
role in ensuring customer satisfaction.		

4.7 Influence of Service Charter Timelines and Employee Performance at Webuye Sub County Hospital

To determine the influence of service charter timelines on employee performance at Webuye Sub County Hospital a 3-point likert scale was developed, where A=Agree U=Undecided D=Disagree. To this effect, respondents were asked to affirm to their opinion, on a range of issues used as parameters for determining the influence of service charter timelines on employee performance, as illustrated below. The findings indicate that, 62.5% (90) of the total respondents agreed that service delivery timelines have enabled clients develop a sense of confidence in employee performance, 2.1% (3) were undecided and 35.4% (51) disagreed. Basing on service charter timelines provide information on service delivery by Webuye Sub County Hospital which is readily available, 65.3% (94) agreed, none was undecided while 34.7% (50) disagreed. Looking at service charter timelines have helped improve

efficiency and effectiveness on employee performance at WSCH through the achievement of set goals and objectives, 65.3% (94) agreed, 2.4% (4) were undecided while 32.0% (46) disagreed. Focusing on the statement that service charter timelines provide a reliable means to measure service performance and delivery at WSCH priority areas, 65.3% (94) agreed, none was undecided while 34.7% (50) disagreed. From the findings, service charter has greatly influenced employee performance at Webuye Sub County Hospital, with most respondents agreeing when asked on the influence of service charter timelines on employee performance.

On the Influence of Service Charter Timelines on Employee Performance at Webuye Sub County Hospital as presented in table 4.7 below, the study established that majority of the respondents agreed that, Service delivery timelines at Webuye Sub County Hospital have enabled clients develop a sense of confidence in employee performance as shown by mean of 1.5556 and a standard deviation of 0.81745, they also agreed on the statement that Service charter timelines provide information on service delivery by Webuye Sub County Hospital which is readily available as shown by mean of 1.6319 and a standard deviation of 0.83412, on the statement that Service charter timelines have helped improve efficiency & effectiveness on employee performance at Webuye Sub County Hospital through the achievement of set goals and objectives it was agreed as shown by mean of 1.4375 and a standard deviation of 0.71662 and finally they agreed that Service charter timelines provide a reliable means to measure service performance and delivery at Webuye Sub County Hospital priority areas as shown by a mean of 1.5139 and a standard deviation of 0.79321.

It therefore goes that service charter timelines indeed increases overall efficiency employee performance at Webuye Sub County Hospital, as overwhelmingly attested to by the findings and to a great extent at that can be concluded from the findings above by the high levels of agreement from the respondents. This result conquer with Ngowi, (2013) who said service charters provide a mechanism for customers to monitor the time frames within which services are to be offered and complain if the services delivered are below standard. The mechanism for complaints handling provides room for adjustment in form of service recovery. The need for public institutions to report on implementation of their charters provides a basis for the public to hold the institutions accountable for service delivery results. Failure by an institution to deliver the service commitments and service remedies will have a negative influence on the institution's image and reputation. This will compel them to improve on their quality and work performance (Ngowi, 2013).

This corroborates the Max Weber theory of management, otherwise known as the bureaucratic management theory, where the Charter is seen as a tool that is meant to ensure that activities that an employee does in order to deliver a service to a client should follow a certain sequence with timelines so as to produce the desired results. These orders of activities that develop may be seen as bureaucratic.

Table 4.7 Service Charter Timelines and Employee Performance at Webuye SubCounty Hospital

Statement	Mean	Std. Deviation
Service delivery timelines at Webuye Sub		
County Hospital have enabled clients	1.5556	.81745
develop a sense of confidence in	1.5550	.01745
employee performance.		
Service charter timelines provide		
information on service delivery by	1.6319	.83412
Webuye Sub County Hospital which is	1.0317	.03412
readily available.		
Service charter timelines have helped		
improve efficiency & effectiveness on		
employee performance at Webuye Sub	1.4375	.71662
County Hospital through the achievement		
of set goals and objectives.		
Service charter timelines provide a		
reliable means to measure service	1.5139	.79321
performance and delivery at Webuye Sub	1.3137	./7321
County Hospital priority areas.		

4.8 Service Charters and Employee Performance at Webuye Sub-County Hospital

To determine the influence of service charter on employee performance at Webuye Sub-County Hospital, a 3-point likert scale was developed, where A=Agree U=Undecided D=Disagree. To this effect, respondents were asked to give their opinion, on a range of issues related to the influence of service charter on employee performance

From the findings 68.0 % (98) of the total respondents agreed that service charter adoption leads to improvement in timeliness adherence by employee, 0.7% (1) were undecided and 31.2% (45) disagreed. Basing on service charter adoption leads to improvement in service quality of employees, 75.7% (109) agreed, none was undecided while 24.3% (35) disagreed. Looking at Service charter adoption leading to improvement in efficiency of service delivery by employees at Webuye Sub County Hospital, 77.1% (111) agreed, 2.8% (4) were undecided while 20.1% (29) disagreed. On the statement that focusing on service charter helps to identify the strengths and weaknesses of the employee through feedback, 68.7% (99) agreed, none was undecided while 31.2% (45) disagreed. Responses on service charter helping to foster cooperation and team work between employees, 85.5% (123) agreed, none was undecided while 14.6% (21) disagreed. From the above findings, it is evident that service charters have improved overall performance in general, with most respondents affirming to agree when asked on influence of service charters on employee performance questions, as seen in the table. It can therefore be concluded from the findings above that service charters increase employee performance in Webuye Sub County Hospital, as overwhelmingly attested to by the findings going by the respondents' high levels of agreement.

According to the findings on Table 4.8, majority of the respondents agreed on the aspects of influence of service charters on employee performance at Webuye Sub-County Hospital, on the statement that service charter adoption leads to improvement in timeliness adherence by employees ,the respondents agreed with a mean score of 1.6597 and a standard deviation of 0.89414, on service charter adoption leads to improvement in services quality of employees, they agreed with a mean score of 1.7292 and a standard deviation of 0.89457, further on the issue that service charter

adoption leads to improvement in efficiency of service delivery by employees at Webuye Sub County Hospital they agreed with a mean score of 1.6389 at a standard deviation of 0.86591, on the statement that service charters helps to identify the strengths and weaknesses of the employee through feedback, respondents agreed with a mean score of 1.6944 and a standard deviation of 0.90281.Lastly on the statement that Service charter helps to foster cooperation and team work between employees the respondents agreed with a mean of 1.6597 and a standard deviation of 0.89414, this implies that service charters have a significant influence on employee performance since their responses were between mean scores of 1 and 1.8 on the continuous Likert scale.

 Table 4.8 Service Charters and Employee Performance at Webuye Sub-County

 Hospital

Statements	Mean	Std. Deviation
Service charter adoption leads to		
improvement in timeliness adherence by	1.6597	.89414
employees		
Service charter adoption leads to		
improvement in service quality of	1.7292	.89457
employees		
Service charter adoption leads to		
improvement in efficiency of service	1.6389	.86591
delivery by employees		
Service charter helps to identify the		
strength and weakness of the employee	1.6944	.90281
through feedback		
Service charter helps to foster cooperation	1 (507	20414
and team work between employees	1.6597	.89414

4.9. Inferential Statistics

4.9.1 Correlation Analysis

Pearson's product moment correlation coefficient was applied to check whether there is linear relationship between the variables. The correlation shown in the table 4.9 below presents bivariate correlations between the study variables (client feedback, client service standards, service charter timelines, clients' rights and employee performance). Since a single construct in the questionnaire was measured by multiple items, the average score of the multi-items for a construct was computed and used in further analysis such as correlation analysis (Wang & Benbasat, 2007).

From the study, when the correlation coefficient values (r) ranges from 0.10-0.29, it is considered to be weak correlation, 0.30-0.49, medium, 0.5-1.0 is considered strong (Wong & Hiew, 2005). According to Field (2005), correlation coefficient should not go beyond 0.9 to avoid Multicollinearity. In this research, the highest correlation coefficient is 0.819, thereby implying that there was no multicollinearity problem in this research, since the value is less than 0.9. Thus client feedback is positively (r= 0.680, p < 0.00), client service standards is positively and statistically significant (r= 0.775, p < 0.00), service charter timelines is positively and statistically significant (r= 0.726, p < 0.000 and clients rights is positively and statistically significant, (r = 0.819, p < 0.000). This implies that all the study variables client feedback, client service standards, service charter timelines, clients rights were correlated to employee performance and were positively and statistically significant.

		Client	Clients	Service	Clients	Employee
		feedback	service	charter	rights	performance
			standards	timelines		
Client	Pearson	1				
feedback	Correlation	1				
Clients	Pearson					
service	Correlation	.775	1			
standards	Correlation					
Service	Pearson					
charter	Correlation	.693	.867	1		
timelines	Correlation					
Clients	Pearson	.773	.874	002	1	
rights	Correlation	.115	.874	.903	1	
Employee	Pearson	.680	.775	.726	.819	1
performance	Correlation	.000	.115	.720	.017	1

 Table 4.9 Correlations Analysis Between the Dependent and Independent

 Variables

**. Correlation is significant at the 0.01 level (2-tailed).

4.9.2 Regression Analysis

The research used simple linear regression analysis to determine the linear statistical relationship between the independent (Client feedback, Clients service standards, Service charter timelines, Clients rights) and dependent variable (Employee performance).

4.9.2.1 Tests for Regression Analysis Assumptions

4.9.2.1 1. Normality Assumption

The study assumed that all the variables have normal distribution, using the Q - Q plot the variables were found to have a significance level of less than 0.05. This is shown in table 4.10 below

Table 4.10 Q – Q Plot

		Client	Clients	Service	Clients	Employee
		feedback	service	charter	rights	performance
			standards	timelines		
Ν		144	144	144	144	144
Normal	Location	.0000	.0000	.0000	.0000	.0000
distribution	Scale	1.000	1.000	1.000	1000	1.000

From the table 4.10 above, it is indicated that the data used in this study is normally distributed and hence can be subjected to other statistical tests of significance used to test the relationship between independent and dependent variables that require normally distributed data. This is because the significance values of all the variables were below 0.05 confidence level.

4.9.2.1.2 Linearity Assumptions

Linearity assumption accurately estimates the relationship between dependent and independent variables; it tests if the relationships are linear in nature. It was essential to examine analyses for non-linearity. Non linearity of the regression analysis underestimate the true relationship between the study variables, this was done by use of the Pearson product moment Correlation

The results indicated that there was a positive linear relationship coefficient of client feedback p=0.000, client service standards p=0.000, service charter timelines p=0.000, and clients rights p=0.000 which was significant at 0.05 level. This result indicates that the independent variables of the study (client feedback, client service standards, service charter timelines, and clients' rights) move in the same direction as the strategy implementation thus assumption of linearity was supported. The results are shown in table 4.11 below

		Client	Clients	Service	Clients	Employee
		feedback	service	charter	rights	performance
			standards	timeline		
Client	Pearson	1				
feedback	Correlation	1				
Clients	Doorson					
service	Pearson Correlation	.775**	1			
standards	Correlation					
Service	Pearson					
charter	Correlation	.693**	.867**	1		
timelines	Correlation					
Cliente richte	Pearson	772**	074**	.903**	1	
Clients rights	Correlation	.773**	.8/4***	.903***	1	
Employee	Pearson	<u> </u>	775**	726**	010**	1
performance	Correlation	.680**	.775**	.726**	.819**	1

Table 4.11 Linearity Assumptions

**. Correlation is significant at the 0.01 level (2-tailed).

4.9.2.1.3. Homoscedasticity Assumptions

Homoscedasticity means that the variance of errors is similar across all levels of the independent variables. This was checked by use of Durbin-Watson statistic to assess the autocorrelation for the four variables (Client feedback, Clients service standards, Service charter timelines, and Clients rights). The assumption of homoscedasticity refers to equal variance of errors across all levels of the independent variables (Osborne & Waters, 2002). This means that researchers assume that errors are spread out consistently between the variables (Keith, 2006). The Durbin-Watson statistic should be between 1.5 and 2.5 and only from direct neighbors are first order effects. Though from the study the Durbin-Watson statistic is .339 its prove that the variables were not first order variables. The results as shown in table 4.12 below

Mode	el R	R	Adjusted	R Std.	Error	of Durbin-Watson
		Square	Square	the E		
1	.834 ^a	.696	.687	.4438	36	.339

Table 4.12 Homoscedasticity Assumptions test

a. Predictors: (Constant), client feedback, client services standards, service charter timelines, clients rights

b. Dependent Variable: Employee performance

4.10 Test of Hypotheses

On determining that all the variables of service charters on employee performance at Webuye sub-county hospital organizational culture had an effect on employee performance the study computed regression model for each of the variables independently indicating how they interacted in the study.

4.10.1 Linear Regression Model of Employee Performance and Client Feedback

The linear regression analysis models on the relationship between the dependent variable employee performance and independent variable client feedback. The results are shown in the section that follows

Mod	el R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.680 ^a	.462	.459	.58354

a. Predictor: (Constant), client feedback

The coefficient of determination (R^2) and correlation coefficient (R) shows the degree of association between client feedback and employee performance. The results of the linear regression in table 4.13 indicate that $R^2 = 0.462$ and R = 0.680. R value gives an indication that there is a strong linear relationship between client feedback and employee performance. The R^2 indicates that explanatory power of the independent variables is 0.497. This means that about 46.2% of the variation in employee performance is explained by the regression model while 53.8 % is unexplained by the model. Adjusted R^2 is a modified version of R^2 that has been adjusted for the number of predictors in the model by less than chance. The adjusted R^2 of 0.459 which is slightly lower than the R^2 value is exact indicator of the relationship between the independent and the dependent variable because it is sensitive to the addition of irrelevant variables.

Model		Sum	of Df	Mean	F	Sig.
		Squares		Square		
	Regression	41.583	1	41.583	122.117	.000 ^a
1	Residual	48.354	142	.341		
	Total	89.937	143			

Table 4.14 ANOVA of Employee Performance and Client Feedback

a. Dependent Variable: Employee performance

b. Predictors: (Constant), Client feedback

From table 4.14 above The F test provides an overall test of significance of the fitted regression model. The F value indicates that all the variables in the equation are important hence the overall regression is significant. The F-statistics produced (F = 122.117) was significant at p = 0.000 thus confirming the fitness of the model and therefore, there is statistically significant relationship between client culture and employee performance. The study therefore rejects the first null hypothesis; H₀₁There is no significant effect of client feedback on employee performance in Webuye Sub County hospital.

Table 4.15	Coefficients of	employee	performance and	Client feedback
	000000000000000000000000000000000000000			0110110100000000

Mode	el	Unstandardized		Standardized	ΙT	Sig.
		Coefficients		Coefficients		
		В	Std. Error	Beta		
	(Constant)	.262	.120		2.176	.000
1	Client feedback	.654	.058	.680	11.051	.000

a. Dependent Variable: employee performance

The Table 4.15 indicates there was positive linear relationship between client feedback and employee performance which reveals that an increase in client feedback leads to increased employee performance. Client feedback was significant (p = 0.000) in employee performance contributing 68%. This implies that client feedback have more employee performance.

In conclusion therefore the linear regression established that clients feedback could statistically significantly predict employee performance, F (1, 142) = 122.17, p = 0.0001 and clients feedback accounted for 46.2% of the explained variability in employee performance. The regression equation was

Predicted employee performance = .262 + .654x (clients feedback) which is equivalent to

$$Y = .262 + .654x$$

Ho 1: Client Feedback does not have a significant effect on employee performance at Webuye Sub County Hospital.

Predicted employee performance = .262 + .654x (clients feedback) which is equivalent to Y = .262 + .654x

The study therefore rejects the first null hypothesis; H_{01} There is no significant effect of client feedback on employee performance in Webuye Sub County hospital. and therefore concludes that there is a relationship between client feedback and employee performance. Ngowi (2013) in is his study observed that despite service charters being displayed conspicuously at service points, the client feedback mechanism are not fully exploited by both clients and service providers. In his study he indicated that Charters should encourage clients to provide feedback. Client feedback can be in the form of complaints, complements or suggestions. Feedback should be seen as a means of informing improvement of public service delivery. Service Charters state how and to whom clients can provide feedback including those with special disabilities, either in person, mail, phone or any other appropriate means.

4.10.2 Linear regression model of Employee Performance on Client Service Standards

The linear regression analysis models the relationship between the dependent variable

employee performance and independent variable client service standards. The results are shown in sections that follow

Table 4.16 Model Summary of Employee Performance on Client ServiceStandards

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.775 ^a	.600	.597	.50320

a. Predictors: (Constant), Client Service Standards

The coefficient of determination (R^2) and correlation coefficient (R) shows the degree of association between Client Service Standards and employee performance in Webuye Sub County Hospital. The results of the linear regression in table 4.16 indicate that R^2 =0.600 and R = 0.775. R value indicates that there is a strong linear relationship between client service standards and employee performance in Webuye Sub County. The R^2 indicates that explanatory power of the independent variables is 0.600. This means that 60% of the variation in strategy implementation is explained by the regression model while 40 % is unexplained by the model.

Adjusted R^2 is a modified version of R^2 that has been adjusted for the number of predictors in the model by less than chance, The adjusted R^2 of 0.597 which is slightly lower than the R^2 value is an exact indicator of the relationship between the independent and the dependent variable because it is sensitive to the addition of irrelevant variables.

This implies that client service standards have a strong influence on employee performance in Webuye Sub County hospital.

Model		Sum	of Df	Mean	F	Sig.
		Squares		Square		
	Regression	53.981	1	53.981	213.186	.000 ^b
1	Residual	35.956	142	.253		
	Total	89.937	143			

Table 4.17 ANOVA of Employee Performance and client Service Standards

a. Dependent Variable: employee performance

b. Predictors: (Constant), client service standards

From table 4.17 above The F test provides an overall test of significance of the fitted regression model. The F value indicates that all the variables in the equation are important hence the overall regression is significant. The F-statistics produced (F = 213.186) was significant at p = 0.000 thus confirming the fitness of the model and therefore, there is statistically significant relationship between client service standards and employee performance in Webuye Sub County Hospital. The study therefore rejects the second null hypothesis; H_{02} There is no significant effect of client service standards on employee performance in Webuye Sub County Hospital.

Model		Unstanda	Unstandardized		d T	Sig.
		Coefficie	Coefficients		Coefficients	
		В	Std. Error	Beta		
	(Constant)	.017	.109		.156	.000
1	client service standards	.870	.060	.775	14.601	.000

 Table 4.18 Coefficients of Employee Performance and Client service standards

a. Dependent Variable: employee performance

The Table 4.18 indicates there was positive linear relationship between client service standards and employee performance which reveals that an increase in client service standards leads to employee performance. Client service standards was significant (p = 0.000) in employee performance contributing 60 %. This implies that client service standards have an influence on employee performance in Webuye Sub County hospital.

In conclusion therefore the linear regression established that clients service standards could statistically significantly predict employee performance, F (1, 142) = 213.186, p = 0.0001 and clients service standards accounted for 60 % of the explained variability in employee performance. The regression equation was

Predicted employee performance = .017 + .870x (clients service standards) which is equivalent to

$$Y = .017 + .870x$$

Ho 2: Client Service Standards do not have a significant effect on employee performance at Webuye Sub County Hospital.

Predicted employee performance = .017 + .870x (clients service standards) which is equivalent to Y = .017 + .870x

The study therefore rejects the second null hypothesis; H₀₂There is no significant effect of client service standards on employee performance in Webuye Sub County Hospital and therefore concludes that there is a relationship between employee service standards and employee performance. This tends to differ with the findings of other studies where some Agencies have not made their charters public therefore the citizens are not aware of services standards to be provided. In some occasions, the service standards set in the charters were not implemented as documented during business process reviews or improvements. Some of these standards are seen as being overambitious and unrealistic. Some agencies have stated standards which were already being met prior to their inclusion in the charter. Significant proportions of Agencies do not monitor and evaluate implementation and impacts of their charters. A large proportion of citizens are not using charters to demand better services (Ngowi, 2013).

4.10.3 Linear regression model of Employee Performance and Service Charter timelines

The linear regression analysis models on the relationship between the dependent variable employee Performance and independent variable Service Charter. The results are shown in sections that follow

 Table 4.17 Model Summary of Employee Performance and Service Charter

 Timelines

Model	R	R Square	Adjusted	R Std. Error of the Estimate
			Square	
1	.726 ^a	.526	.523	.54766

a. Predictors: (Constant), Service Charter timelines

The coefficient of determination (R^2) and correlation coefficient (R) shows the degree of association between service charter timelines and employee performance in Webuye Sub County hospital. The results of the linear regression in table 4.17 indicate that R^2 =0.526 and R = 0.726. R value indicates that there is a strong linear relationship between service charter timelines and employee performance in Webuye Sub County Hospital. The R^2 indicates that explanatory power of the independent variables is 0.526. This means that 52.6% of the variation in strategy implementation is explained by the regression model while 47.4 % is unexplained by the model.

Adjusted R^2 is a modified version of R^2 that has been adjusted for the number of predictors in the model by less than chance. The adjusted R^2 of 0.523 which is slightly lower than the R^2 value is an exact indicator of the relationship between the independent and the dependent variable because it is sensitive to the addition of irrelevant variables. The adjusted R^2 indicates that 52.6% of the changes in employee performance are explained by the model while 47.4 % is not explained by the model This implies that level of rationale culture has a strong influence on strategy implementation in Webuye Sub County hospital. These results are consistent with the Ngowi (2013) that failure by an institution to deliver the service commitments and service remedies will have a negative impact on the institution's image and reputation. This will compel them to improve on their quality and work performance

Table 4.18 ANOVA of employee performance on service charter timelines and

Mode	1	Sum	of Df	Mean	F	Sig.
		Squares		Square		
	Regression	47.346	1	47.346	157.855	.000 ^b
1	Residual	42.591	142	.300		
	Total	89.937	143			

a. Dependent Variable: employee performance

b. Predictors: (Constant), service charter timelines

From table 4.18 above The F test provides an overall test of significance of the fitted regression model. The F value indicates that all the variables in the equation are important hence the overall regression is significant. The F-statistics produced (F = 157.855) was significant at p = 0.000 thus confirming the fitness of the model and therefore, there is statistically significant relationship between service charter timelines and employee performance in Webuye Sub County Hospital. The study therefore rejects the third null hypothesis: H_{03} There is no significant effect service charter timelines on employee performance.

Model		Unstandardized		Standardized	Т	Sig.
		Coefficients		Coefficients		
		В	Std. Error	Beta		
	(Constant) Service	.136	.116		1.171	.000
1	Charter Timelines	.875	.070	.726	12.564	.000

 Table 4.19 Coefficients of Employee Performance on Service Charter Timelines

a. Dependent Variable: Employee Performance

The Table 4.19 indicates there was positive linear relationship between rationale culture and strategy implementation which reveals that an increase in Service Charter Timelines leads to increased Employee Performance. Service Charter Timelines was significant (p = 0.000) in Employee Performance contributing 70%. This implies that Service Charter Timelines has an influence on Employee Performance in Webuye Sub County Hospital.

In conclusion therefore the linear regression established that service charter timelines could statistically significantly predict employee performance, F (1, 142) = 157.855, p = 0.0001 and service charter timelines accounted for 52.6% of the explained variability in employee performance. The regression equation was

Predicted employee performance = .136 + .875x (service charter timelines) which is equivalent to

$$Y = .136 + .875x$$

Ho 3: Timelines stated in Service Charters have no significant influence on employee performance at Webuye Sub County Hospital.

Predicted employee performance = .136 + .875x (Service charter timelines) which is equivalent to Y = .136 + .875x

The study therefore rejects the third null hypothesis: H₀₃There is no significant effect service charter timelines on employee performance and therefore concludes that there is a relationship between service charter timelines and employee performance. This result conquer with Ngowi, (2013) who said service charters provide a mechanism for customers to monitor the time frames within which services are to be offered and complain if the services delivered are below standard. The mechanism for complaints handling provides room for adjustment in form of service recovery. The need for public institutions to report on implementation of their charters provides a basis for the public to hold the institutions accountable for service delivery results

4.10.4 Linear Regression Model of Employee Performance and Clients Rights

The linear regression analysis models the relationship between the dependent variable employee performance and independent variable clients' rights. The results are shown in sections that follow

Model R	R Square	Adjusted R Square	Std. Error of the Estimate

.45645

Table 4.20 Model Summary of Employee Performance and clients rights

.669

Predictors: (Constant), clients rights

.671

.819^a

1

The coefficient of determination (R^2) and correlation coefficient (R) shows the degree of association between clients' rights and Employee Performance in Webuye Sub County Hospital. The results of the linear regression in table 4.20 indicate that R^2 =0.671 and R = 0.819. R value indicates that there is a strong linear relationship between clients' rights and Employee Performance and employee performance in Webuye Sub County Hospital. The R^2 indicates that explanatory power of the independent variables is 0.671. This means that 67.1% of the variation in employee performance is explained by the regression model while 67.1 % is unexplained by the model.

Adjusted R^2 is a modified version of R^2 that has been adjusted for the number of predictors in the model by less than chance, the adjusted R^2 of 0.669 which is slightly lower than the R^2 value is an exact indicator of the relationship between the independent and the dependent variable because it is sensitive to the addition of irrelevant variables. The adjusted R^2 indicates that 66.9% of the variation in employee performance is explained by the regression model while 39.1 % is unexplained by the model.

This implies that level of clients' rights has a strong influence on employee performance in Webuye Sub County Hospital. These findings are in line with studies done by Rider and Makela (2003) which avers that an analysis of patients' rights across a sample of five African countries, it has been established that irrespective of how comprehensive a country's statement of rights is, patients' familiarity and awareness with the rights is crucial to quality and effectiveness of the healthcare structures and functions

Further studies done by Büken and Büken (2004) also establish that patients' rights are a step towards protecting patients' rights. However he goes on to say that violation of patients' rights is common in healthcare institutions he attributes this to systemic and institutional obstacles, such as insufficient healthcare staff and inadequate acquisition and maintenance of technological equipment. Meeting and maintaining patients' needs should be the core principal behind patients' rights, however, ignorance about rights, lack of standards of practice among healthcare providers and the impact of service pressure and subsequent lack of holistic care are among of the

factors that are believed to slow down the implementation of patients' rights (Albishi, 2004).

Model		Sum	of Df	Mean	F	Sig.
		Squares		Square		
	Regression	60.353	1	60.353	289.690	.000 ^b
1	Residual	29.585	142	.208		
	Total	89.937	143			

 Table 4.21 ANOVA of Employee Performance on clients rights

a. Dependent Variable: Employee Performance

b. Predictors: (Constant), clients rights

From Table 4.20 above The F test provides an overall test of significance of the fitted regression model. The F value indicates that all the variables in the equation are important hence the overall regression is significant. The F-statistics produced (F = 289.680) was significant at p = 0.000 thus confirming the fitness of the model and therefore, there is statistically significant relationship between clients rights and Employee Performance in Webuye Sub County Hospital. The study therefore rejects the fourth null hypothesis: H_{04} There is no significant effect of clients' rights on Employee Performance at Webuye Sub County Hospital.

Model		Unstandardized		Standardized	Т	Sig.
		Coefficients		Coefficients		
		В	Std. Error	Beta		
1	(Constant)	.128	.088		1.449	.000
	clients rights	.804	.047	.819	17.020	.000

Table 4.22 Coefficients of Employee Performance on clients' rights.

a. Dependent Variable: Employee Performance

The Table 4.22 indicates there was positive linear relationship between clients' rights and Employee Performance which reveals that an increase in clients' rights leads to increased Employee Performance. Clients rights was significant (p = 0.000) in Employee Performance contributing 81.9%. This implies that clients' rights have an influence on Employee Performance in Webuye Sub County Hospital. A consensus is

there between these findings and those of Ellison (2000) whereby client rights include: the right to access services, the right to lodge a complaint, the right to privacy and confidentiality, the right to review and appeal, the right to see information, facilities and information in a manner which meets the client's needs. Further consensus is obtained by studies done by Büken and Büken (2004) who established that patient' rights is a step towards protecting patients' rights

In conclusion therefore the linear regression established that clients rights could statistically significantly predict employee, F (1, 142) = 289.680, p = 0.0001 and clients rights accounted for 67.1% of the explained variability in employee performance. The regression equation was

Predicted employee performance = .128 + .804 (clients rights) which is equivalent to

Y = .128 + .804x

Ho 4: Observing Clients rights has no significant influence on employee performance at Webuye Sub County Hospital.

Predicted employee performance = .128 + .804x (clients rights) which is equivalent to Y = .128 + .804x

The study therefore rejects the fourth null hypothesis: H₀₄There is no significant effect of client's rights on Employee Performance and therefore concludes that there is a relationship between client rights and employee performance. Studies conducted previously in Britain indicated that the implementation of Client Service Charters has raised the awareness amongst users on their rights in relation to services provided by government departments and in turn has had a positive impact on culture change among service providers. Significant improvements have been registered relating to the implementation of Service Charter in the following service sectors: health sector, social security, court system, housing services, utilities and Inland Revenue (Tamrakar, 2010).

4.11 Overall regression model

Model		Unstandardized		Standardized t		Sig.
		Coefficients		Coefficients		
		В	Std. Error	Beta		
1	(Constant)	.024	.105		.225	.822
	clients' feedback	.080	.072	.083	1.119	.265
	client service standards	.338	.118	.301	2.866	.005
	service charter timelines	.244	.142	202	-1.717	.088
	client rights	.662	.129	.674	5.140	.000

Table 4.25 Coefficients of employee Performance on clients' feedback, client service standards, service charter timelines and client rights

a. Dependent Variable: employee Performance

From the results in Table 4.25 above it is indicated that the regression weights of all the independent variables (clients' feedback, client service standards, service charter timelines and client rights) were significant. This means that all the postulated hypotheses were not supported. Thus clients' feedback p = 0.265, client service standards p = 0.005, service charter timelines p = 0.088, client rights p = 0.000 are predictor variables for employee Performance in Webuye Sub County hospital.

Table 4.25 above shows the regression coefficients of the independent variables clients' feedback, client service standards, service charter timelines and client rights are statistically significant in explaining employee Performance in Webuye Sub County hospital. Thus the regression equation becomes;

$Y = 0.024 + 0.80X_1 + 0.338X_2 + 0.244X_3 + 0.662X_4$

Where:

Y= employee performance, dependent variable α = constant X₁= clients' feedback X₂= client service standards X₃= service charter timelines X₄= client rights

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Summary of the Findings

The study's main objective is to evaluate effects of service charters on employee performance at Webuye Sub-County Hospital. The specific objectives were to determine the influence of client feedback on employee performance, to determine the effect of client service standards on employee performance, to investigate the influence of timelines stated in service charters on employee performance and finally to explore the influence of observing clients rights employee on performance at Webuye Sub-County Hospital. With all the other departments having an average of less than 15% representation, majority of the respondents were from the nursing

department, which is reasonable considering the nature of activities in a hospital. Males were found to be the most dominant gender in various across the positions in the various departments in Webuye Sub-County Hospital. A majority of the respondents are also diploma holders, closely followed by degree holders then post graduates and Phd. A majority of the respondents have served in the institution between 2-6 years. This is followed by those who have served for a period of up to two years, then 6-10 and above 10 years categories respectively. With the majority having served between 2-6 years, the data collected can be deemed reliable, with respect to assessing the relationship between the variables over the years.

Research objective one sought to determine the influence of client feedback on employee performance at Webuye Sub County Hospital. Respondents were asked to indicate the extent to which they agreed or disagreed with items selected to reflect influence of client feedback on employee performance. This shows that client feedback improves employee performance in Webuye Sub-County hospital through fostering cooperation and team work, improving decision making and assisting in achieving goals and objectives.

The researcher's second objective sought to find out the effects of client service standards on employee performance at Webuye Sub County Hospital. Respondents were asked to indicate the extent to which they agreed or disagreed with items selected to reflect influence of client service standards on employee performance. This findings clearly shows that the client service standards improve employees performance at Webuye Sub County Hospital because most of the respondents agreed that client service standard procedures helps define operational priorities and clarifies workloads, promotes people oriented customer service governance and makes clear the activities, outputs and outcomes of service delivery framework at Webuye Sub County Hospital.

The third objective was based to determine the effect of observing client rights on employee performance at Webuye Sub County Hospital. Respondents were asked to affirm to their opinion, on a range of issues used as parameters for observing client rights on employee performance. From the findings, it is evident that the observing client right has improved overall performance in general, with most respondents affirming to agree when asked on effects of observing clients rights questions. It can therefore be concluded from the findings that observing client rights increases employee performance in Webuye Sub County Hospital. Objective four was set to determine the impact of service charter timelines on employee performance at Webuye Sub County Hospital. The findings showed that service charter has greatly influenced employee performance at Webuye Sub County Hospital, with most respondents agreeing when asked on the impact of service charter timelines on employee performance. It therefore goes that service charter timelines indeed increases overall efficiency employee performance at Webuye Sub County Hospital, as overwhelmingly attested to by the findings and high levels of agreement from the respondents.

Finally results on the impact of service charter on employee performance at Webuye Sub-County Hospital. Respondents gave their opinion on a range of issues related to the impact of service charter on employee performance that service charters have improved overall performance in general, with most respondents affirming to agree when asked on impact of service charters on employee performance questions. It can therefore be concluded from the findings that service charters increases employee performance in Webuye Sub County Hospital, as overwhelmingly attested to by the findings going by the respondents' high levels of agreement.

5.2 Conclusion

Implementation of Service Charters is an important strategic process that seeks to improve service delivery in hospitals and address the challenges there off. The research attained its basic objectives; to evaluate the effects of Service Charters on employee performance at Webuye Sub county Hospital.

The study corroborate with both the Fredrick Taylor's scientific management and Max Weber theory of management,

The Max Weber theory of management otherwise known as the bureaucratic management theory, where the Charter is seen as a tool that is meant to ensure that activities that an employee does in order to deliver a service to a client should follow a certain sequence with timelines so as to produce the desired results. These orders of activities that develop may be seen as bureaucratic.

The Fredrick Taylor's scientific management, where the charter would develop standards of operation otherwise seen as client service standards, based on baseline information that most likely may have been developed from some scientific methods or facts so as to produce similar results within the specified period and hence this is observed as a science

5.3 Recommendations

The findings of this survey study ascertained that implementation of Service charters at Webuye sub County Hospital improves employee performance and this may be replicated in other health institutions, the researcher made the following recommendations that will lead to the improvement of the strategy and its application. In light of the above, the study recommends the following Service Charter aspects as areas of improvement identified from the study. To improve employee performance in health institutions, there is need to ensure that top-level managers are accountable for results, and in turn hold those below them accountable. Experience from other countries practicing a similar system indicates that Service Charters provide a mechanisms for bottom up information flow and vice versa hence increasing the efficiency of decision making. An information flow System should therefore be developed for elimination of communication barriers depending on the hierarchical level of individuals as per the evaluation results. This would encourage individual public officers to perform well and also discourage poor performance in general.

Hospital should put in place mechanisms for intensive capacity building the staff on strategies of implementing the charters and consequently, on how to maximize the utilization of the existing staff. They should invest in capacity building of health care workers and also encourage them to pursue courses on their own, which would be beneficial to their ability to implement the charters.

5.4 Suggestions for further studies

In the Health care sector in Kenya areas of further research that may provide more insights on the successes and challenges and lessons learned are the implementation of Service charters in Privately Health care facilities as opposed to the government owned facilities both for the staff and clientele visiting the facilities.

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APPENDICES

Appendix 1: Questionnaire

My name is Timothy Shalo. I am a student of Master's Degree in Business Administration - Strategic Management option at Kisii University – Eldoret Campus. I am currently conducting a study on "EVALUATING EFFECTS OF SERVICE CHARTERS ON EMPLOYEE PERFORMANCE AT WEBUYE SUB-COUNTY HOSPITAL. The information you provide to us will be kept strictly anonymous and confidential and used solely for the purpose of the study.

SECTION A: A SOCIO – DEMOGRAPHIC FACTORS

1. Department of respondent

() Administration () Nursing () Doctor () Clinical Officer

2. Sex:

() Male () Female

3. Age:

() 18-21 years () 22-30 years () 30-40 years () Above 40 years

4. Highest Level Education Attained:

() Diploma () Degree () Postgraduate diploma () Masters () PHD

5. Year of service

() Up to 2 yrs () 2 -6 yrs () 6-10yrs () above 10 yrs $\,$

SECTION B: Service Charters on Employee Performance

The tool used is a three point Likert Scale that was calibrated as

1=Agree 2=Undecided 3=Disagree.

B1: Effect of Organizational Service Charter on employee performance at Webuye Sub County Hospital

	PARTICULARS	1	2	3
I.	Customer comment cards are displayed in all notice boards or respective offices			
II.	Customer Care officers have been appointed to coordinate quality services initiatives			

B2: Influence of Client Feedback on Employee Performance at Webuye Sub County Hospital.

	PARTICULARS	1	2	3
I.	Client Feedback at WSCH helps to foster cooperation and team work			
	between staff at different levels of and clients			
II.	Client Feedback at WSCH has improved greatly decision making			
	capacity of the hospital that are result oriented			
III.	Client Feedback system ensures availability of a veritable feedback			
	mechanism for WSCH management and thus information for future			
	improvement			
IV.	Client feedback assist in achieving goals and objectives of the			
	WSCH at the expected timeframe			

B3: Effect of Client service standards on Employee Performance at Webuye Sub County Hospital.

	PARTICULARS	1	2	3
I.	The Client service standards procedures helps to define WSCH			
	operational priorities and clarify workloads			
II.	Client Service Standards promoted people oriented customer-service			
	governance			
III.	Client Service standards have made it clear to know the activities,			
	outputs and outcomes with the service delivery framework at WSCH			
IV.	Observing Customer service standards at WSCH have a better			
	approach for enforcing public accountability			

B4: Effect of observing client rights on employee performance at Webuye Sub County Hospital

	PARTICULARS	1	2	3
I.	Observing Client rights has promoted partnerships between			
	service providers and clients			
II.	Observing Clients rights encourage WSCH to have clear objectives			
	and staff get a better understanding of what they are expected to			
	achieve			

III.	Client rights are circulated to all department and are available to the		
	various implementing committees		
IV.	Staff are made aware of the Client rights and their role in ensuring		
	customer satisfaction		

B5: Effect of Service Charter Timelines on employee performance at Webuye

Sub County Hospital

	PARTICULARS	1	2	3
I.	Service Delivery Timelines have enabled clients develop a sense of			
	confidence in employee performance			
II.	Service Charter timelines provide information on service delivery by			
	WSCH which is readily available			
III.	Service Charter timelines have helped improve efficiency &			
	effectiveness on employee performance at WSCH through the			
	achievement of set goals & objectives			
IV.	Service Charter Timelines provide a reliable means to measure			
	service performance and delivery at WSCH priority areas.			

B6: Effect of service charters on employee performance Webuye Sub-County hospital

		1	2	3
Ι	Service charter adoption leads to improvement in timeliness adherence by employees			
	adherence by employees			
Π	Service charter adoption leads to improvement in service quality of employees			
III	Service charter adoption leads to improvement in efficiency of service delivery by employees			
IV	Service charter helps to identify the strength and weakness of the employee through feedback			
V	Service charter helps to foster cooperation and team work between employees			



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29th JULY, 2016

TO WHOM IT MAY CONCERN

Dear Sir / Madam.

RE: RESEARCH DATA COLLECTION PERMIT.

TIMOTHY SHALO

REG.NO: CBM12/10693/14

The above named is a bonafide student of Kisii university- Eldoret Campus pursuing a Masters Degree course in Business Administration (Strategic Management Option) in the School of Business and Economics.

He is working on his research entitled "*Evaluating the effects of service charters on Employee Performance At Webuye Sub-County* " in partial fulfilment for the requirement of the Award of Masters in **Business Administration (Strategic Management Option)**

We are kindly requesting your office to provide him with the permit to proceed to the field for data collection and completion of his research.

Please do not hesitate to call the undersigned for any verification.

Any assistance extended to him will be highly appreciated.

DORET Yours faithfully, (0720986 Charles O. Ongivo **DEPUTY DIRECTOR** FAIRS



NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2213471, 2241349, 3310571, 2219420 Fax: +254-20-318245, 318249 Email: dg@nacosti.go.ke Website: www.nacosti.go.ke When replying Please quote 9th Floor, Utalii House Uhuru Highway P. O. Box 30623-00100 NAIROBI-KENYA

Ref: No. NACOSTI/P/16/14762/13378

Date:

7th September, 2016

Timothy Luvonga Shalo Kisii University P.O. Box 402-40800 KISH.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on "Evaluating the effects of service charters on employee performance at Webuye Sub-County Hospital," I am pleased to inform you that you have been authorized to undertake research in Bungoma County for the period ending 6th September, 2017.

You are advised to report to the County Commissioner and the County Director of Education, Bungoma County before embarking on the research project.

On completion of the research, you are expected to submit two hard copies and one soft copy in pdf of the research report/thesis to our office.

mm

BONIFACE WANYAMA FOR: DIRECTOR-GENERAL/CEO

Copy to:

The County Commissioner Bungoma County.

The County Director of Education Bungoma County.

National Commission for Science, Technology And Innovation Is ISO 9001:2008 Certified

