



INFLUENCE OF STRATEGIC EMPLOYEE VOICE ON EMPLOYEE PERFORMANCE IN THE HEALTH SECTOR IN KENYA

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ABSTRACT

The Health Sector in Kenya is ranked as one of the major basic needs and as one of the pillars of vision 2030 as well as the constitution. High priority is placed on the provision of health services and service delivery. County governments have been given mandate by devolution to come up with models and designs which suits unique structures in their health sector. The main objective of the study was to investigate the influence of Strategic Employee Voice on employee performance in the health sector in Kenya. The goal setting and human capital theories were used to guide the study. The study used descriptive research survey and adopted cross-sectional survey research design. The study targeted all permanent employees of ranks of senior management, middle management, lower management and general staff in the health sector (hospitals). A target population of 1428 from which a sample of 146 was taken was used. A simple random sampling was used in selecting the public hospitals for the study. Both primary and secondary data methods were used. Data was collected using questionnaires and interview schedules. Data was analyzed using The Statistical Package for Social Sciences (SPSS) version 22 and presented in tables and pie-charts. Findings for the study indicated that strategic employee voice influenced employee performance in the health sector in Kenya. From the study findings, the researcher recommends the use, implementation and sensitization of strategic employee voice contingent to the health sector that will steer up employee performance. The researcher suggested a study to be carried out in both public and private hospitals to generalise the influence of employee performance. And also that evaluation of external factors that influence employee performance in the health sector be carried out.

Key Words: Strategic Employee Voice, Employee Performance, Health Sector in Kenya

Background of the Study

By nature, Strategic Human Resource Management implies a managerial orientation which ensures that human resources are employed in a manner conducive to the attainment of organizational goals and objectives. The concept of Strategic Human Resource Management (SHRM) evolved in the 1990s with an increased emphasis on a proactive, integrative and value-driven approach to human resource management. (Schuler, 2007). It is influenced by the global competition, and the corresponding search for sources of sustainable competitive advantage, and has achieved its prominence because it provides a means by which firms can enhance the competitiveness and promote managerial efficiency and effectiveness through employee performance in the organization.

Strategic HRM focuses on several issues including the fit between human resource management practices and organizational strategic goals, the integration of human resource management in an organizational strategic management, the involvement of human resource function in senior management teams, the devolvement of human resource practices to line managers and taking a strategic approach to employee selection and recruitment, strategic training and development, strategic compensation or reward, performance reward, employee voice mechanism, welfare practices and performance appraisal and the value that is added to the organizational performance by the Human resource management (Dessler, 2013).

Ongoing analysis that is in the SHRM generally looks at the way human resource (HR) adds strategic value and contribute to both employee performance and organizational performance. It is a strategy that sees people as a key resource and a critical element in an organization. Strategic human resource implies that by integrating HRM with the organization's strategy and by applying particular sets of human resource (HR) practices,

employees will be managed more effectively hence individual performance will improve, giving way to a firm's success (Farnham, 2010). Strategy highlights the need for determination of long-term goals of an organization, the undertaking of causes of action and the allocation of resources necessary for carrying out these goals (Armstrong, 2009). According to Oladipo, (2011), the scholar posits that in the hyper-competitive global business field, organizations and stakeholders are demanding that all functional areas within it, including human resource function, clearly demonstrate their contribution to performance and ensure that a firm's human capital contributes to the achievement of its business objectives through employee performance. In this case, SHRM does facilitate the development of a human capital that meets the requirements of organizational strategy, so that its goals and mission are achieved (Guest, 2007). Employees that are developed for example through various training programmes, improve their skills and abilities, feel motivated and perform better in their tasks in any given organization.

According to Armstrong & Baron, (2008), people and their collective skills, abilities and experience, together with their ability to use these in the interests of the organization that has engaged them improve individual performance and that of the entire organization. The practices of SHRM such as employee voice are concerned with how people are employed and managed in organizations in order to realise organization's targets through effective employee performance. Strategic employee voice assists in employee participation and involvement in decision making and the health sector unions being given voice to represent the workers adequately.

Globally, for example in the USA, recruitment and selection in their devolved health sector is redesigned to incorporate new administrative responsibilities, qualifications, skills requirements and resource available at different levels of the

devolution system. In Brazil, an important federally supported primary healthcare program specifically retains many staffing concerns for instance, composition of teams, personnel job description even while program implementation has been devolved to the Municipal level. This design was done to ensure that the local implementation met national objectives as well as to avoid political interference, Frederico *et al* (2009) China also has difficulties in transferring staff members between local government units endowed with devolved human resource powers. Devolved health care can also increase or even create horizontal inequities among personnel. According to Lui (2007), staff members in China and Philippines who perform similar jobs are paid differently because some continue to be administered by the central government while others are paid by the local government. The health sector has been undergoing tremendous transformation globally. Health sector reform is a process that seeks major changes in national health policies, programmes and practices through changes in priorities, law, regulations organizational structure whose main aim is improve quality and efficiency of employees and service (World Bank 2012).

At the regional level, for example in Tanzania, devolution especially that of the human resource is positively associated with quality of health care. The recruitment and selection procedures for Junior staff fall under districts while the senior management are handled centrally (Rahman, 2013). Even though recruitment and contracting procedures have been decentralized in Tanzania to the district level especially for lower cadre, the recruitment and selection have remained lengthy coupled with delays. According to Milga, (2009), when analyzed, the degree of devolution in government and NGO health care facilities, measured against ability to fire personnel, set salary scales, pay workers from local resources. It was found that devolution was associated with

better quality of care including health education, client responsiveness, clinical and diagnostic procedures. In Ethiopia devolution of health care was introduced in 1996 and seen as the primary strategy to improve health service delivery. It formed part of a broader devolution strategy across different sectors of which healthcare was one. Devolution first took place at regional level and was further extended to the district, or *Woreda*, level in 2002.

Locally, health in Kenya is ranked as one of the major basic needs which the government of Kenya has tried to meet its demand for many decades now. As one of the pillars of vision 2030 in Kenya, as well as the new constitution, high priority is placed to the provision of health services in Kenya. Further the constitution under the Bill of Rights states that access to healthcare is a right to every Kenyan. The healthcare sector is trying to fulfil the expectations of Kenyans through various strategic interventions such as infrastructure and service delivery (MOH, 2013). The mission of the government of Kenya has been to improve both preventive and curative health services to enable Kenyans to engage in productive nation building activities. Employee performance is a core concept within work and organizational psychology. It is a multidimensional and dynamic concept. It is a term synonymous with human resources and it is all about performance of employees in a given organization and the level at which the employees perform their work. It has to do with all the job activities expected of an employee and how well those activities are carried out, (Kavoo-Linge, *et al.*, 2013). Employee performance is also viewed at in terms of outcomes, as well as in terms of behaviour (Armstrong, 2009). According to (Kenney *et al.* 2003) employee's performance is measured against the performance standards set by the organization. These could be productivity, efficiency, effectiveness, and quality and profitability measures and customer feedback.

Effectiveness is the ability of employees to meet the desired objectives or target (Stoner, 2006). Quality is the characteristic of products or services that bear an ability to satisfy the stated or implied needs (Armstrong 2009).

Statement of the Problem

HR function is the backbone of the health sector in Kenya, as it introduces new ideas, new voices and strategic processes, and hence it achieve its objective without the strategic management of its Human resource, (Njoroge *et al*, 2015). Health in Kenya is ranked as one of the major basic needs which the government of Kenya has tried to meet its demand for decades. As one of the pillars of vision 2030 in Kenya, as well as the new constitution, high priority is placed on the provision of health services and health professionals are the life giving force. In the devolved government, the Health Policy 2012-2030 provides guidance to the health sector in terms of identifying and outlining the key activities in achieving the government's health sector goals. This policy is aligned to global health commitments MDG and the Constitution of Kenya. Yet since the devolvement of health sector in 2013, there has been very little to show on its implications and service delivery. There is evidence that the employees in the health sector are shrinking thereby affecting the service delivery (GoK, (2014). Employee unrest has been witnessed that affects employee performance. The stakeholders concerned together with county and national governments seem to be doing very little to arrest the situation notwithstanding the fact that if not arrested quickly it could jeopardize employee performance and service delivery.

The WHO report of (2012) indicated that the performance of health sector in Kenya was below 50%. Poor employee performance in the hospitals has been witnessed by unsatisfied staff, lack of promotion, poor working conditions, imposition of unqualified officers, lack of drugs and

equipment, skill mismatch and low staffing levels, unfairness; HRH strategic plan 2009-2012. A report by (KMPPDU November, 2015), cites same issues in addition to lack of qualified staff, mistreatment by county executives and high turnover of qualified, talented staff.

This could be attributed to the previous centralized government structures where most of the employees were obtained. It could also be attributed to expectation of the public that decentralized system or county governments will improve service delivery, Nyanjom (2011).

Anecdotally, Kenyan health workers report that they are stretched dangerously thin as they deal with higher patient loads and increasingly complex cases. These challenges are largely attributable to unfavorable policies at both the macro-economic and the human resource management levels they could also be attributed to failure to de-link the ministries responsible of health from service delivery.

Kamuri (2010) carried out a study on the challenges facing the implementation of outsourcing strategy at the KNH. And Muchomba (2013) investigated the influence of devolved governance on performance of the health sector where he looked at leadership style, technology, devolved procurement and regulatory framework as his variables. None of these studies have been carried out to determine the influence of strategic employee voice on employee performance in the devolved Health Sector in Kenya. This study was therefore ideal and it aimed to fill the gap.

Objective of the Study

The objective of the study was to investigate the influence of Strategic Employee Voice on employee performance in the Health Sector in Kenya.

Study Hypothesis

The study was guided by the following research hypothesis: Strategic Employee voice has

a positive significant influence on performance of employees in the health Sector in Kenya.

LITERATURE REVIEW

This chapter looked at the influence of strategic employee voice on employee performance in devolved health sector in Kenya. This information aimed at addressing the missing gaps.

Theoretical Framework

This study focused on Goal setting and Human Capital theories.

Goal Setting Theory

The theory was advanced by (Latham & Locke, 2002); they emphasized goal setting and encouragement of decision rights or employee voice as a basis for employee performance. According to (Kagaari, 2010), taking responsibility for results require that organizational members are given the opportunity to influence their results favourably and have the freedom to take action. This implies that people have to be authorized by their managers to independently and swiftly take action on problems without having to ask for permission first.

According to Armstrong (2009), employees are most likely to meet or exceed performance goals when they are empowered with the authority to make decisions and solve problems related to results for which they are accountable. Voice allows greater involvement of employees in deciding on issues that affect their work, (Locke & Latham, 2002). This then implies that workers have a say in defining the right Key Performance Indicators (KPIs) and the mandate to establish Critical Success Factors (CSFs) in relation to their job responsibilities.

According to Mesh, *et al* (2007), employee involvement in decision making sometimes referred to as participative decision making (PDM) is concerned with shared decision making in the work situation. According to Hewitt (2002), there are certain individual contingency factors which

may support participative decision making. For example, when the sets of choices are clear and employees show greater desire for job involvements, it is healthier to let them participate in the decision making process. Participative decision making in organizations may also be necessary when developing greater individual responsibility. An organization's performance goals represent a shared responsibility among all its employees each of whom has a stake in the organization's success. According to Kagaari *et al* (2010), goal clarity and participation have been shown to contribute to higher levels of motivation to achieve managed performance provided managers accept those targets. Management by objectives (MBO) is a method that is frequently used by managers as a product of goal setting, and employees are allowed to participate in setting their goals. Goals specificity, participation in decision making and explicit time period and performance feedback are common ingredients of MBO programs and this advocates employee participation in goal setting, (Kubaison, *et al*, 2014). A critical challenge for County Governments is ensuring that this shared responsibility does not become an unfulfilled responsibility.

The contributions of individual and teams through team based participation schemes in organizations are a starting point for enumerating the results for which they are accountable (Armstrong, 2009). The study established that goal setting theory was important in supporting employee voice and specifically employee participation and involvement. It was also established that the theory was most appropriate especially where the county senior managers involved employees in the strategic decisions like recruitment and selection, reward and compensation systems and training practices activities before implementation (Mitchell, 2007). This motivated workers since they simply implemented their own decisions.

The concept of participation is embedded in the constitution of Kenya of which counties are expected to involve its members in this area. The study established that counties which involved its staff in decision making processes tapped fresh and new ideas that helped employees perform better (Juan, *et al*, 2007). Counties that employed direct participation in the form of attitude surveys, problem solving and quality circles or semi-autonomous teams that made recommendations to the top management in the county government, motivated employees. For example some departments in the hospital were given autonomy to come up with new ideas on how to run the hospital and passed their ideas to the top management in the county hospital. This worked very well.

They set their own goals on what they wanted achieved, passed new ideas to the top management that adopted them. This gave motivated staff in the said departments and zeal to perform better. County governments have their mission statements, objectives and goals that guide them on where they should go and what they want to achieve. Most County Governments have drawn up their Medium Term County Fiscal Strategy Papers for the next three years MTCSFSP 2014-2017. There are set goals and targets in this Fiscal Paper that give the county direction on where they should go and what to achieve and how to achieve them. Therefore goal setting theory is very relevant to the county governments in Kenya. Despite the benefits of goal setting, there are a few limitations of the goal-setting Process (Locke & Latham, 2002).

First, combining goals with monetary rewards motivates many organization members to establish easy rather than difficult goals. Critics of this theory indicate that organization members might have negotiated goals with their supervisor that they have already completed. Second, goal setting focuses on organization members on a narrow subset of measurable performance

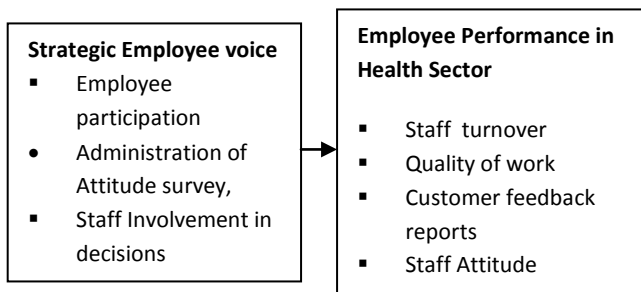
indicators while ignoring aspects of job performance that are difficult to measure. The adage "*What gets measured is what gets done*" applies here. Third, setting performance goals is effective in established jobs, but it may not be effective when organization members are learning a new, complex job.

Human Capital Theory

This theory states that people possess innate abilities, behaviours and personal energy and these elements make up the human capital they bring to their work (Davenport 1999). The theory says that it is the knowledge, skills and abilities of individuals that create value. As a result, focus has to be on the means of attracting, retaining and developing human capital. According to Armstrong (2010), individuals generate, retain and use knowledge and create intellectual capital. The individual's knowledge is then enhanced by the interactions between them i.e. social capital and generates institutionalized knowledge that organizations possess. According to Armstrong (2010), human capital theory sees people as assets and that organizations that invest in people improve employee performance and this generates positive results to the organization. Block (1990) has argued that Human Capital Theory is a poor concept of capital. It is unable to understand human activity other than as the exchange of commodities and the notion of capital employed is purely a quantitative one. This misses the point that capital is an independent social force where the creation of value comes about through its capital accumulation. Given this explanation then, human capital is an abstract form of labour – a commodity and not capital. Another criticism argued is based on the assumption that education improves productivity and thus could explain higher wages. The theorists here did not take into account the transfer of learning. Does the duration of education and training increase productivity? A higher productivity indeed does not increase the

wages. But many other factors could influence productivity. The pay could depend on the industry, while wages differ in different regions and in some organizations, and unions regulate pay system. In linking this theory to the devolved health sector in Kenya, the study notes that the Human resource for Health (HRH) is a key resource for the health sector and in the hospitals. The theory confirms that knowledge, skills and abilities of individuals create value. As a result, focus has to be on the means of attracting, retaining and developing human capital. Doctors, Nurses, Clinical Officers, laboratory technicians, information technology and general health workers and administrators have the knowledge and skills that need to be developed because these abilities and skills adds value to the entire health sector.

Conceptual Framework



Independent Variables

Dependent Variable

Fig. 1 Conceptual framework

Review of Literature

Strategic Employee Voice and employee performance

Employee voice is increasingly important in the modern workplace. Having a voice is crucial for organizations and much as for the employee. Voice is one of the enablers of employee engagement and it can significantly impact Employee performance. But employee voice remains both little understood as a concept and under-utilised in the world of work, (Anyango, 2013). The term “employee voice” elicits different

understanding to both scholars and practitioners of human resource management. According to (Boxall & Purcell, 2011), Employee voice covers all types of opportunities where employee can have their say and exert some influence over work place decisions and speaking up on important issues, in an organization.

According to Gonzalez (2009) give different definitions of employee voice; first, the expression of individual dissatisfaction raised with line managers or through grievance procedure; secondly, as the expression of collective dissatisfaction raised by trade unions through collective bargaining or industrial action; thirdly, contribution to management decision making process through upward communication, problem solving, suggestion schemes and attitude surveys; and lastly, through mutual partnership agreements, joint consultative committees and work councils. According to Morrison (2011), employee voice is discretionary communication of ideas, suggestions, concerns, or opinions about work-related issues with the intent to improve employee performance and successful organization. While (Armstrong, 2009) understands voice as a say that employees have at work comprising of involvement, participation, problem solving and communication.

According to Anyango (2013), employee voice is a way of making employees an integral part in the organization and it has a direct bearing on their performance. According to Stueart and Moran (2007), treating employees as stakeholders in the organization bears similar outcomes of improvement in performance. Employees who have developed significant firm-specific human capital have invested in the organization and therefore have earned voice just as shareholders. Providing voice to these employees provides a rationale for further emotional and human capital investment, which impacts positively on their performance. Furthermore there is perceived linkage between employee voice and job satisfaction in their performance, (Morrison,

2011). According to Mueller (2012), employee voice in organizations impacts on quality and productivity of employees and inhibits issues that might explode. The degree to which employee voice is embedded in an organization is more important than reporting collective schemes. According to Machington *et al.* (2012), it is important that the degree and extent of voice of employees within an organization be known as it is believed to have an effect on their performance.

Voice mechanisms in organizations differ just as they are captured in definitions of voice. According to (Hall *et al.*, 2013) employee voice can take the form of joint consultation which involves managers and employee representatives meeting on a regular basis in order to exchange views, make good use of members' knowledge and expertise and deal with matters of common interest. According to Mesh *et al.* (2007), trade unions provide workers with a collective voice in order to make their wishes known to the management of the organization. (McCabe *et al.*, 2008) brings to fore major areas that trade unions handle.

These are matters relating to work environment which comprises staffing of employees, overtime and general working condition of the employees. Others are matters relating to pay such as inequitable pay, inadequate benefits and non-competitive pay. Unions also handle matters that deal with employee treatment at the work place such as unfair discipline, harassment and abusive treatment, job insecurity and lack of response to complaints. Lastly, unions address matters to do with management style such as fear, intimidation of employees, and lack of recognition in decision making process.

Trade Unions have two major roles (Armstrong, 2009), namely to secure improved terms and conditions for their members and to provide protection, support and advice to their members as individual employees. The other roles include providing legal and financial services to members

whenever appropriate, (McCabe, 2008). This voice exhibited in trade unions enhances employee performance by bringing a conducive working environment within an organization. According to Bernardin (2008), unions offer a voice to employees which can be used to develop rules that govern them.

Employees normally find it necessary to form unions based on benefits and services that they offer to them. According to (Bernadian 2008) unions achieve better wages for members, benefits and improved working conditions and this would mean that members in a union are more satisfied than non-union members. According to (Armstrong, (2009), management must believe and must be seen involving employees. Employee voice can also be determined through attitude surveys according to (Armstrong, 2009).

Attitude survey is a way of getting information on preferences of employees and comparing commitment and morale in different parts of the organization. Attitude surveys examine a variety of attitudes and behaviours, such as beliefs, opinions, values expectations and satisfaction. Surveys can be done through interviews, use of structured questionnaires, combination of questionnaires and interviews and also through focus groups (Gonzalez, 2009). Attitude surveys are also used to provide information on the preferences of employees, give warnings of potential problem areas, and diagnose causes of problems and to compare levels of job satisfaction.

Exploring the employee attitudes at work is important in creating an environment that is conducive for employee motivation and this translates to positive performance, (Kubaison *et al.*, 2015). Suggestion schemes which are another mode of voice are established procedures for employees to submit ideas to management with tangible recognition for those suggestions with merit, (Armstrong, 2009). They are known to reduce feelings of frustration where employees

feel they have good ideas that are not recognized in the formal channel of communication. Organizations however should have a committee to vet suggestions so as to pick only what is appropriate.

Participation is demonstrated when an employee plays a greater role in the decision making process by management giving employees the opportunity to influence management decisions and also to contribute to the improvement of organizational performance (Kagaari, 2013). Involvement, on the other hand is when management allows employees to discuss issues that affect them in order to enhance organizational commitment. Employee participation allows workers to put some influence over their work and the conditions under which they work, (Biswas, 2007).

Direct participation may take place in self – determination, and goal setting plans by individuals, while at departmental level employees are formed into quality circles, and work in groups. At the organizational level, use of dialogue conference where employees are invited to offer their input to the planning and realization of the organization's strategy is widely used. Indirect participation can be in form of unions where employees are represented (Juan, *et al*, 2007). Employee participation is one of the key pillars that are used to strengthen and enhance both the employee and the organization (PSCGT,2002)- Private Sector Corporate Governance Trust, 2002).

According to (Kubaison, 2015) most common forms of direct participation include employee attitude surveys, problem solving groups' quality circles and decision making work teams. New forms of participation like briefing groups, suggestion schemes are embedded in a term employee involvement or employee empowerment (Biswas, 2007). Employee voice can also be through communication channels within an organization (Juan *et al.*, 2007). Upward communication channels within organization provide avenues through which employees can

express their views to management. The conceptualization mode of participation which particularly identifies all the relevant aspects of voice is cited by (Armstrong, 2009).

This is done through four factors i.e. The degree of involvement, the scope of decisions open to influence by workers, the level at which workers (or their representatives) are involved in management decisions, (Sheehan 2009) and the different forms of voice. This model captures all important aspects in employee voice. Several studies carried in UK, Australia and Canada reveals several ways of how employee voice is expressed; voice as communication and exchange of ideas.

Through collective consultation processes, upward problem solving which is an opportunity for employees to provide feedback on specific topics or issues but not as a dialogue but as a way of providing ideas to increase employee performance in the organization, (Ojukuku *et al.*, 2014). According to studies carried out by (McDuffie & Pil, 2010), revealed that allowing employees to participate in decision making led to increase in motivation, and job performance. Studies reviewed by Ojukuku *et al.*, (2014), show evidence that employee participation in decision making should be recognised as a managerial tool for improving their performance. This can be achieved by letting employees' input in developing the mission statement, establishing policies and procedures, pay determination, matters to do with promotion and even matters concerning employee benefits.

The study established that Kenya Medical Practitioners Pharmacists and Dentists Union (KMPPDU was the major voice that the health employees use to voice their concerns or grievances. The study also established that health workers in the county hospitals are members of KMPPDU which is the main union. It was also established that the union had voiced a lot of concerns of challenges that the health workers faced. The union had also put in place structures

like signing of CBAs which when honoured improve employee performance.

Employee Performance

According to Armstrong (2010), performance is both behaviours and results. Behaviours emanate from the performer and transform performance from abstraction to action. Not just the instruments for results, but behaviours are also outcomes in their own right, the product of mental and physical effort applied to tasks. Employee performance comprises of actual results of an employee as measured against its intended goal (Cheruiyot *et al*, 2013). According to (Kenney, 2007), employee's performance is measured against the performance standards set by the organization.

In every organization there are some expectations from the employees with respect to their performance. And when they perform up to the set standards and goals and meet organizational expectations, they are believed to be good performers. This means that effective administration and presentation of employee's task which reflect the quality desired by the organization can also be termed as performance. According to (Dessler 2011), employee performance is an individual measurable behaviour which is relevant for organizational goal achievement. Employee performance goes beyond the individual factors that include external factors such as reward motivation and work environment. Their performance is measured under four dimensions; quality, quantity, dependability and work knowledge, (Mazin 2010). According to Cole, (2008), employee's performance is measured against the performance standards set by the organization. Performance is the achievement of specified task measured against predetermined or set standards of accuracy, completeness, cost and speed. According to Apiah *et al*, (2010), an employee's performance is determined during job performance reviews. Contextual performance

refers to activities which do not contribute to the technical core but which support the organizational, social and psychological environment in which organizational goals are pursued, (Lovell, 2009). Contextual performance is predicted by other individual variables. They include behaviours which establish the organizational social and psychological context and help employees to perform their core technical or task activities (Buchman *et al*, 2007). Low performance and not achieving the set goals might be experienced as dissatisfying or even as a personal failure. High performers get promoted more easily within an organization and generally have better career opportunities than lower performance Sabwami,(2014). The study by (Baloch *et al*, 2010), measured the impact of three HR Practices which were Reward and compensation practices, training practises and performance evaluation practice on perceived employee performance. The results of correlation indicated a significant relationship between these practices and employee performance.

And with the trend of growing globalization, coupled with the uncertainty that clouds the global economic improvement in productivity and performances of employees, this study established that county hospitals needed employees who were equipped with skills, knowledge and competencies and right qualifications for the execution of their strategies and planning, (Ismail, *et al.*, 2014). Their survival were contingent upon highly productive employees, (Ismail, *et al*, 2014), and the county hospital's ability to fore know their hospital needs, health worker's needs especially high performing ones could gain them a competitive advantage, (Majid, 2015).

Empirical Review

In his study, Singh (2004) investigated the relationship between six HRM practices and firm level performance in India. 359 firms were drawn from firms listed in the Centre for Monitoring

Indian Economy (CMIE) database. Of these 359 firms, 82 responded positively to the survey. Using regression and correlation analysis, the study found significant relationship between the two HR practices, namely, training and compensation, and perceived employee performance that led to market performance of firms. A study by Waiganjo, *et al*, (2013), using multiple regression analysis, data was analyzed from 210 organizations across 12 key industrial subsectors in the Manufacturing sector in Kenya.

The study sought to determine whether competitive strategies had any relationship between SHRM and firm performance of corporate organizations in Kenya. The study established that, selective resourcing, incentives, extensive training, information sharing and use of teams and decentralization had a positive influence on the performance in the Manufacturing industry. Further competitive strategies; cost lead HR strategy, had no moderating effect on the relationship between SHRM and performance while quality lead HR strategy and innovation had influence on relationship between SHRM and performance.

A study by Eshun and Duah (2011) carried out to ascertain whether rewards motivated employees, to identify what kind of rewards employees considered most beneficial and to discuss the dilemmas and difficulties managers faced in applying AMO Theory to workplace. The study analyzed 20 interviews with people in various positions and organizations in the Accra and Tema Municipalities of the Greater Accra Region, Ghana. It was found out that while the use of rewards was important in motivating employees, there was need for management and employees to have a clear understanding of the human nature and what actually motivated employees. In a study carried out by Atambo (2012), investigations were carried out on the relationship between employee recognition and individual performance at Kenyatta National Hospital, using

cross-sectional survey design to obtain data on a target population of forty (40) different cadres of staff. Data was collected using a survey questionnaire and statistically analyzed using SPSS. The study established that career advancement opportunities, compensation and recognition strategies translated in improved employee performance.

In a study carried out by Alam *et al*, (2013) on SHRM Practices and its impact on Employee Performance, of Cement Industry in Bangladesh, India. The researchers investigated the impact of various components of SHRM practices on Employee Performance; a sample of 160 employees from seven companies listed in Dhaka Stock Exchange was used. Data was analyzed by a regression analyses and the result showed that training, compensation and employee participation had a positive impact on employee performance.

Moreover, work life balance improved the quality of service in the cement industry. In another study, Gray and Shasky (2007), also using multiple regression analysis examined the impact of strategic HRM practices on the performance of state Governments agencies. The results showed that when organizations employed such personnel practices as internal career ladders, formal training system, result-oriented performance appraisal, employment security, employee voice and performance-based compensation, they were more able to achieve their organizational goals and objectives. Using a stratified random sampling by industry, Kai *et al*, (2007) surveyed 231 firms listed on the Australian stock Exchange (ASE).

The researcher used descriptive statistics and correlation analysis. The results indicated that strategic integration and development of HRM practices were practiced to a moderate extent in the firms sampled. The degree of alignment of HRM with business objectives and strategies had a positive relationship with perceived employee performance. In a study on the status of strategic

human capital management in County Government by (Sowa *et al*, 2012) in North Carolina.

The study sought to interview HR directors from six counties in New York and North Carolina. It sought to find out if SHRM practices were being implemented in the counties and the level of adoption and if the county governments engaged in the strategic practices for improvement of employee performance. Results showed that the adoption of the SHRM practices were ongoing and had a positive influence on the employee performance in the said counties.

RESEARCH METHODOLOGY

This chapter has discussed the systematic description of the various methodologies and techniques that were used in conducting the research. The study adopted cross-sectional survey research design. The study also utilized both quantitative and qualitative research approaches. The philosophy that guided the research was positivism philosophy. The target population for the study comprised of 1428 permanent employees of the four public county hospitals. They are Bungoma county hospital, Kajiado county hospital, Kangundo county hospital, and Kakamega county hospital. These consisted of the Senior Management that included the hospital superintendent, Middle management, lower management and general members of staff. The researcher sampled the respondents from four county public hospitals. The total number of respondents that were the source of sampling frame was 146. The sample size was drawn from the four (4) county public hospitals selected for the study. Simple random sampling and stratified techniques were used. The sample which was selected from Bungoma county hospital was 34, Kakamega county hospital 37, Kajiado county hospital 39 and Kangundo county hospital 36 respectively. A standardized questionnaire was developed that was used in the study. Interviews were used as a method of data

collection. The researcher obtained permission from JKUAT on approval of the proposal to proceed on data collection. The researcher also sought permission from the National Council for Science and Technology (NACOSTI Kenya), and also from the relevant county hospitals where the study was carried out. A pilot test was carried out with fourteen conveniently selected respondents from two hospitals that did not form part of the sample. The researcher used Cronbach's alpha coefficient to test the reliability of the questionnaire. Both descriptive and inferential statistical techniques were used to analyse the data. For the statistical model, the researcher used multiple linear regression models.

RESEARCH FINDINGS AND DISCUSSION

The chapter presents the research findings and results of the study. Out of a total of 146 questionnaires that were distributed to the sampled respondents, 131 of them were filled and returned. Of the returned questionnaires, 11 were incorrectly filled and therefore not used in the final analysis. According to the study findings, majority of the respondents were male 52.3% while female respondents were 47.5%. Majority of the respondents in the hospitals were between ages 30-40 year bracket representing a 55.0 %; 28.3% were below 30 years of age; 11.7% were more than 60 years of age and 5% were between age bracket of 50-60 years of age. Thus the highest were 55% while the least were 5%. This means that the sample used by the study was well distributed in terms of age and could therefore give reliable information. Based on the level of education, majority of the respondents had a university degree i.e. 85.8%; 10.0% had attained middle level college education and 4.2% had attained secondary. This showed that most of the respondents were knowledgeable and gave valid, reliable and more accurate response. Based on their working experience, majority of the respondents 56.7% had worked for the county hospital for between 5-10 years. Ideally when

combined, more than 85.2% had worked for the county hospital for more than 5 years and only 14.8 % had worked with the county hospital for less than 5 years. From the findings, the researcher concluded that majority of the respondents had enough experience with the hospitals' strategies and hence would provide valid and credible information with regard to strategic HRM practices and employee performance. On job titles, majority of the respondents 14.4% worked as nurses at the hospitals while the least were IT officers. This indicates the importance of nurses as they cut across all the departments or sections. In Kenya's health care system, health professionals are the life giving force the doctors, nurses, clinical officers, laboratory technicians and technologists, radiographers and radiologists, pharmacists, nutritionists and dieticians, dentists, health managers, and public health officers and technicians among others. The health workforce ensures patients can access needed preventive, diagnostic and curative services.

Strategic Employee Voice

According to study findings; majority of the respondents 86% indicated that the county hospital allows employees to participate and get involved in key decision making while 14% indicated they were not involved. From the study findings on average the work quality was 32.32% before the employees were allowed to participate and get involved in key decisions of the hospital, and 77.78 after they were allowed to participate in key decision at the hospital.

According to study findings; the respondents strongly disagreed that Hospital's employees were consulted by management before making decision on issues touching on them; they disagreed that Employees were involved in decision making. The respondents strongly disagreed that Employees usually voiced their issues in a conducive environment; they also disagreed that Employees

sat on several committees and participated in key decision making. Consequently the respondents disagreed that Employee attitude surveys were carried out annually; they also strongly disagreed that Suggestion boxes(schemes) were placed in central places for use by employees to contribute ideas for. The respondents strongly agreed that Hospital employees were members of medical trade union (KMDPU); they disagreed that the county management held regular meeting with its employees; further they disagreed that Employees were routinely administered with attitude surveys to identify and correct employee work performance problems.

From the study findings; 52.9% were of the opinion that top management support would improve employee performance, 31.0% were of the opinion that problem solving techniques and conflict resolution would improve employee participation and 16.1% responded that open communication between the management and employees would improve employee participation. Respondents also gave various methods that are used in the county hospitals. Of this, 46.5% agreed that quality surveys or circles were in place at the hospital; 24.4% responded on decision working teams and 29.1% responded on suggestion boxes.

Employee Performance

Majority of respondents of 95% disagreed that Staff turnover has decreased in their county hospital due to efficient use of human resource practices that motivate, attract and retain them in the hospital this; 0% respondents were undecided on if Employees in the hospital were leaving their jobs to look for greener pastures elsewhere. A total of 83% of respondents disagreed that the customer feedback reports indicated positive results about the employee's services while 82% of respondents disagreed that employees in the county hospital were satisfied with their day to day responsibilities and activities. A total of 83% of the respondents disagreed that employee's

attitude towards work had improved. A total of 79% disagreed that the quality of work provided by the employees in the hospital was exceptional. In addition, a total of 79% respondents disagreed that employees in the hospital provide efficient services to their customers and the customers were very happy about this exemplary service. A total of 86% also disagreed that they were satisfied with their job position and the responsibilities that they performed in their hospital.

Table 1: Coefficients for Strategic Employee Voice

Model		Unstandardized Coefficients		Standardized	t	Sig.
		B	Std. Error	Coefficients Beta		
1	(Constant)	3.080	.696		4.426	.000
	SEV	.894	.027	.951	33.562	.003

a. Dependent Variable: EP

From Table 1; the study revealed that Strategic Employee Voice had a significant influence on employee performance in County Hospitals in Kenya (t-statistic=33.562, p-value=0.003<0.05). Therefore at 5% level of significance the null hypothesis was not rejected, indicating that Strategic Employee Voice had a positive influence on employee performance in the health sector in Kenya. Again for every unit increase in Strategic Employee Voice there was a corresponding increase in employee performance by 0.894.

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

The study sought to establish the influence of strategic employee voice on employee performance in the health sector in Kenya. This chapter summarizes the findings and conclusions are drawn from the study.

Influence of Strategic Employee Voice and Employee Performance

The researcher used descriptive and inferential statistical methods to arrive at the findings. The study established that county hospitals allowed its

Testing of hypotheses

This section of the report provides information about testing of the research hypotheses. Where Strategic Employee Voice is SEV. The hypothesis is tested at 5% level of significance.

Hypothesis: Strategic Employee Voice and Employee Performance

Strategic Employee Voice has a positive significant influence in enhancing employee performance in the health sector in Kenya

employees to participate and get involved in some decision making at the hospitals. It was also established that county hospitals did not consult their employees before making key decision on issues touching them. It was also established that employees in county hospitals did not voice their issues and or matters concerning them in a conducive manner. The environment was hostile to them.

It was also established that employee attitude surveys were never carried out annually and that there were no suggestion boxes placed in key or strategic or central points for ease of access by employees. The study also established that most hospital employees were members of KMPDU. The county hospitals management were found not to hold regular meetings with its staff and that there was no administration of attitude survey to employees to elicit ideas from them. The study also established that there were no proper and intensive consultations and no work-councils where employees could participate fully. Management was very rigid and victimized especially union members who spoke up on key

issues concerning employees; this had led to constant strikes by health workers.

Conclusion

The study determined that strategic employee voice influenced employee performance in health sector in Kenya. It could therefore be concluded that employees in county hospitals did not voice their issues and on matters concerning them in a conducive manner and that the environment was hostile to them. The management are encouraged to have a conducive environment free from abuse to enable employee's air their views or issues. The views aired by employees could be beneficial to improvement of the hospital. Employees who aired their views especially displeasure views should not be victimized as some of the views emanate from frustration of work environment. It was also concluded that employees be encouraged to join their union – KMPPDU through which they can voice their voice collectively. Speaking up is very important as it reduces tension in employees. Speaking up also boosts organizational culture that encourages employees to do their work effectively and efficiently. New employees who adopt the culture of the organization gives the hospital a competitive advantage under a particular condition.

Recommendations

Strategic employee voice was found to be an influencing factor on employee performance in the health sector in Kenya. The study recommended that employee voice mechanisms should be put in place in the health sector to steer employee performance. According to Mueller (2012), employee voice in organizations impacts on quality and productivity of employees and inhibits issues that might explode. The degree to which employee voice is embedded in an organization is more important than reporting collective schemes. Suggestion schemes help employees to submit ideas to management with

tangible recognition for those suggestions with merit. They are known to reduce feelings of frustration where employees feel that they have good ideas that are not recognized in the formal channel of communication.

Participation is demonstrated when an employee plays a greater role in the decision making process by management giving employees the opportunity to influence management decisions and also to contribute to the improvement of organizational performance (Kagaari, 2013). Involvement, on the other hand is when management allows employees to discuss issues that affect them in order to enhance organizational commitment. Employee participation allows workers to put some influence over their work and the conditions under which they work, (Biswas, 2007). Therefore the management of the health sector should put in place the above recommendations that could improve employee performance greatly.

Areas for further Research

The researcher suggested further research to be conducted to investigate other factors which influence employee performance. Other scholars could also evaluate external factors that influence employee performance in the health sector in Kenya. A study could be carried out in both public and private hospitals to generalize what influence employee performance. The study established that the environment with which the health workers carried out their duties was wanting. The researcher noted that no study has been carried out on environmental factors that influence employee performance in the health sector. The researcher also noted that senior health workers like doctors, and hospital superintendents at the county hospitals are still under the National Government. This contributed to the poor performance of employees. A study could also be carried out to establish if health sectors has been completely devolved.

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