EFFECTS OF LEADERSHIP DEVELOPMENT STRATEGIES ON SERVICE DELIVERY AT KENYATTA NATIONAL HOSPITAL

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A RESEARCH PROJECT SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENT FOR THE AWARD OF THE DEGREE OF MASTER OF BUSINESS ADMINISTRATION, SCHOOL OF BUSINESS, UNIVERSITY OF NAIROBI

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DECLARATION

This research project is my original work and has not been submitted for an award of any degree at any University.

This research project has been submitted for examination with my approval as the university supervisor.

Signature: Date: MR. JEREMIAH KAGWE DEPARTMENT OF BUSINESS ADMINISTRATION SCHOOL OF BUSINESS UNIVERSITY OF NAIROBI

DEDICATION

This work is dedicated to my family, my loving wife Annet Korir, who offered spiritual, emotional and encouragement support. To my dear daughters (Mercyjoy Jeruto Korir and Blessing Jelimo Korir) and my dear son Samuelwin Kibet Korir

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Thanks and God bless you all

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ABBREVIATIONS AND ACRONYMS

AGPS	-	Australian Government Public Service
COYA	-`	Company of the year Award
GoK	-	Government of Kenya
I.C.T	-	Information and Communication Technology
I.S.O	-	International Standards Organization
K.N.H	-	Kenyatta National Hospital
LDP		Leadership Development Program
MDGs	-	Millennium Development Goals
МоН	-	Ministry of Health
MSH	-	Management Sciences for Health
O.P.I	-	Organizational Performance Index
OSHE	-	Occupational & Safety Health Environment
USAID	-	United States Agency for International Development
WHO	-	World Health Organization

ABSTRACT

This research project had two main objectives of identifying leadership development strategies at Kenyatta National Hospital and to establish the effects of leadership development strategies on service delivery at the Kenyatta National Hospital. The research design that was used in this study was descriptive survey design. The study combined data collection from archival record and questionnaires. The questionnaire was administered to the Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers. This study adopted stratified sampling of sample size of 60 employees' targeted populations across divisions and departments'. The data was analyzed using Statistical Package for the Social Sciences (SPSS) version 22 and presented the finding using charts, tables and percentages. This study established that the effect of leadership developments includes improvement, efficiency and effectiveness in service delivery. The study established that 56.7 % agreed that leadership development strategies had contributed to the improvement of turnaround time at service delivery points. General customer satisfaction and work performance in performance contracting were highly rated as most improved service delivery with 69.5% of the respondent agreeing. The study found that the overall rating service delivery at Kenyatta National Hospital as excellent at 5%, very good 35% and good at 50%. From the study there was evidence that leadership development strategies leads to leadership transformation that at the end contribute to good service delivery. Therefore, the researcher recommends the government and hospital boards should focus on investing on leadership development strategies.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Leadership development has been a topic of interest to scholars. This is because leadership development is a process of building the capacity of people in an organization, so as to improve their effectiveness in leadership role (Day & Michelle, 2011).According to Laguerre (2010), leadership can be developed. Therefore, Leadership development strategies is a process of educating, coaching and mentoring employees to perform their role in service delivery through experience, different behavioural and performance related roles expected of experience providers (Lally & Fynes, 2006).According to MSH (2010), organizations use Leadership development strategies to achieve results in service delivery.

The leadership theories selected for this research are contingency theory and transformational leadership theory. According to Fiedler (1977), the contingency theory emphasizes that leadership style is influenced by the situations in which that leader operates. Taylor (2009) reasoned that transformational leaders place an emphasis on team building, and empowering and developing potential in order to reach long-term goals. The reason of selecting a theory in this study is the fact that the leadership theory has been sufficiently developed and researched and offers specific implications for leadership development (Laguerre, 2010).

The primary function of the Kenyatta National Hospital is in the provision of service delivery to patient care and training of health workers. According Pfeffer (1997), training is about specialist skills that will find in leadership programs, such as general competence and organizational culture. Since 2011Kenyatta, National Hospital has adopted leadership development program as strategy to train line mangers to be strategic thinking leaders (KNH, 2014).

1.1.1 Leadership Development Strategy

Weihrich and Koontz (1993) described leadership as the art and process of influencing people so that they will strive willingly and enthusiastically to achieve the mission of the organization. Leadership development is defined as a way of attracting and integrating skilled workers in an organization (MSH, 2010). Leadership development strategy is defined as an action and reflection in which critical skills such as analysis, strategic planning, strategic thinking and critical consciousness is being emphasized.

According to Benington & Hartley (2009), leadership development is most effective when learning on the job (50%), through leadership development programs (40%) and practical training in workshops (10.%). Leadership development can, therefore, be regarded as an important determinant of organizational success in service delivery.

1.1.2 Concept of Service Delivery

According to World Health Organization (2008), service delivery is an immediate output of the inputs into the health system, such as health workforce, procurement and supplies and finances. Service delivery is a word to describe provision of social amenities such as water, electricity, sanitation infrastructure, land, and housing that are being provided by the government (Le Chen et al. (2014). According to Asha (1999), the concept of service delivery is being responsive to customer.

Goldstein et.al (2002) stated that a service institution deliver a service after integrating investments in people, assets, processes, and materials among others . According to Goldstein et.al (2002), variety of decision required in delivering and designing services are made both in strategic and operational levels in an organization. In this case leaders play a major role in delivering services both within and outside institution by providing leadership and strategic direction of the institution in all strategic levels.

1.1.3 The Health Sector in Kenya

The health sector is made up of the people, institutions and resources, arranged together in accordance with established policies, whose primary purpose is to promote, restore and maintain health. It also includes government ministries, National Management Units hospitals and other health services, health insurance schemes, voluntary and private organizations in health, as well as the pharmaceutical industry and drug wholesale companies, Non-Governmental Organizations, and Faith Based Organization facilities (World Health Organizations, 2008). The public national referral hospitals in Kenya are Kenyatta National Hospital, Moi Referral and Teaching Hospital, Spinal Injury hospital, Pumwani hospital, Mathari hospital, plus the 7 Provincial General Hospitals (GOK-Kenya health Sector strategic and investment plan 2012-2017). The Government of Kenya is determined to improve access and equity to essential health care services and to ensure that the health sector plays its essential role in the realization of the Kenya Vision 2030. The Ministries of Health intends to achieve the aspirations of the Kenyan people on health as highlighted in the Kenya Vision 2030 and the achievement of the Millennium Development Goals (MDGs). The Government of Kenya introduced the Health Policy 2012 - 2030, this is to attain the highest possible health standards in a manner responsive to the population needs (Kenya Health Sector Strategic and Investment Plan 2012-2017).

The health sector in Kenya is experiencing challenges in delivery of Health care services due to failure of county hospitals to provide quality service delivery. The Kenyan health system is currently struggling to cope with the rising cost and demand for quality health care services, against the backdrop of a shortage of skilled health care professionals. Total health workers are just over 17 per 10,000 populations. Medical staff represents over 5 per 10,000 populations. Existing staff represent only 17% of total requirements, if the minimum staffing requirements are to be attained (GOK Kenya Health Sector Strategic and Investment Plan 2012-2017).

On April 16, 2010, the USAID awarded MSH the Leadership, Management and Sustainability Program/ Kenya Associate Award. This was a five-year program (2010-2015) which supports public-sector institutions of the health system and other USAID partners to strengthen leadership and management capabilities at the national, provincial, district, and community levels to improve access to and use of quality health services and thereby improve service delivery to Kenyan population (MSH, 2010).

1.1.4 Kenyatta National Hospital

In 1901, Kenyatta National Hospital was founded as a native civil hospital and in 1952; it was renamed King George VI hospital. In 1964 Kenyatta National Hospital was renamed Kenyatta National Hospital in honor of the founding President of the Republic of Kenya the late Mzee Jomo Kenyatta. KNH became a parastatal through the Legal Notice No.109 of 6th April 1987. The Legal Notice spells out the mandate of the hospital as:- receive patients on referral from other hospitals or institutions within or outside Kenya for specialized healthcare, provide facilities for medical education for the Kenya Medical Training College, University of Nairobi Medical School, and for research either directly or through other co-operating health institutions, provide facilities for education and training in nursing and other health and allied professions and participate as a national referral hospital in national health planning(KNH Strategic Plan 2013-2018).

The hospital has 2000-bed capacity and is the public hospital of choice in Kenya and beyond. There are a total of over 4500 employees. The Hospital has adopted leadership development strategies in order to improve in service delivery to patients, suppliers, customers and stakeholders, where 280 staff were trained on LDP for the period 2011 to 2014.

According to KNH Strategic Plan (2013-2018), the management of KNH and the entire staff are committed to continued provision of accessible specialized quality healthcare, facilitate training and research. The Hospital will initiate and implement appropriate programs to foster quality healthcare and optimize clinical outcomes. The transitions of the hospital require inputs from leaders in the organizations who have undergone training

on leaderships and equipped to bring improvement in service delivery of resource mobilization, change of staff attitude, culture, life style, work performance, timeliness, turnaround time, and customer satisfactions. KNH recognizes the critical role it has to play in the achievement of the Kenya Vision 2030 through provision of patient centred specialized care, training and research (KNH, Strategic Plan 2013-2018).

1.2 Research Problem

During the past few decades, improving efficiency in the public sector has been a challenge. This is due to bureaucratic procedures marred with inefficiency, lack of accountability thus high level of corruption and wastage of resources which translate into poor economic performance and lack of skilled leaders. Many governments have however been trying to put in place measures to reverse this trend and the attitude towards governments in service delivery that comes along with it (GoK, 2012).

Kenyatta National Hospital motto is to provide quality health care to patients, despite insufficient physical facilities to meet the demand for primary and secondary care particularly in Nairobi has made KNH a congested hospital. Further , there are challenges affecting service delivery such as long appointment waiting lists ,low turnaround time in all points of service, lack of involvement, communication, engagement, participation, inadequate supervision and monitoring of performance, lack of optimization of revenue collection, low budget utilization and wastes in resources and high utility costs among others. To address these challenge the hospital had to adopt leadership development strategy as an idea to implement in the hospital (KNH, Strategic Plan 2013-2018).

McAlearney (2008) did a research in the same concept of leadership development, the research identified and explored practical strategies and best practices for leadership development in health care for managers at all levels in the United State of America and the outcome of the study was that leadership development strategies could be employed successfully to develop leaders in the health care industry.

The United States Agency for International Development (USAID) and Management Sciences for Health (MSH) in Kenya in 2009-2010, conducted a study on the impact of the Leadership Development Program (LDP) on service delivery outcomes. The result of the study was that the LDP intervention produced improved coverage in service delivery that did not occur in comparison areas where the LDP was not implemented.

Studies have been done on leadership development strategies in county hospitals and developed countries such as United State of America and Australia but no such kind of study has been done in Kenyatta National Hospital. Therefore the researcher found important to undertake such study in KNH. This is a new field of research, where scholars need to do more investigation and acquire new knowledge. Owino (2014) study investigated the effectiveness of quality health care strategies in improving service delivery at the national referral hospitals; the study findings revealed that healthcare strategies have a positive effect on service quality at the national referral hospitals.

The health sector in Kenya is vital, that is why there is need to carry out research studies in this sector, so as the country will come up with health policies and leadership development strategies that may have effect to service delivery to Kenyans. This study therefore will fill in the gap in literature knowledge by addressing the following questions: what are some of the leadership development strategies at KNH? What are the effects of leadership development strategies on service delivery at Kenyatta National Hospital?

The record from Kenyatta Human Resource department indicates that 300 employees have undergone Leadership development programs, strategic leadership development programs and senior management courses (KNH, Human Resource department, 2014). Further a study that was carried out in Kenyatta National Hospital and Moi Teaching and Referral hospital confirmed that 32.8% of the respondents considered strategic leadership training as very successful (Owino, 2014). Therefore, the purpose of this study is to answer the question: what are the effects of leadership development strategies on service delivery at Kenyatta National hospital?

1.3 Research Objective

The objectives of this study are:

- i) To identify leadership development strategies at KNH.
- ii) To establish the effects of leadership development strategies on service delivery at Kenyatta National Hospital.

1.4 Value of the Study

The KNH employees, scholars, students and other researchers will find the study helpful in areas of research build on the findings of this research. The study shall also be a source of references for future researchers on other related topics and also help scholars who undertake the same topic in their studies within or outside the context of Kenyatta National Hospital. The Health sector in Kenya will be guided on how to develop and implement leadership development strategy policies and how to address challenges facing human capital. This will be important in guiding the ministry on policy initiatives to help streamline the formulation of hospitals strategic plans in Kenya and also help the government formulate effective leadership development strategies that will enhance service delivery.

Today the Government of Kenya is characterized by rapid changes in technology in health sector, new diseases and the growing complexity of things in general. To meet these challenges, the outcome of this study will address some of the issues. Further, Kenyatta National Hospital Leadership development strategies are required to improve service delivery among other strategic objectives of the hospital.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter reviews the literatures from the past studies on the theoretical foundation of the study, concepts of leadership development strategies and effects of leadership development strategies on service delivery.

2.2 Theoretical Foundation of the Study

The theoretical foundation of this study entails the theories of transformation leadership, contingency theory and power influencing theory.

2.2.1 Transformation Leadership Theory

The theory on this concept of leadership development is transformation leadership. Taylor (2009) confirmed that through transformation leadership, there is team building, empowering and developing potential in order to reach long-term goals. Transformational leadership motivates subordinates and appeal to their ideals and moral values by creating and representing an inspiring vision of the future (Bass & Avolio, 1997). This is supported by Linjuan (2010), who did a research and the result was that transformational leadership positively influences employees 'perception of organizational reputation, not only directly but also indirectly, through empowering employees.

Yukl (1989) described transformational leadership as being the process of influencing major changes in the attitudes of organizational members and building commitment for the organization's mission, objectives, and strategies. Further, Yukl (1989) described transformational leadership as a shared process, involving actions of leaders at various

levels and sub-units of an organization, not just the chief executive. This concurs with Bass (1998) that transformational leadership can move followers to exceed performance. Transformational leadership is vital because of the follower results that are produced if it is implemented effectively (Laguerre, 2010).

According to Crookall (1989) the performances of those who were trained in transformational leadership did well or better at improving productivity. Laguerre (2010) supports the idea that people can be taught to be more transformational.

2.2.2 The Contingencies Theory

Fiedler (1977) contributed a lot in the field of contingency theory, that is why Laguerre (2010) conducted a study on contingency theory and the outcome was that to be effective, a leader must learn to change the leadership situation in order to create a match between their leadership style and the amount of control with the situation at hand. According to Northouse (1997), a leader's effectiveness depends on how well the leader's style fits into the context. Laguerre (2010) believe that Fiedler's program helps leaders to learn about their leadership style and understand which leadership situations best fit their leadership style. Therefore this theory try to predict which style is best in certain circumstance.

Popular contingency-based models include path-goal theory that focuses on how leaders motivate higher performance by acting in ways that influence subordinates to believe valued outcomes can be attained by making a serious effort. Aspects of the situation such as the nature of the task, the work environment and subordinate attributes determine the optimal amount of each type of leader behaviour for improving subordinate satisfaction and performance (Yukl, 1989). The path-goal theory describes how leaders motivate subordinates to accomplish designated goals and emphasize relationships between the leader's style and situational variables in the organization (Northouse, 1997). According to it, if you want your people to achieve their goals, you need to help, support, and motivate them.

2.2.3 Power Influence Theory

According to Mind tools (2007), the power and influence leadership theory looks at the source of a leader's influence, and the leadership style that emerges from legitimate power, reward power, expert power, referent power, and coercive power. All these enable leaders to influence people. In this study, these theories acts as the bridge to service delivery, this is due to the fact that through leadership development strategy all these theories are acquired and implemented by leaders in an organization such as KNH.

Yukl (1989) explained that power is important in influencing subordinates, peers, superiors and people outside the organization.

2.3 The Effects of Leadership Development Strategies on Service Delivery

Leadership in health sector provides direction, alignment across different parts of organization and commitment to provide resources and leadership development in order to achieve shared vision and strategic objectives of the organization. This in turn results to service delivery. Bassi (2004) research confirmed that firms that invest more in training outperform their counterparts in the stock market. The Government of Australian adopted the leadership development strategy, where the Strategic Centre for Leadership, Learning and Development was established (Australian Public Service Commission, 2010). The Strategic Centre focused on strengthening leadership development, including an approach to talent management and fill the identified capability gaps so as to improve service delivery in organizations.

McAlearney's (2010) did a research that identifies and explores practical strategies and best practices for leadership development in health care for managers at all levels. The study revealed that as individuals grow and develop throughout their careers, the leadership development process changes from a micro-emphasis on essential technical and communications skills to a macro-emphasis on competencies that include building relationships with external constituencies, developing strategic vision, and dealing with national policies on service delivery.

2.3.1 Good Service Delivery

WHO (2010) stated that the network of service delivery have the characteristics of a comprehensive range of health services, directly and permanently accessible, people in a defined target population are covered, health services are of high quality, services are organized around the person, not the disease or the financing, services delivery is well coordinated and in good service delivery there is accountability and efficiency. All these are the effects of leadership development strategies. McAlearney (2010) describe the effects of leadership development programs as to improve quality and efficiency in health care, increase caliber and quality of health care work force, improve efficiency in the organization education and development activities and reduce turnover and wastage of resources.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter describes the research methodology used in carrying out this study. It entails research design, population of the study, sampling design, data collection and data analysis.

3.2 Research Design

The research design employed in this study was descriptive survey design. This was to find the answers to the questions Who? What? Where? When? How? and How many? The advantage is that the researcher had a clearer idea of what was needed and looked for answers to more clearly defined questions. According to Hartley (2004), research design is the argument for the logical steps that taken to link the research questions, data collection, analysis and interpretation in a coherent way .According to Cooper and Schindler (2008), descriptive survey design discover and measure cause and effect relationships among variables. This study used a descriptive design because it enabled the researcher to collect in-depth information about the population being studied.

The survey design used in this study was appropriate because data was collected from a cross-section of employees at Kenyatta National Hospital. According to Donald & Delno (2006) a case study described a unit in detail and look at the object to be studied as a whole. Yin (1984) defines the case study research method as an empirical inquiry that investigates a contemporary phenomenon within its real-life context and in which multiple sources of evidence are used. In the case of Kenyatta National Hospital multiple sources of evidence was from various departments within the context of the case study.

This study combined data collection from several sources such as archival records, and questionnaires. It used both primary and secondary data. It used multiple cases; each case is treated as a single case. Each cases conclusion was then used as information contributing to the whole study, but each case remains a single case. In this context of Kenyatta National Hospital, each case refers to leaders in a particular department.

3.3 Population of the Study

The population of the study is the target population that is required in this research. Mugenda and Mugenda (2003) defined target population as a set of the study of all members in a set of people which an investigator generalize the result. In the case of Kenyatta National Hospital the target populations was the staff that offers leadership roles in their respective divisions and departments. The distribution of the population (leadership) was as follows:

Divisions/Departments	Number of Employees in Leadership/Management
Clinical Areas	
Surgery	75
Medicine	55
Health Information	5
Pharmacy	10
Laboratory Medicine	10
Radiology	5
Public Health	5
Physiotherapy	5
Radiotherapy	5
Prime Care	30
Administrative Areas	
Planning	5
Human Resource	15
Supplies Chain Management	15
Finance	10
Technical Services	10
Quality Assurance	5
Corporate Affairs	5
Administration	20
Security & Safety	5
ICT	5
Total	300

Table 3.1: The Target Population

Source; KNH Human Resource

3.4 Sample Design

Sampling is the process of selecting a number of individuals for a study in such a way that the individuals selected represent the population. Sample design was probabilistic in nature. It was determined before commencing the project. It uses mixed methods and involves a cross-sectional approach.

This study was adopted stratified sampling. This is a sampling process of selecting certain number of individual in areas to represent the entire. It involved dividing the population into significant strata based on management levels. According to Mugenda and Mugenda (2003), a sample size of more than 30 or at least 10%, usually appropriate for social sciences. The researcher took 20% of each of the strata population. In the case of KNH, the study took 20% of the population sample in a department/unit. The technique used was a cross-case examination within the case examination. The target population refers to the Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers. That was to ensure there were stability, accuracy, and precision of measurement. The sampling frame used in the study of employees in various categories was as follows:

Divisions/Departments	Target population	Sample size in
		percentage (%)
Clinical Areas		
Surgery	75	15
Medicine	55	11
Health Information	5	1
Pharmacy	10	2
Laboratory Medicine	10	2
Radiology	5	1
Public Health	5	1
Physiotherapy	5	1
Radiotherapy	5	1
Prime Care	30	6
Administrative Areas		
Planning	5	1
Human Resource	15	3
Supplies Chain Management	15	3
Finance	10	2
Technical Services	10	2
Quality Assurance	5	1
Corporate Affairs	5	1
Administration	20	4
Security & Safety	5	1
ICT	5	1
Total	300	60

Table 3.2: Computation of Sample Size

Source; KNH Human Resource

3.5 Data Collection

This study used primary data by using questionnaire and secondary data was collected from archival records. Data refers to all information researcher gathers from this study. According to Yin (2003) both primary and secondary data are important sources of information for a study, because they are precise and quantitative. The questionnaire was designed and administered as per the set research objective of this study. The respondents was as per sample size from the set target population of the leadership management in various divisions and departments of the hospital.

3.5.1 Data Collection Instrument

The questionnaire was administered to the Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers. It contained both structured and unstructured questions. The closed-ended questions was designed using the likert measurement scale of 1-5 where:1.strongly disagree, 2.disagree, 3.neutral, 4.agree, 5.strongly agree. The questionnaire assisted to get primary data on how respondents rate overall service delivery at KNH as result of adopting and implementing Leadership development strategies. It permitted in depth in response as respondent received similar questionnaires. It used multiple sources and techniques in the data gathering process. The questionnaire comprised three sections, section one addressed the general information of the respondent, section two addressed the leadership development strategies , section three addressed the effects of leadership development on survive delivery at K.N.H.

3.5.2 Pilot Study

To ensure the reliability and validity of the questionnaires in this study, a pre-test was undertaken during pilot study. This tested and validated the questionnaire for the main study. According to Mugenda and Mugenda (1999), the number of responded cases in the pilot study should be 10% and 1% for small and large samples respectively. In this case six questionnaires were administered during the pre-test. This assisted to make any necessary correction in the questionnaire and also make it possible for a similar study to be reciprocated with consist results. The researcher selected a pilot group of few respondents from Administration, Surgery, Pharmacy, Finance, Security, Supplies and Medicine departments at Kenyatta National hospital.

3.6 Data Analysis

Data collection from the respondents was cleaned, edited and coded for analysis. It was analyzed both quantitatively and qualitatively. The need for quantitative data was to evaluate the significance of a particular variable, measured in terms of frequency, percentage, while qualitative data provided a descriptive theoretical aspect of certain variable as depicted from the response in unstructured questions. Quantitative data was double-checked and analyzed through the use of Statistical Package for the Social Sciences (SPSS) version 22 and present the finding using charts, tables and percentages. The researcher analysed primary data in order to inform the study objectives.

CHAPTER FOUR

DATA ANALYSIS, RESULTS AND DISCUSSION

4.1 Introduction

This chapter presents findings and analysis on the effects of leadership development strategies on service delivery at Kenyatta National Hospital. It also identified leadership strategies that were being adopted in the hospital. The chapter also presents findings on the background information of the respondents and the findings in comparison with relevant literature as established by other researchers in the same field of study.

4.2 General Information

This research was done in Kenyatta National Hospital; the purpose was to get the feedback on the effects of leadership development strategies on service delivery. The general information entails gender and age distribution of the respondents, level of educations, period the have worked as leaders and their level in management.

4.2.1 Gender Distribution

Majority of the respondents in the survey were male 61.7%, while female were 38.8 %. This shows that gender distribution was good as shown in figure 4.1 below. It also illustrate that female were in leadership position at Kenyatta National Hospital.

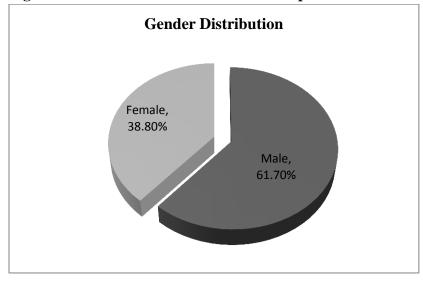


Figure 4.1: Gender Distribution of the Respondents

4.2.2 Age Distribution

The outcome of research showed that least respondent were aged between 31-40 years with 21.7 %, while age group between 41-50 were majority with 45.0 % and above 50 years were 33.3 % as shown in the table 4.1 below

Age	Frequency	Percentage
31-40 years	13	21.7%
41-50	27	45.0%
Above 51	20	33.3%

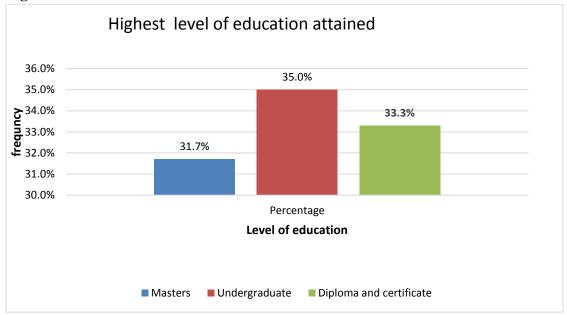
Table	4.1:	Age	Distrib	ution
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Source: Research Data (2015)

4.2.3 Highest Education Level Attained

In regards to level of education attained, there was almost equal representation in terms of education where masters respondents were 31.7 %, while undergraduate were 35.0 % and diploma and certificate were 33.3 % as indicated in the figure 4.2 below:

Figure 4.2: Level of Education



4.2.4 Period Respondents Worked as Leaders

The study indicated that 61.7% of the leaders at Kenyatta National Hospital have worked above 11 years as leaders and 30 % have worked between 6 to 10 years and the remaining 5% have worked below 5 years. This is illustrated by the table 4.2 below.

Period	Frequency	Percentage	
Below 5 years	5	8.3%	
6-10 years	18	30.0%	
Above 11 years	37	61.7%	

 Table 4.2: Period Respondents Worked as a Leader

Source: Research Data (2015)

4.2.5 Level in Management

The outcome of the study shows that majority of the respondents were in middle management followed by senior management at 66.7% and 23.3% respectively. The least were at top management level with 1.7%. This is shown in the figure 4.3 below.

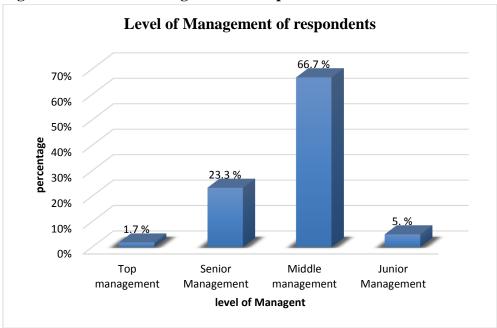


Figure 4.3: Level of Management of Respondents

4.2.6 Number of Respondents per Divisions and Departments

The researcher conducted collection of primary data from the following divisions and departments within the context of Kenyatta National hospital. Detail is shown in the table 4.3.

Divisions/Departments	Number of respondents		
Divisions			
Surgery	15		
Medicine	11		
Departments			
Health Information	1		
Pharmacy	2		
Laboratory Medicine	2		
Radiology	1		
Public Health	1		
Physiotherapy	1		
Radiotherapy	1		
Prime Care	6		
Planning	1		
Human Resource	3		
Supplies Chain Management	3		
Finance	2		
Technical Services	2		
Quality Assurance	1		
Corporate Affairs	1		
Administration	4		
Security & Safety	1		
ICT	1		
Total	60		
Source: Research Data (2015)	· · · · · ·		

 Table 4.3: Number of Respondents per Divisions and Departments

4.3 Leadership Development Strategies adopted at KNH

The researcher identified leadership development strategies that were adopted and implemented at Kenyatta National hospital. These includes on job training, mentorship, seminars and workshops, conferences, performance management course, gemba kaizen, benchmarking with corporate leaders to enhance and build on best practices and customer care programs. The adoption of quality improved models such as QMS and OPI were some of the quality improvement adopted by the hospital, senior leadership development programs, Leadership development programs, Kenya quality medical health, performance contracts and staff appraisals. It also includes management courses, ISO 9001-2008 training, balance score card training, Knowledge management and sharing, learning and development model, management by walking, decision making skills, transformation leadership - change in attitudes and perception, organizational leadership, servant leadership , leadership in health management system, training of staff on corporate governance , strategic leadership, succession planning, upward professional mobility based on individual skill, in person class training, communication skill programs, supervisory skills, leading high performing health organization programs and senior management courses.

In personal classroom training was agreed by more than half that it was an element of leadership development strategy at Kenyatta National with 51.7% and 28. 3% respondents agreed and agreed strongly respectively that coaching and mentoring was among leadership development strategies at KNH. Leadership development program was agreed by 47.5%, while 33.9 % agreed strongly that the Hospital have adopted Leadership development program as leadership development strategy. Customer care, team building, Gemba kaizen communication skills were all agreed by more than 50% that they were leadership development strategies that have been adopted and implemented at Kenyatta National Hospital as shown in the table 4.4.

Leadership Development Strategies	Strongly disagree %	Disagree %	Neutral %	Agree %	Strongly agree %
In Personal classroom training	1.7	8.3	10.0	51.7	28.3
Coaching and mentoring	3.3	3.3	15.0	56.7	21.7
On the job training	0	1.7	10.0	56.7	31.7
Managers seminars/workshops	0	3.3	11.7	43.3	41.7
Involvement in decision making	1.7	6.7	33.3	36.7	21.7
Leadership development program	0	3.3	15.3	47.5	33.9
Talent development	5.0	15	26.7	35	18.3
Strategic leadership development	0	6.7	20.0	48.3	25.0
Communication skills	1.7	1.7	18.3	59.3	18.6
Customer care	0	0	5.0	63.3	31.7
Team building	5.0	5.0)	18.3	46.7	25.0
Gemba kaizen	0	1.7	11.7	55	31.7
Leading& managing Practices	0	3.3	14.0	61.4	21.1

 Table 4.4: Leadership Development Strategies Adopted at KNH

Source: Research Data (2015)

4.3.1 Understanding of the Vision, Mission and leadership development strategies

The researcher was interested to know if the leaders at Kenyatta National Hospital understood the Vision, Mission and leadership development strategies and service delivery of the hospital. From the study it shows that most of the respondents who were Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers. 75.0 % strongly agreed that they understood the vision. 80% strongly agreed that they understood the mission of KNH. More than 85% said they understood the leadership development strategies of KNH and 70% of the respondents strongly agreed to have understood that their work directly contributes to the overall service delivery. This is shown in the table 4.5.

Strategies and service benerg								
Respondent understanding	Strongly disagree %	Disagree %	Neutral %	Agree	Respondent understanding			
I have understanding of the vision of KNH	0	0	0	25.0	75.0			
I have understanding of the mission of KNH	0	0	0	20.0	80			
I have understanding of the leadership development strategies of KNH	0	0	15.0	55.7	28.3			
I understand how my work directly contributes to the overall service delivery	0	0	1.7	26.7	70.0			

 Table 4.5: Understanding of KNH Vision, Mission, Leadership Development

 Strategies and Service Delivery

Source: Research Data (2015)

4.3.2 Leadership Commitment to Leadership Development Strategies

The study revealed that 46.7% of the respondent agreed and 48.3% strongly agreed that there were committed of Kenyatta National Hospital leadership to overcome challenges at work place using challenge model skills. Researcher noted that 72.9 % strongly agreed that they were committed to achieve targets in their performance contract, while 76.7% strongly agreed that they were committed to mentor and coach other employees as shown the table 4.6 below.

Respondent understanding	Strongly disagree %	Disagree %	Neutral %	Agree	Respondent understanding
I am committed to overcome challenges at work place using	90	0	3.3	46.7	48.3
challenge model skills					
I am committed to achieve targets in my personal performance contract	0	0	3.3	23.3	72.9
I am committed to mentor and coach other employees	0	0	1.7	21.7	76.7

 Table 4.6: Leadership Commitment to Leadership Development Strategies

Source: Research Data (2015)

4.3.3 Leadership Inputs on Service Delivery

The researcher was interested to know if respondents who were Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers with leadership skills had inputs on service delivery in the hospital. The study shows that 40.0% and 48.3% of the respondents agreed and strongly agreed respectively that they provided input to their departmental leadership development strategies .The study shows that 46.7% agreed and 43.3 % strongly agreed that their job makes good use of their leadership skills. Thus, 70% strongly agreed that they directly contributed to the overall service delivery due to the skills acquired through leadership development. 48.3% agreed that senior leaders demonstrated strong leadership skills at work place as shown in the table 4.7 below.

Leadership inputs	Strongly disagree%	Disagree%	Neutral %	Agree%	Strongly agree%
I provide input to my departmental leadership development strategies	0	0	10.0	40.0	50,0
I understand how my work directly contributes to the overall service delivery	0	0	1.7	26.7	70.0
My job makes good use of my leadership skills	3.3	1.7	3.3	46.7	43.3
Our senior leaders demonstrate strong leadership skills	1.7	5.1	35.6	48.3	8.5

 Table 4.7: Leadership inputs to Service Delivery

Source: Research Data (2015)

4.3.4 Priorities of Leadership Development Strategies at KNH

The researcher established that 51.7% of the respondent strongly agreed that Service delivery is a top priority of leadership development strategies at KNH. The study established that 41.7% of the respondents agreed and 35.6 % strongly agreed that

Customer satisfaction is a top priority of leadership development strategies. It was noted that 41.7 % of the respondent agreed that turnaround time at service point was a top priority. On work environment satisfaction and Employees development 33.3 % and 55.9% agreed respectively. Those that agreed that Leadership commitment on patient care was a top priority of leadership development strategies of KNH were 57.6% as shown in the table 4.8 below.

Top priority of leadership development strategies	Strongly disagree %	Disagree %	Neutral%	Agree %	Strongly agree%
Service delivery is a top priority of leadership development strategies at KNH	0	1.7	13.3	33.3	51.7
Customer satisfaction is a top priority of leadership development strategies of KNH	0	5.1	16.7	41.7	35.6
Turnaround time at service point is a top priority of leadership development strategies of KNH	1.7	13.6	16.7	41.7	25.0
Work environment satisfaction is a top priority leadership development strategy of KNH	1.7	20.0	31.7	33.3	13.3
Leadership commitment on patient care is a top priority of leadership development strategies of KNH	0	6.7	15.3	57.6	20.3
Employees development is a top priority of leadership development strategies of KNH	1.7	10.2	18.6	55.9	13.6

Table 4.8: Priorities on Leadership Development Strategies at KNH

Source: Research Data (2015)

4.4 Effects of Leadership Development Strategies on Service Delivery

The researcher established that the effect(s) of leadership development strategies on service delivery at Kenyatta National Hospital includes effectiveness and efficiency of service delivery, better organization in service delivery, improved turnaround of patient care especially those awaiting emergency, improved in decision making using challenge model, leaders were able to handle different challenges after trained on leadership skills, outcome on patient optimized and less legal issues, productivity improved, staff attitude change and enhanced professionalism in service delivery as staff continue to gain new knowledge.

The researcher also established that leadership development strategies resorted to involvement of people in work planning and decision making through performance contracting, thee was improved in performance , minimized cost and increased revenue generation, creates morale for staff hence better service delivery, payments to suppliers were faster, better communication between staff and clients, enhance customer care with stakeholders, bonding of staff through team building, mentorship has enhanced succession planning.

The leadership development strategies have created awareness in prudent use of available resources. Another effect was that budget and financial statement were prepared on time which enabled management to analyze variances and make decision to improve the services to the customers; service providers were able to understand that they were leaders in their own areas. It has improved on the relationship between departments and customers both internal and external and leadership development has contributed to on the overall image of the hospital/department improvement.

The researcher also established that through Leadership development strategies, Kenyatta National Hospital has been credited ISO 9001-2008 certified and got the best result in the COYA award on leadership category. There has been increased level of communication among staff, stakeholders and customers, improvement in team work among departmental teams, performance targets linked to strategic plans, vision and mission of KNH. There was also improvement in delivery of quality services, time management, accountability, customer care services, work output and performance, leaders improved in their strategic thinking, effective delegation, good service delivery, good customer care, clean and safe environment, staff empowerment, improved health care, prioritization of service delivery, helped in achieving goals and objectives, leads to effective monitoring of activities and programs, Leads to an effective feedback system.

It was also established that customer satisfaction has greatly improved as per KNH customer satisfaction survey index for the year 2014/2015 was at 71.1%, waste management was no longer an issue in the departments, improvement in communication through monthly meetings, clean and safe environment, and preferred hospital of choice by many clients leading to congestion.

The researcher established there was improved in service delivery as indicated by reduced complaints but more of compliments, improvement in supply of consumables following involvement of all team players in budgeting, delegation of tasks was done more professionally than ever before. Also leaders were keener to build capacity of their juniors through more coaching and mentorship, behaviour change among staff, improved performance through targets in performance contracting improved turnaround time for patients going for theatre and radiology services, improved health outcome through provision of advanced equipment and instruments by hospital leadership.

The researcher established that staff were able to interact with other leaders due to inspiration which was as a result of training, supply of material has improved thereby improving service delivery, and staffs have developed sense of ownership of the institution, decreased disciplinary cases because of good leadership, hence better service delivery. Improved in clinical outcome and shortened length of stay for patients.

The study also established that more than 50% of the respondents agreed that KNH leadership development strategies has contributed to the improvement of the service delivered 56.7 % and 8.3% agreed and strongly agreed respectively that leadership development strategies had contributed to the improvement of turnaround time at service delivery points. General customer satisfaction and work performance in performance contracting were highly rated as most improved service delivery as a result of adopting and implementing leadership development strategies in the hospital with 69.5% of the respondent agreeing and 11.9% strongly agreeing. Provision of medical equipment was least rated where 48.3% and 11.7% agreed and strongly agreed that KNH leadership had contributed to the service delivery as shown in the table 4.9.

Effects of Leadership	Strongly	Disagree%	Neutral%	Agree%	Strongly
Development	disagree%				agree%
Strategies					
Turnaround time at	3.3	5.0	25.0	56.7	8.3
service delivery points					
General customer	0	5.1	13.6	69.5	11.9
satisfaction					
Work performance in	1.7	5.0	11.9	69.5	11.9
performance					
contracting					
Work environment	1.7	6.8	28.8	57.6	5.1
satisfaction at service					
delivery					
Leaders commitment in	3.3	6.8	25.4	55.9	8.5
service delivery					
Communication to	0	5.0	16.7	66.1	11.9
customers &					
stakeholders					
Provision and	1.7	5.0	27.1	57.6	8.5
allocation of resources					
to service delivery					
Revenue generation	1.7	5.1	15.3	61.0	16.9
ICT networking at	1.7	6.7	21.7	52.5	16.9
service point					
Provision of medical	3.0	5.0	30.0	48.3	11.7
equipment's					

Table 4.9: Effects of Leadership Development Strategies on Service Delivery

Source: Research Data (2015)

4.4.1 Characteristics of Good Service Delivery at KNH

The key effect of leadership development strategies at Kenyatta National Hospital was good service delivery. This was confirmed by more than 50% of the respondents both agreed and strongly agreed that characteristics of service delivery in the hospital was good as shown in the table 4.10. The characteristics of good service delivery in the hospital were noted to include comprehensive range of health services that were provided, services were directly and permanently accessible with no undue barriers, services were designed so that all target population were covered, services were organized to provide continuity of care across the network of services, health services were of high quality. Also services were organized around the person, not the disease or the financing, health service networks were actively coordinated, across types of providers, types of care, levels of service delivery, and health services were well managed so as to minimum wastage of resources. All these attributed to leadership development strategies that were adopted and implemented in the hospital.

Characteristics of good Service Delivery	Strongly disagree %	Disagree %	Neutral %	Agree %	Strongly agree %
comprehensiveness	1.7	8.3	8.3	56.7	25.0
Accessibility	1.7	13.3	18.3	53.3	13.3
Coverage	3.3	10.0	8.3	53.3	25.0
Continuity	1.7	6.7	16.7	55.0	20.0
Quality	1.7	8.3	23.3	43.3	23.3
Person-centeredness	3.3	13.3	26.7	43.3	13.3
Coordination	5.0	8.3	20.0	55.0	11.7
Accountability and efficiency	5.0	8.3	26.7	46.7	13.3

 Table 4.10: Characteristics of Good Service Delivery at KNH

Source: Research Data (2015)

4.4.2 Overall Rate of Service Delivery at KNH

The researcher established that 50% of the respondents rated overall service delivery as good, while 35% and 5% rated the service delivery as very good and excellent respectively as shown in the figure 4.4. This is evidence that leadership development has positive effects on service delivery and MSH (2010) statement that those organizations that use Leadership development strategies to achieve results in service delivery.

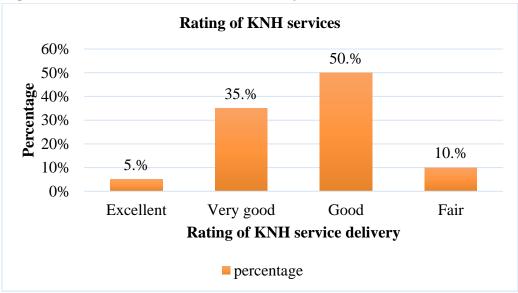


Figure 4.4: Overall Rate of Service Delivery at KNH

Source: Research Data (2015)

4.5 Discussion of Findings

The researcher established that 56.7% and 21 % of the respondents agreed and strongly agreed respectively that coaching and mentoring was among leadership development strategies at KNH. This was confirmed by Lally & Fynes (2006) who stated that development strategies was a process of educating, coaching and mentoring employees to perform their role in service delivery through experience, different behavioural and performance related roles expected of experience providers .Taylor (2009) reasoned that transformational leaders place an emphasis on team building, and empowering and developing potential in order to reach long-term goals of which the outcome of the research confirmed that leadership development strategies includes team building with rating of 46.7% agreeing and 25% strongly agreeing.

According to MSH (2010), organizations use Leadership development strategies to achieve results in service delivery of which Kenyatta National Hospital did the same and the outcome of the study shows that 50% of the respondents said that the overall rating of service delivery was good, while 35% and 5% rated the service delivery as very good and excellent respectively.

According to Benington & Hartley (2009), leadership development was most effective when learning on the job (50%), through leadership development programs (40%) and practical training in workshops (10. %). Leadership development can, therefore, be regarded as an important determinant of organizational success in service delivery. The study also noted that 56.7% and 31.7% of the respondent agreed and strongly agreed that on job training was among leadership development strategies adopted and implemented in the hospital and for leadership development program was 47.5% and 33.9% agreeing and strongly agreeing respectively.

The study revealed that more than 50% of the respondents both agreed and strongly agreed that Kenyatta National Hospital has good characteristics of service delivery. This was in line with WHO (2010) statement that the network of service delivery have the characteristics of a comprehensive range of health services, directly and permanently accessible, people in a defined target population are covered, health services are of high quality, services are organized around the person, not the disease or the financing, services delivery is well coordinated and in good service delivery there is accountability and efficiency.

McAlearney (2010) describe the effects of leadership development programs as to improve quality and efficiency in health care, increase caliber and quality of health care work force, improve efficiency in the organization education and development activities and reduce turnover and wastage of resources. The result of the study showed that 46.7 % agreed that 13.3% strongly agreed that service delivery at Kenyatta National was efficiency and improvement on turnaround time was 56.7% agreeing and 8.3% strongly agreeing. The study has established that improvement in turnaround time and efficiency in rendering of services was among the effects of leadership development strategies on service delivery at Kenyatta National Hospital.

The respondents reported that leadership development strategies contributed to improvement in staff productivity of which Crookall (1989) stated that the performances of those who were trained in transformational leadership did well or better at improving productivity. Further, Laguerre (2010) supports the idea that people can be taught to be more transformational.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.1 Introduction

This chapter provides a summary of the study findings, conclusions, limitations and recommendations for further studies. It also highlights the applicability of the transformation and contingency theories to Kenyatta National Hospital based on the study findings.

5.2 Summary Findings

The objectives of the study were to identify leadership development strategies and establish effects of leadership development strategies on service delivery at Kenyatta National Hospital. From the study there was evidence that there were several elements of leadership development strategies that had been adopted and implemented at Kenyatta National Hospital for instance there were in personal classroom training were 51.7% respondent agreed 56.7% of respondents that coaching and mentoring was among leadership development strategies at KNH. Leadership development program was agreed by 47.5 and customer care, team building, Gemba kaizen, communication skills were all agreed by more than 50% that they were leadership development strategies that have been adopted and implemented at Kenyatta.

The study established that the effect of leadership developments includes improvement, efficiency and effectiveness in service delivery. 56.7 % agreed that leadership development strategies had contributed to the improvement of turnaround time at service delivery points. General customer satisfaction and work performance in performance

contracting were highly rated as most improved service delivery as a result of adopting and implementing leadership development strategies in the hospital with 69.5% of the respondent agreeing.

The study found that the overall rating service delivery at Kenyatta National Hospital as excellent at 5%, very good 35% and good at 50%. That was evidence that leadership development strategies had positive effects on service delivery.

The study also revealed that the respondents who were the Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers understood the vision, mission and leadership development strategies of the hospital. Also they were committed to provide services and contributed greatly to service delivery. That was evidence that leadership development managers into leaders by inspirations, scanning, alignment, focusing and strategic thinking in provision of heath care services.

5.3 Conclusion

The objectives of this study were to identify leadership development strategies at Kenyatta National Hospital and establish its effect on service delivery. From the findings of the study the hospital has several leadership development strategies that contributed to improvement in service delivery. It was also noted that leadership of the hospital were committed to service delivery, thus the top priority on leadership development strategies was on service delivery of which 51.7% of the respondents strongly agree. It was clear from the study that Leadership development program was agreed by 47.5% while

33.9% agreed strongly that it was a Leadership development strategy. Customer care, team building, Gemba kaizen communication skills were all agreed by more than 50% that they were elements of leadership development strategies.

According to Benington &Hartley (2009), leadership development was most effective when learning on the job (50%), through leadership development programs(40%) and practical training in workshops (10. %).Leadership development can therefore, be regarded as an important determinant of organizational success in service delivery.

According to Crookall (1989) the performances of those who were trained in transformational leadership did well or better at improving productivity. Laguerre (2010) supports the idea that people can be taught to be more transformational. All these was supported by the evidence in the study that leadership development strategies transform leaders to bring change in terms of service delivery of both internal and external environment of an institutions.

5.4 Theory Application in the Findings

Yukl (1989) described transformational leadership as a shared process, involving actions of leaders at various levels and sub-units of an organization. This was applicable at Kenyatta National Hospital were Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers who were at different level in the organizations, 55.9% of the respondent agreed and 8.5% strongly agreed that leadership development transforms leaders that brings transformation to institutions through involvement in decision making and commitment in service delivery

Taylor (2009) reasoned that transformational leaders place an emphasis on team building which 46.7% of the respondent agreed and 25% strongly agreed with the statement. The leadership theory offers specific implications for leadership development (Laguerre, 2010). There was evidence in the study that 50% of the respondent rated Kenyatta National Hospital services delivery as good, 35% rated very good and those that rated excellent were 5%.

The study revealed that 25% of the respondent agreed that they understood the vision of the hospital and 75% strongly agreed. That supports the statement that transformational leadership motivates subordinates and appeal to their ideas and moral values by creating and representing an inspiring vision of the future (Bass & Avolio, 1997).

Yukl (1989) described transformational leadership as being the process of building commitment for the organization's mission, objectives, and strategies. The study confirmed that 80% of the respondent who were leaders in the hospital strongly agreed that they understood the hospital mission and 55.7 % agreed that they understood the leadership development strategies of the hospital. This was an illustration that leadership acts as a process of building commitment for organizations mission and strategies achievements.

The study established that 69.5% of the respondent agreed and 11. 9% strongly agreed that due to leadership development strategies; there has been improvement in work performance more especially in performance contracting at Kenyatta National Hospital. That concurs with Bass (1998) that transformational leadership could move followers to study exceed performance.

Popular contingency-based models include path-goal theory that focuses on how leaders motivate higher performance by acting in ways that influence subordinates to believe valued outcomes can be attained by making a serious effort. The study support the statement as evidenced by 72.9% of the respondent who were committed to achieve targets in their personal performance contract It also shows that 33.3 % agreed and 13.3% strongly agreed that work environment satisfaction was a top priority of leadership development strategy that was in line with Yukl (1989) statement that the work environment and subordinate attributes determine the optimal amount of each type of leader behavior for improving subordinate satisfaction and performance.

According to Mind tools (2007), the power and influence leadership theory looks at the source of a leader's influence, and the leadership style that emerges from legitimate power, reward power, expert power, referent power, and coercive power. The study revealed that 76% of the respondent who were leaders was committed to mentor and coaches other employees that act as the bridge to service delivery.

5.5 Recommendations

Leadership development strategies in the hospital should be enhanced so as to improve on service delivery. The government should review the financing of the hospitals in terms of leadership development since it plays a critical role in service delivery. Based on the research findings, the researcher recommends that leadership development be cascaded to all level of employees/management. This is to help the organization achieve its objectives on service delivery to both patients and suppliers among other customers. To scholars there is need to do further research study at Kenyatta National Hospital and other hospitals with a focus on both internal and external customers. This study report the findings from Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers; therefore it is vital to get elaborate information from all customers.

There is now evidence based on this study that leadership development strategies have a vital role to play in service delivery at KNH and other hospitals. As a policy, the government and hospital boards should focus on investing on developing people to be leaders. This could be done through leadership development strategies such as leadership development programs, mentorship and coaching programs, on job training and class training among others. The government needs to adopt as a policy leadership development strategies at public hospitals. This study has revealed that leadership development is a key to service delivery to the public.

5.6 Limitations of the Study

The researcher encountered difficulties in gaining access to respondents for most of the respondents were very busy, therefore that contributed to delay in filling the questionnaire on time. The study focused on the Senior Assistant Directors, Assistant Directors, Head of Departments, Head of Units, Senior Managers and Middle level managers who have been trained on leadership that left out other staff and external customers who could have given their inputs on the study. The questionnaire was subjected to the respondents' understandings and honesty in responding to all the questions and some were finding it a bother to fill the questionnaire. Due to limited time and resource constraint, the research study focused on KNH while it could have been extended to other hospitals.

5.7 Suggestion for Further Studies

The study was done at Kenyatta National hospital. The purpose of the study was to identify the leadership development strategies that were adopted and implemented at KNH and to establish its effects on service delivery. The researcher recommends that similar studies should be replicated in other hospitals in the country. This study focused on the effects leadership development strategies on service delivery based on internal customers, who were service providers. Therefore, a similar study is required to establish the effects of leadership development strategies on service delivery from external customers, who are service recipients.

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APPENDICES

Appendix I: Introduction Letter



UNIVERSITY OF NAIROBI SCHOOL OF BUSINESS MBA PROGRAMME

Telephone: 020-2059162 Telegrams: "Varsity", Nairobi Telex: 22095 Varsity P.O. Box 30197 Nairobi, Kenya

DATE 27 8 2015

TO WHOM IT MAY CONCERN

The bearer of this letter JOSCPH KORIR KOSGEI Registration No. Db1 71263 2014

is a bona fide continuing student in the Master of Business Administration (MBA) degree program in this University.

He/she is required to submit as part of his/her coursework assessment a research project report on a management problem. We would like the students to do their projects on real problems affecting firms in Kenya. We would, therefore, appreciate your assistance to enable him/her collect data in your organization.

The results of the report will be used solely for academic purposes and a copy of the same will be availed to the interviewed organizations on request.

Thank you.



Appendix II: Questionnaire

EFFECTS OF LEADERSHIP DEVELOPMENT STRATEGIES ON SERVICE DELIVERY AT KENYATTA NATIONAL HOSPITAL

The purpose of this research is to get feedback on the effects of leadership development strategies on service delivery at KNH. The outcome of this study will benefit the Kenyatta National Hospital and its clients in terms of identifying areas in leadership development strategies that are critical in service delivery. The information provided will be confidential and used only for this research. Please kindly give your sincere and honest opinion. Date (Day/Month/Year)....../2015

	Gender	Please tick where applicable
1	Male	
	Female	
	Age	Please tick where applicable
2	30 and below	
	Between 31 to 40	
	Between 41 to 50	
	Above 51	
	Highest Education level attained	Please tick where applicable
3	PhD	
	Masters	
	Undergraduate	
	Diploma & Certificate	
	Period worked as a leaders	Please tick where applicable
4	Below 5 years	
	Between 6 to 10 years	
	Above 11 years	
	Your level in management	Please tick where applicable
5	Top Management	
	Senior Management	
	Middle Management	
	Junior Management	

SECTION I: BIOGRAPHIC DATA

6. Your department/division_____

SECTION II: LEADERSHIP DEVELOPMENT STRATEGIES

Please indicate your level of agreement with each of the following parameters

	Please tick the	Strongly	Disagree	Neutral	Agree	Strongly
	appropriate column on a 5 point scale	disagree				agree
	e point scure	1	2	3	4	5
7	I have understanding of the vision of KNH					
8	I have understanding of the mission of KNH					
9	I have understanding of the leadership development strategies of KNH					
10	I provide input to my departmental leadership development strategies					
11	I am committed to overcome challenges at work place using challenge model skills					
12	I understand how my work directly contributes to the overall service delivery					
13	My job makes good use of my leadership skills					
14	I am committed to achieve targets in my personal performance contract					
15	I am committed to mentor and coach other employees/staff supervising					
16	Service delivery is a top priority of leadership development strategies of KNH					
17	Our senior leaders demonstrate strong leadership skills					
18	Customer satisfaction is a top priority of leadership development strategies of KNH					
19	Turnaround time at service point is a top priority of leadership development strategies of KNH					
20	Work environment satisfaction is a top priority					

	of leadership development strategies of KNH			
21	Leadership commitment on patient care is a top priority of leadership development strategies of KNH			
22	Employees development is a top priority of leadership development strategies of KNH			

Elements of Leadership development strategies

Please indicate your level of agreement with each of the following strategies

	Please tick the appropriate	Strongly	Disagree	Neutral	Agree	Strongly
	column on a 5 point scale	disagree				agree
	Do KNH leadership	1	2	3	4	5
	development strategies include					
	the following elements?					
23	In person classroom training					
24	Coaching & mentoring					
25	On the job training					
26	Managers Seminars/workshops					
27	Involvement in decision making-					
	challenge model					
28	Leadership development program					
29	Talent development					
30	Strategic leadership development					
31	Communication skills					
32	Customer care					
33	Team building					
34	Gemba Kaizen					
35	Leading & managing practices					

36. In the space provided below, please suggest specific areas of leadership development strategies that have been adopted and implemented at KNH?

SECTION III: SERVICE DELIVERY

Please indicate your level of agreement with each of the following effects of leadership development strategies on service delivery at KNH.

	(Please tick the appropriate column on appoint a 5 point scale)	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree
	KNH leadership development strategies has contributed to an improvement in the following:	1	2	3	4	5
37	Turnaround time at service delivery points					
38	General customer satisfaction					
39	Work performance in performance contracting					
40	Work environment satisfaction at service delivery					
41	Leaders' commitment in service delivery					
42	Communication to customers & stakeholders					
43	Provision & allocation of resources to service delivery					
44	Revenue generation					
45	Information system/ICT networking at service points					
46	Provision of medical equipment's					

Characteristics of good service delivery

Please indicate your level of agreement with each of the following parameters

	(Please tick the appropriate column on appoint a 5 point scale)	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree
	To what extent are you satisfied with	1	2	3	4	5
47	A comprehensive range of health services is provided, appropriate to the needs of KNH Customers					
48	Services are directly and permanently accessible					
49	Service delivery is designed so					

	that all people in a defined target population are covered,			
50	Service delivery is organized to provide an individual with continuity of care across the network of services			
51	Health services are of high quality			
52	Services are organized around the person, not the disease or the financing			
53	divisional/departmental health service networks are actively coordinated, across types of provider			
54	Accountability and efficiency of resources			

55. How would you rate overall service delivery at KNH as result of adopting and implementing Leadership development strategies. Please tick appropriately.

Excellent	[]
Very Good	[]
Good	[]
Fair	[]
Poor	[]

56. In your words can you list the effect(s) of leadership development strategy on service delivery at your department/KNH?

THANK YOU